Interview with Sister Joanne Lucid, B.V.M.

Interviewed by Fraser Nelson

Interviewed on August 10, 1994, at Fairview Riverside Medical Center, Minneapolis

FN: Joanne, as you know this is a discussion about HIV and where we are in our community's adjustment to living in this epidemic. If you could, think about transitional moments and get into the mind set that I know you always have, a thoughtful mind set about our epidemic. If you could, though, start by telling me how people describe you.

JL: How do people describe Joanne Lucid? That is a very good question. I believe that most people would describe me as a woman of the Catholic church who is interested in cooperating to use our resources to enable a better life for persons who have been diagnosed and their families. Now the question is, what would make a better life? And I think that is where they see sometimes my counseling skills, my use of resources in the church to make better living conditions with housing, as supportive to them.

FN: What about you personally?

JL: They just adore me. [Laughs]

FN: Let it be noted—and that's true! [Laughs] Joanne, when did you first become aware of AIDS, what did it mean to you when you first heard the word, and how did you come in contact with AIDS?

JL: In 1983, I was the Chaplain at the University of Minnesota Hospitals and I was servicing the areas of the hospital that dealt with persons with immune deficiencies. So our first HIV and AIDS patients were admitted there. I was not educated about the disease. I only read about the disease, so the only way I could personally know about the effects of this disease on people was through these patients. And I was appalled and saddened by the alienation that existed in 1983, not only from their family and friends, but also from the health community. That persons were not wanting to have them as patients, and services were not there
for them. So immediately I did call the Catholic Health Commission, and asked how we might participate in something that I did not fully understand. Then my second call was to Michael Osterholm at the Minnesota Health Department and had several conversations, and felt instructed and educated about the prognosis of the disease, and how our state would be affected. And I came back and sat in my office and thought we must do something about this.

FN: So what did AIDS mean to you then, what did you anticipate?

JL: In 1983, the only thing I understood was that a large proportion of the numbers were gay men, and that they would have a short time to live.

FN: So what does AIDS mean to you now?

JL: It means everyone, and that we are all affected, which I only came to understand by working with people who have been diagnosed. That we are all affected, and that it means much more to me now. It means wonderful friends, people who have made enormous contributions in the community, who we are all grieving, because many have died and many have died alone.

The other part of it means that I feel very much more appreciative of the community, of how many volunteers have supported people and how many agencies have been started since the eighties that are primarily concerned about bettering the conditions for people who have been diagnosed.

FN: When you started in AIDS, can you describe what the community was like then?

JL: In 1983 and 1984 the community was much more hostile. Questions would be brought to my attention like, Why was I becoming involved in this particular crisis, first of all? What was the Catholic church doing participating with people who have been diagnosed from the gay community, because, after all, wasn't this their fault? They were the spreaders of this disease, et cetera, et cetera. That kind of language. So there was hostility many places where I went. Others would just say that "other people"--other than the

1. Michael Osterholm is the state epidemiologist.
church—should be addressing this because, after all, do we use this much effort on the part of the Catholic church for persons who have been diagnosed with cancer.

So I would have a lot of questions to answer, and I used to become very tired of these kinds of questions because they did not want to deal with the stigma behind the disease, the homophobia that exists and is rampant in the community.

**FN:** Tell me a little bit about your upbringing in terms of homophobia, as a Catholic person and as a nun. Has that transformed for you because of this disease?

**JL:** Well, I have to say that I come from an Irish Catholic family in San Francisco. My parents came over here from Ireland in the 1920s. I was educated in Jesuit schools. I did not know anything about homosexuality other than there were persons who in those days would have been described as "chosen a different lifestyle." I really did not involve myself with the question until the 1980s when I met various persons who described themselves as gay. I found out as I listened to them how troubled their lives were, and how spiritually they felt unsupported by the churches. It was really in the 1980s that I discovered that the family and the schools and the churches, as well as society, had turned their backs on a number of people who were in a great deal of pain and had nowhere to go with that. And that was destructive and very inhumane and unjust. And so it was all of these agents of society—family, school, churches—that were not involved in the lives of people. If anything, they even hurt these people more.

**FN:** Did you feel any conflict at all, given the messages you had in the Catholic church? Did you receive those messages in your calling to assist people with AIDS who were gay?

