

Disability History Association Podcast

Interview with Nicholas Hrynyk

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Kelsey Henry: Hello, and welcome to another episode of the Disability History Association Podcast. I'm Kelsey Henry.

Caroline Lieffers: And I'm Caroline Lieffers.

Kelsey Henry: And today it's our pleasure to speak with Nicholas Hrynyk, who joins us from the Department of Historical Studies at the University of Toronto Mississauga. Nick is a Social Sciences and Humanities Research Council Postdoctoral Fellow who specializes in women, gender and sexuality studies, with research interests in disability and crip studies, queer studies, feminist STS, philosophies, sociology, history, all that good stuff. Nick we really look forward to chatting with you today. Thank you so much for joining us.

Nicholas Hrynyk: Thank you very much for having me.

Kelsey: So, I had the pleasure of happening across your work when I was wearing one of my other professional hats as the editorial assistant for *Disability Studies Quarterly* or *DSQ*. And I copy out into your article, "No Sorrow, No Pity: Intersections of Disability HIV/AIDS and Gay Male Masculinity in the 80s" for *DSQ's* forthcoming June 2021 issue. And as soon as I read it, I was like, we have to get Nick on the podcast.

One of my favorite questions to ask folks, just to start, is when did you realized that disability studies was relevant to your work, or that you were already doing disability history in one way or another, but maybe you weren't calling it that initially or you didn't realize that's what you were doing initially? Was your path to disability studies chosen? Did you know that you wanted to go in that direction or did the fields sort of find you in an unexpected way?

Nick: So, thank you for that question. That's a, that's a really, really good question. And it actually was unexpected, my arrival in disability studies. It was a pleasant, surprising arrival. So, most recently, I would say disability studies began to really show itself in the final chapter of what was my dissertation, but is now a forthcoming book I have. It's under contract right now with University of Toronto Press. And I was interested, of course, with gay male masculinity as I focus on it throughout the book, but the last chapter, because I end in 87 for various reasons, mainly because the source I'm using as the premise ends in 1987, it was important to, I felt in the last chapter, deal with HIV and AIDS.

But one of the things that stood out to me the most was the way in which the discussions around gay masculinity and gay male bodies use the language, it's particularly those that were debilitated by AIDS (and I say that purposely), because they use the language of disability. And so I began to unravel this and say this is more than semantics it's more than simply, you know, a peculiar word choice. But rather it resonates for the ways in which we understand bodies and the way that bodies move through time and space. And it made me start questioning the ableism in other assets--aspects of my work.

So, it was a really, really organic evolution, I would argue, but then I look back on older research I have done. So, I have an article that came out in 2015 on what was called the

"Peacock Revolution," and this was just sort of a brief fashion movement in the late 1960s and early 1970s, inspired by Hugh Hefner and the bachelor phenomenon of like, where they could wear cravats and gold suits and, you know, smoking jackets and, you know, think of Austin Powers in some way. There's a flamboyancy.

But I thought, this is really interesting because this is a time period, think about it, the late 60s early 70s, gay liberation is starting to take hold, gay visibility is growing exponentially as a result. And what we're seeing is straight men acting very flamboyantly, cosmopolitan, or metropolitan. And gay men in fact, are acting in some ways more butch. So I'm like, "Whoa, whoa, whoa what's going on here?" They're almost speaking to each other without speaking to each other. And I saw ads that were talking about how the designer for clothing like, you know, it would bring up like Dior or someone who, whoever's marketing certain products. And they would bring up the sexuality of the designer saying, you know, they're not just another mad, gay designer, like and that that's a quite a literal quote that was in one of the ads. But to reassure men who bought those clothes to say but you're not going to have your sexuality or masculinity questioned for being interested in fashion. So just because they are, doesn't mean you are.

And so I began to think about where the privacy of the body was in that respect, and the way in which bodies are framed and contorted in advertisements, and to think about how we understand and we read bodies. So I've always been interested in the body, and that's when I began to see these broader questions of ability and the way we also see bodily failure. And then that's what led me, right, to disability studies. And then that's the beautiful thing about disability studies, of course, is that it flips it on its head and it makes me think about bodily failure in almost completely reversed terms and start thinking about ability as something of a failure of consciousness, or something that is so ubiquitously powerful because it's invisible, right, which is often what disability studies does is to highlight the invisibility, what we don't want to see, right? So yeah so it was a very organic movement definitely out of my dissertation and my first book, but it's actually coming to shape my second book which I'm happy to talk about later on.

Caroline: Thank you so much Nick, and yeah will be asking you about both your first and second book actually shortly, so very much looking forward to that. The article that you shared with us, that we'll be talking largely about today provides a textual analysis of *The Body Politic*. So, can you tell us about why you chose *The Body Politic* as your primary text, how did you get into this, why does it seem like the right place to put your focus?

Nick: Yes, thank you. So, *The Body Politic* was published between 1971 and 1987, and between those years it was the largest gay and lesbian newspaper in Canada, but it also had a prominent international readership as well, spanning to Western Europe, to South America, and so on. You see that with a lot of readers writing into the newspaper talking about various issues, topics at hand. A lot of archival material comes from it as well, so it's quite a rich textual source. There were a lot of images published in *The Body Politic* because part of their mantra in establishing a newspaper was that visualizing sexuality was part and parcel of sexual liberation, right, so that they needed to visualize the body and visualize same sex love and desire.

So, the politicking that was going on in *The Body Politic* was quite large and the editorial collective who had started *The Body Politic* came out of the We Demand protests of 1971 on Parliament Hill in which, of course, early gay liberationists set out a series of demands, if you will, to end the systematic oppression of gays and lesbians in the country, particularly because up until 1969 homosexuality was criminalized, and it was only in 1969 that it was partially decriminalized in Canada.

So I chose *The Body Politic*, of course, because of its wide scope, and these were not small issues. I think the first issue was up to about 30 some odd pages, and you know, within the next year or two, by at least by the mid-70s, they were like 50 page issues. So like it was more, if anything, in line with a special interest magazine, than a newspaper, but you know it just had such a rich context and content. But I want to add that it was an English paper and that they didn't feature much French content. It would cover issues going on in Montreal, or you know something that might have happened in France, but it was more than anything, an English newspaper, so there is that caveat. But I want to also just finally say that, by looking at *The Body Politic* and when I was exploring this relationship, particularly in the context of the article around this relationship between HIV and AIDS with disability, that I'm not trying to fill a gap here. Rather I'm turning my attention to the ways in which disability has always existed and been there, just simply unspoken, unrecognized, and unacknowledged. So I don't see myself as highlighting or addressing a gap, but rather reformulating a truth.

Kelsey: Yeah, that's so beautifully put, and I think will tie in really nicely with an upcoming question about historiography. I love that. So, we'd love to hear a little bit more about the way that you were analytically just working with *The Body Politic* or *TBP* for short. Your analysis covers both the discussions of disability in *TBP* that predated the onset of the HIV/AIDS epidemic in the early 80s, and the discussions of disease induced disability or debilitation that were caused by HIV in subsequent years. And I'm wondering, how did that earlier conversation around disability and gay male sexuality make its way into later conversations about frailty and undesirability in response to embodiment and HIV/AIDS.

Nick: Yes, so, you're right to say that there were earlier conversations around disability, pre-HIV/AIDS epidemic, but they were far and few between. So, in 1980, Gerald Hannon, of *The Body Politic* comes out with this article called "No Sorrow, No Pity," which is now eponymously the name of my article. And in it, speaks about the marginalization of people with disabilities in the gay and lesbian community, particularly in Toronto. And Hannon has a wide set of conclusions about what has contributed to the systematic marginalization, or you know invisibility, if you will, of persons with a disability. But what I appreciated was that he also interviewed those with a disability to ask them about their experiences. So I remember there was an individual by the name of Richard, and Richard actually spoke about what it was like to navigate the queer community, as somebody who was blind. Interestingly enough, though, Richard also published a classified ad in the following months in the back of *The Body Politic*, and the classified section was a place where men could meet other men, or women as well, but it was obviously like a lot of gay liberation unfortunately at the time was extremely male-centric. So, it was like grindr of the 1980s and 70s, alright, so this is how they were meeting each other. And, but one of the things that Richard had said, and I thought this was fascinating, explained himself and said you can actually see a profile of myself in earlier issues and defined himself, but then also said, please send a photo if possible, and also give a description of what he was looking for. And I thought it was very interesting that Richard, as a self-described blind man, was also asking for photo to then, whether that was to have it like legibly described to him or he himself, you know, based on--disability is a spectrum--that he himself could still utilize that photo in imagining his ideal partner or if this person was a match, I thought was extremely interesting and shows the way in which they navigated the queer community in their own ways.

