Interview with Cynthia Mayeda

Interviewed by Fraser Nelson

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at Mayeda's home in St. Paul

CM: I was born in Minneapolis, Minnesota, at the Swedish Hospital, which no longer exists, as a matter of fact, and I've lived here my whole life.

FN: Can you tell me how people would describe you?

CM: Frank, private, a good friend, loyal, industrious, pensive.

FN: If you could, imagine the first time you heard the word "AIDS." What did that word mean to you at that point?

CM: That's really interesting. I've thought about this a lot. As you read accounts of other people who talk about the first moment, I don't think I remember the first moment I heard "AIDS." I remember the first, at least among the first moments when I heard "gay-related cancer," but I can't remember when the translation occurred and if that was a meaningful translation in my head.

I was in Ogunquit, Maine, the first time I heard about "AIDS-related cancer," and I recall thinking--and I'm not a cynic. That isn't something, I don't think, people who know me would say about me, but I do remember having some temptation to have a conspiracy theory. That was not an original thought, either. There were lots of people, particularly gay men, who were concerned that that was some kind of a conspiracy. I didn't quite believe it, and yet it was also mysterious that there were these incidences of "gay-related cancer," which seemed to be unexplainable. So I think mostly it was fear and a little bit of loathing of what I suspected might be some enemy plot, some homophobic fascist plot.

FN: When you think about what it meant to you, it sounds like you're saying it was a mystery. When did you first become aware of HIV in a more personal sense?
CM: There are two ways to answer that. The first and the most direct has to do with my friend Bill Poe, who died seven years ago this next April 2nd. The language is all antiquated. He was diagnosed with ARC,\textsuperscript{1} which is something we don't talk about anymore, and lived for two and a half years before he died. In fact, the only medication available to him was AZT,\textsuperscript{2} and that was at the very end, and that was when you had to prove you'd had PCP.\textsuperscript{3} It was very complicated and very frustrating. But he was the first person I knew, and I was one of his two primary caregivers. He lived in Washington, D.C. I lived here, of course, so I commuted every other week.

That was my first immersion experience, which seems in some ways a thousand years ago, because, unfortunately, there have been so many people who have been diagnosed or who have died since that time, in my life, but also because what was possible for Bill was so little compared to what is possible today. There was no way to live with the virus in those days. I don't think I've ever been as scared as I was the moment that he told me he had the virus. Never. Mostly because I didn't know what it meant and because I thought I knew what it meant.

FN: What does AIDS mean to you now, when you think back to those seven years ago to today?

CM: Well, I think it means the possibility of living with a great deal of difficulty and numerous daunting challenges, but to manage a virus for a much longer period of time, maybe even longer than we really know. I also think it means, in a personal, selfish way, we're a lot more tired, those of us who have the luxury of not living with the virus in our bodies, but living with the virus in our lives. I would be lying if I said that I don't have moments of such deep

\textsuperscript{1}AIDS Related Condition—a terminology used in the early years of the epidemic to denote a person who was experiencing some degree of illness without having progressed to an AIDS diagnosis.

\textsuperscript{2}An antiviral drug that was the first treatment to be offered to people with AIDS diagnoses.

\textsuperscript{3}Pneumocystis Carinii Pneumonia—an opportunistic infection which classified an individual as having AIDS.
sadness. I'm not one of those people who stop feeling it. I mean, I think it's almost the opposite for me. I feel it exponentially sooner, greater than I did, because I think I know what it means. So I have less energy, but I want to have more energy, because the period of time when someone can really manage the virus is so much longer, and I want to be able to be there every step of the way. But I feel very discouraged, actually, not about the individuals, but about the collection of people, those of us who live with it outside our bodies and those who live with it inside our bodies. The "beat the clock" game is not feeling so great.

FN: Talk to me a little bit about the unveiling of that mystery and how that's worked for you personally. Because it sounds like you're talking about keeping your energy up and yet having a great deal of discouragement. How do those things play together for you?

