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Gay vote focuses on AIDS

GOP’s ‘cowardice’ could help Jackson in state’s primary

By John Jacobs
EXAMINER CHIEF POLITICAL WRITER

Gay Republican Bruce Decker, who has worked for former President Gerald Ford and Vice President Bush and was Deukmejian’s first gay appointee, says his party will pay at the polls for the “cowardice” and “malevolence” it has shown in handling the AIDS crisis.

“When you are witness to the moral equivalent of genocide at the hands of people you once identified with,” said Decker, “it becomes difficult to maintain a close (party) affiliation.”

Decker, 38, a Deukmejian appointee to the California AIDS Advisory Commission and president of a strategic planning group on long-range AIDS research, most likely will vote for liberal Democrat Michael Dukakis for president this year — even as he advises GOP Sen. Pete Wilson on AIDS issues.

In voting for President Reagan and Bush four years ago, gay Republicans — who some analysts estimate may represent as much as 40 percent of the gay vote nationally — voted their pocketbooks and their conservative ideology.

Today, however, gay Republicans and Democrats say that acquired immune deficiency syndrome has become such an overwhelming life-and-death political issue that it has galvanized gays to vote more as a national bloc than ever before.

That vote should emerge loudly next month in California when a majority of gays are expected to vote for civil rights leader Jesse Jackson over Dukakis in the Democratic primary. A new KNBC-TV poll of Los Angeles-area gays and lesbians shows that 77 percent support Jackson, who has addressed gay concerns and energized gay voters as no other national candidate has.

But assuming Dukakis is the Democratic nominee — as now seems almost certain, regardless of how Californians vote June 7 —

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GAYS

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many gays either will vote for Du

takis over Bush or sit out the elec
tion, many gay political analysts pre

tected.

This year, the number of people in
the United States who have died of
AIDS surpassed the number of
Americans killed in the Vietnam
War, and gays continue to be the
hardest hit. A near-monolithic gay
vote is not good news for Bush.

As many gays see it, Bush spent the
last few years soaring up his right
ward by pandering to the "enemies
of gay rights." Massachusetts Sen.
Jesse Helms, R-N.C., who re
peatedly has watered down Senate
legislation to fund AIDS research
and education programs, and for
mer Moral Majority preacher Jerry

If gays represent 5 to 10 percent of
the overall vote — and more than
half in key states like California,
New York, Texas and Florida 
that anti-Bush vote could provide
the margin of victory in a close
election.

"George Bush has remained vir
tuously silent on AIDS" for the last
six years," said Decker, who co
ordinated the advance and ad
team in the Ford White House from
1974 to 1976. He also planned sev
eral trips for Bush to Texas and Cal
ifornia.

"And when he has spoken out
about AIDS," Decker said, "it has
been with a cynical, less-than-compas
cionate remark.

On the other hand, DKukasis has
served as governor of a state that has
shown compassion, courage, and com
passion in dealing with AIDS.

"George Bush is an old friend, a
man uniquely qualified to be presi
dent, but unless I see some dramat
ic change in his attitudes and posi
tions around AIDS, I am not going
to vote for him."

At the other end of the political
spectrum, gay liberal Democrat De
Michael, a Los Angeles political
consultant, agreed with Decker.

"This presidential election will
be the closest thing to a battle we've
ever seen in our history," Mixner
said. "Previously, gays were as di
verse as any other group — conser
vative, liberal, Democrat or Republ
ican.

"But ideology and party labels
don't matter to me, I'm a lifelong
Democrat, but if a Republican were
running who'd do more to save my
friends' lives, I'd vote for him. The
key is to save our lives."

"As long as Jesse Helms has
George Bush's ear, I don't care what
Bush says, because that (Helms)
has killed my friends."

A prominent gay Republican cam
paign manager who did not want to
be identified by name said he
made up 10 percent of California's
GOP vote.

