

# THE G-BEAT

Guys Responding and Demanding Safety

A Program of AIDS Community Resources

April/May 2003  
Vol. V, Issue II

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## AIDS Vaccine Fails

By MATT JOHNS

365Gay.com Newscenter-Los Angeles Bureau

Results of human testing on the world's first potential AIDS vaccine show it may have very limited use. The vaccine, being developed by VaxGen Inc. does not appear to protect most people from the disease, but showed promise in protecting blacks and Asians, the company said.

In releasing the test results, VaxGen said the vaccine only reduced the expected rate of infection by 3.8 percent in the high-risk people who volunteered for the study. But the expected infection rate for the black volunteers who received the vaccine was reduced by 78 percent. The rate was reduced by 67 percent for all nonwhite volunteers other than Hispanics.

The human trials began four years ago. VaxGen immunized two-thirds of 5,400 volunteers in the United States, Canada, the Netherlands and Puerto Rico for the Phase III

trial of the vaccine. They included 5,000 gay or bisexual men and 400 women considered to be at high risk of getting HIV. The others were given placebos.

The trials were criticized by some AIDS-care workers who said it could encourage risky behavior. Even if the vaccine proved effective in the general population, there might be no way to tell if it has worked on a particular individual. During the testing period, the company counseled patients

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## MID-LIFE COMING OUT CHAT rooms

Way to Arrange Risky Sexual Encounters

By: JOHN PACKER

I guess I'm an oddity in the gay world, in that I didn't come out until I reached my mid-forties. And by 'coming out', I mean having sex with a man for the first time. I'm not sure what my reasons were for waiting so long, but once out, one of the main issues I had to address was dealing with the whole HIV thing.

I had heard all these muffled ruminations about it while living in the straight world for some 20 odd years, but never paid much attention to it. It was all just so much background noise. However, once crossing over into the gay community, it was another story - it

became a real issue in my life. This was suddenly something that I had to be concerned about, and no longer just a problem belonging to some anonymous group of people I read about in the newspaper. I was now one of them - those exotic gay boys; the ones I had secretly longed to be with for so many years. 'Joining the club' certainly came at a price - dealing with a whole set of anxieties.

I was 'out', but afraid to do anything. I guess I was suffering from AIDS-aphobia. Intellectually, I suspected HIV was very hard to catch, but emotionally I panicked every time I got into

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THE ASSOCIATED PRESS

Chat rooms on gay Web sites are becoming a common place for arranging risky sexual encounters, a survey found, as experts worry about a possible upswing in HIV infections.

Research released Tuesday suggests that for some, the Internet serves the same hazardous purpose as gay bathhouses did in the early 1980s, when the AIDS virus first spread rampantly among homosexual men.

"The Internet is a new venue associated with high-risk sex," said Sabina Hirshfield. "It is a quick and

easy way to meet partners."

The AIDS epidemic has leveled off in the United States over the past decade. The Centers for Disease Control and Prevention estimates 40,000 new HIV infections occur annually. Nevertheless, a variety of new data raise concern that AIDS may once again be increasing.

The report by Hirshfield and colleagues from the Medical and Health Research Association of New York City was among several on the spread of AIDS presented at the 10th Conference on Retroviruses in Boston.

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# War in Iraq?

## GLBT COMMUNITY REMAINS DIVIDED

Source taken from: [Gay.com](#)

The Bush administration has said that a U.S.-led war with Iraq is imminent, and public opinion remains divided.

Many gay groups, including the National Gay and Lesbian Task Force, have signed on with the anti-war movement, but other groups are supportive. GLBT writers and politicians are lining up on both sides of the issue, too.

Columnist Paula Martinac writes, "I can't sign off on war with Iraq simply because that country might do damage someday"

In a pro-war commentary, Dale Carpenter argues that this war isn't a "gay issue" and that "it's foolhardy to think 100 or so inspectors will ferret out all the weapons ... in a hostile country

the size of California."

The threat of war with Iraq raised a proposal to bring back the draft, which prompted the author of "don't ask, don't tell," Charles Moskos, to suggest that a draft should be accompanied by an end to the gay ban. (see story "Draft Trumps Gay Ban." - page 3)

Days later, 15 gay and lesbian military personnel appealed to Congress for a repeal on the gay ban in the event of draft.

C. Dixon Osburn, head of the Servicemembers Legal Defense Network, said the possibility of war and the current climate of terrorist threats underscore the need for Congress to repeal the military's policy against gay and lesbian personnel "for the sake of national security."

# LGBT Protesters

## Join Anti-War Demos

By **BETH SHAPIRO** 365Gay.com Newscenter-New York Bureau

Tens of thousands of LGBT activists joined millions of anti-war protesters in cities around the world. The demonstrations clogged streets in cities from New York to Los Angeles. In Europe, an anti-war protest in London was the biggest demonstration in British history.

Protesters from LGBT youth groups and other community organizations in New York gathered at Public Library on 5th Avenue between 42nd & 41st Streets and walked en masse to join with the main protest on 1st Avenue.

"Just because you have the biggest gun does not mean you must use it," Martin Luther King III told the as he stood before an enormous banner reading: "The World Says No To War."

Gay groups in San Francisco helped give the protest in that city a definite flower power air. Reminiscent of the anti-war protests of the 60s, the demonstration featured singers, actors, poets and street performers. A myriad of LGBT community and political activists formed the Out Against the War Coalition to voice opposition to the impending war with Iraq.