CM: Well, I don't know if this will answer your question directly, but I'm going to go into a couple of specifics that happened just this week. This is only Wednesday. I think I'm going to cry.

For the first time in my life I have a female friend who is HIV-positive. I think it's interesting that I can't tell you how long I've known. I think it's about a year. I think it must be—I mean, it's not unconsciously on purpose that I don't know, but I can tell you almost to the date every male friend I've had, who have all been gay. This is a heterosexual woman. There's no question but that this is different. In a lot of ways, this is different because of her familial situation. I'm trying not to be indiscreet here, because she has not come out to a lot of people about her status.

We were at lunch yesterday, and the question has been what would happen the moment she started to see someone and when she would tell him. It came up at lunch yesterday that she's seeing someone. I, in this perhaps too maternal fashion, said, "And have you told him?" She went on to tell me the story of how she told him. I was very, very proud. She was very forthright, very brave. But at the same time, I was really fascinated and upset when she revealed how she told this man that she's involved with. And I'm not sure how involved, but I think there's the potential of a long arc of time here, so she felt she had to take the risk. She started
the subject by saying, "Well, there's a lot of things you don't know about me," and when he pressed, she said, "I'm dying."

And I thought—and maybe wrongly and maybe inaccurately—I don't think the gay men in my life would have started the conversation the same way. Maybe I'm wrong. Maybe I'm wrong. But I was very upset, and I was trying to figure out, on my way home from lunch, how much I was upset for me, because I can't think about it that way. In any case, I was really upset, and I said, "That isn't true." And she's very healthy given the circumstances, with a favorable T-cell count and absolutely not even a threat so far of opportunistic disease. She said, "I was just trying to start the conversation," but I don't think that's really true—there are lots of ways to start that conversation. Now, that's easy for me to say. To my knowledge, I'm HIV-negative; I'm sitting here with this other point of view. But I was haunted. I didn't sleep very well last night, and I was really just trying to figure it out.

I think that's a very, very, very indirect way of answering the question: I think there's some parts of it that aren't at all mysterious to me anymore and other parts that, of course are. Because for whatever reasons, I'm not wise enough or smart enough to understand neurologically or physiologically what's happening, but I have enough self-knowledge to know what's happening to me emotionally.

I'm sorry this is going on so long, but to try to answer the second part of your question, how do you balance that with trying to have enough stamina, psychological and emotional, not just to be a good friend—that sounds so Florence Nightengaleish—but to try to make a difference in the world we live in so that we will find the will to find a cure, so that we will find the will to create a way for people to live decent lives while living with the virus. You know, I have this very, very, very micro way of looking at this. I think if I can just do this the best I can do this, and help other people do this the best they can do this, that is going to somehow change it. One by one. It's really small and slow, but I believe that.

4T cells, or CD4 cells, offer a measurement of the health of a person's immune system. A normal count is about 1,000; people are considered to have AIDS if their T cells drop below 200.
FN: Was there a defining moment, do you think, in your consciousness, when you became aware of the impact this epidemic would have on your life?

CM: Yes. This is now a story that's been told so many times, it sounds apocryphal even when I tell it, but it was actually the moment before the birth of Arts Over AIDS. My very best friend in the world is Garland Wright [the artistic director of the Guthrie Theater], and this was a moment when we weren't very best friends in the world. He would tell you we were friends. I'm not sure I would even go that far.

But we were meeting for lunch for professional reasons at the New French Cafe, and I can still tell you which table it was, as a matter of fact. The reason I can do that is not out of some romantic sentimental notion, although I have a lot of those. It's because when he walked in, I don't know that I've ever seen anybody look that bad. Garland does look bad when he hasn't been sleeping, in general, but this was a different kind of bad. I knew he'd been crying and he had huge bags under his eyes. And I think—and this part of the story I can't be sure of, but I think it was Thursday, and somehow that is important. I think it was a Thursday. He walked in, and I said, "What's wrong?" And I didn't really know him well enough, you know, to skip over the "How are you? Nice to see you," but it was so big, this aura and the way he looked, that only a fool would have been able to not jump over all those niceties. So I said, "How are you? What's wrong?"