"Bruce (Decker) has come to a
conclusion a lot of gay Republicans
haven't, but they're not there yet," the
consultant said. "They are watching
Bush with skepticism. If Bush is accep
table and Duckakis is better, they'll
vote for Bush because of other is
sues. But if Bush isn't acceptable,
they'll switch."

Dukakis is not the perfect can
didate for gays, either. His veto in 1987
of a bill a few years ago that would have allowed gay cou
ples to adopt foster children drew pro
tests and still haunts him in the
gay community.

Moreover, every Democratic
presidential candidate except Du
kakis — Bruce Babbitt, Paul Simon,
Richard Gephardt and Al Gore this
gyear and Gary Hart in 1984 — made
an effort to reach out to the gay
community, said Dianne Abbott, a
Los Angeles attorney and member
of the board of governors of ME
CLA, the Municipal Elections Com
mittee of Los Angeles, one of the
nation's oldest gay and lesbian po
litical action committees.

"His record is really outstanding
in terms of funding for AIDS and
health care for AIDS patients," Ab
bitt said of Duckakis. "But this one
issue, foster care, became a kind of
litmus test because it speaks to the
understanding and attitude of the
candidate. ... There were attempts
by us to reach out and set up meet
ings, and he refused."
'Stop-AIDS' initiative qualifies for fall ballot

Gann plan requires doctors to report cases

By Alina Tugend
Herald Examiner staff writer

Conservative political activist Paul Gann, himself a victim of AIDS, said yesterday his "Stop-AIDS" initiative has qualified for the November ballot.

The initiative would require doctors to report to public health authorities patients who test positive for the AIDS virus. It also would allow doctors to report such patients to spouses and other sexual partners.

"This is the most vicious disease in America," said Gann, who contracted the AIDS virus in 1982 from a blood transfusion during open-heart surgery. "It's more vicious than someone walking up and shooting you."

Supporters of the initiative, including Rep. Bill Dannemeyer, R-Fullerton, said the measure hopes to turn AIDS from a "civil rights issue into a public health issue."

But a staff lawyer for the American Civil Liberties Union called the initiative a "disastrous public health bill."

"We don't even have to get to the civil liberties issues" in opposing it, said Matt Coles of the ACLU's San Francisco office.

Coles said the measure would have the effect of abolishing anonymous testing sites, which allow a person to be tested for AIDS without disclosing a name or address.

"Every responsible health director in the state will say that anonymous testing is a critical feature of successful testing," Coles said.

Gann, best known for his co-sponsorship of tax-slashing Proposition 13 in 1978, looked frail but was energetic yesterday as he discussed his new initiative. He said he dropped from 165 pounds to 129 pounds since contracting the disease, but has now climbed back up to 137 pounds.

"I call myself 'Fats,'" he joked.

"I went public last year after discovering I was infected with the deadly disease."

The measure would repeal current state law, which prohibits disclosure of the identity of anyone who tests positive for AIDS without prior written consent of the patient. It also would repeal state laws that prohibit the use of such tests to determine insurability or employment suitability.

The initiative, which gathered 570,000 signatures, specifically notes that it does not mandate or rule out quarantine for AIDS victims.

The clause is an effort to distance the measure from AIDS initiatives backed by political extremist Lyndon LaRouche, which advocated quarantine. California voters soundly rejected the LaRouche-backed initiatives in 1986 and earlier this month.

Coles, however, said the Gann initiative "scares me more than the LaRouche initiative."

But Gann said, "I feel like I have to do this. If I can save a few lives — just three, four or five — I feel it will be the greatest thing I accomplished."

Paul Gann
Momentum Builds in Support of Dannemeyer

To everybody who slept through the June primary election confident that the LaRouche II initiative would go down the tubes, it is time to wake up and get moving. A recent statewide poll conducted by Field Research indicates that a not very well informed electorate is prepared to pass the Dannemeyer/Gann initiative by a margin of 3-1.

The question asked of 809 registered voters during the last week of July was whether they would vote in favor of an initiative that would require the reporting of the names of people who doctors or blood banks "feel might have AIDS or who might test positive for the disease."