In Los Angeles, thousands of people including a large number of celebrities marched down Hollywood Boulevard.

Gay groups, including the NGLTF protested in Washington, D.C. Other demonstrations were held in Chicago and smaller cities across the US.

Protests in Toronto and Montreal also attracted large numbers of gay demonstrators.

In London, members of Out Against The War joined the estimated 1 million people who demonstrated in Hyde Park. In a statement the group denounced the Blair government for continuing discrimination against gays and lesbians while promoting a war to end civil rights abuses in Iraq.

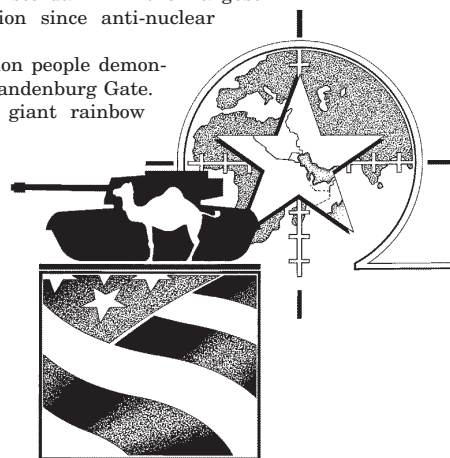
In Rome, more than a thousand LGBT anti war protesters demonstrated on the Via Marco Polo.

The protesters carrying rainbow flags were led by Italian gay rights group Arcigay and representatives from most gay groups in Italy. The rainbow was also chosen by most Italian anti-war activists, as well.

Bolstered by gay rights groups, more than 70,000 people marched in Amsterdam in the largest Netherlands demonstration since anti-nuclear rallies of the 1980s.

In Berlin, half-a-million people demonstrated in front of the Brandenburg Gate. Gays marched under a giant rainbow banner.

In Sydney Australia, GLBT group Enola Gay, named after the plane that dropped the atomic bomb on Hiroshima in 1945, organized a pink protest at the anti-war rally in Hyde Park on Sunday 16 February.



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GRADS

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# ‘Don’t ask’ *author:* “Draft trumps gay ban”

By TOM MUSBACH [Gay.com](http://Gay.com) / [PlanetOut.com](http://PlanetOut.com) Network

After two Democratic congressmen proposed this week a reinstatement of the national draft for military service, the primary architect of the Pentagon’s “don’t ask, don’t tell” policy said it should be scrapped in the event of a draft.

The idea of restarting the draft, proposed by Reps. Charles Rangel, D-N.Y., and John Conyers, D-Mich., generated much publicity, as the Bush administration is considering a possible war with Iraq. The two congressman suggested they will ask the U.S. House of Representatives to consider the proposal. Mandating military service among

young Americans, however, would conflict with the “don’t ask” ban against openly gay and lesbian personnel.

Charles Moskos, the influential military sociologist who helped craft the ban, said it should be abolished if the draft is re-enacted, because mandatory service represents a “higher virtue” than the privacy considerations of heterosexual soldiers.

In remarks to researchers at the Center for the Study of Sexual Minorities in the Military, Moskos added that a draft could turn “don’t ask, don’t tell” into a loophole.

“You can’t use a gay ban with a draft because that would make it too easy for people to get out,” he said.

The likelihood of bringing back the draft is practically nil, many critics say, especially with the proposal’s lack of support from the Republican leadership in the House.

David Smith, communications director for the Human Rights Campaign, said the draft idea was “not politically viable,” and the military’s gay ban should be abolished on its own lack of merit.

“Moskos should reconsider the (‘don’t ask’) policy regardless of the draft,” Smith

added.

In a New York Times editorial, Rep. Rangel admitted that his proposal is essentially anti-war, as he voted against giving President Bush authority to attack Iraq.

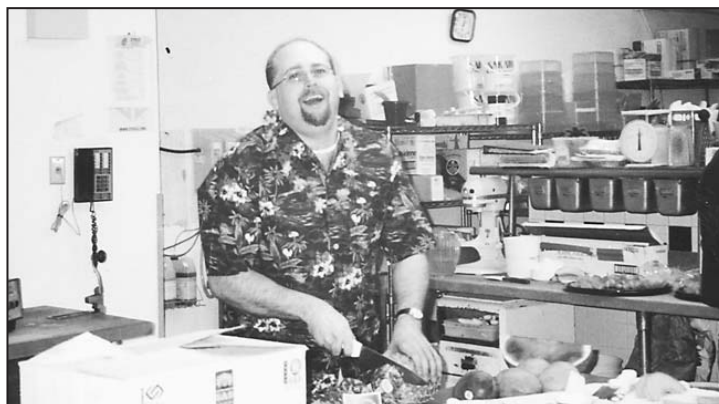
“I believe that if those calling for war knew that their children were likely to be required to serve — and to be placed in harm’s way — there would be more caution and a greater willingness to work with the international community in dealing with Iraq,” Rangel wrote.

