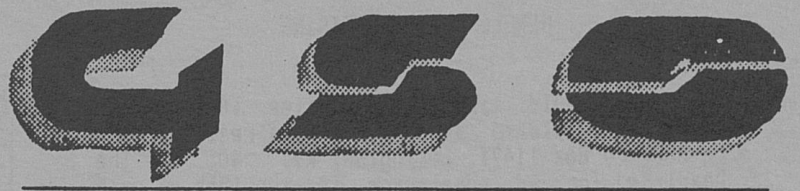


**July
NEWS**



LEXINGTON

LEXINGTON GAY SERVICES ORGANIZATION P.O. BOX 11471 LEXINGTON, KY 40575

INSIDE:

**LOCAL
NEWS**

**AIDS
UPDATE**

**EVENTS
CALENDER**



LEXINGTON'S GAY & LESBIAN NEWSLETTER

NEWSLETTER ADVERTISING
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If you would like to advertise in the GSD Newsletter, please send your camera-ready ad copy to GSD, PO Box 11471, Lexington, Ky. 40575. The Deadline for ad submission is the 15th of each month. Any ads received after the deadline will not be guaranteed to be published in the next issue.

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The editor reserves the right to censor advertisements which are deemed in poor taste and to edit due to space and/or grammatical errors. Erotica, fantasy, or sexually explicit materials, or ads with sexual innuendo, will not be accepted for publication.

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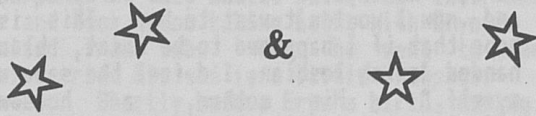
Mail to GSD, P.O. Box 11471, Lex., KY 40575

The GSD newsletter is published monthly by the Lexington Gay Services Organization Incorporated, P.O. Box 11471, Lexington, Kentucky 40575. GSD is a non-profit organization whose purpose is to provide educational, recreational, social and referral services directly involving or relating to gay/lesbian people.

Views or opinions expressed in stories or letters are those of the writers and do not necessarily represent those of the GSD board or the newsletter staff. Publication of the name or photograph of any person, organization or other entity in articles or advertising in the newsletter is in no way indicative of the sexual orientation of such person, organization or entity.

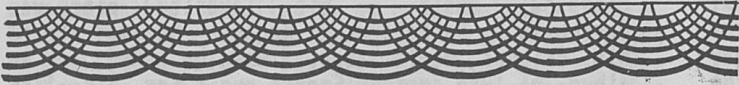
Submissions for the newsletter are welcome. All submissions become the property of the Lexington Gay Services Organization, Inc. All Submissions must indicate the full name and address of the author, although no byline will be published without permission of the author. Non-original material must indicate that that person has given his/her permission for the use of his/her name in the publication. Anonymous submissions cannot be accepted. The editorial staff has the right to alter submissions (including advertisements) to meet publishing requirements.

Bluegrass Benefit Association



Erica Vaughn Productions

*Thank you
very much*



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The Lexington Gay and Lesbian Pride Week Association would like to thank everyone who contributed to or participated in GAY Pride Week 1986. Thanks to your support, June 8th - 14th was truly a celebration of our community's culture.

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CULTURAL CELEBRATION.

THE DOUBLE CLOSET

from Life

part two of three

So the gay father lives in a double closet. He is isolated from straights because he is gay and from gays because he is a father. It is a Catch-22 that inspired Frederick Bozett of the University of Oklahoma Health Sciences Center to conduct an extensive study of the gay father as an example of cognitive dissonance. (Cognitive dissonance theory deals with the tensions produced when a person perceives his attitudes and behavior as inconsistent.) Bozett concluded that achieving "congruence of both identities" depends on accepting the two halves of oneself and developing a social network of homosexual and heterosexual friends who also accept both. Only then does the paralyzing sense of dissonance -- what one gay father in New York calls "fragmentation from the root of my body to the root of my soul" -- disappear.

The fastest route to reconciling identities, of course, is to meet other gay fathers. More than 25 cities in the U.S. and Canada now have local chapters of the Gay Fathers Coalition, a Washington-based network of support groups. Some of the larger chapters, such as the Gay Fathers Forum in New York and the Bay Area Gay Fathers in San Francisco, have over 300 members. In the Toronto group, to which Robert and Michael belong, some men are divorced, some still married, some considering separation, some still so closeted they introduce themselves by first names only. Here, diapers and PTA meeting are acceptable topics of conversation. So are such questions as how do you tell your wife? How can you avoid alienating your adolescent son? Should your lover play the role of stepparent?

The sense of commonality that arises from such discussions has proved a powerful healing force. Even so, integrating two roles that both gay and straight society have pronounced incompatible is a process so arduous that most gay fathers never complete it. They remain instead in a limbo of divided identities, down-playing their sexuality before one audience and their parenthood before another. Michael Dorman and Robert Knight are among the few pioneers who have succeeded in coming out of both their closets.

On the bottom shelf of what Michael and Robert call "the gay bookcase" -- five sagging shelves double-stacked with books about homosexuality -- lies a photo album with a pink triangle on its cover. It is a pictorial record of Michael's life as a gay man. He assembled it four years ago, he says, "so if anything ever happened to me my son would grow up understanding who his father was." The trajectory that ends with a snapshot of him and Robert in the Canadian Rockies, posed arm in arm like bashful honeymooners, begins with a 1952 group portrait of his second-grade class in Hamilton, Ontario. Michael has drawn an arrow with two hearts between himself and a little boy with a bristly brown crew

cut. "I used to try to bump up against him in the lunch line," says Michael. "It was the only guilt-free incident of my closeted gay life."

Michael was the eldest of five boys, three of whom are now gay. Like many gay activists, he does not care to speculate about causes. "People who hunt for a cause are really hunting for a cure," he says. "I can't be cured of who I am, and now I wouldn't want to be. This is me. I hope that if I happened to be a fat, black, left-handed Jewish lesbian, I'd feel the same way about myself." His mother, a housewife, was affectionate and attentive; his father, a factory office worker, was undemonstrative and aloof. From early childhood Michael felt different from his schoolmates in the working-class industrial town of Hamilton. He used to listen secretly to classical music -- his favorite piece was Beethoven's Pathétique -- because he was afraid his friends would laugh. When he asked for an album of 19th century French music for his 13th birthday, his father asked if he wouldn't prefer a football.

"I expended an amazing amount of energy on repression," says Michael. "When I was seventeen I fell in love with the boy across the street. My heart would pound whenever I saw him, but of course I wasn't a homosexual. Homosexuals hated women; I didn't hate women. Homosexuals wanted to be women; I didn't want to be a woman. Homosexuals flipped their wrists; I lifted weights. Whew! I wasn't a homosexual!" When Michael was 19 and working for a steel company, he wrote a personal manifesto describing how Canada should be run. In it, he recommended that all homosexuals should be imprisoned. "I really believed it," he says. "After all, if I could make such a statement, how could I be anything but straight?"

When Michael was 24 years old, he met a pretty, dark-haired primary school teacher named Lynn Dwyer. She shared his interest in leftist politics, the environment, the peace movement and Zero Population Growth. Michael felt an immediate sense of belonging, almost twinship, with her that continued throughout their nine-year marriage and persists today. He had always wanted to marry and have children -- indeed, that is the only goal he remembers listing on a high school guidance class questionnaire -- and, since he had never had sex with a man and hated homosexuals, he had a clear conscience when he proposed marriage.

They were both virgins on their wedding night. Michael found Lynn beautiful and did not have to fantasize about men. "Looking back," he says, "I wasn't a very imaginative lover. Now that Lynn has had sex with other men and I've had sex with other men, we both know how much better it can be." They moved to a little country house in Attercliffe, Ontario, a counterculture Eden with an organic garden and an outhouse, and in the evenings, after Lynn became pregnant, they lay in front of the wood stove, practicing natural childbirth exercises together. Michael says the Eryn's birth was one of the two most emotionally powerful moments of his life.

They talked about how they would raise their son: how he would read nonsexist books; how he would always get plenty of hugs and kisses from both parents; how he would learn to respect people of all races and religions. Lynn, the younger of two sisters, knew little about babies and depended on Michael for lessons in diapering and burping. They heated water on their wood stove and took turns taking baths with Eryn in a galvanized iron tub. When he went to town, Michael carried his son in a little backpack.