That's right, people who they feel might test positive.

In response to the question, 72% of the respondents culled from a list of people likely to vote in the general election said they would vote in favor. Twenty-two percent said no, and six percent had no opinion.

Steve Morin, an AIDS expert who works for Representative Nancy Pelosi and who also advises state lawmakers on the issue, notes that the Dannemeyer/Gann initiative — Prop. 102 on the November ballot — is a compendium of every bad bill progressive legislators have been able to fend off in Sacramento. Passing the initiative and incorporating its ideas in the state constitution, Morin says, would be a disaster of the first order.

For those who need more motivation, the list of Dannemeyer/Gann horrors include:

• reporting the names of people suspected of HIV infection to local health authorities;
• mandatory tracing of the sexual contacts of people who test positive;
• giving health insurers and employers access to the results of HIV tests;
• establishing criminal penalties for people who violate any provision of the initiative.

The previous AIDS initiatives were tarnished in the eyes of the public because of their association with Lyndon LaRouche. But the involvement of a US representative — William Dannemeyer — and tax-cut crusader Paul Gann has given Prop. 102 a veneer of respectability.

Turning the tables and building public opposition to Dannemeyer will require organizing and fundraising, both of which are lagging.

A sense of panic might be helpful, too.

To join the campaign to stop Dannemeyer, call 621-4450. A donation can be mailed to the No on Prop. 102 Committee, 10 United Nations Plaza, Suite 410, San Francisco 94102. Make checks payable to "Californians Against Prop. 102."
STATEWIDE — Proposition 102, Congressmember William Dannemeyer’s initiative to outlaw anonymous HIV antibody testing and legalize all forms of discrimination against people with AIDS-related conditions, may pass by default, statewide leaders of the medical and Lesbian/Gay communities warn. The reason: battered by the financial impact of AIDS itself, the Lesbian/Gay community may simply not have enough money to mount an effective campaign against it.

While the successful campaign against the first LaRouche initiative, Proposition 64, in November 1986 used $2,500,000, the campaign against Prop. 102 is only budgeted at $500,000 — and campaign organizers are skeptical as to whether they can even raise that much. "The big money is no longer there to fight an AIDS initiative," says veteran Gay journalist George Mendenhall of the San Francisco Sentinel.

No TV ads are planned for the coming campaign against Prop. 102 — which in itself, in a state as large as California, virtually guarantees that the initiative, expect-
Suit Filed to Block Dannemeyer Bill

SAN FRANCISCO - The California Medical Association (CMA) and California Nurses Association (CNA) filed suit Wednesday, July 6 in Superior Court here to have the Dannemeyer AIDS initiative taken off the November 8 ballot.

"The initiative is bad medicine and bad public health," said CMA president Laurens White.

Former CNA president Helen Miranda fears that the initiative "will facilitate the spread of the virus by driving the disease underground and preventing appropriate counseling, care, and treatment."

If passed, the Dannemeyer initiative will abolish anonymous HIV antibody testing and require that the names of all people testing positive be reported to public health authorities. It will also guarantee employers and insurance companies the "right" to discriminate against people with AIDS or AIDS-related conditions on the basis of their test results.

"It just confirms our instincts that the leadership of the CMA and the CNA are in bed with the ACLU and are treating this as a civil rights issue and not a public health issue," said Dannemeyer spokesperson Brett Barbre.

Another Dannemeyer staff member, Paul Mero, added, "We've proved AIDS really is the first politically protected disease in the country. AIDS policy in California is based on pure politics. The CMA is in cahoots with the ACLU and homosexual rights organizations."

Legal analysts regard it as unlikely that the lawsuit will succeed.
Far-reaching and drastic changes in California's response to the AIDS epidemic would be the result of an AIDS initiative that is non-mandatory which will be decided on by voters November 8.

Sponsors of the as yet unnumbered initiative include Republican Congressman William Dannemeyer of Orange County, tax crusader Paul Gann (who contracted AIDS from a tainted blood transfusion five years ago) and conservative State Senator John Doedtle.

