

Andrew Gilliver

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PARTICIPANT: My name is Andrew Gilliver, and I'm originally from Sheffield. I didn't really— think the first time I came to Manchester was in the late 80s? And proper— I think the proper rave scene was kicking in then. I read about it and then I felt a bit old, for that. But um, became aware of the gay scene around that time, the Gay Village and all that. And, studied in Liverpool from the late 80s, and then came to Manchester a lot because there wasn't really much happening in Liverpool at the time. And then moved here to live, in about 2004.

[00:00:49]

INTERVIEWER: Ok. What did you study in Liverpool?

PARTICIPANT: I studied theatre wardrobe.

[00:00:56]

INTERVIEWER: Really?

PARTICIPANT: So theatre costume, that kind of stuff.

[00:01:03]

INTERVIEWER: Ok. And you mentioned the gay scene in Manchester—

PARTICIPANT: Yep.

[00:01:07]

INTERVIEWER: —what was your impressions of it?

PARTICIPANT: Well at the time— I was a late-developer. I didn't really come out, as it were, certainly to myself until I was in my mid-20s, so I was a bit scared. Obviously being of the age g— growing up with the AIDS hysteria. I actually, one of my first jobs after leaving school was as an associate postman, and I remember in um, around the Christmas of '86, New Year '87, I— we had to deliver those "Don't Die of Ignorance" leaflets. We got paid a penny for every leaflet we delivered. So it was around that time of all the tombstones and all that. But before that I remember it was— because I was very, obviously, a gay, young person, and people used to just point at you in the street where I grew up and just go, "AIDS!" and that's really very alarming, and worrying, and when you're not even sure of your own sexual orientation— well you're pretty sure of your sexual orientation but you're fighting to do anything about it because you grew up in a community where you don't know any gay people, and the only people that there are, are people who are very effeminate or very camp, like I was, like I am. So you didn't find a safe place, but for everybody else, being in Sheffield, being in Yorkshire where it was, at the time it was kind of a rough place to be for being able to find a safe place. So I kind of wasn't ready to deal

with all that, because of the sexual orientation stuff, and the HIV and AIDS stuff, it was only really when I came to college that I found out that, "Oh, it's ok, no biggie", and then I started meeting, you know, boyfriends and all that kind of stuff and realised there was a whole world out there. But I was— it took me a long time, it took me... mid- to late-20s to really blossom.

[00:03:21]

INTERVIEWER: Ok. So, you mentioned some of the stigma that there was that you encountered at the personal level. Could you describe the atmosphere at the time, kind of, the social context, political context of the time?

PARTICIPANT: Yeah, well if, in the 80s— I mean, I'm early 50s now, so I'd left school in 1982, so about— when the time when I was, you know, a teenager, we were really becoming highly anxious about HIV and AIDS, and that's where there were a lot in the newspapers, a lot in the TV, even before the major 1987 tombstone ads. So everybody had the— so that's where the stigma was born really, because it was really affecting men who have sex with men. And obviously anybody who was perceived to be gay— it was, not only were you a target, because it was perceived that you were spreading— you were a filthy gay spreading this disease, but also it was a cheap laugh, it was easy to have a dig at somebody. And I remember distinctly walking down the road, and just people poin[ting]— there were just people outsi[de], and I didn't know these people, Just, I was walking down the road, and people in the window open the window and just shouted "AIDS" at me, and just laughed. And I— I made no sense of that, except that makes you even more terrified than you already are. So first of all you're terrified for the things that you're hearing on the news, and you're reading in the papers, and then when somebody kind of targets you and spots you as somebody who could be at risk of HIV and AIDS— and by then, I'd not even had a partner— it makes you really shaky. And I can laugh about it now because it's such a world away, it's more than 30 years ago, but the damage that it does to your confidence and your belief in your ability to live your life — when already you're testing the water and you're not seeing any positive role models and all that stuff — to be the butt of the joke, to realise that, oh, people realise that there's nothing down for you, and also if you do try and get in life, and try and get a partner, and try and find your way out, you're gonna die anyway, and no one's gonna care because it's just a big joke to them and they're better off rid of you. So that, all those kind of things, is going round in your head. So I knew I had to get out of where I lived. There was no problem with family or anything. I didn't come out to them because I wasn't sure, but I just knew I couldn't live in that kind of small town mentality. So that's why I needed to go to college and, like many gay people do, try and find a career where you were accepted, and my career was in theatre. [laughs] I couldn't be more theatrical. And then that's why it took me such a long time to find my place. So it wasn't until the very late 80s, early 90s that I kind of got going. But I, actually, in hindsight, if I'd have got going a bit earlier, I might not be here today.

[00:06:47]

INTERVIEWER: That's interesting. Yeah. You mentioned what you termed a hysteria.

PARTICIPANT: Yeah.

[00:06:56]

INTERVIEWER: Could you say a little bit more about your memories of the kind of press and the telly at that time?

PARTICIPANT: Well, well, well AIDS— if we're going back now to '87, '85, '86, or the mid-80s, AIDS was everywhere, you know. It was— it was— we were starting to see, this was a disease that was killing gay men. And that's— and so, so gay men were, you know, the enemy. Gay men were the carriers of the disease, as far as the media were concerned. "What are we going to do about all these gay men?" In America you'd got, obviously they'd become more aware of it earlier, when you got Reagan not wanting to do anything about it, and in this country we had a, we had Mrs. Thatcher's government. And, it just— the way— in a way, the way that Brexit's everywhere today, is the way, for a gay person, AIDS was everywhere. And even for somebody who had no relationships, at all, it was everywhere. So the fear of actually having a relationship with anybody, the fear of doing anything— and of course we had all that stuff about how you acquire HIV in the toilet seats, and all that nonsense. Because it was real craziness. It was absolute madness. It was, "Don't sip out of that person's cup, don't sit next to that person, you'll catch AIDS", so it was a daily occurrence, so you just could not escape it. Because it was tabloid stuff. It was real— you were tabloid fodder, you know, and not in a... not in a way that was good for your health.