Shortly before Eryn's birth, during a European vacation, Michael had had his first sexual experience with a man. He was deeply shaken because even though the man meant nothing to him, the memory of the experience filled his head when he made love to Lynn. Feeling like a sleepwalker impelled by an uncontrollable force, he began cruising for men after work along Hamilton's single "gay street." Lynn had no idea how her husband was spending his afternoons during Eryn's infancy because he was always home in time for dinner. "I blanked by brains out," Michael says. "I never even knew their names, and when it was over I sort of pretended that they were they gay ones and I wasn't. I kidded myself that because it was other men and not other women, I wasn't really being unfaithful." He was terrified he might give Lynn a venereal disease, so after each episode he had tests for gonorrhoea. Finally, he told one of his sex partners that he was gay. The word felt strange on his tongue. He felt that by pronouncing it he had burned a bridge.

In the eighth year of their marriage, on a balmy June evening after Eryn had been tucked in bed, Michael told Lynn he was bisexual. "That was a complete crock, of course," he says, "but I was keeping one foot on dry land." Lynn turned pale. She had never suspected it; instead, she had worried that her husband's passion was diminishing because she was an inadequate lover. But since she had always been a resolute supporter of all minorities, both ethnic and sexual, she said she thought she could live with the news. In bed that night she told him she had never felt closer to him, and she recalls their subsequent lovemaking as the most tender of their entire marriage.

There followed many nights of negotiation in front of the wood stove. Couldn't Michael, out of familial responsibility, suppress his feelings for men? He said he had tried, that it wasn't just sex, it had more to do with his entire soul, he couldn't explain it.... Finally they hammered out an agreement consonant with Lynn's generosity and Michael's confusion: he would be straight six days a week, and on Thursday nights he would be permitted to be gay. Lynn says, "Of course, we were both miserable. It didn't take long for my facade to crumble. One night I said, 'Michael, it just hurts. It really hurts.' He started throwing chairs, tables, lamps, everything all over the living room. He said he wanted to drive his car off a mountain because he couldn't stand hurting me, but he was damned because even if he killed himself, he would hurt someone. He was thinking about Eryn. We spent the rest of the

night picking things up without a word, with both of our faces covered with tears."

Soon it became clear that Michael could not confine his identity to one seventh of his life. They spoke for the first time of separation. Eryn still remembers this period as the "time when Papa saw sad." Once, when Eryn was three, he saw Michael lying across the double bed that Robert now shares. "Why is Papa crying?" he asked Lynn. "Will it help if I give him a hug?" He toddled back with a roll of toilet paper to wipe his father's cheeks, and climbed into the arms that had bathed and diapered him a thousand times. "My baby, by baby," said Michael, over and over.

Frederick Bozett, the author of the study on gay fathers and cognitive dissonance, would call the final six months of Michael's marriage a search for the reconciliation of divided identities. Depression over the collapse of his marriage alternated with exhilaration as he explored his expanding new world. He discovered Glad Day Books, an intellectual gay bookstore in Toronto, and walked out with shopping bags full of books by and about homosexuals. He learned in his night school anthropology courses that many cultures are tolerant of sexual variation. He discovered, through the Toronto Gay Fathers group, that other gay men had married and had children. Eventually, he collaborated with some of the other members on a book about their experiences. He told his mother and his best friends that he was gay. He tried to explain it to Eryn. For the first time he had a sense of the closet in which he had been living as a palpable entity. "It was dark and cramped and narrow," he says, "just like its name. Inside, I did nothing but hedge and lie. Once I started stepping out of it a little, I began to realize how much energy I'd been bottling up. I laughed more and my whole body became more relaxed. It was like having the right terminals connected for the first time."

One summer day, he was bicycling alone in the country, thinking about how different his new gay friends were from the monsters of his adolescent fears. He turned to the cows in a nearby pasture and said to them, quietly, "I'm free." This is the moment he ranks with his son's birth.

Separation was difficult. He and Lynn agreed to share custody; Eryn would spend half his time with each of them. "I was terribly upset that I wouldn't be able to bathe Eryn every night and read him his bedtime story every night," he says. "And I often couldn't bear to think about Lynn." He became more and more active in the gay fathers group, and through it, five months after his separation, he met Robert Knight.

Robert was the son of a Hamilton assemblyline worker. Like Michael, he believes he was always homosexual, and today he marvels at his prodigious faculties of self-deception. One of his earliest memories is of looking at photographs of unclad African tribesmen in his grandmother's encyclopedia. The naked woman seemed neither ugly nor beautiful, just dull; the naked man raised Robert's pulse alarmingly, as did the male models in the department store catalogs that he secretly

pored over when he reached adolescence. He had no name for what he experienced. He simply called it "those feelings." Those feelings, of course, had nothing to do with the drag queens who paraded in front of the St. Charles bar in Toronto every Halloween. "They revolted me," he says. "Straights used to line up and throw eggs and tomatoes at them. That was what it meant to be queer: to wear a dress and have egg on your face. I had no idea that there were normal-looking gay men who loved each other, that they were happy and proud, that the ancient Greeks had thought homosexuality was beautiful...it makes me choke to think of what I missed. I thought I was the only person in the world with those feelings."

During his sophomore year in college, Robert had an affair with a male classmate. It was a strictly sexual transaction, furtive and unaffectionate, during which Robert's teeth chattered with fear. Afterward, he lay in bed punching himself in a frenzy of self-flagellation, repeating over and over that he had to start getting excited by women or all the good things in life would pass him by. Rose Raydiuk, whom he had met on a blind date and worked up to kissing 10 days later, seemed like a potential savior. When they finally made love -- "without cuddling," he recalls, "because cuddling seemed more intimate than sex" -- he decided those feelings had been forever banished to a padlocked closet.

Marriage to Rose in 1969 brought the welcome heterosexual talismans of domesticity and children, but the closet door began to strain at the hinges. "I bought Rose a gift subscription to *Playgirl*," says Robert. "Of course, it was really for me. I'd take it out of its brown paper cover before she got home, fantasize about the man in the centerfold and then carefully put it back." Although Rose's friends envied her because her husband conscientiously shared all the cooking and housekeeping chores, Robert worried that he was not giving her enough emotional sustenance. During these years his three children were a major consolation -- even Brittan, who drew pitying glances when he wheeled her pram down the street. The delight that flooded him when the children climbed on his lap made him think that perhaps he was not, after all, an irredeemably cold and unfeeling person.

When Brittan was five, she was hospitalized for emergency surgery to repair a congenital heart malformation, a potentially fatal complication of Down's syndrome. "There were wires and beepers and things blipping," says Robert. "So many things all over her. Her whole body was swollen. She looked like a frog. She couldn't talk because she had a tube in her mouth, but she'd lie there mouthing 'Mommy, Daddy, Mommy, Daddy.' I had a hollow feeling in my stomach the whole month she was in intensive care."

The pressure of Brittan's situation broke something down in Robert's carefully constructed defenses. One day he left the hospital and started walking down Yonge Street in Toronto, the heart of what the city's inhabitants call the Gay Ghetto. "I was looking for gay people," he says,

"but since I had no idea what they looked like I couldn't find any. Finally I walked past the Blueboy Bookstore, which had gay erotica in the window. I was much too scared to go in. You have no idea of the paranoia that seizes you inside the closet. When I got home I tried to phone the store, but there was no listing. I thought if I called Information, they'd trace the call and everyone would know I was a homosexual. It took me two months to get up the courage. All I wanted was some advice, and it's sad that the only place I could think of to ask questions about my entire identity was a pornographic bookstore."

He finally made the call, thinking to himself, "I'm actually talking to a gay person!" The gay person led him to a gay counselor, who led him to a gay bar. Unlike Michael, he was cruising only for companionship, not for sex. "I wore such un-gay clothing," he remembers. "A blue velour top, bought specially for the occasion. I had no idea what gay people wore."

At home, his sex life had ground to a halt, and one night Rose asked him if this was because he was gay. "I didn't answer," he says. "There was a silence in the kitchen but there wasn't silence in my head. I felt like there was a loud siren in my head and it was getting louder and louder, because I knew that if I didn't answer, then she would know. Finally she walked over and looked into my face. And then she started to cry."

