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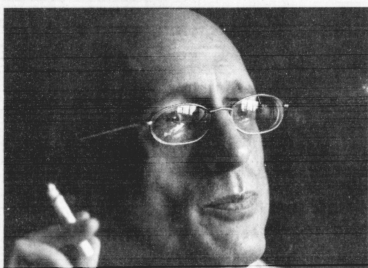
Bill Fuller stands in the doorway of his Lexington apartment as Moveable Feast volunteers deliver a meal on Nov. 20. Fuller tested positive for HIV in 1986 and now relies on the service for most of his diet.

LIVING THROUGH THE NIGHTMARE

Stories by Sean Rose • Photos by Ed Matthews

Since HIV and AIDS were first diagnosed in 1981, more than 550,000 people in the United States have died because of the disease. New medications and treatments mean more people are living with HIV and AIDS now than ever, and awareness efforts like Saturday's World AIDS Day are reaching out to educate.

But 40,000 Americans are still diagnosed with HIV every year, a number that has stayed constant since the early 1990s. Many doctors and activists worry that young people — the first generation to live their entire lives in a world with AIDS — are too optimistic about medical advancements. They're afraid this optimism will turn into complacency and apathy toward the disease. But blindness to the threat of HIV/AIDS is just as dangerous as it was in the 1980s, when Bill Fuller, then 23, contracted the virus. For Fuller, "That's when the nightmare began."



Bill Fuller stopped counting how many times he was told he would die years ago. Sitting in his Malabu Drive apartment, Fuller lights a generic ultra-light and exhales. At 44, his skin clings closer to his skeleton, sinking into his cheeks. His thin arms and legs look like limbs that once claimed more weight. Fuller, who weighs about 180 pounds, has dropped to as little as 130 pounds since he was diagnosed with HIV in 1986, a time when the disease was a "death sentence."

"Just about everybody else I knew had already died," Fuller says. "I should be dead, really, to

tell you the truth. But I'm still kicking for some reason.

"That doesn't mean that I haven't had everything else."

His HIV, and the onset of AIDS since the early 1990s, have opened Fuller's body up to a slew of illnesses.

Fuller's parents, Sandy and John, say he has had four serious strokes since his diagnosis. After one stroke left severe muscle and nerve damage on his right side, he had to teach himself to write and walk again. He still walks with a limp.

See Fuller on page 4

Charity director driven by death of close friend

Sitting behind a desk cluttered with papers, a few packs of Doral cigarettes and a picture of his partner of 15 years, Terry Mullins shakes his head.

Mullins, the director of Moveable Feast, a non-profit organization that delivers hot dinners every weekday to HIV and hospice patients, estimates that he works at least 60 hours a week, including at least four or five hours on the weekend. With his \$26,000 salary, that translates to a few dollars above minimum wage — on a good week.

"I have to do pretty much everything but cooking," Mullins says. "And I have done that."

The schedule wears on him, but Mullins shakes his head when asked if he ever thought about quitting.

"Doesn't cross my mind," Mullins says. "I believe it's a job that needs to be done and has to be done, and I don't know of anybody else that's going to come in here and do it for that amount of pay."

HIV patients have trouble maintaining their weight. Loss of appetite, nausea and diarrhea are usual side effects of HIV medications, and can be symptoms of the disease itself. Moveable Feast works with its clients and their doctors to provide nutritious meals that help fit each patient's dietary needs.

Bill Fuller, an AIDS patient and client of Moveable Feast since it began in 1998, says he's gained about

See Mullins on page 6

Local hospitals set to prohibit smoking

By Erica Mitchell
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UK Chandler Hospital and UK Good Samaritan Hospital, along with six other Kentucky hospitals, have announced plans to go completely smoke-free by next November.

Eight hospitals have formed the Tobacco-free Healthcare Collaborative, which is working to implement policies that include the elimination of outdoor designated smoking areas by Nov. 20, 2008.

The collaborative is in conjunction with the next "Great American Smoke-out," an annual event held by the American Cancer Society. On the third Thurs-

day of November, smokers across the nation are challenged to use less tobacco or quit for the day.

"This policy has been gaining ground in Kentucky and nationwide," said Elizabeth Cobb, health care policy director for the Kentucky Hospital Association. "Many hospitals are finding that it is important to take a leadership role in decreasing exposure to tobacco and improving the health care of their community."

The tobacco-free policies will prohibit smoking at hospital campuses and other premises, including medical office buildings, laboratories, clinics, and other owned and leased facilities.

The Kentucky Hospital Association

will serve as the project manager for the collaborative and will assist the hospitals in planning and implementing the new policies.

The initiative is not an attempt to "force" anyone to quit using tobacco products, but rather a way to demonstrate an ongoing commitment to healthy living, said a news release from the hospital association.

Along with the policies against smoking, participating hospitals will offer smoking cessation classes and nicotine-replacement therapy products. Increased efforts by the participating hospitals will aim to help employees, patients and com-

See Smoking on page 10

More women in science goal of new UK effort

By Rebecca Sweeney
news@kykernel.com

When Amy Shorridge was considering where to concentrate her studies at UK, none of her advisers suggested she look into engineering.

But she stumbled upon it by chance, and now, as a civil engineering junior, she's a peer mentor for a local organization that encourages majoring in science, technology, engineering and math.

That group, Appalachian & Minority STEM Majors, is partnering with the National Girls Collaborative Project to form the Kentucky Girls STEM Collaborative. The project has already been implemented in other states, and the new collaborative is being created to increase the number of women in math and science fields in Kentucky.

UK will participate in the collaborative by creating new pro-

See Science on page 10

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Horoscopes

By Linda C. Black

To get the advantage, check the day's rating: 10 is the easiest day, 0 the most challenging.

Aries (March 21 - April 19) Today is a 7 — This is a difficult situation. You're anxious to get outside for some exercise and yet, for some reason, you can't. Take care of that reason first. Tomorrow you can go.
Taurus (April 20 - May 20) Today is a 7 — You're generally not an overly critical person, as everyone knows. Today, however, speak up if a person you care about is off track. Don't let her make a silly financial blunder on your watch.
Gemini (May 21 - June 21) Today is a 6 — You're not going to be able to do everything by yourself, so ask

for help. Learn to be a manager. Delegate some of your jobs.
Cancer (June 22 - July 22) Today is a 6 — There's plenty to do, no doubt about that. You're anxious and eager, but don't hurry. Take your time and do things right or you'll have to do them over.
Leo (July 23 - Aug. 22) Today is a 7 — Everything seems to be more expensive than expected now. You're well known for your generosity, but you'd rather do it on purpose. Know what you're buying and spending.
Virgo (Aug. 23 - Sept. 22) Today is a 7 — It's important for you to be strong, even a bit stubborn. Don't let a roommate or loved one do something you're going to regret later. Stand firm.
Libra (Sept. 23 - Oct. 22) Today is a 6 — Life is propelled by the stories that you tell yourself. Make up one about you getting past a temporary frustration. Now, doesn't that feel better?
Scorpio (Oct. 23 - Nov. 21) Today is a 7 — You have plenty, more

than you need. This is a wonderful thing. Don't feel the slightest twinge of guilt. Be generous when appropriate, and frugal otherwise.
Sagittarius (Nov. 22 - Dec. 21) Today is a 7 — You're a charmer, no doubt about that. You'll get another chance to prove it soon. You can calm a raging beast. Don't be afraid.
Capricorn (Dec. 22 - Jan. 19) Today is a 7 — Lots of changes going on. Don't make assumptions. Have at least one back-up plan. Better yet, have two or three.
Aquarius (Jan. 20 - Feb. 18) Today is a 7 — There are limits to your ability. You can't personally support all the downtrodden, financially. You can intellectually, though. Help them learn how to stand on their own.
Pisces (Feb. 19 - March 20) Today is a 7 — Stay out of somebody else's argument as much as you can. Don't even offer an opinion, unless specifically asked. There's more going on there than meets the eye, and it's not your problem.
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the DISH

STRIKE SAPS APPLGATE'S MOMENTUM

By Chuck Barney
Contra Costa Times

There's something about Christina Applegate.

The luminous actress who first seized our attention as ditzy Kelly Bundy in "Married ... With Children," is once again on a TV high. Her ABC comedy, "Samantha Who?" (9 p.m. EST Mondays) has established itself as prime time's top-rated new sitcom and one of the few bright spots in a dismal, strike-marred season.

Applegate plays a sweet-faced woman who has awakened from a coma with no memory and learns she was a truly wretched person. Now, she's attempting to start fresh and fix the damage this other part of her wreaked.

We recently caught up with Applegate, who, along with the rest of the cast, has been sidelined by the writers' strike and is antsy to return to work.