Opponents of the bill include the California Association for Rehabilitation, which was also instrumental in defeating the two LaRouche initiatives, and the American Civil Liberties Union (ACLU), Dr. Brad Truax, outgoing chair of the San Diego County Regional Task Force on AIDS, says that group has yet to take a position on the initiative.

Neither, it seems, has the Lesbian/Gay Community Organization (LGO), opposition to the initiative is practically nonexistent. While the LIFE (Lobby for Individual Freedom and Equality) lobbyist group has met with Lesbian/Gay political action groups in Sacramento to map out strategy against the measure, many experienced activists from this community is too burned out to mount the kind of massive, all-out campaign that defeated the Briggs initiative in 1978 and the first LaRouche bill in 1986.

AIDS activist Nicole Ramirez Murray is worried that Lesbians and Gays are tired of political battles involving AIDS issues. Pointing to San Diego's non-response to the second LaRouche campaign last June, he notes, "There was no organized, official campaign in San Diego, other than Herb King's, and he was hard to beat, making buttons by himself. And we certainly can't let this issue go, because this issue is unlike the other ones. We're talking about being out-and-out discriminated against by our own community is too burned out to mount the kind of massive, all-out campaign that defeated the Briggs initiative in 1978 and the first LaRouche bill in 1986."

In its response to the AIDS initiative, as well as a strong emotional appeal to fears and prejudices that's going to be hard to beat, it's going to be uphill, but we're going to have to tackle it.

West Hollywood Mayor Steve Schulte echoes some of these concerns about apathy in the Lesbian/Gay community. "I think it's going to take a very large, sophisticated campaign to defeat it, and I just don't see that happening," he says. "I think it's going to take a very large, sophisticated campaign to defeat it, and I just don't see that happening," Schulte says. "I think it's going to take a very large, sophisticated campaign to defeat it, and I just don't see that happening," Schulte says. "I think it's going to take a very large, sophisticated campaign to defeat it, and I just don't see that happening," Schulte says. "I think it's going to take a very large, sophisticated campaign to defeat it, and I just don't see that happening," Schulte says. "I think it's going to take a very large, sophisticated campaign to defeat it, and I just don't see that happening," Schulte says. "I think it's going to take a very large, sophisticated campaign to defeat it, and I just don't see that happening," Schulte says. "I think it's going to take a very large, sophisticated campaign to defeat it, and I just don't see that happening," Schulte says. "I think it's going to take a very large, sophisticated campaign to defeat it, and I just don't see that happening," Schulte says. "I think it's going to take a very large, sophisticated campaign to defeat it, and I just don't see that happening," Schulte says. "I think it's going to take a very large, sophisticated campaign to defeat it, and I just don't see that happening," Schulte says. "I think it's going to take a very large, sophisticated campaign to defeat it, and I just don't see that happening," Schulte says. "I think it's going to take a very large, sophisticated Schulte adds that the sheer number of different AIDS measures — this year alone, over 120 legislative bills and four initiatives — also seems to overwhelm people who can’t quite keep up with them all.

What Will It Do?

The Dannemeyer initiative would practically reverse existing AIDS laws and guard against the worst change would be the elimination of anonymous testing for HIV infection. The measure would force doctors, blood banks, and any other "entitites" giving the HIV antibody test to report the names of all individuals testing-positive to local/regional government health officials within 48 hours. One undefined aspect requires reporting if the test administrator has "reasonable ground to believe" that a person has AIDS or is infected with HIV. HIV-positive individuals would also have to report themselves to public health authorities within seven days of a positive test result.

Contact tracing is the next big change in the initiative. The state's approach to AIDS. Public Health officials would be required to determine the names of sex partners of infected individuals, or any other infected individual. Any medical personnel involved in their treatment or who had contact with the infected individual. Other provisions of the initiative would eliminate California's ban on HIV testing by insurance companies.