## The Café Celebrates *Hawaii Night*

February 20, 2003



*At Left: Mark Morris and Gary Pforter show us a dance!*



*Chris works on getting the food ready!*



*Regulars at The Café pose for the camera.*

### TWO GOOD REASONS TO GET AN HIV TEST.

1. IF YOU'RE INFECTED, YOU CAN GET TREATMENT THAT MAY HELP YOU LIVE A LONGER, HEALTHIER LIFE.

2. IF YOU'RE NOT, YOU CAN LEARN HOW TO STAY THAT WAY.

**Call 1-800-541-AIDS**



State of New York Department of Health

# Q & A

with Dr. Jeffrey Klausner

(Dr. Jeffrey Klausner is the director of the STD Prevention and Control Services at the San Francisco Department of Public Health)

## THE TRUTH ABOUT BAREBACKING

**On barebacking, my boyfriend (top) has had three negative tests over nine months and I have had one. Are we pretty well OK?**

If you mean negative HIV tests, then it is unlikely that either of you are HIV infected, but to be sure, both partners need to be monogamous and you should get another test.

The risk of barebacking, however, goes beyond HIV. People can transmit herpes, gonorrhea, syphilis and chlamydia to each other, too — so both partners should also be tested and treated, if infected, for these infections. There should be testing of the urine and rectum for gonorrhea and chlamydia. Both of these are treatable infections and can lay dormant in your body without symptoms. Ask your doctor for a full spectrum of STD tests for the different places you have sex — throat, penis and/or rectum.

If either of you are barebacking with each other and having other partners, it's important to have safe sex with the other partners so you don't bring anything home.

## KISSING & MUTUAL MASTURBATION

**What STDs are generally transmitted through kissing?**

It is very rare to transmit STDs like gonorrhea, chlamydia or syphilis through kissing. Likely the only STD that can be transmitted by kissing is herpes — the one that gives blisters or fever sores on the lip. Other than that, go ahead kiss away.

**If I make out with a stranger (or perhaps two) every weekend, should I get tested for HIV?**

The risk of HIV from kissing is very, very, very, very, very, low and likely zero. Saliva has natural anti-HIV factors that inhibit the virus. If kissing were an efficient means of HIV transmission, we'd see a lot more HIV in family members, children and other "low-risk" groups. Granted, they don't deep-tongue kiss, but we know that sex, injection drug equipment sharing and transfusions are the only ways HIV is transmitted.

**I like mutual masturbation. I also have dry skin areas on my hands from washing them often at work. These areas can become raw but not to the point of bleeding. How dangerous is it to have cum on my hands in this condition?**

I assume you mean dangerous in terms of viruses like hepatitis B or herpes, because there have been zero reported cases of HIV from skin exposure to semen. Hepatitis B and other viruses like wart viruses have been transmitted this way. Get

the hepatitis shots and you won't have

**If limiting contact to kissing for any STDs? If yes, which ones?**

Without any oral-genital contact, consider this very safe sex. I think then from mutual masturbation between. There is some risk for HPV — genital

**I've started meeting people fitting oral, kissing, jlo, touching anal, but without insertion. How where?**

A good start in an STD check up. The full-court screen includes or urethral tests for chlamydia and chlamydia if a person has had anal herpes, syphilis and HIV, if at risk. doctor checks the penis, lymph nodes, rashes, lumps, bumps or warts. City clinic) provides these exams for a small look for your local Department of Public Health

## HOW SAFE IS ORAL SEX?

**I was wondering how safe oral sex is — giving and receiving.**

Questions about oral sex are probably the most common ones I get. We recently completed a study of men in San Francisco who have only had oral sex and found zero new HIV infections. But, other STDs like syphilis, gonorrhea, chlamydia and herpes are definitely transmitted through oral sex, and oral sex has likely contributed to our current syphilis outbreak.

**My lover had HIV and Hepatitis C. We only had oral sex. How safe am I?**

Oral sex is considered a low-risk sexual activity. There have not been enough studies done that separate oral sex from other sexual activities, so it's not clear exactly how low the risk of HIV transmission is, although it is believed to be very low. (If you're in San Francisco and want to participate in the HOT [HIV Oral Transmission] study, call 1-877-ORAL-HIV.)

The sexual transmission of Hepatitis C is very rare as well. Hepatitis C is mostly transmitted through contaminated needles, blood transfusions and shared injection equipment. When researchers study Hepatitis C in semen it is very difficult to find the virus, and when they do the amount is very low.

**It's been said that if your gums are bleeding, you could possibly contract HIV via oral sex. Now I'm puzzled.**

You're right, that's what has been said. But there are no data that show that bleeding gums, sore throats, bad teeth or mouth sores actually increase the risk of transmission. For years, either we have not had data or had bad data. Now, reliable data shows the risk of HIV from oral sex is very, very low. As you know, many of these infections are easily diagnosed with simple tests and are readily treated. So my advice is: Enjoy oral sex and get regular check-ups. A good check-up includes throat testing for gonorrhea, rectal testing for gonorrhea and chlamydia, urine testing for gonorrhea and chlamydia and blood tests for herpes, syphilis and HIV. We call that the grand slam!

**I was recently with a man and he happened to start kissing my chest while I had a white T-shirt on. We noticed that where he was kissing, there was a stain, and there was apparently some blood in his saliva — he bit his lip earlier presumably. He performed oral sex on me as well. I am very worried about Hep. B or C and/or HIV.**

Saliva has natural anti-HIV factors and there have been no recent reports of HIV from oral sex. Hep B can be transmitted via oral sex and kissing, but there are very good shots to prevent Hep B. So if you are concerned, get the shots. Hep C has not been transmitted via kissing.