**JL:** Actually, interestingly enough, I did not, because I knew the church's teachings on homosexuality, but—as in many other questions—I believe God to be much larger than the church and that we limit the size of God by the way we make decisions about who is in and who is out, what's inclusive, what's exclusive. So part of that, either through my naivete or something, didn't bother me. I felt compelled to make sure that we, as the people of God, not let this continue. I am only sorry to say that I am only working on one piece of the question. I am working on the piece when a person has
been diagnosed with a disease, and how do I support them in their living. I am sorry that I am not working on the larger piece on the views on homosexuality, and where people are on the continuum of that question. So I am really dealing with a very limited part of a problem.

**FN:** When did you first realize the impact that AIDS would have on your life? Was there a defining moment for you? Can you think of a situation when you thought, "Oh my God, this is really going to be it"?

**JL:** The people. My first person to die I had been with for six months, and I, as well as the doctors at the University of Minnesota, had failed to realize that his partner was infected. I buried this man and found that I was burying his partner two months later. That is when I was impacted. That a relationship, one being cared for very, very well, and the other, because we had never really paid attention to the care giver in this situation, that he was not being cared for, and quickly became very, very ill with a bout of pneumocystis.²
It impacted on me because I had never experienced in one family relationship two people would be dead within a three-month period.

**FN:** How did that make you feel?

**JL:** Very sad, very sad.

**FN:** How does AIDS fit into your larger commitments? Can you talk to me about the other commitments you have in your life, your commitment in the church, other areas that you work?

**JL:** I think it does fit in with another concern I have, which is about women and women's place in the church, which I have a lot of difficulty about. It connects with the sexism. It connects with our homophobia. It connects with our racism. I don't know how to describe this, but I know that it is all connected. And it is very frightening that the power is with so few to make decisions for so many. That is one area in my life that certainly it affects me.

But in another area, I believe AIDS is helping me to get in touch with my own heart and being with other people's hearts,

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² A type of pneumonia which classifies a person as having AIDS.
and letting people be led by their own intuitions and their own God-centeredness. This had made a difference in my life. Like what is important, what isn't important, what do we put our energy into and so on. So yes, it has made some big differences.

**FN:** Can you talk to me a little bit about that interconnectedness? I know you have spent a lot of time thinking about this.

**JL:** These are hard questions, Fraser! I think AIDS is a call to each of us as human beings to reflect on how we are connected with other people. And that in allowing myself to be connected, I see where my own prejudices and biases show up, and where I limit possibilities of a more compassionate way of life. The opposite hand of that is when I become open and aware of the value of other human beings, then more energy is in our world; more possibilities are there, more adventures are in our world. I think it has a lot to do with how we help each other become more human.

**FN:** How do those moments feel for you? Where do you find them?

**JL:** Now I find them with other people, in intimacy of a conversation, in celebration of being with others in a project. I find them within my own self in my own quiet time. I find them as I grieve.

The last gentleman who meant so much to me, John, John Rae—here was a gentleman who I knew for four years. He had a dementia that was diagnosed about three weeks ago. It was really hard the day I went over to his house and asked him to consider going into the nursing home. He just looked at me and said, "Do you think this is a good idea, Joanne?" and I said, "Well, yes, I do, John." He said, "If this is such a good idea, why don't you go to the nursing home?" And I just stopped and thought he was very insightful. Yes, why didn't I go? [Laughs] And then he was quiet for another five or six minutes and said, "What is it that you were thinking was a good idea for me, that would help me?" And I said, "Well, maybe, John, today, if we went to the nursing home together, and just if you could stay there maybe for three weeks and see if we can get you better." He said, "Are you sure this is a good idea?" and I said, "I'm sure." And he said, "You know I trust you." So I gathered up a few of his belongings...
and he looked around the house for what would turn out to be his last time. I was fearful that was going to his last time, and my heart was just breaking that day. So then I stopped and I said, "John, don't you think we should go and have a Dairy Queen?" And he said, "I think that is a very good idea." So we stopped and both of us got this huge milkshake. And then I took him to the nursing home. John became very ill in two weeks and died.

And I can still see that look that he intuitively knew that he was leaving his house. He had really not a lot of time to prepare and to work this out because his memory was already gone. His retention was probably about a five-minute period, and our concern was his safety in that house.

Well, that is what I mean. It is about my own humanness, and his humanness. It breaks your heart, because you see his goodness and all he did for the community, and all he did for other AIDS patients. He was the one doing the grocery shopping, he was the one sitting while families could get respite. He was the one that would give the transportation to the other people. To see how quickly this disease affected his neurological system—it was so fast. It just took my breath away.

