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November 26, 2015
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An Open Letter To Dana
Nessel From Michigan's
Transgender Community

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Moment You Probably
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Joe Jonas Talks Gay
Clubs And Making
Music

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**Please see Brief Summary of
Patient Information with important
warnings on the following pages.**

Brief Summary of Patient Information about GENVOYA

GENVOYA (jen-VOY-uh) (elvitegravir, cobicistat, emtricitabine, and tenofovir alafenamide) tablets

Important: Ask your healthcare provider or pharmacist about medicines that should not be taken with GENVOYA.

There may be new information about GENVOYA. This information is only a summary and does not take the place of talking with your healthcare provider about your medical condition or treatment.

What is the most important information I should know about GENVOYA?

GENVOYA can cause serious side effects, including:

- **Build-up of lactic acid in your blood (lactic acidosis).**

Lactic acidosis may happen in some people who take GENVOYA. Lactic acidosis is a serious medical emergency that can lead to death. Lactic acidosis can be hard to identify early, because the symptoms could seem like symptoms of other health problems. **Call your healthcare provider right away if you get any of the following symptoms, which could be signs of lactic acidosis:**

- feel very weak or tired
- have unusual (not normal) muscle pain
- have trouble breathing
- have stomach pain with nausea or vomiting
- feel cold, especially in your arms and legs
- feel dizzy or lightheaded
- have a fast or irregular heartbeat

- **Severe liver problems.** Severe liver problems may happen in people who take GENVOYA. In some cases, these liver problems can lead to death. Your liver may become large and you may develop fat in your liver.

Call your healthcare provider right away if you get any of the following symptoms of liver problems:

- your skin or the white part of your eyes turns yellow (jaundice)
- dark “tea-colored” urine
- light-colored bowel movements (stools)
- loss of appetite for several days or longer
- nausea
- stomach pain

- **You may be more likely to get lactic acidosis or severe liver problems if you are female, very overweight (obese), or have been taking GENVOYA for a long time.**

- **Worsening of Hepatitis B infection.** GENVOYA is not for use to treat chronic hepatitis B virus (HBV). If you have HBV infection and take GENVOYA, your HBV may get worse (flare-up) if you stop taking GENVOYA. A “flare-up” is when your HBV infection suddenly returns in a worse way than before.

- Do not run out of GENVOYA. Refill your prescription or talk to your healthcare provider before your GENVOYA is all gone.
- Do not stop taking GENVOYA without first talking to your healthcare provider.
- If you stop taking GENVOYA, your healthcare provider will need to check your health often and do blood tests regularly for several months to check your HBV infection. Tell your healthcare provider about any new or unusual symptoms you may have after you stop taking GENVOYA.

What is GENVOYA?

GENVOYA is a prescription medicine that is used without other HIV-1 medicines to treat HIV-1 in people 12 years of age and older:

- who have not received HIV-1 medicines in the past **or**
- to replace their current HIV-1 medicines in people who have been on the same HIV-1 medicines for at least 6 months, have an amount of HIV-1 in their blood (“viral load”) that is less than 50 copies/mL, and have never failed past HIV-1 treatment

HIV-1 is the virus that causes AIDS.

GENVOYA contains the prescription medicines elvitegravir (VITEKTA[®]), cobicistat (TYBOST[®]), emtricitabine (EMTRIVA[®]) and tenofovir alafenamide.

It is not known if GENVOYA is safe and effective in children under 12 years of age.

When used to treat HIV-1 infection, GENVOYA may:

- Reduce the amount of HIV-1 in your blood. This is called “viral load”.
- Increase the number of CD4+ (T) cells in your blood that help fight off other infections.

Reducing the amount of HIV-1 and increasing the CD4+ (T) cells in your blood may help improve your immune system. This may reduce your risk of death or getting infections that can happen when your immune system is weak (opportunistic infections).

GENVOYA does not cure HIV-1 infection or AIDS. You must stay on continuous HIV-1 therapy to control HIV-1 infection and decrease HIV-related illnesses.

Avoid doing things that can spread HIV-1 infection to others:

- Do not share or re-use needles or other injection equipment.
- Do not share personal items that can have blood or body fluids on them, like toothbrushes and razor blades.
- Do not have any kind of sex without protection. Always practice safer sex by using a latex or polyurethane condom to lower the chance of sexual contact with semen, vaginal secretions, or blood.

Ask your healthcare provider if you have any questions about how to prevent passing HIV-1 to other people.

Who should not take GENVOYA?

Do not take GENVOYA if you also take a medicine that contains:

- alfuzosin hydrochloride (Uroxatral[®])
- carbamazepine (Carbatrol[®], Epitol[®], Equetro[®], Tegretol[®], Tegretol-XR[®], Teril[®])
- cisapride (Propulsid[®], Propulsid Quicksolv[®])
- ergot-containing medicines, including: dihydroergotamine mesylate (D.H.E. 45[®], Migranal[®]), ergotamine tartrate (Cafergot[®], Migergot[®], Ergostat[®], Medihaler Ergotamine[®], Wigraine[®], Wigrettes[®]), and methylergonovine maleate (Ergotrate[®], Methergine[®])
- lovastatin (Advicor[®], Altoprev[®], Mevacor[®])
- midazolam, when taken by mouth
- phenobarbital (Luminal[®])
- phenytoin (Dilantin[®], Phenytek[®])
- pimozide (Orap[®])
- rifampin (Rifadin[®], Rifamate[®], Rifater[®], Rimactane[®])
- sildenafil (Revatio[®]), when used for treating lung problems
- simvastatin (Simcor[®], Vytorin[®], Zocor[®])
- triazolam (Halcion[®])
- the herb St. John’s wort or a product that contains St. John’s wort

What should I tell my healthcare provider before taking GENVOYA?

Before taking GENVOYA, tell your healthcare provider if you:

- have liver problems including hepatitis B infection
- have kidney or bone problems
- have any other medical conditions
- are pregnant or plan to become pregnant. It is not known if GENVOYA can harm your unborn baby. Tell your healthcare provider if you become pregnant while taking GENVOYA.

Pregnancy registry: there is a pregnancy registry for women who take HIV-1 medicines during pregnancy. The purpose of this registry is to collect information about the health of you and your baby. Talk with your healthcare provider about how you can take part in this registry.

- are breastfeeding or plan to breastfeed. Do not breastfeed if you take GENVOYA.
 - You should not breastfeed if you have HIV-1 because of the risk of passing HIV-1 to your baby.
 - At least one of the medicines in GENVOYA can pass to your baby in your breast milk. It is not known if the other medicines in GENVOYA can pass into your breast milk.
 - Talk with your healthcare provider about the best way to feed your baby.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Other medicines may affect how GENVOYA works.

Some medicines may interact with GENVOYA. **Keep a list of your medicines and show it to your healthcare provider and pharmacist when you get a new medicine.**

- You can ask your healthcare provider or pharmacist for a list of medicines that interact with GENVOYA.
- Do not start a new medicine without telling your healthcare provider. Your healthcare provider can tell you if it is safe to take GENVOYA with other medicines.

How should I take GENVOYA?

- Take GENVOYA exactly as your healthcare provider tells you to take it. GENVOYA is taken by itself (not with other HIV-1 medicines) to treat HIV-1 infection.
- GENVOYA is usually taken 1 time each day.
- Take GENVOYA with food.
- If you need to take a medicine for indigestion (antacid) that contains aluminum and magnesium hydroxide or calcium carbonate during treatment with GENVOYA, take it at least 2 hours before or after you take GENVOYA.
- Do not change your dose or stop taking GENVOYA without first talking with your healthcare provider. Stay under a healthcare provider's care when taking GENVOYA.
- Do not miss a dose of GENVOYA.
- If you take too much GENVOYA, call your healthcare provider or go to the nearest hospital emergency room right away.
- When your GENVOYA supply starts to run low, get more from your healthcare provider or pharmacy. This is very important because the amount of virus in your blood may increase if the medicine is stopped for even a short time. The virus may develop resistance to GENVOYA and become harder to treat.

What are the possible side effects of GENVOYA?

GENVOYA may cause serious side effects, including:

- See “What is the most important information I should know about GENVOYA?”
- **Changes in body fat can happen in people who take HIV-1 medicine.** These changes may include increased amount of fat in the upper back and neck (“buffalo hump”), breast, and around the middle of your body (trunk). Loss of fat from the legs, arms and face may also happen. The exact cause and long-term health effects of these conditions are not known.
- **Changes in your immune system** (Immune Reconstitution Syndrome) can happen when you start taking HIV-1 medicines. Your immune system may get stronger and begin to fight infections that have been hidden in your body for a long time. Tell your healthcare provider right away if you start having any new symptoms after starting your HIV-1 medicine.
- **New or worse kidney problems, including kidney failure.** Your healthcare provider should do blood and urine tests to check your kidneys before you start and while you are taking GENVOYA. Your healthcare provider may tell you to stop taking GENVOYA if you develop new or worse kidney problems.
- **Bone problems** can happen in some people who take GENVOYA. Bone problems may include bone pain, softening or thinning (which may lead to fractures). Your healthcare provider may need to do tests to check your bones.

The most common side effect of GENVOYA is nausea.

Tell your healthcare provider if you have any side effect that bothers you or that does not go away.

- These are not all the possible side effects of GENVOYA. For more information, ask your healthcare provider or pharmacist.
- Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

General information about the safe and effective use of GENVOYA.

Medicines are sometimes prescribed for purposes other than those listed in a Patient Information leaflet. Do not use GENVOYA for a condition for which it was not prescribed. Do not give GENVOYA to other people, even if they have the same symptoms you have. It may harm them.

This Brief Summary summarizes the most important information about GENVOYA. If you would like more information, talk with your healthcare provider. You can ask your healthcare provider or pharmacist for information about GENVOYA that is written for health professionals.

For more information, call **1-800-445-3235** or go to **www.GENVOYA.com**.

Keep GENVOYA and all medicines out of reach of children.

Issued: November 2015

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'Art AIDS America' reveals remaining stigma



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All Grown Up: Joe Jonas on gay clubs and making music with brother Nick

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“A lot of guys come out to the shows – some gay guys as well – and I love that. They rock out; they have fun. And I feel like the music is helping people express themselves in a way. I'm seeing people with glitter on their face, with the brightest colors. I love that we can encourage people to be themselves.”

– Joe Jonas

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BRIEFS

HUD Proposes Rule Ensuring Equal Access To Housing And Services In Accordance With Gender Identity

WASHINGTON D.C. – After a careful review and monitor of its implementation of equal access to housing in its programs regardless of sexual orientation or gender identity, the U.S. Housing and Urban Development announced Nov. 20 its proposed “Equal Access in Accordance with an Individual’s Gender Identity in Community Planning and Development Programs Rule (Gender Identity Rule).”

The Equal Access Rule was published in 2012 and ensures that housing assisted or insured by HUD is open to all eligible individuals and families without regard to actual or perceived sexual orientation, gender identity or marital status.

“A person seeking shelter is already in a very vulnerable situation, and they deserve to be treated with dignity when they request our assistance,” said HUD Secretary Julian Castro. “This rule takes us one step closer to full acceptance of transgender men and women, and will ensure they receive the proper services that respect their identity.”

Based on its evaluation of the Equal Access rule and consultation with LGBT stakeholders, HUD’s proposed Gender Identity Rule would require recipients and sub-recipients of assistance from HUD’s Office of Community Planning and Development, as well as owners, operators, and managers of shelters, buildings and facilities with shared sleeping quarters or shared bathing facilities to provide transgender persons and other persons who do not identify with the sex they were assigned at birth with access to programs, benefits, services and accommodations in accordance with their gender identity.

“Transgender people face rampant discrimination and harassment across the country – a tragic reality that forces many into positions of vulnerability no one should have to face,” said HRC Government Affairs Director David Stacy. “Fundamentally, this new rule change will help ensure people have access to appropriate facilities and the help they need when they need it the most, regardless of their gender identity. We’re grateful for the Obama Administration and Secretary Julian Castro’s leadership on this vitally important issue.”

HUD’s 2012 Equal Access Rule provided a limited exception for inquiries about the sex of an individual to determine eligibility for housing provided or to be provided to an individual when the housing is a temporary, emergency shelter that involves the sharing of sleeping areas or bathrooms, or inquiries

made for the purpose of determining the number of bedrooms to which a household may be entitled. Upon HUD’s review of that policy, the proposed Gender Identity Rule would eliminate the Equal Access Rule’s current prohibition on inquiries related to sexual orientation or gender identity, while maintaining the prohibition against discrimination on those bases.

HUD began taking steps to strengthen protections for the LGBT community and their families in 2010 by adopting the principle that sex stereotyping and gender nonconformity is sex discrimination under the Fair Housing Act, adopting the requirement that applicants for competitive HUD funds must be in compliance with state and local LGBT nondiscrimination laws, releasing a study on same-sex housing discrimination and pursuing complaints under the Equal Access Rule.

For more information about the proposed Gender Identity Rule, please visit www.hud.gov/lgbt

Eight Michigan Companies Earn Highest Marks For LGBT Policies

Eight Michigan companies have earned perfect scores for having inclusive, nondiscrimination policies for lesbian, gay, bisexual and transgender workers.

The businesses are Dow Chemical, Dykema Gossett, Ford Motor, General Motors, Herman Miller, Kellogg, Steelcase and Whirlpool. They are among 407 companies across the U.S. to get the highest ranking.

The rankings were released this week by the Human Rights Campaign. The survey focused on nondiscrimination policies, employment benefits, demonstrated accountability around LGBT diversity and inclusion and other categories.

Ohio Lawmakers Push Proposed Ban On LGBT Conversion Therapy

COLUMBUS, Ohio (AP) – Two Democratic state lawmakers in Ohio are using last week’s Transgender Day of Remembrance as an opportunity to push their bill seeking a ban on therapy aimed at changing the sexual orientation of minors.

State Reps. Denise Driehaus Driehaus said conversion therapy can hurt children struggling with their sexual orientation or gender identity. Philips said “no child should be forced to change who they are or how they feel.”



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Affirmations Names New Executive Director

FERNDALE – In less than two months of searching, Affirmations' Board of Directors has announced the appointment of Susan Erspamer as its next executive director.



Susan Erspamer

Previous executive director, Darrious Hilmon, announced his departure in October.

"We are thrilled that Susan will be joining Affirmations. She has the breadth and depth of experience that Affirmations needs in its next leader. We are also reassured by her proven track record of growing organizations over time," says Frank Aiello, president of the Affirmations board of directors.

Erspamer is a Michigan native with 21 years of executive experience in the nonprofit and for-profit sectors. Before joining Affirmations, she was the vice president of chapter programs at Alzheimer's Association – Greater Michigan Chapter, which has a \$5 million budget and 65 employees.

During her tenure there, she was instrumental in chapter strategic planning, reorganization, diversification of revenue streams, and outcome-based programs that spanned the state covering 60 counties, seven regional offices and the chapter headquarters in Southfield. She also managed grant funding implementation and relationships, established new collaborations and created a highly productive and team-oriented work environment.

"It is rewarding to be able to bring my professional experience to benefit a community in which I identify and feel so passionate about," says Erspamer. "I am very excited for this opportunity to lead Affirmations into a future where its professional team will grow revenue in support of Affirmations' mission; enhance and grow programs that will support the diverse community; and increase public awareness and recognition of Affirmations as the premier 'go to' organization for people of all sexual orientations, gender identities, gender expressions and cultures."

Equality Michigan Appoints New Deputy Director

Equality Michigan announced Nov. 18 the appointment of its new deputy director, L. Michael Gipson.

Gipson, M.S., is an award-winning writer and educator and is an arts, youth, LGBT rights and public health advocate. He joins Equality



L. Michael Gipson.

Michigan from his most recent position as executive director for the Washington Area Lawyers for the Arts in Washington, D.C. and co-founder of Cleveland's Beyond Identities Community Center for LGBT youth of color.

"I couldn't be more excited to have Michael join our team," said Stephanie White, executive director of Equality Michigan. "He brings not only his leadership skills, but also his vast

experience in development, excellence in writing, strong program design and a clear commitment to broad social justice. I am excited to partner with him to build the future of Equality Michigan."

Throughout his 21 years of public service in both government and nonprofits, Gipson has worked in various capacities as a grant writer, fund development specialist and organizational development consultant as well as a senior administrator on issues related to: HIV/AIDS, LGBTQ advocacy, racial and economic justice, creative entrepreneurship, adolescent and sexual reproductive health, and community development programming.

"This is such a key moment in the movement for LGBT rights in Michigan, I am so honored to be joining this dynamic team of committed social justice advocates," said Gipson. "It's a privilege to partner with this staff, our movement allies and the residents of my new home state to foster much needed change in the rights and lives of LGBTQ people, particularly those residing on the social and political margins."

As deputy director, Mr. Gipson will take on staff management, program oversight and evaluation and lead the development and communications efforts for Equality Michigan. A graduate of Goddard College and Full Sail University, Gipson holds a bachelor's in creative writing and a masters' in instructional design. The new deputy director also works as a senior writer and music editor at SoulTracks.com, an associate editor at Lambda Literary and as a Red Dirt Press author. A native of Chicago, he transitioned to Detroit in the winter of 2014.

You can reach him at mgipson@equalitymi.org.

New Development Director Takes The Helm At Ozone House

ANN ARBOR – Ozone House Youth and Family Services announced Nov. 17 the appointment of Allie Schachter to the role of development director.



