The Rest of It: Hustlers, Cocaine, Depression, and Then Some 1976–1988

MARTIN DUBERMAN

The Rest of It

ALSO BY MARTIN DUBERMAN

NONFICTION

Hold Tight Gently: Michael Callen, Essex Hemphill, and the Battlefield of AIDS (2016)
The Emperor Has No Clothes: Doug Ireland's Radical Voice (2015)
The Martin Duberman Reader (2013)
Howard Zinn: A Life on the Left (2012)
A Saving Remnant: The Radical Lives of Barbara Deming and David McReynolds (2011)
Waiting to Land: A (Mostly) Political Memoir, 1985–2008 (2009)
The Worlds of Lincoln Kirstein (2008)
Left Out: The Politics of Exclusion: Essays, 1964–2002 (2002)
Queer Representations: Reading Lives, Reading Cultures, editor (1997)
A Queer World: The Center for Lesbian and Gay Studies Reader, editor (1997)
Midlife Queer: Autobiography of a Decade, 1971–1981 (1996)
Stonewall (1994)
Cures: A Gay Man's Odyssey (1991; 2002)
Paul Robeson (1989)
Hidden from History: Reclaiming the Gay and Lesbian Past, coeditor (1989)
About Time: Exploring the Gay Past (1986; 1991)
Black Mountain: An Exploration in Community (1972)
The Uncompleted Past: Essays, 1962–1968 (1969)
James Russell Lowell (1966)
The Antislavery Vanguard: New Essays on the Abolitionists, editor (1965)
Charles Francis Adams, 1807–1886 (1960)

FICTION

Jews/Queers/Germans (2016)
Haymarket (2003)

YOUNG ADULT

Lives of Notable Gay Men and Lesbians, 10 vols., editor (1994–1997)
Issues in Lesbian and Gay Life, 4 vols., editor (1994–1997)

DRAMA

Radical Acts: Collected Political Plays (2008)
Mother Earth (1991)
Visions of Kerouac (1977)
Male Armor: Selected Plays, 1968–1974 (1975)
The Memory Bank (1970)
In White America (1964)

MARTIN DUBERMAN

The Rest of It:

Hustlers, Cocaine, Depression, and Then Some, 1976–1988

DUKE UNIVERSITY PRESS | DURHAM AND LONDON | 2018

Printed in the United States of America
on acid-free paper ∞
Designed by Amy Ruth Buchanan
Typeset in Arno Pro and Montserrat by
Westchester Publishing Services

Library of Congress Cataloging-in-Publication Data
Names: Duberman, Martin B., author.
Title: The rest of it : hustlers, cocaine, depression,
and then some, 1976–1988 / Martin Duberman.
Description: Durham : Duke University Press, 2018. |
Includes bibliographical references and index.
Identifiers: LCCN 2017036324 (print)
LCCN 2017044097 (ebook)
ISBN 9780822371861 (ebook)
ISBN 9780822370703 (hardcover : alk. paper)
Subjects: LCSH: Duberman, Martin B. | Gay men—
United States—Biography. | Gay liberation
movement—United States—History.
Classification: LCC HQ75.8.D82 (ebook) |
LCC HQ75.8.D82 A3 2018 (print) |
DDC 306.76/62092—dc23
LC record available at https://lccn.loc.gov/2017036324

Cover art: Martin Duberman, 1981. Photo by Jill Fineberg.
Manuscripts and Archives Division, The New York Public Library,
Astor, Lenox, and Tilden Foundations.

To the memory of my mother

JOSEPHINE BAUML DUBERMAN

who saved my life but not her own

To break out of the structures of the arrogant eye we have to dare to rely on ourselves to make meaning and we have to imagine ourselves beings capable of that: capable of weaving the web of meaning which will hold us in some kind of intelligibility.

—Marilyn Frye, “In and Out of Harm’s Way,” in *Politics of Reality: Essays in Feminist Theory*

Contents

Preface

A number of people over the years have made a similar comment to me about my earlier autobiographical books: "How come you've never written about one whole decade, from the mid-seventies to the mid-eighties?"