[00:08:43]

INTERVIEWER: You've mentioned that— I'm just wondering, and it may be a question that we come back to, but in terms of the kind of psychological impact of that stigma, that hysteria, on gay people... I mean maybe it's a question that we can come back to later but I'm also interested by that, in terms of how, personally, but also in terms of the wider community, it— dealing with that kind of hysteria [missed] [00:09:13], what kinds of affects did that have?

PARTICIPANT: Well I didn't really have a sense of community because I grew up in a place where I was one of those "only gay in the village" scenarios, a cliché— I mean, real cliché stuff. Small town mentality. So I was, you know, hormones are raging and you're fancying boys but you can't do anything about it because A. you don't know how to, you don't know how to talk to people, you don't know how to form relationships, everybody's homophobic it seems in the society where you live. So it was the— it's really funny now, but a lot of older guys, I think particularly, will identify with this, with were you wanting an outlet for your sexual desire, it was porn. We had no internet, so the only thing you had were [laughs] The only thing you had were these underwear sections in the catalogues, you know, which just showed men's bodies in briefs. That was sexy. That was sexy sexy times. You know, "Ooh, the catalogue's over there, nobody's in, I'll just have a look at the undies section". That's how you got your kicks. And then when you realised there were gay magazines, like Mister and Him and, um, Vulcan— which I later appeared in [small laugh]. That was a way out of kind of owning your sexual orientation, but the magazines took— on the top shelf, to pluck up the courage to run into a book shop, a magazine shop, take a

magazine off the counter, hurriedly give your money to the assistant and run off again. Because it's— that's how you got— you satisfied your curiosity, you got your news, as well, but also it was— I had no contact with any other gay men. So, so that was it, for quite a long time.

And interestingly, I think, everything that happens in your formative years obviously shapes you, and I think that was an interesting thing for me because when I did decide to come out, I thought, "Actually I've had enough of this and I need to just live my own life", I was really interested in the models I saw in the magazines. And I ended up— I was younger then, and you know, relatively attractive, and I thought, "Well actually, I'll just be one". So I remember going down to— in the back of these gay magazines they always used to say, "If you're interested in being a model for us, you know, send a picture" and uh, all that, and I got a letter back saying, "Oh yeah, why don't you come down this day and we'll do a photo-shoot, and I thought, "Oh, fabulous". So that was my way of coming out, in a big way, and also, I think it was about— to myself, it was a kind of a release, but a kind of that, owning your sexuality and celebrating that.

But I thought I was gonna go down to London, and I thought I was gonna do this sexy shoot, and I thought I'd made loads of friends, and I'd be down there, and I'd get a new life. But I'd got— [laughs] this is 1988 and I got on the National Coach, and did the photo-shoot, and got paid £70 which wasn't bad, and went back on the coach the next day. Nothing happened, except it just, did the photo-shoot and gave you money, and then you went. I didn't— I wasn't introduced to this fabulous world, because that wasn't what they were doing. But in my head, I thought, "Oh that's it, that shou— that's your breakout."

[00:12:56]

INTERVIEWER: That's your ticket.

PARTICIPANT: But for me doing that was very liberating, and quite enjoyable. I'm still quite proud of that now. But uh, yeah, it was a bit extreme I guess, to get all your kit off and go, "Here I am". But yeah, that um.

[00:13:13]

INTERVIEWER: Great.

PARTICIPANT: It was an interesting time. [both laugh] But what I thought was gonna happen never happened, you know. You didn't a new circle of friends, I didn't get invited to parties, nobody knew who I was I just was fodder for the magazine which is what I was paid for, which is fine. But then I'd done it then, and I think it released something in me that helped me, personally come to terms with who I was. But even at 21, I remember going to speak to a— again, where did I get the information? At the back of the Gay Times or Him magazine, phoning somebody up and somebody, it was a counsellor arranging to meet me in a public place. And I thought you had to really admit your homosexuality, I thought you had to really go through some kind of programme to make sure you were gonna be ok. And I remember the— I was 21, and this guy said to me, "What are you worried about?"

The people that know about you, and your friends don't care. And the people that aren't interested, or the people that don't want to know you because of your perceived or actual sexual orientation, basically, you know, just ignore them." And that was a wakeup call for me, I think, because I'd never talked to anyone about actually how to deal with that oppression, how to deal with that rejection, how to deal with the society thing. So, A. going to speak to a counsellor at 21 and saying, "What's the big deal, it's no big deal, as long as you're alright", and then going down to London, getting my kit off, getting your pictures in a magazine. So I have no secrets, everything's there, ta-da, done. So that was a liberating thing to do, and I think that was the— I'd got rid of all that kind of hysteria.

But I didn't have my first boyfriend till I was actually, yeah, 24, and that would have been about '89, '90. Quite late, really.

[00:15:12]

INTERVIEWER: You mentioned the "Don't die of ignorance" campaign, and that you actually delivered some of the leaflets.

PARTICIPANT: Yeah, yeah!

[00:15:19]

INTERVIEWER: Could you tell us a bit about that, and what you remember of it?