Allie Schachter

Schachter brings a wealth of knowledge and experience to her new position, including four years as Ozone's Program Evaluation and Grants Director where she was responsible for securing over \$1.5

million in revenue each year. Further, Schachter serves as president of the board of directors for a nonprofit she founded to serve child victims of human trafficking in Chennai, India.

In addition to her career experience, Schachter holds a bachelor's degree in public policy and environmental science from Harvard University, with an MBA from the University of Michigan Ross School of Business expected in 2016.

"The Board and I are united in our enthusiasm for and confidence in Allie," said Ozone House Executive Director Katie Doyle.

Schachter said she is honored to be at the helm of Ozone's development team. "The Development Director position offers an exciting opportunity for me to leverage my passion for Ozone House's mission, along with my academic focus on organizational strategy and leadership. I look forward to overseeing our efforts to build and sustain relationships with supporters, foundation and civic leaders and community members."

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Michigan Court Of Appeals Reverses Ruling On Custody Case Involving Lesbian Parents

Case Remanded Back To Trial

BY AJ TRAGER

LANSING – The Michigan Court of Appeals reversed its decision Nov. 19 on a 2013 custody case involving a lesbian couple where, following a divorce, the nonbiological mom was denied custody and visitation rights for a child she helped raise with her former partner.

Following the U.S. Supreme Court's decision in *Obergefell v. Hodges*, the Michigan Court of Appeals reversed its decision to dismiss the case, *Stankevich v. Milliron*. The case has been remanded back to trial to determine whether Stankevich is an equitable parent to the child in light of the former couple's Canadian marriage which must now be recognized by the state of Michigan.

"Until the *Obergefell* decision, same-sex couples in Michigan were denied the right to marry, which has now been held to be unconstitutional. On that same basis, same-sex couples should not be denied the same protection of equitable parenthood because they were denied the option of marriage that opposite sex couples have always had. Children of same-sex couples also should not be denied the protections of both parents through equitable parenthood, because their parents were denied the right to marry in Michigan. This is something that Michigan courts or the Legislature will still need to address," Jay Kaplan, ACLU of Michigan LGBT special projects attorney, told BTL.

Jennifer Stankevich and Leanne Milliron were married in Canada in 2007 and separated

in 2009. Before they split, Milliron gave birth to a child, conceived by artificial insemination. Upon separation the couple agreed to joint visitation with the child but could not come to a common agreement as to what the schedule would look like. Stankevich filed an action for custody and visitation rights in Dickinson County Circuit Court where the couple lived in the Upper Peninsula.

Even though they shared financial and parental responsibilities for the child while together, the court dismissed the claims because Michigan did not recognize same-sex marriages performed in other countries and states. Stankevich appealed the ruling and in October of 2013, the Michigan Court of Appeals upheld the decision by Dickinson County to throw out the lawsuit for custody.

Stankevich then appealed that decision up the judicial ladder to the Michigan Supreme Court, which rather than rule on the case, put their consideration in abeyance until a decision had been found in the *DeBoer v. Snyder* case. Following the U.S. Supreme Court's decision in *Obergefell*, the Michigan Supreme Court remanded the case back to the Court of Appeals.

"*Obergefell* requires Michigan to recognize same-sex marriages," the remand authored by the Michigan Court of Appeals reads. "Therefore, we reverse the order granting summary disposition in favor of defendant and remand for an evidentiary hearing concerning the validity of the parties' alleged Canadian marriage and the applicability of the equitable parent doctrine. We do not retain jurisdiction."

Michigan Non Profit Resource

Have You Experienced Discrimination?

If you or someone you know has experienced discrimination, intimidation, harassment or violence because of sexual orientation, gender expression or gender identity, contact Equality Michigan's Department of Victim Services at :

report@equalitymi.org or call 1-866-962-1147

Equality Michigan is working with state legislators to update the Ethnic Intimidation Act to include proper protections for the gay and transgender community.

To get involved in the movement for better hate crimes law, contact policy@equalitymi.org.

Hundreds more resources can be found at
www.PrideSource.com



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Creep of the Week

Peter Sprigg

BY D'ANNE WITKOWSKI

Ho ho ho or whatever greeting you choose this season, but the holidays are upon us. For the majority of Americans that means spending a shit load of money on stuff nobody needs or wants. Still, shopping is a patriotic duty in this country so let the games begin!



Sprigg

Of course, for LGBT shoppers and the people who love them, it'd be nice to have a list of corporations who are naughty and nice when it comes to equality.

Thankfully, that exists. The Human Rights Campaign recently released their Corporate Equality Index (www.hrc.org/cei) and hundreds of companies you know and love earned a 100 percent equality rating.

So if you drive your Ford over to Barnes and Noble for a book, hit Macy's for a holiday sweater, stock up on staplers at Office Depot, get condoms at Walgreens and grab some Starbucks on the way home, you'd be having a pretty gay-friendly shopping day!

Or you could go to Bed, Bath and Beyond for a salad spinner, stock up on balls at Dick's Sporting Goods, get lumber at Lowe's, hit Big Lots for some slippers, get cheap holiday decorations at Dollar Tree and smoke a Marlboro on your way home, and your spending spree is not very LGBT merry. (Also, you should quit smoking.)

Now, a low score on HRC's CEI doesn't necessarily mean a company is anti-LGBT. But the higher a company's score, the better that company is to its LGBT employees. And considering that in many states across the country you can get fired just for being LGBT, working for a company that values equality goes a long way.

Of course, some folks think the CEI is a bunch of baloney. Like Peter Sprigg of the virulently anti-LGBT Family Research Council.

"I'm not sure that all of these policies have been adopted because these companies think that it helps to operate their businesses better," he told the American Family News Network. "I think it's more of a matter of bowing to political correctness and, in some cases, actually wanting to avoid the threat of being accused of bigotry. So, I question the sincerity of some of these policies."

In other words, companies are just pretending to be LGBT friendly because they don't want to look like meanies. It has nothing to do with the bottom line.

"If they want to hire homosexuals and transgender employees, that is certainly their business," Sprigg adds.

Aww, how generous. He's implying that he wouldn't hire such people, but acknowledging that he's not the boss of the world, which is probably very difficult for him.

"But when you get to the point of trying to impose that sort of policy on others, on the country through our legal system, or even on suppliers and contractors and so forth, then I think it's gone too far," continues Sprigg. "I think we should stick with the free market and let the free market operate."

Yes, heaven forbid that the disease of equality spread throughout the land. Keep it in the board room, boys!

Seriously, though. I am not a business major, but I have sold a couple of things on eBay (which has a CEI score of 100, by the way), but know that corporations don't do things that don't make them money. It's all about the bottom line. If shareholders ain't happy, ain't nobody happy.

So if more and more companies are scoring 100 on HRC's equality index, it's because equality is good for business. Not because HRC is strong arming Fortune 500 companies to make nice with the gays. So Sprigg can hope this is some kind of fad, but the smart money is on equality.

Homicides Of Transgender Women In U.S. Reach Alarming High

BY DAVID CRARY

For a few transgender Americans, this has been a year of glamour and fame. For many others, 2015 has been fraught with danger, violence and mourning.

While Caitlyn Jenner made the cover of *Vanity Fair* and Laverne Cox prospered as a popular actress, other transgender women have become homicide victims at an alarming rate. By the count of the National Coalition of Anti-Violence Programs, there have been 22 killings so far this year of transgender or gender-nonconforming people—including 19 black or Latina transgender women.

The toll compares with 12 last year and 13 in 2013, and is the highest since advocacy groups began such tallies a decade ago.

"Most Americans think it's been an amazing year for transgender rights," said Mara Keisling, executive director of the National Center for Transgender Equality. "But for the transgender community, it's been one of the most traumatic years on record."

Death by death, the details are horrific. Kiesha Jenkins was beaten and shot dead by a cluster of assailants in Philadelphia. Tamara Dominguez was run over multiple times and left to die on a Kansas City street. Police said the most recent victim, Zella Ziona, was shot dead in Gaithersburg, Maryland, last month by a boyfriend embarrassed that Ziona showed up in the presence of some of his other friends.

There's no question that anti-transgender hatred fueled many of the killings, yet activists and social-service professionals say there are multiple factors that make transgender women of color vulnerable. They have documented that numerous victims were killed by intimate partners and many while engaging in sex work.

"For many of these women, it's chronic unemployment or participation in survival sex work," said Louis Graham, a University of Massachusetts professor who has studied the experiences of black transgender women.

Many are beset by homelessness and economic desperation, sometimes

ending out in coercive and violent relationships, Graham said.

Chase Strangio, an American Civil Liberties Union attorney, said that for many perpetrators of the violence, "there's a sense of transgender people being less than human."

Philadelphia has experienced two confirmed homicides of transgender people this year — as have Detroit and Kansas City. In May, London Chanel was fatally stabbed by her roommate's boyfriend in North Philadelphia; on Oct. 6, Kiesha Jenkins, 22, was attacked and shot dead by a group of men.

Police Capt. James Clark said Jenkins was a prostitute, and described the assault as a robbery, not a hate crime. Police soon arrested a

The high death toll this year may stem in part from greater awareness of anti-transgender violence, and more vigorous efforts to identify homicide cases in which this was a factor.

suspect with a prior record of robbery arrests.

Nellie Fitzpatrick, a former assistant district attorney who now heads the Philadelphia mayor's Office of LGBT Affairs, said some transgender Philadelphians harbored long-standing mistrust of the police and were frustrated that Jenkins' killing was not being investigated as a hate crime, though Pennsylvania does not have a hate-crimes law covering gender identity.

However Fitzpatrick credited the police department with working to improve relations. One key step: establishing formal guidelines for officers' interactions with transgender people.

Deputy Police Commissioner Kevin Bethel said the guidelines, as well as LGBT-specific components in training at the police academy, were having a positive impact.

"It's not perfect," he said. "But we're moving in the right direction."

Among those killed in Detroit was Ashton O'Hara, whose stabbed body was found in a field in July. O'Hara embraced feminine attributes but was comfortable being addressed with

male pronouns.

His mother, Rebecca O'Hara, said she noticed the tendencies while Ashton was still a toddler.

"How could you be against a person for being happy about who they are?" she asked during a telephone interview. She marveled at Ashton's skills as a hairdresser and makeup artist, yet worried about potential nastiness from others.

"For years, I was afraid I was going to get that phone call, telling me he's hurt or dead," she said. "He'd say, 'I'll be all right. Nothing will happen.'"

Police have arrested a 37-year-old man and charged him with Ashton's murder.

The other victim in Detroit this year was Amber Monroe, 20, shot dead in an area frequented by sex workers. A friend, transgender-rights activist Julisa Abad, said Monroe had twice previously been wounded by gunshots in that area.

"To go back to that same place, life has to feel like you have no other choice," said Abad.

In Kansas City, Missouri, police continue to investigate the death of Tamara Dominguez, a 36-year-old who left Mexico in her late 20s to escape the violence she faced as a transgender woman.

At about 3 a.m. on Aug. 15, the driver of an SUV drove into her, ran over her several times, then fled, according to witnesses. There have been no arrests.

The high death toll this year may stem in part from greater awareness of anti-transgender violence, and more vigorous efforts to identify homicide cases in which this was a factor.

"The violence has been going on for a long time," said Chai Jindasurat of the New York City Anti-Violence Project. "We're now able to identify and document and report on it better."

Examples of heightened attention to the issue:

On Nov. 17 amid a week of nationwide events remembering transgender victims, the Congressional LGBT Equality Caucus held the first-ever hearing in Congress on anti-transgender violence. Among those testifying

See next page

ACLU Says Kentucky Clerk Should Have To Reissue Licenses

FRANKFORT, Ky. (AP) – The American Civil Liberties Union says a Kentucky county clerk's office should reissue altered marriage licenses even though the governor has promised to recognize them as valid.

Rowan County Clerk Kim Davis stopped issuing marriage licenses after a U.S. Supreme Court decision effectively legalized same-sex marriage nationwide. Two gay couples and two straight couples sued her. Davis lost and spent five days in jail for refusing to obey a judge's order. Her deputies issued the licenses in her absence. When she got out of jail, she altered the marriage licenses to remove her name and the county's name, arguing it cleared her conscience.

Democratic Gov. Steve Beshear told U.S. District Judge David Bunning the altered marriage licenses do not comply with state law. But he promised to recognize them as valid, arguing it was not the couples' fault that Davis changed the licenses.

But lawyers for the four couples on Nov. 20 noted that Beshear also said he does not have the authority to declare the licenses valid. They said one of the four couples that sued Davis – Jody Fernandez and Kevin Holloway – are not married yet. The straight couple was able to get a marriage license earlier this year, but they decided to delay their wedding for personal reasons. The licenses are only good for 30 days, so they need to get another one.

"They fear that a marriage solemnized pursuant to an altered license could later be held invalid at some unknown time in the future, such as if something were to happen to one of them," the attorneys wrote.

The attorneys called the altered marriage licenses "a stamp of animus against gay

The attorneys called the altered marriage licenses "a stamp of animus against gay people" and said Davis' personal religious beliefs mean "all marriage license applicants in Rowan County – are forced to bear the burden of Davis' animus against gay people."

people" and said Davis' personal religious beliefs mean "all marriage license applicants in Rowan County – including heterosexual couples, such as Fernandez and Holloway – are forced to bear the burden of Davis' animus against gay people."

Mat Staver, Davis' attorney, has said Beshear's promise to recognize the marriage licenses means "there is no reason for Judge Bunning to act." And he noted that Beshear will leave office next month, to be replaced by Republican Gov.-elect Matt Bevin, who has promised to issue an executive order to remove the names of county clerks from marriage licenses. Staver said that move would "protect the religious convictions and conscience of Kim Davis."

But the ACLU attorneys argued Bevin's executive order would "actually increase the uncertainty" because state law requires county clerks' names to appear on the licenses. The state Legislature would have to change the law to remove it.

► Homicides

Continued from p. 12

were two transgender women, LaLa Zannell and Joanna Cifredo.

Two national advocacy groups – the Human Rights Campaign and the Trans People of Color Coalition – recently issued a report on "the epidemic of violence" against transgender people. It calls for passage of a federal nondiscrimination act that covers transgender people. According to the report, 15 percent of transgender homicide victims in the past three years were killed by intimate partners, and 34 percent may have been engaged in "survival sex work" at the time of their deaths.

Transgender sex work is a harrowing issue.

Stefanie Rivera, now client services director with the Sylvia Rivera Law Project in New York, says she engaged in sex work starting as a 12-year-old in Los Angeles. "The fact that I'm here at 36 – I don't know how I made it so far. I had so many close calls," she said, adding two transgender friends were killed while engaged in sex work in Los Angeles.

Activists say there are no easy solutions to the violence.

"We need multiple strategies, aiming for sweeping cultural change," said Jindasurat. "The more people understand what it means to be transgender, the more accepting they will be."

Yet many Americans are uncomfortable with transgender people, Jindasurat said. He cited the recent referendum in Houston, where opponents of a nondiscrimination ordinance prevailed by stoking fears about transgender people's access to public restrooms.

In Detroit, Yvonne Siferd has worked with many transgender women as director of victim services for Equality Michigan, an LGBT-rights group. She's impressed by their resilience, yet dismayed by the challenges they face.

"We all grow up with this myth that you can be whatever you want when you grow up," Siferd said. "When you do grow up and become your authentic self, the fact that you could be targeted for just being you is terrifying."

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Is A Referendum The Answer?

BY WILLIAM HAYCOOK

Viewpoint

Being 71, I have lived through pretty much all phases of the battle to achieve equal protection for members of our community.

From living in the closet with the door firmly shut (knowing that even a rumor could result in my being fired from my job without any legal recourse) to the present when recent court decisions offer us cause for optimism, my 71 years cover a lot of ground.

I have witnessed and/or participated in many of the efforts that have gradually moved us toward full rights as American citizens including the recent and extraordinary Supreme Court decision guaranteeing equal marriage rights as required by the Constitution.

The seemingly endless efforts over expanding the Elliott-Larsen Civil Right Act to include sexual orientation and sexual identity – including protections for our trans members – have been very frustrating, but I agree that any changes in the law that exclude protection for our trans members is unacceptable.

It is understandable that we are all frustrated with the failure of our elected representatives to tackle this issue. It is equally understandable that some of us want to bypass this impasse and go directly to the voters with a proposal to change the law or even change the constitution. After all, the referendum is a perfectly legitimate legal tool that has been used successfully in a wide

What Dana Nessel seems determined to do regardless of the consequences will impact each and every member of our community.

variety of circumstances for about a hundred years.

Our recent successes give us some degree of confidence that a referendum to firmly establish legal rights for all member of our LGBTQA community will also be successful.

However, Dana Nessel's attitude as expressed in a recent BTL article – “We are full steam ahead. I won't talk to anybody about stopping” – strikes me as being dangerously hard-headed. What she seems determined to do regardless of the consequences will impact each and every member of our community.

Nessel's claim that “...polling indicates the bathroom ballot argument does not significantly move voters in Michigan” scares the hell out of me. Polls are notoriously inaccurate when the questions focus on hot-button issues like religion, race or sex. When asked about such issues, some people seem to offer opinions more in keeping with what they think reasonable people are supposed to believe when, in fact, their personal opinions are very much the opposite. In addition, recent polls after the Supreme Court's marriage ruling suggest that some people feel things are moving too fast and are, at the very least, increasingly wary at this time of further efforts on behalf of the LGBTQA community. While I think such opinions are wrong, they reflect the potentially poisonous environment in which a referendum campaign would have to be waged.