Unlike Lynn, Rose knew little about homosexuality and was unprepared to accept it. She felt their marriage had been a lie. In the weeks that followed, she frequently burst into tears in restaurants and shopping centers. Meanwhile, with the same mixture of anguish and excitement Michael had experienced, Robert was tentatively exploring the gay subculture. He bought his first "gay clothes" (a pair of blue jeans, suitable for the gay world's new macho aesthetic); danced for the first time with another man; tried, and disliked, his first popper, an inhalable stimulant fashionable in some gay circles. The greatest revelation was his discovery of Michael's gay fathers group -- "a whole roomful of people just like me." He and Michael immediately became friends. They started having long telephone conversations in which Michael shared his newly acquired knowledge of gay history and politics. One night Michael visited Robert when Rose was out and said something no man had ever said to him: "Do you know what you need? You need to be held and cuddled."

They became lovers a week later. "I couldn't believe it," says Robert. "It was the most satisfying experience of my life. I had never been held lovingly by a man before, and when Michael kissed me it was as if all the different parts of my life I'd been keeping apart -- sex, love, touching, friendship, camaraderie, emotion, all the little boxes -- finally came together. I knew I couldn't let go of it, ever."

But he almost did. A month later, after a screaming argument with Rose in which she forbade him to tell their children he was gay, and a



Lady Liberty Takes a Beating on Her Birthday



Howard Armistead, operating from Los Angeles, has organized a nationwide call-in campaign to let the President know that there are citizens of this nation who do not approve of the Justice Department's decision nor the federal government's lax attitude on funding AIDS research. Hopefully, enough concerned people will call the Executive Office of the President at (202)456-7639 and voice their opinion on this (and, maybe, the Supreme Court's decision on the constitutionality of consensual sodomy statutes).

Until 1968, Georgia defined sodomy as 'the carnal knowledge and connection against the order of nature, by man with man, or in the same unnatural manner with woman.' It is now defined by '[a] person commits the offense of sodomy when he performs or submits to any sexual act involving the sex organs of one person and the mouth or anus of another.' In *Thompson v. Aldridge*, the Georgia Supreme Court held that (the sodomy statute) did not prohibit lesbian activity. In *Riley v. Garrett*, the Georgia Supreme Court held that (the sodomy statute) did not prohibit heterosexual cunnilingus.

EDITOR'S NOTE: The following is a summary of the Supreme Court's decision on the sodomy statute. Following this are excerpts from the dissenting opinions filed at the time of the decision.

No. 85-140 Argued March 31, 1986 -- Decided June 30, 1986

After being charged with violating the Georgia statute criminalizing sodomy by committing that act with another adult male in the bedroom of his home, respondent Hardwick brought suit in Federal District Court, challenging the constitutionality of the statute insofar as it criminalized consensual sodomy. The court granted the defendant's motion to dismiss for failure to state a claim. The Court of Appeals reversed and remanded, holding that the Georgia statute violated respondent's fundamental rights.

Held: The Georgia statute is constitutional.

(a) The Constitution does not confer a fundamental right upon homosexuals to engage in sodomy. None of the fundamental rights announced in this Court's prior cases involving family relationships, marriage, or procreation bear any resemblance to the right asserted in this case. And any claim that those cases stand for the proposition that any kind of private sexual conduct between consenting adults is constitutionally insulated from state proscription is unsupportable.

(b) Against a background in which many States have criminalized sodomy and still do, to claim that a right to engage in such conduct is "deeply rooted in this Nation's history and tradition" or "implicit in the concept of ordered liberty is, at best, facetious.

(c) There should be great resistance to expand the reach of the Due Process Clause to cover new fundamental rights. Otherwise, the Judiciary necessarily would take upon itself further authority to govern the country without constitutionality authority. The claimed right in this case falls far short of overcoming this resistance.

(d) The fact that homosexual conduct occurs in the privacy of the home does not affect the result.

(e) Sodomy laws should not be invalidated on the asserted basis that majority belief that sodomy is immoral is an inadequate rationale to support the laws.

Justice White delivered the opinion of the Court, in which Chief Justice Burger, and Justices Powell, Rehnquist, and O'Connor joined.

The following are excerpts from the dissenting opinion filed by Justice Blackmun, in which Justices Brennan, Marshall, and Stevens joined.

"This case is about "the most comprehensive of rights and the right most valued by civilized men," namely, "the right to be let alone."

"It is revolting to have no better reason for a rule of law than that so it was laid down in the time of Henry IV. It is still more revolting if the grounds upon which it was laid down have vanished long since, and the rule simply persists from blind imitation of the past." -- Justice Oliver Wendell Holmes

"...the Court's almost obsessive focus on homosexual activity is particularly hard to justify in light of the broad language Georgia has used...[t]he sex or status of the persons who engage in the act (of sodomy) is irrelevant as a matter of state law."

"Despite historical views of homosexuality, it is no longer viewed by mental health professionals as a 'disease' or disorder. ...But, obviously, neither is it simply a matter of deliberate personal election. Homosexual orientation may well form part of the very fiber of an individual's personality. Consequently, under Justice White's analysis in *Powell (v. Texas)*, the Eighth Amendment may pose a constitutional barrier to sending an individual to prison for acting on that attraction regardless of the circumstances. An individual's ability to make constitutionally protected 'decisions concerning sexual relations,' ... is rendered empty indeed if he or she is given no real choice but a life without any physical intimacy."

"And we protect the family because it contributes so powerfully to the happiness of individuals, not because of a preference for stereotypical households."

"...a necessary corollary of giving individuals freedom to choose how to conduct their lives is acceptance of the fact that different individuals will make different choices. ...the Court declared: 'There can be no assumption that today's majority is 'right' and ... others ... are 'wrong.' A way of life that is odd or even erratic but interferes with no rights or interests of others is not to be condemned because it is different."

"With respect to the Equal Protection Clause's applicability to (the Georgia sodomy statute), (it is) note[d] that Georgia's exclusive stress before this Court on its interest in prosecuting homosexual activity despite the the gender-neutral terms of the statute may raise serious questions of discriminatory enforcement..."



UFMCC Statement on Sodomy Ruling

The Board of Elders of the Universal Fellowship of Metropolitan Community Churches (UFMCC) is shocked and dismayed at the ruling of the United States Supreme Court that the Constitution does not protect the privacy and rights of consenting adults when the law of the land makes it illegal for two people to love each other freely and express that love in the privacy of their own homes, such a law is unjust and immoral.

It is a violation of the spirit of the framers of the constitution whose dream it was to have a government that afforded citizens maximum protection from undue governmental interference in the pursuit of life, liberty, and happiness.

It is significant that it was such a sharply divided decision. The lack of agreement within the court reflects the conflict surrounding this issue in America. We are encouraged by the Justices who opposed this decision and regret the action of the narrow majority.

It also gives a signal to the gay and lesbian citizens, and to all who do not conform to the court in "approved sexual practices," that they cannot expect to receive government protection for their rights. It opens the door to further repression and backlash against the gay and lesbian community.

We will ask our membership to pursue remedy through the legislative process, to insure that the rights of gay and lesbian people are protected through the enactment of civil rights legislation. We will also pursue the election of a president who will support and sign such legislation.

-- The Lavender Letter

"A State can no more punish private behavior because of religious intolerance than it can punish such behavior because of racial animus. 'The Constitution cannot control such prejudices, but neither can it tolerate

"... (we) see no justification for the Court's attempt to equate the private, consensual sexual activity at issue here with the 'possession in the home of drugs, firearms, or stolen goods,' to which Stanley (v. Georgia) refused to extend its protection. None of the behavior so mentioned in Stanley can properly be viewed as 'victimless'; drugs and weapons are inherently dangerous and for property to be 'stolen,' someone must have been wrongfully deprived of it."

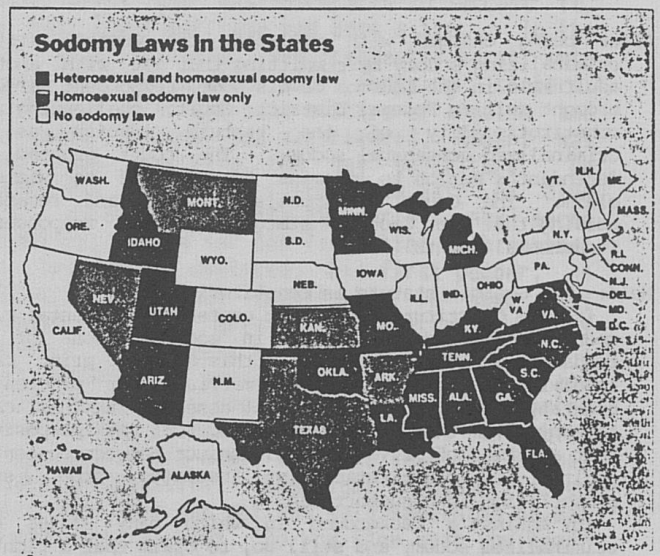
"That certain, but by no means all, religious groups condemn the behavior at issue gives the State no license to impose their judgements on the entire citizenry."