PARTICIPANT: Yeah, at the time— yeah, well, we had, as I was saying, and as many people from that era, my era, will remember, it was everywhere, and around at the time of '87 there were— because it was such a public health crisis, that they funded this big health campaign, the government at the time funded this big health campaign which consisted of what we look back on now as the tombstone adverts, which was saying that everybody could be affected by HIV or AIDS, make sure— and the tombstone comes down, and "there's a disease going round and it's killing people, make sure it's not you". And that was followed up with a leaflet which was to be delivered to every household in the country. And at the time I happened to be working for the post office and I got the leaflets, and as I said I got paid a penny one. You had to deliver them everywhere. You had to deliver them to, I mean I remember my post round was, you know, in a lot of old people's homes, you still had to deliver the post, and— just to give a sense of the hysteria about HIV and AIDS, I remember putting— staying with my mum and putting some linen away or something, and she must have— she's not gonna see this, but, um— she must have been in her late 60s at the time, and I found condoms in the linen cupboard and I'm like, "Mother what are you doing? Condoms, you don't need condoms" and she's like, "You can't be too careful". That's the way it permeated through everybody's consciousness, "you gotta protect yourself, or you're gonna die!". And so here was a 60-year-old heterosexual woman who only had one partner, who heeded the message of "Don't die of ignorance".

And that was the way it was, it was everywhere, you couldn't tu— there were billboards, news bulletins, magazines, uh, you know in the street, everything was "Don't die of ignorance" so it was surrounding you. So you're not gonna really be

fully... formed as an individual to have confidence to enter into a sexual relationship with another person because you're so inhibited! You're inhibited anyway, because you're new to all this, and you're inhibited because you think, "Well actually, is this gonna kill me if I do this?" So myth and stigma and lack of experience, you're on a [laughs] you're on a downer from the start. I can lau— it's funny, it's funny now, but it was scary, scary times. I don't think we can underestimate how scary it was.

[00:18:03]

INTERVIEWER: Yeah. So in terms of the kind of messaging of that campaign, who... What did you think about the messaging, did it make you feel more—

PARTICIPANT: Oh, paranoia. Sheer paranoia. It just— just paranoid. Just, just— just frightened to do anything. Not only because you were frightened of sexual contact with another human being, but of all the myths about catching HIV through saliva, and toilet seats, and there's prejudice about being gay anyway. Just, it dictated how you lived your life. So those feelings that you have, they don't go away. And you know, at the time, although I didn't do this 'til much later, where do men go? They go to cruising grounds, or cottages, public toilets as they were then, or, or just keep themselves— at the time I kept myself to myself just bought the nudie magazines and enjoyed myself with them, because I wasn't confident enough to have a relationship with another person, until I was in my mid 20s which was the early 90s.

[00:19:12]

INTERVIEWER: And what was it like having to deliver them? Having the round, and—

PARTICIPANT: I don't really— I think it's something that I didn't think about, because you were so full of that information anyway and that terror was there anyway, it was just— it was just, that was just a job. That didn't mean anything to me as far as it— that didn't affect me, because you didn't need a daily reminder— another daily reminder because it was everywhere anyway. It was just, I just remember thinking, "A penny, that's rubbish". [laughs] I was only on 30 quid a week as it was! So a penny, a penny per leaflet, it's not gonna be good, innit? [laughs]

[00:19:58]

INTERVIEWER: So, um could you tell us a little bit about how, about— because you went into costume design?

PARTICIPANT: Now, well— yeah, to— construction.

[00:20:07]

INTERVIEWER: [missed, spoken over] [00:20:07]

PARTICIPANT: I went to a college that made— you got three years' training to a HND level to work in a theatre to make costumes for productions. So that was where

I, the creative side of me found an outlet which also meant I found somewhere I could be myself, because, obviously in a theatre environment, it's no biggie being gay. In fact if you were male and you weren't gay, that was quite unusual. Um, so that was, that was fine. That kind of undid it, all the kind of— a lot of the damage that— that I had either let happen to me because of being isolated from other gay people until then. So I went to college in 1989. A bit before that I'd done a few, kind of, jobs in theatres in Sheffield and so I knew there was a world out there, and I knew there was an escape route for me. But that was an escape route. To get out of the small town mentality where I was, to be who I was, to find out if I had a path in life, and yeah just, to— to find my place, my space.

[00:21:23]

INTERVIEWER: Ok. And so how did you go from theatre to your current— how did you get involved in kind of LGBT work, health promotion work?

PARTICIPANT: Well, I'm gonna think of a nice way to say this, because, if you think, I was a late bloomer, sexually, so when I did bloom... I made up for lost time. So, you know, it was— it was feast or famine. I'd had the famine [laugh] I'd found the places, I'd found the outlets, I'd found the people, it was kind of fill your boots time. So that kind of— the fear, the fear wasn't there. But actually the risks were still there. And uh, and in time I— I did get sick, I did get sick and I did need treatment, and it was a time when— this was the late 90s— it was a time when you were still being told, "Oh you'd better quit work", you know, "live your life, spend on credit cards, you're here for a good time, not a long time". I was on incapacity benefit, that kept going up and up and up and up, 'cause you were expected to live a short time, and I was in my mid 30s by then. And after nine months, the medication was working, I'd been ill for about a year, and I'd been having an HIV test every year. But those— having an HIV test every year, I think, and then being negative, I think, every year, I think that made me a bit cocky? Kind of, "Oh, I'm fine, what I'm doing's fine, it's not gonna get me, I'm sorted". So maybe taking more risks, and taking more chances. And then when I did get sick, I was losing weight, I was, you know, I'm really quite a scrawny person anyway but I went down to about nine stone or something. And I couldn't eat, I couldn't do anything. So I had to stop work, and that's why they signed me off work. And then I'd— that's when they said, "Oh you know, just, forget it, just look after yourself."

