Oral History # 011

An Interview With
Glenda Gardner

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Interviewer: Lynn Schwartzenburg
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AN INTERVIEW WITH GLENDÁ GARDNER

LYNN SCHWARTZENBURG: This is Lynn Schwartzenburg interviewing Glenda Gardner for The oH Project. The interview is taking place on July 7th, 2016 in Houston, Texas. I am interviewing Ms. Gardner to obtain her recollection of the response to AIDS in the City of Houston.

Good morning.

GLENDÁ GARDNER: Good morning.

LYNN SCHWARTZENBURG: Where were you born?

GLENDÁ GARDNER: I was born in St. Louis, Missouri.

LYNN SCHWARTZENBURG: When was that?

GLENDÁ GARDNER: In 1952.

LYNN SCHWARTZENBURG: Tell me about your family: your parents, brothers, and sisters.

GLENDÁ GARDNER: I am one of seven children. We lived in the inner city of St. Louis. During the time that I lived in St. Louis, we probably moved three times in my lifetime. Every time we moved, it was because the city was building a school and they would buy our house and tear it down and build a school. That was so unique to us, that every time we would buy a house, we would get it torn down for a school. We could always go back to the school and say, “Our front door used to be right there.”

As I said, I was one of seven children. I have three sisters and three brothers, and I’m the youngest girl. Actually, one of my brothers is deceased, so
there are six of us now. As I look back on it, it was great. We didn’t have a lot of money. Actually, we were very poor, but I didn’t know it because everybody else in the neighborhood was poor, and I guess it wasn’t until we really started looking at television that we realized that people didn’t wear the same thing to school every day or have worn shoes.

My father, all of my life, was handicapped because he had a stroke when I was very young, I think before I was a year old, so he walked with a very discernible limp and he couldn’t use his right side. It didn’t affect what he did and how much time he spent with us. As I look back on that, I think that helped me to develop just the total tolerance for people with disabilities, and it wasn’t a big deal to me that somebody was different, because my dad was always different, but he always seemed normal to me. That was my reality.

SCHWARTZENBURG: What did you want to be when you were growing up?

GARDNER: I just knew I wanted to sign a lot of papers. I wanted to sit behind a desk, and I wanted to sign a lot of papers. I used to practice at the dining room table, just signing papers and making noise with my ink pen, and I knew it had to be, so I’m assuming that even at that point, I knew I wanted to be some type of an administrator.

SCHWARTZENBURG: You’re a bureaucrat at heart.

GARDNER: I am a bureaucrat from the time I was very young, and I would stack papers around the desk, and I would pull them in front of me, and I would sign them, and I would put them back in the stacks. I never wanted to be a doctor or a nurse. I just always visualized myself behind a desk signing papers.

SCHWARTZENBURG: That is funny. Where did you see that?
GARDNER: I don’t know. My mom was a domestic, and my dad worked odd jobs. He worked for places like The Lighthouse for the Blind. For some reason, he would transport people, so we were always around blind people and handicapped people because of the places where he worked, so I have no idea why I wanted to sign papers.

SCHWARTZENBURG: Did you extend that to telling your brothers and sisters what they needed to be doing, or was it just you shuffling papers?

GARDNER: It was just me shuffling papers. They didn’t pay attention to me.

SCHWARTZENBURG: So you didn’t go and play outside with them; you were shuffling papers?

GARDNER: No, I did. No, I did. I went outside and I played, but I was never really a rough-and-tumble kind of person. We played a lot outside. At the time, I would have been called a nerd.

SCHWARTZENBURG: What about high school? What was that like?

GARDNER: I went to a very large high school. Our graduating class was probably 600 or 700 students.

During the time that I was in high school, it was when we were rebelling because we wanted black history and they were not offering black history, so we protested and closed down the schools, and they would suspend school for the day and send us all home. But we were very serious. It wasn’t that we wanted to go home. It was when it was, “I’m black and I’m proud, and I want to know about my history, and I want to be taught my history in school.” I was always in the advanced classes and that group of students led the protests. This went on for two or three weeks, and they would suspend school because we were protesting and
acting up, and then I would have to go home.

The first time it happened, I knew my mother was going to kill me because I should have been in school; instead I’m protesting. When I went home, I was telling her, “Mom, I’m at home because this happened, and we want black history, and this is what we did, and so they sent us home from school.”

She just said, “Okay. You better not mess around and not graduate.”

And that was it. That was it. You know, I expected her to say, “You shouldn’t be doing this.” And to me, that was her unstated way of supporting what we were doing.

After that, she was more interested. She would say, “You got sent home from school. How is this affecting your grades?”

She never said, “Don’t do it.” And I thought that was — again, a perspective, because I was so scared the first day I was sent home, and that was all she said, and then she went on. I thought that was really interesting.

SCHWARTZENBURG: That’s powerful.

GARDNER: Yes, it really was.

SCHWARTZENBURG: What year did you graduate?

GARDNER: From high school, I graduated in 1970.

SCHWARTZENBURG: And then college?