Q: How have you handled the layoff so far?

A: I feel like I'm going to lose my mind if this keeps up! I'm someone who can't sit around a lot. I've got to work. ... Acting is like a muscle: You need to use it or it will atrophy.

Q: Are you worried the work stoppage might cause the show to lose momentum?

A: Of course. It's like having the rug pulled out from under you. We had just gotten our (full-season) pickup and four days later the strike hits. It's hard to take. You feel like

you're doing something good and you've got a place in the pecking order and then — boom — it all comes to a stop.

Q: On your show, old Sam, or "bad" Sam is routinely resurrected through flashbacks. How fun is it to play her?

A: It's a blast. I've never gotten to play a character with no self-editing system whatsoever — a woman who is so incredibly self-involved. I noticed recently on the set that, when I slipped into her wig and took on her personality, I was extremely relaxed. She's not a tense person. She isn't dealing with any inner struggle.

Q: Is it an acting challenge to swivel between the two?

A: It's a lot of fun. When you play one character week after week, you can get bored. But not with this, especially since the new Sam has been through so many changes and evolved so much in just a few weeks.

Q: Bad Sam has done some very nasty things. She even had a restraining order against her. Just how vicious can this woman get?

A: The restraining order is tame compared to some of the stuff coming up. There's a storyline where she's very manipulative and deceptive with Andrea (Jennifer Esposito). She influences her to do something really, really awful to someone. Over time she will come to understand why she is the way she is. We'll never see her break, but I think we'll begin to have some real sympathy for her.

Q: Much like "My Name Is Earl," your show is pegged to a character trying to atone for past sins. How do you think this resonates with viewers?

A: We're both, in a way, trying to show that you can start over, that it's never too late. Today is a new day. I think we all wish we could take back some of the things we've done in our lives. That dynamic is very relatable.

Q: So what would you like to take back?

A: I'm sure there are some relationships I'd like to eliminate or change. ... And probably some hairstyles. Along those lines, I wish the '80s would just go away. For most people, they did go away, but my hairstyles were documented and are shown on TV (in "Married" reruns) five times a day.

Q: What about your hairstyle now? Good Sam has all those curls.

A: Yeah, in the past I've been envious of girls with curly hair, so I wanted to try it. It just seemed appropriate for the character. There's a childlike innocence to it.

Q: How do you think Kelly Bundy and the former Sam would get along?

A: Oh, the old Sam would chew Kelly up and spit her out. She's a very smart and very cunning woman. She doesn't want to be around anyone who can compete with her or share the spotlight. So I think she'd out-smart Kelly and outdo her and ultimately squash her.

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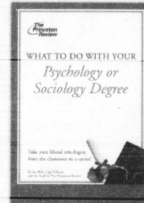
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NORTH CAROLINA 86, UK 77

Patterson shines; Cats fall short to Heels

By Travis Waldron
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Patrick Patterson said UK could prove it could be a national contender if the Cats beat No. 1 North Carolina. In the end, the freshman forward proved he could play with any big man in the country, but UK fell short, losing to North Carolina 86-77 on Saturday at Rupp Arena.

Patterson scored 19 points and grabbed nine rebounds in his first test against a ranked opponent, but the Cats (4-2) couldn't make enough plays to hang with the undefeated and top-ranked Tar Heels (7-0).

"I thought (Patterson) played great," head coach Billy Gillispie said. "He learned a great lesson today. You can tell him all you want, but sometimes you have to learn lessons in games. But I thought he played fantastic."

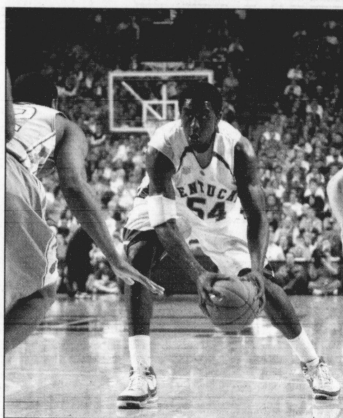
Senior guard Ramel Bradley agreed with Gillispie's assessment of Patterson.

"I think Patrick showed a lot of toughness," Bradley said. "He's not going to back down no matter who he's going up against. I think (all the freshmen) learned from this game and can continue to mature and improve."

Senior guard Joe Crawford aided Patterson, scoring a game-high 21 points, but the Cats didn't have enough to keep pace with the Tar Heels.

"We have so many areas to get better in, but I thought they gave a real good effort today," Gillispie said. "Just not good enough to win against that team."

North Carolina couldn't find the hoop for much of the first



UK freshman forward Patrick Patterson glances at North Carolina guard Wayne Ellington before taking a shot during Saturday's game.

half, leaving the door open for the Cats to take control of the game. The Tar Heels made just four of their first 24 field goals, but they made all 12 of their free throws and scored 13 points off turnovers to keep the lead throughout much of the first half.

North Carolina was 27-30 for the game from the free-throw line and scored 33 points off UK turnovers.

North Carolina came alive near the end of the first half. After the cold start, the Tar Heels made 13 of their next 17 field

goals, including the 9-for-11 start to the second half that sparked a 13-0 run. The North Carolina lead eventually stretched to 70-50 with less than nine minutes to play.

"We were really good (during that stretch)," North Carolina coach Roy Williams said. "We were moving the ball, we were passing, we were doing a real good job defensively, and we were making a lot of shots."

Junior forward Danny Green was the unsuspecting hero in the Tar Heels. If not for Green in

the first half, UK likely would have taken the lead into the break. Green was 5-for-7 in the first half while the rest of the Tar Heels made just six field goals. Green finished with 20 points to lead North Carolina.

Though the Tar Heels didn't shoot well early, they still controlled the lane. North Carolina forced the Cats' big men into foul trouble early by banging the ball inside to junior center Tyler Hansbrough, who finished with 14 points and 11 rebounds. Sophomore forward Perry Stevenson picked up his fourth foul before halftime, and fouled out with 15:56 to go.

The Cats turned the ball over 19 times and missed too many defensive assignments — problems Gillispie said the Tar Heels didn't have. And in the end, Gillispie said, North Carolina's discipline was too much for his young team.

"Discipline is doing something and doing it every single time," Gillispie said. "(North Carolina's players) carry out responsibility very well. They're fairly simple in what they do, but they do it better than anyone in the country. Hopefully we learned."

North Carolina extended its winning streak over the Cats to four games — the Tar Heels are now 20-10 against UK overall — meaning 13 Crawford and fellow senior Bradley will most likely leave UK without defeating the Tar Heels.

But Crawford said he hopes the Cats and Tar Heels will meet again.

"Hopefully we get to see them again," Crawford said. "I think we showed we're a tough team."



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UK long way from being like North Carolina

Kentucky and North Carolina are the two winningest programs in college basketball history. UK is No. 1 with 1,952 wins.

North Carolina has 1,920 victories. The Tar Heels don't have a long way to go to catch up to the Cats. But, in a different way, UK has a long way to go to catch up to North Carolina.

The evidence was on display Saturday at Rupp Arena. North Carolina was deeper and more talented than the Cats. The 86-77 final score was a reflection of the despairing disparity.

North Carolina has stacked talent on top of more talent on its roster. That's the beginning of UK's problems. The Cats don't have the talent that the nation's elite teams have.

The Tar Heels have NBA talent all over their roster. Ty Lawson and Tyler Hansbrough will be in the Association one day. Wayne Ellington and Deon Thompson also have star talent.

UK has only one no-doubt professional — Patrick Patterson.

In addition to the superstars, North Carolina also has a solid bench. Danny Green and Bobby Frasier are tremendous role players. Actually, take that back. They're more than just role players. They have the ability to take over and

change games with their ability.

Late in the first half, with his team up just 4 points, Green scored 8 straight points, forcing UK to call a timeout. In the sequence, he hit two 3-pointers, both from just about the same spot on the floor and with about the same slacking defensive pressure, and a layup.

Green's 20 points were big. Frasier's 9 points were bigger.

Frasier hit three 3-pointers in the second half that really put the game out of reach. In his highlight sequence, he had a steal, hit a 3-pointer, got the defensive rebound on UK's next possession and hit another 3-pointer to give North Carolina an 18-point lead just five minutes into the second half.

UK doesn't have those types of reserves. The freshmen have the capability to perform in those roles for UK, but they shouldn't be relied on, because they're just freshmen.

Depth like that is the reason the Cats tried to slow down the game and foul their way to a victory.

"Coach wanted a nasty game instead of a pretty game," Patterson said. "I think North Carolina is more talented than we are," Patterson said a few moments later.

That's the way UK can be one of the nation's elite teams again: Recruit better athletes and accumulate depth. That should be obvious, but obviously it's not.