**I heard that there have been reports of HIV being spread through oral sex, and other sources have said there haven't been any reports of this. What is the truth?**

The truth from the University of California San Francisco and the San Francisco Dept. of Public Health is that the risk of transmission of HIV via oral sex is very, very, very, very, very low. Other sources of information in the U.K. and elsewhere are not based on sound epidemiological data. But remember, other STDs can be transmitted easily via oral sex. So regular check-ups are in order. In those check-ups, get vaccinated against hepatitis A and B, get screened in your throat, ass and urine for chlamydia and gonorrhea and get blood tests for HIV, syphilis and herpes. DEMAND these tests from your doctor, clinic or health department. These tests are out there and essential to maintaining good sexual health. Be kind, be cool and be safe.

**What is the latest thinking about unprotected oral sex between men?**

A very recent study from Spain confirmed earlier studies that it is very, very uncommon for oral sex to transmit HIV. That said, oral sex can transmit gonorrhea, chlamydia, herpes and syphilis, so sexually active men and women who have oral sex should get regular STD check-ups at least every six months, if not more, depending on how many new partners folks have.

## HOW SAFE IS DOUCHING?

**Is douching safe?**

Douching or rectal douching is usually a safe activity. The risk of anal douching is when the equipment or tubes are not clean, when people share equipment, etc. Then infections can be spread.

## HOW RISKY ARE SEX TOYS?

**I know that sharing toys is a no-no. But what if a condom is slipped on it — or rubbing alcohol or something similar is used to cleanse it?**

Cleaning sex toys between partners is an excellent idea. I am not aware of any reports of HIV being transmitted from "dirty" sex toys, however. We know that other infections like hepatitis A (get your shots), giardia, amoebas, gonorrhea, warts, chlamydia and maybe syphilis can be transmitted from "dirty" sex toys.

## HOW WELL DO HIV MEDICATIONS WORK?

**If a person is on meds for AIDS and then tests negative, can you still get HIV/AIDS from this person, by whatever means?**

HIV medications cannot turn someone who is HIV+ by antibody test to HIV-. They can reduce the viral load in the blood to undetectable, but there is still virus in the lymph nodes, the gastrointestinal tract, testes, brain, liver and about every other organ. A "negative" or undetectable test by no means indicates that a person is not infectious. Only a semen test could determine that.

## HOW OFTEN SHOULD I GET AN HIV TEST?

**How long does it take for HIV to show up in a blood test?**

The HIV test is an antibody test that measures the body's reaction to the HIV virus. It takes about three months after infection for the antibody to become present. That's why we call the period after exposure before an HIV-positive test the "window period" — when people can actually be infected but have a negative or normal antibody test. Doctors recommend a repeat test six months after the first to make sure the "window period" was truly negative. Most sexually active persons at risk for HIV have interpreted this as the need to get an HIV test every six months. This is not a bad idea and should be accompanied with STD tests at the same time.

**Do the current HIV tests detect the virus that has been**

**transmitted tests couldn't months later**

**mouse relationship**  
The current HIV antibody virus. In most that are detected bodies within that people t infected will is positive no more and no exposure to t

# WHAT YOU NEED TO KNOW...

...have to worry about that, at least. **...and mutual masturbation, is there much risk?**

...ct, the risk of STDs is very, very low. You can con-  
...e is one report of trichomoniasis being transmitted  
... women, but I have not heard about that in men.  
...al wart virus — from mutual masturbation, too.  
...or sex, but have not done much other than get-  
...and just playing around with “simulated”  
...w often should I get checked for STDs and

...p is talking to your doctor about your sexual prac-  
...chlamydia and gonorrhea tests of the throat; urine  
...gonorrhea as well; rectal tests for gonorrhea and  
...sex in the past six months and then blood tests for  
...This is all after a physical examination where the  
...and testicles as well as the anus for sores, lesions,  
...y Clinic in San Francisco (www.dph.sf.ca.us/sfcity-  
...small donation or free. Your tax money at work! Or  
...ublic Health. There are clinics in most major cities.

## WHAT'S THE BEST KIND OF CONDOM?

*I'm looking for a superior condom, one that does not dramatically reduce sensation, but does the job. Any suggestions?*

There are so many condoms out there, so many choices and so little time. There are condoms marketed and labeled as “ultrasensitive,” and these are usually thinner and provide more warmth and direct contact. When you buy or choose condoms, look for the ones with the word “ultrasensitive.” In addition, using water-based lubrication can increase the pleasure and decrease the risk of small tears or cuts that allow STDs and HIV entry into a partner.

There's a newish condom called Pleasure Plus that has a pouch near the head for larger and uncut penises. It also has ribs and lube on the pouch for extra sensation. On the Condomania Web site, they have a hokey but effective Condom Wizard, which can help you decide which to try. They also sell condom samplers so you can try a few and see which you like enough to buy more of.

## HIV TEST?

*...within the last six months? I know the earlier I do that and you had to take the test again six months later (especially if you were starting a monogamous relationship).*

...ent HIV tests detect the presence of HIV antibody. ...y is your body's response to the presence of HIV ...t persons it takes a few weeks to develop antibodies ...ctable by current tests. 95% of people develop anti- ...n 3 months after being infected. It is recommended ...ake a second test in 6 months, because 99% of those ...develop antibodies within 6 months. A positive test ...matter when the test was. A negative test becomes ...ore of a true and accurate result the longer after the ...the virus.