"A State can no more punish private behavior because of religious intolerance than it can punish such behavior because of racial animus. 'The Constitution cannot control such prejudices, but neither can it tolerate them.'

"This case involves no real interference with the rights of others, for the mere knowledge that other individuals do not adhere to one's value system cannot be a legally cognizable interest, ... let alone an interest that can justify invading the houses, hearts, and minds of citizens who choose to live their lives differently."

"... (we) see no justification for the Court's attempt to equate the private, consensual sexual activity at issue here with the 'possession in the home of drugs, firearms, or stolen goods,' to which Stanley (v. Georgia) refused to extend its protection. None of the behavior so mentioned in Stanley can properly be viewed as 'victimless'; drugs and weapons are inherently dangerous and for property to be 'stolen,' someone must have been wrongfully deprived of it."

"That certain, but by no means all, religious groups condemn the behavior at issue gives the State no license to impose their judgements on the entire citizenry."



CALL (202)456-7639

screaming phone call with his mother in which she told him that homosexuals are child molesters, Robert walked into the bathroom and swallowed every pill in the medicine chest. He woke up in the intensive care unit of the local hospital. during the month he spent in the psychiatric ward he was continuously angry, not at the doctors or at his wife, but at the straight world for having made him hate himself so much he had even been willing to give up his children.

After he was discharged, Rose no longer screamed at him. She let him tell Jason what "gay" meant when Robert said he would rather not wait until society had taught his son homosexuality was sinful. A separation now seemed inevitable, but Robert, who greatly respected his wife's increasing strength and self-reliance, agreed to stay with her for a year and a half while she got a certificate in special education -- part of her plan for supporting herself without him. Still, he spent most of his nights with Michael, getting up at 5:30 every morning so he could return to make his children breakfast.

In March 1981 Robert asked Michael if he thought they could successfully share an apartment with their children, under the custody arrangements their wives had generously agreed to: Brittan full time, Eryn half time, Jason and Rosslyn every other weekend. They wondered whether they could achieve with each other the domesticity they had once thought only heterosexuality could confer. In June, with no role models to guide them in creating their radically redefined family, they and their children moved in together.

to be continued next month

YOU THINK THAT SEX CAUSES AIDS? YOU'VE BEEN HAD from Christopher Street

BRINGING SCIENTISTS TO THEIR SENSES
Cesar Caceres vs. Selective Blindness
by Ann Giudici Fettner

As one who spent much of the early 1970s in a VW bus, I'm loath to be the bearer of these tidings, but bear them I must: Drugs are out.

"Drug use depresses the immune system. I first suspected this in 1982, and by October of '83, I had 12 people I could trace who had died of AIDS, so I put all their charts together and started going over them to see why they were dying. I looked at their backgrounds: they were all the same person! They had all been drug users for over five years," explains Dr. Cesar Caceres of Washington, D.C. According to his calculations, based on figures from the Centers for Disease Control, Caceres maintains that 79% of those with AIDS in this country should be

categorized as drug abusers. The remainder of cases may be categorized as Haitians, children, blood recipients, and that enigmatic group known as "no known risk factor."

Caceres, who is a statistical whiz as well as a practicing physician, and who served as an officer in the Public Health Service for over ten years, believes every characteristic, personal behavior factor, or environmental aspect possibly relevant to the development of AIDS must be explored and weighed in terms of its possible role in creating "susceptibility." He is genuinely worried about the inadequacy of CDC reports regarding IV-drug use and the relationship he maintains exist between AIDS and recreational drugs.

RECREATIONAL DRUGS

Which drugs? "In Washington," Caceres says, "it's been MDA, LSD, and amphetamines. MDA is a horrible drug that gives some people severe gastroenteritis, which can last for days. Another popular drug in D.C. is called 'blotter acid,' and from New York City they were importing crystal meth and 'Purple Haze.' Intravenous drugs aren't big here, and even cocaine wasn't that prevalent a couple of years ago. Washington's a surprisingly conservative town, but more coke is beginning to show up, along with more THC.

"I thought it odd that all those early deaths were among drug users," Caceres told me, "and it didn't hold for 100% of the cases of course. It's dropped to between 80 and 90% -- which it still is today."

If, for instance, one is stoned every night on one or more drugs -- and reports are making the medical rounds that half of those with AIDS use as many as five street drugs in a year, that 93% smoke grass, 97% use poppers, and 68% take some form of amphetamine, and 70% take one or more drugs intravenously -- it's suggestive at the very least.

Here is how Dr. Caceres fits drugs into his scenario for susceptibility to AIDS. "As Darwin said, there is survival of the fittest, and we have to bear that in mind. We are not all born equal, and there are some genetic factors over which we have no control. A 100% perfect immune system is improbable: we all have a little sliver that doesn't work. I've been testing for those congenital deficiencies in healthy gay males for the past 18 months. I have found some IgA and beta globulin deficiencies (immune system chemicals), so these men are just as you'd suspect: They do have some element of congenital deficiency. No one has ever studied the progress of children with these minuscule deficiencies, though they have studied the ones like the child in the bubble. But what happens to the children who are often ill, those who get pneumonia, the ones whose mothers, say, were sickly children?

"Then this sickly child reaches a certain age and leaves Kansas City or wherever and goes to New York or the West Coast. All of a sudden things change. He's in a different environment in a crowded city; he's exposed to many new things; he comes down with a bunch of little illnesses. Then

he finds things that give him an artificial stimulus which will keep down the need for food, the need for rest. So we have genetic deficiency first, then the illnesses we all have, one after the other. For instance, we used to call diarrhea in males the 'Gay Bowel Syndrome' -- that's ridiculous. It's travelers' disease. When you eat out a lot, you are effectively traveling through Africa or Mexico or wherever, so you're exposed to the whole world in little restaurants that look curious, and which are hiring people at the lower end of the employment scale who often are infected. Then you superimpose on that the drug use that started in the late '60s.

"And in much the same segment of the gay community, you see men smoking Marlboros when the rest of the world has switched to Nows. Low-tar cigarettes are also a hazard, but not as much. One package of Nows is the equivalent to a single Marlboro. Certain segments of the gay community use bars as their meeting places because they find they're not acceptable in others, so there's this concentration of men where there is hard drinking -- harder than in the usual social environment. So, life is spent socializing with cigarettes, with alcohol, and you add to that, drug taking. It's a natural progression -- the classic butch smoker, heavy drinker. When you've debilitated someone, particularly someone with certain genetic blips, and add alcohol and drugs, then in comes a new disease, and the first to go are the susceptibles."

Caceres explains that habitual drug use appears to correlate with AIDS, though without question, heavy drinking, particularly in those with liver damage from hepatitis, may also play a major role in encouraging susceptibility to AIDS.

It seems only sensible to look carefully into something that is so widely practiced by persons who have contracted AIDS. In fact, there is almost better correlation between AIDS and recreational drugs than between AIDS and HTLV-III/LAV. But a funny thing happened: The CDC hasn't bothered to do so. Why doesn't the CDC even mention this, especially since poppers were the rage with the CDC several years ago, in its admonitions to "risk groups?" Because information on drugs other than heroin isn't elicited by researchers; even physicians treating patients with AIDS aren't generally aware of recreational drug use -- past or present. "The doctor who says he never sees people who use drugs," Caceres surmises, "or thinks such use is totally insignificant...well, it just can't be so, certainly not in D.C. The reason the physicians don't know is because they don't ask, and few patients volunteer such information. Some of my colleagues have said, 'My God, I've never asked!' Would you tell a doctor who doesn't approve of alcohol use or of anal sex that you use drugs? I don't think so."

Caceres has seen several AIDS patients who were hospitalized for pneumocystis carinii pneumonia immediately after using the drug PCP.

"This kind of information doesn't necessarily come out easily; you have to know the doctor won't give you the bad eye when you admit to drug use."