As for the contemporary, UK can still be successful this season if it improves in a few areas.

North Carolina crushed UK on the boards Saturday, grabbing 42 rebounds to the Cats' 31. Sure, the Tar Heels have a vaulted front line in Hansbrough, Thompson and Alex Stephenson, but UK has to get those numbers closer to even.

Sixteen of those rebounds came on the offensive end. And they played a significant role in the Heels' scoring 86 points. That's another problem for the Cats.

They couldn't defend outside. North Carolina shot 50 percent from 3-point range. They couldn't defend the gaps and lanes. Ellington and Lawson spent a lot of the day there making shots and creating shots for others.

They couldn't defend the post. North Carolina was tougher than UK down low, getting to the free throw line 12 more times than UK, and forcing Patterson and Perry Stevenson to foul out.

"For you to beat them," said UK head coach Billy Gillispie, "you have to be really good in a lot of different areas."

UK certainly was not. After the game, North Carolina coach Roy Williams was asked about the UK-North Carolina series.

"I think it's great for college basketball," Williams said.

It is. Well, it used to be, but the Tar Heels have won four straight in the series.

Now's the time to change that, catch up to North Carolina and make it great for college basketball.

Jonathan Smith is a journalism senior. E-mail jsmith@kykernel.com.



JMATHAN SMITH
Kernel columnist

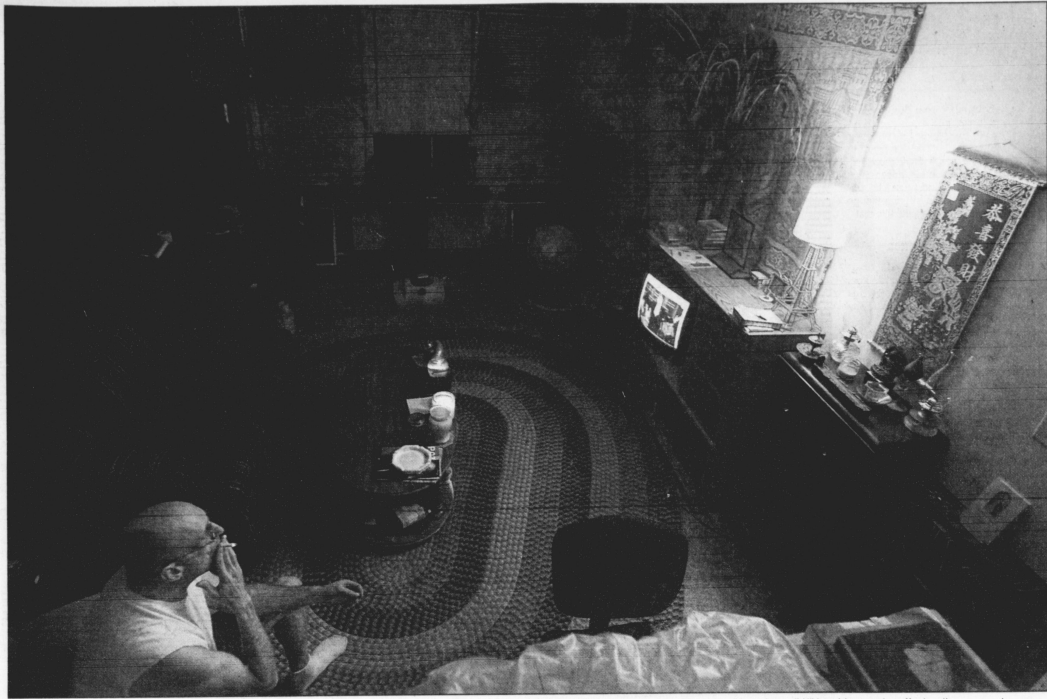
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Bill Fuller watches TV in the living room of his apartment on Nov. 30. Fuller, who has lived with HIV since 1986, spends most of his time in his apartment alone. "Just about all HIV-positive people suffer loneliness more than anything," he says. "They either have come out and told people that they're HIV-positive and are dealing with rejection, or they haven't told anybody and are dealing with their own rejection."

FULLER

Continued from page 1

Fuller is legally blind in his left eye after a bout with shingles a couple of years ago that also left nerve damage. Besides dealing with a loss of strength, daily aches, pains and fatigue, and nausea and diarrhea on a weekly basis, Fuller has irreversible nerve damage as a side effect of some of his medication.

For Fuller, walking feels more like stepping on broken glass. Stabbing pains also shoot through his fingertips. He takes medicine to help dampen the pain, but it is simply something he has to deal with, his doctors tell him.

He doesn't go out much for fear of getting sick; even a common cold can take him months to get over. He cannot drive because he has had violent seizures caused by HIV accumulating on his brain, which also has caused dementia, affecting his memory. But Fuller says the most significant change since he was diagnosed has been how the disease opened his eyes.

"It's made me more aware of how judgmental people can be," Fuller says. "Hate is a choice. Prejudice is a big choice." "It's kind of hard to put into words what that experience is unless you have HIV," he says. "But when you're crucified with HIV, then your eyes are real wide open, and you can't really describe to somebody who is HIV-negative what that is."

Beginning of isolation

Up until the final seconds before Fuller found out he was HIV-positive, he never thought he was at risk. As a gay man, Fuller was well aware that HIV was only considered a gay disease when it was first diagnosed among homosexual men in Los Angeles and New York. Fuller remembers reading a newspaper article that called the disease "the gay cancer." Before the acronym HIV was used for the human immunodeficiency virus, some doctors called it GRID — gay-related immunodeficiency.

But Fuller thought he was safe in Lexington because HIV was predominantly a problem for larger cities.

"A lot of kids don't think that it would ever happen to them," Fuller says. "I didn't. Hell, when I caught HIV, it was happening at New York and Los Angeles. I didn't think it was happening in little 'bun-f--- Egypt' here. And sure enough, that's where I caught it."

Fuller says he doesn't need two hands to count the number of same-sex partners he's had. And for nearly every one, he practiced safe sex. Except for a few times. When he contracted HIV, he was out of condoms.

"I didn't catch HIV because I was gay; I caught it because I was stupid," Fuller says, taking a drag off his cigarette.

At 23, living and working in Lexington, Fuller was checked into a hospital after coming down with pneumonia around Thanksgiving in 1986.

The young man sat waiting in a hospital gown after doctors ran a series of tests on him. Eventually, one doctor returned to his room and told him he had tested positive for HIV, though the doctor called it GRID.

Immediately, Fuller says, hospital staff started putting large yellow and purple stickers on his door. He heard janitors outside in the hall arguing, saying they didn't want to mop Fuller's room because he was HIV-positive. Even in the early '90s, Fuller's parents remember seeing his food left outside his door at hospitals because staff didn't want to come into contact with him.

"It was terrible," Fuller says. "When I was diagnosed, there wasn't groups or any HIV functions or anything around here. Most people didn't want to touch you, didn't want to talk to you, didn't want you to be in the same vicinity as they were. If you didn't die from HIV, they would have killed you anyway."

At one point right after his diagnosis, Fuller walked up to a nurse to ask her a question. She ran from him, Fuller says, and wouldn't speak to him until she was behind a shut door, talking through it like she was "afraid to breathe the same air."

“When I was diagnosed ... most people didn't want to touch you, didn't want to talk to you, didn't want you to be in the same vicinity as they were. If you didn't die from HIV, they would have killed you anyway.”

— Bill Fuller, AIDS patient



Bill Fuller uses wire to train a Bonsai tree in his apartment on Nov. 21. The art of Bonsai is self-therapy for Fuller, who has 11 of the small trees living in his apartment.

"That's when the nightmare began," he says. "It's been nothing but a nightmare ever since."

A continuing risk

Fuller was 23 when he contracted HIV. Young people are still at risk for the virus and have made up an increasing portion of new HIV diagnoses in recent years, says Dr. Alice Thornton, program director of the Kentucky AIDS Education Training Center.

"That's really a change from what we've seen in the past," Thornton says. "It's a disturbing trend, and it has been happening across the country for the past two, three, maybe five years."

About 60 percent of the new patients who come into the Bluegrass Care Clinic at UK, which specializes in HIV/AIDS care, have been between the ages of 25 and 44, younger than previous years, she says.

The clinic, where Thornton also serves as project director, has had some patients coming in as young as 15 and 16.

More than 1 million Americans are living with HIV, according to the Centers for Disease Control and Prevention. Of those, 2,563 are Kentuckians. Lexington has the second-largest concentration of AIDS patients in the state with 382, second to Louisville's 1,027, according to a December 2006 report from the Kentucky Department for Public Health.

Kentucky also has slightly higher rates of young people living with AIDS, or acquired immunodeficiency syndrome, than the rest of the country.