Luckily by then I had a long-term partner who I still have, thankfully, who looked after me. And the hospital that I went to because they— I was insisting I didn't have anything, I didn't have HIV, "I got a test, I was negative", and they thought, "Well I can't— we can't find what's wrong with you". I was in a private ward, because they were trying to think of what mystery illness I had. Until they came back and said, "I think it is HIV" and I was like, "No no, it can't be, because I've had these tests, and I'm always fine, and nothing, and you know I've always been fine and I've always been careful, and been negative all the times I've had tests". "Yeah but, your blood tests are showing, you know, that it— and that would explain why you've been ill for so long". And they were right, and I was wrong.

And so I had to change my life. So I had about nine months of not working, living off incapacity benefit, but luckily for me, combination therapy had come in. And that

worked for me. So, in 20 years I've only really had two— two regimes of drugs. So I've been very very lucky. So I thought, "What am I gonna do?" and I'm walking round, "How am I gonna fill my days, how am I gonna earn my living, I don't want to be on benefits, I need to do something, I'm only in my mid 30s". And I was in Manchester, and my work was in Clonezone the shop, as opposed to Clonezone downstairs, um... which is another venue, and uh, there was an advert, and it said, "Oh we're looking for part time sexual health outreach workers to talk about sexual health, so many hours a week, blah blah blah", and I thought, "That will get me back into work, I can talk. And now I can talk about sexual health through lived experience". At the time it was the newly-formed Lesbian and Gay Foundation, they'd just— a few months— had launched themselves as Lesbian and Gay Foundation, and I think I talked their ear off for a good hour. And they thought— they probably thought, "Oh jeez, just give this— give him a— shut him up, just give him a job, just get him out of here". And so yeah, sexual health outreach! So I got into that, and doing something where I could talk to people, I knew what I was talking about, from personal experience, so I had no problem with sharing my own personal experience because, of course that's still another biggie, where a lot of people still, the stigma's still there, so they don't want to talk about— understandably so, they don't want to talk about their own experiences, for fear of— of any comeback. But because I'd been so ill beforehand, I considered myself to be very very lucky to be able to talk about it. So, so I didn't— I'd had the stigma in the 80s, so really the stigma wasn't there for me because I'd been there, I'd been sick, I was fortunate, I took the medication and I got well so for me it was a chance to say, "It doesn't have to be like that". And it made me look after myself, and luckily I had a partner who would help me and make me look after myself.

So, of course I want to talk about it all the time then. I— t just was something that I needed to do. I need to make sense of it all, and to be, hopefully, if I saw, if I could see people who were maybe going through things that I'd been through, I could maybe pass on some information that might be useful to them.

So they gave me a job, and it was doing outreach work, going around public sex venues, saunas at the time, cruising grounds, um and distributing safe sex information and the condom and lube distribution scheme and that was the early noughties, I started in 2000, and I did that for quite a few years. And that was— that was a great job for me, because it just meant I could— I could just talk to people and I could see that people appreciated somebody being interested in them, because with lots of places, obviously in bars and clubs and gay saunas and other places, people don't talk. People meet each other, people have sex with each other, but they don't know each other's name. But to actually have to sit and talk to somebody who's interested in ya— and isn't interested in you for sex— that, there were a lot of people in there that needed that, that needed to talk to somebody about life stuff. They were using— they were using the sex and the saunas as an outlet where they couldn't express themselves in any other way, but they still had loads of other shit going on in their lives, so for me it was a good way to, not only support them through a bit of my experience but also promise them that there was some support for them, which is— I knew there was, just like I had support when I started working in this organisation.

So... it was making sure that you didn't leave people without any hope. If they made a— if they made an informed decision and they wanted to live their life the way they

wanted to live their life, that's fine. But not at the cost of thinking, "There's nothing down for me, nobody cares, I can't look after my health, I can't pull it together, I can't get a group of friends around me who give a damn". Not at the expense of that, because there's still too many people out there who think that, and then they self-medicate with drink and drugs, and get involved in, "Well I'll have sex with that person because that'll validate me somehow". I know that feeling, I think we all know that feeling. Because we had that, when we were younger, being told, "You're ok, you're fine". So that— somebody being attracted to you and having the sex that they want you to have, not that you want to have, is a validation of you. And that's how we get into problems, and then the self-esteem goes, and the self-respect goes. So I knew I would talk about that, and I think we still— I don't think 'cause, as a community we've moved on in that respect, just because HIV treatments have moved on. We still get negative messages about who we are, and how we should live our lives, and who we should have relationships with and how many relationships we should have, and how— it just is like that, I can see now. Now I've almost come full circle and I'm one of the older people in this organisation, I see younger people and I'm like, "They're going through the same thing I went through, but different times". The calls we get to the helpline are the same kind of calls that we had, you know, 20, 30, 40 years ago, just different people. But it's the same issues.

[00:30:41]

INTERVIEWER: So, how— what— when you were doing that outreach work, it's— I mean it sounds, it's really fascinating, um, what kinds of anxieties, fears, issues, did people kind of present with, and what kind of attitudes were there—

PARTICIPANT: [sighs] The saddest thing for me, and it... it sticks for me to this day, is that, because people— because you talk to people, and you're interested in them, because you're there to help them with their health, their sexual health, and you want to make sure they've got condoms and you want to make sure they look after their health, you might be the only person that's ever talked to them in that way. And they latch onto you. And it's... it's heartbreaking, because then they think, "Oh you're my friend, you're gonna look after me", and of course you— you can't be, you can't be there for them all the time, you know, you've got a job to do, you can't give them your phone number, you can't take them to clinics, you can't... You can't see them through all those difficulties. That's the hardest thing. And, too many people like that. Too many people just haven't got anybody to talk to them and tell them it's ok. And that's— that's where we are still today. And that was the hardest thing, is people who need to share, who need to know that somebody gives a damn, but then you walk away 'cause you've finished your shift and then they're back to... nothing. That's the hardest bit.