Obviously, drugs such as amphetamines are bad for anyone in a number of ways -- loss of appetite, sleep, and judgment for starters. And we know that uppers, as well as cocaine, play funny physiological tricks on brain tissues. But what about old standbys like grass and acid? Aside from their hallucinogenic qualities, what might they do to the immune system? Unfortunately, for all the money spent futilely on trying to enforce laws pertaining to these drugs, there's been little effort to ascertain exactly what they do in the body in the short or long run. There are suggestions from the Drug Institute that marijuana suppresses immune function, but so far, only laboratory animals have been tested. Dr. Harold Ginzberg of the National Institute of Drug Abuse says they're poised and ready to go ahead with drug evaluations, but are still "waiting for the money." So at present, incidental reports of drug use tied into actual cases of AIDS such as those Caceres has seen are the only "evidence" to go on.

It does seem that, with the massive collection of data by the Centers for Disease Control, recreational drug use would have been factored into defining who is and who is not at risk for developing AIDS. Clearly, not everyone is. But Caceres is disturbed by the current Public Health Service approach to the disease. "I've been trying to force them to think about this for several years; it's a terrible thing to have to try to influence a governmental agency. My information officer would never have cleared some of the material they've published. The statistician would have gone wild if I'd said some of the things that are being said. I looked at that [skewing of drug use data] and said, 'This doesn't make any sense. This can't be the CDC I knew before.' It's not the collection of data that's wrong -- it has been remarkably good. The problem is in interpreting." Caceres maintains that the CDC has "refused to collect the data. We know also that there are articles the CDC hasn't cleared for publication, and those in reference to oral drugs have been held for two years at least. Now, that's not cricket." To say the least, oral drug use may well further the risk for developing AIDS, and withholding such data also helps to convey the implication that all gay men are equally at risk. Caceres doesn't think this is the case, and others are increasingly concerned with co-factors that catalyze the development of AIDS.

KS AND POPPERS

A major gay bookstore in Washington still sells poppers. Amazing. They haven't been reading their own literature. Yet the CDC dismissed the evidence of a large study that showed a relationship between poppers and KS. This study recently has been reevaluated by one of the original investigators, Dr. Harvey Haverkos, who quietly published a reversal of previous findings in the journal, Sexually Transmitted Disease, this year. "KS doesn't fit in AIDS without a better explanation than we have so far," Caceres told me. "The fact that it's occurring only in gay men, and that some KS occurs in immune-competent men, means there has to be a

WRITE YOUR LEGISLATORS

NGLTF Blasts Justice Department

In the wake of the June 30th decision by the United States Supreme Court in *Bowers vs. Hardwick*, a group of concerned members of our community met at the scheduled meeting of the GLSO Speaker's Bureau on Wednesday, July 16th to discuss the decision and options for voicing our opposition to it.

It was suggested that the best weapon we have at hand is the power of the written word and that power should be used in a letter-writing campaign to our elected officials on a national and state level.

It is important to remember that, in many cases, a written letter can change a legislator's mind. It is also important that our message be presented as effectively as possible. Here is an idea for a letter:

Dear Senator Ford (McConnell):

I am deeply disturbed by the Supreme Court's recent decision which regulates consensual sexual relationships among adults in the privacy of their own bedrooms.

This most personal of decisions is no business of the government and is a waste of our tax dollars in enforcement and prosecution.

Since the type of sexual practice at question here is engaged in by many Americans and, therefore, affects all of our lives, I urge you to speak out against these laws and sponsor legislation to bring these laws to an end.

I appreciate your kind assistance.

Sincerely,

It is important that your name and address are clearly visible on both the envelope and the letter. Since the letter makes a point of being sexual orientation-neutral, signing your name to this letter does not indicate your own sexual orientation.

Here are the names and addresses of our Senators and Representative:

Hon. Sen. Wendell H. Ford
173A Russell Senate Office Bldg.
Washington, DC 20510

Hon. Sen. Mitch McConnell, Jr.
120 Russell Senate Office Bldg.
Washington, DC 20510

Hon. Rep. Larry J. Hopkins
331 Cannons House Office Bldg.
Washington, DC 20515

As with everything else, addressing correspondence to legislators has its own particular etiquette. Although a lot of people don't know the correct greeting for a Senator, you can be sure the Senator does. And being 'proper' can only gain you points. Any legislator is called "Honorable" on the envelope and inside addresses. The salutation, though, treats representatives and senators differently (either state or U.S.). Representatives are addressed as "Mr.," "Ms.," or "Mrs.," while senators are called "Senator."

REMEMBER: You are the boss. You vote these people into office and pay their salaries once they're in. So, write tactfully.

The National Gay and Lesbian Task Force denounced as "bad law and bad public health policy" the U.S. Justice Department's ruling that limits federal protection against discrimination based on AIDS.

In a highly controversial legal opinion released on June 23rd, the Justice Department declared that, while AIDS is a disability, federal employment protections against discrimination based on disability could be waived if an employer was concerned about the spread of AIDS in the workplace. The U.S. Public Health Service has stated repeatedly that AIDS is not transmitted through casual contact, such as in the workplace. The decision affects challenges to AIDS discrimination under Section 504 of the 1973 Rehabilitation Act and covers federal employees and those work at institutions receiving federal funds.

Declared Jeffrey Levi, NGLTF Executive Director, "this ruling perpetuates false and irrational concerns about the casual contagion of AIDS—placing the views of unnamed non-experts above the scientifically based conclusions of the Public Health Service. The entire ruling is predicated on the notion that AIDS can be casually transmitted, and thus should be rejected out of hand."

Levi further warned that the Justice Department offered no protections at all to those who have ARC or HTLV-III infection. "The federal government is saying, in effect, that people who are in a risk group or are HTLV-III positive have no federal civil rights protections" even though numerous state laws forbidding discrimination based on disability or handicap have been interpreted to protect all those perceived to be disabled. "The Justice Department seems so frightened of extending protections because they might indirectly protect gays, that it has ignored both the letter and spirit of the law," Levi said.



"One of our worst fears associated with testing," Levi continued, "has come true: that an agency of government would say that employers have the right to fire someone based solely on a positive antibody test. This underscores the need for absolute confidentiality in any antibody testing program, and that means only anonymous testing until legal guarantees are clarified."

NGLTF announced that it would be pressuring the Department of Health and Human Services to challenge the Justice Department's interpretation of the law and their statements on transmission of AIDS. congressional oversight on this issue will also be pursued.

"We fully expect the gay/lesbian legal organizations to challenge this interpretation in the courts," Levi said. In the meantime, however, "state and local anti-discrimination laws are still in effect and are being successfully used to combat AIDS-related discrimination. All this ruling does is close off an additional avenue to fight discrimination—it is not the end of the battle at all. Local organizations should make sure that their human rights agencies hold to the correct interpretation that AIDS is indeed a disability and those at risk to AIDS are also protected from discrimination."

LETTERS TO THE EDITOR

I was, like most Americans, excited about the Liberty Celebration, the 4th of July and above all my week of vacation. These were all happening during the same, first week of July. I wanted to go to New York and be in the middle of all the excitement, however I decided on Washington DC instead. This also happen to be the same week that the Supreme Court decided to make it's decision on the Sodomy laws.

This decision was very disheartening. It was so ironic to come at such a time when the country was celebrating the nations "Freedom For All" and we had been celebrating our PRIDE. It felt as though the walls of freedom had just fallen and crushed our PRIDE!

In light of this I would like to be observant and sensitive to the things that are happening around us, (it seems as though the Victorian age is coming back to haunt us) as you read and reflect on the following paragraphs.

The following is a statement from a demonstration in Washington DC, on the Supreme Court steps on June 30, 1986:

We are gathered here today in protest against the decision issued in the case of **Hardwick vs. Georgia**. We are outraged at this judicial assault against the sexual freedom of all consenting adults in the United States.

This decision is a vicious and fascist act that encourages the persecution of all lesbian and gay male Americans. As the AIDs crisis continues to torment our community, this act seems all the more merciless. For the lesbian and gay male youth and adults just, or not yet, coming-out, we feel particularly pained for their self-esteem in light of this hateful act. It's effects will be felt in every facet of our daily lives, but we intend to continue fighting with greater vigor for the freedom we know in our hearts and minds we are entitled to.