Five percent of the state's AIDS patients are between the ages of 13 and 24, compared with 4 percent nationally; 74 percent of Kentucky's AIDS population is between 25 and 44, compared with 71 percent nationally.

Dr. Kraig Humbaugh, director of epidemiology for the Kentucky Department for Public Health, says the state's AIDS cases have declined over time, but because Kentucky doesn't currently have a database on HIV patients, he can't say if there have been increases in infections among youth.

Improved medical care is a "double-edged sword" in HIV/AIDS awareness, Humbaugh says. He fears people will grow complacent or overly optimistic and not recognize the virus as a terminal disease.

Terry Mullins feels the same way. Mullins is the director of Moveable Feast since it started in 1998. He hasn't had a job since the early 1990s. Most of his disability check goes to his rent and bills; after that, he has about \$200 for food, cigarettes and everything else for the rest of the month. The meals delivered to his door make up about 95 percent of his diet.

Mullins, who has been involved with HIV/AIDS efforts since the early 1990s, says many young people have grown up

Continued on next page



Cigarettes, medication and coffee make up a large part of Bill Fuller's daily routine. On a good day, he takes 24 pills from about 13 prescriptions to help treat HIV, seizures and lingering pain.

“I didn't catch HIV because I was gay; I caught it because I was stupid.”

— Bill Fuller, AIDS patient

hearing about AIDS and don't recognize it as a threat.

“They've lived with it all their lives,” Mullins says. “They've heard it, they hear about the new medications, they think people are living longer. They think of it, a lot of times, just like diabetes — that you take a pill and you go on every day. But it's not quite like that.”

Pills, coffee and cigarettes

Major improvements in HIV treatment started in 1996 when doctors found that a three-drug “cocktail” fights the disease more effectively than one prescription, Thornton says.

Now, more people are living — and living healthier — with HIV than ever before. Medications are becoming simpler, progressing to the point where patients will only have to take one pill a day, Thornton says.

But there is still no cure. The cocktail of pills usually brings side effects such as nausea and diarrhea, she says. To be effective, HIV/AIDS medications need to be taken 98 to 100 percent on schedule, something that is difficult for many to accept or comply with, Thornton says.

And treatments can run into complications.

HIV can grow resistant to medications, and a person can be infected with a resistant strain of the virus. About 25 percent of the patients at Thornton's clinic have resistant viruses, she says, and non-resistant viruses have a 50 percent chance of growing resistant once a patient starts medication.

“Even though, yes, we have helped patients stay healthy and they could accomplish their goals, life would be much sweeter without HIV,” Thornton says.

“It may not seem like a big problem, but it is for folks who live with this day in and day out.”

More than 13 orange prescription bottles, filled with pills sit on Fuller's bedside table.

The meds are the worst part of life with HIV/AIDS, Fuller says.

“God, I take so much damn medicine,” he says. “I take so many pills, I'm a legal junkie.”

On the good days, Fuller takes about 24 pills from 13 different medications. On the bad days, he takes more. Most new patients have to take far fewer pills, Thornton says.

Growing bonsai trees is Fuller's self-therapy — a hobby to pass the time and fill his days. He has 11 growing in his small apartment on shelves near the windows, and he takes care of some for friends.

Besides the pills and his trees, coffee and cigarettes keep Fuller going. Doctors and his parents have tried to get him to stop smoking, but he can't.

“I have to smoke because I'm so freaking nervous all the time,” he says. “Cigarettes seem to help a little,” but it's probably because he's addicted, he says, giving a raspy, staccato laugh that reveals a silver tongue piercing.

Fuller is quick to joke about his condition. When asked if there was anything he missed from his life before HIV, he mentions dancing — the stroke that gave him a limp keeps him from that — followed by the loss of his butt.

The weight he's lost has taken away what was “a pretty nice figure,” he says, looking over his glasses.

But some things he doesn't joke about.

“I really don't miss much of anything anymore other than trying to be normal, like normal people,” he says after drumming his fingers on his upper lip, thinking of the past. “But I'm not normal.”

Overwhelmed by rejection

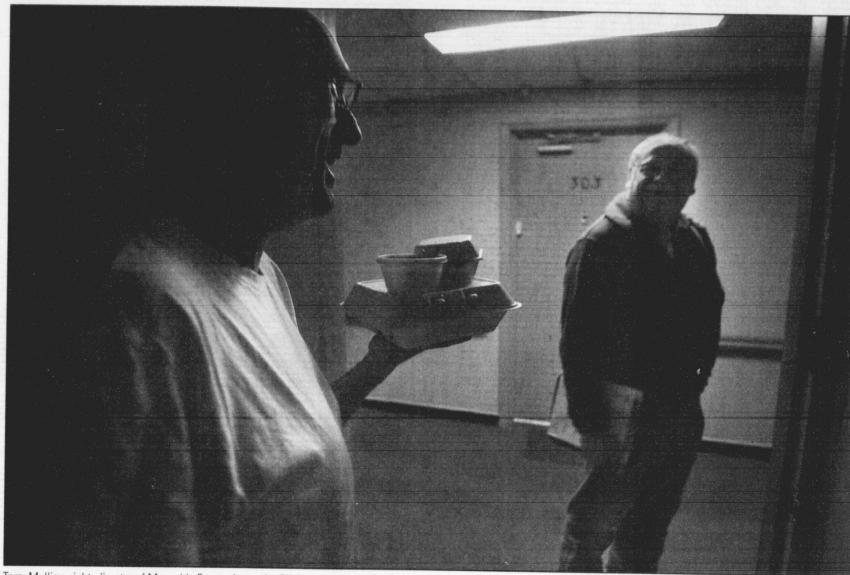
In the world of the late 1980s, Fuller was even less normal. The stigma that comes with HIV was too much for some, Fuller says. Some patients killed themselves. Fuller tried — twice.

He turns his wrists over and points to three sets of scars. The first try, which left thin, defined slits across both wrists, was for attention, he says. The second attempt, now a thick mark of scar tissue running down his left forearm, was for death.

After he was diagnosed, his friends started dropping him out of their lives, he says. Slowly, people stopped wanting to see him and stopped inviting him out to parties. Later, he learned, someone had started a rumor that he lied about his HIV for attention.

A few years after his diagnosis, Fuller went to confession at a Catholic church in Lexington. He says he told the priest everything, that he was gay and that he was HIV-positive. When he went up for communion, he was refused and told that he should find another church.

Rejected by his friends, the church and much of society because of his disease, Fuller experienced the point to living with HIV any longer. One night a few years after his diagnosis, he decided to try to kill himself for the second time. In his downtown apartment, he got drunk and took sleeping pills before dragging a razor blade down his left forearm. Fuller doesn't remember who found him or who called the ambulance, but he ended up in the hospital



Terry Mullins, right, director of Moveable Feast, chats with Bill Fuller after delivering a meal on Nov. 21. About 95 percent of Fuller's diet is provided by Moveable Feast.



Sandy Fuller, center, and her husband, John, look at their son, Bill, while he reads the back of a box of mothballs in their kitchen on Thanksgiving Day. Bill had given his parents a Bonsai tree as a gift and used the mothballs on the roots to keep bugs away.

that night.

He was transferred to Eastern State Hospital, a mental institution, because of his suicide attempt, and he started thinking about living.

He stopped doing drugs, started concentrating on taking his medication and — with the exception of smoking — started taking care of himself. And to the surprise of many, himself included, he kept living.

“When I was first diagnosed in '86, everybody else was dying,” he says. “And I expected to die because I was told I was gonna die and that was that. Three months turned into six months, and six months turned into a year, and a year turned into three, and so on and so on and so on, and finally they just got tired of telling me when I was gonna die.”

Fuller kept surviving, and acceptance began to replace fear of his eventual death.

“I used to be so afraid of death,” he says more than 20 years after his diagnosis. “But I'm not afraid anymore. It's just a part of life. Everybody's going to die. Everybody. It's just a matter of how and when.”

Sandy Fuller is a mother who knows her son's funeral arrangements: Fuller wants to be cremated and has made an urn out of a gourd from a friend's farm.

After years of watching out for her son and organizing his medications because Fuller couldn't keep track, she worries who will take care of him if something happens to her or her husband. She tries not to think about his death.

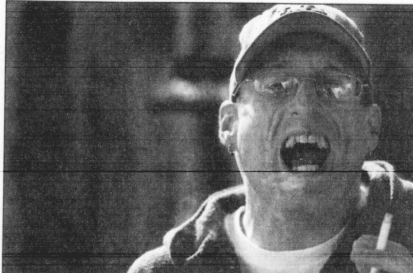
“It's not something I sit around and think about all the time ... I try not to think of that, it's ...” She pauses. John Fuller sits next to her, rubbing her hand.