And he said, "Well, it's only Thursday," whatever day it was, "and I've just had a call about the fourth person this week who's died." And that was more than seven years ago, so I hadn't had that many friends die at that time. I knew people who died, but I didn't even know why. This really was still at a time when people were dying from lung illnesses, and even though they may have fit a profile that seemed to be one that this disease was affecting, you know, I just hadn't added it up. But if you were someone who had a lot of friends somewhere else, and these friends [of Garland's] were all in New York who had died, you know, this had been going on for three or four years.

I remember knowing at that moment, just really knowing my life had changed. This wasn't because I knew that we were
going to love each other for the rest [of our lives]--but there was something so huge in the room and I saw my future.

I knew this was not just about a gay man who was an artist. I mean, I knew this was about all of us somehow, and I was so scared.

**FN:** I know you have a lot of other kinds of commitments in your life and a lot of communities that you interact with. Can you tell me how your work in AIDS fits into your commitments, and can you describe for me what those commitments are and how you define them?

**CM:** This is clumsy. I have always felt I'm the least able person to describe these things. Well, let me see if I can do that. I'm very interested in, and committed to, issues of social justice. I don't think that it's any coincidence that my commitments and my passions are related to the fact that I'm a woman of color. I'm very interested in issues of race, and those things, of course, are interrelated, if not sometimes synonymous--social justice and race. I've been a Democratic--DFL, in particular--activist for a long time, since the mid-seventies, when I first caucused both in my little precinct and went on to the state level and national convention.

I think these things are all directly related. I mean, I think it's easy to connect the dots. It doesn't require a great deal of imagination. Because how people live in our society, whether their differences have to do with their HIV status or with their color or with their gender or with their geographic advantages or disadvantages--I'm not suggesting these things, in my mind, are necessarily equal, which might be a controversial point of view, but I don't think they're equal. But I do think that for each person who lives with what is seen to be a disadvantage, there are daunting challenges.

I didn't agree with everything Hubert Humphrey said, but I'm always profoundly moved when I read his quote about how we should judge a society not by how the best live, but rather how those people with the least live. I wish I could quote him directly. I'm convinced that were he alive today, that, like I do, he would see people living with the virus in that

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5Democratic Farmer Labor Party.
FN: It sounds like you've really integrated HIV into your broader activities and commitments.

CM: I have, but not by design, necessarily. I think it's just the way I see the world or I see my place in it.

FN: Can you talk to me a little bit about how you describe, or how you might define, your faith, and if that has any role in your commitments?

CM: I'm an agnostic. I have always been agnostic. I suspect that is related to the fact that my parents--well, my brother and I were raised in a Congregational church where our parents dropped us off and picked us up. So I'm not an agnostic who has rejected some doctrine or wasn't raised in a church with doctrine. I'm not a recovering anything. I suspect I was never a real believer. I'm also not an atheist. I'm not sure. I just am rather ambivalent. My parents, though they would never have told you this--both of my parents are deceased--they were raised Shinto and tried to "pass." I was born shortly after the war, so they wanted us to be "American," and in order to do that, that meant, along with tap dancing lessons, you went to church. And that was the dropping us off. So they never wanted anyone, including their children, to think that they were strange people who had temples and Buddha and all that stuff. I just figured that out really late, in my thirties or something. I'm forty-five now.

But I wouldn't say that I'm not spiritual. I would say I don't have such a conscious spiritual life. I definitely am not somebody who has worked to develop their spiritual life, but I'm not convinced I don't have one. It's just something I don't think about consciously, nor do I talk about it much.

FN: Do you think that has any impact in the way you see the world, in terms of social justice?

CM: I'm positive it does, and I have no clue what it is.

FN: Does anger play any role in your response to AIDS?