GARDNER: I went to the University of Missouri in Columbia, which is about 125 miles from St. Louis, so I was away from home without being that far from home. That allowed my family to come up to see me, and I could travel back on the bus to see them. I stayed at the University of Missouri for five years, probably five and a half, because after I received my undergraduate degree, I just remained and got
the graduate degree.

SCHWARTZENBURG: What was your degree in?

GARDNER: My undergraduate degree was in psychology, and my graduate degree is in public health.

SCHWARTZENBURG: Why? Psychology isn’t pushing papers, but public health could be, but not really, either.

GARDNER: I took some psychology classes in high school, and I just thought it was so interesting. I think I also got disappointed in college because the study of psychology was not what I expected, but I was too far into my major to change, and so that’s why I focused on public health, which to me had more influence on people’s everyday lives.

One of the things that I remember growing up — and as I said, it’s seven of us — my youngest brother, and he was probably no more than five or six years old, had a positive TB skin test. All of us had to go to the public clinic to get tested. It was seven children and my mother on the bus, going to a public clinic. I remember the nurse taking us behind the curtain and sticking us. My mom’s test was positive. She and my brother had to take medication for a year. I remember going to the public clinic for healthcare, and for dental care — riding the bus. And I can still visualize the bus stop where my mother and I stood whenever she took me to the public clinic.

As an adult, I have such a different view of this. My mom was from Mississippi. Her brother came up North, and he got TB, and he died from TB. He came back home to Mississippi to die, so he was in the house with all of my mom’s family as he died from tuberculosis. So then for my mom to get a result
that “Your child has a positive test for tuberculosis” — it wasn’t until I was much older that I understood how afraid she had to be.

SCHWARTZENBURG: She was afraid it was a death sentence.

GARDNER: She was afraid for her child, and all of us. It wasn’t until I was much older that I understand why she was just sad that day. That’s when she told me about sanatoriums and how — now, this is crazy. My mother would give us whippings, with a black-and-white belt, and so whenever we’d get a spanking, she’d say, “Go get my black-and-white belt.” That is the family joke. You get a whipping; you get it with the black-and-white belt. Later on, I found out that my uncle, while he was in a sanatorium, made the black-and-white belt. Isn’t that something?

SCHWARTZENBURG: That is.

GARDNER: And we even joke about it now, as old people. We joke about the black-and-white belt, but then all of it just — that’s where it came from. He gave it to her, and we grew up with this black-and-white belt.

I think going to a public clinic influenced me more so than anything else because there were so many of us. The staff at the public clinic was very nice. They were very nice. They were very patient. I didn’t realize I was at a public clinic. I just thought we were going to the doctor, and that’s where you went.

SCHWARTZENBURG: So that was a very positive experience for you.

GARDNER: Yes, it was. Psychology wasn’t really working with people, and I think I really wanted to work with people.

SCHWARTZENBURG: Less one-on-one, more lots of people.

GARDNER: Lots of people.

SCHWARTZENBURG: What brought you to Houston?
GARDNER: After I graduated with my master’s, my sister was here in Houston and a boyfriend was here. They said, “Houston has a huge medical center, so if you come you’ll get a job really quickly.

SCHWARTZENBURG: And you got a job.

GARDNER: I got a job. My first job was working with the telephone company as a telephone repair service person, and then I was transferred to pull telephone cable lines and determine how many lines were needed per household. After that, I worked at Memorial Hospital. The hospital was new, and we were the first staff with this new staffing pattern that they had of a unit supervisor. I worked there for a year, and then I got the job with the City of Houston as a health planner.

SCHWARTZENBURG: The job at the hospital that was more like managing all the staff?

GARDNER: Actually, I was managing the psychiatric floor. The tenth floor was for psychiatric patients. I managed all the staff except for the doctors and nurses.

SCHWARTZENBURG: That’s a lot of experience very quickly.

GARDNER: I was very surprised that people were afraid to come to the tenth floor. I would go to other floors, but the staff would never come to the tenth floor. I explained that these patients just had different issues. But they were hard to convince, and I was surprised at that.

[END OF AUDIO PART 1]

SCHWARTZENBURG: What you experienced, going back to that, was stigma related to a diagnosis.

GARDNER: Mental illness, yes. I had no fear. I never feared going onto the locked unit. The patients were not physically sick; I always recognized that they were
mentally ill for a moment in time.

SCHWARTZENBURG: They needed help.

When did you join the City of Houston?

GARDNER: In November of 1977.

SCHWARTZENBURG: What did you do for them?

GARDNER: Initially, I was a Health Planner I. That was when Houston was annexing many areas, and so we would go out and survey the areas and write reports and determine what impact annexation would have on the City of Houston as far as extending services and the impact on that community now having to receive services from the City of Houston. Most of the people annexed did not want to be, so there were a lot of protests. I completed the assessments. I also completed surveys of the different services offered by the health department. Were the drugs stored properly at the health centers? The expiration dates, were all of those up to date? Were they in compliance? It wasn’t anything really complicated.

SCHWARTZENBURG: Did you get to move a lot of paper around?

GARDNER: Not yet, not yet.

SCHWARTZENBURG: Still looking for that.