**FN:** Joanne, how does faith play a role in your work?

**JL:** I think faith plays a major part in this. Not faith with a capital F that belongs to a particular church or institution. It is faith that's given, which is a gift, that I believe God gives to each of us, to believe in one another, to trust in one another, to know that we will be there with each other. That is where it is. I really believe in a compassionate God, and I believe that we see that compassionate God in the faces of each other. That is made very visible in the community in the way that we all care to be and stand there with our brothers and sisters who are infected.

**FN:** Can you give an example of how you have seen that faith in action?

**JL:** I believe I see it every [day]. Like today at a meeting of other women who are concerned about the women in our community who are infected with HIV. These women are not affected. But they are putting their money and resources and
energy in trying to develop programs that would be of support to women. That is where I see people standing with each other. I see people standing with each other in the conversations that they are having around AIDS, and the development of housing that we are doing. I see that we stand with each other in celebrations. We are probably more conscious of when we can celebrate something happy, something good with one another, than we are when we stand with each other in the dying moments, and look for dignity and respect in those moments.

**FN:** Talk about faith in those moments. How do you define your faith?

**JL:** I define my faith as really a gift that is given. So I am responding to the present situations out of that. It is part of my own spirituality, which I believe is not unique. I believe we all have a spirit, that we're all spiritually connected with each other in friendship and in relationship, and to a right relationship with our environment and to creation. So I am responding out of how I consider to be in right relationship to the community, to individuals. And God, my belief in God, is one of my relationships. I see that as providing energy for me to individually keep going. And friends help me keep going too.

**FN:** What happens when people die? What happens with their spirit in your belief?

**JL:** Well, it helps me to view it as a homecoming. And the power of that homecoming is that I believe these people are not visible to me, but that spiritually I am still connected. And I call on them for help. I feel that they are very powerful persons in our community, and that they have a major interest in helping us to continue the good work in the community.

**FN:** Does anger play any role in your response to AIDS? Do you get angry?

**JL:** Very angry, actually, at the injustices. And, in my way of looking at it, would just see that some of the problems in the community, that when people haven't addressed them—or at least shown some efforts around them—then I get that natural reaction. I feel angry about it, this is like a real bummer. That people who have the power and influence who can make a
difference choose not to—that hurts. In fact, we will be doing an anger workshop for our people who are ill. That's what they want to have their next retreat on. So anger is in the community, and it is very important that it is recognized; that I recognize my own, that other people recognize theirs, so that we know what we are angry about and that it doesn't mess up our lives. That we use that emotion well.

FN: What do you do with your anger?

JL: I probably do all of the worse things with it—overeat, that kind of thing is probably my weakness. The good part of it is that it helps me to become intellectually aware, to spend more energy trying to find out more clearly what is the energy around the anger, what can I address in it and use that constructively. By talking about it, not being silent about it, getting more clarification. Where I see an injustice, for me to sit on that and be silent in my anger will only turn in on myself. If I can speak about those injustices and why I am angry about that, then I think I am doing something for the community.

FN: Is AIDS an injustice?

JL: I don't see the disease as an injustice. I see AIDS as a disease, and we have a lot of disease. What I see as the injustice would be the homophobia, the lack of funding, the racism issues that get connected with AIDS. AIDS itself is not an injustice. AIDS is a fact, it's here. It is a new disease. It is not a moral issue, either.

FN: How do you define your community?

JL: I probably belong simultaneously with many communities. I have my family community, my sister community of the Sisters of Charity of the Blessed Virgin Mary. I have my community of friends that are in the community here, you, Fraser, being one of them. I have a lot of friends in the AIDS community. But then I have my book club, and I have my church, and my friends that I go to the Ordway with. So there are lots of groups that I belong to simultaneously.

3. The Ordway houses the St. Paul Chamber Orchestra.
FN: How do you find community?

JL: I think I am not really searching for community, interestingly enough. I think that my role right now is to live with my community simultaneously. I am not really looking for community.

FN: I guess what I am asking is, when you feel in community, in a place of comfort, how do you find that? What does that feel like for you?

JL: Very involved, actually! [Laughs]. I am going to meetings then, because I am involved with other people's concerns and interests. I am tired sometimes just from keeping up with the various communities that I belong to. I feel that if I belong, then they give me energy, but I also need to give them my energy. So it is sort of dynamic that way. I can't describe myself as a searcher for community because I feel like a vital member of the Twin Cities community in general, and then in particular I would have my neighborhood, my friends, my church and so on.