CM: Anger? Yes. I would say mostly--this probably says more about me than it does about my relationship to AIDS, but
I would say mostly on big levels--anger at the government, anger at a faceless epidemic. But I am not someone who gets angry--this is hatefully female, but anger is not a big emotion that I have to start with. But when individuals become ill or diagnosed, or die, I can't say that it's usually anger. There's some moment, but it's fleeting. So that's not what drives me.

**FN:** Can you tell me what the emotion is that drives you?

**CM:** Sadness. Profound, deep, and utter.

**FN:** Can you talk a little about that? How does that play out?

**CM:** Well, it's probably not true that it drives me. That's inaccurate. I hope no one's driven by sadness. But what I mean is remembering. I have this enormous emotional memory, and remembering--not that I want to forget, but remembering every time how that feels, what it felt, what it seemed to feel like for the person who's living with AIDS, particularly in the last year of their lives--causes me to get up the next day and think, "I'm just going to keep moving forward so this never has to happen again." It won't be in my lifetime, but how people live with the virus certainly changed a lot in my lifetime. So I just am absolutely convinced that there's some way we can continue to change that and make it better and better and better. But in an odd way, I am motivated--not driven so much, but I'm motivated--by the memory of how sad it feels every fucking time.

**FN:** How do you remember pain like that? Where do you find yourself remembering it?

**CM:** I must have been, in another life, a great Stanislovsky actor, because it just happens. It's not that I try to recall it. It's often not remembered in seeing someone else who's ill. I mean, it's remembered in the way the sun shines in a certain way or how the air smells like some day. It's much more elusive for me and metaphorical than literal. And, not to the exclusion of those literal truths, those times when the next person tells you they've been diagnosed, flash forward, but it's not so much that. I will feel sad and happy because of something that is seemingly unrelated.

**FN:** How do you describe your community?
CM: In many ways. Actually, I give a speech on this topic, so I'm quoting my own rhetoric here. I wish I could just give you the Rorschach answer instead of having thought it through. One of the things I think about is when somebody says "your community," do you think about your community geographically? Do you think of your community as the people living with or without the virus? Or is it people? Is it land? What is it? And I have to say this has changed for me considerably over the last decade.

I suspect if I gave you my most honest, most spontaneous response, it would have to do with gender and race more than HIV status, more than geography, more than education or vocation. Those are on my mind since I don't have a vocation at the moment. [Laughter] But I suspect it would have to do with women and/or women of color and/or, more specifically, Asian women, or being Asian.

FN: How does your community support you? How do you turn to it and where do you interact with it? When you think of something so broad as Asian women, or so specific, I'm wondering how that impacts your life.

CM: I'm tempted to say "ironically," but I'm not sure that's right. In the case of dealing with the virus, I'm not sure my support has even come from women in general. I think my real support has come from a very limited number of people--I mean really limited. One or two. When I'm sad or when I'm trying to work through grieving after leaving a job or my parents dying or [learning of] someone being diagnosed, I keep my own counsel, for the most part. Maybe to a fault. But I do a good job of it and I'm really pretty introverted.

So I'm not likely to reach out in that way. I think maybe it's where I live, but most women I know have not had many experiences with the virus. I'm always surprised.

I'm not sure it is where I live, come to think of it. One of my closest--not closest friends, but--well, closest colleagues lives in New York and hasn't had her first experience. She knows a lot of people who have died, but not in her close circle of friends. And I just can't figure out how that's possible.

FN: How do you find community? I know you have close friends and you certainly are a member of the community in
Minnesota. You're very well known here. But how do you find that, especially anticipating a move [to New York]?

CM: That's a great question. Well, in that way, without discounting or taking a markdown—God, I still have a retailer's mentality—on the term, I think sometimes "community" can be fleeting. It can also be very intense. But it is being in a room at a moment when some information is revealed and everyone's heard it at the same time. You can have a fierce sense of community and you may never be in the same room with those people or want to be with those same people again, but there's something genuine and potent that is clear in the moment that I think is absolutely as much about community as people who inhabit a two-mile area together. I think I'm really good at seizing those moments.

