



The Front Page

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The Political State of LGBT Health

By Bob Roehr
Contributing Writer

The breadth of challenges on issues of gay health posed by the Bush administration and Congress were laid out at the spring meeting of the National Coalition for LGBT Health in Washington, DC on March 14. Money is tighter than ever and social conservatives are relentless in trying to impose their moral vision upon the rest of the country.

Social conservative Claude Allen has moved from the number two position at the Department of Health and Human Services (HHS) to be domestic policy adviser at the White House. "That is going to present some very big challenges for us over the next four years," said Carl Schmidt, a lobbyist for The AIDS Institute.

Praveen Fernandes, a lobbyist with the Human Rights Campaign, tried to look at the bright side of the move, it means that Allen is no longer a nominee for a lifetime appointment as a federal judge to the Fourth Circuit Court of Appeals; "domestic policy advisor is not a lifetime appointment."

There is some hope that the new HHS Secretary Michael Leavitt might not be so bad. They noted that he vetoed a piece of anti-gay legislation when he was governor of Utah. The number two position at HHS is vacant and the eventual nominee will be closely scrutinized for meaning.

Schmidt was encouraged by the lack of comment from the administration on the controversy that erupted in New York over a possible "super strain" of HIV. He worries that the five-year reauthorization of the National Institutes of Health might be used to cut AIDS research funding by those who have argued that AIDS is getting too much money.

Ryan White AIDS services legislation also is up for renewal. "It is the only moving vehicle for domestic HIV/AIDS legislation. It

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Praveen Fernandes & Carl Schmidt

Grappling with Crystal Meth in the Gay Male Community

By Bob Roehr
Contributing Writer

Jay Dagenhart became infected with HIV while addicted to meth. His addiction also led him to "losing just about every job that I had during my addiction, being gay-bashed, having a gun pulled on me, declaring bankruptcy, and finally becoming homeless; all because of my crystal meth addiction."

His was the most riveting presentation heard at a session on crystal methamphetamine at the spring meeting of the National Coalition for LGBT Health in Washington, DC on March 14.

Dagenhart and a group of other recovering addicts formed the Philadelphia Crystal Meth Task Force (www.meth2death.org). "We are tired of pushing this under the rug and not discussing it, so we are going to talk about it in very bold ways, to change the conversation," he said.

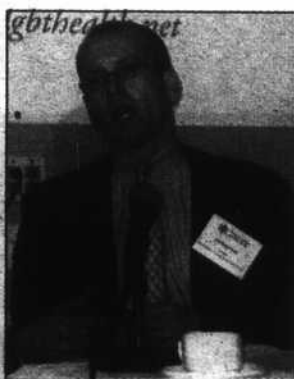
The goal is to change community values so that using crystal and having unprotected sex or being up all night dancing is seen as inappropriate behavior. "We are saying, 'Do you realize how addictive this is?'" It is based on a model developed in New York City.

He recently went to a bathhouse in Philadelphia. When he disclosed his HIV status to men there, the first five turned and walked away, "The only person who was willing to have sex with me was the crystal meth addict," Dagenhart said.

"This is no mystery. The drug dealers in our community are setting up shop in bathhouses. They check into a room, they bring their supply, and they can feed their sexual addiction, which stems from their crystal meth addiction."

"They can sell large quantities of the drug without fear of getting caught because who from the DEA or police are going to come into the bathhouse—walk around in a towel with the fear of playing grab ass—and crack down on the drug problem within our community."

"As gay men we sexualize everything; we shake hands with our penis. If we can learn to educate one another and bring the problem into the light we might have a little more success in dealing with it."



Jay Dagenhart (L) and Gordon Mansergh



The Scope

Some 15% of HIV positive and negative gay men had used meth during their most recent sexual encounter, third only to alcohol and marijuana, according to a 2004 survey in San Francisco, said Gordon Mansergh. The CDC researcher summarized some of the key findings presented at two-day meeting on gay men and crystal meth use that the Centers for Disease Control and Prevention (CDC) held in mid-January.

Meth users in San Francisco were "1.7 times more likely to test positive for gonorrhea, nearly two times more likely to have chlamydia, and nearly five times more likely to have syphilis." In New York City, HIV+ men were nearly three times more likely to report meth use during their most recent anal sex encounter.

When pressed as to why meth, which is only one of many substances of abuse, is getting all of the attention, Mansergh acknowledged, "It's the drug de jour, in some ways. Meth is something that we've seen an increased wave coming in the last 10-15 years. It becomes a community consciousness because of the movement...because of the rapid increase, but also because of the rapid devastation."

"One of the recommendations coming out of the conference in January is that we don't focus exclusively on meth, that we focus on all substance abuse, because of the issue of somebody moving to another substance." That report will be released shortly.

"I think the risks around alcohol abuse are better known. I wonder how many young gay men may get in over their heads before they realize what their risks are with meth," said David Haltiwanger with the Chase-Brexton Clinic in Baltimore.

"Part of what we need to do is rebrand crystal meth so that it is not considered not just another innocent party drug, but a much more dangerous drug. There are casual drug users who would never touch heroin; it has a brand that they are not going to go near." Part of the solution is to "move crystal across that line so that people don't think of it as something that you can casually pick up and put down."

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