## IS SEX LESS RISKY FOR A TOP?

*I'm a top, and on more than one occasion I've had a bottom express interest in foregoing a condom. Their argument is, “it's not as risky for the top.” Obviously, they're thinking in terms of HIV, not all the other STDs. Nevertheless, given how the HIV virus is transmitted, clearly it is “less risky” for the top. But by how much? Negligible? Minimal? Notable? Has anybody even considered that?*

Yes, there are a fair amount of data looking at the risk for tops versus bottoms. It's all a numbers game and one that I don't recommend playing. The risk for a bottom may be one in 50, for a top one in 500, but tops definitely do get infected, and the risk is greater if either partner has an STD. Use a condom, learn the status of your partners and we can get hold of this epidemic.

*I would like to know if this is a myth — that bareback sex is less risky for the top than the bottom? Or are both partners at equal risk?*

Insertive anal intercourse, that is the top is about 10 times less risky than receptive anal intercourse, or the bottom. An HIV-negative bottom has about a 1 in 50 chance of getting HIV infected after one act of intercourse with an infected partner. As a top, that chance is about 1 in 500. Using condoms cuts that risk down substantially. STDs like gonorrhea, chlamydia, syphilis and herpes can increase the risk in either partner. A good way to prevent HIV is to get regular STD check-ups and make sure your partners do the same.

# STOP Using Lubricants and Condoms Containing Nonoxonyl-9, says GLMA

By RON TIERNEY, Communications Director GLMA

SAN FRANCISCO – Nonoxonyl-9 (N-9), often used in the manufacture of lubricants and lubricated condoms, does not protect against HIV transmission, and may actually increase vulnerability to transmission in some cases, said Gay and Lesbian Medical Association (GLMA) President Christopher E. Harris, MD.

GLMA is a member of a coalition of scientists and health groups calling for the removal of N-9 from condoms and lubricants. However, GLMA wants the message to go to gay and bisexual men as well: Do not use products containing N-9.

“Nonoxonyl 9 is a spermicide,” said Harris. “At one time it was thought that the ingredient might offer some protection against HIV. It does not. Recent research indicates that using N-9 rectally might cause the thin layers of cells that line the rectum to become inflamed, possibly enhancing the risk of HIV transmission, especially when multiple sex partners are involved.”

Harris does not want to wait for manufacturers to stop making products containing N-9 or for retailers to pull the products from their shelves. “We need to get the message out there right now,” Harris said. “When you buy condoms or lubricants, look at the label. Health care providers, it is your job to see that this message gets to your patients. N-9 does not prevent the transmission of HIV or other STDs. N-9 offers no benefit to men who have sex with men. On the contrary, it might prove harmful. There are lubricants out there that do not contain N-9.”

The GLMA President said that he hoped there would soon be a microbicide that would prevent the transmission of HIV and other STDs, but that at this moment, there are none.

## WHO ELSE IS IN THE PICTURE?



Talk About It! 475-AIDS

# G-SPORT PAGE

## HEART TO HEART Hits It Big!

The fourth annual Heart to Heart Mixed Doubles Tennis Tournament, held February 7-9 at the Tennis-n-Gear/Gold's Gym indoor courts in Liverpool and Dewitt, was a tremendous success. The event, according to ACR Director of Special Projects/Development Wil Murtaugh, attracted the most participants to date with 58 teams competing for top honors. All first place teams were first-time Heart to Heart winners. The tournament, along with the Silent Auction and 50/50 Raffle, raised more than \$ 2,000.00. Proceeds from the event benefit AIDS Community Resources.

### **Following is a listing of the tournament winners:**

#### **Novice Division**

CHAMPIONS: JOE DWYER & PEG WEBSTER  
FINALISTS: KIM LAVAIR & JEANNINE MURTAUGH

#### **3.0 DIVISION**

CHAMPIONS: DOUG JOHNSTON & GIOIA GENSINI  
FINALISTS: JENNIFER CAIELLA & BENJAMIN CAIELLA

#### **3.5 DIVISION**

CHAMPIONS: KATIE SILKY & DAN SILKY  
FINALISTS: KIM UNDERWOOD-DRUM & EDUARDO CASTILLO

#### **4.0 DIVISION**

CHAMPIONS: KATIE SILKY & DAN SILKY  
FINALISTS: DONNA NUGENT & NICK DENDANTO

#### **4.5 DIVISION**

CHAMPIONS: CHUCK WIGGINS & ANTONELLA AVENA  
FINALISTS: DAVE FEIKERT & KRISSEY FEIKERT

#### **OPEN DIVISION**

CHAMPIONS: NAVEEN SINGH & ELAINE HEEKIN  
FINALISTS: WIL MURTAUGH & KATHLEEN MURTAUGH

*Special thanks to  
Tournament Director  
Brian Galle and his  
staff at Tennis-n-Gear  
in Liverpool and Dewitt.  
Thanks also to event  
sponsors Wilson™, Head™,  
and Gold's Gym,  
and to all who  
participated.*



*Open Division – Naveen Singh and Elaine Heekin (right) defeated Kathleen and Will Murtaugh (left). Scores: 6-2, 6-3*

# “Is There a Gay N.Y. Met?”

That's the question being asked in response to comments by New York Mets manager Bobby Valentine that baseball is "probably ready for an openly gay player." Valentine made his remarks in the June/July issue of Details magazine and they have become a hot topic after reports in the New York Post.