FN: Can you tell me what one of those might be for you?

CM: This is a little nutty. A few weeks ago I was in New York at a dance concert. There was a man right in front of me who was in the advanced stages of AIDS. I didn't know this person. The usual suspects were in the room. Most of the people, ninety-nine percent of them, lived in New York. They were all either choreographers or dancers; it wasn't a closed shop, but it was pretty tight. I remember thinking, "I wonder if everybody else knows this man except me." He was there with his caregiver, a very loving caregiver. I was really touched.

I don't think I saw the first half of the concert. I cried most of the time. I wasn't crying because I wondered how long he'd live—I can't say that those thoughts didn't flash through my mind, but it wasn't about his life span; it was just that I felt like we were all holding him up. I don't know. It's very weird. I just thought he was so brave to be out. The weather wasn't particularly good. He'd left the house. Obviously he'd left and had some deep need to be there, because there were forty-five other things you could have done that night in the four-block area. The facility wasn't all that barrier-free. He was in a [wheel]chair. I don't know, I just felt part of—I felt a sense of community. I don't live there, I didn't know this person, I didn't know half the people in the room. I knew the other half, but everybody else knew everybody.

In fact, I came home and I said to Garland, I had a great
reminder of something I needed to know, as I think about moving someplace else. I do have community there. It's very different than it is here, where I've lived my entire life, where my mother's buried, where I've buried people. You know, it's very different, but it is as genuine, it's as important, and I will find it wherever I end up.

FN: Why do you stay in this work, and how long do you think you'll be able to stay in this commitment? Do you ever have any fear of losing that ability?

CM: No. None. I don't think there's a choice. Garland once said, very wisely, you don't get to choose who you fall in love with. And maybe some people don't get to, but they do. I think he's right. I don't get to, and I don't choose. You know, you fall in love with the things and the people and the way and the ideas and ideals of what you think make a life worth living. I can't imagine siphoning some of those off because these hurt too much or you're too tired. I know this sounds naive, but I really mean this, for me--for me. Maybe it's different for other people, but I don't imagine ever wanting to, either. It hurts sometimes.

FN: Can you tell me what you do to sustain yourself? What are you doing now to sustain yourself?

CM: I don't think I know that. On the heels of the lunch I told you about yesterday, and I have a very dear friend in Chicago who has just gone to a hospice and has been calling friends--to "say goodbye" is the way he characterizes it--so, you know, I have the suspicion that any minute he's going to die, and I'm scared. I'm not scared for him, I'm scared for me, because I guess I know it's harder to get up the next morning--if we were smart, we'd all invest in Kleenex tissue and make a fortune.

But I don't know what--I honestly don't know. I'm not trying to be coy. I don't know what I do to sustain myself, but I sustain myself. I know that.

FN: How do you define felicity?

CM: I don't know that I've ever defined felicity. What a fascinating question. How do I define felicity? I don't speak in first draft. Can we move on and let me come back to that?
FN: Sure, that would be fine. You talked some about the DFL and how, for you, race and gender interact as a source of community for you. Can you talk to me about your vision of America? When you think of this country, what do you think of?

CM: At this moment? I think of a country very confused, very frightened, and therefore like little kids, when you see little four- to eight-year-olds who get frustrated and frightened and they lash out, and they don't know why and it's totally unfocused. Their limbs are all in the air. I think that's the time we're going through. We're all scared for our own little piece of the action, and the little piece is getting littler, and therefore we're getting scareder and nastier to one another.

And then I have this other idea about how wonderful it is that it's just all out there. I'm very patriotic—I don't think that is at odds; I just think it makes me interesting, actually, and it has everything to do with the fact that for a very long time my grandparents couldn't be citizens. There was a law that said they couldn't be citizens. I remember the day my grandparents became citizens. It was the biggest day of my life—of my life. And I'll never forget it. It had some profound effect on the way I think about civic responsibility and a civil society and my own very deeply personal role in moving the country forward.