When I stopped to think about it, the answer was obvious: "Those were the most painful years of my life. To stir them up again might be psychologically risky. They're better left alone." Avoidance and denial might well have worked forever, but having raised the question and answered it, I somehow felt the need to push ahead. Perhaps because it felt cowardly not to. Perhaps because I'd grown tired of late of writing about other people's lives. Perhaps—this is the hardest to admit—because I've long been aware that the general view of me is that I've had one of those rare charmed lives devoid of trauma, a view I understood and even thought reasonable, yet nonetheless resented. As I've grown older I've increasingly played the role assigned me of problem-free Super-Privileged White Man even as I silently grumbled about "not being understood." I wanted to yawp with the rest of them.

So here it is. And it isn't all pain and lamentation. Yes, it was a difficult decade, complete with heart attack, cocaine and hustler addictions, and confinement in a locked ward at Payne-Whitney. But it was also the decade in which I was able to publish a collection of my essays, coedit the anthology *Hidden from History: Exploring the Gay Past*, and, above all, complete my biography of Paul Robeson. Yes, it was a decade replete with repetitive angst over unresponsive lovers, one in which long-standing friendships and political alliances were broken, and one marked by depression and hospitalization. Yet it was also a decade that ended with meeting the man with whom I've lived ever since, which ultimately put me on a calmer, more sustainable path in life.

1

My Mother's Death

My mother had been operated on for a rectal tumor in 1976 that the surgeon, immediately following the operation, told me was benign; cancer, he said, could be ruled out. Then came the first pathology report, shocking us all with the diagnosis of malignant melanoma. Her doctor scheduled a series of tests to determine whether the melanoma was present anywhere else in her body; he was "hopeful"—though not "certain"—it was not.

The next month was a roller coaster of contradictory findings, raised hopes, sudden deflations. On October 28, my mother's seventy-fourth birthday, her doctors operated again: a "tiny recurrence," the surgeon said, adding that he'd "had to go pretty deep" and was keeping his fingers crossed that she wouldn't lose control of the sphincter muscle. She didn't, and was soon out of the hospital and back working every day in her tiny resale shop, Treasures and Trifles, while undergoing chemotherapy treatments.

A woman of bedrock courage (belied by the surface habit of petty complaint), she refused to let me or anyone else in the family accompany her to the treatments. She carefully worked out the logistics, timing the return leg of the car or bus trip (she'd impatiently dismissed the suggestion that she take a cab: "Why throw money out?") from the doctor's office to her apartment in Mount Vernon so that the vomiting that always followed a treatment would begin only after she'd safely reached home.

While the treatments were still ongoing she decided to cook one of her legendary family dinners: "my welcome back to life," she gamely called it. She outdid herself, preparing *two* sets of hors d'oeuvres, turkey, pot roast *and* tongue, strawberry *and* banana shortcakes. My sister proposed the right toast: "To a gallant lady." As evening came on and relatives started to leave, I caught the deep melancholy settling into

Ma's eyes, heard her unspoken thought: "The last time . . . the last . . ." I saw her firmly shake off the melancholy, determinedly rejoin the conversation. Who expects nobility in one's own mother? Having harbored for so long my youthful set of grievances against her, using up what compassion I had on myself, I got a belated glimpse into the stunningly brave woman who should have been—who was—so much more than Marty's "difficult" mother.

It did prove her last family dinner. By the summer of 1977 she'd developed swollen lymph nodes and—a woman who'd had insomnia all her adult life—began to spend an unnerving amount of time asleep. Her doctor told me on the phone (my mother allowed me to call him, if not go with her to see him) that "melanoma is fickle." He imperiously ticked off his ramifying and contradictory findings: yes, he was "virtually certain" the nodes are affected; no, chemotherapy is not "entirely useless" in combating the spread; yes, her endless sleeping "does suggest neurological complications"; yes, one could "just as logically" ascribe the sleeping to effects of the chemotherapy. He warned me against telling her the truth about her condition, which, as we moved into late summer, he spoke of as "hopeless": "Nothing more can be done medically, and she will not be able to handle the news."

I'd always thought of my mother as a person who could handle anything. In my own psychological arsenal she'd served as the superconcerned, omnipotent force that could make everything come out right. Her shamanistic power to chase away disappointment and fear remained with me even after my teen years, when I'd stopped telling her anything important about myself because I didn't want to risk getting near the subject of central importance: my homosexuality.