GARDNER: Yes, still looking for that paper, signing my name.

SCHWARTZENBURG: Then what happened?

GARDNER: After health planning, I think somebody discovered that I could write, and I started writing grant proposals. I can’t remember why. I may have reviewed some proposals, and then started writing proposals. I would look for funding like in publications like the Federal Register, and if I located funding possibilities, for example for a perinatal program or an immunization program, I would provide the
information to the immunization group and they would follow up to complete a grant application.

Skipping forward many, many years, when funding for HIV became available, there was no one for me to forward the information to because the department did not have an HIV division. When I was identifying funds and working with the different divisions to assist them in completing the applications, I was considered grants management. There was not a division to forward the funding announcement, so I had the responsibility to write the HIV grant proposals. Once the department was awarded the funds, I was designated to manage the programmatic and the administrative requirements.

SCHWARTZENBURG: Tell me more about how you became aware of the HIV crisis and then when you were kind of tapped then to find some grant money for it. How did the City of Houston get involved?

GARDNER: A new Director, Dr. Arredondo, came to the department, which was about the same time period that the AIDS crisis was starting. I remember working with him to write a small grant. Early on we only had money for AIDS surveillance to keep track of the number of people with an actual AIDS diagnosis. The State designated some funds for education, and I wrote an application to the State. Later, HRSA, Health Resource and Services Administration, designated funding for prevention/case management type services. I remember going to Washington, D.C. with the Director of the department and writing a really quick proposal, and we probably received over $300,000 for it. In that proposal, we designated subcontractors, community-based organizations to be part of the program, probably $150,000 for community-based organizations to actually conduct and
provide services. The Department received State HIV education funding and the HRSA grant where we designated money for community-based organizations. Then the Centers for Disease Control designated Houston as a directly funded city for HIV prevention. CDC decided that the money would come directly to Houston, but we had to write a grant proposal to receive the funding. Nightmare on Elm Street, writing that grant. We wrote the grant application.

SCHWARTZENBURG: Why was it a nightmare to write that grant?

GARDNER: Because there were so many components. The Director, Dr. Arredondo, decided that he wanted to combine all of the different HIV-related program areas into one Bureau. So whereas we had HIV education in one division, then we had surveillance in another division, counseling and testing and perinatal prevention in another. That was new for the department. It meant a huge organizational change to create this Bureau. It meant transferring people who were accustomed to working in one division into a division that had never existed. We had to put it all on paper logically so that the application made sense to the reviewers so we could receive the funding. So it was new to all of us.

SCHWARTZENBURG: Did he have the authority to put together that Bureau, or did it need to go to the City Council?

GARDNER: He had the authority to do it. It was within the department, and so he could just organize it however he wanted. At the time there was family planning, there was STD, there was perinatal, there was surveillance, and all of those people had to work with me on the grant application. I spearheaded writing the grant, and staff from other divisions had to determine what their sections would be responsible for and how it was going to function within the new Bureau. How
does it fit in?

SCHWARTZENBURG: Right. “You tell me. You’re the one that pulled me into this.”

GARDNER: Right, right.

SCHWARTZENBURG: It’s like, “I don’t know how it’s going to work.”

GARDNER: People were resistant to change internally, but we got it done.

SCHWARTZENBURG: Was there any stigma related to the HIV diagnosis from some of the people being called to it?

GARDNER: No. Working with the health department, I don’t think that was a big issue as far as the diagnosis. HIV was new, and people needed to be educated. Because we had a new Bureau, which meant we brought in new people, then the question was always asked, “Did you hire him because he has AIDS? Is that what’s going on here?” I never received a lot of resistance related to HIV internally.

SCHWARTZENBURG: What was happening before the Bureau started? When did the City start realizing that they needed to test for AIDS? Were you a part of that?

GARDNER: The Department started testing for AIDS in our family planning and maternity clinics, because by the time the Bureau was formed, either they were already testing or they started to test. But the Bureau was created because HIV services were being provided across so many programs within the department, it was important to bring it all together, to centralize it. And as I said, we had health education money from the State, health education money from CDC or from HRSA, and then we had counseling and testing in different departments.

SCHWARTZENBURG: It was huge by then.

GARDNER: This was in 1989, that’s when the Bureau was formed. I remember, I must
have been still in grants management. I may have told you that the Division
Director for our STD program is the person who was just casually talking and
mentioned whatever we were calling it back then. I’m sure it wasn’t HIV.

SCHWARTZENBURG: ARC [AIDS-related complex].

GARDNER: But he talked about gay men coming to the STD clinic with this disease.
He and I talked about it, and of course he knew a lot more about it than I did.
That was the first time I had heard about HIV, just based on cases they were
seeing in the STD clinic. The STD program was brought into the Bureau so it
was the Bureau of HIV/STD Prevention. We may have started with the Bureau of
HIV Prevention, but years later we changed it to HIV/STD Prevention, a big
change for the department.

SCHWARTZENBURG: Who was head of that Bureau when it first started?