FN: Talk to me a little about that. How do you think your presence as a citizen impacts this country?

CM: I think if I live this life and think about this issue and work on this issue, HIV/AIDS, the best I can and somebody else lives a life with HIV/AIDS or without it in their own body the best they can, somehow all that adds up to change.

I think that's true also in thinking about the country. I mean, this sounds goofy, but I have never not voted. I don't have children of my own. I've never missed a school board election. I have never missed a presidential election. I mean, I tremble every time I go into a voting booth. I hate to vote absentee, because I like to stand in line. It is so corny, I actually get excited the day—it's like a little kid feels on Christmas Eve, the day before election day. It wouldn't occur to me not only not to vote, but not to be
excited, even when I don't like the choices. I just feel extremely strongly about this, and I think that—you know, this is a little self-congratulatory, I wish we all felt that way.

I feel that way in part for reasons that I'm glad we don't all feel. It does have to do with my family having been in the concentration camps [and the fact that] my grandparents couldn't be citizens. In fact, this is interesting. As you know, I've been unemployed for the last couple of months, and I've been fascinated by the number of people who have said, "Would you consider moving abroad?" I'm fascinated for two reasons. One, I think this is generational. I don't believe, if our parents had been out of work, that their peers would have said that to them. I mean, maybe one of them. But I've had at least a dozen people ask me if that's an option. But I'm always totally taken aback. My best friend and I have discussed this, and he would be willing to leave the country. You'd have to deport me.

It's a little goofy, but—well, I'm a little embarrassed. The reason is I think especially because things are so messed up at the moment, from my point of view, this is the moment you stay. You're supposed to be here because how is it going to get better? I even threatened to run for office! I'm not going to do it. This is not an announcement. But two days after the election, I was so depressed, crying, crying, crying, crying, and I said to my best friend, "Okay. I figured it out. I'm going to do one of two things. I'm going to run for office or I want to run this organization that I've been talking to about a job." And he's my best friend because he didn't laugh. Everybody else laughed when I said this. But I was deadly serious. I'm not going to do it. I don't have a lot of the equipment. I'm not going to do it.

But my point was, I'm getting sick of people sitting around saying, "All those bozos in Congress. They're all crooks," which I don't believe. But if you do think the wrong people are there, then why aren't we doing something about it? We're just expecting "them" to put up the right candidate, to give us the luxury of going into the booth and being enthusiastic about pulling a lever. You know, there's another way to do this. If we're so smart, why don't we go fix it? And I really deeply, to the bottom of my toes, believe this. And it is why at this moment, when someone I'm very emotionally attached to now lives in Paris and said to
me, "I'm glad I'm there because everybody's so depressed in the U.S.," and I say, "This is the difference." I mean, there's jillions of differences between us, but this is one. "You think that's the reason you're there. That's the reason I'd be on the first plane back." I just could not stand not being here at such a time. You know, it's like being part of any family unit. When things are tough, that's when you're supposed to be there, not "Well, you fly off to Paris and you come back when it's swell." And things are tough now. Very tough.

FN: What do you fear most?

CM: In life?

FN: Yes, in life. Maybe for this country, for us, for you.

CM: Well, for the country--and this is related to me--I worry that our fears and our terrors will become so great that we will hurt one another in ways that we can't correct, that we just go too far. I think we're already hurting each other. I really think we're already hurting each other. I mean, really. Prop 187\(^6\) hurts me every waking moment and probably the moments I sleep. I think I worry that that's going to be--I'm not even talking about initiatives and referendums; I'm just talking about the way we interact every day. But those are put under a magnifying glass and writ large when these ideas are actually held up to a vote and an electorate gets to say, "This is exactly how I feel. Exactly. If you don't look like this, if you don't talk like this, if you don't come from this, then outta here, because it's my turn." You know, I think that can lead to--it's one thing for our generation to have to deal with that. I worry about what happens to kids like my niece and nephews, you know. What does it mean when they grow up being told that from the moment they are born? Rather than to be somewhat fully formed as we might be and able to process [the message] in a way that says, "But I understand where that comes from and I have the stamina to keep moving and make some correction"?

\[^6\]Proposition 187 is a California proposition which denies non-emergency health care, education and social services for illegal aliens.
FN: How about for you personally?