[00:32:32]

INTERVIEWER: What um, you mentioned the condom and lube distribution. Did you get a sense that Manchester was particularly, like progressive [missed, talked over] [00:32:44].

PARTICIPANT: [at the same time] Yeah, oh yeah. I mean at the time, I remember going to Fresh in Hacienda, and we used to get— when I lived in Sheffield we got bus trips to Fresh, when I lived in Liverpool we got bus trips to Fresh. Uh, you know, so Manchester was always the thing, the place to be. And again it was still early days for me and I was still quite timid, but I knew there were— I knew— the confidence level wasn't there for me, but I knew there were... public sex venues [laughs]. So you know, you might not feel confident about talking to people, but you knew how to get what you needed to get if you needed to get it.

So, um, yeah. Manchester was always that place where, it's a place where people go, you know. It's a place where people go and there were places to go to meet people, and you know, to— and in a way, it's different when you go into another city because you're not gonna see the same people in the place where you live. So it's, you know, it's almost like going on a holiday, you don't, you know, there are different rules.

[00:33:53]

INTERVIEWER: Yeah. And so, at the— were you aware, going into these spaces, these clubs, um I mean I guess the Hacienda, when did that close, like 90— early 90s, when did that go on through?

PARTICIPANT: Oh my gosh! I don't know. For me it would have been, it would have been mid 90s at the time, yeah?

[00:34:15]

INTERVIEWER: Yeah, ok. Were you aware of, as a punter, were you aware of any kind of safer sex campaigns, or—

PARTICIPANT: Yeah, yeah yeah yeah, 'cause I'd— the magazines were my outlet, and obviously by then, you'd got everything in the magazines. You'd got, you— your sexual health information in the magazines, your adverts in the magazines. Everybody was talking about it because we needed to talk about it, in a— in a positive and affirming way, because the whole other rest of the media and the world were talking about us, and HIV in a disparaging way. So we needed that. What do we do about it? And as we know, and a big reason for why it's important doing this project because it's only— it's only the community looking after itself that's, that gives a damn and is gonna make a difference.

So I was a— a late-comer to that, to getting that, to getting that, "Actually, oh I can do something about this". I almost had to be um— I almost had to experience problems first to realise, "Actually," like so many people do, "actually it's about helping each— other people who had problems, but also it doesn't have to be like that". Because it's almost like I'd seen when I was younger that— that the trajectory was gonna be a bad one, and it took me a while to get on with my life, and in the end it couldn't be. But luckily I did have positive influences around me to turn that around, and I think, being around that, being around the gay scene, being around the club scene, being around— you know, having the magazines, having some kind of positive imageries, positive words, campaigns, and then coming and getting work

here— with no qualifications! I still to this day have got no public health qualifications. Should I say that on camera? I don't know. Who cares. I've been here 18 years.

Um, it's life experience, and that's what's important. You know, I know what it's like. And I think that's what I appreciate today as an older person, being around and being given opportunities to work with our community, because we're still learning, we're still early days, we're still a fledgling community and we still need to support each other. Not just about sexual health, but in all aspects, and we need to embrace our diversities, and we need to feel good about one another, and we need to understand one another. So that— all that's still stuff I had when I was younger, the negativity, the insecurity, the lack of confidence, the things that we all have. I guess I never— it never really left me. But actually put me in good stead to try and see it from another person's point of view, so I don't get, "Oh well I'm alright Jack, I'm fine, you sort yourself out".

[00:37:15]

INTERVIEWER: That's— that's great. I was wondering whether, just 'cause I picked up on the mic, I was wondering whether you could repeat, a little bit, if I asked you again about, um, it was the bit where you were talking about— I asked you, so as a punter you went to these venues, and you went to— and then you mentioned that actually you got most of your kind of sexual health information through magazines?

PARTICIPANT: Yeah.

[00:37:46]

INTERVIEWER: Could you just— it was just literally a minute, of um, talking about—

PARTICIPANT: Ok, cool. Ok, yeah. I think— I think because I'd always— I'd always gravitated towards gay media, gay magazines as my outlet for life, because there was no life when I was younger where I was growing up, then I regularly bought the magazines, got the free gay papers, you know, got the Gay News, got the Boys magazine, you know, and they always used to be the [missed] [00:38:23] fella. And so I was just an avid reader and consumer of stuff, because it was an outlet. "What's going on, what's happening, what's the latest stuff?" And while you're reading all that, you know, the safe sex images and safe messages are popping out to you. So, that's always been really— an important way of communicating. It's sad that we've kind of lost that print media now, 'cause as you know we used to have a magazine here, and that did a really really important job, getting out across localities where there wasn't much of a scene, and still people don't go to the— you know, everybody's on the internet, and to have something they can hold in their hands, and a list of numbers that they can call... Still I really regret that, I think it's a shame, but it was something to have, it was something to keep, it was something to hold, it was something to refer to, it was something to... It was yours, it was your community, it was part of you, it was talking about things that you cared about, it was talking about people that you knew, it was talking about you. So it was the first time, you know, because you're not reflected in mainstream media, you're not reflected in newspapers, you're not reflected on the TV, you're not reflected— so having the gay

press and the gay magazines and all that stuff is priceless. You know I still get— I mean, I still get Attitude and Gay Times now and [laughs] not— still I don't see people like me in there, but you know, they gotta sell a magazine. But I still appreciate them, because, it's really really important we have that kind of vehicle and that kind of voice. And that's why I get really really cross, as so many people do when you see them in a supermarket with the covers over and you can't see them, and it's like, why are you hiding them? They're no ruder than the muscle mags for men, or "How to make your girlfriend have 1000 orgasms a night" type thing [lowers voice] which by the way is impossible, you can't.

[00:40:29]

INTERVIEWER: [laughs] Thanks for that.