The companies would have carte blanche to test for life insurance, individual and group health insurance, and even Health Maintenance Organization (HMO) policies. This is much more extensive than the recently passed AB 2900, which gives insurance companies the right to test for life and individual health policies only.

Perhaps even more threatening is the elimination of the ban on HIV testing for individuals. The repeal of this measure means that an employer would be legally allowed to test for the virus as a condition of employment. The testing of HIV-positive workers means that employers would have to seek and pay for expensive medical testing. The penalty for not testing is $70,000 for each individual, or a maximum of $700,000 if the employer fails to test at least 10 workers within 90 days.

"Out-and-out discrimination against somebody who is HIV-positive or even suspected of being HIV-positive would be legal in California ... From a policy perspective, it's a nightmare."

-TIM PESTOTNIK, Board Chair, San Diego AIDS Project

Other provisions would lower penalties for disclosure of HIV test results to a third party, require additional, prison time for infected individuals who commit sexual crimes and commit certain criminal offenses, and seven-, or nine-year felony prison terms for the donation of blood by any person who knows s/he has HIV. A person entering the state prison system would routinely have his or her HIV status entered on their criminal record, and guards and other prison officials would have free access to that information. The initiative would also place the HIV test in the same category as any other blood test, eliminating the need for specific written authorization for the test.

Taking a lesson from the two failed LaRouche initiatives, the author of this initiative has inserted a section which specifically states that quarantine or isolation shall not be required for the management of AIDS.

However, a section which requires public health officials to "test all individuals reasonably necessary to prevent transmission of infection" seems to be a major loophole allowing restrictions of civil liberties.

Why Activists Are Alarmed

The success of this initiative and its palpable passage in November have alarmed AIDS activists across the state, who uniformly condemn the measure.

"I think the initiative is catastrophic," says Schulte. "It's bad public policy, an inexcusable threat to civil liberties, because it's going to really remove the enthusiasm for a lot of people to seek competent medical advice and counseling when they suspect they could be infected."

LIFE lobbyist Rand Martin says, "It's quite clear, if it passed, it would be disastrous. It has a lot of provisions in it that just go too far in terms of permitting testing for any kind of individual, and that has direct results to people in a health care setting without any consideration of whether these people need that information or not. It's efficiency on their is alternative test sites by prohibiting them from providing anonymous testing. And that's the cornerstone of the testing and counseling program in California."

Attorney Timothy Pestotnik, newly elected chair of the board of directors of the San Diego AIDS Project, calls the initiative "a disaster." He is particularly concerned about the proposed repeal of provisions banning HIV testing for employment and insurance decisions. "Both practices are illegal under federal law today," Pestotnik explains. "That would mean that out-and-out discrimination against somebody who is HIV-positive or even suspected of being HIV-positive would be legal in California. From a policy perspective, it's a nightmare."

-The San Diego AIDS Project
The Battle Lines

The battle lines over the issues in this initiative have already been defined. The proponents of the measure insist that the civil rights concerns of the infected should not take precedence over the "rights" of the uninfected to avoid infection. They maintain that they simply want to see "traditional public health measures" be applied to the AIDS epidemic to stop its spread.

Brett Barbrê is a special assistant to Rep. Dannemeyer. Summing up what will likely be heard over and over again in the campaign, he says, "Basically, all we want to do is that we return the supervision and the care of this epidemic to the public health authorities and not restrict physicians from pursuing those routine measures."

Barbrê says that California's ban on HIV testing by insurance companies is discriminatory because it forces low-risk uninsured policyholders to subsidize high-risk HIV-infected policyholders. He cites a New York State Supreme Court decision in the issue, which concluded that the effect of such regulations "affects the person infected with HIV in a preferred status over persons with other health-threatening diseases or lifestyles such as smoking, obesity, high blood pressure, emphysema, etc." Continuing, Barbrê asks, "Is it fair to you that a 40-year-old woman who has breast cancer and has a 90 percent chance of survival can be denied health insurance when an individual who has a 1 percent fatal disease can be insured because the company can't test for it?"