FN: How do those communities support you in this work?

JL: I have been very fortunate because I do feel very affirmed by my friends and family and church. I think the question is how do I look for affirmation. I don't need somebody calling me everyday saying, "Joanne, you are doing a wonderful job," but I need for my friends to get out there and help me with the job and do their part in it. That's affirmation. That is how I work. Everybody who knows me ends up doing their piece with the AIDS work, and I appreciate that a lot. [Laughs]

FN: Why do you stay in this work, Joanne?

JL: That is a good question, because I have considered leaving the work. I stay because I feel that at this time my leadership is unique in the community and is needed. As well as I enjoy the people that I am working with. Financially I am not compensated that well for what I am doing, so my compensation is in the fantastic people that I meet, and I am not ready to leave them yet.

FN: What do you do to sustain yourself?
JL: Oh, many things. Like personally, I sustain myself with friendship, with going to the Ordway, going to the Schubert Club; those are very enriching ways that I nurture myself. Being quiet in solitude is also very important to me. Long walks. That kind of thing I find very, very re-energizing. And then addressing my needs with the people who might make a difference, I actually find that energizing too. Getting more people involved through the churches.

FN: What do you do during those walks and in the quiet time?

JL: Listen to the MPR⁴, which I think just does tremendous programming during the day. So that is filling my mind, and in a walk can almost even touch my heart. So my time being alone is really a time when I might call different people to memory and in that remembrance either pray for them or just remember them, and let them go. Just like you do. Be thankful for how they are, or wonder about them. Sometimes I get ideas about what other connections I can make for them. But I always have MPR in the background and a good walk. Or just quiet.

FN: How long do you think you'll be able to stay in this work, Joanne?

JL: I have no idea. I have no idea. I would think that even if I retired from this work, that I would always hold the people in my heart, and I will never retire from that part of it. But I am not sure what is inviting me, what would be the next step, where to go.

FN: You know we see a lot of burn out in this work. What do you think causes that?

JL: Not taking care of one's self, as we read in many, many journals. Anger, our anger is enough to say, "Well, I won't play in this game anymore. I won't come to meetings anymore, or I am going to stay away because not everyone has been sensitive to the issues." We get into a lot of turf issues in the community and that kind of thing. I can see that, I can see that in myself. When I do see it, I like to do a quick rummaging through that and say, "Hmm, what is this about, Joanne?" and get on with the business. Very easily in

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the community we can use a lot of negative energy around that. I think that is a disservice.

**FN:** How do you keep your heart so open?

**JL:** By being challenged by my friends, always. [Laughs]

**FN:** Joanne, how do you define felicity?

**JL:** For me that word means committed. It means faithfulness, and that's a gift. That is not something that we do on our own. There has to be a lot of mutuality around that, to make that possible. So faithfulness, as an individual, is that I feel very loved and supported by the Minnesota community, and that allows me to return that same faithful love to them.

**FN:** Now this is a totally different topic. When you think about America, what do you think about? When you think about this country and where we are as a nation, what is your vision of this country?

**JL:** I love the United States, from East Coast to West Coast. And what do I think of when I think of the United States of America? I think it is a land that is so resourceful in terms of spiritual power and physical beauty, and magnificent potential in people. I also see that, like all of us, we forget how much we have and how much has been given to us that is just there. It is just there. We have become greedy, and in that a lot of sorrow is in the United States. Sorrow for our people because some of us who have more deprive others from a fair share in the beauties and the resourcefulness of the United States. We limit each other when we have so much.

**FN:** How do you think then that America is affected by your work, by your presence on earth?

**JL:** I really haven't thought about that. I believe that the United States is affected; I think the world is affected. But I am not spending my time thinking about it. I see myself very much in Minnesota, here and now, in the Twin Cities, as a member of the Catholic church doing my piece. But I really don't think about it.

**FN:** So then what about here in Minnesota? How do you think
you impact our community?

**JL:** Oh Fraser, I believe that I impact the community greatly on a day-to-day basis. In the telephone calls that I get, and the emergency situations that I am invited into—it is a 24-hour call. So I see that on a real, tangible basis. I am not the only one. I am really aware that we only have a piece of this. So that the same day that I am getting a number of calls, I am also calling the Minnesota AIDS Project, I am calling Open Arms, I am calling other people in our community who are also making marvelous responses. And I am also calling volunteers in to help. So it is very, very connected.