"The players are a diverse enough group now that I think they could handle (a gay teammate)," the Post's Neil Travis quotes Valentine as saying. Travis writes for the popular Post gossip column "Page Six."

The speculation by Travis and some in the media is that Valentine is setting the stage for a Met to come out, though Valentine and general manager Steve Phillips denied this. Names have been bandied about privately within media circles and by several New York readers who contacted Outsports claiming to know the player.

Travis laid out this scenario:

"More to the point, some may think that Valentine is getting in first, before one of his big guns is outed. There is a persistent rumor around town that one Mets star who spends a lot of time with pretty models in clubs is actually gay and has started to think about declaring his sexual orientation.

"The rumor even goes so far as to say that the player and a still-closeted local TV personality recently purchased a house together in a ritzy New York suburb. (I've

made a cursory check of the real estate rolls in that suburb and can't find any documentation of the rumor. But even if it's all nonsense, the story is out there and gaining momentum by the day.)"

Mike Piazza, the Mets' All-Star catcher, took the unusual step to publicly announce he was heterosexual. "I'm not gay. I'm heterosexual," Piazza said in an account in the New York Times. "I can't control what people think. That's obvious. And I can't convince people what to think. I can only say what I know and what the truth is and that's I'm heterosexual and I date women. That's it. End of story."

Piazza agreed with his manager that an openly gay baseball player would be accepted. "In this day and age, it's irrelevant," he said. "I don't think it would be a problem at all." Valentine accused the Post of sensationalizing and told the New York Times his comments to Details were in direct response to a question about whether baseball could handle an openly gay player.

I have no idea as to whether a Met or a Jet or a Net is ready to become the first active athlete to publicly come out from one of the big four North American team sports (NFL, NBA, NHL, Major League Baseball). At Outsports we hear rumors all the time and our reaction is always the same: We'll believe it when we see it.

BY: JIM BUZINSKI  
Outsports.com

*Is a major  
league baseball  
player ready  
to come out  
of the closet?*

Continued from Page 1

## MID-LIFE COMING OUT

an intimate situation with a man. I ended up taking a lot of showers to scrub away those invisible anxiety germs every time I 'did it'. I must have been one of the cleanest men in Syracuse.

Since that time, I have found other men coming out late in life have experienced the same fears about AIDS that I did.

I became involved in my first relationship, which just happened to be the man I lost my virginity to (a big mistake). Because we were monogamous, I felt I didn't have to worry, at least not too much, about safe sex. Before I got involved with this fellow I made sure to find out when his last sexual experience was, and if he had been tested since then. His answers were my main reason for hooking up with him; I was basically horny and I wanted someone 'safe' to be with on a regular basis. Of course, imagine my horror when I discovered he was a liar and a cheat, and for the whole time we were together he wasn't using a condom with his other partners, and there were many. I found he was averaging about three different guys a week behind my back.

I desperately tried to find a medical source to assuage my fears, almost begging for confirmation that I couldn't have gotten HIV/AIDS from him, if

he even had it, and that I didn't have a thing to worry about. I begin reading articles on the internet; the information was contradictory. Some said you could catch the HIV virus from oral sex, others said you couldn't. Some even said you could get it from kissing or jerking off with another guy. Each succeeding article made my heart beat a little faster. The few gay men I knew, all seemed to have different concepts of what safe sex was. The whole thing was becoming a quagmire of confusion.

I went to my doctors office and asked for pamphlets on safe sex. The nurse nervously looked at me and said, 'We don't have any'.

I said "Well, I don't know what activities are safe and which aren't."

She definitely wanted to shut me up. Her reply, while looking in the other direction was, "Always wear a condom...that's it". Well, that wasn't it.

Like, duh - what about when you're rimming someone? Or when you're sucking someone off? What I wanted was a laundry list of what was safe and what wasn't. I had no idea if this woman even knew what rimming was, and was much too embarrassed to explain it to her, or even admit I was gay. So I gave up, out of my own awkward embarrassment, and left, saying, "I see."

I went to a municipal health clinic that actually did HIV testing. I visited there on my lunch hour, wearing my suit and tie. The room was dark and wreaked of body odor. The clientele were lower income and watching films on unwanted pregnancy. I asked the receptionist if they had pamphlets on

safe sex. Her reply was "No". I was dumbfounded. All she did was give me a pamphlet on how to put a condom on.

Condoms, condoms everywhere...being forced on me...but not an iota of information out there on what to do when body parts other than a penis are involved.

I finally talked to a counselor at another local government sponsored health facility, while portraying myself as a recently divorced straight man, and was given the biggest load of misinformation you could imagine. She told me, you could indeed get HIV/AIDS from kissing, you could get it from mutual masturbation, and you could get it from oral sex as well. So I couldn't have oral sex, jerk off or kiss a guy? What was left? A mouth full of latex?

Well, after that I was terrified to ever touch a man again. Finally, I somehow got the impetus to call up an AIDS hotline listed in the yellow pages. This time I was connected to a gay man on the other end of the phone - it was like a different planet altogether talking to him. I chose to believe him, and from that day forward began loosening up, as I now had the correct facts.

I'm happy to say I chucked my first boyfriend, and have no idea what he is doing now, but I'm sure it doesn't involve a condom. Me? I know when to use one and what is the difference between low risk and high risk sex...and I no longer freeze up when someone drops his pants. And I'm happy to say I've been witnessing a lot of that lately.