So it was really important to understand how these discussions laid the foundation for then what would become discussions around disability that, in that we're all disabled. So Hannon gives this article, "No Sorrow, No Pity," and in the latter part he makes us reconceptualize

disability and able-bodiedness. And this is mind blowing for the 1980s, because he's thinking about disability as something that we all oscillate in and out of. So he speaks about when you're a baby, and you rely on your parents for everything--to be fed, to be clean, to be warm, and says that as a, you know, a tiny, tiny little human being, you rely on, you need that support because you are essentially unable to care for yourself. And then also speaks about the fact that when you get to a certain point in age, when you're so old, you may need that similar type of care. And so what he says is that we're all disabled at one point or another, and we need to all think about disability in that way.

And so I was like this is really interesting, also very thought provoking for the 1980s to be thinking about ability and able-bodiedness in this way. So, these kind of conversations were about highlighting disability. They were talking about processes, or I should say practices of discrimination that were faced, that were facing people with disabilities. There was an article that was published a couple issues after called "Stair Trek," and in it, they spoke about how almost all gay bars in Toronto had stairs to get into, whether they were above a shop or below in a basement. And as a result, that was a physical barrier that inhibited certain people from coming to these venues, right, particularly people with physical disabilities.

But what was more heartbreaking but also interesting to see was the way in which people with cognitive disabilities were ridiculed and mocked out of these spaces. So, one of the gentlemen, unfortunately, I can't remember their name, but they were also interviewed in Hannon's article, and one of the gentlemen spoke about how, as a person with cerebral palsy, they went to one of the bars and somebody actually said, like, do you expect to pick up here, like what are you doing here? And so there was a policing of space and like, I think it's extremely important to remind ourselves that one of the reasons why people with disabilities were marginalized or made to be invisible in the queer community was not simply because of formal institutions like institutionalization and practices, but informal practices like bullying and hazing and so on.

So, these conversations are happening before HIV/AIDS, and another thing that's going on as well is we're beginning to see the formative years of disability activism in the queer community. So in 1977, Raymond Barton, whose about 27 at the time, goes to San Francisco and finds something completely revolutionary, which was those who were Deaf, queer Deaf people, meeting other queer Deaf people and establishing some sort of community that existed well beyond the bars, which were, of course, a huge meeting place for many liberationists and gays and lesbians in the 1970s and 80s. So he brings that back to Toronto with him on his adventure to San Francisco, and he forms the York Rainbow Society of the Deaf. And they go to the Parkside Tavern, which is a bar in Toronto, and they sign, and this is actually documented by Hannon and he talks about how there is a Deaf, a gay, a queer gay Deaf, whatever they want to describe themselves as because the change the terms always change, but they were a gay Deaf group who, you know, co-opted, or you know force themselves to be in spaces that would never acknowledged to have catered to them. You know the Parkside Tavern is often remembered as a space of gay male camaraderie and cruising and all that but it's never remembered as a space, which also housed the York Rainbow Society of the Deaf, but they were there signing and you know engaging in disability activism. So, I think that's extremely important.

So, these earlier efforts to at least even bring disability into the minds of readers of *The Body Politic*, of course, then shape later conversations around HIV/AIDS. So these earlier questions about what it meant to be disabled, what it meant to be desirable and have a disability, and we also see that with other readers like Warren Camp of Mississauga, who writes in and speaks about having two prosthetic legs, but not in need of a wheelchair, and

spoke on how that made his coming out easier by going to the bars. He could still go to the bars. So what we realized then is participation was a fundamental aspect in sort of helping gays and lesbians with disabilities, you know, come to that sexual awakening or sexual realization. They had to be able to participate, if you will, in this burgeoning culture, and one of the ways they did that, of course, was whether it was co-opting spaces or finding themselves in certain places, was by, you know, grassroots activism, and this would shape similar processes around HIV/AIDS in the subsequent years.

So by 81 we begin to see of course the first signs of AIDS rear its head. You know I believe it was the San Francisco newspaper that talked about five gay men, or a number of gay men were showing up with Kaposi's sarcoma, which is a rare type of melanoma and, of course, we know that is indicative of late stage AIDS. And the conversations, of course, that take place by the time HIV/AIDS is known, it's not just mythologized, some people believed in 81 that it was a remnant or it was a result of the right wing, sort of Christian majority, saying you know, this is just a way of demonizing homosexuality. But it fundamentally changes what it means to be able-bodied and it brings sexual practices into question. It brings the concept and questions of desire into focus. Something that has been, of course, been wrestled with now for years within the gay disability community, as we saw with Raymond Barton and others, but it's now all of a sudden it's on the agenda of everybody, rather than just a small segment, right? So AIDS expands the scope, I should say of disability activism, in a way.

Kelsey: I'd love to hear you reflect a little bit more about how exactly the aesthetics of disability, or the language, like representation around disability was constructed as somehow antithetical to gay male masculinity in *TBP*. And I have so many other thoughts here about how, like disability, is often associated with asexuality, or like a de-sexualization. But what's so curious about HIV-induced debilitation is that that's connected to hyper-sexuality or perceptions of hyper-sexuality and promiscuity. So there's a lot going on there and I'm wondering like more specifically how were disease and disability considered to be at odds with queer embodiments, so styli—oh, I can't say this word today—stylizations of the body as virile, healthy, hyper-masculine? And then the second part of that question, I know you mentioned, you were talking about the criminalization of homosexuality, but homosexuality has also been medicalized as a disease category or a mental illness, and I'm wondering what role the medicalization of homosexuality played in shaping hostility towards disease and disability in gay male communities. So, two questions there.

Nick: Yes

Kelsey: So, disease and disability at odds with queer stylizations of the body and what does this have to do with the pathologization of homosexuality?

Nick: Yes, and thank you. So, first and foremost, when it comes to the stylization of the body, we should understand that gay male masculinity and masculinities, I mean, because it is a spectrum and they were various types of performances, but over the course of the 1970s and, as we see a gay male culture formulate out of early gay liberationist activities, and *The Body Politic*, I would argue, became just as much a cultural periodical as it did an engine of political activism, what we see is gay male masculinity begin to take shape, aesthetic shape, along able-bodied white muscular lines. And this is actually what constituted what they called "the macho clone." And they said they called them to clone because they were so ubiquitous, everybody had six packs and like mustaches and wore tank tops that they were just like "Oh, they all look alike," right, like you would mistake people because he's like "Oh, I thought you were so and so" and they're all just clones. And

so gay male masculinity is being imagined along these lines, and this should come as no shock because it still is imagined along muscular white able-bodied lines.

And now you can argue that many didn't embody macho, but macho was presented in bathhouse advertisements, bar advertisements, even by some members of *The Body Politic*, as *the* image of masculinity, as well as *the* image of gay liberation, like this is what it means to be gay is to be beautiful and you see that, because those same images are evocative of Pride in the contemporary period right that, when we think about pride and you think of like Absolut Vodka or anybody else who wants to sell stuff during Pride, they typically present a very specific image of gay masculinity and it is one that embodies these tropes of desirability.