All things considered, a reasonable level of caution seems to be in order. Perhaps Ms. Nessel should agree to discuss this important matter with a broad spectrum of spokespersons before “moving full steam ahead.” Like everyone, I want all members of our community to enjoy full and equal protection under the law. If Ms. Nessel barrels ahead and we lose – a very distinct possibility – we will spend years making up for the backlash. A vicious and hateful opposition campaign – virtually guaranteed regardless of what we would want – will create an even more poisoned environment that will taint future efforts for equal protection. Should we proceed with a referendum? I honestly don't know. My mind says we should fight for the equal protection the Constitution guarantees for all. My heart – make that my gut – says proceed with caution.

I would feel a lot better if a decision to proceed with a referendum was made after a thorough vetting by a broad spectrum of community representatives and not by one person who vows not to talk to anyone who opposes her approach.

William Haycook lives in southeast Michigan.

An Open Letter To Dana Nessel, From The Transgender Community of Michigan

Viewpoint

This open letter was penned by Michelle Fox-Phillips and Charin Davenport speaking as the organizers of a meeting of Michigan's transgender community which took place in Ferndale, Michigan on Nov. 14, 2015. Over 40 transgender, genderqueer and gender nonconforming community leaders attended this diverse gathering including, trans men, trans women, and trans people of color. What follows is the consensus reached by Michigan's transgender community at that meeting.

Dear Ms. Nessel, After learning of your efforts to place LGBT Civil Rights on the statewide ballot in the November 2016 general election, representatives of Michigan's Transgender Community met at Affirmations to discuss what your proposal means for our community. Knowing that transgender people would be the target of the most vicious anti-LGBT attacks in a ballot campaign, we struggled to understand why you did not find it important to engage the community most at risk before launching a campaign that so critically affects our welfare. Nonetheless, by the close of our meeting, we reached a general consensus that it would be helpful to request you meet with the leaders of Michigan's Transgender Community in order for us to understand your position and in the hopes that you would listen to our concerns, as well.

However, we were dismayed when, just two days later, Mlive published a piece by Tim Skubick, in which you are quoted as saying: “We are full steam ahead. I won't talk to anybody about stopping (the ballot initiative)”. After reading this and other comments over the last several days, it appears to us that you have chosen to ignore the very real and serious danger your actions pose for Michigan's Transgender Community.

It is our fundamental belief that we cannot be represented in the discussion about our civil rights if transgender people are not included

in the discussion. To shut us out is demeaning and denies us the dignity we deserve.

Therefore, we feel we would be doing ourselves a great disservice if we did not make this appeal to you and your better judgment. We hope that you will seriously consider the following principal concerns Michigan's Transgender Community has with your proposed statewide ballot initiative:

First among our concerns is safety. Nowhere in the United States is anti-transgender violence more horrific and discrimination more egregious than Michigan. A statewide political brawl with anti-equality forces places Michigan's Transgender Community at grave risk of further violence spurred by hate-filled rhetoric. In Houston, anti-transgender violence increased during the recent ballot campaign and has not abated since. Transgender people in Houston live in fear, while the anti-trans forces feel more emboldened than ever.

Second, our basic civil rights should be protected by law and not subject to the capriciousness of a largely uninformed or worse, misinformed public. The transgender community is afforded very few privileges and our rights should not be decided by those who are able to take their privileges for granted. If the opposition succeeds in convincing the majority of voters that we are a threat to their way of life, their beloved institutions and their families, we cannot win at the ballot.

Third, relatively few voters have any knowledge of the transgender community beyond the stereotypes of pop culture references and the fear-based images conjured by transphobic leaders. Proposing a constitutional amendment to protect the rights of a transgender community in such an environment will likely reinforce those negative messages. Make no mistake, the hate-filled, fear-mongering message used by our opposition is simple, cheap and incredibly effective. To counter it will require a massive campaign to educate Michigan's

voters about the nuances of what it means to be transgender and *then* convince them to approve a change to our state's constitution. To believe that this massive undertaking can be accomplished within the time frame of your ballot campaign is naive at best.

Fourth, if voters turn down this ballot initiative, it will be very difficult if not impossible to convince our legislators to amend the Elliott-Larsen Civil Rights Act. Even a failure to get the requisite signatures needed for the ballot will signal a lack of support to amend ELCRA in the near future. Lawmakers would only have to point to either one of those failures as evidence that the lives of transgender people simply don't matter and, therefore, are not worth the political risk it would require to extend our civil rights under ELCRA.

Finally, the millions of dollars that would go into a single ballot campaign would be put to better use building a healthy culture of inclusion and awareness in Michigan. This includes working to elect transgender friendly candidates and training transgender people and our advocates to increase community awareness and acceptance.

Clearly, Ms. Nessel, you are passionate about LGBT civil rights. The transgender community of Michigan shares that passion. However, we are also passionate that transgender people are the authoritative voice for and about transgender people and to exclude the transgender community from deliberations about our own freedoms, rights and safety denies us the agency we have fought so hard to attain. If you believe, as we do, that transgender people deserve to have their rights fully protected, then certainly you must agree – decisions about us cannot be made without us as full and equitable partners in the process.

In light of the reasons stated above, we the Transgender Community of Michigan do not believe that a ballot initiative should move forward at this time.

Transmissions

The Next Day

BY GWENDOLYN ANN SMITH



On Nov. 20, Transgender Day of Remembrance is marked with events, marches, letters from dignitaries and so on. Die-ins are held, walkways are chalked, and in at least one location, city hall is awash in the colors of the

transgender flag. As its founder, I'm always surprised and humbled to see the reaction to TDOR every year.

Then it is the 21st of November. The lights change, the sidewalks are trod upon and power-washed and life continues. We are next on a quest for turkeys and cranberries, or black Friday deals as we careen headlong into a holiday season haze. I will often close my remarks on Transgender Day of Remembrance with a variant of a rather well known quote from Mother Jones. I'll say something like, "Today, the 20th of November we mourn the dead. Tomorrow and every day, we fight for the living."

You see, there's one thing I've never talked much about with the Transgender Day of Remembrance. When it started, I had a hope to see it help foster a culture of compassion within the trans community. I've hoped that, by seeing so many murdered at the hands of anti-transgender violence, we'd see just how valuable and precious all of our lives are.

Some days I am unsure if that message is out there. At the TDOR event that I spoke at, two of the speakers felt it necessary to remind those in attendance to treat their siblings in the community with respect. In-between this, one of the main speakers took the opportunity to call out at least one attendee, while also speaking against Caitlyn Jenner.

Jenner has not just been the fodder of speeches, having been discussed negatively within a number of transgender articles and throughout social media. I've seen others have to defend her, or at least her gender identity. Jenner is also not alone when it comes to being denigrated within the very community she very visibly joined in 2015. I think it is fair to note that Jenner's life is a fairly charmed one. She does not have to deal with all I've faced, let alone what everyone named on Transgender Day of Remembrance faced. Yet we have a number of ways we can react, and a number of options for addressing what her and others may or may not be doing.

In the 1990s, the Transexual Menace was a direct action group formed on the East Coast. Even with their provocative and sometimes controversial work on behalf of the nascent transgender community, I still think of one of their slogans: confront with love. In the

20 or so years since they roamed the earth, I feel that we have forgotten how to do such.

So many of us were killed this year, and many others took their own lives. Depression and anxiety runs rife in our community, not only fueled by gender dysphoria, but by the harsh realities of life as a trans or gender nonconforming person in 2015. We may have greater visibility and greater rights, but there's still plenty of hatred, violence and discrimination dished out to each of us.

We should be trying to keep our own community spaces safe and offering support to all within our ranks. Again, this is not to say that people should be above reproach simply for being trans. It does mean that we should all consider carefully if we are calling out a person for their actions or opinions, or if we are simply using the same tools as those used against us, and trying to tear down others in our midst to raise ourselves up.

With us moving into the holiday season – which is itself a very hard time for those of us who have been disowned by family or friends – we should be especially vigilant about those within our community. This is a time to put our hand out and grasp the palms of those in our numbers in need. I recently heard of an initiative from the author of the book "Brave In Ribbons," Holly Maholm. She has started her own program called "Adopt-a-Transgender" for the Christmas season. In short, she is offering herself up as a "Transgender-Adoptive-Parent" to three random transgender folks who reply to her website at www.hollymaholm.com. I'll admit, I first felt very unsure of it, but I wish I saw more similar actions. She may save three lives by doing this.

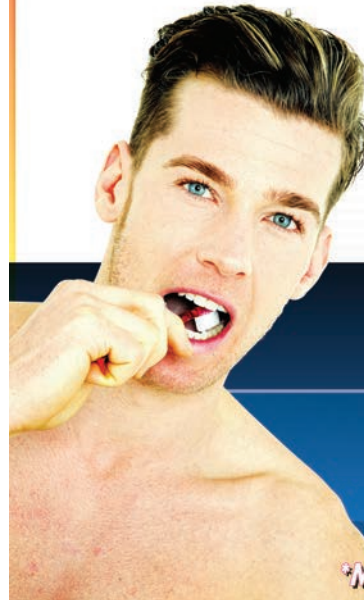
How many lives get saved when we speak ill of each other? When you focus your energies in tearing down others, particularly those who are within your own community, or who may be well-meaning-but-problematic allies, how do they tend to react? Do they change, or do they "double down," fighting you and others, or leaving entirely because of how they were treated? How does this build a coalition, and how does this make our community stronger? Also, how does that make people react to you? I'm not saying the world is a popularity contest, but do you really want to be the person people walk on eggshells around – or outright avoid you – based on how you tend to treat others within the community?

Bottom line: We're not all perfect – I certainly am not – but I think we all want to do right. Unless someone is an absolute bigot and is unwilling to change, then we should welcome the opportunity to reach out, to teach and to make things better. Yelling at people, calling them names or slapping their hands away when what they offer isn't enough for you is not always the best approach. We need to be that culture of compassion, and confront with love.

Gwen Smith is not calling people out for calling people out. You can find her on Twitter at @gwenmers.

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Getting Plymouth Rocks Off

Parting Glances

OPINION BY CHARLES ALEXANDER

DRUMSTICK #1: If you're looking for a ploy to come out to your family this Thanksgiving, you might casually remark that according to "Biological Exuberance" by animal behavior specialist Dr. Bruce Bagemihl, the female domestic turkey often engages in same-sex courting and mounting activity before, during and after the holidays.

DRUMSTICK #2: Contrary to popular belief, the 102 Pilgrims who sailed on the Mayflower in 1620 did not eat Thanksgiving turkey or pumpkin pie. Flour for baking bread and pie crust was all used up during the three month ocean crossing. Guinea hen – whose same-sex courting and mounting status is unavailable as BTL goes to holiday press – was the main dinner staple.

LIGHT MEAT: Pilgrims were too straight laced to wear silver buckles, and they didn't land at Plymouth Rock. Thomas Faunce, a popular preacher, started that PR story in 1740. He claimed his father, who arrived in this country three years after the Mayflower first dropped anchor, pointed the site out to him as a kid.

According to Harvard historian spoilsport Edward Channing (no relation to "Hello Dolly" Carol), a ship could never have landed at Plymouth Rock, given the strong direction of the surrounding currents.

(Note: New England Pilgrims – America's original "love the sinner, hate the sin" do gooders – would be appalled if they had an inkling of the direction the current flows around P'Town these days. Especially at the Boat Dock!)

DARK MEAT: In 1647, Puritans – who, it turns out, actually enjoyed only missionary position sex – outlawed the preaching of wedding sermons. Marriage for brimstone Calvinists was not a sacrament but strictly a secular matter to be conducted by civil magistrates and so it remained well into the 1700s.

Puritans quoted Martin Luther, who cautioned, "Marriage is a secular and outward thing, having to do with wife, children, house and home, and with other matters that belong to the realm of government, all of which have been completely subjected to reason." (American Family Ass'n., please take note, and go get stuffed!)

BREAST: From 1702 until 1708 the governor of New York, Lord Cornbury, was a cross dresser. He appeared gowned at public ceremonies, wore elaborate hairdos, let his fingernails grow long. A favorite of Anne, Queen of England, he was a bit too, too much for the puritanical colonists who booted him (and his overly polished silver buckles) out of office.

GIZZARD: Puritans were a mean spirited bunch. The JW's of their time. They didn't celebrate Christmas. And nobody dared work on Sunday for fear of being put in the stockade. Children's games were deemed unbiblical. Unmarried courting couples risked public beatings if they were discovered sitting alone or holding hands unchaperoned.

Children who disobeyed parents in colonial Connecticut got stoned. And not on pot! Massachusetts rakehells who were caught in adultery got the head chop in the mid-1600s. Salem witch hunts came soon after.

PARSON'S NECK: In 1642, 17-years-old Thomas Granger was at various times seen cuddling up with "a mare, a cow, two goats, five sheep, two calves and a turkey." But not necessarily in that poking – er, pecking – order.

For his post-pubescent bit of animal husbandry, he was hung – beg pardon: hanged – and each of the aforementioned amorous playmates was "kild" for making unwilling hey-nanny-non with a minor.

Happy Holiday! Enjoy your drumsticks. But please leave your domestic birdies behind the barn alone. You may gobble. They peck.

Charles@prideaource.com



The End Of HIV Is Near...

BTL Editorial

The end of HIV is near ... If we make use of the tools available to us today. And that is no short order. HIV stigma, slut shaming, lack of knowledge of HIV, fear: fear of infection, fear of discussion and continued substance abuse issues – all are feeding the continued epidemic. Yes, new cases remain stable, and those who are infected are living longer, healthier lives. But this is not enough to end new transmissions – not yet anyway.

Only about half of Michigan's residents living with HIV are successfully controlling their infection. By successfully controlling the infection we mean that they are on medications and their viral load – the measure of virus in their blood – is so low it's "undetectable."

Here's why that's so important. Science has shown that when a person living with HIV controls their virus like that, it has two important benefits. First, the person living with HIV will live a longer, healthier life. Secondly, when a person has an undetectable viral load, they are significantly less likely to transmit their virus. How significantly less likely? Early results – two years into a four year study – of hundreds of couples where one partner is positive and the other is negative, found exactly zero transmissions of

Barring a vaccine – which remains an elusive proposition – we are now the closest we will ever be to having the tools to end the epidemic.

HIV from partners with a suppressed viral load. Zero. Zip. Zilch. Is it possible a person with HIV who has suppressed their virus could transmit the infection? It's not something science can completely rule out, but the evidence is very strong that transmission is very, very unlikely when a person has an undetectable viral load.

So here's the other tool we have in our possession right now that is key in the end of new HIV infections in Michigan. It's called PrEP, or pre-exposure prophylaxis. This is a once a day pill taken to prevent a person who is not HIV infected from becoming infected. Studies have placed the efficacy of this drug in the low 90 percent range, but math models have placed it at 99 percent. It works, and it works very well.

San Francisco is the nation's first region to scale up PrEP as a prevention strategy. And it's paying dividends. The city reported the lowest number of new HIV infections in years.

Some naysayers are saying that PrEP is not effective, however, because San Francisco is seeing an

increase in the number of reported bacterial sexually transmitted infections (those old standbys of syphilis, gonorrhea and chlamydia). While there has been an increase in the number of reported cases of those STIs, it's important to note that is an artifact of the reality that those on PrEP are being tested for those diseases every three months, when they may not have been testing for those infections at all in the past. That's overall good news. We're finding cases of STIs earlier, and treating them *and* we're stopping HIV infections. That's good for everyone's health.

With these two interventions – treatment for all, used as both a health benefit for those living with HIV and as a preventative to stop transmission and PrEP – we have a unique opportunity to stop new infections.

Barring a vaccine – which remains an elusive proposition – we are now the closest we will ever be to having the tools to end the epidemic. The question is: Do we have the strength of will and the commitment to end the epidemic?



Viewpoint The Season To Give Thanks And Thankfully Give

OPINION BY MICHELLE E. BROWN

It's that time of year when, with joy or dread, we all get ready for the holidays. There's dinner to prepare and parties to attend. Everyone's making a list for someone to check twice before hitting the stores for the sales to buy gifts for the naughty and nice.

Christmas carols take over the air waves. Every television station has at least one holiday special. Our mail boxes are stuffed each day with cards from friends and family we probably haven't heard from since this time last year, unless, of course, they're friends on Facebook. 'Tis the season to be jolly! And at some point, even the most cynical holiday hater is going to be warmed at least a little by the joy of it all and be thankful.

It's also the time of year when your mail box – snail mail or electronic – is filled with year-end requests for donations from nonprofits new and old. Unlike the holiday cards from friends and family, these letters don't get taped on the door or placed on the mantel. Some don't even get opened, going directly to the "circular" file or trash bin on your desktop. So I'm here to do an intervention on behalf of these year-end "asks."

Hopefully giving to nonprofits is something everyone does regularly. Of course, if that were the case we wouldn't be receiving those year-end letters. You see, the sad reality is that, although so many benefit from the great works of organizations both locally and nationally, most of us don't support them with our time, talent or tithes.

The government for the most part doesn't fund them. Foundations and philanthropists provide some funding but there, for most organizations, remains a gap. So why should we care?

If you've been fortunate, really fortunate, you've never been hungry, cold or homeless and relied on an agency for a warm meal, a place to eat or shelter from the elements. In 2014, there were 578,424 people experiencing homelessness on any given night in the United States. According to the Williams Institute, 40 percent of the homeless youth served by agencies identify as LGBT.