CM: Well, that is related, because I think that's why Prop 187 freaked me out so much. I mean, we already did that one. My people already did that one. It was the same week--ironically, it was two days after the election--I was watching the national news, and they were talking about Prop 187, and the next story was about the Japanese American National Museum in L.A. opening a new exhibition. As part of this permanent exhibition, the outdoor facility or space had a rebuilt camp, the actual shelter. And I stood there looking at it. I was very freaked out, and thought, "I wonder if anyone else gets the irony of this moment, this week containing these two things." The announcement that this proposition has been passed, and can't we connect the dots and figure out what these things lead to?

Some of my fears are totally personal. They have to do with being at this moment in my life when I am trying to find the next thing to fall in love with and having doubts that I've always had that are getting bigger; the voices are bigger. "Maybe the only reason now they're looking at you is because you're Asian, because you're female, because you're from the Midwest," you know. All of these voices haunt me and they haven't taken over yet, but they're louder than I'd like them to be. And they're louder for a reason, because there's this backlash. It's confusing, you know. It's hard to hold onto who you are. I have a really good sense of who I am, and I really like myself, and it worries me that if I'm having these experiences, I mean, what is it for a six-year-old who's going to hear those things loudly and clearly the rest of her life?

FN: What fears do you have for us as an AIDS community?

CM: That we'll be so beaten down that we won't have the stamina. Well, it is connected to the will. I hate to think that we won't have the will, but that the people who are more peripherally involved in making contributions or whatever have moved on or will move on any second. What we said at the beginning is, of course, true--this is a very long fight. We can't get tempted to get engaged to the flavor of the month. If you're going to do this, you do this every year. Every year when I write to my supporters for the AIDS Walk,7

7An annual pledge walk to raise funds for AIDS organizations organized by the Minnesota AIDS Project. Mayeda was consistently
I say, "I'm coming back next year." And, you know, people kind of smile. I'm not saying it to entertain anybody; I'm saying it because I don't want to be embarrassed when I come back and they say, "Oh, my God, this is eight years. When is she going to go walk in the Diabetes Walk or for MS [multiple sclerosis]?" And, you know, maybe I'll do that someday, too, but it's not going to be in lieu of this activity. It's one thing to do that when you're raising money; it's another thing when you realize when the call comes and yet someone else has tested positive. I hope we'll all be able to take it the same way we took the last call or maybe the call before that. It's much harder, and we can't assume that because there are more meds available that people don't still need those other things that you don't buy in a bottle, that we can't be ready to give them.

**FN:** Let's talk a little bit about hope. What do you hope for?

**CM:** Well, to state the obvious, I hope we find a way to end this thing. I don't even care if it's in my lifetime. I used to be a little pissed about that; I don't care anymore. Maybe that's short-sighted. I care for all the people whose lives will be profoundly and directly affected in that time, but I just want to do it.

But I also hope that we continue to work on ways for people who are caregivers and people who have the virus to live with greater dignity, surrounded by greater compassion and greater understanding by more and more and more people, not just by the obvious or maybe the next concentric circle of people, but people like my father would have been, who never had a way in or wouldn't have wanted one, or wouldn't have thought he had a way in. If he can just gain a little bit of understanding or if he could have, and I have hope that that's possible. I think that gives me even greater hope about the quality of life that people will have while they're living with the virus.

**FN:** How about for us as a country?

one of the top money raisers. She also organized the Dayton-Hudson Foundation's matching grants program for artists.
CM: As regards to HIV?

FN: Yes.

CM: Hope in general?

FN: I mean, as compared to the sense you have about Prop 187 and that kind of discussion. How does hope fit into your vision of America as a patriot?

CM: Well, it's the thing that gets me up in the morning.