Barbrê cites the same rationale for eliminating the ban on using HIV testing for employment decisions. He claims the ban gives HIV-positive individuals an edge over other job applicants who might have life-threatening health conditions. He also adds that he doesn't believe employers will adopt widespread HIV testing, but he defends their right to do so.

"Thirty to 40 percent of people with HIV suffer from dementia," Barbrê asserts. "Shouldn't the employers be able to protect themselves? And with the amounts of opportunistic diseases that go along with AIDS, shouldn't other employees be kept free from that?"

Addressing fears that mandatory reporting of HIV-positive test results would lead to a decrease in the number of people seeking voluntary testing, Dr. Warren Bostick, professor emeritus of pathology at the UC Irvine School of Medicine and statewide committee chair for the initiative, says, "That's not been the case in the three or four states that have obligatory reporting. ... I think this idea of their running away and everything has been totally discredited already."

Dr. Donald Ramras, head of the public health division of the San Diego County Health Department — and thus an official who will have major responsibilities in enforcing the initiative if it passes — openly labels the bill "a bummer" and has many objections to it.

"Thirty to 40 percent of people with HIV suffer from dementia. Shouldn't the employers be able to protect themselves?"

-BRETT BARBRÊ, Aide to Congressman Dannemeyer

Ramras says he feels there is a place for contact tracing, but not on the scale mandated by the initiative. "I certainly would not want to be locked into some law that says you have to contact-trace everybody," he says. "I don't want to waste time on a person who was a sex contact eight years ago ... Our staff knows from syphilis and gonorrhea tracing which we've been doing for years, that there comes a point where you just can't find people. You waste too much time. When there is productive contact tracing you can do." Ramras comments that he would place the highest priority on contact tracing a woman in the child-bearing years who had been exposed to a positive partner.

An Uphill Battle

Opponents of the initiative seem to agree that fighting this measure will be an uphill battle, requiring even more effort that the campaign against the 1986 LaRouche initiative. Much of the response will depend on how much campaigning proponents of the initiative undertake. If insurance companies donate large contributions to the initiative, the situation could be very critical.

Attorney Pestotnik is hopeful on that point. "This initiative is so bad and so demonstrably terrible for all parties concerned that the insurance companies may or may not rush in to support it," he speculates. "Because it may itself acquire such a bad name, it will make Lyndon LaRouche look like a champion. I just wonder whether or not they will rush in to do that. ... This is clearly one of the most dangerous pieces of legislation I've seen since I've been doing AIDS work."

If AB 2900, which allows insurers to use the test for some policies, becomes law — as is expected — the question could then become whether the insurance companies will be satisfied with the legislature's bill, or whether they'll consider it worth major amounts of political money to pass the Dannemeyer initiative and remove the few remaining restrictions on their ability to test.

The Dannemeyer Bill at a Glance

If passed, the Dannemeyer AIDS Initiative would:
- Eliminate anonymous HIV testing.
- Mandate reporting of names of HIV-positive people to health authorities.
- Require contact tracing of sexual partners of all HIV-positive individuals.
- Guarantee "right" of employers to discriminate against PWA's, PWARC's, or HIV-positive people.
- Allow insurance companies to deny all forms of health or life insurance to HIV-positive people.
- Reduce the penalties for illegal disclosure of HIV test results to third parties.

Previous polls in California have shown that these testing proposals are supported by 60 to 90 percent of all voters. The Dannemeyer bill almost certainly WILL PASS unless we mobilize against it NOW!
A powerful coalition of medical and legal organizations acted this week to scuttle a November ballot initiative which threatens to destroy California's increasingly successful campaign to spread the word of AIDS. The initiative, backed by conservative gadfly Paul Gann and sponsored by Orange County Congressman William Dannemeyer (R-Fullerton) proposes to outlaw anonymous testing for HIV infection and would gut existing confidentiality rules in a wide variety of essential medical programs such as blood donations.