If you've been fortunate, really fortunate, you can afford safe, decent housing. Unfortunately, affordable housing is a scarce resource in many cities. Decent and affordable housing has far-reaching consequences for people's health, quality of life and access to opportunities.

If you've been fortunate, really fortunate, your life has not been affected by poverty, unemployment, illiteracy and a host of other

socio-economic challenges impacting the lives of millions not just in this country but globally. You've never been alone and afraid looking for and/or being helped by a hotline manned by volunteers trained to help or just listen. You've never needed someone to advocate for your basic human rights so you can be free to be the person you were born to be.

If you think you have been that fortunate, open your eyes, wake up and smell the proverbial coffee. LGBTQ people are born into all types of families and face the same socio-economic challenges that other people who share their sex, race, ethnicity, age and disability face. We all have been and are touched by these societal woes and owe a huge debt to the nonprofits, their staffs and volunteers who step up each and every day to provide a safety net for those in need and most vulnerable which, quiet as it's kept, could be you tomorrow.

So as you sort through that holiday mail, take a moment to open those letters. You don't have to say yes to everyone, but look them over, especially those in your community. Are they accountable – fulfilling their mission/vision as an organization and to the community? Are they building sustainability for core programming? Are they transparent not only with their finances but their governance? What are their goals/achievements – are they being met/accomplished?

Make your list and check it twice then show your thanks by making a gift. Instead of those tacky \$10 gag gifts, make a group donation to an organization on your list. Volunteer to serve food, distribute clothing or relieve staff/volunteer during the holiday so they can spend time with family and friends.

For the fourth year, the Tuesday following Thanksgiving (U.S., not Canadian) has been designated as "Giving Tuesday." This year it falls on Dec. 1. You can support organizations participating in #GivingTuesday online.

Yes it's the season to give thanks for all the friends, family and things that make our life worth living. It's also the time to remember those less fortunate and thank the organizations, staff and volunteers who work tirelessly to make a difference in their lives.

I'm hoping, like me, you show your support with a donation of time, talent and/or cash every month. If so, on behalf of the beneficiaries of your generosity, I thank you. But please say yes one more time (remember, it may be tax deductible) and make this the season to thankfully give.

Michelle E. Brown is a public speaker, activist and author. You can follow her writing and activities at <http://www.mychangeiam.com> and on www.twitter.com/mychangeiam.

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World AIDS Day: Getting To Zero, Dealing With Stigma

BY DR. ABDUL EL-SAYED

“Rare Cancer Seen in 44 Homosexuals” read a 1981 headline in the New York Times. Few realized that it would

herald a pandemic that would become one of the greatest public health challenges in modern history.

HIV has claimed the lives of nearly 40 million people globally. Today, 1.2 million Americans and 6,840 Detroiters live with the disease – an estimated 14 percent of them unaware that they carry it. And while advances in public health and medicine have transformed the disease from a swift death sentence to a manageable, chronic ailment among those with means in countries like the United States, it remains one of the most intractable public health challenges faced by the poor and underserved in the U.S., and globally.

The theme of this year’s World AIDS day is “Getting to zero” – zero new infections, zero discrimination and zero HIV-related deaths.

Although bold, these goals are attainable. However, achieving “zero,” both here in Detroit and globally, will require us to

understand and navigate three traits common to all pandemics, and particularly poignant with respect to HIV/AIDS: First, HIV disproportionately affects society’s socially and economically marginalized – being what we call “socially patterned.” Second, it has created and sustained an atmosphere of fear that has ultimately stigmatized those living with it, hampering efforts to prevent and treat the disease, alike. Third, HIV remains heavily politicized.

Among the 1.2 million Americans who live with HIV, a disproportionate number of them are men of color who have sex with men. The same is true here in Metro Detroit. Further, low education and poverty predict higher infection rates, leaving our poorest hardest hit. More troubling still, among those infected, men of color are less likely to know their HIV status. The fact that HIV affects the most marginalized – sexual minorities, people of color and the poor – has made the epidemic harder to prevent and treat.

Why? Those at greatest risk of contracting HIV are less likely to trust institutions, like hospitals, clinics and government, that are best positioned to support them because these institutions have not always been inviting or accommodating to those most likely to have

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the disease. This distrust hampers efforts to treat those living with HIV, and to encourage preventive strategies among those at risk. One patient I took care of at Harlem Hospital in New York during my medical training summarized it well: when asked why he had waited to get checked until his symptoms became so serious as to require ICU care, he said, “I didn’t want no doctor judging me.”

Underlying this is the deep stigma of HIV. A medical professor of mine once called HIV the “leprosy of our time.” This is because like leprosy in medieval Europe, HIV has been unfairly treated like a curse or a punishment – those living with it shunned and avoided.

Stigma about HIV has had another consequence: politicizing the disease and those who live with it. From the essential denial of the epidemic by the Reagan administration to the President’s Emergency Plan for AIDS Relief (PEPFAR), the pandemic has been shaped by politics throughout its history. Politics has controlled how money and support are allocated to HIV care and prevention. For example, recent conversations about public funding of PrEP medications – scientifically demonstrated to minimize HIV spread – have centered on whether men who have sex with men should “just protect themselves” with condoms, which are known to be less effective, although less expensive.

If we are to achieve our goals of zero new infections, zero discrimination and zero HIV-related deaths, we must counteract the roles that stigma, marginalization and politics continue to play in the evolution of the epidemic.

First, HIV has largely dropped out of our public conversation because most Americans assume that the epidemic is “over.” But 1.2 million Americans still living with HIV suggest otherwise. This belief, however, is allowed to persist because those most likely to have the disease are some of society’s most marginalized – those least likely to have a voice. Public health and medical professionals, patient advocates and activists must therefore continue to use their platform to draw public attention to the epidemic. They must focus, in particular, on the profound social equity challenges that continue to define the epidemic

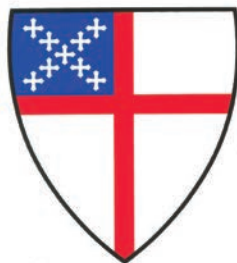
in its current stage.

Second, the conversation about HIV must concentrate on de-stigmatizing the disease. Those living with HIV or at risk for contracting it cannot be made to feel ashamed or unwelcome, particularly in institutions like clinics and hospitals. Rather conversations about HIV must be facilitated, both in public and private – otherwise many will continue to avoid them, and the disease will continue to spread.

Finally, the imperative for prevention must be stressed in all of these conversations about HIV. The cost of HIV prevention cannot be born on the poorest who are most likely to acquire it and least likely to afford the means of protection. Rather, eliminating new infections – and perhaps someday, eradication – is a public good in which we must all, as a society, invest.

At the Detroit Health Department, we are committed to playing our part for Metro Detroit. Building on our work through the Ryan White and Housing Opportunities for Persons with AIDS (HOPWA) programs, we plan in the coming year to build a more robust HIV/AIDS program that can support policies and programs toward achieving zero new infections, zero discrimination and zero HIV-related deaths in our community. But we are only as good as our partners – and we look forward to building and nurturing partnerships toward our shared goals: zero new infections, zero discrimination and zero HIV-related deaths.

Dr. Abdul El-Sayed is a public health physician and epidemiologist. He is the executive director of public health and health officer for the city of Detroit under Mayor Michael E. Duggan. In his role he directs the Detroit health department and other health-related initiatives. Dr. El-Sayed earned a doctorate in Public Health from Oxford University as a Rhodes Scholar, and an MD from Columbia University as a Soros Fellow. He is a graduate of the University of Michigan with Highest Distinction in Biology and Political Science, where he delivered the university-wide student commencement speech alongside President Bill Clinton in 2007.



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Analysis: It's Time To Retire The Medical Category Of AIDS

BY TODD HEYWOOD

"Cancer is first of all a disease of the body's geography, in contrast to syphilis and AIDS, whose definition depends on constructing a temporal sequence of stages," wrote Susan Sontag in her 1987 essay "AIDS and Its Metaphors."

And while much has changed about AIDS in the intervening decades, the construction of those time-related sequences remains. AIDS is not, and has never been, a label of precise definition. It has been a soft-moving target, used to classify people with certain symptoms, but it has no relevance to living with HIV infection today.

We know that a person with HIV can look completely healthy and harbor a CD4 count of 50 cells/mm³, or a person can look sickly and wasted and harbor a more robust number like 199. But both, by definition, have AIDS because their CD4 counts are under 200. The cause of their CD4 count decline does not matter; the presence of HIV combined with the decline is the defining factor.

I am exceedingly aware of the import of an AIDS diagnosis for many of my friends who have overcome the darkest days of this epidemic. It is a badge of honor. But it is time to retire the AIDS label altogether as medical category.

A Cavalier Label

In mid-April, I began feeling like death warmed over – and that was on my better days. I was in and out of the ER, and no one could quite figure out what was wrong. Then a lab screw up sent me back to the ER. Within hours I was admitted to the hospital – not for the "blood infection" the lab results showed, but PCP pneumonia (pneumocystis pneumonia) and a partially collapsed lung. The next day, I had thrush. My CD4s, maintained at a fairly respectable average of 400 since I started meds in 2010, had crashed to 110.

The initial assumption was that I had failed to adhere to my treatment. Three days later, that was shown to be untrue. My viral load was undetectable. Another, still unidentified infection had suppressed my bone marrow activity – crashing my immune system and my general red blood cell populations.

Despite that medical reality – that my PCP and suppressed immune system were not caused by HIV, but by some other infection – I was diagnosed and labeled with "AIDS."

I don't care about that; but I do care about the cavalier way medical

terminology applies that label when there is only partial evidence. It is a box in which I shall remain beyond the grave. Because once you are diagnosed with AIDS, or HIV stage 3, you are always a person with AIDS or HIV stage 3. That is not science, it is medieval mysticism.

Creating false categories to define the virus in our body creates classes of haves and have nots in our community. In reality, if we have an AIDS diagnosis, an HIV stage 3 diagnosis or an HIV stage 1 diagnosis, we all have HIV disease. We are all on our own unique uncharted journey with this virus.

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It's HIV Disease

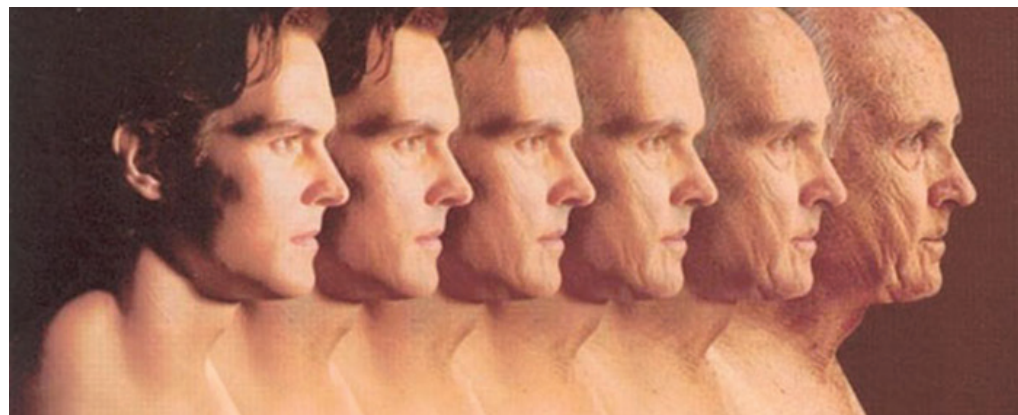
It is time to retire the ill-fated staging of HIV disease. It should be called, quite simply, HIV disease. The same perspective should be taken on it as on heart disease, which represents a host of diagnoses related to the heart, or on diabetes that involves a failed pancreas.

As HIV infects and affects the immune system, there is no corporeal geography to which to attach the infection; there is also no one way HIV progresses. Trying to label it is an act of control that is both hubristic and futile. HIV will do what HIV will do in a body, tracking its own course.

Creating false categories to define the virus in our body creates classes of haves and have nots in our community. In reality, if we have an AIDS diagnosis, an HIV stage 3 diagnosis or an HIV stage 1 diagnosis, we all have HIV disease. We are all on our own unique uncharted journey with this virus.

Words will not and cannot control, contain, limit, minimize or stop the story that the virus will unfold with replicated viral RNA strains. Just as each of us has our own story of how we became HIV positive, we also have our own HIV disease story. Each is unique to our DNA, and pretending otherwise erases our unique experiences and our unique realities.

This piece originally appeared at TheBody.com



Study Explores Healthy Old Age For Those With HIV

BY WES VENTEICHER

PITTSBURGH (AP) – Treatments for HIV have evolved through several generations since August "Buzz" Pusateri tested positive for the virus 30 years ago.

The latest drugs promise a near-normal life span with few side effects for people newly diagnosed.

But side effects of earlier drugs, and damage the drugs couldn't prevent, linger in Pusateri's 77-year-old body.

In addition to two pills for HIV, he takes medicine to relieve numbness in his feet likely caused by early treatments. He wears a beard to cover facial scarring that new patients won't get, and some of his body's fat has migrated to his midsection, creating a condition known as lipodystrophy.

"It's been an up-and-down battle," said Pusateri. "Really, with this HIV, you never know what's going to happen to you."

Pusateri is among the oldest in a group of people observing a milestone many never imagined: 2015 is the first year the Centers for Disease Control and Prevention has estimated more than half of people living with HIV may be older than 50.

"No one would have believed this 30 years ago," said Ron Stall, director of the Center for LGBT Health Research at the University of Pittsburgh Graduate School of Public Health.

Stall recently received a \$2.1 million National Institutes of Health grant for a three-year study of what he calls "resiliencies" or the social and emotional characteristics of men who stayed healthy while living with HIV or who are at risk of contracting it.

Stall is beginning the study amid increased attention from doctors and medical researchers on how the human immunodeficiency virus and its treatments affect aging. Without treatment, life expectancy for someone with the virus is about 10 years, he said.

"When I first started doing this I never dreamed I'd be concerned about geriatric medicine, but here we are," said Dr. Deborah McMahon,

2015 is the first year the Centers for Disease Control and Prevention has estimated more than half of people living with HIV may be older than 50.

clinical director of UPMC's HIV/AIDS program. McMahon said she started working in HIV clinical care and research in 1988.

Treatments reduce patients' viral loads to extremely low levels in the blood, but don't cure HIV or AIDS. The virus remains in long-lived cells and continues to activate the body's immune system, McMahon said, causing inflammation that may accelerate chronic conditions such as cardiovascular disease. HIV is linked with higher cancer risk. Essentially, McMahon said, HIV may accelerate aging.

Studying 'Strengths'

The first drug to treat the virus, known as AZT, inhibited the ability of HIV-infected cells to reproduce but caused anemia, nausea and vomiting. As treatments advanced, including the major development of protease inhibitors in the 1990s, newer drugs attacked HIV-infected cells at a later point in their life cycle. The two-pronged approach proved effective in lowering the virus to undetectable levels.

No treatments existed when the first available blood test showed Pusateri was HIV-positive in 1985. The virus worked unabated, devastating his immune system, and hospitalized him with a severe bout of pneumonia for the first time in 1991.

He took AZT and tried multiple drugs through the 1990s, including those known as d4T and ddI, which likely caused the neuropathy in his feet. In 1998, he started seeing McMahon, who prescribed a cocktail of drugs that dropped his viral load to an undetectable level.

See Study: Aging & HIV page 27

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'Art AIDS America' Reveals Remaining Stigma

BY CHRISTOPHER TREACY

Most would assume that within the art world, stigmas about HIV and AIDS would have petered out years ago. So many of our country's most talented art-world figures are gay, and AIDS has been responsible for huge losses within that community. It just seems like it'd be one arena wherein fear and ignorance would have taken a backseat by now.

But as Dr. Jonathan David Katz discovered as he went about developing "Art AIDS America" – a new exhibit focused on the cultural impact of AIDS in America – we'd be sadly mistaken. Katz, who's the University at Buffalo Visual Studies Doctorate Program chair, experienced the sad truth firsthand: Even in the enclaves of subversive creativity, there is still much resistance to open discussion about the disease and its ongoing impact, regardless of what lens the artwork may juxtapose. Perhaps most surprising is the chilling realization that resistance is still the rule, not the exception.

"This is the first major, traveling national art exhibit revolving around AIDS, and putting it on has been the most difficult endeavor of my life," Katz said over the phone. "We went to over 200 museums and yet, as it stands now, the show will hang in just four places. It's not going to San Francisco, not going to Chicago... After I did 'Hide/Seek,' which was the first queer-themed exhibit at the Smithsonian, I thought I'd climbed Mt. Everest. I figured it would all be coasting from there on in. I was wrong." (As of press time, the exhibit will be hosted in Chicago in the near future.)

Katz detailed several issues behind his struggle to mount "Art AIDS America" as the exhibit's co-curator and primary marketing agent. Many owners were apparently reluctant to loan the artwork for fear it might get vandalized. The foundations of certain artists that made their names in AIDS-informed art didn't want to participate either, (keep in mind, these foundations are funded by the sale of artwork). More static at the intersection of art and commerce came from museum directors who Katz described as being "completely uninterested."

"Topicality is always a danger to the art world," he explained. "The concern is that once the issue at hand passes, the artwork will be deemed irrelevant. There's also this issue of 'AIDS exhaustion,' and many museum directors seemed to feel that people just don't want to hear about AIDS anymore. Some said they loved the art but that the topic

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"For the Record" by Fierce Pussy

“We experienced more death than we have in major wars and still, we barely address it. It's a strange, bifurcated image of this country where some of us have walked around shell-shocked, our address books filled with the names of dead people, while others live their lives with no recognition of this cataclysmic loss.”