GARDNER: I was, because I wrote the grant. Silly me. The grant was funded, and as I
said, there was nobody to manage the program. I couldn’t punt it to somebody,
and so the director was saying, “Well, okay. You’re more familiar with it than
anybody else, so you get it started until we can hire somebody to do it,” and that
went on for almost a year. The Department was interviewing people for the job
that I was doing, and I think I even sat in on some of the interviews.

And then after about a year, I said, “Well, wait a minute. I’ve been doing
it, and it’s going fine, so why can’t I be the Bureau Chief?”

“You know,” he said. “You’re not ready.”

After I protested very loudly, because it was just the two of us, he said,
“Well, okay. Let’s see. Apply for the job.”

And so that’s how it happened, but I did have to go through an interview
SCHWARTZENBURG: How long did it take after that, then?

GARDNER: It wasn’t long. So I was it, and there have only been two others. When I left, there was a lady from the University of Texas School of Public Health, I think, and then she stayed a year or so. And then there is another lady now.

SCHWARTZENBURG: There have only been three.

GARDNER: There have only been three. That’s when HIV hit with a bang then. Oh, my God, there were so many guys dying. Every day, just—we would actually look at the obituaries. And at the time if they were young and they were white, you had to question was it AIDS, and a lot of times it was. Those were tough times in the late 1980s and the 1990s because so many people were dying. Many of the people who were sitting around the table planning programs with us were sick, and you could see them that they were sick, and then they would die, and then other people would come, and at the time they were healthy, but then they would look fragile.

I went to so many hospitals and so many funerals because of people I worked with, or who I knew through work. Their passion was so great, because they were seeing their friends die. And can you imagine, you’re seeing your friends die and you know you have the same disease and that you’re going to die too because there was no cure, not even effective treatments then. That had to be
so tough, and so that’s why I think so much of the passion and the protests were there. Bureaucrats, we just didn’t move fast enough. They felt we weren’t getting the money out fast enough and we were not taking it seriously enough.

If I look at it from the perspective of the community, then that’s what I see. If the money is here, it’s not enough money. But what money there is, get it out to the community. Get it out to be educated so that our friends will stop dying, so that I will stop dying.

Originally the Greater Houston AIDS Alliance was formed. We had all of these physicians and participants like that. And then we had the community. But the Greater Houston AIDS Alliance — and again, I chalk it up to we just didn’t know. We were dancing as fast as we could. We just didn’t know, because the disease was moving so quickly.

So we had the Greater Houston AIDS Alliance, but it was a bunch of bureaucrats sitting around the table that had been appointed by the Judge and the Mayor or whatever. I was on it. And then there was the community coming in to act up. You know, that was one of the groups, ACT UP [AIDS Coalition to Unleash Power], because they were saying, “You’re sitting around the table and you’re talking, but we need you to get the money out there. We need you to do more.” Those meetings were very challenging and then that group evolved into another group, some kind of a planning group, and so as the years went on, we got more people at the table who were representative of the community that was being affected. We would see gay men, white gay males, black gay males, women start to become part of the process.

SCHWARTZENBURG: When did you start seeing more action taking place, and what
did it take for that to happen, or the perception that more action was taking place?

GARDNER: I think, unfortunately, it was when we started more planning groups and
task forces that held people accountable. You know, there were a lot of task
forces. They were, “Well, what is the City doing?” and “Why hasn’t the City?”
and “The City should.” And I had to have an advisory committee related to HIV,
and then we had the Emergency Task Force, and then the County was going
through the same thing.

Some of the task forces were mandated as part of the funding, but others
were because we knew we needed to hear from the communities. And so I think
that influenced a lot, because the director of the department heard what those
tasks forces were saying. We had community planning groups. We had AIDS
Task Force. Then we had the Ryan White Task Force. And we were mandated,
as part of the funding, to set priorities based upon what these task forces
determined after they reviewed the data, which determined how the funding was
allocated.

SCHWARTZENBURG: Why was that a problem? Why was that so hard? Why was
there that bureaucracy?

GARDNER: Because when you work for government, and that’s city government or
county government, hospital district, there are processes that you have to go
through. There are contracting processes. There are bid processes. The RFP
[request for proposal] processes. You have to send it to city council. You have to
have council action forms to be sure that everybody who approves that contract
understands what that contractor is supposed to do as far as performance.

If we are awarded and it had to come from the Centers for Disease
Control, that’s a big bureaucracy just to get funding to us, for somebody to sign it on a dotted line saying, “Okay. Give the money to Houston.”

Then when it gets to Houston, it has to go through the City’s acceptance process. The City had to determine whether it could meet the requirements before it accepted the funding.

Then the funds go to the Department, to the Bureau; a request for proposals has to be completed; contracts have to be developed and approved. When the contracts are presented to City Council for approval, if one Council member requested more information, sometime based on what the Council member has heard from the community, they tag the item, which causes a delay. Federal and state funding was provided to the City. I wish I could have moved the approval process along more quickly. Again, this was new for us also, and we were moving it along, but I wish that I could have done something to move it along faster. I remember one of our accountants said to me, because I was complaining, “Why is it taking so long? I gave that to you two weeks ago.”