PARTICIPANT: You know [laughs] Public health information. If she has one, you're doing a good job. But um, yeah. So yeah. Still for me, that I'm an avid observer, and reader, and voyeur of the gay press.

[00:40:48]

INTERVIEWER: Right.

PARTICIPANT: Ok.

[00:40:50]

INTERVIEWER: I'm realising that if we're out of time—

PARTICIPANT: Oh keep on, keep on, I've got loads to talk about, I can talk up a blue streak.

[00:40:54]

INTERVIEWER: Ok, cool. Um, do you want to—

PARTICIPANT: Well it was just some of the things we did from a sexual health outreach point of view. I wasn't intending to talk about me, but you got it out of me [both laugh] 'cause I thought you'd have people talking about themselves and I thought, oh, I'll give you a bit of a spin on, you know the outreach work and the campaigns work I did and you've gotten enough about that, so, but I'll just pick some of the funny things we did.

[00:41:18]

INTERVIEWER: Yeah, that'd be great.

PARTICIPANT: So, there was this, say— some of the funny things— you know, we deal with really serious issues, we're dealing with HIV, we're dealing with sexually transmitted infections, we're dealing with mental health, we're dealing with drug and alcohol problems, you know, you're going into public sector venues, you're going into

bars, you're speaking to people, and they're like, [laughing] "Who the hell are you to come and talk to me? Why do you— get lost!" But you know a lot of people— most people appreciate... most people appreciate the work we do, and now the work that we're doing in community safety, and there is still sexual health outreach that happens online and in venues.

Um... but some of the funny things we did at— I think, I have a— I think I was the first person in Manchester to be tested— to demonstrate that you could actually do sexual health testing in a public sex venue, in the gay scene. We worked with a really fabulous nurse called Julie, who had done a lot of work with the, um, the female sex workers, and looking after female sex workers and testing them in the massage parlours. So she knew that we needed to do that in the gay community, obviously with the high rates of infections. But a lot of people in the NHS said, "You've got to test in clinical settings, you can't do— you can't do it in the community, you gotta do it in clinical settings" but obviously, all clinical settings are only open certain hours and they're very clinical. So as an organisation, we knew that people weren't gonna— there were a lot of people that we were gonna miss, and that we needed to be testing them in community settings where they felt safe. So you take the testing to them rather than expecting— rather than expecting them to come to the testing place.

So, it was a trial about doing saunas. And the first place we did a sauna test, I think I was the first person to prove that it could be done, just to prove it could be done. We did it in a booth in the basement sauna, and the nurse, nurse Julie, had all her kit, a bag and her sterile wipes, and all she needed to be was near a sink where she could wash, and scrub up and everything, somewhere to sit, somewhere comfortable, and she needed some light so she could see the vein in your arm to take the blood. The— in the sauna, it's quite dark, if nobody's been to a public sex venue [whispers] it's quite dark. As is Manchester sometimes.

Um, and the only light we got was when they put the TV on, but with it being a gay sauna, what was on the TV was porn. [both laugh] So I was feeling the little prick in my arm, whilst somebody on the telly was feeling something... not dissimilar [both laugh] But it worked! We proved— she got the blood out of me, she did it from the light in the sauna cubicles, she got the blood out of me, she was able to do the test, she was able to clean me and herself, and it was fine, and that was the proof you can do it, you can do sexual health testing in public saunas. And you can do a lot more people because you'd go there on certain days, and you'd go with an outreach worker so you'd get the nurse, someone like Julie, an outreach worker like somebody like me, or somebody else, to go out and say, "Oh the nurse is here today, we just wondered if you'd either like an HIV or STI test later, would you like to come?" So it's handy, it's opportune, and that's the way to take it out there. So you have a couple hours in the sauna, or somewhere else and you go round and chat to people, and it makes them think, "Actually, I haven't had one, I should have one, I'm—", or "I'm worried about it" and that's where you have a lot of the conversations about lots of other stuff going on in their lives. But they have the test, and then— actually the test goes back to the lab and then they get the information. But, it was a very very valid and vital thing to be able to do, because we were able to test a lot of people who were— needed to be tested, but they'd been missed, because the clinics didn't work for them.

Another thing, another fun time that we had— because obviously if you have a public sex venue, where a lot of people are going for sex, it's understandable that if you get a lot of guys going to one place for sex, that place is gonna be where they find a lot of STIs: outbreaks of gonorrhoea or syphilis. And I remember, there was one particular— I won't name this one, there was one particular venue where the public health people were saying, "I had this one area where we're getting a lot of people saying they think they acquired, syphilis for example, from this venue. There's a lot of casual sex going on, and there's a lot of problems." And one of our designers came up with a really fantastic campaign, which was a margarine tub, with syphilis on, and the campaign was "Syphilis spreads easily" which was a really— it really picked up nationally, it was a catchy campaign. Because it does! Syphilis really, it does spread easily. So that margarine tub was a great uh, visual to go with it.

But I remember, one of the— part of the job of working with the saunas is you, as well as doing the sexual health testing, you want to publish[?] [00:46:51] that there're health education posters up as well, for the numbers of the, what, who to call, for the, you know who to talk to, and how to get the information about looking after your sexual health. And I remember going to one of these public sex venues where there was a particular problem, it seemed, with a lot of people saying they'd got, uh sexually transmitted infections from there, and— [laugh] [missed] [00:47:15] but I'm really really angry, only with the building who said, "You're not coming in here, spreading all your syphilis! Take them posters down!" But well that's actually what we... don't want to do, that's what the posters are there for, but they didn't get that that's a good thing for them to do for business, they, at the time thought that was a bad thing because they thought, "Customers will see that, they'll turn away in droves, and they won't, you know they won't go to that particular venue", but actually what we're saying, "No this is a responsible business, we're letting you know that syphilis is out there, and it's easy to catch, so you know, look after your health and get tested". But sometimes those messages didn't connect with the people that they needed to get though.