- Dr. Jonathan David Katz

was too much of a downer from a marketing standpoint.

"And yet, that sort of sobering conversation about AIDS is lost on America at large," he continued. "We experienced more death than we have in major wars and still, we barely address it. It's a strange, bifurcated image of this country where some of us have walked around shell-shocked, our address books filled with the names of dead people, while others live their lives with no recognition of this cataclysmic loss."

The marketing difficulties do nothing to detract from the power of the show; maybe they even attest to it. Totalling approximately 140 pieces, Katz talks about the different viewpoints as 'permutations,' and singles out the earliest piece – Izhar Patkin's "The Unveiling of a Modern Chastity" – as evidence of the community's near-telepathic understanding of the illness and its deadly implications before we even really knew what it was. Patkin's image merely mimics the skin lesions (Kaposi Sarcoma) that gay men began presenting in increasing numbers, something he'd observed in a hospital waiting area. But the title reveals an inherent knowledge of the bigger picture. It's chilling: through these blotchy, raised, dark-hued red irritations, Patkin saw the future and somehow intuited what it meant.

Katz began work on the exhibit 10 years ago with co-curator Rock Hushka from the Tacoma Art Museum. His conceptual take on the show – something he lays out in an essay from the accompanying companion book – applies a positive, forward-moving spin on a dark subject matter. It's a complicated argument, but the crux is that when AIDS first reared its head as a creative topic, contemporary art was mired in some stagnant ideals. One postmodern concept in particular posited that meaning isn't perpetuated by artists, but rather is something wholly constructed in the minds of viewers. This renders artists irrelevant – mere conduits with no handle on the conveyance of the ideas coming across in their art. In that light, the viewers actually become the artists.

Interesting as that is, it removes authorship and self-expression from art. Katz's show poses the argument that AIDS lent a new social and political urgency to creative expression in visual arts, nudging us toward the concept of artistic meaning as a collective reality, i.e., a conversation between the artist and the viewer in which meaning is a two-way street.

See next page



"The Sick Man" - Ron Athey (2000)

As Hushka has put it, the show is a document of, "...how the artists' response to the epidemic utterly changed artistic practice in the United States."

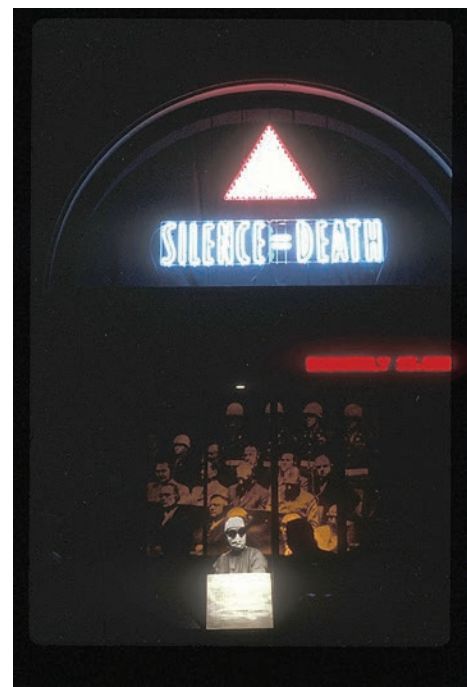
"It was a two-handed problem," Katz said, describing the art climate of the time. "We had a Republican controlled government which engaged in the most explicit queer-bashing and AIDS-bashing possible. We had Jesse Helms saying 'no federal funding for anything related to AIDS.' And then you have this pervasive thinking in the art world that artists have no sense of expression left, that viewers create all the meaning. AIDS began to challenge that."

Katz reveals a newfound, stealthy system of titling as a clear manifestation of this challenge, wherein pieces of art were untitled, but then given a parenthetical name. He uses artist Felix Gonzales-Torres' 1991 work "Untitled" (Placebo) - one in a series of so-called 'candy spill' sculptures - as a stunning example. The piece presents like an area rug: 40,000 pieces of silver-wrapped candy spread evenly in a weighty cluster. Viewers are encouraged

to take a piece of candy, thus participating in the slow disappearance (deterioration?) of the piece over time. Are they creating space? Are they killing something off? Maybe a little of both?

"It inaugurates a combined series of metaphors," Katz said. "Putting this piece of candy in your mouth mimics the ceremony of Christian sacrament, but perhaps you're also engaging in the spread of AIDS. By participating, there's a sense of personal responsibility - you're now involved in the process. So, there's a camouflaging of deeply expressive meanings below the surface both in the titling and the way the art invites our engagement."

Katz went on to say that Torres' work does a great job of emblemizing the means by which HIV behaves in the body, thus using the same model as a means for proliferating the art world with a taboo topic. HIV covertly enters into healthy cells and converts them into little viral factories. One could argue that Torres enters a museum's immune system and causes it to carry his



"Let the Record Show" by Act Up (Gran Fury, 1987 film still, recreated 2015)

viral ideas.

"Art AIDS America" launched in Los Angeles in June. Considered a preview/trial run, it opened as part of an arts side-car to L.A. Pride and featured between 25-30 percent of the full show, which was unveiled in its entirety last

month at the Tacoma Art Museum in Washington. From there it will travel to the Zuckerman Museum in Georgia before landing in The Bronx Museum of the Arts. Katz would love to see the show travel beyond those destinations, but doesn't hold high hopes for an expanded schedule.

"It's interesting, what we're seeing is how pop culture and high culture are moving at two completely different speeds," he said. "Finally in the museum context, it's safe for art to be talking about race. It's not where it should be, but it's better than it was. Queerness, however, is still stuck all the way 'back there' despite the ubiquity of queer figures on TV and, now, marriage equality. The time lag might best be explained by the fact that, with art, we're talking about high value commodities purchased by wealthy people."

If you might be able to help bring "Art AIDS America" to Michigan, please contact Dr. Jonathan David Katz by email: jonathandavidkatz@gmail.com.

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Local 'American Idol' Alum To Sing At World AIDS Day Detroit

Malaya Talks LGBT Friends In Theater, Her Upcoming EP And Her Love Of Food

BY SHELBY CLARK PETKUS

“American Idol” alumni Malaya Watson – who now goes professionally by her first name only – is performing in Detroit Dec. 1 along with other singers from various seasons of the show in honor of World AIDS Day. The event, which will also feature Kris Allen, Melinda Doolittle, Devin Velez and Rayvon Owen, is part of a series of events during the day that World AIDS Day Detroit hosts every year (www.worldaidsdayus.org). The 18 year old singer – the youngest “American Idol” finalist of all time when she made it to the Top 8 of Season 13 – is also a native

of Southfield. Malaya, whose good humor is apparent immediately upon talking with her, spoke with *Between the Lines* about the upcoming concert, her musical inspirations and her greatest love: cheese.

Malaya first got involved with AIDS/HIV awareness in 2014. “Last year, I received an email from Phil (Kucab, World AIDS Day Detroit board president) asking about the show,” she says. “I thought it would be a good opportunity, and I performed last year. And he asked me again this year, and I thought, ‘It’s a great fundraiser,’ and I thought it was a good idea to go back. And it was fun!”

See American Idol, page 26

PERFORMANCE

World AIDS Day Detroit Benefit Concert

7 p.m., Tuesday, Dec. 1

Tickets: \$30-85

Garden Theater, 3929 Woodward Ave., Detroit

www.worldaidsdayus.org

Religious Leaders Gather To Support Those Living With HIV/AIDS

DETROIT – Detroit and suburban religious and community organizations will gather on World AIDS Day, Dec. 1, to remember those who have died, support those who are living with HIV and AIDS and find strength in one another to continue their work in and advocating for AIDS service organizations as well as provide support for those living with HIV/AIDS.

More than a dozen organizations will gather for a commemoration service titled “People Who Care About People with HIV/AIDS.” The event will be hosted at Spirit of Hope, a Lutheran and Episcopal church, beginning at 7 p.m.

“The mainstream religious community has been slow to respond to this crisis that has brought physical, emotional and spiritual pain to our city and larger communities. We are here to be part of the healing, raise our voice for justice and partner together to make that justice a reality,” the People Who Care About People with AIDS team said in a press release.

Festivities will include presentations by representatives from local HIV service agencies, poets and spoken word artists, gospel musicians, story tellers, first hand testimonies of those living with HIV and preachers. Participants will also be informed as to the numerous ways they can participate with hands on healing worship.

This annual commemoration, now a multi-faith service, has a long history and in recent years has relocated to the heart of the city. Spirit of Hope is home to a comprehensive HIV prevention and support program in partnership with Gospel Against AIDS.

Spirit of Hope is located at 1519 Martin Luther King, Jr. Blvd. in Detroit. For more information email the People Who Care Team at spiritofhopedetroit@gmail.com.

WORLD AIDS DAY EVENT CALENDAR



Dec. 1

Volunteer for World AIDS Day. World AIDS Day Detroit is pleased to offer volunteer opportunities for our upcoming World AIDS Day events happening at the Garden Theater in Midtown Detroit.

The Garden Theater, 3929 Woodward Ave., Detroit
<http://gaybe.am/wav>

8 a.m.

World AIDS Day Detroit Giving Breakfast. With special guest Jeanne White-Ginder. Tickets are \$50-75. Purchase a table for \$1,000.

The Garden Theater, 3929 Woodward Ave., Detroit
<http://gaybe.am/wab>

9 a.m.

Name Memorial Quilt Display. Email gsc@oakland.edu or call 248-370-4333 for more information.

Oakland Room, Oakland University Gender and Sexuality Center.
www.oakland.edu/csa/gsc

11 a.m.

HIV Testing (appointments only). Call 734-572-9355 to make your appointment for free HIV testing.

HARC Office, 3075 Clark Road #203, Ypsilanti
<http://hivaidresource.org>

11:30 a.m.

World AIDS Day Detroit Symposium. An education symposium that is a youth-focused education and awareness event. Programming will feature the Ryan White Story as told by his mother, Jeanne White-Ginder. Free.

The Garden Theater, 3929 Woodward Ave., Detroit
<http://worldaidsdayus.org/world-aids-day-2015/>

12 p.m.

Viral Apartheid: The Rise of HIV Exceptionalism. With special guest Todd Heywood, BTL contributing writer. Email gsc@oakland.edu or call 248-370-4333 for more information.

Oakland Room, Oakland University Gender and Sexuality Center. www.oakland.edu/csa/gsc

1 p.m.

Anonymous HIV Testing. Monday-Friday testing until 3 p.m. at the University of Michigan. Call 734-763-1320 to schedule an appointment (walk-ins are taken if the schedule allows).

Wolverine Wellness, Suite 2110, Second floor, Ann Arbor, www.uhs.umich.edu/hivtesting

2:30 p.m.

Mobile Unit Site. Visit the new outreach unit. Receive HIV, Hep C testing and more. Contact Lemont Gore at 734-572-9355 or lemont@hivaidresource.org for more details.

Parkridge Homes Apartments, Armstrong Street, Ypsilanti. <http://hivaidresource.org>

3 p.m.

Film Screening: “How to Survive a Plague.” Email gsc@oakland.edu or call 248-370-4333 for more information.

Oakland Room, Oakland University Gender and Sexuality Center. www.oakland.edu/csa/gsc

7 p.m.

World AIDS Day Benefit Concert featuring American Idols. Performers include Kris Allen, Melinda Doolittle, Rayvon Owen, Devin Velez and Malaya Watson. Tickets are \$30-85. You must be at least 18 years old to purchase a ticket. Minors are allowed if accompanied by a parent or guardian. Contact 313-757-1733 or email info@worldaidsdaydetroit.com with any questions.

See WAD Calendar, page 26

World AIDS Day Detroit Celebrates 25 Years Of The Ryan White CARE Act

BY AJ TRAGER

DETROIT – Every year the world gathers together on Dec. 1 to unite in the fight against HIV/AIDS, show their support for those living with the disease and to remember those who have been lost. This year World AIDS Day Detroit has planned a day of events that will celebrate the organization's fifth anniversary and the 25th anniversary of the Ryan White CARE Act.

Worlds AIDS Day Detroit was started in 2011 by Wayne State University School of Medicine student Phillip Kucab. Since its start, the organization has grown not only in name recognition but has also established itself as the largest HIV/AIDS-awareness event in the city of Detroit.

For the first time since its conception, WADD has an official paid staff member, Executive Director Maxwell Cameron. Cameron joined the organization full time on Sept. 1 and is responsible for managing all areas of the organization, including overseeing the production of events such as WAD. He is the first full time paid staff member but is optimistic that the group will expand to include more paid positions.

"I think the thing that draws me to HIV (work) is the fact that it is such an intersectional issue," Cameron told BTL. "HIV awareness work often doesn't stand alone in terms of supporting somebody with HIV who may also have mental health problems or access to housing or treatment problems. It also intersects with LGBT rights and LGBT health. It's one of those things that we need to work on addressing. HIV/LGBT activism has always been at the forefront of changing larger policies."

As part of the 25th anniversary of Ryan White's death, Jeanne White-Ginder, White's mother, will share her son's story at the WADD Giving Breakfast, the annual event kick off that starts at 8 a.m. Detroit-area mayors, elected officials, community-based organizations and university and business leaders will all be in attendance to hear White-Ginder's keynote address.

White contracted HIV through tainted blood products used to treat hemophilia and was ostracized by his community and expelled from school because of his disease. He was regarded

According to the 2015 Annual HIV Surveillance Report for Michigan published in July, the state has approximately 18,800 people living with HIV.

as an "innocent victim" but personally rejected that label, believing that every individual living with HIV/AIDS is innocent. White passed away in 1990 but not until he spent months educating the nation on HIV/AIDS. Congress passed the Ryan White CARE Act in 1990, four months after his death, to provide access to medicine and treatment for Americans impacted by HIV/AIDS.

There are approximately 40 AIDS service organizations in the state of Michigan. This year's WADD event, held at the Garden Theater, is produced in collaboration with a number of AIDS Service Organizations in the area including Michigan AIDS Coalition, APM/HARC, Matrix Human Services, the Wayne State University Adult HIV/AIDS Program, the City of Detroit Health Department's Ryan White Program, the Oakland County Health Department, HELP and a few others.

"Our partner agencies are key to our success; they help with promotion, fliers and print materials. We supply them with those items and they help let people in the community know what is going on on WAD. They also inform their clients and they are important to how we get a critical mass of people to the event," Cameron said.

According to the 2015 Annual HIV Surveillance Report for Michigan published in July, the state has approximately 18,800 people living with HIV. Of those documented cases 6,840 of those affected live in the city of Detroit.

Over the last few years funding for HIV/AIDS groups and research has changed dramatically and Cameron is thankful that the Ryan White Care Act was able to help so many organizations over the years conduct their work and help out local communities. Moving forward, however, he sees funding challenges for HIV/AIDS services as the HIV community shifts focus to other

items and models.

"HIV and AIDS is a big problem and we need to be talking more openly about it," Board President Kucab said in a press release. "HIV is 100 percent preventable, yet we are still seeing 50,000 new infections each year. Overall in the United States, one out of 200 people have HIV, but it is three times that rate here in Detroit. One in four people with HIV do not even know they have it. Treatment and care is accessible, yet less than half of the people in and around Detroit who have HIV are being treated. We can do much better than that."

WADD will host two additional events on the same day following the Giving Breakfast at 8 a.m. A symposium will begin at 11:30 a.m. at the Garden Theater and will feature remarks by White-Ginder and AIDS United CEO Michael Kaplan followed by a panel presentation that will include voices of those who are living with HIV or strong allies who work in the community.

Those guests will speak towards their experiences and what it means to be living with HIV. The Stigma Index will join WADD and discuss some recent findings associated with the community.

The event is a special opportunity for students and community members to participate in World AIDS Day and hear first hand White's inspiring story, as told by his mother. The symposium is free and open to the public. Those interested in participating can contact WADD leadership at www.worldaidsdayus.org.

The closing concert event will begin at 7 p.m. and will include a headline performance by American Idol Season 8 winner Kris Allen followed by performances by Detroit's own season 13 finalist, Malaya Watson, and American Idols Melinda Doolittle, Rayvon Owen and Devin Valez. Tickets start at \$30 with VIP tickets costing \$85.

World AIDS Day Detroit is sponsored by: Hemophilia Foundations of Michigan, Walgreens, 98.7 AMP Radio, Wayne State School of Medicine, Motivus Health Care, Oakland University, BioRX, Color Me Rad, Between The Lines and Fox 2 Detroit.

For more information, tickets for events or to make donations, please visit www.worldaidsdayus.org. The Garden Theater is located at 3929 Woodward Ave. in downtown Detroit.



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► American Idol

Continued from p. 24

Malaya likes to keep the crowd engaged, noting, “I like to keep it exciting ... You should expect some excitement and some heartfelt emotion this year. I’m going to give you a little bit of both. I will be singing ‘Gone Too Soon’ – remember when Michael Jackson wrote the one song about the child (Ryan White) who passed away during the AIDS epidemic? I will be singing the song for the mother of the child (Jeanne White-Ginder) ... There will be plenty of tissues.” This year is the 25th anniversary of White’s death.