The response, “Glenda, you’ve got to be sure that you don’t jeopardize the City and you don’t jeopardize yourself because if you use these dollars inappropriately and you get audited, then it’s going to come back on you and it’s going to come back on the City, so we have to have all the checks and balances in place.”

I understood the answer, but I didn’t like it. At the same time my face had to show to the community that this is the process that we have to go through. I couldn’t say, “Well, I don’t like it either.” I can’t do that. When I’m at the meetings and the community is complaining about it, I can’t say, “Well, I tried,
but they didn’t.” I have to say, “Well, right now, it’s here, and we expect” — you know, that bureaucratic, that signing-all-the-papers stuff, I was there. By the time I got to the Bureau, I was signing my name a lot of times, and I was working with a lot of people who had to sign their names a lot of times.

SCHWARTZENBURG: Did you have anyone in the community that you trusted enough to kind of confide in and to say, "Look, this is the way it really is, and I hate it,” and all of those things that you were feeling, versus the face?

GARDNER: I would say yeah, or they would call me and say, “Glenda, I need to pay my staff.”

“What did your Council member say?”

SCHWARTZENBURG: You’d give them little hints?

GARDNER: Yes, but again, I had to be so careful because of how things can backfire. I experienced backfires also.

SCHWARTZENBURG: It does not sound like an easy position for you.

GARDNER: It wasn’t. The City was constantly in the newspaper. Constantly people interviewing because of something that happened, and a lot of times it was because the money was not getting out fast enough or we were being questioned about to whom we were allocating the funds, and why a specific agency received a certain level of funding, and another agency did not get that same amount?

This is my perspective: I think the community thought that we had a bias. Let me personalize it. I think that sometimes the community thought that I had a bias because I worked for the City and I couldn’t relate to the community, and therefore I influenced the amount of money that was received and how much was received.
SCHWARTZENBURG: And what was the reality?

GARDNER: The reality is that it took time. It took time. The City is very clear about competing for funds, and if someone were to grant application and it went through the review process, then I had no influence on how much they received. It was reviewed, so I wasn’t picking and choosing who received funding and the amount that they received, but I think sometimes the community may have thought that.

SCHWARTZENBURG: What was your perception of the community?

GARDNER: I didn’t resent them. I wondered why they had no concept of what I was going through, and I guess that was too much for me to expect, because I represented the City. I was the face of the City. I don’t think the community understood what an advocate I really was within the City. I don’t think they understood, because they never acknowledged that. But I’m okay with that because again, so many people were dying and the community wanted more action. They wanted faster action, and I understand that.

SCHWARTZENBURG: And you were having your own losses through the crisis.

GARDNER: Oh, my God, yeah. My friends, the friendships that I built because of HIV and having worked with people and then going outside of the HIV administrator role but actually becoming friends with people and then for them to die, that was hard. Showing up at a gay white male funeral, I would go, and it was like, “Who is that?”

It was hard for so many people. Staffing the Bureau, you get to know the people you’re working with in the community. And not only that, we had people who died who worked for the Bureau.

SCHWARTZENBURG: There was, I recall, a story about — were you writing a grant?
Or there was some reason why you couldn’t go to your cousin’s funeral.

GARDNER: The grant, the grant from hell.

SCHWARTZENBURG: The grant from hell, back to that. All the way back then.

GARDNER: All the way back then. Yeah, that was in 1988, and because we were working evenings and weekends, and my cousin died — and I’m not sure at the time that I knew he died from AIDS, but I knew that he died; this was my first cousin — and there was just no way that I could go. And so my family went to his funeral, and I was thinking, “My goodness, here I am still in Houston.”

SCHWARTZENBURG: It’s just interesting that you were the person in that position and how connected it all is, I guess.

GARDNER: Yes, it really is. I met friends through protests. I may have told you about one friend I had, and I met him because he started writing me letters and telling me what I should be doing and what I wasn’t doing, very beautiful letters, but definitely he thought I could do a better job than what I was doing. So finally I got an opportunity to meet him. I was like, “You’re the man who’s been writing me these letters,” and we became very good friends as a result of just going to lunch.

He just said, “Well, let’s just go to lunch and talk.” We started going to lunch and talking, and we had much more in common than you would have thought. We were so different. He’s a gay white older male, but we really enjoyed the friendship, but it came out of his protesting what I was doing. That was funny.

SCHWARTZENBURG: Did he make it?

GARDNER: No, no, he didn’t. He didn’t.
SCHWARTZENBURG: That must have been hard.

GARDNER: It was very hard.

SCHWARTZENBURG: What was your involvement with the Ryan White Planning Council? Were you involved in those meetings?

GARDNER: Oh, yes. I don’t know too many councils I was not on. The federal government, I think Ryan White came through HRSA, and the funds were designated for the highest elected official in the County — I think that’s the way it was worded — so that meant the funding went to Harris County, not the City. One of the requirements of that funding is a Ryan White Planning Council, and that Council actually set the priorities for how funds are allocated to the community. Different groups have to be represented on the Council. I was on the Council as the local government representative.

SCHWARTZENBURG: Did the City receive any funds from Ryan White?

