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2018

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How Can the Humanities Treat HIV/AIDS?

An Interview with Dale Smith

A: Amita Rao

E: Emily Furlich

D: Dale Smith

A: What do you see as the biggest challenge socially for treating HIV/AIDS in the future?

D: Oh my gosh, that's such a big scienc-y research-y question. I would say off the top of my head — and again not as a researcher just as a human being and a teacher of the humanities — knowing what I know about LGBTQ history and AIDS history, I think a big challenge for treating it is two things: the silence surrounding it, and the continued stigma of those who are diagnosed with HIV. I think there's this documentary — I forget the name of it now — I believe it's a PBS frontline documentary about HIV in communities of color. It's a very recent documentary, recent as in the last five years or something like that. You would think that the documentary was from the 80s with the degree of silence within the community, but it's *recent*. And I think with those communities, it's stigma upon stigma upon stigma, like how many strikes does somebody want to have against them? And are you going to own all of these strikes against you? So I would say, two big obstacles I see in the future with the treatment is the silence surrounding HIV/AIDs, our cultural silence, and particularly the cultural silence in marginalized communities. And the general cultural stigma and the enhanced cultural stigma within marginalized groups.

A: Do you think the appearance of queer literature, such as the type you feature in your own curriculum, do you think the appearance of those curriculums would destigmatize the topic?

D: Possibly. You know it is so complicated. I don't think there's any one thing you could do that would lessen the stigma. Talk about [a] disease in which so many identities intersect. And so I think for the stigma to lessen, so much would have to happen. There would have to be less homophobia. It got pinpointed early on as a gay male problem and that stigma, or that idea, has stuck around and within certain communities that's a very shameful identity to have. So, there would also have to be education that this [disease] is not a gay male problem, this is a *human health* problem. Also, another community that it hit really hard early on was IV drug users. Also a community in which people feel a lot of shame, as either being a part of that community or having someone in their family who's a part of that community. So, I think for the stigma to lessen — yes, a lot of it is education,

but it's education not only at a community level but at a broader cultural level. And you know, it has to happen in so many areas: health education; there would need to be a shift in people's religious interpretation of HIV/AIDS; there would need to be a shift within marginalized populations so they would not feel whatever shame they have over this condition. Just many, many things would have to shift, and yes, education is a part of that. Just getting LGBTQ history into middle and high school curriculums — that's a start. But it's hardly going to be the solution to the stigma people have regarding HIV/AIDS.

A: Did you experience any roadblocks getting the material into your curriculum?

D: Not at all. You know, but we are at *VCU*. I don't know what it would be like at other institutions. I think *VCU* students are not always *aware* of what *VCU* is offering them that maybe they wouldn't get from other institutions. I graduated from college in 1992, which is really not *that* long ago, and the course that I teach would never have been offered at my school in a million. A professor wouldn't even think of offering it, not, "Oh, I want to offer this and the school wouldn't let me," but just the idea that [queer literature] could be a whole semester scholarly endeavor was not on my school's radar in 1992. And, now, I think there may be professors at institutions who would like to offer something like that and maybe they would feel uncomfortable with bringing it to their department that they want to do that. But that's not the case at *VCU*. If anything my department is like, "Dale, what else can you do? These classes *fill*." And I'm thinking, "Well, I have other interests of things I want to teach. " And it doesn't *have* to be the gay faculty member that does it.

E: What are the benefits of doing research in HIV/AIDS literature in particular?

D: You are making sure that history is not forgotten. You are amplifying voices that are easily silenced. That is my gut level reaction to that question. When I teach the fall queer lit class — Emily knows this — students arrive with a hazy sense of AIDS history or zero sense of AIDS history. Which to me is amazing because, again, this is not that long ago and it's not as if we have a cure. People *live* with HIV/AIDS, but they are not *cured* of HIV/AIDS. And we had a lengthy period worldwide with masses of people *dying*. And I am amazed that student arrive not knowing that masses of people died... very, very quickly, at an exponential rate. And I don't think they know how to wrap their minds around it. I think part of the reason for me it's so surprising is that I was in college '88 to '92, so this was the height of people dying of AIDS. And imagine coming out of the closet during that time, the fear that would surround sex. Like, "Okay, I'm coming out. I'm finding my identity, but it's so scary to have sex with anyone." I remember going in college to get tested for HIV — and it's not like now, where you get results like that, it was a two week wait. And then you had to go back in person to get the results, and you had to wait in the office, and your name was called back and then the person would tell [you] whether it was positive or negative — there was a lot of fear and anxiety. So, again it amazes me that students don't know that history. And so, I forget exactly how Emily phrased the question... so I would

say what this does is amplify voices and keep history in people's minds of voices that would otherwise be silenced and history that would otherwise be invisible or forgotten. I've actually had students say this before, "If you get HIV you can take a pill, or take pills and you'll be okay, you'll live." So for them, it's not that big of a thing.

E: I also think it's important to focus on HIV/AIDS research in the humanities because I feel like — even [with] people who lived through that time — there was a lot of misinformation. I remember when we were focusing on *The Normal Heart* in Queer Literature, I would call my mom and talk to her about it. And just her perceptions were so different from all the new knowledge I was getting — especially from the political side, and how much blame should've been placed on the Reagan administration or the Bush administration. So, I think it's important not only for young people, but for the people who lived through it too, but just weren't really paying close attention to the facts.

A: It's also just crazy that it was only 40 years ago, and the bubonic plague was 400 years ago, and everyone knows about that.