“It's sad,” she says.

“When Bill goes, part of me goes.”

But for Fuller, having experienced the emotional pain of rejection and the physical pain of the disease, death will be more of a release, he says. He's past the point of wanting to speed up the process. Every day he wakes up is a blessing, Fuller says, but when his time comes, he'll be ready.

“I would be freaked out at first, I'm sure, just like anybody else. But then



A metal stud shines from the middle of Bill Fuller's tongue as he laughs with his aunt, Lucy Dennis, during a smoke break outside his parents' house on Thanksgiving Day.

after you sit there and think about it, think about not being in pain anymore, not having to take pills, not seeing doctors, not going to hospitals, not having tubes stick up in you, stuff like that, it's not that big of a deal,” he says, with distant sirens wailing outside his window. “It's not that big of a deal.”

Asking for understanding

A knock sounds at Fuller's apartment door. It's Mullins, delivering his meal from Moveable Feast the night before Thanksgiving. It's close to the anniversary of Fuller's diagnosis, and also an anniversary for Mullins, who lost a close friend because of AIDS around this time in the early '90s. They speak briefly, exchanging pleasantries, then Fuller says goodbye and goes back into his apartment, where he spends most of his time alone.

Fuller's weakened immune system and nerve damage keep him from going out much or spending time with his nieces and nephews. Loneliness is a silent symptom of HIV/AIDS.

“I'm lonely, just like everybody else,” he says. “Just about all HIV-positive people suffer loneliness more than anything.”

“They either have come out and told people that they're HIV-positive

and are dealing with rejection, or they haven't told anybody and are dealing with their own rejection,” he says. “It goes both ways.”

The last work Fuller did in public was with AIDS Volunteers of Lexington, touring the state as a speaker. He visited churches, schools and universities, as well as doctors and nurses a couple times a month, educating them on how everyone is at risk for HIV, how to protect themselves and what it's like to be a patient. Sandy Fuller joined him for the last year.

“I think it was very valuable,” Fuller says of his volunteering. “Extremely valuable for people who were learning about HIV and extremely valuable for people in the audience who had HIV, who saw a person who was not afraid to say, ‘Hey, look at me. This happened to me, it can happen to you.’”

Fuller says the first time he spoke was “not pretty.” It was at Morehead State University, and he was the only HIV-positive person on a panel.

During a question-and-answer session, one man in the audience stood up and asked Fuller if he had asked God for forgiveness.

It sparked a commotion, but Fuller said he wanted to answer the question.

“Yeah,” he replied. “I've asked God for forgiveness, but have you asked

About HIV/AIDS

HIV (human immunodeficiency virus) attacks the body's immune system, destroying white blood cells that fight infection. HIV causes AIDS (acquired immunodeficiency syndrome) when the immune system is so weak that common infections become deadly.

The virus is spread primarily by unprotected sex (anal, vaginal and oral) with someone who is infected, and by sharing needles and syringes with an infected person. Abstaining from sex and using a condom are effective ways to protect yourself from HIV. Talking to sexual partners about their history is also important in protecting against the virus.

HIV is a slow-acting virus and can remain in the body for up to 10 years before symptoms are noticeable. More than 1 million Americans are estimated to have HIV and one quarter of those are unaware that they have it.

Getting Tested

Getting an HIV test is the simplest and best way for people to ensure that they are safe and not unintentionally spreading the disease. Some locations offer free and anonymous testing.

Fayette County Health Department
650 Newtown Pike
Lexington, Ky. 40508
(859) 252-2371

UK Chandler Medical Center
800 Ross St. Room HA 601
Lexington, Ky. 40536
(859) 323-0043

Planned Parenthood of the Bluegrass
508 W. 2nd St.
Lexington, Ky. 40508
(859) 252-8494

AIDS Volunteers Incorporated
263 N. Limestone
Lexington, Ky. 40507
(859) 275-3000

Lexington VA Medical Center
1101 Veterans Dr.
Lexington, Ky. 40502
(859) 233-4511

SOURCE: CENTERS FOR DISEASE CONTROL AND PREVENTION

God for understanding?”

Sandy Fuller wrestled with keeping her son's disease a secret from outsiders, afraid of what would happen to her family, in the first year after his diagnosis. But these trips into Eastern and Central Kentucky brought her closer to her son, she says.

“He was such a positive role model for these kids. He had been there, he was in the middle of it, he could tell them what they were doing,” she says. “He was great.”

After three or four years, Fuller got sick and stopped speaking publicly. It was very taxing on him, Sandy Fuller says. He wasn't eating or resting like he should, and visiting schools exposed him to many gervils.

On some level Fuller wished he could still speak publicly, but he says if he did, it would most likely kill him. He's put in his time as a “soldier” and a “casualty of this war.” But the dialogue that he worked for has to continue, he says, until there is a cure. Or until more people listen.

“I'll tell you what,” Fuller says. “When I do croak, they will say, ‘Well, he did everything he could to try to stop this from happening to other people.’ It's just if they will listen.”

“And so many people will not listen.”

Terry Mullins, director of Lexington's Moveable Feast, sits at his desk in St. Martha's Episcopal Church while he maps out delivery routes on Nov. 16. Mullins typically works 60 hours a week for Moveable Feast. "I have to do pretty much everything but cooking, and I have done that," he says.



MULLINS

Continued from page 1

eight pounds from the service.

Fuller guesses Moveable Feast makes up about 95 percent of his diet. He weighs 180 pounds now, but has dropped to 130 pounds in the past. Gaining and holding weight is something doctors encourage HIV patients to do to help fight illness, Fuller says.

Much of Mullins' job is applying for grants and organizing fundraisers to keep Moveable Feast in business.

The organization was at the point of bankruptcy last year, and its board of directors was making plans to dispose of its assets. Funding from the city kept Moveable Feast operating. Now the organization is on fairly stable ground, Mullins says, but "it's always a fight."

The fuel for Mullins' fight in HIV/AIDS efforts came after a close friend died be-

cause of the disease in the early 1990s. Mullins looks across his office, describing Gregory Hawver. The tall, dark-haired young man, originally from Michigan, met Mullins in the mid-'80s. He was a "bitch," Mullins says affectionately, but someone who liked to have fun, someone who attracted people.

Hawver was also one of hundreds of thousands of people nationwide infected with HIV in the mid-'80s. As somebody who liked to have a good time, Hawver's infection wasn't a surprise, Mullins says — at least, not as much as when Hawver admitted to Mullins that he was HIV-positive.

With a more intense stigma in the 1980s, it was rare for anyone to openly admit to being HIV-positive, Mullins says. But one day at an AIDS Volunteers of Lexington fundraiser, Hawver turned to Mullins, who was sitting next to him.

"You love me, don't you?" Hawver asked Mullins. Mullins told his friend that he did.

"Well, we'll see in a second," Hawver

said.

He stood up and announced to the room that he was HIV-positive. Mullins had heard it from a friend earlier but never directly from Hawver.

"At that time, it was definitely a death sentence," Mullins says.

In the last four or five months of Hawver's life, Mullins visited him when Hawver's partner was at work. He would come to Hawver's Lexington apartment every weekday before his bartending shift at Crossings to make him lunch or just look after him.

One day near the end, Mullins went upstairs to Hawver's bedroom and couldn't find his friend. He looked through the apartment and still couldn't find him. Hawver was in bed, so thin that Mullins couldn't see him covered with a blanket.

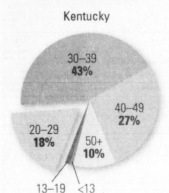
"That's just what happened to him," Mullins says, wiping his eyes. "He actually just kind of wasted away."

"It's not a pretty death, if that's what you're dying of."

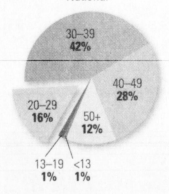
HIV/AIDS BY THE NUMBERS

Since the epidemic began in the early 1990s, there have been 952,629 diagnoses of AIDS in the United States, 4,506 of which have been in Kentucky, as of 2005. The virus disproportionately affects communities of color and gay men of all races, according to the CDC.