Another thing, another funny thing we did was, we used to go out to cruising grounds. And I don't know where it was, somewhere like Worsley Woods, I think, and just leave— 'cause a lot of people, uh, don't go to public— to public sex venues, they don't have the cash to pay to go into a sauna, so they go to cruising grounds. And I remember we used to leave— go around and leave condom packs on branches trees. You could open a packet, it's perfect for putting on a tree like, well it kind of goes back to where it comes from, [laughs] as a part of a tree. I remember once, I was doing outreach in a woods somewhere, and I found a little hut, and I thought, "Oh this is marvellous, this'll be great, this'll— people will go in here when it's— when the weather's awful, they'll have a gay old time in here" so I thought, "I'll pour all my resources in this hut, all this literature, and when they're in there, they'll see everything." It didn't twig to me that this was a scout hut [laugh] and this must have been a weekend when I put all my literature about syphilis and HIV and all the free condoms and everything around this hut in the middle of a wood, thinking, "Good job", and um... and then a couple of days later we got this call from a really nice man, the scout master, really nice, saying, "I don't know whether you're aware, but you know, somebody's left some... sexual information in our scout hut [laughs] I've managed to get rid of it, but you know, please don't do it again because, you know,

it's not really— we have— it's for our meetings with our [laughs] young people". Didn't twig on me, I just thought it's some kind of ancient ruin, it's an ancient place, that's being neglected, and it'll be perfect for a little shag den for the gays. Anyway. That was a—

[00:50:05]

INTERVIEWER: It was nice that they were nice about it.

PARTICIPANT: Oh, they were lovely, they were lovely, it was really nice, he was just, "Please don't do it again, because I don't want the information to get into the wrong hands" [laughs] And part of me was like, well they kinda need to know, but yeah, I appreciate that we're... not yet. No, a bit early. But it didn't twig on me that hut in the middle of the woods was not for gay men to have sex in, it was where they built for the scouts to do their outward bound things or learning what they do, surviving in the wild, you know. I've never been a scout!

[00:50:41]

INTERVIEWER: Right.

PARTICIPANT: Um, some funny things like that. And anything you can think of to try and get attention. I remember once, we got some money from what was called Chaps, the national Community and HIV Prevention Strategy, to do some outreach, and somebody out there, they knew about my theatrical background about being able to make costumes and they said, "Would you be able to make some giant willy costumes that people can wear and go out giving out condoms?" So I— I made uh, I was working at the time at the Royal Northern College of Music so they let me use their sew rooms and their stands. I made some giant willy costumes. I'm really proud of these! They were made out of foam rubber, with pink flesh coloured and chocolate brown coloured lycra, because all my willies to be, you know, inclusive and diverse. Some were— had a foreskin, some didn't. They had big, um, sacks of wadding for testicles, and I cut up some wigs and so people— I'm very very proud of these, they [missed] [00:51:46] they look fabulous. And people used to go out and wear them, walking up and down Canal Street or, you know— oh, pause, sorry about that. Uh, I give out sexual health information. But they were too big— or they couldn't keep them inside for some reason, they didn't have the storage. And someone said, "You're gonna have to keep them outside" so I wrapped them up in plastic and keep them out— put them outside in a, like an outhouse or, you know, shared— but the things went mouldy. [laughs] Which incidentally is quite a good— if you think about it, willies do get mouldy if you don't look after them. And I remember one time what we did with these, with these willy costumes, we were taking 'em round to a group of students and did a little performance to like, some kind of Benny Hill music, where the willies were running around, and I'd made some little scabs, uh that people were trying to stick on the willies to you know, like to show, you know STIs and the— the [missed] [00:52:48] the little [missed] [00:52:49]. The willies are all running around to Benny Hill trying to escape all these scabs. And people were trying to stick these, these kind of syphilis scabs on them.

So we had some fun with that. They were some interesting... interesting projects. But yeah, the willies, I don't know where they are now, they went mouldy and they got thrown out. So, you gotta look after your willies!

[00:53:11]

INTERVIEWER: That's a good message.

PARTICIPANT: That's the beginning and the end of everything that we're talking about, you gotta look after your willies, kids.

[00:53:15]

INTERVIEWER: [laughs] How was it working with schools, like have you done much work with—

PARTICIPANT: Yeah yeah yeah, yeah! I mean the great thing about working here, at LGBT Foundation when I started, you know no qualifications in— in health work, no real, nothing other than a bit of life experience. But, given the ability to talk and the enthusiasm for working with people, I just got given my jobs to do. And then a bit later I got a full time job and I did more things, and one of the things we did for a while was to go in schools and talk about, and try to encourage a zero-tolerance to homophobia and all that kind of stuff. And I can remember we used to talk to young... children, to young people, about homophobia and bullying. And after the class it wasn't unusual for some really wee person to come up and say, "Oh of course you know I'm bisexual," and I'd have thought, "Oh you, good on you! Nice on, are you alright, you looked after, and just— have you got support?" "Oh yeah I'm fine, I just thought, you know, I need— and I knew— and I thought, I knew all that stuff you were talking about, you know."