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## AIDS VACCINE FAILS

and encouraged them to practice safe sex.

Why the vaccine seems to work better in African American and Asian patients is not known.

"We're not sure yet why certain groups have a better immune response," VaxGen vice president Phillip Berman said in a prepared statement.

Minorities made up only a small portion of the trial group. Only 314 African Americans participated, and the researchers believe that a larger sample might show it is less effective in minorities as well.

"We're skeptical about the small numbers," said Dr. Donald N. Forthal, chief of infectious diseases at the University of California at Irvine and one of the investigators in the trial. "On the other hand, this is a very intriguing finding."

Even though the tests showed the vaccine did little to prevent HIV the research garnered may help develop another drug.

"This is the first demonstration of protection in humans, and one of the most significant findings in H.I.V. vaccine research in many years," said Dr. José Esparza, the leading vaccine expert at the United Nations AIDS agency in Geneva.

Though the vaccine is "not the final product that we need for public health use" and is not ready to be licensed for sale, he said, it "should give encouragement to all vaccine developers."

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GRADS Project is a Program of AIDS Community Resources

Expiration Date: 5/24/2003

## SURVEY: Most Teens See No Great Risk in Trying Ecstasy

Majority polled believe chance of addiction runs high.

### ASSOCIATED PRESS

NEW YORK-Although teen use of Ecstasy has leveled off, most American adolescents see no great risk in experimenting with the drug, according to a study to be released by the Partnership for a Drug-Free America.

The partnership's annual study found that 45 percent of youths ages 12 to 18 saw a great risk in trying Ecstasy once or twice-more than the 42 percent who felt that way in last year's survey, but still the minority opinion.

The attitude belies the statistics. In 2001, there were 5,542 emergency room episodes related to Ecstasy use, up from just 253 in 1994.

The number of youths using the drug remained stable: 9 percent in this survey, compared with 10 percent a year before. A partnership survey released five months ago

found that only 1 percent of American parents believed their child had ever tried Ecstasy.

Other findings of the 15th yearly survey:

- 77 percent of teens believe there is a great risk of Ecstasy addiction, up from 73 percent.
- 76 percent believe there is a great risk involved in using Ecstasy regularly.
- 35 percent who attended a "rave" had used Ecstasy, compared with 5 percent of all other adolescents.
- The survey also found that marijuana remained the most widely used illegal drug, with 40 percent of youths saying they had tried it at some point.
- The study was conducted among 7,084 teens nationwide, with a margin of error of plus or minus 1.5 percentage points.

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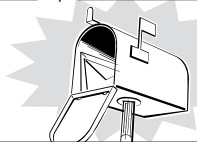
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A Group for gay, bisexual and men who have sex with men.

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## CHAT ROOMS

Her report was based on online surveys filled out by nearly 3,000 men using the Web site gay.com, which describes itself as "the largest gay media property in the world." They were mostly white, college-educated men from all over the United States, and half were younger than 30.

The survey found that 84 percent said they met sex partners online, and about two-thirds had recently had anal sex without condoms. About one-quarter of the men said they had had more than 100 sex partners during their lives.

While federal officials are not convinced that HIV is spreading more rampantly these days, several clues suggest it may be. The CDC's Dr. Ronald Valdiserri noted that in 2001, for the first time in eight years, the number of newly diagnosed AIDS cases rose a slight 1 percent. Furthermore, data gathered from 25 states found the

### SURVEY'S FINDINGS:

Experts worry about increase in HIV.

number of newly diagnosed HIV infections increased 8 percent between 1999 and 2001.

"We are concerned, and we are looking very carefully at these trends for what they might do in the future," he said.

Possible reasons cited by experts for an increase include the much higher number of Americans living with AIDS as a result of lifesaving medicines, fading memories of the ravages of the disease in earlier years and a sense that HIV can be readily treated.

One of the CDC's goals is to make sure that HIV-infected people know they have the virus so they will get treatment and be careful not to pass it on to others. The CDC estimates that one-third of the 900,000 people living with HIV know of their infections.

However, new data from Baltimore suggest that the percentage who know their status is growing. Doctors at Johns Hopkins University's emergency department routinely offer HIV testing to patients. Charlamaine Henson said the number unaware of their infections dropped from 63 percent in 1988 to 26 percent in 2000 and 19 percent in 2001.

Another study from the University of North

Carolina found that newly released prisoners may be especially likely to spread HIV through risky sex. Dr. David Wohl and colleagues surveyed 86 HIV-infected men and women and found that one-quarter had sex without condoms with their regular partners within a month of their release. Half of these people believed that their partners did not have the virus.

"Prisons in many ways facilitate the transmission of HIV," Wohl said. "Our experience is that when people get out of prison, there are two things they want to do, and one of them is get a Big Mac."

Much research suggests that people are most likely to pass the virus on to others soon after they catch it, since their virus levels are especially high then. A study from Uganda found that nearly half of HIV transmission between heterosexual couples occurs during the first five months after one partner gets the virus.

Dr. Maria Wawer reported that among these African couples, who did not use condoms, there was an 8-in-1,000 chance of passing on the virus with each sex act during those first five months after infection. The risk then dropped to 1 in 1,000 but climbed again to 5 in 1,000 in the 15 months before the infected person died of AIDS.