GARDNER: Not from Ryan White. Actually we applied for funding once. We wrote an application because of the connection between HIV and tuberculosis and submitted the application to Ryan White, but we were not approved.

SCHWARTZENBURG: Oh, well, you tried.

GARDNER: We tried. I don’t think it had anything to do with the application. We never received any Ryan White funds, but we did have to be represented on the Ryan White Planning Council. The Council still operates now, setting the priorities. And then there’s a comparable community planning group for the funding that comes for prevention from the Centers for Disease Control.

SCHWARTZENBURG: When you were on the Ryan White Planning Council, who was leading that?
GARDNER: You mean as far as the County? Probably Sue Cooper, and I can’t think of the guy’s name who was her administrative assistant. The Council was coordinated from Harris County, because the funding went through Commissioner’s Court.

SCHWARTZENBURG: I understand there was a lot of contention at the time that Sue was leading that.

GARDNER: There was. I wish I understood her more. I never understood why she was like that.

SCHWARTZENBURG: How was she?

GARDNER: She wasn’t very approachable, to me. Glenda’s opinion.

SCHWARTZENBURG: Right.

GARDNER: And I don’t know if it’s because — that Ryan White funding was a large sum of money that would go out to the community. The funds came with a lot of stipulations, so she had to go through a lot of processes to get the money out too. And maybe because people were so distrustful and maybe they resented her because she pretty much was the face that controlled the money, but she didn’t make it any better. I know I worked with her.

SCHWARTZENBURG: So it was a style thing, do you think, or was it what her choices are?

GARDNER: I think it was her style. She made the decision, and there wasn’t a lot of conversation about it. I got the impression sometimes that she resented that she had to take input from the community. Perhaps she thought she could do a better job if she just looked at the information and did it herself, but the community had to have input.
SCHWARTZENBURG: Right, it was a requirement.

GARDNER: It was required. To me, it was being unapproachable. But I want to give her the benefit of the doubt and say that maybe she was so overwhelmed with the task that she had to do, that she had to be like that just to get it done.

SCHWARTZENBURG: You understand the face, but yet —

GARDNER: But yet, I think she could have worked a little bit better with the community. But again, she’s a bureaucrat with the County, I’m a bureaucrat with the City, so I’m not going to judge her.

SCHWARTZENBURG: You’re sisters in arms in a way.

GARDNER: Right, because maybe I was the same way. But I had a difficult time working with her, and I don’t know why. The community was really on her.

There were a lot of protests against Sue Cooper.

SCHWARTZENBURG: How was that resolved?

GARDNER: Maybe she left.

SCHWARTZENBURG: Do you know who came in after that?

GARDNER: I don’t remember. Charles Henley. Charles Henley was her assistant, and then I think maybe he got the position or something. I can’t remember why Sue Cooper left. Sue Cooper came from one of the hospitals here in Houston.

SCHWARTZENBURG: The Institute for Immunological Disorders.

GARDNER: Yes. And maybe she was the same way I did; she was transitioned into that position.

SCHWARTZENBURG: Before that, she had been a social worker at M.D. Anderson.

GARDNER: Oh, okay. She wasn’t very approachable. She took a lot of heat. She really did.
SCHWARTZENBURG: It sounds like the wrong personality type for what was expected.

GARDNER: Yeah, but I do know too that for me, I couldn’t take it personally. Is it personally against Glenda, or is it personally because Glenda represents the City? And so I had to really step back and determine that. And the other thing was at the time, in fairness to Sue Cooper, it was so much work. Seven days a week I was going to work. I was staying late. I never said that to anybody. I never said, “I’m working seven days a week. I have family.” And maybe the same thing with Sue Cooper.

And then you get these people who resent what you’re doing, and every now and then it’s like, “Okay. Whatever,” for a minute, for a minute. It’s like, “Whatever.” But those are the kinds of things that you can’t say. The community could say whatever they wanted to say to me, but I couldn’t respond how I felt sometimes.

SCHWARTZENBURG: Where did you take that? Where did you take all of those feelings and emotions? How did you deal with it?

GARDNER: I have friends, I have family, so I could process it. It never really got me down. I was called on the carpet a lot. I was called to the Director’s office so many times, a lot. “Why did you?” “Why did this happen?” “Didn’t you?” “Couldn’t you?”

It was not that I was not taking it seriously, I took it very seriously, but at the same time I don’t think I took it that personally.

Every now and then, somebody would say, “Thank you” and “I appreciate it,” “Oh, I understand,” because I would take the time to meet with people and
explain things, and they’d say, “Oh, okay. I understand.”

And then sometimes if somebody had been in a community-based organization and they would start working for the City in the Bureau, they would say, “I never realized what you all did. I never realized what you-all had to go through,” you know.

Sometimes that was kind of validation. “Okay. It’s not me. It’s the system.”

It got better. The process got better. It got faster.

SCHWARTZENBURG: You get to a point where everybody knows the drill, they kind of fall in line, “Give us your input.”

GARDNER: They start to trust you.

SCHWARTZENBURG: People did get money and said, “Okay. This is what I need to do this time. This is what I learned from last time that I need to do this time to make it go faster.”