I already knew she could handle it. Five years earlier, when my essay review "The Literature on Homosexuality" was about to appear in the *New York Times*, I felt I had to give her advance warning. As I wrote in my diary, "This is nothing for a 70 year old woman to be reading in print." One night when I was befogged with fatigue, I "casually" blurted out on the phone that a review of mine was about to appear in which I mentioned my homosexuality. "Do you go into much detail?" she unhesitatingly asked. "No," I truthfully said, "it's just something I mention in passing." There was an audible sigh of relief, quickly followed by her saying, "Well, I'm very proud of you. It's a changing world, and nobody knows what normal means anymore. People who claim they do are stupid." I don't know what I stammered in reply—I was fighting back tears. Broaching the subject once proved quite enough for both of us; I knew it would make her sad and make me feel guilty. I was still too ashamed of being gay; "coming out," most people don't seem to realize, is often a *strategy* for greater self-acceptance, not the thing itself. I was bold enough in 1972 to declare my homosexuality publicly and had already become deeply engaged in the gay political movement, but I remained tongue-tied about the subject with my own mother.

I decided to go along with the doctor's advice and not tell her that her own condition was "hopeless." I'd never been convinced of the dictum that "a patient has the right to know." *I* wouldn't want to know: I'd want some hope to hang on to. My mother was more of a stoic, but I wasn't sure how much more. As for the touted right to face death directly and with dignity, that might be fine for those with a serene sense of completion—or a belief in an afterlife—but neither trait was part of the family heritage.

Besides, I knew my mother's minimal financial affairs were in order, and I couldn't bear to dwell on the disarray of her emotional ones. Ours had been a deeply conflicted, fumblingly potent bond, a connection achingly resonant with empathy yet encased in muted friction, profoundly entangled in issues of suffocating invasion and control. With the onset of puberty—and sexual awareness—I'd retreated into a monosyllabic silence when around her that became habitual: guilt about my sexual desires, in combination with an underlay of resentment over my mother's relentlessly intrusive personality, led me to build a protective fortress around myself. I couldn't stand the thought that in all likelihood she was going to die with so much—and especially so much tenderness—left unexpressed, nor that she was going to leave me bereft of what felt like my one true ally.

I decided to take my cue from her; if she pressed for more clarity about her condition, I'd *try* to provide it. But that decision wasn't easy to implement. I kept changing my mind about how much she already knew (or sensed) and about how much more she wanted to know. She'd sometimes whisper secretively to me that she knew she was dying, and now and then even threatened to kill herself. A day later she'd insist she was feeling much better, that her sleepiness must be due to the chemo treatments, and that she didn't need me "hovering" over her all the time.

Some of the family had planned to gather early in August 1977 in celebration of my forty-seventh birthday, at my cousin Ron's house in Saratoga. My mother insisted we proceed with the outing and, once we were there, insisted on going along with us to the race track. Her gallantry got her through five hours of muggy heat and engulfing crowds, but the following day she was noticeably more feeble—"all broken up," as she put it.

She propped herself up on the living-room sofa, shaky and weak, trying to stay awake, trying to maintain through sheer force of will some semblance of her usual place in the family tableau. The piercing high spirits of Ron's two young children as they dashed gleefully back and forth through the room provided some relief—as well as anguish at how their exuberance highlighted her own debilitated state. She smiled sadly as the shrieking two-year-old careened around the room, remembering (so I imagined) the antics of her own adored cherub forty-five years earlier.

In our few minutes alone she listlessly went over and over the advisability of continuing this or that medication, believing this or that diagnosis. She acted as if real decisions were at stake, but her tone confirmed a gut-level awareness that the debated options were nonexistent. Toward the end of the day she became nearly comatose. As I carried her to the car for the trip back home, she seemed angry at my touch, brushing away my arm with what little strength she had. ("So now, when it's too late," said her furious, unspoken words in my head, "you're willing to embrace me.")

That night I wrote in my diary, "I broke down at one point, but turned away before she could see. For all I know she wants to see, wants confirmation that someone cares, wants permission to mourn together. We don't trust ourselves. We can't comfort others. The family talks of the need to make her last days 'peaceful'—meaning easy on *us*. Our automatic response is evasion. We bicker over tactics, scapegoat each other, offer false support. All in the name of sparing *her*. What shit! *We* don't want pain. Bury it! Bury her! Quick, quick! Before anyone discovers anything. About being human."