So, this is not new. That's sort of what inspired me at first to write about gay male masculinity. To say, you know, kids this isn't new. Pride, the politics of desire and able-bodiedness at pride is not new. This is something we've been wrestling with since gay liberation, but even well before it. I mean all gay liberation did was basically say porn, gay porn of the 1920s through to the 1960s, is a part of gay male heritage, gay male culture, right, and there are a few scholars who have tried to do that.

So you have this particular aesthetic of gay male masculinity being presented as like the epitome of desire and this, of course, it stands inherently at odds with the disabled or diseased body. One of the ways it does is that, as you mentioned in your question, it is exemplify or exudes understandings of the body as virile and healthy, particularly than male body. And these were all correlated with hyper-masculinity. And I say it's hyper-masculine because I think about Susan Sontag's questions on camp. And it's just so over the top, like you know they're making fun of it, right, and that's what camp is, like when you're in on the joke you get it you realize the artifice, that everything is and then you realize like "Oh, but I can poke fun at it." My issue is, and this is where I sort of, I dance between being post-structuralist on one hand and sort of saying there's no self and everything's an artifice, and social construction. But then saying in some ways I think of like Erving Goffman and dramaturgy and sign vehicles and which saying, but these were also ways in which people began to identify with the community around them. And by saying, like, I want to participate in club culture or I want to look like that or I don't look like that so I feel like I'm failing. Like this is a politics around the body that come out of having a very narrow image of gay masculinity being presented. So those with a disability, of course, are not going to see themselves represented.

And there was this particularly provocative image, I saw it and I want to say it was in *The Body Politic*, please don't hold me to it though, but it was during my archival findings and it is. And it was an image of a wheelchair, and no one in it. And I thought nothing could exude the invisibility faced by people with disabilities more than that image, of saying you know they see the wheelchair, but they don't see the person in it. They don't see the sexuality of the person, the desirability of the person in it, they simply see disability. And I think that evoked to me, you know, the politics of able-bodiedness and disability in an ablest society in which we don't see people for who they are, we see them for what their bodies can perform and how their bodies perform, and you know the legibility of their masculinity in this context.

So, healthy, virile, you know, hyper-masculine all the, all desirable characteristics of the macho clone. But then HIV/AIDS happens, and what that does is it threatens to strip that male body from its virility, of its healthiness and therefore relegate it to the periphery as bodies that were perceived as disabled had been. And so, I think this speaks in some ways to the second question, because the pathologization, as you rightly put, of homosexuality,

has been inextricably linked, and this has been since the late 19th and early 20th century, some might even say before that, but when with the rise of sexologists and you have, like Sigmund Freud you have Magnus Hirschfeld and others who are writing about sexuality. You know, of course, they had much more, rudimentary terms for homosexuality. But what that did was, it didn't, just as much as it classified a group of people who shared same sex desires, it also meant straight people had an awakening and being like "Oh, I know what I am because, therefore, I know what I'm not." Because, like straight people weren't going around in the 18th, 17th century and be like "Yeah I'm a heterosexual." They didn't know what they were. They were just like "Oh, I know I'm not engaging in that so therefore I must be a heterosexual." By the time that we begin to see this medicalized shift, we also know that disability has been pathologized to the high heavens, and I mean part of when we're engaging crip theory and we're looking at disability studies it's to break free of that pathology and that pathologization, the pathologizing language, if you will. And that's something I was very, I thought of deeply when I was talking about those collisions between disability and disease, because I didn't want to re-pathologize disability. What I wanted to say was that the diseased body, the HIV/AIDS afflicted body was pathologized using the language of disability it, you know, within the same community that attacked the medical profession for pathologizing homosexuality. So it's interesting to see the ways in which pathologization doesn't just happen from the medical field and from those with PhDs and fancy titles, but also happens from the ground up within the community itself. And, of course, this undoubtedly shaped understandings of disability, as well as desirability. And I think of Robert McRuer's concept of stigmaphobic distancing, in which members of a community will distance themselves from others, in order to be seen as more normal or more desirable. In this case, what we see is those unaffected by HIV/AIDS or even those with it, distance themselves from disability. Or, you know, those without the disease distance themselves with from HIV/AIDS, because they wanted to be seen as not just healthy and virile or masculine or normal, but as a way of saying that they could be accepted or tolerated in mainstream society. Just as queer folks had done with persons with disabilities throughout the 70s. And I don't want to generalize, by the way, and say that everybody did it but there's a cultural process that's going on, a broader shift to how we appreciate, and bodies we don't appreciate right as Butler, Judith Butler would say, bodies that matter. Well, what bodies don't matter.

Caroline: That's really interesting. There's so much there to unpack about the power of pathologization as a way of sort of regaining control over a crisis, right, a really scary situation that's striking at the heart of newly won freedoms for the gay community in this period, right? Let's talk a little bit more about some of the specific debates that you see showing up in the pages of *The Body Politic* about these representations of disability and disease that reinforce the quote "undesirability of the AIDS body while simultaneously addressing stigmas of the disease." Can you give us some more detail there?

Nick: Absolutely so some of the earlier debates and questions around disability per se, were first and foremost brought forth by persons with disabilities, by gay men or women with disabilities saying "I'm here. I'm in the community. You need to recognize me. You need to realize that I am just as much a member of this community as you are." So it was a lot of activist work. You know, what the big word is now, a form of collective care, if you will. And of course, this fundamentally changes with HIV/AIDS, but we see this correlation, this collision of this language, in recounts of the ravaging effects the disease has on particularly gay men. So Gerald Hannon, the same individual editorial member who wrote "No Sorrow, No Pity," talking about disability, also spoke about a time in which he went to New York City to visit his friend Fred. And it was his visit with Fred, who I believe was a pseudonym for a man named Larry, but, that aside, it was his visit with Fred in which he began to see the ravaging effects of HIV/AIDS. So, what he noticed was Fred was

struggling with Kaposi's sarcoma. He was, he had cancer and he was going through chemo and whatnot. And he actually spoke about when Fred lost his mustache, he lost a great sense of pride, so he actually spoke about how Fred identified through his mustache which I thought was interesting, that facial hair became a signifier of masculinity. But, when he came back after, he made a couple trips, but I think it was his second or third trip that he spoke about Fred looking rather gaunt and almost like a husk, right, like debilitated and frail and just his body was failing and he looked weak. But it was that experience too, in which he noted, like Fred's friends stopped coming around, they wouldn't come to visit and they, some people were scared of contracting the disease by just simply, you know, going into someone's apartment who had HIV/AIDS, I mean there were still a lot of questions about transmission. So we see the collision, particularly in the ways in which people with HIV/AIDS are described.

Bryan Teixeira, I want to say Teixeira, I might be butchering the last name but, one writer for *The Body Politic* spoke about people with AIDS as "lepers to be denied," he described them as lepers, and I thought this was extremely interesting because, in many ways, those were almost the exact same words that a few people with disabilities writing in even just a year prior had described themselves. They're like, "I feel like a leper in my own community that I'm pushed aside." So I thought, this is really interesting that the same type of language is being used. And when it is used, it's almost exclusively to talk about disease and talk about oppression, but we never talk about, they never really gave room for people with disabilities to speak about the opportunities their disability, that they still had despite disabilities or you know, the way in which we need to re-envision the world around them. I mean, you have Hannon in writing in 1980 but, it was still an able-bodied publication. One centered on able-bodied gay male culture. So I think you're seeing those instances of collision really happened when an HIV/AIDS body is described or there's a film review, for example, the film *Buddies* that came out, and I want to say was 1984 or 1985, forgive me for the specific date but, when it came out, you see, there was a film still that was published in *The Body Politic* from the from the movie. And it's just a sullen looking white man with what is clearly a spot of Kaposi's sarcoma on his face, a lesion. And he's looking sullenly into the camera and there's someone sort of blurred a little bit, like out of focus behind him sitting there and the immediate reaction you get what you see that image is, he's alone, he's isolated, he's depressed, there's trauma, and these are all types of ways in which they aestheticize the AIDS-afflicted body. This was also done in mainstream periodicals as well, like *Time Magazine* when Rock Hudson came out and that was news to the world. Rock Hudson disclosed his HIV status and they showed contrasting images and there was one image of a healthy young "heterosexual" in quotes, Rock Hudson, who was virile and square jawed and the epitome of red-blooded American masculinity, and then there was the homosexual Rock Hudson who was frail, weak, debilitated, gaunt. You know everything you can imagine, and it was, like homosexual Rock Hudson and it's like has AIDS. Like you know what I mean the idea is like, okay, so what happens when you lose that sanitized image of straight masculinity? You have gay masculinity, which is, of course, diseased or debilitated.