The singer also likes to keep things exciting when it comes to her work post-“American Idol.” “‘My Diary’ is what I’m working on right now,” she says of her upcoming EP. “It’s going good, actually. We don’t have a specific date for it to be released, but it’s going well. Everything’s coming together!” Genre wise, it will be unique, as she’s almost stumped when describing the sound. “Ummmm ... we just call it Malaya. I guess you could say it’s new, but I don’t know. I just call it ‘Malaya’! I’m a new genre!”

Some of her inspirations include classic heavy hitters but are just as diverse as her sound for “My Diary.” “Ray Charles, Aretha Franklin. (My inspirations) are all across the board. There’s no really specific person,” she says. “Rap. I actually listen to a lot of that, as crazy as it sounds. I get a lot of inspiration from that also. That’s why I

don’t know what genre to call me! I’m inspired from every aspect of music. I listen to classical sometimes all day.”

Though she’s veering from her predominantly R&B performances on “American Idol,” she is gracious and thankful when describing her time on the show. “It gave me the exposure, the experience and the opportunity just to get my music out there,” she laughs, “show American and the world, you know, who Malaya is! It was amazing and a very great opportunity that I’m glad I had.”

Beyond the hit Fox show, Malaya’s past performance experience includes quite a lot of local theater, including time with Mosaic Youth Theater of Detroit. Does the girl with a knack for quick jokes and a background in theater have more than just singing in her future? “I don’t know what the future has. Maybe theater, though, maybe,” she ponders. “I like to dabble in anything I can.”

Those theater experiences informed her inclusive attitude, as well.

“Because of my theater experiences, I’ve had a lot of friends that are a part of the LGBT community. And, you know, I don’t discriminate against any type of love. You love what you love. If it’s strong like that, then I’m a strong supporter of that. I have a bunch of friends (who are LGBT). I used to sing at the (Detroit) Opera House, actually, when I was in middle school. Some of the people that were my age were from that community and they were my friends just like anybody else was.”

Though singing, theater and community outreach remain facets of her career, her true love seems to be food.

“Oh yeah. Oh you know!” she exclaims when the topic comes up. “You can ask anybody – I love food!”

Any hometown favorites? “Coney Islands. It don’t get no better than that,” she gushes. “I usually get the out of the ordinary – I like to get breakfast. Everybody thinks it’s crazy. I get like three pancakes, white toast with extra butter, four pieces of sausage, eight pieces of bacon and three or four sunny side up eggs! And I eat the whole thing. I don’t leave anything on the plate. And the crazy part is, I eat again. Maybe an hour later? I love food!”

Malaya even dabbled with the power of social media recently when it comes to food.

“I love cheese. Cheese is delicious. Sargento sent me some cheese because I was so excited by the cheese emoji. Big shout out to them – that was really cool. I love cheese.” With love like that, could Malaya’s next gig be a deal with a food company? “Oh definitely,” she wishes. “If I could get a cheese commercial, that would be amazing.”

While Malaya continues to work on her EP, fans can expect her to venture out of the state soon as she continues to further her career. “I’m trying to get myself not just in Michigan but all over the country and all over the world. That’s a plan,” she says emphatically. “The universe! I’ll become an alien!”

The World AIDS Day Benefit Concert will begin at 7 p.m. Tuesday, Dec. 1 at the Garden Theater in Detroit. Tickets are \$30-85. Visit www.worldaidsdayus.org for more information.

► WAD Calendar

Continued from p. 24

The Garden Theater, 3929 Woodward Ave., Detroit
<http://gaybe.am/wac>

7 p.m.

People Who Care About People With AIDS Interfaith Service. Spirit of Hope Church, Detroit. All welcome; light refreshments following. 1519 Martin Luther King, Jr. Blvd., Detroit. Spiritofhopedetroit@gmail.com

7 p.m.

Raw Deal: Barebacking in America. With special guest Todd Heywood, contributing writer to BTL. Email gsc@oakland.edu or call 248-370-4333 for more information. Oakland Room, Oakland University Gender and Sexuality Center. www.oakland.edu/csa/gsc

Evening

Fall Into The Red: World AIDS Day. Social Hall Theatre at Ferndale First United Methodist, 22331 Woodward Ave., Ferndale. www.fallittr.com

Dec. 2

6 p.m.

Free STD & HIV testing, Michigan AIDS Coalition (MAC). MAC provides free HIV, Gonorrhea, Chlamydia and Hepatitis C testing every Wednesday through 9 p.m. Last client taken 30 minutes before end of testing session. HIV, Gonorrhea, Chlamydia and Hepatitis C testing provided to everyone.

Affirmations, 290 W. Nine Mile Road, Ferndale
www.goaffirmations.org

Dec. 3

12 noon

Free HIV testing. Every Thursday from noon to 5:30 p.m. 1209 S. University Ave., Ann Arbor
www.s3safesexstore.com

1 p.m.

Walk-in HIV/STD Testing Thursdays at Washtenaw County Public Health through 4 p.m. Washtenaw County Public Health, 555 Towner St., Sueded 1103, Ypsilanti, www.ewashtenaw.org

5:30 p.m.

Free HIV and syphilis testing through 8:30

p.m. Affirmations and AIDS Partnership Michigan. For more information, please call the Michigan HIV/STI Hotline at 1-800-872-2437. Everyone welcome. Testing together (for eligible couples/sex partners) is offered by appointment. Contact Clarence Peoples at APM’s main office at 313-446-9820. Affirmations, 290 W. Nine Mile Road, Ferndale
www.goaffirmations.org

Dec. 5

1 p.m.

Free HIV and syphilis testing through 4 p.m. Affirmations and AIDS Partnership Michigan. For more information, please call the Michigan HIV/STI Hotline at 1-800-872-2437. Everyone welcome. Testing together (for eligible couples/sex partners) is offered by appointment. Contact Clarence Peoples at APM’s main office at 313-446-9820. Affirmations, 290 W. Nine Mile Road, Ferndale
www.goaffirmations.org

Dec. 7

8:30 a.m.

HIV testing by appointment Monday-Friday. Call to schedule an appointment at 734-544-6840. Evening appointments available.

Washtenaw County Public Health, 555 Towner St., Suite 1103, Ypsilanti.
www.ewashtenaw.org

6 p.m.

Anonymous Rapid HIV Testing. Free HIV testing through the HIV/AIDS Resource Center (HARC) every Monday until 8 p.m. Not offered over University of Michigan breaks. Contact info@hivaidsresource.org or spectrumcenter@umich.edu for more information.

Spectrum Center, Michigan Union, 500 S. State St., Ann Arbor

Dec. 8

5 p.m.

Free STD & HIV testing, Oakland County Health Division. Offered twice per month on every second and last Tuesday of every month through 7:30 p.m. Last client taken at 7:30 p.m. All testing performed by Registered Nurses. Tests offered: HIV Rapid Testing, Syphilis, Gonorrhea, Chlamydia, Trichomoniasis (Trich). Throat and anal cultures as needed on a case by case basis. Affirmations, 290 W. Nine Mile Road, Ferndale. www.goaffirmations.org

► **Study: Aging & HIV**

Continued from p. 20

As he approaches 79, the average life span of an American male, Pusateri is healthier than many younger men without HIV, McMahon said.

His success living with the virus makes him a likely candidate for Stall's resiliency study, which will survey men who participated in the Pitt Men's Study, a 30-year-old research project with residents of Pittsburgh, Baltimore, Chicago and Los Angeles. Stall's study will include 1,850 men from the study, including those who are HIV-positive and HIV-negative.

The study will examine specific qualities and conditions in the men's lives, Stall said. It will look at impacts of factors such as the resolution of internalized homophobia, the preservation of personal relationships, family building and connection with community, he said.

Stall said he will look for associations between those characteristics and how well people stick to a medical regimen their doctor recommends, which experts said is the most important element of living with HIV.

"Normally in the health sciences, we study deficits – we study weaknesses," Stall said. "I'm trying to flip it, say, 'Aren't strengths important, too?'"

Support Systems

Pusateri said he volunteers with patient-advocacy organizations, goes to church and receives help and support from two nieces. He credits his health in part to a positive outlook.

"I remember thinking to myself, 'I'm not going to die,' and I just pushed that out of my mind," he said. "I'm a very optimistic person."

In nearly 30 years of seeing patients, McMahon said she has noted the value of resiliency and support from family and friends in getting patients to take care of themselves.

"Just in general, anyone who has a support system does a bit better," she said. "And as you get older that becomes more important, because you start to rely on people."

At the 30-year-old Pittsburgh AIDS Task Force, about half of 700 clients are older than 50, the organization said.

"It's a good thing that there are better medications, that people are living longer," said Jason Herring, the organization's director of programs and communications. "That's one of the reasons we're here. ... But they are living with issues that normally you'd see in much older people."

The organization is encouraging older people to get tested for HIV, saying doctors and patients can mistake HIV's symptoms for the normal effects of aging, missing the opportunity to start treatment early.

"Older folks may have more guilt built up and don't want to think about it," Herring said. "They're in a mindset several years behind where we are now."

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Volunteer Opportunities - Want to help improve the health of your community? Volunteer with the hotline today!
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CHECK OUT OUR STI & HIV PREVENTION WEBSITE

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The Charlie Sheen Moment You Probably Missed

BY MARK S. KING

The subtle moment came during the second segment of Matt Lauer's explosive interview with actor Charlie Sheen. It impressed me so deeply I actually backed up my recording and watched it twice more.

Sheen had already endured the first segment of his time with Lauer, during which he resembled an uneasy hostage trying to charm his captors. Gone were most of the features of the train wreck we have come to know as Charlie Sheen: the mania, the twitches and glazed eyes, the bloviated pronouncements delivered with the bravado of a crack cocaine messiah.

That public meltdown was in 2011, a millennia in celebrity years. The humbled, visibly nervous man on "The Today Show" had his back against a wall, forced to reveal his HIV positive status on the eve of venomous tabloids doing it for him.

And so, the immensely privileged actor found himself in a position known all too well by those of us who live with HIV: having to disclose our status and pray to God the response will be at least civil, if not empathetic. Except, of course, Sheen did it under the blaze of studio lighting, with high definition cameras searching for any betraying signals on a face layered with makeup and apprehension.

The moment that transfixed me came after an endless commercial break – several minutes of corporate pigs at the trough, lapping up the ratings slop of Sheen's misfortune. Sheen had already made his HIV disclosure and had begun building a case against the extortions of his former sex partners and confidantes. It wasn't the most relatable storyline with which to lead, but it was presented through a veiled, undeniable personal agony.

And then, Lauer announced he had messages from Twitter he wanted to share, fresh off the internet presses, containing reactions to Sheen's HIV disclosure from the town square of cyberspace. Sheen's face changed. On live television, in front of a blockbuster audience the world over, Charlie Sheen would now hear exactly what people thought of him, his story, and most unnervingly, his HIV status.

Lauer began to read. "Laura says, 'You have brought me to tears. I am profoundly touched by your honesty...'" The camera had moved to a graphic of the tweets and Sheen was not visible. Lauer was continuing with a second message. "For the first time in a long time you can be proud of yourself," he read, "Now

And so, the immensely privileged actor found himself in a position known all too well by those of us who live with HIV: having to disclose our status and pray to God the response will be at least civil, if not empathetic.

you're really winning."

The camera cut to Sheen, who fumbled out a "wow... that's lovely," although he still seemed to be holding his breath. Lauer continued with a third message. "Now you own your truth," the message read. "Good on you, Charlie Sheen. Respect."

And it was in this moment, as Lauer finished the third of three consecutive responses, all of them supportive, that the camera revealed something barely perceptible but achingly human.

Charlie Sheen raised his shoulders slightly in a shallow intake of breath, and then let it out, shifting in his chair as if to mask it, while his eyes found a place of exquisite, emotional relief that no mere actor could ever muster.

It was the sigh of a thousand gulps of air, the release of months of secrecy and loneliness, of doubt and the very real fear of what lies beyond the words, "I am HIV positive."

It was then that I recognized the man on the television screen. He was every HIV positive person who has ever had to make a revelation that holds the acceptance of our loved ones and co-workers and friends in its precarious balance. And, at least in that instant, fate was merciful to Charlie Sheen.

The backlash, as if duty bound, has begun. Much has been breathlessly reported about the veracity of Sheen's statements, the lawsuits, the blame and recriminations, and even his residual tiger blood bluster that he might be the man to deliver a cure. None of the nonsense to come can nullify the fact that the critical words "undetectable viral load" have been written, spoken and defined more in the last few days than in the entire history of HIV advocacy.

There will be plenty of time to assess the fallout of Charlie Sheen's disclosure, for better or worse. For now, I remain struck by the eyes of a vulnerable man during his singular, desperate moment of grace.

And in them, a glimmer of hope for us all.

This piece originally appeared on MyFabulousDisease.com. Used with permission.



Bookmarks: Classic Reads For World AIDS Day

BY KEITH ORR

December 1 is always a somber day – a time to remember those we have lost. Just as important, it is a time to renew efforts for an AIDS-free world. Much has changed since the early days when “an unexpected cluster of cases” was given the moniker of GRID (Gay Related Immune Deficiency). There are treatments available for many which result in undetectable levels of the virus. With these therapies, AIDS becomes a manageable chronic condition. Some therapies are being tested which could lead to not just undetectable levels, but eradication of the virus. There are preventive protocols using Truvada which, though not a vaccine, provide tremendous protection.

Thus, much has not changed. Untreated, AIDS is still a deadly disease. Not everyone has access to the treatment in developed countries. Many people react poorly to the therapies and destroy livers and kidneys to hold the disease in check as long as possible. Education is still needed to inform people how to prevent transmission and to teach the uninformed how the disease is *not* transmitted.

Here are a few older and newer books to understand the past and present of AIDS.

And The Band Played On: Politics, People, and the AIDS Epidemic

By Randy Shilts

Randy Shilts was the gay community's documentarian. In 1981 he was hired as an openly gay journalist with the San Francisco Chronicle. He wrote three major books in his short life: “The Mayor of Castro Street: The Life and Times of Harvey Milk,” “And The Band Played On,” and

“Conduct Unbecoming: Gays and Lesbians in the US Military from Vietnam to the Persian Gulf.” He died of complications from AIDS in 1994 at the age of 42.

“And The Band Played On” is one of the best of the chronicles of the early years of the AIDS epidemic. Originally published in 1987, Shilts used his prodigious skills as an investigative journalist to conclude that the epidemic was allowed to happen through apathy and indifference. Shilts examines the actions and reactions of several communities: gay, medical, political, governmental and the news media. He weaves personal stories

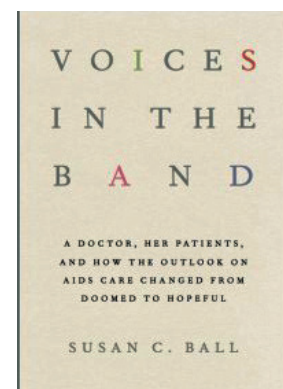
through the book, making it an engaging piece of journalism and call to action.

The initial reception to the book was controversial. It earned rewards for its literary and journalistic qualities. Not surprisingly, many of those criticised in the book were less welcoming. Though some the conclusions have been refuted over time, the basic premise of the book damning the governmental response remains both harrowing and true.

Voices In The Band: A Doctor, Her Patients, and How the Outlook on AIDS Care Changed from Doomed to Hopeful

By Susan C. Ball

An incredible memoir of a doctor who worked with patients starting in 1992. Her practice crossed the divide when there were no effective treatments, to the era of protease



inhibitors and cocktails of the late '90s, through the present when therapy can be one pill a day. The book opens with her first days on the job and the helpless feeling of caring for patients whose HIV has

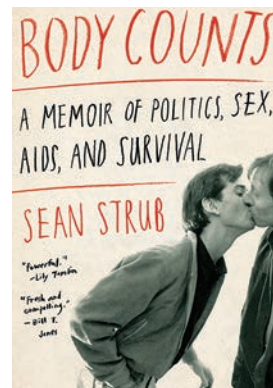
progressed to full-blown AIDS. At the time, that diagnosis meant nothing to a physician. There was nothing to treat. You could at least fight the opportunistic infections, even if the fight was often a losing battle. AIDS had no treatments. You could only care for them, make them feel loved and watch them die.

In spite of the odds, what she saw in those days was the finest in medical care. Teams worked together tirelessly. In tragic irony, today doctors can save their patients but back then they cared for them. The voices in “Voices In The Band” will haunt you as much as they clearly haunt Dr. Ball.

Body Counts: A Memoir of Politics, Sex, AIDS and Survival

By Sean Strub

On reading this recent memoir I was struck by the fact that Sean Strub was present at or at the center of so many important political and cultural events. An early AIDS activist and founder of POZ Magazine, Strub was a member of ACT-UP, participating in the Saint Patrick's Cathedral actions and covering Jesse Helms' house in a giant condom. He rubbed elbows with the likes of Keith Haring and Andy Warhol. He was the first person on the scene at the assassination of John Lennon. Diagnosed early on with HIV, he was near death in 1995 when protease inhibitors



were introduced and saved his life. Strub was, and is, a combination of entrepreneur and activist. This was an unusual combination at the time, but perhaps laid the groundwork for

today's activism which is itself entrepreneurial. Both his work and his activism depended on networking, and he knew many people, famous and infamous. If nothing else, this cast of characters makes this a fantastic read.

Angels In America

By Tony Kushner

Great tragedies inspire great art. One of the pinnacles of expression from the horror of the AIDS epidemic was Kushner's classic, “Angels In America,” composed of two independent plays, “Part One: The Millennium Approaches,” and “Part Two: Perestroika.” The play has been produced on Broadway and in a popular HBO adaptation.