D: I've had students in class say, or they'll say in essays: "I think I had an uncle or cousin who died of AIDS. They died when I was really little, or they died right before I was born, but no one in my family really talks about it. But I think they might have died of HIV/AIDS. So there's still, here in 2018 — same sex marriage, hooray! — just that silence. That airtight silence and shame that families feel. And so, I think in humanities research, keeping this out there, hopefully over time would trickle down to less shame and stigma.

A: Would you like to see scholarship in a particular area? What would you like to see done in humanities?

D: You know as someone whose published work is predominantly creative, I'm all about story. Just sharing that human experience. And I know in researching for the Queer Lit class here at VCU, something that I found helpful was captured oral histories. Just, "This happened. This was my experience. This happened." Just getting down to that very individual human level. Not letting that disappear. Getting it while people are still alive and able to share it — that sort of grunt work research. [Like], "Let me go out and talk to people who were alive at this time, who lived through it who are either living with HIV/AIDS or are new people who died" — and that sort of research is happening, and I'm really glad. You know, this is a genre of literary scholarship that will only *expand*. But literary scholarship on queer literature, AIDS literature, again, this is something that is happening and it will just continue to expand. And VCU just made three hires — you know, LGBTQ scholars. That was part of our big idea initiative. And so, the dean hired three, and we hired an LGBTQ historian, and there's going to be a fall class in global LGBTQ history. But I am a co-chair of Equality VCU, which is a faculty staff LGBTQ advocacy group, and one of the things I get to do is meet with President Rao once a year to talk about what VCU is doing on these issues. And President Rao has been very clear, "I want VCU to be a national leader in inclusion and scholarship regarding LGBTQ people and experience." And I think that could be happening.

E: What advice you would give to undergraduate students who are doing research on HIV/AIDS literature, particularly in the humanities?

D: Read the big titles. But then dig deep. Read the work of marginalized authors whose experience with HIV/AIDS is even more complicated than the experience of someone like Larry Kramer in “The Normal Heart.” I would also say, there are scholars out there right now who are probably really young — like 30 some-years-olds, fresh off their PhDs — who are doing cutting edge research that hasn’t been done yet. Get in touch with them! Just do Google research, see titles of dissertations. Look at American Studies programs, see who did a dissertation involving LGBTQ work. Look at literature PhDs, see who did a dissertation on it. You know, get in touch with people who are doing it *right now*. That’s what I would say for undergraduates, if you’re interested in doing this. Read broadly and deeply, the big titles, the famous titles, but make yourself find titles who are not read as much and the authors who are not read as much. If you’re interested in researching, you know it would not be a bad thing get in touch with LGBTQ scholars right now. Here’s something else I was going to say: there are museums out there, archives out there, you can get in touch with them. Like in San Francisco, there’s a museum of LGBTQ history. In New York City, the New York historical society. You know, they have all of these archives. Make contacts, at these places — they are there as a resource, they want to help you. And they have those oral histories. They have primary sources that can be of help. And usually these are small staffs, how excited would they be for an undergrad to reach out and say, “I’m doing research on blank.” And San Francisco and New York City, those were ground zero when HIV/AIDS hit. Center for Disease Control in Atlanta — or, at least it used to be in Atlanta — that would be a place you could go for research. This is going beyond the humanities, but —

E: We’ll take it!

D: That is just me freethinking off the top of my head if a student came to me and said, “I want to do research on this.” And there are so many authors still alive who have written what I now consider to be canonical work in AIDS literature. Larry Kramer is still alive and it’s been on my to-do list forever to write him a thank you note — just for being who he is and writing *The Normal Heart*. You know, Michael Cunningham, who wrote *The Hours*, who does not have HIV/AIDS but was there when it all *went down*. You know you can write authors and say —

E: You’re making me want to do this now. *The Hours* is my favorite novel.

D: I’ve tried teaching that and for me, it doesn’t teach well. I don’t know what it is, students are always very quiet about it. They like the book, but maybe I haven’t figured out the questions to ask about it to make students talk about it.

E: I would be so excited to be taught that class, or that book, because I do think it'd be hard to teach because there's so much going on. But yeah, that was formative for me.

D: I think it's a good ENGL 301 kind of book. Read *Mrs Dalloway* and then a few weeks later read *The Hours*. But I've taught it twice in Queer Lit, and neither time have students really jumped in conversation. I don't know why. Although, I can tell from their essays that they enjoyed the book. But just for whatever [reason] — and you know maybe it's me, I haven't figured out the right questions to ask about it. But I've talked to other people who taught that book, Dr. Swenson is teaching it in 301 this semester and she's like "No one's talking about it!"

A: What have you seen as the most influential work surrounding HIV/AIDS? It can just be your favorite, too.

D: Well, for me, it's *The Normal Heart* because it's so raw. You know, it's this human cry for acceptance, for visibility, and it's righteously angry. It's not angry for the sake of being angry. Ned Weeks has very real reasons for the anger that he has. Yeah, that's something that I just really love. You can say you love that play because it's so *sad*. But at the same time, there is hope in it. And I think Ned Weeks believes in human beings. As angry as he is, he believes in human beings and he loves human beings, and that's why he's so angry. Because human beings are dying and other human beings are not trying to make it stop. But you know, there's just a wealth of things out there. Comedies, believe it or not. Very vocal memoirs. A novel that I like more than *The Hours* is Michael Cunningham's earlier novel, *A Home at the End of the World* which also has HIV/AIDS as a theme. You know, that novel is not as beautifully constructed as *The Hours*, it's a lot more messy, but I think in the messiness of it there's more to grapple with than you get in *The Hours*. I'm trying to think of anything else, but yeah, I think for me it's just *The Normal Heart* that's the most inspiring. When I think of what I want to do with my own writing is, you know, that call to arms. To make people want to go out into the world and *do something*. That's what I really admire about that.