So I see a lot of instances in which, particularly with the AIDS crisis unfolding, gay men distancing themselves from those with it in order to secure their own desirability and their own sexuality in a way. And it's one of the reasons why you'll see a lot of bodybuilding and gym culture take off because there was this idea that if "I could have muscles and I have a healthy looking body, then no one would mistake me for having AIDS, because I don't look gaunt, I don't look like that." So there was a politics of aesthetics wrapped up in this whole larger concern around sexuality and desirability.

Kelsey: I don't know if this is so much a question, it's more just a comment. What you were saying was really making me think about the ways that the HIV/AIDS afflicted body

became kind of a stigmata of homosexuality. and I'm thinking about kind of the far right like conservative responses to HIV/AIDS, as the wrath of God and kind of the epidermalization of gay sin.

So there was, it's interesting to think about the interplay there between, kind of, how the conservative media was interpreting the HIV/AIDS afflicted body as evidence of internal behavioral pathology in homosexuality. And the response, like the countercultural response within gay male communities in terms of bodybuilding, how just culturally freighted or loaded that was, like the need to disavow the HIV/AIDS afflicted body, because of the way that it was being stylized as like proof of gay pathology, like needing to construct a better, healthier, like, reformed image.

Nick: Absolutely and I couldn't have said it better myself. And I think what we see, so it's a combination of forces with bodybuilding per se, but absolutely, it takes on new meaning away from self-defence or desirability strictly, and it is a way in which, again, to draw McRuer's stigmaphobic distancing back in again, a way in which those who at least appeared or identified as healthy and didn't think anything was wrong with their bodies, a way for them to feel like they could still participate in this gay male culture. And it does also speak to larger concerns going on around the wrath of the far right, and this idea that, you know, this was divinely ordained, that this was a God-given punishment. You have the far Christian majority with like Anita Bryant, and the Moral Majority, if you will, who spoke out against homosexuality. And that's why I think there was such hesitancy at first to believe that AIDS was even a thing, because they thought this was a lot of, you know, mythmaking and scare tactics, fear mongering among those that Christian sect who believed homosexuality to be a sin. And this was very much a response to the Christian right.

But they also felt that Christianity and sort of this moral conservatism was a bedfellow to medicalization. And so they felt that there was, many were, so when I'm seeing these early discussion on HIV and AIDS, I'm seeing not just a critique or concern that this might be the work of the right wing, of social conservatives, but that this was also the work of pathologists who have long felt that homosexuality, like if we could just find that gay gene, if we can just find out what makes you tick, that this was the work of a medicalized industry that has long sought to regulate gay bodies, bodies beyond the normal. And I think that's where we also see another form of overlapping with those with a disability, because disabled bodies have been pathologized to the high heavens.

And again, if they weren't being medically scrutinized they were being regulated. And by regulated I mean putting in institutions, sequestered from the rest of society, right, because that they should not, look at Susan Schweik's ugly laws, there was an aesthetic. Some people could be so "ugly" quote unquote they could not be fit for public life, and they were actually told like stay in your home or go into an institution. Because they had deformities or disabilities that were just seen as "obscene." And we you know, and we would never allow that to happen in this day and age, but in some ways the HIV/AIDS body was treated the same way, like it was so grotesque in a way that it had to die alone in an apartment, you know, away from loved ones or family, because people were scared of contracting it. And that's not to generalize and say all bodies, and I also don't want to perpetuate the idea that gay men were somehow uncaring or unsupportive because there was a lot of love, there was a lot of love and there was a lot of trauma. But I think you would be remiss to not acknowledge, as you said, that they were reverberations with working out with the gay male body as a site as a response to questions about bodily failure.

Caroline: I'm really curious about this because I'm recalling that book, I think it's from about 1983, it's called *How to Have Sex in an Epidemic*, and it's a book about safe sex, right. But I'm wondering about the safe sex discourse and how that came to be part of this, if at all? Was this a way of sort of preserving the capacity of the diseased body to be sexual? Is this about trying to, I don't know, walk that fine line, right, between suggesting that there is risk, but it is manageable? I mean I would really love to hear your thoughts on safe sex, which in many cases actually emerged from within the gay community, right, how that played into the conversation?

Nick: Yes, thank you. So, well you're absolutely right to say that it emerged in the gay community in response to the AIDS epidemic. I mean, before, of course, you had bathhouses and bars galore and bathhouse culture. And promiscuity, I don't want to say was for everybody, but promiscuity was definitely a common practice or a common behavior or idea in the gay male community as a response to what they saw as heteronormative monogamy. They saw it as a way of a big F you, if you will, to straight society's moral restrictions. And this also bled into things, like they were anti-marriage which, funny enough, with AIDS also affects gay marriage, in a way, and I'll get to that in a second but.

So AIDS completely flips this on its head, and you begin to see a lot of vocal proponents within the gay liberation movement and queer activism of the 1980s, say, like, okay, safe sex is needed because we're starting to understand that, you know, AIDS can be, HIV can be transmitted through sexual intercourse, there are certain behaviors that are more risky than others. And at one point I think it was in 1984, the AIDS ACT, which is the AIDS Committee of Toronto, they publish an ad in which showed a very white muscular body, headless. And it said, one in four may have been exposed to the HIV/AIDS virus. I think they just called it, the AIDS virus at the time. But this idea was that that was the body that was having all of the sex, therefore, that was the body that was at risk. And this subsequently, and it's not a way of demonizing any efforts, but what this did was it also imagined AIDS as white man's disease, ignoring the ravaging effects that AIDS has had on racialized communities. Essex Hemphill, and a few other artists and authors have described this lack of acknowledgement of the disease's effects on particularly Black communities, which have been disproportionately affected by HIV/AIDS. And it actually says that this is actually a legacy of slavery in which Black suffering is considered quote unquote "unremarkable." So, it's, we've just become accustomed to Black suffering, so therefore what's the point of talking about it with HIV and AIDS.

And so in Toronto, so you have these efforts to visualize the AIDS body. And as you said, it walks this fine line between encouraging people to be able to still engage with practices and behaviors that had long been standard in gay male sexuality, which was like cruising or going to the bathhouses. At the same time, addressing a very real epidemic that was costing lives. And for many, they didn't necessarily want to give up their sexual practices and so safe sex was, I think, the best compromise they could think of, was through condom use. But I think it was about 83, 84, when everybody really started taking it seriously and saying okay something needs to change. And interesting enough, out of that, we begin to see this huge push for monogamy within some segments of the gay male community, which, of course, and then, in turn, in addition to things like pension benefits and other employment relationship recognition, if you will leads to gay marriage, which was antithetical to the earliest principles of gay liberation. So, in some ways AIDS actually and it's push for monogamy encourages this movement for gay marriage, because to say, like, you know we're just like everybody else, right? And there's a certain homonationalism wrapped up in that. So you know, I think, yeah AIDS completely changes the conversation, and to go around just quickly back to disability, I think, it does spark some benefits. It

makes a lot more people sympathetic to the rights and needs of people with disabilities, right? As people become debilitated by HIV or AIDS or they begin to feel similar processes of isolation or ostracism, they sympathize, right, and it's sad that it takes something like that for someone to them feel empathetic towards another group. At the same time, it also fosters a type of apprehension around the body in which you want to further separate yourself from the disabled body by saying, like, yeah okay, but this is, or even the HIV/AIDS body, afflicted body, because to say like look at, and again that goes back to the questions around and discussions around bodybuilding right? What meaning does the muscular body now have? Well, it says to a lot of people, wow they're healthy looking so they must be a great source for sex.

