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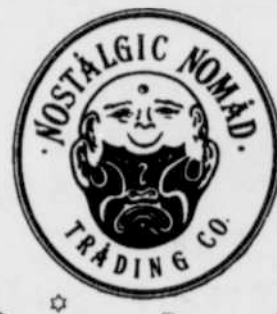
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VIEW FROM HERE

Where to?

As the community faces the prospect of a "post-AIDS" era, now is the time to ponder new directions for activism

by Hastings Wyman Jr.

The 50 percent decline in AIDS deaths in New York City is a most welcome sign that this terrible plague may be beginning to come to an end. Other omens are also promising: The National Institutes of Health's Dr. Anthony Fauci says he expects that as statistics become available from across the country, this pattern will be replicated. In Los Angeles, hospitals and hospices are already reporting similar trends.

There are, of course, still plenty of dark clouds. It is already clear that protease inhibitors do not work for everyone. In those for whom they do work, it is unclear how long these drugs will keep AIDS in remission, or whether they can remove all of the virus. And even when they work perfectly, the cost of protease inhibitors is far more than is affordable for many people.

Moreover, the need for AIDS prevention programs will remain, particularly as HIV infection increases among women and minorities. And policy questions about access to life-saving prescriptions for those with neither money nor health insurance are likely to be a major issue for some time. Nevertheless, the news about HIV and AIDS is increasingly encouraging.

While the most important development is that the human toll is lessening, like all mass tragedies—war, famine, plague—AIDS has political implications and the possible decline of AIDS will also. Now is not too soon to contemplate some of the changes in the political climate that could result if the AIDS epidemic begins a steady decline in ferocity.

First, the gay movement will no longer be weakened by the steady attrition from the premature deaths of so many gay men as in the past decade and a half. The gay movement, especially on the male side, has seen activists, legislators, lobbyists and thousands of volunteers succumb first to incapacitating illness, then death. With them have died knowledge, experience and the support they developed within the gay community and with the public. Now, perhaps, we will begin to see more elder statesmen.

Second, syndicated columnist William Raspberry, in an excellent column favoring same-sex marriage, recently noted that among the reasons people give for opposing same-gender matrimony is that it might "help spread such diseases as AIDS." The decline of AIDS would decrease the fear of gay men as a threat to public health. Such attitudes have been skillfully manipulated by opponents of civil rights for gay people; the lost opportunity for exploiting them will be helpful to the homophile cause.

Third, since the AIDS crisis developed, much of the news media—as well as the creators of high

and popular culture—have portrayed gay men with AIDS as heroic, if tragic, figures. While some of this sympathy has been cloying, it has put gay people and our concerns on the front pages, on prime time, on Broadway and on the best-seller lists. Moreover, this sympathetic portrayal has made homophobic politicians look like they're kicking us when we're down. We may soon have to resume being, if not invisible, at least less newsworthy.

Fourth, because the money saved from the decrease in AIDS hospitalizations more than makes up for the high price tag of protease inhibitors, the total per-patient cost of AIDS is already declining—by 23 percent, according to one estimate. So we could begin to see some easing of financial demands made by the disease on both public and private resources. Working to see that some of the savings are used to develop an AIDS vaccine and less-expensive treatments could be high priorities for the gay community.

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Fifth, in time the proportion of the gay and lesbian community's assets and energy that need to be devoted to AIDS issues may diminish, so that more people, time and money can be directed toward other goals, such as employment protections, the repeal of state sodomy laws, same-gender marriage, the right to adopt children, and a more secure environment for gay and lesbian youth.

With HIV under control—"to be managed like high blood pressure," as one TV commentator optimistically put it—other medical issues, such as breast cancer, could assume greater priority within the gay and lesbian community. And with AIDS no longer reducing the number of gay men who live to old age, there could be more incentive to develop retirement communities and services for elderly gay people.

Finally, the seriousness of the challenge of AIDS has helped unify the nation's lesbian and gay community, which—like the nation itself—has differences of race, gender, political persuasion, ethnicity, etc., etc. For example, lesbians, who are among the least at risk for HIV, have been prominent in the AIDS battle. If the threat of AIDS is substantially diminished, gay people will have to work even harder to find common goals and, where the goals are different, nonetheless, cooperate.

If the promise of the latest trends materializes, gay people can think about entering a new, post-AIDS era. Let us plan now to make the most of it.

Hastings Wyman Jr. is a Washington, D.C., journalist whose political column, "The Gay Agenda," appears monthly in the Washington Blade and other lesbian and gay newspapers.



PHOTO BY LINDA KUEWER