The fact that Justice White chose to issue this decision one day after millions of lesbian and gay men across the nation participated in Gay Pride festivals marking the 17th anniversary of the Stonewall riot reveals the reactionary political nature of it. As lesbian and gay male Americans, we are particularly incensed and shamed at this infringement on our rights being committed only four days before our nation will celebrate the 210th anniversary of the Declaration of Independence, and the centennial of the dedication of the Statue of Liberty. Such an action makes a mockery of these celebrations to us, and we are deeply shamed that the Court has chosen to decide, in effect, that some Americans are more equal than others.

All of us, including your local and national organizations, need your help. Your actions, time and money are extremely important as we strive to keep what rights we have achieved and to fight for those we have not. Be generous the next time you are asked to help, and above all be PROUD!!

Sincerely,

J.D. Wiechers



This month, on August 6th and 20th, we wish to announce that the **GLSO GAYLINE** will be operated by a lesbian volunteer. While we do not wish to stress this issue, we do want to let area lesbians know that there will be regularly scheduled nights where women will be able to talk to a woman. This is not meant to discourage men from calling on these nights either. The women volunteers are well-trained and quite capable of helping anyone who calls.

WHAT THE 'L'?

Those of you who are observant may have noticed something different about the name of our organization. **GSO** has now become **GLSO**, where the extra 'L' has been included as a signal of our on-going commitment to serve the needs of all the members of our community.

The new Board of Directors, five of whom were elected in June (three of whom are gay/lesbian women committed to guiding **GLSO** in targeting the needs of gay/lesbian women in the central Kentucky area), voted the name change at their first Board meeting in June. With the temporary dormancy of Amber Moon Productions, we hope that more women will get involved with **GLSO**. If you wish to contact Shirley, Kris, or Karen you may do so by either attending announced **GLSO** events or by calling the **GLSO GAYLINE** (231-0335) during the scheduled hours. You can leave your name and number with the volunteer taking the call, and they will contact you.

NGLTF CREATES PRIVACY PROJECT IN RESPONSE TO HARDWICK DECISION

The National Gay and Lesbian Task Force has announced plans to initiate a Privacy Project whose goal would be to help overturn the (consensual) sodomy statutes still on the books in 24 states and the District of Columbia.

Said NGLTF Executive Director Jeff Levi, "This is the necessary political response to the recent Supreme Court decision upholding the constitutionality of state sodomy laws. The Supreme Court's ruling does not prevent us from taking the battle to every state legislature where sodomy laws are still on the books. The goal of this project is to provide assistance to those state groups that want to take up the challenge the Supreme Court has thrown down."

Levi pointed out that, as disappointing and angering as the Supreme Court's decision may be, "we got sodomy off the books in more than half the states without the federal courts, we can do it in the rest of the states as well if we are organized."

The purpose of the NGLTF Privacy Project would be four-fold:

- (1) to work with state and local gay/lesbian organizations to promote efforts at repeal of existing sodomy statutes by state legislatures,
- (2) to work with state and local gay/lesbian organizations to fight efforts to re-criminalize sodomy by state legislatures,
- (3) to work with other national organizations--both gay and non-gay--to build coalitions to fight for sexual privacy rights at the state and national levels,
- (4) to work with and coordinate efforts with gay and non-gay legal organizations in their efforts to overturn sodomy laws in state courts.

With the Supreme Court decision, two avenues for challenging sodomy laws remain: the state legislatures and the state courts. "We are confident that the legal organizations that have been at the forefront of the court challenges to sodomy laws will continue their work," Levi said. "Our goal is to add the political component to this strategy. We intend to work very closely with the legal groups in this effort."

Contributions in support of the NGLTF Privacy Project can be sent to NGLTF at 1517 U Street, NW, Washington, DC 20009.

common factor. Poppers seems the most likely."

After Caceres made these remarks, the New England Journal of Medicine published a letter from Usha Mathur-Wagh and others at Mount Sinia School of Medicine. They had followed 42 men for four and one half years and found a compelling association between heavy use of poppers and the development of KS. Using this drug is obviously foolish.

NEEDLES AND NUMBERS

"Even today," Caceres says, "try asking a CDC-appointed or -paid individual, 'What do you mean by drug abuse?' Drug abuse means abusing any drugs. 'No,' they reply, 'the only thing we're allowed to put in there is IV-use.' Fine. So I say, 'Why not call it 'IV-drug abuse,' so we know what you're talking about?'"

This raises a number of questionabe points vis-a-vis categorizing drug use in AIDS. We know, for instance, that 10% of gay men with AIDS have been IV-drug users. But they are reported as "homosexual," in a hierarchy framed by the CDC which excludes gays who shoot up (they go directly into the "homosexual" category), and which, when correctly designated, brings IV-drug users with AIDS to over a quarter of all cases. According to Ginzberg, this has resulted in IV-drug users being "underrepresented by 50%," and has caused serious misinterpretation of who is a risk.

A recent letter in the British medical journal *The Lancet* took the CDC figures and demonstrated that only the large numbers of gay men in the United States produced so many AIDS cases in this population. Compared with hemophiliacs, who have a risk factor of 4.2%, and IV-drug abusers (not including gay IV-drug abusers) with a factor of 4.6%, the risk for gay men to develop AIDS is only 1.0%, which hardly justifies the prevalent description of this as a "gay" disease. Rather, when all drug use is factored into the American caseload, AIDS would better be designated a drug-related illness.

THOUGHTS ON TRANSMISSION

Caceres's many years of using numbers to decode diseases has also led him to question the accuracy of the CDC regarding numbers of sex partners, as well as male/female transmission, and vice versa. "I think researchers get misled by the male who says he had 1,000 partners last year. That doesn't mean what it sounds like, because they immediately think he's experienced 1,000 orgasms or had 1,000 in him during that period of time.

"You have to look rationally at what a gay male means when he says he's had 1,000 contacts. He doesn't mean 1,000 orgasms, he means that in an evening he had contact with several others and that they kissed, hugged, had one or two orgasms -- though he will tell you he had 10 or 20 sex contacts within this period. When you ask a heterosexual female about sexual activity, she'll tell you she had contact with one male, that she didn't count the number of times they hugged or petted, or usually, even the number of times they had orgasms. So you have an interesting time translating what the gay male is talking about compared to the heterosexual. You have to change

the numbers, to quantify differently," Caceres maintains.

Caceres also thinks that there is little likelihood of more than an infinitesimal number of non-IV-drug-using women getting AIDS in this country. His reasoning: "Having sex for four hours is having sex for four hours, regardless of the numbers. When you come down to multiple partners, the woman who has sex with one AIDS patient over a four-hour period should be more susceptible to AIDS than the male who has one encounter with a partner with the virus and 20 partners who don't have it."

Regarding the really confusing mixed signals that the CDC has generated and withdrawn over the years, Caceres questions, "Why does the CDC say there are only 118 women who've contracted AIDS from what must be around 2,000 to 3,000 infected males who have been having sex with females and the women haven't come down with the disease. Either sperm is very inefficient, or the AIDS heterosexual patient is having sex with non-immune-suppressed, non-drug-using women. All of those issues have to be looked into," Caceres insists. They have not been, to his knowledge.

He also questions female-to-male transmission in America: "Where's the incidence of male contact with infected prostitutes in New York City? Why have 3,000 males given AIDS to only 118 females? You can't have a situation in which you say statistically it's a sexually transmitted disease in males and not in females with three orifices, one of which houses the cervix, a wonderful place for any virus to grow." He also mentioned the number of women who enjoy anal intercourse. "They may not be a large percentage of the female population, but in sheer numbers, there are a multitude. So you have to say transmission through sperm is not proved, and if sperm is the transmitting agent, it would only be possible in a immune-suppressed person."

Shaking his head wearily, Caceres concludes, "Aristotle would turn over in his grave. The CDC has effectively created a situation in which people are going to lie worldwide, and cheat and dissemble, because of the coloration they've given AIDS. They've impeded research and epidemiology. We knew two years ago that there would be a stabilization of things like KS and PC-pneumonia. We knew that KS, and AIDS in general, would plateau. We knew the rate of rise would decrease. And we knew, moreover, that in the main these shifts would be unrelated to any measures to change sexual habits -- and they refused to clear that publication."

The slowing of the rate of increase of AIDS seems important both as part of the natural history of the illness and as a guide for health-services planning. Even sensible people think AIDS will double each year until the entire world is infected. Not so, says Caceres, and he cites numbers to prove the point. "Between 1980 and 1981, the rate of increase was 449%. This has steadily gone down, until, in the first half of 1985, the rate is 50%." The numbers of cases continue to rise because of the long latency period and those who are "silent carriers," but

this falling off in the rate of increase suggests that many susceptibles are already dead or ill. The rest of us, "if we can stay off immune-suppressive substances," may be home free.