And just to elaborate just for a second, I think that they promoted safe sex to prevent transmission, not to reclaim sexuality for those who are already been affected. I think that's fundamentally different because those who had HIV/AIDS had a very small platform. They would describe the oppressions they faced with the experiences of the stigmatization of their Kaposi's sarcoma, or if they get odd looks, or being isolated in a hospital ward, right, treated with hazmat suits. They would describe those horrifying instances, but they were used as, I think, in some ways it was almost an illustrative facet of the ravaging effects of the disease, rather than giving them a place to say like I'm still a source of desirability, like I can still make a great partner, I can still, you know. Those were not the kind of conversations they were having. The kind of conversations they were having is, let's stop the spread. Let's make sure more people don't get it. And safe sex was one of the big reasons. So I don't want to make it sound like people with HIV/AIDS were given a platform in which they could say, like, I can still have sex, because I think for them, it almost might have, it might have almost counter-argued against safe sex right, then, to say like okay. So, you know, but it's messy and as someone who also was not alive at the time, I am doing my best to sort through the archival material sensitively as possible, because unfortunately a lot of people who were are not with us anymore. And so we have to take that into consideration as well.

Caroline: That's super important. Thank you so much Nick. And it reminds me of that scene from *And the Band Played On* where they're talking about Gaëtan Dugas, and there's that, it's meant to seem grotesque--this idea of Gaëtan Dugas like having sex, and then something about him looking down and seeing his Kaposi's sarcoma on his body and then saying something to the effect of maybe you'll have this too.

Nick: Exactly, and I only say that as well, because I had done interviews with community members at the time, and one of which who, helped work with Black CAP which was the Black Coalition for AIDS Prevention, in Toronto spoke about racial discomfort, if you will, among some about African Canadians coming in with HIV diagnoses. And there's a sort of like, oh, we just didn't expect to see you here and it's like, okay, so then that's why Black CAP formed, right? I mean, not to say that people were racist at ACT or any other AIDS movement, but there were certain needs that obviously needed to be met within racialized communities around the disease, right. And so, I had mentioned before, they were not being discussed. AIDS was still being imagined as a white man's disease, right? Because white men were having all the sex apparently quote unquote, so therefore they were the ones at highest risk.

Caroline: Thank you so much for that. I want to pivot back to your article a little bit and talk more about a distinction that you make, but acknowledge that is complicated and that is between disability and disease. And I'm curious about whether that distinction was important for your historical actors in the 1980s, and if it was important for you analytically. Can you talk us through some of that?

Nick: Absolutely so. Again, I wanted to make sure I did not repathologize disability and I also did not want to remedicalize, in many ways, the gay male body. What I wanted to show, of course, was that the language of disability was used to describe the effects of the disease, but also that we're now seeing as a result of the disease, a politicking of bodies that matter and bodies that no longer mattered, if you will. Because, well, they didn't matter in terms of sex they mattered in other ways, but they didn't matter in terms of sex. And for some AIDS may have been what made a body fail or no longer sexually viable. So this relegated them, in some cases, to an invisible periphery, and I'm thinking of you know, the numerous instances, which are described around being alone or isolated in an apartment or in hospice or in the hospital room, if you will, the ward. And this is similar to the formal institutionalization which relegated those with disabilities, out of, out of sight. And so again, I think about Susan Schweik's work on ugly laws, but it was important for me to understand the way in which this moment was a time in which the gay male body became a site of collision between these two seemingly different forces. Because by looking at them as two distinct experiences, between those who suffer from disease and those who whether they have it acquired, or they were born with a disability, that there is a similar process of, again, stigmaphobic distancing. There's a similar reaction, a similar stigmatization, and it is that similarity that I thought needed to be addressed, because it has not been discussed in the literature as of yet, really, around discourses or on, or around HIV/AIDS, particularly within the gay and lesbian community.

Kelsey: Thank you so much for that answer Nick. I, my wheels are still turning from so many things that you've said. And one thing that I was thinking about that so curious when you were talking about the ways that the body that was seen as most at risk was this white, highly desired body, like, in the ways that HIV/AIDS was constructed as a problem for white men. And that made me think about HIV/AIDS in a way that I haven't before which was as a disease ironically of desirability, like, the way that it was affixed to whiteness, the way that it was effaced in communities of color. And we know that that didn't really correspond it to reality in terms of which communities were the hardest hit, but it really goes to show just the power of representation.

Nick: Yes

Kelsey: Absolutely.

Nick: Yeah, and I'll just say that there was, and I wish I could remember the name off the top my head, but there was a young man from Atlanta, Georgia, who wrote into *The Body Politic* and again this speaks to the wide scope of the paper. But he writes in and as a Black man and says, and I think he was a PhD student, no word of a lie, and he says, like this is, excuse my French, bullshit. What is going on? Black people are experiencing HIV at such a higher rate, why are we not having these conversations, and he's writing this in like 1985 or so. And it's a letter to the editors, it's like published in the second or third page of that issue of *The Body Politic* and, you know, so we see some pushback but we never, as we said, we don't see that representation. And I use *The Body Politic* again because it was such a large source, I thought this was a great place to see, if there's going to be representation it's going to be here. And there wasn't. There were, I mean people were still, there was a gentleman in 1981 by the name of John York, who called himself, the only clone on Howard Street. He was like, I'm a Black man and I'm the only clone on Howard Street because he identified with macho clone culture. But what did I, you know, macho clone was predominantly white. It was seen as like a almost a ubiquitously white phenomenon. And so, he lamented that. And so, for now all of a sudden, to say he's fighting to just even be recognized as a clone, what are those who have HIV/AIDS, which

are already getting kind of swept to the side because you have the rest of the community who's like again, we want to be seen by normal by mainstream society, I mean we live in a society which has policed and regulated us. You know there's a, as by formal doctoral advisor had written a book called *The Canadian War on Queers*, you know, there are state campaigns against homosexuals, there are the medical professions after homosexuality, you know, there are all these forces facing against the homosexual, gay and lesbians at the time. So the last thing gays want to do is say, oh yeah, by the way, we're also harbingers of disease. I highly, I don't think they do. So, you know it's already a sensitive topic, and then to add the racial dimensions to it, I think yeah, and you can't expect them to do, you know, you can't go back and look at it from like the sort of condescension of posterity, but I think it's important to recognize, as you so eloquently said it, was all about representation, the politics of who was seen and who isn't.

Kelsey: Right, right, and I think when you were, when we're considering those politics of representation and race here, it also goes back to a reference that you gave us earlier about, like, Judith Butler, bodies that matter. I mean another Butler reference, thinking about what makes a grievable body and what makes a grievable life. It goes along with how we constitute or understand bodies that matter. There's that correspondence with grievability and what kind of suffering is intelligible. Which bodies do we care enough about to even position them as being at risk? Yeah.

Nick: Yes.

Kelsey: There's so much there. I want to circle back around to something that you said earlier that I thought was so beautiful about your approach methodologically, or like historiographically in this article, where, you said that you don't feel like you're addressing a gap as much as you are reformulating a truth. And I think this ties in really beautifully with something that I've been thinking about historiography, just the historiography of HIV/AIDS and the ways that it has yet to adopt, writ large, like a disability studies framework as a critical lens in the ways that you are, thinking about the interanimation of disease and disability, like a language of disability during the AIDS epidemic. But of course, disability was always there, like I'm thinking about like Doug Baynton, I'm going to paraphrase it, but this idea that like disability is everywhere in history, you just have to know how to look and where to look. And so I'm wondering like what do we have to gain from framing this history, through a lens of disability studies or through a lens of disability history.

Nick: Well, I mean, first and foremost, of course, we have, we have the opportunity to learn that, again, people with disabilities, gays and lesbians with disabilities, were there all along right, I mean that's first and foremost. They were just as much a part of the gay and lesbian community of the 1970s, as were cisgendered gay men and women. And I mean, we've done this with Stonewall. We've talked about people like Marsha P Johnson and Sylvia Rivera and we're rewriting history in that respect, but we haven't done the same with disability studies, with persons with disabilities, and particularly in HIV/AIDS narratives.

