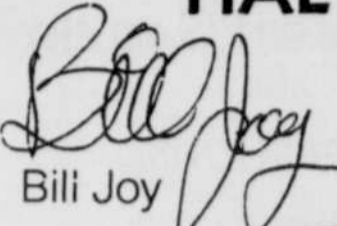
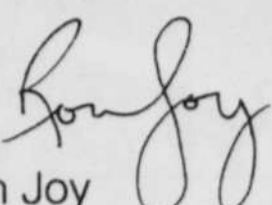


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## VIEW FROM HERE

# Oh dear, Mr. Gendin

*Recent articles point up lapses in our commitment to staying safe.  
Are the new treatments inspiring a dangerous complacency?*

▼  
by Paul Harris

I read a couple of articles recently that I found disturbing. One was published in *POZ*, the other in the *Advocate*. The *POZ* article was written by Stephen Gendin, an executive vice-president of *POZ* Publishing and also co-founder (with Sean Strub) of the Community Prescription Service. Advertisements for the latter business feature Gendin's picture prominently, as a result of which he is undoubtedly one of the most well-known figures in the HIV/AIDS world.

In his article, "Riding Bareback: Skin-on-skin sex—been there, done that, want more" [June 1997], he writes about how he has had unprotected sex with another HIV-positive male and how it was for him "empowering, not guilt-inspiring." He writes, "There's even something empowering about the idea of sharing someone else's HIV.... I could taunt it, challenge it by taking it into my body without being further hurt."

My first reaction was one of absolute horror that a magazine like *POZ*, which has done so much good over the years in seeking to inform and educate its readers about HIV and AIDS, should publish such a dangerous piece. Ironically, in Gendin's bio statement on the Community Pre-

The July 8, 1997, edition of the *Advocate* was given over to The Return of Our Bad Habits. In one article, David Heitz tells of "Bill," a high-ranking official in one of the country's largest AIDS service organizations, who after an episode of unsafe sex tested positive. In another article, John Gallagher quotes Paul Wisotzky, chairman of the board of the San Francisco AIDS Foundation, who seeks to explain the behavior of gay men: "A condom is loaded with so many emotional issues about intimacy and the starvation for intimacy. A condom presents a metaphorical barrier that is powerful and understandable in a community devastated by loss."

One of the factors that undoubtedly is coming into play is the fact that with the enormous advances in AIDS medications, people—both HIV positive and negative—no longer have quite the same fear of the virus. Yet the reality is that for many people the much-touted "cocktail" does not work. As I write this, somebody in my circle is in the last days of his life, and by the time you read this he may be dead.

All the evidence shows that the virus mutates, that there are different strains of it, and that people who have been exposed to the fewest strains seem



*Gendin being arrested at a demonstration in New York*

scription Service Web site, it is proudly pointed out that in 1994 he founded the AIDS Prevention Action League to address the increasing HIV transmission rates among gay men. The biography also states, "HIV positive since 1986, Stephen has worked countless hours to educate, prevent further HIV transmission, and help those fighting and living with HIV/AIDS."

My next reaction after discovering such blatant hypocrisy was that someone needs to rewrite his bio. Then I thought again: Gendin does the HIV community a service by raising a subject that many of us would prefer not to discuss. I suspect that most gay men, if they were honest with themselves let alone others, would like to return to the days of carefree sexuality, where condoms were used strictly by heterosexuals—and then for the purpose of avoiding pregnancy. They would love to return to the days where the worst thing that could happen when you had sex with another man was contracting an inconvenient social disease.

The reality today, of course, is very different. AIDS is not an inconvenient social disease. My former lover did not die of a minor social disease. The legions of gay men and others whom we have lost in the carnage this disease has wreaked did not die of anything remotely social.

to do best. In addition, people can pass on to others their version of the virus, including their resistance to some of the life-saving drugs currently being prescribed. This poses a special threat to couples who are both HIV-positive and who believe that, so long as they are monogamous, unsafe sex is not going to do them any further harm. Perhaps they, like Gendin, see something romantic about giving someone they purport to love another strain of the virus, which may kill them. There is nothing romantic about yet another person in his or her 20s or 30s dying decades before they should.

We seem to be so close to, if not finding an answer to AIDS, at least being able to control it. For many of us AIDS has been a long war that we have waged; it has cost us and the gay movement dearly. We are tired and fed up with AIDS. Every time we have sex, the condom is a reminder of AIDS. How much easier to pretend that it doesn't exist.

But now is not the time to let up.

Gendin's advertisement, which I am sure most of us have seen, claims, "I run my prescription service like my life depends on it. Because it does." Well, Mr. Gendin, I would like to suggest that you conduct your sex life as if your life depended on it. Because it does.