GSO ELECTS NEW BOARD MEMBERS !!
by Steve Abrams

Well, folks, on Monday, June 2nd, the Lexington Gay Services Organization elected an entirely new set of officers and filled a Board Member-at-Large position.

I was elected President and would like to stress my desire to see greater co-operation among the various, diverse elements of the gay and lesbian community in central Kentucky. I realize that this is a difficult process, but I hope that we can all "bury" our collective hatchets at least until such a time as our civil rights, as gay and lesbian people, are guaranteed.

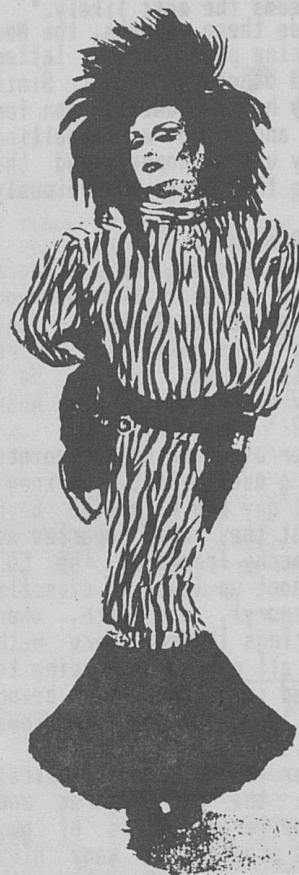
I also know that many people have negative views of GSO based on inaccurate, out-of-date, and erroneous information. We ARE trying to serve the entire community. If anyone has a problem with GSO activities or policies, I would strongly urge them to tell us about them. We are not mind readers. We cannot effectively meet anyone's needs unless we know what those needs are. It is the intention of both myself and our new Vice-President, Karen M., to set up office hours at the GSO office (431 S. Broadway, Suite 322) when one, or both, of us will be present to talk to anyone. These times will be announced in the August issue of the GSO Newsletter.

Karen, along with new Secretary Kristen Elliott and Member-at-Large Shirley Lange, have agreed to help GSO target the needs of lesbians and gay women in our activities and support services. I strongly urge the women of our community to assist them as much as possible. We particularly need increased participation, by women, in the production of this Newsletter and our Phonenumber.

Dave R. has agreed to the formidable task of keeping our books in order as our new Treasurer. In addition, we have Edwin H., Barry G., and Steve B. continuing in the second years of their terms as Members-at-Large. Edwin will continue directing the operation of the Phonenumber, and Barry is looking forward to increasing participation in the Gay and Lesbian Parenting Support Group.

We still have several positions open to anyone in the general community who is interested in getting involved. We need a Forum Co-Ordinator, Director of Community Education, Newsletter Editor, Fund-Raising Director, and Social Director.

In closing, I want thank the outgoing Board members (Jim W., John G., Marshall R., and Bill M.) for their superb efforts on behalf of the gay and lesbian community for the past two years. I only hope that GSO can continue to grow in both size and scope as it has done under their guidance.



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Closet Ball

GSO NEEDS YOU!

by Shirley Lange, Kristen Elliott, and Karen M.

As newly elected members of the GSO Board, we would like to express our appreciation to the membership for their support and to the outgoing Board for their hard work and commitment.

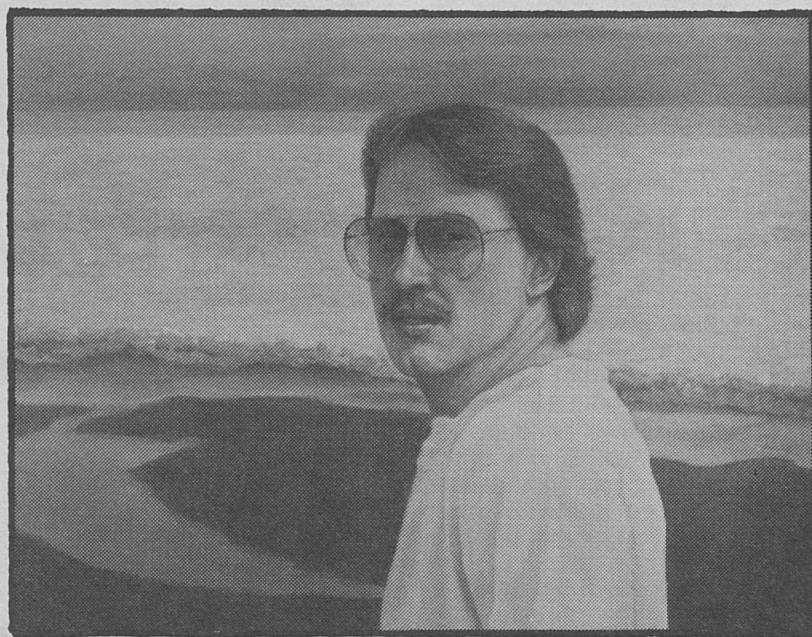
We are particularly pleased by the commitment of GSO to involve lesbians, as well as gay men, as evidenced by the recent election. We would like to encourage other women in the community to join with us and to participate in social/organizational activities of GSO. Some of these include volleyball, cards games, potlucks, monthly program meetings, Phonenumber, and Speaker's Bureau meetings. (See schedule of events and/or call the phonenumber for details)

There are also opportunities for creative input through letters to the editor, newsletter articles, and suggestions for new GSO-sponsored activities.

We hope that through ALL of our efforts, GSO can continue to be responsive to the needs of the gay/lesbian community.

Brett Johnson
GALLERY

144 Harrison Avenue Lexington, Kentucky 40507
(by appointment) 606-254-2207



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LEXINGTON NOW HAS ANONYMOUS HTLV-III TESTING

June 20, 1986-Release to GSO Newsletter.

Anonymous testing for HTLV-III antibodies became a reality at the Lexington-Fayette County Health Department in mid-June. Public Health officials stress that:

- (1) AIDS is preventable.
- (2) Precautions must be practiced 100% of the time to effectively reduce risks.
- (3) Knowing the precautions, but not adhering to them, does not reduce risks.
- (4) It is probable that those who seek knowledge of their HTLV-III status are collectively more prone to be motivated to the point of consistently adhering to the risks reductions.

The proposal for anonymous testing at the Health Department was made on April 23, 1986. On May 30, 1986 the National Gay and Lesbian Task Force released their Consensus Statement on HTLV-III Antibody Testing. This consensus calls for anonymous testing with an informed consent form, and is therefore in conformance with the Health Department's procedure.

Here are some important points on the new testing procedure at the Lexington-Fayette County Health Department:

- (1) Counseling and testing is done on an appointment basis only. Call 252-2371, extension 245, or 255-6152 to make an appointment.
- (2) Testing will not be done without counseling.
- (3) The decision of being tested is always voluntary (making an appointment for counseling and receiving counseling does not make testing obligatory).
- (4) No medical record or STD record is generated or referred to.
- (5) Testing will only be done with an informed consent form, as requested by the National Gay and Lesbian Task Force. This consent form will never include test numbers or test results.

(6) Testing is done by number only. Testing includes the following: (a) repeated ELISA (anti-HTLV-III). (b) HBsAg (hepatitis). (c) RPR (syphilis).

(7) All of these tests are free of charge, as are the counseling sessions.

(8) Results return in approximately one week. The results of your test will not be mailed to you, or given to you over the phone under any circumstances. An appointment for receiving your results is made at the time of testing. You are then given a copy of your test number. You must bring this number (the original, NOT a copy) with you to receive your results.

(9) Results are never given without a second consultation.

(10) Appropriate referral information is made available to the patient (list of physicians agreeing to see HTLV-III antibody positive patients, numbers to call for support group information, etc.).

For more information or to make an appointment, call 252-2371, ext. 245 or 255-6152.

Greg Lee, AIDS Coordinator (LFCHD)

LESBIAN HELP NEEDED

Lynn Scott and Pam White are seeking essays for an anthology relating to the lesbian coupling experience. We invite lesbians to submit essays from personal experience about the unique aspects of their love relationship. Please query with SASE if you are interested and we will send our letter explaining the project. Submit queries to: Lynn Scott and Pam White, Box 56, Millers Falls, Maryland 01349.