But I think one of the beautiful things about disability studies is it also gives us an opportunity to learn more about the feelings of isolation, loneliness, and the critical relationship many victims of AIDS had with their body. And I think the concern for bodies, anger at bodies for failing, shame or guilt around bodies that might not perform these legible or these desirable performances of gender or sexuality, they evoke certain emotions and I think that helps us work through them and locate those emotions. So, I think of Ann Cvetkovich's *An Archive of Feelings*, and the way in which we can understand emotion after

it has been experienced. And Matt Cook has actually done this, and I believe it was in 2017, explored this, in the archive of feelings article with the AIDS crisis in Britain. And it's brilliant because it gives us an idea of how we begin to push an analysis of that trauma, that those emotions, those experiences around HIV/AIDS in a way that decenters ableism, that it shows, it gives us the tools to unpack HIV/AIDS as simply an epidemic, which I think, by looking at strictly in terms of disease, in some ways we pathologize the narrative. It places it almost exclusively within the realm of medicine and, yes, we can talk about the cultural reverberations we have had with the disease, and there has been plenty of narratives on this, plenty within the historiography. But what has yet to be explored, is the way in which this impacted conversations around disability and, or even marriage, as I mentioned before, that I would make the argument that AIDS fundamentally changed the meaning of what gay marriage could possibly be for the queer community in a community that had long been almost, I would say, opposed to the idea, or you know systematically opposed to regulated monogamy. Like if it works for you, it works for you, but don't tell me it has to work for me. And I think that reformulates as well. But it provides us with a new comprehensive set of tools to approach HIV/AIDS as something that does more than affects the body, it affects cultural representations of bodies and how we come to prize and desire certain bodies, right?

I think I always see this as a breadcrumb of trails to how do we get to now? How do we get to a day and age in which still all the bars and you know Prides and all these festivals, they promote a particular image of gay men, one that has not changed very much. I mean I show this when I'm teaching this. I show an image of a 1973 periodical, the cover, it was called *After Dark* and then I show a 2019 issue of, I believe it was *Attitude* or *Out*, one of them. And it was, you know, a gay male porn star and it's like his gym regimen, and I'm like, oh who cares. But you see this and you're like, and everybody's like, I was like, what's changed, and people are like, uh, nothing? And I'm like, very good! Forty years, nothing's changed. Like, you know we're still talking about the same queens, you know, and it's just, it's so unfortunate. And you know, just as I think some people tiptoe around HIV/AIDS, because there's this hesitancy to talk about it sometimes, because they go oh, do we have to talk about AIDS if we're talking about queer people? Like, why do we always have to talk about AIDS? Especially gay men. And I'm thinking well, a) because it played a pivotal role in formulating gay consciousness and gay consciousness raising. But again, if we reapproach it from new lenses like disability studies and sort of a crip lens, we can also unpack that trauma, and that sort of leads me also to my next project in which I'm looking at queer trauma and the anticipation of violence, so.

Caroline: That's a perfect bridge actually into our next question. Thank you so much, Nick. I want to ask you, we want to ask you, about both of your books, so we understand that you currently have a book manuscript under contract with U of T Press, University of Toronto Press and that's *Politic-ing the Body: The Aesthetics of Masculinity During Gay Liberation, 1971-1987*. And then you also have just alluded to another book that it seems that you're formulating. So, can you talk us just, in brief, through these projects, and I think we'd also really like to know how this particular essay that we read, that's going to be in *DSQ*, fits into this upcoming book.

Nick: Yes, thank you. So, my book under contract with the University of Toronto Press tentatively titled *Politic-ing the Body*, of course, is based on my doctoral dissertation but has since been reformulated, and as I've continued to enmesh myself in disability studies has been repacked and reshaped, as all good books eventually become, it ends up being almost unrecognizable from its dissertation. But this book in itself looks at *The Body Politic* and explores the integral links between the presentation and aesthetics of gay male masculinity and the visible politics of gay liberation. And what I argue essentially is that

gay liberationists played a fundamental role, and in this case *The Body Politic* played a fundamental role in mediating notions of gay male masculinity, what it meant to be a gay man, how one could look like a gay man, what was a desirable performance of masculinity. And this was wrapped up in the politics and the benefits of a sexual liberation, and so we see images and representations and discussions of masculinity, particularly the white macho clone body, the perpetuation of racialized notions of masculinity, particularly the idea of like Asian docility or Black hyper-sexuality. And we also see, of course, then, the overlapping narratives of disease and disability in discussions of AIDS and how that affects gay men. And, at the end of the day I just I thought it was interesting that if visibility was such an important, integral component for gay liberation then, what did this, what did these forms of representation mean on a cultural level? How did it shape, you know, questions around masculinity, to the point that we still have similar discussions about certain bodies being more valued than others in the gay male community?

I mean, what inspired this book? Well, you know, of course, was that first article I'd ever written about the Peacock Revolution. I'm like well if straight men are identifying through this, you know, ostentatious clothing, what are gay men doing? And then I was like, oh they're wearing work boots and construction wear and, you know, their sort of *On the Waterfront* Marlon Brando aesthetic. And I'm like oh, this is sort of ruggedness, this almost working-class masculinity that's being invoked. And I thought this is really interesting, right, pronounced musculature, and all this fun stuff that's shaping images of masculinity. So I wanted to see what the other half was doing. But then I began to work through it more and realize that these conversations mirrored broader conversations around the politics of sexual liberation. And we still see this today, where people say, you can't tell me what I like I like what I like, right? And you know people would say extremely offensive terms in terms of exclusion, so they might say something like, you know, "no Blacks, no fats, no femmes." That was a common thing you'd seen classified ads, very offensive very, very offensive, you know, and I apologize to the listeners. But you would also then see when that certainly becoming increasingly scrutinized right and they said, like you know, at the end of day don't be a jerk. Just say what you want, don't say what you don't want.

But then we see the politics of whiteness get bound up again, because they would say I'm a white able-bodied macho muscular man looking for this same. And it is that politics of sameness that reiterate the desirability of the white muscular body. And some people say well you know, maybe they were just looking for the same? Well yeah, but then they're also saying, nobody else need apply. And another way you would see in the classified ads or articles in which they would say something like, oh, you know Blacks and Asians welcome too. And I thought that was really interesting because to me, then, that says like, oh they require the affirmation of the original writer to say, oh you're welcome, by the way, to apply to hook up with me or whatever. And I just thought, this politics, but we're still seeing that today. We still see it in the community today, and we'd be lying if we didn't. Because anybody can open up a smartphone and download one of those apps, any of those social, you know networking apps for the gay male community and see a similar politics being invoked. And so, in many ways, after my own experiences, or reading, for example, an article in *Toronto Magazine*, the author will remain anonymous, but reading a particular article, and I nod to this in my book about the Pride body, all about that Pride body, about having to work out twice a day and, go on a religious diet, and go to Tom Ford and get flip flops, and get a Versace bathing suit for the cabana party in Toronto. I'm thinking this like, I first, I was like is this sarcasm? This has to be, this can't be real. And then you read it and I'm like, oh no they mean it. And then you see what they look like and, the, all their friends and, like they're clones, like they're all identical. And this of course it sparked immense backlash because it helped create the, the body pride movement, which, love the body you're in.