GARDNER: Right, we were also responsible for monitoring, and so that was our way of coaching people, to say, “Okay. No, you can’t do it that way. Do it differently.” They would do it better the next time. Contractors didn’t know what to expect initially, and we didn’t either, so the first years were really tough.

SCHWARTZENBURG: Being the City, don’t you need to track how many people have certain disease states?

GARDNER: Yes.

SCHWARTZENBURG: How did that go? Was that easy or hard?

GARDNER: That was hard too because of the nature of the disease. AIDS was always reportable, which means that we knew the name, we knew what their status was,
all the information. We had the authority to go in and look at medical records to get information that helped us with the numbers so we knew what was going on in the City of Houston as far as numbers.

SCHWARTZENBURG: Because funding is based on numbers, right?

GARDNER: Funding was based on the number of AIDS cases reported. Some of the doctors were resistant to reporting. They didn’t want us to come in and look at their records. They didn’t want us reporting their patients because of the confidentiality issue.

And try to explain to them, “We are locked behind doors, behind cabinets. These patient-data records are very confidential.” But some of them never would report, so that was disheartening, but you can’t control that.

SCHWARTZENBURG: But they didn’t see the circle of “I need more funding because people are upset because I don’t have funding, but I can’t get more funding because you won’t tell me who these people are.”

GARDNER: Right, that’s definitely it. So we did, we maintained the number of AIDS cases. The City still keeps the numbers for AIDS.

SCHWARTZENBURG: What about HIV testing?

GARDNER: Well, counseling and testing was anonymous — was confidential, so it was not name reporting. And then probably in the early 2000s or late 1998-ish, name reporting started for HIV. We had a better idea of who was getting HIV because we could eliminate duplicates. If someone was tested every three months, as long as we didn’t have a name, then they could be counted three times. So now we have more accurate data. Initially there was a big protest about name reporting for HIV, but it passed, and I have not heard of any backlash or anything that
happened as a result of name reporting.

SCHWARTZENBURG: Everything is a controversy. You mentioned a report by

Wayne Dolcefino at one time.

GARDNER: Was it about the condoms?

SCHWARTZENBURG: What’s that story?

GARDNER: Well, in order to purchase condoms, we purchased them in bulk, so we

would purchase 100,000, 200,000 condoms at a time to get them cheaper. And

we would distribute the condoms to the community-based organizations. So if the
AIDS Foundation wanted to come over and get condoms, then we would give

them condoms for their clients.

So Wayne Dolcefino was doing a story on something else and somehow

he found out that we were storing condoms under the steps of the health
department, and he brought his cameras and, you know, “The City is storing these
condoms. Well, why are they storing the condoms?”

So then, of course, when it’s time for us to send the purchase order

through City Council, we were asked, “Okay why are you storing — and why are

you buying all these condoms? And what are you doing?” So it brought up more

questions. I think he stayed on that story for at least a week.

We had to move the condoms to a storage facility, and of course the

storage facility had to be air-conditioned because the heat would affect the

condoms, so we actually spent more money because Wayne Dolcefino came and

saw condoms under the steps.

SCHWARTZENBURG: The bureaucracy.

GARDNER: Oh, it was something. I think he was coming to do another story on a
mobile unit that we had purchased and we had not moved very quickly to get the program operational. I think that’s what the story was initially, and then maybe he saw the condoms so he took off on the condom story.

SCHWARTZENBURG: Everybody’s got a job.

GARDNER: Everybody has a job. It was interesting, especially since they were condoms.

SCHWARTZENBURG: Scandalous.

GARDNER: Oh, my goodness. The City and those scandalous condoms, yeah.

SCHWARTZENBURG: Conservative Houston.

GARDNER: Yes. “And what are you doing with those condoms anyway?” We had a condom distribution program where staff went to different businesses in the neighborhoods, dropping off condoms for the clients of the business.

SCHWARTZENBURG: Well, AIDS isn’t the only disease that a condom is beneficial for.

GARDNER: Right. We also saw the resurgence of syphilis, even more of a reason to make condoms available. And the thought process for us was, we’re looking at we can buy in bulk, we can save money, and we can get them out to the community very quickly. That was our thought process.

SCHWARTZENBURG: Kathy Whitmire was Mayor from 1982 until 1992, I think. How did she play into anything that you were doing at the Bureau?

GARDNER: She was Mayor until 1992?

SCHWARTZENBURG: I think so.

GARDNER: Okay. Honestly, I hate to say it, but I don’t remember Kathy Whitmire — I don’t remember a response coming from her. I do know some of the Council
members, we would get a response from them. Eleanor Tinsley? She had an issue with billboards, and we wanted to conduct an HIV prevention campaign, and part of it was that we got billboard space donated and we would just print the billboard. We had to meet with her because she would not approve our campaign. That was her platform: no billboards. She wanted no billboards in Houston.

SCHWARTZENBURG: It didn’t matter what the billboard advertised.

GARDNER: Oh, no, it didn’t matter what it said. It’s like, “If you’re coming down here to talk about putting up billboards, you may as well go back because we’re not putting up billboards.”