UPTOWN RECORDS

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ASK AUNT MARY

Dear Aunt Mary: Three years ago I told my family that I was gay. We've always been close, see a lot of each other, and I hoped this would help in maintaining a good relationship. The results have been so confusing! Briefly put, it went sort of like this: "Oh, well.....I guess maybe we aren't entirely surprised. We still love you and just want you to be happy, but why did you have to tell us? We would rather not have to know. Please don't tell anyone else (as in Aunts, Uncles, Cousins, etc.). By the way, do you know if there is anything good on TV tonight?"

We've never discussed it again. No questions about the years of hiding who I was or about the anguish of deciding to come out. I've gone on to build a new, full and very satisfying life with lots of worthwhile community involvement, new beliefs and many really wonderful and interesting friends. My family is totally unaware of any of this, of course, since we don't talk about my life. When I attempt to tell them about some particular event or person in my life that I find interesting or exciting they listen politely and quickly change the subject as soon as I stop to take a breath!

I love these people, but can't help but wonder how important I can be to them when they never express any interest in my daily life. Several months ago when a love interest I had high hopes for didn't work out, I was a basket case. My friends were wonderful and I will always be grateful for their understanding and support, but I really would have liked to have been able to turn to my family also. No good, they were barely aware that I didn't see 'Sam' anymore, and certainly weren't going to ask why or how it was affecting me.

In many other ways they are really wonderful people. They would do anything in the world for me and show me love in so very many ways, but they don't seem to understand how difficult it is to leave half of myself behind when I visit them. I've tried to explain to them how frustrating it is becoming trying to maintain our relationship. No results. It makes me want to scream, but I don't want to perpetuate the myth of the temperamental fagot. -- Excluded

Dear Excluded: Most people fear the unknown, and to your family your lifestyle is unknown in a big way. Please try to understand that their apparent lack of interest in your life has nothing to do with lack of love or concern, but has everything to do with fear. The best way to overcome fear of the unknown is by gentle exposure in very small doses. An occasional newspaper or magazine article you find interesting or topical might be a good way to start.

Your parents probably don't know any other gay persons, so perhaps you might want to stop by unexpectedly with a (supportive and understanding)

friend for a few minutes while out running errands on a Saturday morning. Make a point of mentioning your friends occasionally and pointing out something in their life you find interesting. Your family might respond better at first if you try to tell them about your more conservative friends (the one who is a dentist versus the one who is an interior decorator), but it is important that eventually they know about all of your friends so they can appreciate the wide variety of people who make up the background of this lifestyle they have found so frightening in the past.

The trick here is to expose your family to your life, interests and friends as naturally and subtly as you possible can. Never make it appear that they are being set up! But you must force the issue, they probably will not take the initiative themselves, so stop waiting. I would also highly recommend the book Now That You Know for both you and your parents (it is available at Special Media). With patience on your part, and a little persistence, you may be pleasantly surprised.

Now, least I seem unrealistically optimistic, it is only fair to warn you that what you want may be unattainable. Your family sounds loving and accepting enough that I think your effort will be well rewarded. However, you can only do so much, and if, over a period of say the next year, you feel that you a still were you started, you may simply have to face the fact that they may be either unwilling or unable to expand their awareness enough to make room for your lifestyle in their value system.

If that proves to be the case you must be prepared to be thankful for the the friends and life you have built for yourself and accept that you family will only be a minor part of it. Good luck, now get out there and give it your best shot! -- Aunt Mary

If you would like to write to Aunt Mary, send your letter to: Aunt Mary, ZGSO, Post Office Box 11471, Lexington, Kentucky 40575. If you would like a personal reply, please include a self addressed, stamped envelope. All names are strictly confidential.

(216) 642-2287

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personal introductions

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JULY


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JULY 1986

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EVENTS CALENDER

- WED 2 GAY AND LESBIAN AA, 8:00pm, St. Joseph Office Park, Room 120; GAYLINE (231-0335), 8:00pm - 11:00pm
- THU 3 GAYLINE, (231-0335), 8:00pm - 11:00pm.
- FRI 4 GAY AND LESBIAN AA, 8:00pm, Comprehensive Care Center; GAYLINE (231-0335), 8:00pm - 11:00pm.
- SUN 6 GSO POTLUCK, 1:30pm, at Woodland Park, for more information call (606) 278-0048; GAY AND LESBIAN AA, 4:00pm, GSO office, 431 S. Broadway, Suite 322;
- MON 7 GSO FORUM, 8:00pm - Board Report and Community Input. 8:30pm - Program, topic is Lesbian and Gay History. Free food and drink. GSO office, 431 S. Broadway, Suite 322. 
- WED 9 DIGNITY BOARD MEETING, 6:30pm, and OUTDOOR LITURGY, This month's Liturgy includes a desert potluck. Call 299-0352 for details; GAY AND LESBIAN AA, 8:00pm, St. Joseph Office Park, Room 120; GAYLINE (231-0335), 8:00pm - 11:00pm
- THU 10 DIGNITY RAP SESSION, 7:30pm at Keith's, for more information call 273-8056; GAYLINE, (231-0335), 8:00pm - 11:00pm.
- FRI 11 VOLLEYBALL/POTLUCK, 6:30pm, Jacobson Park, Shelter #5; GAY AND LESBIAN AA, 8:00pm, Comprehensive Care Center; GAYLINE (231-0335), 8:00pm - 11:00pm.
- SUN 13 GAY AND LESBIAN AA, 4:00pm, GSO office, 431 S. Broadway, Suite 322; GSO OFFICE HOURS, 2:00pm - 5:00pm, 231-0335.
- WED 16 SPEAKER'S BUREAU MEETING, 6:30pm, GSO office; GAYLINE (231-0335), 8:00pm - 11:00pm; GAY AND LESBIAN AA, 8:00pm, St. Joseph Office Park, Room 120.
- THU 17 GAYLINE (231-0335), 8:00pm - 11:00pm.
- FRI 18 GAYLINE (231-0335), 8:00pm - 11:00pm; GAY AND LESBIAN AA, 8:00pm, Comprehensive Care Center; CARDS AND GAMES, 7:00pm.
- SUN 20 LESBIAN POTLUCK BRUNCH, 2:00pm, at Karen M.'s, for more information call 259-3292; GAY AND LESBIAN AA, 4:00pm, GSO office

- MON 21 PRIDE WEEK MEETING, 6:30pm, GSO office. 
- WED 23 GAY PARENTING SUPPORT GROUP, 7:00pm, topic this month is "Coming Out to Your Children", GSO office; GAY AND LESBIAN AA, 8:00pm, St. Joseph Office Park, Room 120; GAYLINE (231-0335), 8:00pm - 11:00pm.
- THU 24 DIGNITY PROGRAM MEETING, for more information call 231-8911 or 273-8056; GAYLINE (231-0335) 8:00pm - 11:00pm.
- FRI 25 VOLLEYBALL/POTLUCK, 6:30pm, Jacobson Park, Shelter #5; GAY AND LESBIAN AA, 8:00pm, Comprehensive Care Center; GAYLINE (231-0335) 8:00pm - 11:00pm.
- SUN 27 GAY AND LESBIAN AA, 4:00pm, GSO office; GSO OFFICE HOURS, 2:00pm - 5:00pm.
- MON 28 GSO BOARD MEETING, 7:00pm, GSO office.
- TUE 29 DIGNITY PROGRAM MEETING AND POTLUCK, 7:30pm, at Jim and John's, call 299-0352 or 254-9812.
- WED 30 GAY AND LESBIAN AA, 8:00pm, St. Joseph Office Park, Room 120; GAYLINE (231-0335), 8:00pm - 11:00pm

CLASSIFIED

GWM, 38, warm, caring, loving, intelligent, sane, clean. Seeks friendship and/or penpal with GWM. Looks unimportant, heart and brain are. Like movies, music, dining out, conversation, quite times. Write: Bob, P.O. Box 885, Frankfort, Ky. 40601.

Roommate wanted to share a 2 bedroom apt. with young professional male, in Frankfort, near the capitol building. Call (502) 223-8905 after 6p.m.

New to the State of Kentucky. Would like to meet individuals interested in weekend hiking and camping trips. Call (502) 223-8905 after 6p.m.

GAY PARENTING

The next meeting of the Gay Parenting Support Group will be on Wednesday, July 23rd, 7 p.m. at the GSO office. Our discussion will include, but will not be limited to, "Coming Out to Your Children." Please join us, your input is essential.