Her doctor (as I wrote my close friend Barbara) was "a monster of arrogance and inhumanity"; we could rarely get him even to come to the phone, and when face to face in his office he alternately ignored and shouted at us. "I've been tempted," I wrote Barbara, "to punch him in the face—I mean literally." But my mother was terrified that he'd wash his hands of her case, and I felt he *was* entirely capable of throwing us out of his office, of refusing to continue as her doctor.

Following the trip to Saratoga, the melanoma spread into her abdomen and symptoms began to proliferate. For a time I think my sister and I managed (barely) to persuade her that the mounting pain and swelling were due to a combination of the chemo treatments, her "nerves," and an ulcer we invented. As the side effects from the chemo worsened, she shrank noticeably, but her mind remained sharp and her will fierce. The point came when her doctor finally decided to stop the chemo, though he told us he might begin radiation—even while admitting that it was unlikely to do any good, that the side effects were "unpleasant," and that it would then be impossible to keep her from knowing the worst. On one level I felt she already knew: she would increasingly tell me that she was "dying," but I chose to believe that she did so in the hope of being contradicted rather than because she believed her own statement.

My sister and I took turns staying with her during the day while her unmarried sister, "Tedda," with whom she'd long lived (my father having died some fifteen years earlier), was at work. Mostly we just sat in her apartment while she slept more and more. When I looked in at her asleep on the bed, her slight, thin body appeared almost girlish, and it would set me to thinking sorrowfully of how little happiness she'd ever found. Beautiful, smart, dynamic, she—like most women of her generation—had never had much of a chance. She'd gone to work in her teens, finishing high school at night, had made a mostly prudential marriage, had poured her prodigious energy into housewifely routines, and, when her marriage turned loveless, had poured it into contentious altercations with friends and driven devotion to my sister's three children—leavened, happily, by a resilient good-natured ability to make fun of herself.

When she was awake it was even harder. I could barely choke down tears while watching her hand tremble as she tried to raise a glass to her lips. In an apathetic, almost languid way, she'd go over and over the "mistake" she'd made in letting them do the original operation or, more energetically, would adamantly reject as a "waste of money" my suggestion that she let a housekeeper come in for at least one or two days a week. Sometimes she seemed so perky and rational that I'd start to wonder all over again—using *her* words—whether the original diagnosis had been right, whether her current weakness wasn't (as we'd kept assuring her) the byproduct of the accumulated chemo treatments, whether she hadn't entered a stage of remission.

Other family members felt she should be hospitalized, but I fought that decision, arguing that she should have the comfort of her own home, that there was nothing left to do medically that hadn't been done, and that at this terminal point in her illness the hospital doctors would only torture her, probing and testing solely for *their* information. But by mid-August she was sleeping almost continuously, refusing food, and, when awake, growing increasingly disoriented.

As her mind began to go, the day finally came when I agreed she needed to be in the hospital, and we took her by ambulance to Mount Sinai. Everything I feared would happen, did. She became instantly alert, terrified, angry; convinced that they would operate again and that she was dying, she began to tremble with anxiety, even as she energetically denounced the "needless expense" of a private room. The hospital staff seemed infuriatingly indifferent; her doctor never showed up that first day; she was refused sedation ("We have to have her clear for the brain scan"); and I couldn't get a nurse to even bring her a blanket. Choking with rage, I had to simultaneously invent rationales for calming her down: "Only a few days for tests"; "You need care and intravenous feeding to build back your strength."

When I finally got back to my apartment that first night, I felt, as I wrote brokenly in my diary, "helpless, defeated . . . *they've* got her now . . . couldn't spare her this final horror. . . . I think of her alone in that dark room, the needle in her arm, eyes glazed with fear . . . she would have managed to prevent that from happening to me. . . . I'm okay when I'm with her in the hospital, can't stop crying back here in the apartment . . . feel so fucking alone . . . the family keeps saying 'she's in better hands now.' Yeah, sure. We're better off, Ma's not."