**FN:** I am glad to hear you say the word connection, because to me you have been a bridge-builder between so many communities. But it has got to be stressful to be in that role, and to be in that role with such a faithful presence. What do you think about that? Is that true?

**JL:** Stressful? On some days it is very stressful, very challenging, very demanding. Especially when we aren't coming up with the resources, and maybe the people that we are trying to serve seem to be misusing some of the resources that we have made available. And it just seems like a mess.

So yes, those days I do feel very, very stressed out and feel like not answering the telephone anymore. But that's just an honest day-to-day kind of thing. I think what balances it out is saying that I am tired, that I will be taking a vacation like every other person and saying, "I entrust this to the community."

**FN:** In the time that you have been working in HIV, would you say you felt more connected and stronger in your Catholicism, or has that been under some duress, too? Where are you with that?

**JL:** Well, I would not have this position if it were not for the Catholic church providing the basis for this. So when you think about this, there was no church response in the Twin Cities in 1983; we had to start the church response. So

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5Minnesota AIDS Project is the state's first and largest organization focused on AIDS prevention and services. Open Arms is a volunteer-based program for home delivery of meals.
I am very proud to be part of a church's desire to assist families and to assist people. So I have not changed my traditional commitment to the Catholic church. Will I have problems with the Catholic church and other churches? Yes, I will. For instance, I have a problem that in 1994, in the Universal Catechism, that there is no mention of women. I think, "Now what is wrong here?" and that this is out of touch with reality. So you are going to get that kind of response from me on a lot of topics in the Catholic church—as well as with other church members—about a lot of things that I think are not in touch with reality. So if anything, I hope that my ministry to people AIDS is a ministry that is not ethereal. It is very real, and we try to do very real things with and for each other.

FN: What do you think is lacking in terms of other churches' responses? We don't see a lot of activity outside of your ministry office right now here in the Twin Cities.

JL: I believe that the churches need more public relations. One way that all churches could enter into that is through preaching about AIDS, by praying for people with AIDS, by clearly being able to use the word. And there would be a public relation set up for all the churches if they could do that. I think that congregants are somewhat intimidating to their pastors, and that the pastors are not as prophetic about their preaching as they could be on some of these topics. So I think it is an intimidation that occurs in some of the churches.

FN: Why do you think that happens?

JL: I think that some of the members of the church will not listen to anything about homosexuality or AIDS or topics that they are uncomfortable with. I don't think this is anything new, but I think that sometimes a pastor can preach to a certain level of the member of the parish or the church. Let's see, I am searching for the right word. But anyway, he preaches to the person in the pew, he doesn't want to upset the person, so we stay away from certain topics that could cause some controversy. Sex, politics, you know, many, many issues.

5. It should be noted that there are other AIDS ministries in the area, including the Episcopal AIDS Ministry and among Jewish congregations.
FN: Would you have become a priest if you could have?

JL: No. I am not even interested in it.

FN: What do you fear most?

JL: I guess I fear most being misunderstood. Where my intentions are, where my hopes are. For somebody to trample on them. I fear that. Fear of being abandoned as I try to do something for the community, and if the community doesn't understand it, you know, would bypass me.

FN: What do you fear for our community at large?

JL: What I fear for our community at large would be that we wouldn't take seriously the potential that education could bring us around this disease. I fear our racism in the Minnesota community. So ignorance and racism are probably what I would be most frightened by. And the violence that comes out of all that.

FN: What do you hope for?

JL: I continue to hope for quality of living for persons, and that people could live with a chronic disease happily, or as happy as they can be. That they will have family and friends supporting them. And I hope for compassion, that there will be a lot of compassion to go around.

FN: And for our community, broadly. What do you hope for all of us?

JL: Good health. [laughs]

FN: How do you think this time in our history is going to be remembered when we look back at these years?

JL: Oh, probably people will be saying in these troubled times there were an amazing number of people in Minnesota who cared, and cared with large hearts and used their intellect very, very well to come up with potential solutions to a very human problem.

FN: You talked about the gift you received of faith. From that perspective, looking at us as a faith-filled community,
or as community struggling with that, how do you think this time will be remembered?

**JL:** Probably the same way, Fraser. Just amazing people who really believed in each other, trusted each other, and went hand-in-hand through very troubled times.

**FN:** How would you like to be remembered?

**JL:** As a fun-loving, caring person who lived well.

**FN:** Okay, those are all my questions. Thank you for your time.