The play revolves around Louis, a gay Jew, whose lover Prior is diagnosed with AIDS. The action cuts through generations and political ideologies, introducing conservative



Roy Cohn as an important character and foil. Characters struggle with the relation between religion and family and their sexual orientation and HIV status. Kushner is a fan of Bertolt

Brecht, whose theatricality pushes the bounds of reality creating a more powerful drama. In “Angels,” there are visions of the ghost of Ethel Rosenberg and Angels. The visions constantly remind the viewer of the theatrical nature of the story, resulting in a hyper-realism making the work all the more powerful.

The full play is a seven hour production, usually performed over two days. However, like most great plays, it works as a literary piece, as well. Whether or not you have seen a production, you should read this important piece of gay culture.

Keith Orr and his husband Martin Contreras are the owner-operators of Common Language Bookstore, one of the few surviving LGBT/Feminist Bookstores. Visit www.glbttbooks.com for books and more information.

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ALL GROWN UP



Photo: Meredith Truax

Joe Jonas On Disco, 'Accidentally' Going To Gay Clubs & Making Music With Brother Nick

BY CHRIS AZZOPARDI

Nick Jonas isn't the only one going to gay clubs like a good ally – his older brother, Joe, enjoys a night out with the gays too. And the best part? Sometimes they even go together.

As if that wasn't enough, Joe is taking his new sound to the clubs with a disc drenched in the disco-funk sounds of the '70s. His latest post-Jonas Brothers endeavor, "SWAAY," features South Korean guitarist JinJoo, bassist and keyboardist Cole Whittle and drummer Jack Lawless. Collectively, they're known as DNCE.

We caught up with the band's frontman, Joe Jonas, to discuss his mission to "encourage people to be themselves," recent talks with Nick regarding a Jonas Brothers reunion and how he's "accidentally" wandered into gay clubs.

Why disco?

It's something I grew up listening to quite a bit; it was always played in the house. My dad grew up in the '70s and always really loved everything funk and disco, and it was the one style of music that all of us in DNCE loved. It helped us embody what this has become – this kind of disco-rock-pop stuff that we were able to brew up.

Considering the genre's ties to your childhood, do you get nostalgic performing this music?

Sometimes, yeah. I feel like when I perform these songs it's a new experience every time, because you're playing the same songs but seeing the reactions of different audiences. So sometimes it brings me back, but for right now it's kind of a whole new experience all over again.

Disco is obviously steeped in gay culture. Have

you ever gotten down to some disco at a gay club?

I went to a gay club with Nick a few months ago – it was really fun! And actually, I was really impressed by the DJ – he played everything and was all over the map. His musicality was really great, and we just had a great time.

Was this your first time at a gay club?

Well... I've accidentally gone to gay clubs before! (Laughs) I think that's happened to a few people. But, you know, it was cool. We went out with some of our friends who are gay. I just think we live in a world where obviously it's not a big deal – it's fine – and you can have fun wherever you go and make the best of it.

How do you accidentally end up in a gay club?

(Laughs) Umm... being in Europe and not being able to read any of the signs and just

stumbling into what you think is a regular club. You're like, "Oh, OK. Here we go."

At what point did you realize the club was gay?

Getting hit on by more men than you would usually get hit on by.

What is that experience like for you?

It's flattering. I don't mind... if someone is nice. And it's been cool to see at these concerts too. A lot of guys come out to the shows – some gay guys as well – and I love that. They rock out; they have fun. And I feel like the music is helping people express themselves in a way. I'm seeing people with glitter on their face, with the brightest colors. I love that we can encourage people to be themselves.

How does your experience with DNCE compare to Jonas Brothers?

The fan base is older now, and there are

college kids and some adults, and it's cool to see that. I was in Toronto recently and I had a DJ gig after the show, and I would say 80 to 90 percent of the audience came to the DJ gig. It's cool to see that they're all down to hang – and that they're obviously old enough.

In 2014, Nick said he didn't feel Jonas Brothers did enough for their gay fans. What's your take on that?

Maybe it was just our age, but I would agree with Nick. We maybe didn't reach out as much as we probably could have. I hope now we can encourage other straight guys to have a voice as well. I care too much about my friends who are gay and fans who are gay to be quiet about it.

And now, having friends who are gay and touring in these different markets and seeing that DNCE has gay fans coming out to the shows, it's awesome. I just hope that with my new music – and like Nick – I'll be able to reach out in my own way and really get people to feel comfortable. That's what we're trying to do, especially with DNCE. It's like its own party, and we invite everybody.

How aware were you of a gay following while in Jonas Brothers?

We would see gay fans here and there come to shows, and we were always very happy to say hi, and (be) loving. It always made us happy. And like, you'd see a sign or two (laughs) that would say something kind of funny. I can't remember what they said off the top of my head – a lot of them were always making me laugh, and they were flattering too.

You recently tweeted a photo of you in a feather boa while in Texas. What's the story behind that?

(Laughs) Oh, wow, I don't even remember. But I'm definitely the risk-taker out of the brothers and have been for many years, and so I don't remember all the crazy and wacky things that I've done. I definitely really don't let anything hold me back these days.

Is that because there's less to hold you back?

Definitely, yeah. I feel like it's nice to be able to have a voice in the music industry but also be able to express that voice and not really feel shy about that or feel like you're not supposed to say this or say that. Obviously being in the situation that my brothers and I were in for so many years – we didn't have anyone in particular saying, "Don't do this, don't do that," but you just have that in the back of your head because you're a bit worried or nervous that you might say or do something that could set off fireworks.

You hear so many stories about child stars, and we see so many of them not make it. How did you survive those childhood years, and what advice would you give someone as young as you were?

Man, it's definitely difficult. The first thing is remembering that you're not crazy for thinking or doing the things you wanna do. It's

really important to be your own artist and be creative, and if you wanna be a certain way or if there's a style of music you wanna go with, take that journey. It's difficult because you think you know everything, and then there are times you're told you know nothing, so I think you just have to learn and take time to understand who you are as a person and who you are as an artist. Soon enough, you'll start to realize it's OK to be you and to really be whoever you want to be. You'll see that people prefer that more than a cardboard cutout.

From your recent breakup with Gigi Hadid to your new blue hair – how do you handle the constant interest regarding every facet of your life?

It's pretty funny. I think I've learned to laugh it off when sometimes they like to create their own stories – even out of your hair. (Laughs)

Ha, is the blue hair not a story?

(Laughs) I don't think so! I just did it because I wanted to do it – there really wasn't a deeper meaning to any of it, which is why I think it's really funny. They make it something. I could be frustrated or I could be mad about that, but I just laugh it off. I've learned to handle it better over time. And it's never always been that easy; there are moments that have been difficult for me. I've read stuff or something I would say was taken out of context and that's tough, obviously, but as you get older you get better at it and you go, "I know the truth."

So having blue hair isn't this empowering post-breakup moment that the media is making it out to be?

I like having blue hair. I don't think I feel any different; it was just a spur-of-the-moment decision anyway. But I'm not gonna react or go after the press about it because I just find it funny.

Will you and Nick – and even your other brother, Kevin – ever do anything musically together again?

I would say so. Nick and I have a few ideas to work with other artists who we really like. There are a couple of artists out there that we think are really incredible that we'd like to work together with. And then, there's always down the road. We don't really ever wanna say never to anything just because there could be something that comes along our way that we might say, "You know, let's try working on this song together." It's tough to say that we'll never do it because who knows.

What would reunite you?

Time itself. Seeing where things will lead us. It's easy to say we're done and that we're never doing it again, but then we both look at each other and go, "We obviously get along." And who knows – years from now we could be like, "All right, let's make a record." It could easily happen.

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Tickets On Sale For Spring Wharton Event

“Matilda The Musical” is coming to Wharton Center as part of the MSUFCU Broadway at Wharton Center series. Produced by the Royal Shakespeare Company and the Dodgers, the first national tour of “Matilda The Musical” will be featured on Tuesday, April 19-Sunday, April 24, 2016 in the Cobb Great Hall. Tickets to see “Matilda The Musical” are now on sale at the official source to purchase Wharton Center tickets online, www.whartoncenter.com, at the Auto Owners Insurance Ticket Office or by calling 1-800-WHARTON. Prices begin at \$38, \$25 for Michigan State University students.

Winner of 50 international awards, including four Tony Awards and a record breaking seven Olivier Awards including Best Musical, “Matilda The Musical” is based on the beloved novel by best selling author Roald Dahl (“Charlie and the Chocolate Factory,” “Fantastic Mr. Fox”). It is the story of an extraordinary girl who dreams of a better life. Armed with a vivid imagination and a sharp mind, Matilda dares to take a stand and change her destiny.

“Matilda The Musical” is directed by Tony Award winner Matthew Warchus (“God of Carnage”), who helps this production with a book by Tony Award

winning playwright Dennis Kelly and music and lyrics by Australian comedian, musician and composer Tim Minchin. The production has sets and costumes by Tony Award winner Rob Howell with choreography by Peter Darling, orchestrations, additional music and musical supervision by Christopher Nightingale, lighting by Tony Award winner Hugh Vanstone, and sound by Simon Baker.

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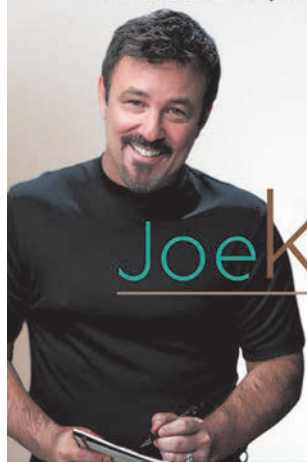
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Happenings

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Thursday, Nov. 26

MAC Health 2 p.m. Mondays by appointment only. Michigan AIDS Coalition (MAC), **Ferndale**. www.MichiganAIDScoalition.org

Sunday, Nov. 29

Pride NA 6:30 p.m. Confidential and anonymous. Open to all individuals impacted by addiction. Kalamazoo Gay and Lesbian Resource Center, 629 Pioneer St., **Kalamazoo**. 269-349-4234. www.Kglrc.org

Tuesday, Dec. 1

Fall Into the Red Service, performance group, dinner. Fall Into The Red, 22331 Woodward Ave., **Ferndale**. www.FallIntr.com

Annual World AIDS Day Detroit Giving Breakfast

8 a.m. With special guest Jeanne White-Ginder, mother of Ryan White. Tickets: \$50-75. World AIDS Day Detroit, 1526 Broadway St., **Detroit**. 313-237-SING. www.Wadbreakfast.eventbrite.com

Names Memorial Quilt Display

9 a.m. Oakland University Gender and Sexuality Center, 2200 N. Squirrel Road, **Rochester**. 248-370-2030. www.Oakland.edu/csa/gsc

World AIDS Day Youth Symposium

11:30 a.m. Keynote speaker: Jeanne White-Grinder, mother of Ryan White. Free. World AIDS Day Detroit, 1526 Broadway St., **Detroit**. 313-237-SING. www.WorldAIDSdayus.org

Viral Apartheid: The Rise of HIV

Exceptionalism 12 p.m. With special guest Todd Heywood. Oakland University Gender and Sexuality Center, 2200 N. Squirrel Road, **Rochester**. 248-370-2030. www.Oakland.edu/csa/gsc

Film Screening: How to Survive a

Plague 3 p.m. Oakland University Gender and Sexuality Center, 2200 N. Squirrel Road, **Rochester**. 248-370-2030. www.Oakland.edu/csa/gsc

People Who Care About People With

AIDS 7 p.m. Light refreshments. All are welcome. People Who Care About People With AIDS, 1519 Martin Luther King Jr., Blvd, **Detroit**. spiritofhope@gmail.com

Raw Deal: Barebacking in America

7 p.m. With special guest Todd Heywood. Oakland University Gender and Sexuality Center, 2200 N. Squirrel Road, **Rochester**. 248-370-2030. www.Oakland.edu/csa/gsc

World AIDS Day Detroit Benefit Concert

featuring American Idols 7 p.m. Tickets: \$30-85. World AIDS Day Detroit, 1526 Broadway St., **Detroit**. 313-237-SING. www.WorldAIDSdayus.org

Wednesday, Dec. 2

Affirmations Run Club 6 p.m. An informal group of runners and walkers of all abilities. Seasoned marathoners, beginner walkers, and everything in between! Everyone is welcome, just show up! Affirmations, 290 W. Nine Mile Road, **Ferndale**. 248-398-7105. jproctor@goaffirmations.org www.Goaffirmations.org www.Goaffirmations.org/programs-services/community-events-activities

Thursday, Dec. 3

Trivia with Terry and Thirsty Thursday Half off beer and well drinks with student ID. \autBAR, 315 Braun Ct., **Ann Arbor**.

734-994-3677. www.Autbar.com

Bowl-A-Rama 6 p.m. Ruth Ellis Center, 3490 12 Mile Road, **Berkley**. 248-321-3635. www.Ruthelliscenter.org

Connections 6 p.m. Open to all LGBTQ and Ally youth from 13-18. Join us to meet other LGBTQ and Ally teens and socialize in a safe space. Kalamazoo Gay and Lesbian Resource Center, 629 Pioneer St., **Kalamazoo**. 269-349-4234. www.Kglrc.org

Tattoo (Tatuagem) 7 p.m. Lusophone Film Fest, 233 S. State St., **Ann Arbor**. www.lsa.umich.edu/rl/events/lusophonefilmfest

Friday, Dec. 4

Bistro Fridays Special menu. \autBAR, 315 Braun Ct., **Ann Arbor**. 734-994-3677. www.Autbar.com

Saturday, Dec. 5

turnIT aut \autBAR, 315 Braun Ct., **Ann Arbor**. 734-994-3677. www.Autbar.com

Educator Workshop The Hampson

Foundation 9 a.m. The workshop will include a full complement of activities sessions exploring both content and pedagogical strategies, a conversation with Hampson about his passion for telling the story of history and culture through classic song, and a special live performance focusing on songs related to the material covered in the workshop. This workshop is ideal for Language Arts, History, Social Studies, and Performing Arts teachers. K-12 Educator Workshops are professional development opportunities for teachers to explore arts-based classroom strategies that nurture student learning and support student achievement goals across various areas of the curriculum. University Musical Society, 1100 Baits Drive, **Ann Arbor**. 734-764-2538. umstix@umich.edu www.org/performance/educator-workshop-hampson-foundation/

Lunch With Santa 11 a.m. Tickets: \$5. St. Paul United Church of Christ, 31654 Mound Road, **Warren**. 586-264-4777.

Sunday, Dec. 6

Salsa Night Salsa lessons. \$1 tacos. \autBAR, 315 Braun Ct., **Ann Arbor**. 734-994-3677. www.Autbar.com

Monday, Dec. 7

A Streetcar Named Desire The Ringwald Theatre, 22742 Woodward Ave., **Ferndale**. 248-545-5545. www.TheRingwald.com

LGBT Sexual Assault Survivors Groups

5:30 p.m. Any member of the LGBT community, age 13-24, who is a survivor of sexual assault is welcome. This group is open to all LGBTQIAP individuals who have experienced any form of sexual assault in their lifetime. Kalamazoo Gay and Lesbian Resource Center, 629 Pioneer St., **Kalamazoo**. 269-345-5595. nschneider@ywcakalamazoo.org www.Kglrc.org

Jazz in the Gallery 7:30 p.m. A local jazz ensemble, led by pianist and vocalist Brandon Perkins, rehearses and holds casual jam sessions in the Pittmann-Puckett Gallery every Monday evening. Jazz in the Gallery is open to the public. Affirmations, 290 W. Nine Mile Rd., **Ferndale**. 248-398-7105. khug@goaffirmations.org <http://goaffirmations.org/programs-services/community-events-activities>

Tuesday, Dec. 8

Karaoke and Half Off Wine \autBAR, 315 Braun Ct., **Ann Arbor**. 734-994-3677. www.Autbar.com

Free STI & Rapid HIV Testing

5 p.m. Gonorrhea, Chlamydia, Trichomoniasis, Syphilis. Affirmations, 290 W. Nine Mile Road, **Ferndale**. 248-398-7105. www.Goaffirmations.org

Equality Knowledge Project Speaker

Series 5:30 p.m. Different speaker and presentation each time. Equality Research Center, 329 King Hall, **Ypsilanti**. 734-487-3032. equality.emu@gmail.com

NEST 6:30 p.m. Monthly Bible study focusing on LGBTQ issues. Kalamazoo Gay and Lesbian Resource Center, 508 Denner St., **Kalamazoo**. www.Kglrc.org

Lighting the Path of Justice, Interfaith

Service of Affirmation 7:30 p.m. St. Clare's Episcopal Church and Temple Beth Emeth are hosting the Annual Interfaith Service of Affirmation for transgender, bisexual, lesbian, gay, queer, questioning and intersex people, their families, friends and allies. The theme for this year's service is Lighting the Path of Justice and featured speaker will be The Rev. Roland Stringfellow, Senior Pastor of the Metropolitan Community Church of Detroit. There will be a free-will offering for ACLU Michigan's LGBT Legal Project to support their important work of advocating justice and equal rights for all. Music will be provided by Jean Chorazyczewski, Lori Fithian, Katie Geddes, Brandy Sinco, Lax Slomovits, and David Vaughn. St. Clares Episcopal Church & Temple Beth Emeth & WelcomingAffirming Faith Communities, 2309 Packard, **Ann Arbor**. 248-219-7583. joburleigh@aol.com

MUSIC & MORE

The Ark "Mr. B." Tickets: \$20. The Ark, 316 S. Main St., **Ann Arbor**. 8 p.m. Nov. 28. 734-761-1800. www.Theark.org

Classical

Sound Board "The Detroit Symphony Musicians Holiday Pops Concert" Sound Board, 2901 Grand River Ave., **Detroit**. 7:30 p.m. Nov. 29. 800-745-3000. www.Motorcitycasino.com

University Musical Society "Handel's Messiah" The holiday season in Ann Arbor is never officially underway until Handel's Messiah is performed at Hill Auditorium. An eagerly anticipated holiday season tradition, these performances are ultimately the heart and soul of UMS, dating back to the organizations founding and first concerts in the 1879-80 season. The performances connect audiences not only with the talented artists on stage but also with the friends and family who attend each year. In a true community tradition, Messiah features the Ann Arbor Symphony Orchestra and the voices of the Grammy Award-winning UMS Choral Union (2006 Best Choral Performance). These performances also mark the debut of the UMS Choral Unions new music director, Scott Hanoian. Hill Auditorium,

Editor's Pick



Dor Guez, "The Architect," Scanogram 4 (2015) from "The Sick Man of Europe."

