

# Risky Business

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can STDs complicate health care for poz fellas, but acquiring new strains of HIV can quash effective drug regimens.

• **Drunk, drugged and buggered.** Another major reason barebacking is on the rise is substance abuse. Get drunk or get stoned, and get fucked in more ways than one. Alcohol and drugs affect how you decide who you sleep with and what you do. In short, lower your inhibitions and increase your risks.

Among my guy gang, about half said alcohol and drugs sometimes are involved when they sex it up. Three said "always." Similarly, of the 11 man-sex syphilites in Multnomah County, seven reported using alcohol or drugs, such as poppers or meth.

"Portland is a huge meth town," Knowlton remarks. "People who use meth find it hypersexualizing and get very turned on. They're having unprotected sex because it's something they don't have to think about."

Which sounds hot, until you hear that guys who combine meth and sex are five times more likely to become infected with HIV.

• **A natural resistance.** The third reason—safe-sex fatigue—is the most encompassing and perhaps the most widespread. You've built up a tolerance to the message. You know it, you understand it, but you accept the consequences because you don't want to live in a "bubble of fear" come hell, high water or HIV. You refuse to remain lonely or live in a closet.

"My status will change someday, but my whole peer group is poz, so I'll just be in the club," one barebacker writes.



**"As a society, we don't talk about sex. We don't see people on TV or in ads or in the movies negotiating safe sex and talking about how they're going to have sex. It's always the thrill of the moment."**

—Margaret Lentell

"How do you compete with that?" he asks. "Guys look better than they have in their entire lives because they get to go to the doctor and take steroids when their testosterone is low because of HIV. They pump up. They don't have to work. They get to travel around to circuit parties. What is the downside to that?"

The downside, he reveals, is that you don't see the guys when their drugs start to fail and they get so sick they can't leave their house.

"People think that HIV today is different than it was 20 years ago, and it's not," Knowlton argues. "If anything, it's stronger."

## Strategies for sex

You can already hear the lecture. You can picture the finger-shaking. "Condoms every time, all the time."

That is still what "disease intervention specialists" want to say, but today's reality is

Exhaustion over prevention tactics and weariness of "condom police" have left mixed feelings of apathy and fatalism. Lacking 20 years of "condoms, condoms, condoms," young studs think the HIV epidemic mode applies only to old fags. Old fags think the epidemic should've been long gone by now. In the middle are average Joes who believe HIV and STDs are just part of being gay.

"I hear the logic when people say: 'Why fight it? I can take these drugs. I can become a client of CAP, get my rent paid for and get extra cash. I

don't have to ever use condoms again, and I don't have to go through the worry of wondering am I positive? Is this guy positive? Is there a condom involved?" Knowlton reasons. "That's a lot of pressure for gay men."

So much pressure that some bareback because they want to become HIV-positive (including two bug-chasers even in my small group of 27). Knowlton says it's not uncommon. Outrageous, maybe, but an HIV-positive diagnosis is the second part of their coming out.

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