## CHURCHES

## Beginning to Embrace Gay Community

### WASHINGTON POST

Washington-Lay minister Ann McDonald is gathering her strength for what she expects will be "a heavy night" at St. Bernadette Catholic Church in suburban Severn, Md.

Three dozen gay men and lesbians are waiting for her to lead a discussion in the conference room. The topic: "What do you need to know, to believe and to hear in order to reclaim your place in the church?"

McDonald belongs to a denomination whose highest officials have called homosexuality "objectively disordered." But at this meeting, part of a six-week program that she is offering with the support of her pastor and the Archdiocese of Baltimore, she will apologize to these Catholics for the way they have been treated, listen to their stories of exclusion and tell them they are welcome to return to the fold.

"We have people who haven't received Communion for 40 years, who were told they were sinful, that they couldn't receive (the) Eucharist. That was wrong," she says.

It remains easy to feel excluded, McDonald says. But she insists on a larger context: "God is big."

McDonald's outreach is part of a movement spreading in most U.S. Christian denominations as an increasing number of churches are taking steps to show that they welcome gay men and lesbians and will treat them as equals in all aspects of congregational life.

Some churches are blessing same-sex unions or appointing ministers in defiance of their denomination's official policies. Others are making subtle changes, such as adding welcoming language to their mission statements, displaying literature about gay community concerns, listing same-sex couples together in church directories and sponsoring reading groups for parishioners who want to learn more about gay issues.

Open Hands, an ecumenical quarterly published by a Chicago-based group that supports the trend, listed 1,567 congregations nationwide as gay-welcoming last year, compared with the 291 congregation it listed a decade earlier.

Opponents argue that although churches should be open to everyone, the emphasis on reaching out to gay men and lesbians often takes the form of endorsing a lifestyle that they said the bible condemns.

The conflict has engulfed most mainline Protestant denominations and has caused bitter debates at national meetings and in church courts. United Methodists, for example, are divided over same-sex unions, ordination of practicing homosexuals and language in church doctrine that says the practice of homosexuality is "incompatible with Christian

teaching." They're also trying to stop local flocks from identifying themselves as members of Reconciling Ministries Network, one of several networks of liberal Protestant congregations that disagree with their denomination's stance on participation of gay members.

The Evangelical Lutheran Church in America is debating same-sex unions and the ordaining of gay men and lesbians in committed sexual partnerships. And just last week, conservative Presbyterians engaged in a petition campaign to force a showdown with congregations that are not following the denomination's ban on gay clergy.

Many gay men and lesbians have accepted the open invitation to join mainstream congregations, even as the separate religious communities they formed years ago—such as the gay Catholic Group Dignity/USA and the fellowship of Metropolitan Community Churches—continue to thrive.

Pastors at several churches that have affirmed openness to gay participation say their main purpose is to make current

*"Open Hands, an ecumenical quarterly, listed 1,567 congregations nationwide as 'gay welcoming' last year, compared with the 291 congregations it listed a decade earlier."*

gay members and their families feel at home, regardless of whether it increases gay membership.

Bible study is often part of the process through which congregations formulate positions on gay participation, looking at the issue through a theological lens. Literal readers of the Bible point to passages such as letters of the apostle Paul to the Corinthians that list "sodomites" along with thieves and drunkards as among those who will "not inherit the kingdom of God."

The gay-welcoming church movement seems to be apologizing for those who would uphold such interpretations of the Bible's teachings on homosexuality, said William Ilgenfritz, a spokesman for Forward in Faith North America, an organization of Episcopalians that opposes the ordination of women and non-celibate homosexuals.

"I think it assumes that parishes and clergy who maintain a Biblical view of sexuality...would somehow mistreat homo-

sexuals," he said. "That's an erroneous assumption."

Others say the Biblical passages reflect the prejudices of their times and that God's teaching compels Christians to reach out to those who are isolated. They also argue that inviting homosexuals to join the church while condemning what they practice would send the message that they're welcome as long as they remain silent about their sexual orientation.

At St. Bernadette, McDonald says she believes there is room for all in the church's social justice teachings. About 100 gay and lesbian people have been through the parish's six-week Reclaim program and many have become active in the parish.

When St. Bernadette first extended its welcome to gay and lesbian worshippers seven years ago, a few people left the parish, McDonald recalled. But new worshippers, heterosexual and homosexual alike, have been attracted by the church's energy and open-mindedness, she said.

"The parish has always had a social justice component," said McDonald, "but our welcome is such a part of who we've become."

Eileen Lindner, deputy general secretary of the National Council of Churches, said the decision to become open and affirming toward gay men and lesbians can bring about unexpected changes in a congregation.

"They may not have any more gays and lesbians, but their behavior changes, and their perception of who they are welcoming takes them in different directions," such as creating a ministry to work with immigrants or another oppressed group, she said. "It's a fascinating thing."

At Christ Congregational Church in suburban Silver Spring, Md., the church's "open and affirming" committee has moved beyond the welcoming of gay, lesbian and bisexual members and taken on a new issue. A longtime member of the congregation wrote recently in the church newsletter that he hoped to begin attending services as a woman.

"My aim is not to put anyone down, or shock anyone," he wrote, "but just to be myself."

In January, the committee discussed whether the church should react by adopting language welcoming transgendered people.

"What does it mean to be a transgendered person when there is no formal statement yet?" choir director John Touchton asked the group. "Is there shame and embarrassment?"

Committee Members agreed that the congregation would need time for prayer and contemplation before voting on such a resolution.