I can’t remember what happened. I don’t know if she was no longer on the Council or what, but I do know that at one point we did get billboards for HIV prevention. But initially, no.

I don’t remember Kathy Whitmire. I do remember Lee Brown. Was he after Kathy Whitmire?

SCHWARTZENBURG: I think so.

GARDNER: I remember when the State of Emergency on AIDS or State of Emergency on HIV/STD Prevention was declared with the City, and I remember having to present it to Lee Brown’s office. He actually participated when we did the big announcements about prevention. And I know he participated in several World AIDS Day events, and he would speak at those events.

SCHWARTZENBURG: Were you involved in that? World AIDS Day events?

GARDNER: Yes. We always had a big World AIDS Day event initiated by the City. And one of them, which was pretty good, the young lady who did it had T-shirts, red T-shirts, and so there was a red ribbon over at Hermann Park that was formed
with people wearing T-shirts, and so looking at it from the air, it was very impressive. We always had some type of World AIDS Day acknowledgment. I do remember Mayor Lee Brown participating because of the State of Emergency on HIV in Houston.

SCHWARTZENBURG: Do you remember when that was?

GARDNER: When you said that Kathy Whitmire was until 1992, maybe that was in 1994 or 1995.

SCHWARTZENBURG: In closing and looking back, how do you rate your performance as Bureau Chief, and how long were you Bureau Chief?

[END OF AUDIO PART 2]

GARDNER: I left the City in 2003, so I was probably Bureau Chief from 1990 until 2003. It was a long time, wasn’t it?

SCHWARTZENBURG: That is. You rode out that storm.

GARDNER: I don’t know how to give myself a grade, because I tend to think of myself as how other people viewed me. I wish I could have had more influence on the City process. I was in the middle of it and understood it, but I wish I could have moved the paper along more. I wish the community could have understood that sometimes that’s the way governments run. I wish I could have had more influence to change that system. Sometimes it does have to come from protests from outside people, for politicians to have their constituents put pressure on them to make things happen.

I did work with a lot of the staff members from community-based organizations because of all the task forces that I was on and that I attended. I got to know people in the community. And so I hope that having that personal
relationship with me, meaning they knew me personally and they could pick up the telephone and call me and say, “This is what’s going on. Tell me what I should do,” I appreciated that. I think that was good.

But you know, the fourth largest city in the United States. I think that’s why the community protested so much, because the money was coming directly to government and then it was up to government to disburse it to the community.

SCHWARTZENBURG: There’s probably no way around that.

GARDNER: As I see it now. Even now, when I attempt to get something done with the City, it’s still a big bureaucracy.

SCHWARTZENBURG: What makes you most proud of your time at the City of Houston?

GARDNER: That we were able to operate the program without having any sanctions. There never was a question of impropriety or anything like that, and there was a lot of money at some point. It was over $10 million coming in. We had no questions with our audits on how we were processing the money, how we were using the money. We always had very good marks for that, so I was proud of that.

SCHWARTZENBURG: That is something to be proud of.

GARDNER: Yes, because not only were they looking at the City, but they also would audit the agencies that we funded. And so because of our monitoring too, we
didn’t have any issues.

SCHWARTZENBURG: If you could go back and talk to that little girl that was signing her name at the kitchen table, what would you tell her?

GARDNER: “You’ve signed your name enough. Go home.” I’m still signing my name.

I sit here now, and I’m signing just checks and papers. It’s like, “Okay. Okay. Okay. We get it. You know, you retired once. Retire again. Go home.” I think about that sometimes when I’m writing, when I’m signing my name on all these stacks of paper right here.

SCHWARTZENBURG: “Why did I want this?”

GARDNER: With the City, I would come in and my inbox was just so full, and I was constantly reading and signing piles of papers.

SCHWARTZENBURG: It’s time.

GARDNER: It’s time. I’ve done it enough, yes.

SCHWARTZENBURG: Thank you so much. I so appreciate you taking the time to tell us your recollections.

GARDNER: I hope it helps. I hope it gives some perspective, and no one has ever asked me that in-depth type of questions from a personal perspective because I always spoke from a City perspective, but the personal perspective was never given.

SCHWARTZENBURG: We’re glad to have it.

GARDNER: Oh, thank you. I hope you’re getting a lot of good information from other people, like Sue Cooper. I don’t know if you’ll get a chance to talk to her, but I know she’ll have a different one, and maybe once I read what she said, I’ll learn, “Okay. That’s why.” And I think that’s important.

And if you talk to Ralph Lasher, and you can say, “Okay. Well, that’s
why.”

Well, Mateen Baaith was one of the first African-American community-based organizations dealing with drugs and HIV, and he passed away.

But why did people hang in so long? “Why did you attend all these meetings?”

Sometimes you know why, but other times you don’t.

SCHWARTZENBURG: It’s a good thing that you did.

GARDNER: I hope so. You never know. I hope so.

SCHWARTZENBURG: Thank you.

[END OF AUDIO PART 3]

[INTERVIEW CONCLUDED]

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