But there's this obsession with this particular body still and so that's just fueled my desire to then speak truth to this power, if you will, because this still has a lot of power in the gay male community. There's a, you know, gay men are six times more likely, I believe the latest statistic came out, are six times more likely than their straight counterparts have an eating disorder, because of things like body dysmorphia. This perpetuates that. But what I wanted to show was that this is not new. This has been going on since the 70s, since the formulation, the formative years of a gay liberationist culture. That, you know, you have gay liberationists who are seeking to celebrate all bodies, so I don't want to say the editorial collective of *The Body Politic* by any means perpetuated one type of body, but advertisements in the paper, other people writing about it, even in some of their own illustrations that they published alongside their articles, perpetuated the notion that there was a very desirable type of body. And it was white, macho, muscular, able-bodied and so on. What were the repercussions for others who did not fit this norm? That's what I was interested to know. I didn't really care as much about macho as much as I cared about what it meant to not be macho, you know. And we see similar politics around effeminacy and what not, you know, and failure of gender come into play. And so that's essentially my book, in a nutshell, is exploring those mediations of masculinity and what they mean.

And then my second book to go off and this is one that is truly, has enmeshed me fully into disability studies, is I'm looking at queer trauma. Not groundbreaking I know, queer trauma is not new, by any means. But the aspect I take, and I have to say this as a co-authored book with a good friend of mine, Celeste Orr, and what we've come to find is that there is an anticipation of violence that contributes to queer trauma. So saying something like, it gets better. It's a common misnomer, a common phrase used within the queer community about, you know, it will get better, right it's going to be okay. But what that implies for a lot of people, is it's going to get rough. In order for it to get better, it's got to be bad. So whether that's bad now or that you can expect, especially when you disclose your sexuality or your gender identity, it's going to be pretty shitty, but it will get better. So I'm approaching it from almost a pretraumatic stress disorder, like a what happens as a form of pretrauma, and then wrestle with the politics of this ableism, of this in some ways, we have ugly laws 2.0 within the queer community, because we don't want to envision bodies that fail, bodies that don't matter. I mean, we still wrestle with the politics of desirability. So Celeste and I were thinking about the ways in which this continues to reverberate in the contemporary queer community.

But as a historian I'm always keeping in mind that there are historical linkages. That this is not, this does not exist in a vacuum. It is actually from a long rich history, about the ways in which bodies fail or are perceived as disabled or just do not fit a norm or mold are ostracized or regulated, right? I mean I could tell you the countless times in Ottawa I've heard that it's a conservative city, right? It's a government town, it's like, you know, it's our capital and there's a lot of talk about, as a conservative city if somebody is more flamboyant or has purple hair or whatever, that they're going to have a harder time dating in the city as a gay man, because you know it's a conservative city. And people want that very masc for masc crap. And they want that legible, conservative, traditional type of masculinity. And I'm thinking about this I'm saying, okay you don't necessarily have to put someone else down to enact this type of trauma. I mean this trauma can be also enacted by the fact that you're even acknowledging, that you're excusing that type of policing, because it's a conservative city, right? All it says to people is like, stay in your nice little neat box and if you transgress it there are consequences. Like, you are no longer a desirable man. If you butch up, everybody's going to love you. But I see that as extremely, I see that as a violent act, I see that as another form of violence, right? And I'm taking from Eli Clare when I talk about this as horizontal violence, right. And so I'm thinking about

the ways in which the queer community enacts forms of violence against itself and within members in it. So, I'm not, I don't know, maybe I'm the black sheep of the queer community in some ways, because I want to talk about the violence that's going on within it.

Caroline: That's so interesting, the way you're talking about this anticipatory trauma within the community

Nick: Yes

Caroline: because of anticipated trauma from outside the community, right? It's this yeah really, really vicious sort of situation. And also really understandable, knowing the history, right of why people feel the need to protect their communities in this way? Yeah, I'm really glad you're doing this work, Nick. It's really important.

Nick: Thank you, yeah and I just it is it's so wrapped up in, as you said, it's about protecting the community in some ways. It's about making sure that, I think for some gay men that they're still seen as normal, that they can fit in, like they're still mainstream, they're still men. And I can speak, primarily because of my research on gay masculinity and gay men, but I think just queers as a whole, like there's a certain homonationalism that's wrapped up, to say like we're good we're desirable queers, we're not going to rock the boat too much. You know we'll ask for things like gay marriage, but what we know, we still got, we still perform our gender in legible ways, traditional ways. Then you have queers who don't and they find themselves on the periphery. And I see this even among my students. So I can't say that, like I'm not, this isn't some deep dive into post-structuralism in which I'm looking for shadows or specters that don't exist. I see some among my students in which I teach a whole class called queer activism, and the amount of cis-students who take for granted the privileges that performing a very traditional, legible type of gender provides them with, compared to those that don't, especially those who don't in visible ways, makes me think of the ways in which we read bodies. And that's where again disability studies really helps, because it's shaped the way in which we box bodies, and we understand, and deconstruct bodies, and then give meaning to certain aspects of the body. So it's one thing to see a body, and some see someone sitting in a chair, but then see that same person then move themselves into a wheelchair, and the entire meaning of their body fundamentally shifts in that moment. For better for worse, but it's the way in which, right, and Erving Goffman would say that that's a sign vehicle in some way, right? It's an indication of someone's identity beyond their own gesticulations, and voice, and mannerisms and so on. I see this as something we oscillate in and out of, just as I see, like coming out, right? People think when you come out, the world knows you're gay, well no, the people you came out to know you're gay, or you know, non-conforming, or whatever your gender identity may be. But the world doesn't, and we go back and forth right. We oscillate based on where we are. If I'm at a gay bar I'm going to be much different than if I'm at a sports game, perhaps. And I think the same thing could also be read for certain disabilities, that you read them differently based on the space they're present. Right, and so I think that's something that I'm always cognizant of because I think about who's welcome in certain queer spaces and who isn't. And I think that's a form of violence, as well, is that, inclusivity and that exclusivity. So again, this is just I'm, seeing as like it's you know they call it internalized homophobia. I think it's also partly, it is internalized ableism.

Kelsey: Absolutely, and just thinking about the ways that ableism and homophobia borrow each other's language. Because the way, one of the signifiers of able-bodiedness is the performance of normative gender. So there's always that relationship at its basis, and oh my gosh, I'm just so excited about these projects. They're so phenomenal and especially

the way that you're thinking about anticipatory violence as a form of trauma, in itself. The fact that so many queer people anticipate violence, not only from outside of their community, but from within it.

Nick: Yes, and I'm thinking about feminism of the time, right? 1980s, 1990s feminist thought about, you know, women anticipating violence. And so I'm thinking about it in that respect as well, as this anticipation of violence from a feminist standpoint, of you know, what do queers do when they anticipate violence? Walking alone at night or walking down that dark alley? But I think, in some ways they don't expect it, first and foremost from their own community, but then, when you get in it and you experience it then you realize oh, we're not as loving and embracing and all about the rainbow as people think we are. And that's not to demonize anybody. It's to say that we're humans, and we bleed like everyone too. And there's nothing about being a member of the queer community that makes you any more or any less ableist than being in mainstream society. Or any more or any less conformist or homonationalist, right? I mean, in Canada, at least it's sort of like a shut up, get your \$10 queer loonie, celebrate fifty years of decriminalization and move on. And that's, you know, and a good friend of mine, Tom Hooper is doing some incredible work on speaking truth to that power, by saying you know the government's co-opted Pride to promote a certain liberalist agenda. But within the queer community, it just, it saddens me. And that's why I do the work I do, because I think there's so much room for improvement. There's so much need to hear voices which have gone unheard for too long.

Kelsey: Absolutely, and I think everything that you're saying, and this really speaks to the importance of your work. The, having the capacity or the willingness to critique violence within your own community, I think, is such a demonstration of love, like, a commitment to just improving the ways that we, like within a community, we relate to one another, working through the ways that we've internalized our own oppression in various ways and enacted them on other bodies, like creating stratification within communities, to do that work of self surveillance. And I mean you've brought up Goffman, a couple of times, just like thinking about the complexities of stigma management and like border policing within a community. There's so much there. And your work is just so vitally important. Thank you so much for, for sharing your projects with us.

Nick: Thank you. Yes, it's really been a pleasure, thank you.