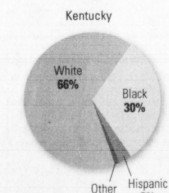
By age at diagnosis



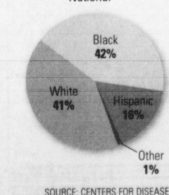
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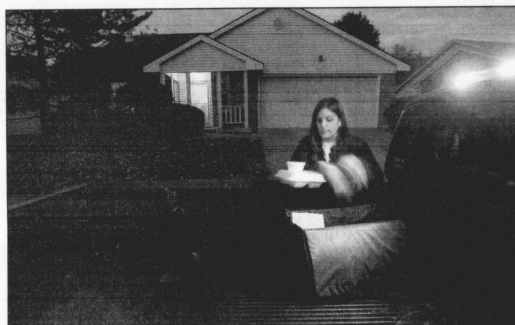
By race



National



SOURCE: CENTERS FOR DISEASE CONTROL AND PREVENTION; KENTUCKY DEPARTMENT FOR PUBLIC HEALTH



UK biology senior Jessica Mott, a volunteer driver for Moveable Feast, pulls a dessert from an insulated bag while making a delivery on Nov. 16. Moveable Feast usually has five or six volunteer drivers each day.

Student volunteers decline since kitchen's cross-town move

Cooks and drivers scurry through the fluorescent-lit kitchen at Moveable Feast. The organization delivers hot dinners every weekday to HIV and hospice patients in Lexington.

David Self, Moveable Feast's cook, and his assistant, Justin Norris, place beefsteaks and baked potatoes into Styrofoam boxes. Around 5 p.m. every weekday, volunteer drivers come to deliver food to the clients.

Jessica Mott, a biology senior at UK, tries to drive every Friday, delivering food to about 15 people on her route.

She heard of Moveable Feast from a UK professor and decided to start volunteering. Drivers are Moveable Feast's greatest volunteer need, says Terry Mullins, director of the program. The city is split into five or six routes each night. When they're short on drivers, which is often, Norris helps pick up the slack with Mullins, who already works at least 60 hours a week.

"It's a little discouraging that more students don't volun-

Getting Involved

For information on Moveable Feast and how to get involved, call (859) 252-2867 or visit feastlex.org.

Send donations to: Moveable Feast, P.O. Box 367, Lexington, Ky, 40588-0367.

Information on volunteering or donating to AIDS Volunteers of Lexington is available by calling (859) 255-3000 or by visiting aidsvolunteers.org.

teer," Mott says. "I don't think it's because they don't care. I think it's because they don't know about it."

Moveable Feast used to get more student volunteers when it was housed near campus in the basement of the Episcopal Chapel of St. Augustine on Rose Street. Since the organization moved to its current location on Trent Boulevard, fewer students have volunteered.

Tony Burgett, vice presi-

dent of directors, delivers every Thursday. Before drivers go out on runs, each is given a clipboard and list of clients, complete with directions and client information. Burgett looks over his — one stop gives instructions to knock loud for a patient who is hard of hearing.

Burgett says more volunteers might not drive because they don't think they have time or don't want to pay for gas.

"When the rubber meets the road, it can be a hard issue for folks," Burgett says. But the clients give much of the motivation for serving, he says.

"You'll see how these folks need us."

Mott balances a set of meals, walking from her truck to the front door of a house on her route. The people who answer the doors are different but their reactions are the same, smiling and thankful. Sometimes, Mott says, you get to know clients after delivering to them repeatedly.

"You always worry," she says, "because I feel like I want to do more than I'm doing."

Federal funding drops as clinic's HIV cases increase

While care and education for HIV patients has improved, federal funding has not always increased with these efforts.

The U.S. Health Resources and Services Administration funds the Bluegrass Care Clinic at UK, which specializes in HIV/AIDS care, and has made 2 percent budget cuts over the past three years, said Dr. Alice Thornton, project director of the clinic.

The clinic served about 350 patients when it started in 2001, Thornton said. Last year, it looked after 779.

"We're seeing more patients, but we're seeing the same amount of funding, so we're not able to expand our services in a meaningful way," Thornton said.

Not all federal programs have been cut. Thornton

also manages a federally funded program that appoints a social case manager to patients to help them cope as well as pay for insurance. These social efforts have received increases in federal funding.

Kentucky and other states are also beginning to create a dependable database on HIV patients by monitoring them by name. Currently, the state has data on AIDS patients only, which decreases the amount of federal funding the state gets, said Jennifer Edwards, program coordinator of the Kentucky AIDS Education Training Center. Without a record of HIV patients, the state can't accurately demonstrate a need for funding.

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UK to play in Music City Bowl for second consecutive year

By Eric Lindsey
elindsey@kykernel.com

When the UK football team defeated Clemson 28-20 last year in the Music City Bowl, it ended a streak of six years without an appearance in a bowl game. After getting a taste of postseason play last winter, the Cats were in no hurry to start a new bowl-less streak.

For the second consecutive season and third time in school history, the Cats will be heading to the Music City Bowl in Nashville, UK (7-5, 3-5 South-eastern Conference) is slated to take on Florida State (7-5, 4-4 Atlantic Coast Conference) and legendary head coach Bobby Bowden on Dec. 31 at 4 p.m. at LP Field, home of the NFL's Tennessee Titans. The game will be televised live on ESPN.

"We're obviously excited about the opportunity to have a bowl game, to play a quality opponent such as Florida State," head coach Rich Brooks said. "We know that this will be a very difficult game. They have great speed, they have tremendous athletic ability, and they have great tradition."

The bowl selection late yesterday afternoon marks just the fourth time in school history the Cats have been selected for back-to-back bowl games and the 12th bowl game in school history.

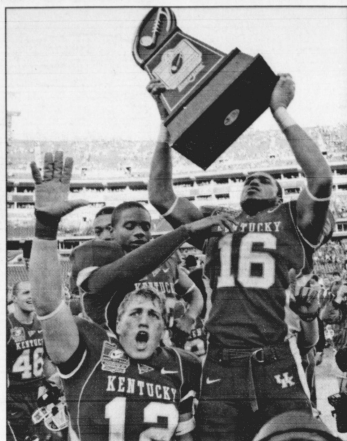
Meanwhile, this is the 26th consecutive season that Bowden has led Florida State to a bowl game. Under Bowden, the Seminoles have won two national championships, in 1993 and 1999.

Although the Seminoles did not achieve the success this year that they have been used to during the Bowden regime, they have won three of their last five games, including an upset over then-No. 2 Boston College.

"He's a legend," senior quarterback Arnie Woodson said of facing Bowden. "He's a coach who has obviously done wonders for that program, turning everything around and winning national titles. He's obviously going to be recognized as one of the best coaches to ever live."

The Cats will be playing in their first bowl game on New Year's Eve since a 21-0 victory over North Carolina in the 1976 Peach Bowl.

In anticipation of the game, fans had already snatched up



Members of last year's UK football team celebrate UK's 28-20 win over Clemson in the Music City Bowl on Dec. 29, 2006, in Nashville.

all available tickets by yesterday's 6:30 p.m. news conference, making it the second sell-out in the bowl's 10-year history. The only other sellout came during UK's 28-20 victory over Clemson last season.

"We are honored to be selected to participate in the Gaylord Hotels Music City Bowl for 2007," UK Athletics Director Mitch Barnhart said. "Our experience in bringing 50,000 people to Nashville for the 2006 game brings back great memories, and this year is a new opportunity for our fans to enjoy Kentucky football in the post-season."

The official bowl allotment for each team is 11,000 tickets. UK requested an additional 16,000 tickets to bring the total to 27,000, but they were all sold during the pre-sale to UK season-ticket holders. Immediately following the bowl's selections, the remaining tickets were purchased through the bowl's Web site, according to UK Athletics spokesman Tony Neely.

"It's a blessing to have some of the fans that we have," senior wide receiver Keenan Burton said. "They have been through everything with us."

"The fact that they'll be able to come and support us like they did last year and to find out the game is already sold out is special," he added.

UK a finalist for Game Changing Performance

Senior quarterback Andre Woodson's game-winning touchdown pass to senior wide receiver Steve Johnson in a victory over then-No. 1 Louisiana State is one of 13 finalists for the Pontiac Game Changing Performance of the Year.

Woodson's 7-yard touchdown pass to Johnson completed a stunning victory over the top-ranked Tigers in triple overtime. The loss gave LSU — which will play against Ohio State in the Bowl Championship Series national championship game on Jan. 7 in New Orleans — its first loss of the season.

The winning school, which will be announced during the national title game on FOX, will receive a \$100,000 scholarship contribution. Fans can determine which school receives the ultimate prize by voting on Pontiac's Web site (www.pontiac.com/ncaa).

SPORTS BRIEFS

Volleyball falls in first round of NCAA Tournament

The UK volleyball team's 2007 season came to an end Friday when the Cats fell to Michigan State 3-0 (30-28, 30-23, 30-27) in the first round of the NCAA Tournament in Dayton, Ohio.

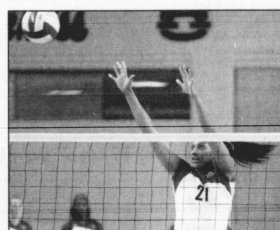
Senior middle blocker Nicole Britteniker led the way for UK, recording a team-high 12 kills, eight digs and 455 hitting percentage. Britteniker tallied double-digit kills in each of the Cats' 32 matches this season.