And now, it's so fantastic working— I work out in GP practices and dental surgeries kind of doing health promotion that way to make sure that our services are LGBT inclusive. But to see how far we've come from the place I was when I was younger, to places understanding that there're LGBT patients and LGBT people in the real world, but we don't quite know how they fit in, or how we're supposed to look after them or what we're supposed to do. For me, that's a rewarding bit. Is going out to work in— in the real world, whether that's a school, whether that's a health place or whatever, and saying, "Well, this is— you will have lesbian, gay, bisexual and trans people, you need to be able to look out for them, you've always got us as backup and support for information, but you need to be including them and making sure you're doing— you know, you're reaching out to them, because they won't feel safe, they won't feel secure, they won't hear positive messages". But, for me, that's been, 18 years of working at this organisation, that's been the rewarding thing, is that this is still so valid. I don't necessarily do sexual health work anymore, but it's kind of the same thing. It's just taking stuff out in the real world and making sure that the people who aren't as lucky as me, yet, to have found a space where I can be myself, and I don't have to apologise and I don't have to pretend to be somebody else, which I could never do anyway, um, finds a safe place, and have friends, and people that understand where they're coming from. And when we go out to do that work and people say, "Well that's fantastic work, and all you have to do is put your posters up

and give out your number and make sure we're do— make sure we're doing some LGBT stuff?" Yes! But do it all the time. And that's— that's the kick, after all this time, after all these years, is knowing that it's still needed, it's not difficult, and it really is just going out into communities and saying,

"What are you doing to support your LGBT people? Patients, young people, service users, whatever. Make sure you're doing this, this and this, promote this, this and this, have all this information. If anybody crosses your path and you don't know where to send them or what to do with them, send them our way, get in touch with us, just be more confident about this because you can— you can really change somebody's life by just saying, 'Fine, no big deal, we're here for you as well, but you might want to go to some specific services if you want, there are plenty around greater Manchester, there's tons! There's young[?] [00:57:10] people's services, there's services for queer people of colour, there's services for homeless LGBT people. You name it, there's loads of services."

But the knowledge is, that I've learned over the years, you've got to be a bit like a London cabbie, you've got to have that knowledge to be able to say to people, "There's a service for that. There's a place you can go for that. There are people you can go— there are other people like you, you don't have to justify your existence, you don't have to, um, suffer in silence. There's choices, there's options." And that's the really rewarding thing, and I can't see myself ever doing anything else in my lifetime. I don't know what the [missed] [00:57:46] in me, but I'm not going anywhere. [both laugh]

[00:57:52]

INTERVIEWER: That's brilliant. Um, is there anything else that you want to talk about that we haven't mentioned? [missed, talked over] [00:58:00]

PARTICIPANT: Just one little— I think one thing, um, there was one thing. Because— the difficult— one of the problems is, when you're lucky enough to be working as a professional homosexual and you get paid to do a job which is helping your community is that, sometimes it can seem that you set yourself up or you're set up to be the expert on everything, and you're not, you can't be, you can't represent all people all the time. You can only talk— you can only hope to talk about what you know and share some information about some services, just to be a voice out there. And I remember the very first time I was given the opportunity to do a radio interview on sexual health, and it was how I learnt, you know, to be very careful about doing a [pause for drama] prerecording interview [both laugh] because I was asked to do um— because I started my career here doing sexual health and because I have the gab, they said, "Oh well you do this interview for this radio station, they wanna talk about, you know, why it's important to go to get checked to the clinic". And so this person came, and did a pre-recorded interview with me, and basically the message I wanted to get out was, "It's just like going to the doctor's, you know, you just get checked up when you need to, every six months, or every year if you're sexually active, or if there's something wrong, or you don't feel right, get checked up, get checked up" and I shared a bit about my experiences of getting checked up that it's no big deal, and you don't need to be afraid, you're dealing with professional people, you don't want to get infections, and even if you don't see any signs that they're

gonna cause problems in your body, but. The way it was edited, afterwards, which is why I don't like listening to myself or seeing myself, I don't mind doing these things, it's fun, but I don't want to see myself or hear myself, is, after they'd edited me trying to say, "Get in tested, go in to sexual health clinics, there's no shame, there's no stigma, do it, it's about looking after yourself, it's about taking control". But because I was so enthusiastic about it, they edited it, and they made it sound like I was a right old slapper, and I was going to the clinic every week. [laughs] "Oh you, just go to the clinic, oh I just go to the clinic." You know. I was rather too enthusiastic. I mean you learn, over a period of time.

So now I'd rather do live, or you know, I have to be a bit more careful about how I... put things. Yeah. So that was very naughty of that person, whoever he was, that made me sound like I was going to the clinic every week, because I wasn't, but even if I was, I would have been looking after myself.

[01:00:40]

INTERVIEWER: [laughs] Um, yeah, talking of interviews, I don't think— I think we'll avoid that, in this case—

PARTICIPANT: [laughs]

[01:00:51]

INTERVIEWER: —um, yeah. So, yeah so. I mean we've, we've had an hour, and I'm just wondering again like, if there's anything else, any stand-out memories that you've got that you haven't shared, that you'd like to share something that sticks in your mind, or, if you've said your piece that's absolutely fine that's absolutely fine as well.

PARTICIPANT: The only thing that— that is really, really important to me, you know, I'm only 52, nearly, I'm still young, but— and my youth, now, feels— it doesn't feel like so long ago, but everybody looks at me like I'm bloody Methuselah or something. But, the one thing that stands out to me more and more and more and more, whether you are— whatever you do in life, whatever your job is, whatever you want to do in life, is just that need for that acknowledge of being safe in who you are, and your identity, and not accepting any compromise, and going and finding those people who are gonna accept you for who you are. And I know we're talking about sexual health but it's kind of, it's all related because, for you to be able to make informed choices about what you want to do and what's good for you and how to enjoy your life when there's so much negativity in the world and so many people who are— wanna catch you out or put you down, we've just gotta look out for each other. We've got to look for each other, because we know what it's like. So whenever you're tempted to diss people in our community, if ever you're tempted to, you know, bitch about people or unfriend people or whatever, just think about, are they coming from a place— are they really struggling with something? Think about it. You know, give them the benefit of the doubt.

[01:02:41] End of transcript.