Kelsey: Yeah, so I have one more question and you can kind of take this wherever you want. I noticed that you're the Director of Research for the Canadian Centre for Gender and Sexual Diversity's proposed LGBTQ2S+ museum in Ottawa, Ontario, and I'd love to kind of pick your brain, hear more about this work and how it speaks to your life as a researcher, as an educator. And are there any other exciting projects for you on the horizon, other than these phenomenal book projects, which I'm sure keeping you very busy?

Nick: Yes, thank you. So, the Canadian Centre for Gender and Sexual Diversity, which is, I like to use the acronym for the sake of brevity, the CCGSD. So they are a national organization headquartered in Ottawa. And, at the time, a few years ago, they had started sourcing some money to build what is the first queer museum in the world, a national queer museum. That, of course, since COVID has constantly been changed and is in flux. But one of the things that, I've remained, so I still direct a lot of student research there, it might not necessarily go into the museum per se, but one of the things I've learned in my capacity as this research director is the importance and the criticality of having students see firsthand what broader implications their research has, that it can exist well beyond the institution, the halls of academia. So I've mentioned before, that I teach a queer activism class at the University of Windsor. And it is my, it is truly like my pride and joy, like this

class is everything I embody as an academic. And one of the things I have students do, and it's not just about writing essays. So I have them write op eds, and I have them do things like that actually demonstrate a type of queer knowledge and make it accessible for the public. But I also have them go out to the communities and they engage in what I call experiential learning, and these are practicum-based learning in which they go out and they can make gender neutral washrooms at a restaurant, they can go in and give a training lecture at their workplace about the importance of using gender neutral pronouns. Just make the world a better place. And so this is a fundamental core to my classes, but I have them do research in relation, with relationship to the CCGSD. Because the CCGSD is also housed, where it also provides a lot of support for gay-straight alliances across the country. So I find that it's a critical relationship, that I have directing student research on any given topic, whether that is on the trans experience, it's looking at Two-Spiritedness in Indigenous communities. They're looking at, they want to talk about Black trans lives and Black trans liberation, or they want to look at the fundamental need for greater space for Black Lives Matter in the queer communities. Like, there's some really excellent topics and projects. And for me, then, to have it then also come back and speak volumes in the classroom and shape how I teach, is monumental.

So I'll give you one great example, and this is just, you know, again, another direction that disability studies has pushed me in a way. And so in my interviews for this project for this book on trauma, as well as me looking at disability activism, I've interviewed a few, a number of activists, particularly those in Toronto. And one by the name of lezlie lee kam, and they are just wickedly brilliant and they call themselves a world majority dyke. And lezlie lee kam has an acquired disability, but has spoken at great length about the work they do with seniors and older queers and the need for greater LGBTQ2S+ training in senior homes and long term care facilities.

And so I teach an entire lecture on ageism in the queer community. That's something we still don't wrestle with a lot of. We talk about, you know, Pride as this great monumental space, but let's look at who's present in Pride, who's seen as welcome at Prides. And let me tell you, it's not queer seniors, right? They're not envisioned as being exactly the face of Pride. We always see this youth. And you know, again, that also stems into the It Gets Better campaign of saying, let's get the youth in here so that they can feel accepted and have a sense of community. But for many queer seniors they go back into the long term care facilities, once, you know, if need be, and they're forced back into the closet. There's a lot, rampant homophobia, transphobia and so on, within the queer community, or sorry, within long term care facilities that affect the queer community. And I think that's something that's not being discussed. And the work of like lezlie lee kam is extremely vital in that way. So what I've done is take my interviews and take the research I've acquired from this and actually teach students the same types of practices and processes that contribute to this type of ageism and homophobia, this queerphobia, if you will, and looking at these intersections.

And so I've actually had three or four students this term I just finished this term, from January onward, go to long term care facilities in my hometown and actually say like here are some manuals. We're going to start addressing like the type of homophobia that exists, not just among other long term care residents, but among the staff who don't know how to engage, right? Queer people in long term care facilities often are separated because there's worry of relationships forming between people if they have a joint room. You know, they are mocked or ridiculed. They may face violence in different ways. And again this goes into how I'm thinking about queer trauma and violence. We can't just think about young people or people who are newly out, or don't know how to navigate. We have to think about people who are already out. Our forefathers, and mothers, and fore-you know-parents, if

you will, who fought so hard for our rights, and then we put them into our care facility and they're almost, they're revoked of those same privileges and rights they fought so hard for outside of it. And, yeah, so that's sort of my impetus and where I see my research and my education intersect, right? Is acquiring these skills, but then passing them on and making sure students can do the same type of social justice activism, speak truth to that power that I tried to do so in my books, in my own work.

Kelsey: Nick, this is such a powerful work and it's meaningful to me in a lot of ways. I mean I love the way that you're thinking about extending your reach into public education and scholarship and focusing on this intergenerational transmission of knowledge that I think, unfortunately, is often lost in queer communities over time, partially because of ageism and not continuing to include queer elders in our movements. And I, I just want to talk with you at a later date, about the work that you're doing with lezlie in this long term care facility. I'm working on an article right now on, also looking at HIV/AIDS, but I'm really interested in examining the AIDS epidemic as a site of accelerated aging in queer communities. And I'm thinking a lot about ageism within queer community. I, like, wrote my undergrad thesis on growing old as a queer time.

Nick: Amazing.

Kelsey: And I was like really curious about like what are the unexamined parameters of a queer life course and, like the ways that queerness is so naturalized in terms of its proper place within youth, to the point that there's a tacit assumption that people age out of queerness.

Nick: Yes.

Kelsey: And that correlates with violence and institutionalization, unfortunately. Yeah.

Nick: Absolutely, yeah when I interviewed Joanne Doucette, who was one of the founding members of Disabled Women's Network, okay, and they formed in I believe 1984, they were formed, if not officially 1985. Joanne Doucette, so I'm talking about it, she's been around for a while, we were, I was like, what was it like, she was one of 17 founders of the organization. She said when you're in a wheelchair, people only see you for your wheelchair, just as when you're older, you're invisible to younger people. And I thought that was extremely powerful because she's spoke about being relegated, what she saw as invisible. Being, being almost unrecognizable to many queer folks as a lesbian because of her age. And I think this has to do with the fact that the queer community is founded on, ideally, I mean, it was, especially in the 70s and 80s, on one core principle: same sex desire, right. That there was a sexual difference, you know. And of course it's now come to be including of gender identity and asexuality and intersexuality and all these wonderful things that the umbrella, you know, now we have alphabet soup, as they say, right? And I think it's wonderful, but in the 70s and 80s, it was all, primarily around same sex desire. So you have a culture being formed around sexuality. So what does that mean for bodies who cannot participate in that type of sexuality, right? Whether they're disabled, they have HIV/AIDS, or they're too old, right? They're no longer sexually, that means they can't participate in a culture that is grounded on sexuality. So I think that is the, I mean mainstream society, I would argue, is just as much sexualized and grounded on sexuality. I think they've done a better job hiding it, and sort of covering it up with all this moral aptitude, but queer sexuality, I think, because it was so explicitly vocal about, you know, it's our desire that has bound us together as gay men as lesbians, and then, of course, inclusive of the trans community and so on as it grew. But sexuality, since it's this linchpin, I think those who are seen as being unable to perform a type of sexuality or are no longer

sexualized then feel like they can't participate in that culture. And I think that's just part of why again, as you said, we see this aging out, and aging is a very queer thing. I love that and I just think that anytime you want to talk about ageism and how this can shape, even with HIV/AIDS, like the idea of accelerated aging, that is fascinating.

Kelsey: I will definitely be in touch with you. I feel like we have a lot to talk about.

Nick: Excellent. Absolutely.

Kelsey: Thank you so much for joining us today, Nick. This was such a phenomenal conversation, and I know our listeners will be so thrilled to hear all about your work.

Nick: Thank you very much for having me I'm truly honored and humbled that DSQ offered me the opportunity to speak on such a great platform about my work and to hopefully help others navigate their work in a similar capacity.

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Caroline: Thanks to everyone out there for listening or reading the transcript. Please join us again next time. Bye bye!