Sophomore outside hitter Brooke Bartek finished the contest with 10 kills for her 13th double-digit kill performance of the season.

UK finished its season with a 22-10 record, notching 20-plus wins for the first time since 1993 and making the NCAA Tournament for a school-record third consecutive year.

Women's swimming and diving wins dual meet against Indiana

The UK women's swimming and diving team earned a



Senior middle blocker Nicole Britteniker attempts a block in UK's 3-0 win against Eastern Kentucky on Sept. 4.

BRITNEY MCINTOSH STAFF

164-134 dual meet victory against Indiana on Friday at UK's Lancaster Aquatic Center. The victory was the team's first against Indiana since the 1999-2000 season.

Heather and Jenny Bradford each contributed two-win performances in the Lady Cats' victory.

Senior diver Kari Retrum won first place on the 1-meter board, which was held Thursday afternoon, after posting a season-high score of 293.03, and also claimed second place on

the 3-meter board. Freshman Jessie Snowden finished first on the 3-meter board and second on the 1-meter board.

The UK men were defeated by Indiana 186-114.

Freshman Stephen Andrews posted career-best scores on his way to winning first place in the 1-meter board and 3-meter board diving competitions. The Cats also took first place in the 200-meter relay with a time of 1:29.81, the team's best of the season.

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Senior middle blocker Nicole Britteniker attempts a block in UK's 3-0 win against Eastern Kentucky on Sept. 4.

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The opinions page provides a forum for the exchange of ideas. Unlike news stories, the Kernel's unsigned editorials represent the views of a majority of the editorial board. Letters to the editor, columns, cartoons and other features on the opinions page reflect the views of their authors and not necessarily those of the Kernel.

KERNEL EDITORIAL

Housing meeting at start of break left students out

On Nov. 20, the Tuesday before Thanksgiving break, the Lexington-Fayette Urban County Council discussed the possibility of a plan that would regulate the availability of off-campus housing for students at UK. Although members of the University Area Housing Association, a group of landlords who own property around campus, met with students a week prior to the meeting, it is troubling that the city council scheduled its meeting the day before Thanksgiving break, when many students were traveling home. This disregard for the voices of UK students is unacceptable — they make up the population that would be most affected by the implementation of such a proposal.

This apparent disregard for UK students' voices is unacceptable — they make up the population that would be most affected by the adoption of new housing regulations.

Students should not have had to choose between going home on Tuesday afternoon and being able to voice their opinions about plans that could dramatically raise the cost of living for the UK community. Future meetings about campus-area housing regulations should take place on dates that are more convenient for all people involved.

Despite being held at an inconvenient time, Student Government President Nick Phelps, along with other SG members, attended the meeting to ensure that student voices would be heard. Their efforts, which made certain the opinions of the student body would be represented, should be commended.

The proposal being considered is similar to regulations in place at Pennsylvania State University that prohibit more than three non-related students from living together in an off-campus house. Student residential units are also restricted from being within approximately 180 feet of each other.

If lawmakers brought such a plan to Lexington, the worst-case scenario is that 75 percent of the students living near campus would be displaced, forcing them to relocate in areas that are not within walking distance of campus or possibly even in surrounding counties, according to the UAHA.

During the meeting, a committee of 90 residents, students and landlords was formed to evaluate the proposal. The committee should act quickly to dismiss such a radical proposal as adopting the Penn State plan and begin working toward a real solution.

Currently, UK does not offer enough parking to support a drastic increase in commuter traffic. Nor is Lexington's public transportation system equipped to handle a dramatic increase in student passengers.

As it stands, UK cannot offer a reliable alternative for students who would be displaced by the Penn State proposal.

Lexington is a community that prides immensely from having a major research university at the heart of the city, and it seems that many have forgotten this. Those living in areas highly populated by student residents have a right to be concerned when couches are being burned in yards, but Penn State-style regulations would be an unreasonable response to a few isolated events.

Hopefully, this proposal will be quickly dropped, allowing both students and local residents to work together for a reasonable solution. This will not happen, however, if the Urban County Council does not take positive steps toward reaching out to students — such as making sure meetings do not take place during academic breaks.

LETTERS TO THE EDITOR

Stay at home if you can't handle fans booing

This is in response to the letter to the editor that appeared in the Kernel on Friday about UK fans booing the University of Tennessee's band. That was not the worst booing that I can remember. If I do remember correctly, we booed the heck out of the University of Louisville's band when we played them.

I do not think people were booing the band itself. I think it was more because the band played "Rocky Top." This, by the way, is the worst song I think a true Kentucky Wildcat fan can hear.

I was sitting in the student section,

and the student crowd actually stayed around and watched Tennessee's band play because it was enjoyable, and people clapped when they were done playing.

Fans only booed when "Rocky Top" was being played, which is OK because when you are at a sporting event, booing happens. If you are embarrassed to see people booing, then do not go to the stadium to see the game; sit at home and watch it on TV instead.

Chris Howell
Business and Finance writer

'Hillbilly' comment encouraged stereotypes

A few months ago, the Kentucky Kernel attained dubious statewide recognition through publication of a cartoon depicting a slave auction.

In light of this, I am distressed that the Kernel staff would print a letter to the editor using the term "redneck hillbilly" to describe poor behavior by fans at the UK-University of Tennessee football game.

As used in the letter, these words perpetuate disparaging connotations against everyone reared in a rural or Appalachian background. I understand

that letters do not necessarily represent the Kernel's beliefs, but by printing such statements, you tacitly encourage the continuance of this stereotype.

I challenge the Kernel staff to evaluate the content of letters and articles more closely in the future as such sweeping generalizations create opportunities for discrimination and marginalization.

Will Bowling
Forestry graduate student

Submissions

Send a guest column or letter to the editor to Opinions Editor Linsen Li. Please limit letters to 350 words or fewer. Be sure to include your full name, class and major with all submissions, as well as a phone number for confirmation.

E-mail opinions@kykernel.com

Weekly Poll Question

Do you think today's college students take HIV/AIDS seriously as a potentially fatal disease?

Vote online at www.kykernel.com



BRIAN GOODLEY, Kernel cartoonist

SG shows lack of responsibility handling its enormous budget

Rarely do topics of fiscal responsibility come up in discussions about UK's Student Government, but my conservative nature has been prodded one too many times.

Time after time my stomach turns over as I read about the strange ways that my money is being wasted here on campus.

Whether it's a trip to New Orleans, cameras in the Johnson Center

or even just \$100 being used to purchase calculators for student rental, I'm constantly pained by what SG considers a good use of my money.

I thought the installation of cameras in the Johnson Center, which would let students seeking exercise avoid a wasted walk to the gym, might be the last straw. Something in the back of my mind thought that surely this is the most mind-numbing thing SG can do with its funding. Surely they can't find even more ridiculous ways to spend money, no matter how small.

Oh how I was wrong. Recently, SG purchased five graphing calculators that will be available for student rental. This is being touted as a great accomplish-

ment as members of SG pat themselves on the back for finding so many ways to make life easier for UK students. But for some strange reason, I find it hard to see the benefit of purchasing five rental calculators on a campus of more than 25,000 students.

Where do these ideas come from? I applaud SG for digging deep to find ways to make UK a better place for everyone. And by digging deep, I mean no exaggeration. It seems that some of these "student representatives" go out of their way to waste money.

It's not that everything SG decides to fund is a waste of money, but too many dollars are just tossed at silly ideas.

"We receive student fees, so we need to use that money to provide for students," said Tyler Fleck, SG's deputy chief of staff for constituent services, in a Nov. 30 Kernel article.

The problem then isn't that those holding the purse strings are unaware of their responsibility toward students; it's that what's considered a good way to "provide for students" is absurd.

At the beginning of this year, SG President Nick Phelps was applauded for working to eliminate rampant waste in the organization.

In what appeared to be a positive turn for the group, budget and program cuts actually came to life. It was encouraging to see Phelps and the rest of SG realize that one no longer needed to be wasting money on programs like a DVD rental service.

But we've replaced it with costly cameras and a calculator rental service?

One hundred dollars for calculators and a few thousand for video cameras in the Johnson Center aren't terribly large amounts of money when you put them into the perspective of SG's roughly \$360,000 budget. Why, though, should any money be spent on such silly services and projects? Isn't that a few thousand dollars that could be added to fund programs that do real good on campus?

If we're going to waste money, why not waste it in a way that could really benefit someone? I'm sure no one would object to a campus-wide raffle where students could win parking passes, which now cost more than \$200.