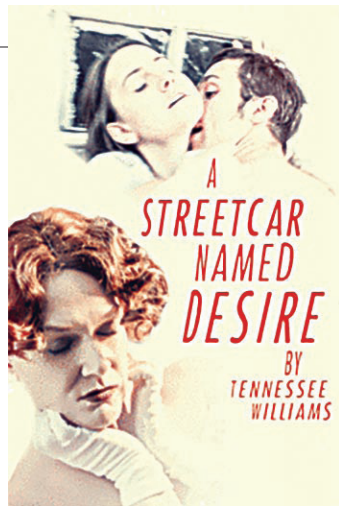
The Museum of Contemporary Art Detroit (MOCAD) is currently exhibiting "The Sick Man of Europe." In this exhibit, Jerusalem-born artist Dor Guez focuses on the plight of marginalized communities in the Middle East. The five-part work by Guez, of mixed Christian-Palestinian and Jewish-Tunisian heritage, reflects on the military history of the Middle East through the creative practices of individual soldiers from the region.

"The Sick Man of Europe" was first used in the mid-19th century to describe the Ottoman Empire, but has since been applied at one time or another to nearly every country in Europe and the Middle East. For his installation at MOCAD, Guez appropriates the proverbial "Sick Man" by reconstructing him as an individual and an allegory. Caught in the crosshairs of history, the "Sick Man" blurs the categories of perpetrator and victim, soldier and citizen. "The DEPE Space project space gives artists who work with social issues a platform for larger meaningful conversations to happen with our communities.

MOCAD is located at 4454 Woodward Ave., Detroit. For more information, visit www.mocadetroit.org.



Editor's Pick



As part of its "The Ringwald Does The Classics" series, Ferndale's Ringwald Theatre is performing Tennessee Williams's famous work, "A Streetcar Named Desire." "Streetcar" reveals to the very depths the character of Blanche du Bois, a woman whose life has been undermined by her romantic illusions, which lead her to reject - as far as possible - the realities of life with which she is faced and which she consistently ignores. The pressure brought to bear upon her by her sister, with whom she goes to live in New Orleans, intensified by the earthy and extremely "normal" young husband of the latter, leads to a revelation of her tragic self-delusion and, in the end, to madness.

All purchased tickets must be picked up by five minutes to showtime. Although a date may be sold out online, there may be a small block of rush tickets available at the box office 45 minutes before each show. Online ticket sales

end one hour before performance time. To get tickets after the cut-off, simply come to the box office which opens 45 minutes before showtime. Ticket prices range through \$25.

"Streetcar" runs through Dec. 7. The Ringwald Theatre is located at 22742 Woodward Ave., Ferndale. For more information, call 248-545-5545 or visit www.theringwald.com.

825 N. University Ave., Ann Arbor. Dec. 5 - Dec. 6. 734-764-2538. www.Ums.org/multiperformance/handels-messiah/

Concerts

The Ark "Matt Watroba" Tickets: \$15-25. The Ark, 316 S. Main St., Ann Arbor. 8 p.m. Nov. 27. 734-761-1800. www.Theark.org

The Ark "Gemini" Tickets: \$10. The Ark, 316 S. Main St., Ann Arbor. 1 p.m. Nov. 29. 734-761-1800. www.Theark.org

The Ark "Irish Christmas in America" Tickets: \$20. The Ark, 316 S. Main St., Ann Arbor. 8 p.m. Nov. 30. 734-761-1800. www.Theark.org

University Musical Society "Takacs Quartet" Haydn Quartet No. 57 in C Major, Op. 74, No. 1. Timo Andres Strong Language. Dvo k Quartet No. 14 in A-flat Major, Op. 105. Rackham Auditorium, 915 E. Washington St., Ann Arbor. 7:30 p.m. Dec. 2. 734-764-2538. Ums.org/performance/1516-takacs-quartet-2/

Wharton Center for the Performing Arts, Michigan State University "Hugh Masekela and Larry Willis" Tickets: \$15+. Wharton Center for the Performing Arts, Michigan State University, 750 E. Shaw Lane, East Lansing. 7:30 p.m. Dec. 1. 800-WHARTON. www.Whartoncenter.com

THEATER

Herb the Green Knight Detroit Repertory Theatre, 13103 Woodrow Wilson, Detroit. Through Dec. 27. 313-868-1347.

ART 'N' AROUND

DIA "30 Americans" Detroit Institute of Arts, 2100 Woodward Ave., Detroit. Oct. 1 - Jan. 18. 313-833-7900. www.Dia.org

Flint Institute of Arts "The Art of Collecting" Flint Institute of Arts, 1120 E. Kearsley St., Flint. Nov. 27 - Jan. 3. 810-234-1695. www.Flintarts.org

MOCAD "The Sick Man of Europe" Museum of Contemporary Art Detroit, 4454 Woodward Ave., Detroit. Oct. 27 - Jan. 3. 313-832-6622. www.Mocadetroit.org

MOCAD "United States of Latin America" Museum of Contemporary Art Detroit, 4454 Woodward Ave., Detroit. Sep. 23 - Jan. 3. 313-832-6622. www.Mocadetroit.org

robert kidd gallery "Rick Vian: Using the Whole Chicken" robert kidd gallery, 107 Townsend St., Birmingham. Nov. 21 - Dec. 19. 248-642-3909. www.Robertkiddgallery.com

UMMA "The Art of Tyree Guyton: A Thirty-Year Journey" University Of Michigan Museum Of Art, 525 S. State St., Ann Arbor. Aug. 22 - Jan. 3. 734-763-4186. www.Umma.umich.edu

UMMA "Jem Cohen: Life Drawing" University Of Michigan Museum Of Art, 525 S. State St., Ann Arbor. Aug. 15 - Nov. 29. 734-763-4186. www.Umma.umich.edu



Editor's Pick

As soon as Thanksgiving turkey is put in the fridge, get ready for Christmas by planning for "Christmas in Plymouth." The event is all about "city sidewalks, dressed in holiday style... a unique shopping and dining experience."

Shopping specials for the event begin at 5 p.m. in Downtown Plymouth. There will be horse and carriage tours, the barbershop quartet by Evenin' Gentleman, a brass ensemble from Schoolcraft College and a "community sing" event led by the Cherry Hill Singers.

Christmas in Plymouth will run from 5-9 p.m. on Dec. 10 in Downtown Plymouth. Visit www.downtownplymouth.org for more information.





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Deep Inside Hollywood

BY ROMEO SAN VICENTE

'King Cobra' will bring you porn, murder and James Franco

James Franco, in his seemingly never-ending quest to confer gayness upon himself via association, is producing what is sure to be a shocker of a movie called "King Cobra." The film, directed by Justin Kelly – who also worked with Franco on the upcoming "I Am Michael" – will tell the ugly story of the 2007 murder of gay adult film producer Bryan Kocis, who had worked with gay porn star Brent Corrigan. Franco will act in the film, alongside Christian Slater (who'll play Kocis), Molly Ringwald and Disney Channel's "Teen Beach" and "Teen Beach 2" alum Garrett Clayton as Corrigan. That last bit of casting makes perfect sense in a Vanessa-Hudgens-and-Selena-Gomez-starring-in "Spring Breakers" way. Can't wait for this one to make us all feel creepy and upset.

'Bear With' Cheyenne Jackson and Lea Delaria

Perhaps shockingly, the upcoming film "Bear With Us," starring Cheyenne Jackson, has absolutely nothing to do with "bears" as they are commonly understood in the complex taxonomy of gay subcultures. No, this horror comedy is about an actual bear. An actual angry, murderous and hungry bear that happens upon a charming cabin in the woods where a couple is getting engaged. The official word is "think Jaws, with a bear," but knowledgeable fans of killer animal movies know better: think "Grizzly," that 1976 ripoff of "Jaws" about a giant ursine killer, or, in the words of that cheap B-movie's lurid ad campaign, "18 feet of gut-crunching, man-eating terror." Come to think of it, "Grizzly" was kind of a horror comedy, too. Anyway, "Bear With Us," from indie filmmaker William J. Stribling, is currently in production, and will also feature – although we don't know exactly what this means at the moment – "the voice of" "Orange is The New Black" star Lea DeLaria. Mysterious.

Gay spying on Ben Wishaw

"London Spy," airing very soon in the U.K. on the BBC, sounds like just the ticket for all the "Sherlock" fans out there. Bond film regular Wishaw plays a gay young man deeply involved in London nightlife, who then finds himself in an unlikely romantic relationship with a man from the British Secret Intelligence Service (Edward Holcroft, from "Kingsman: The Secret Service"). When that man dies, Wishaw's character is whisked into the world of espionage to uncover the truth. The five-part miniseries was written by gay



Cheyenne Jackson. Photo: Kath Click

writer Tom Rob Smith and is directed by Jakob Verbruggen ("The Fall"). Right now the show is mentioned on BBC America's website, but no dates are set. That means it's time to begin politely pestering them.

YouTube stars hit 'Dirty Thirty'

We don't know if you're allowed to be a YouTube sensation after 30, but if all goes as planned, the trio of Hannah Hart, Mamrie Hart and Grace Helbig will have moved on to bigger things when their next film, "Dirty Thirty," is digitally released by Lionsgate. The YouTube stars – lesbian comic Hannah Hart's "My Drunk Kitchen" is a favorite there – have already had a streaming hit with "Camp Takota," so Lionsgate decided to snap them up for this next project, which is about a birthday party gone wild. There's no other information available yet, but the pattern of millennial female comics using the Internet to launch themselves is set thanks to breakout hits like "Broad City," and this feels like the beginning of big things for these young women. The countdown to more famous funny people jumping on their bandwagon begins now.

Romeo San Vicente's kitchen features what might be considered a surprising number of carb-rich treats for someone with such perfect abdominal muscles. You mad? He can be reached care of this publication or at DeepInsideHollywood@qsyndicate.com.



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ANNOUNCEMENTS - COMMUNITY SERVICES

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BTL Pet of the Week - Mikey!

Meet Mikey! This 3-year-old Pit Bull mix is a very loving and calm fellow. He loves to meet all sorts of people and is sure to steal the heart of everyone he meets. The adoption fee includes sterilization, age-appropriate vaccinations, the MHS Adoption Guarantee and much more. For more information, visit or call the MHS Detroit Center for Animal Care at (313) 872-3400 and provide the pet ID number, 816802.



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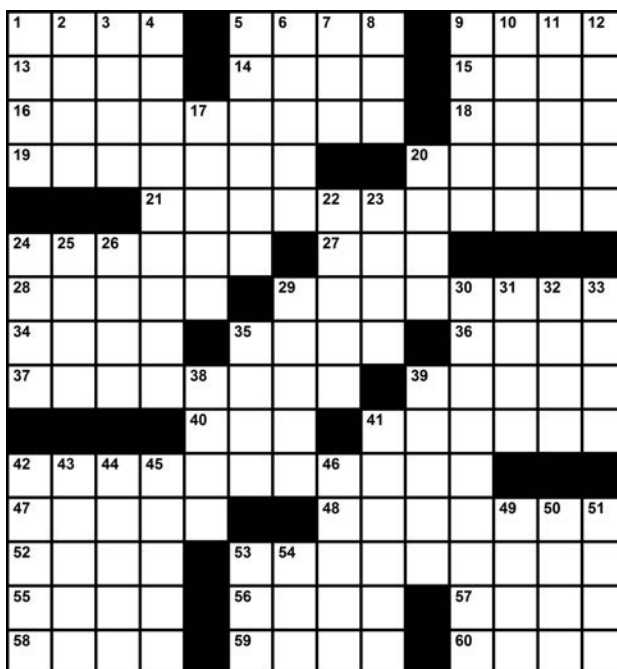
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Q Puzzle



- 34 Strip a fruit
35 More of the saying
36 "You've Made ___ Very Happy"
37 Part of Adam that was used to make Steve?
39 Sport of Pam Parsons, for short
40 Stepchild of Caitlyn
41 Shook up
42 End of the saying
47 Circles over Mary and Peter
48 Blow away
52 Norse port
53 '50s Hollywood heartthrob who lives on a horse ranch
55 Pansy supporter
56 Sometime defender of gay rights
57 Isherwood's "___ Camera"
58 Seemingly forever
59 Shout to Nellie
60 Stuff for oral gratification

- 11 Robert of "Spenser: For Hire"
12 Transsexual Richards
17 Dahl's Willy
20 Ruck of "Spin City"
22 Place where you go straight
23 Per bottle of soda?
24 Suckers
25 Load
26 Gillette brand
29 ___ donna
30 In an early stage
31 Drop from a duct
32 Lesbos, for one
33 Opening for cock
35 Singer Williamson
38 Barely earns, with "out"
39 Language group including Zulu
41 Lover of Abraham
42 "___ were the days ..."
43 Can't help but
44 First name in talk
45 Inn array
46 Gertrude painter
49 Colorado neighbor
50 Sea bottom captain
51 Pull out your shooter
53 "I taught I ___ a puddy tat!"
54 Interjection for Magnus Hirschfeld

From the Horse's Mouth

Across

- 1 Petty of "A League of Their Own"
5 Be reminded of S&M, e.g.
9 Arc on Bernstein's music score
13 Nuts
14 Hunted animal
15 Rubber on a rim
16 Start of a hopeful saying by

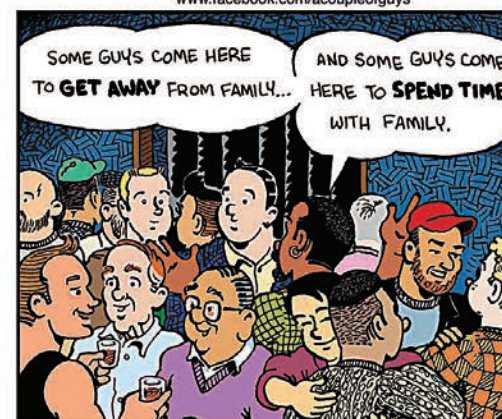
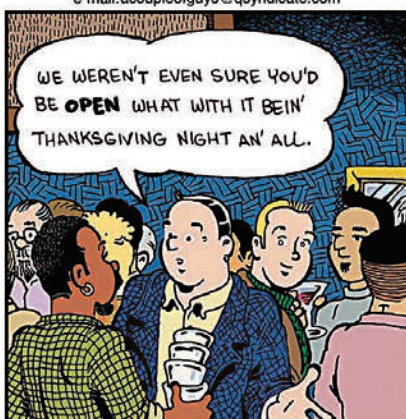
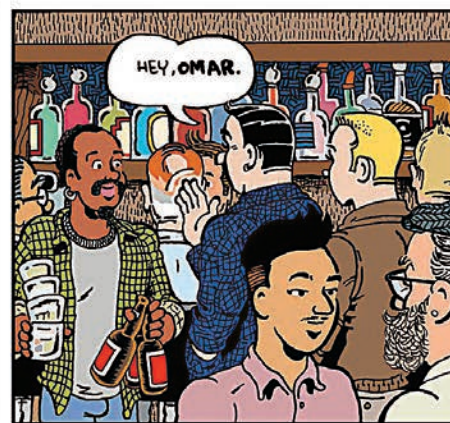
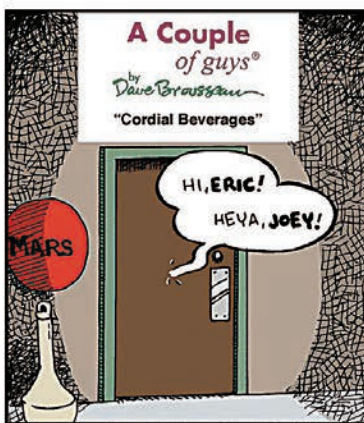
53-Across

- 18 Cole Porter's "___ Love Again"
19 "Get your ass moving!"
20 Toklas of 20th century Paris
21 More of the saying
24 "West Side Story" gang
27 Emissions-watching org.
28 Insurance giant
29 Like "kweer," to spellers

Down

- 1 Unit of flagellation
2 Melville novel about a mutiny
3 Gambol
4 Tina dumped him
5 Insects that really suck
6 El Greco's homeland
7 Ship, to seamen
8 Ball in the skull
9 Liquor source in Gomer's Mayberry
10 Casino ceiling

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