When I arrived the next morning she seemed less fearful—or was too weak to express it, her voice so low I had to put my ear next to her lips to hear. She was mostly rational, except that she kept asking me whether "everyone has had lunch" and warning me to watch her pocketbook: the condensation of two lifetime obsessions. Her doctor finally appeared, said he'd begun "tests," thought the melanoma had reached her brain and that "the ballpark figure" was, "best guess," only a few weeks. But, he warned, "she could last five to six months. Your family had better start thinking of putting her in a nursing home."

They moved her that day into a two-bed room with another woman dying of cancer who kept screaming, "Marion! Marion! . . . Help, oh help! Get me out of here! . . . They've burnt my legs off! . . . We're stranded!" She went on screaming all that night. Next day I learned Ma had tried to get out of bed and had had a bad fall; they had then tied her down. When I arrived that morning, she was rattling the metal guards on the sides of her bed, moaning and tossing. As soon as she saw me, she cried out, "Take me home! Take me home!" Over and over she repeated the words, her glazed eyes forlornly appealing to me. Then, in a conspiratorial whisper, she told me to go to the closet and get her clothes: "Shush . . . not a word, they'll hear . . . get me dressed . . . we'll slip out . . . they won't see . . . into the car." She looked feverishly around the room for her dress, as her roommate took up the keening chorus, "Get us out! Get us out!"

In my shock, I tried to placate her: "Okay, Ma, yeah . . . I'll get your stockings . . . just be patient . . . just one minute." I dashed out to get a floor nurse. "I'm the only person on duty," the nurse at the desk responded coldly. "Your mother will just have to wait. She has private-duty nurses. Let them take care of her." I tried to explain that the private nurse hadn't shown up for her shift and that my mother needed attention *now*. I got a blank, hostile stare. She returned to her charts.

Racing back into the room, I discovered my mother had ripped the IV out of her arm and managed somehow to slide halfway down the bed, determined to escape. This time I tried admonition: "You *can't* go home now . . . two more tests . . . that's all . . . while you're here you must get the tests . . . try to be patient just a little longer, a little longer . . . I'll take you home *soon*."

"Not true," she responded angrily to each phony phrase. "Not true! . . . Not true!" Her voice sounded strangely fierce and adamant. Had she suddenly become rational again? Was she, in some bitter, final defiance, bent on a comprehensive unmasking of all the false blueprints that had been handed her for a "happy, meaningful" life. Two hours later the private-duty nurse finally arrived, and Ma subsided into mumbled agitation. I could hardly bear to look at her—my dynamo mother turned into a tiny, yellowing bag of bones, her voice gone, her eyes glazed.

But I couldn't stand not being in the hospital either.

Her doctor arrived to report that the brain scan was "negative," quickly adding, "It only picks up gross infiltration." He thought she would become increasingly and rapidly comatose yet doubted that she was approaching death. He urged me to proceed with my long-arranged plan to fly to Los Angeles for a few days, where my play, *Visions of Kerouac*, was in rehearsal at the Odyssey Theater and due to open soon. He said he could always call me back if her condition unexpectedly changed, though he didn't expect any dramatic developments over the next week or so. The family urged the same course, as did, more insistently, the play's producer, Lee Sankowich.

Lee had been phoning daily from L.A., begging me not to delay any longer. He'd already postponed opening night once, and to do it a second time would be taken as a sure sign that the play was in deep trouble. Lee was a soft-edged, decent man, but his latest call had been agitated: "The *Los Angeles Times* is offering to do a big spread on the opening, but that's contingent on your availability for a personal interview within the next several days. The article is *essential* to the play's success." He begged me to leave for L.A. at once.

Everyone insisted that I go, that there was nothing more to do for Ma, that she was no longer able to recognize anyone other than fleetingly, that it was now essentially a vigil. The doctor repeated that he expected no significant change for at least a week, other than her becoming increasingly comatose, and they could call me back if necessary. Ambition finally outweighing guilt, I decided to risk the trip. The night before I was due to leave, Ma's face lit up when I walked into the hospital room: she did momentarily recognize me, her beatific boy, her adored baby—then lapsed quickly back into vacancy, patting her hair distractedly, her blank eyes frantically searching the room for some unnamable, supremely precious object just out of reach. I broke down in tears.

The next morning the hospital called at 4:30. My mother had died, the nurse said, a few minutes before. How typical, I thought, between the tears: she didn't want to inconvenience me.