As I watch the silliness and pandering that goes in the U.S. Congress, I wonder how such successful and brilliant people can waste so much time and money without skipping a beat. How is it that people like Sen. Hillary Clinton, D-N.Y., can consider spending \$1 million on a museum memorializing the 1969 Woodstock concert?

But then I watch SG, full of students who have yet to be corrupted by lobbying groups and bribery, act as if it has no idea as to what responsible spending might look like.

Brett Nolan is a philosophy and political science sophomore. E-mail bnolan@kykernel.com.

Despite Chavez's national popularity, voters should respect term limits

Venezuelan President Hugo Chavez is pushing for constitutional reforms that would allow him to remain in office indefinitely.

Voters in Venezuela voted yesterday in a referendum on proposals that would eliminate presidential term limits, BBC News reported. The current Venezuelan constitution has a limit of two six-year terms for presidents.

While Chavez has had some success in office, Venezuelans should be wary of what this constitutional change implies. Chavez is clearly hoping to make himself the life-term president, and he is announcing this desire to the public without inhibition.

According to BBC News, Chavez said Friday: "If God gives me life and help, I will be at the head of the government until 2050." He would be 95 years old and would have remained in office for 52 years.

To put that into perspective, Fidel Castro is currently 81 and has ceded his presidential duties to his younger brother since 2006. Apparently, Chavez's ambition is calling on him to "out-Castro" Castro.

With his newest constitutional reform proposals, Chavez is exposing

himself to critics who have long labeled him a tyrant and a dictator.

Even if the changes were passed, Chavez would have to keep getting elected by his people to remain in office.

However, judging from his election record, it appears he would have a good chance of winning at least another term or two.

According to Venezuelan National Electoral Council data, Chavez won presidential elections in 1998 (an irregular election due to political turmoil), 2000 and 2006, beating his closest opponents by 16, 22 and 25 percent, respectively.

While the legitimacy of these elections is debated by some, these victories strongly suggest that Chavez is popular among his people, certainly more so than his favorite target of verbal assault, U.S. President George W. Bush.

As president, Chavez has implemented a number of social programs to battle poverty, including education and health services for all. Economically, he has nationalized key industries and curbed inflation by maintaining strict prices on basic foods. Political supporters say he has given a voice to millions of poor Venezuelans who were disregarded by the "traditional" political parties.

The above reasons, as well as Chavez's distinct personality, are largely responsible for his cult-like following.

So if the voters want to keep Chavez in office, what is wrong with

changing the constitution to accommodate their wishes?

When a politician remains in office for a prolonged period of time, he or she inevitably builds up a power base that is often insurmountable. That is the reason incumbents of the U.S. Congress are often a lock to be reelected.

Such a regime, if it becomes corrupt and subsequently unpopular among its people, will be hard to top because of the firm grip it has in the government and the country.

In addition to election fraud, Chavez has been accused of controlling and censoring the media. His campaign tactics have increasingly included propaganda that builds on the raw emotions of the people and that flames their anger against the Bush administration.

While Chavez's claim to power is based on popular support of the Venezuelan voters, his populist approach reeks of demagoguery, and his ambition to remain in power for life resembles the likes of Castro, Mao Zedong and Saddam Hussein.

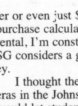
Regardless of how popular Chavez is or how great he has been as president, the Venezuelan people should never allow a constitutional change that opens the door for lifetime dictatorship.

Venezuela has had a respectable history of democracy since the 1950s, and its citizens should not give up their rights so easily.

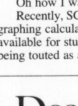
Linsen Li is a history and journalism junior. E-mail ll@kykernel.com.



BRETT NOLAN
columnist



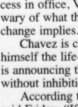
LINSEN LI
columnist



CHRIS HOWELL
Business and Finance writer



WILL BOWLING
Forestry graduate student



LINSEN LI
columnist

SCIENCE

Continued from page 1

jects to increase the interest of Kentucky girls and women in science, technology, engineering and mathematics, said Sue Scheff, coordinator of Appalachian & Minority STEM Majors.

Females make up 45 percent of the workforce in the United States and hold 12 percent of science and engineering jobs in business and industry, according to the National Council for Research on Women.

The national project for boosting women's interest in math and science currently serves in California, Florida, North Carolina, Missouri, Oregon and Washington, and the National Science Foundation gave it a grant to expand to other states.

The lower percentages of female students in some areas of science and engineering programs may be the result of schools not reaching out to females and a lack of female interest, among other factors, Scheff said.

"Our goal in implementing the collaborative is to partner with other institutions across the state to share information, increase programming to stimulate interest in STEM fields for both boys and girls, and to reduce duplication of efforts," Scheff said.

Shorridge said girls are highly outnumbered in all of her engineering classes, but her experience as a female engineering major has been positive.

"It seems like UK makes sure to go out of their way to make females feel welcome, and the activities I'm involved in, like Society of Women Engineers, make me feel like I'm not such a minority," she said.

Shorridge suggested targeting girls at a younger age who may have an interest in careers relating to math and science and encouraging them to pursue those studies.

"Maybe if there was a way for colleges like UK to send out information to female high school seniors about STEM majors, it might make them more aware of potential options," she said.

An informational meeting to organize the Kentucky Girls STEM Collaborative Project will be held at 1 p.m. tomorrow at the UK Cooperative Extension Office at 1140 Red Mill Place in Lexington.

The meeting will bring together people from K-12 education, higher education, government, professional organizations, businesses and community-based organizations to find ways to work with other women-focused organizations within the state, Scheff said.

SMOKING

Continued from page 1

munity members reduce their tobacco use, according to the news release.

The participating Kentucky hospitals are the Bluegrass Community Hospital in Versailles, Bourbon Community Hospital in Paris, Central Baptist Hospital in Lexington, Georgetown Community Hospital in Georgetown, Meadowview Regional Medical Center in Maysville, St. Joseph Healthcare in Lexington, UK Good Samaritan Hospital in Lexington, and UK Chandler Hospital in Lexington.

Lincoln Nunn of Corbin, Ky., smoked in front of Chandler Hospital, standing with his wife and son Saturday after his son's baby was born. He said the new policies would be inconvenient for smokers, but they might supply an extra incentive to help him quit his own addiction to tobacco.

"I don't have the gumption or the willpower to quit on my own," Nunn said. "When they outlaw smoking, I'll quit."

However, some smokers do



ED MATTHEWS | STAFF

Donya Sizemore smokes outside the UK Chandler Hospital yesterday. Sizemore, a Hyden, Ky., resident, was at the hospital because her daughter was having open-heart surgery.

not see any positive development in the policies.

"I think we have the right to smoke. I don't think we should be secluded from society," said Connie Buffington of Stanton, Ky., who was smoking in the enclosed outdoor smoking area behind Chandler Hospital. She added that with the

new policies, she would have to find a different place to smoke.

"I would have to walk out in the middle of the street."

Tammy Hulette of Versailles said that if non-smokers don't want to be around smoke, they should stay away from designated smoking areas.

"They should ban non-smokers from coming out here," she said as she stood in the smoking area. "Smokers should have a place to smoke; we have the right to smoke."

Hulette, who was at the hospital Saturday because her brother was having surgery, added that hospitals are the most likely place a person would need to smoke, because of stress.

The state of Kentucky has a 29 percent smoking rate, the highest in the United States. According to the Centers for Disease Control and Prevention, there are more than 400,000 deaths due to tobacco use annually in the United States; about 8,000 of those deaths are in Kentucky. Secondhand smoke kills about 50,000 non-smokers nationwide each year, according to a report by the U.S. surgeon general.

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Gillis Parking Lot
December 12 - December 14

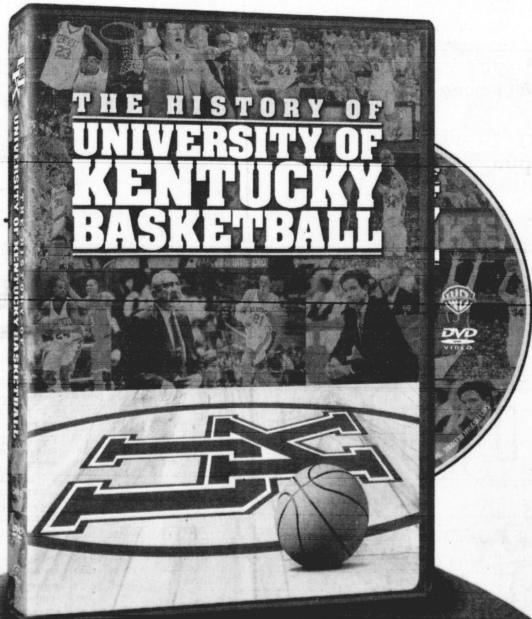
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