To block the measure from appearing on the ballot, the American Civil Liberties Union and National Gay Rights Advocates on Wednesday announced a lawsuit filed on behalf of the California Medical Society and the San Francisco Department of Public Health alleging the Gann-Dannemeyer initiative is unconstitutional.

Public health experts here predict that passage of the Gann-Dannemeyer rules will increase the spread of AIDS in California and undermine programs which are

Dannemeyer
Continued from page 3

given over 400 seminars on AIDS, many of them attended only by the people who attended the last one. The CMA president also expressed concern that the mandatory testing requirements of the initiative will "be a major deterrent to widespread voluntary testing." The fiscal impact of the initiative - put by the legislative analyst at tens of hundreds of millions of dollars annually - would, in the CMA's view, "divert funds from more pressing medical needs in California."

All the plaintiffs in the suit, as well as the lawyers - gay and straight - working with them, share equally the concern of White and the CMA that the initiative is iniquitous and designed to cause hardship and inhumane treatment of persons infected with HIV. But if the medical people fear for people with AIDS, the lawyers worry about the implications for Californians generally.

Ben Schatz of NGRA sounded a theme common to all participants when he touched on the insurance provisions of the initiative. "If insurance companies," he argues, "are allowed to reject thousands of HIV-infected applicants, their medical costs will be picked up by Medi-Cal and public hospitals - in other words, by the taxpayers. Otherwise productive, active members of society fired from their jobs because they tested positive will be thrown onto unemployment and then welfare. And the cost of identifying and interviewing hundreds of thousands of Californians who are known or believed to be infected with HIV - and counting all their sexual partners - is almost beyond calculation."

Schatz also notes that the initiative incorporates the LaRouche initiatives by defining HIV infection as an infectious, communicable disease. "Thus the Dannemeyer initiative," he says, "like the LaRouche initiative, could ban HIV-infected children from the schools and result in the firing of all caretakers who handled students and school employees."

Werdegar wonders why research subjects would come forward if people identified as HIV positive are subjected to the provisions of an initiative supported only by what White called "logical and terroristic doctors." By the same token, one speaker wondered whether people would feel they could safely donate blood if they were subject to the reporting provisions of the bill. Schatz spoke of the initiative's "moronizing" clause and illustrated it by saying, "If I tell a public health officer that ten years ago I stepped with William Dannemeyer, the state will have to tell his wife about us."

Technically faulty, fiscally unsound, medically catastrophic and morally obnoxious - but can it pass? The participants at Wednesday's press conference felt it can. Schatz points out that Dannemeyer, although as extreme as LaRouche, holds a respected office, and can mobilize large sums of Republican money and intimidate other Republicans. Insurance companies and other business interests are already in his camp. And Paul Gann has proven to be a formidable, if rancorous, campaigner for other eradicate measures. Although no poll data is available yet, no one doubts that the public wants something done.

Werdegar adds, "The public wants to be helpful and constructive. This initiative is badly constructed and can mislead the public." And White notes that despite an ongoing public information campaign, 30 percent of the public are afraid they can contract AIDS by giving blood.

It is the uncertainty about how the public will read the initiative and vote that has led the various groups to undertake a pre-ballot challenge. Achtenberg proposed such an approach when the first LaRouche initiative surfaced. After several days of intense consultation, Achtenberg, the ACLU and other lawyers decided not to use that approach. But that was in 1986.

Since then, Achtenberg notes, the community has organized, raised money, raised public consciousness and educated the public on casual transmission. In 1986, he says, a loss in court at the outset would have made the electoral campaign more problematic. That is not the case now. Furthermore, the community has more time to act now. It is still early in the political season. Finally, the adds, the Dannemeyer initiative is more vulnerable to legal challenge than the LaRouche initiatives.

If she is right, and the courts agree with her assessment, the public, which twice saw through LaRouche, may not be called upon to generate the dark intensions of William Dannemeyer.
Coalition Moves to Scuttle Dannemeyer

Continued from page 1

Announcing a lawsuit to scuttle the Dannemeyer AIDS initiative were Laurens White of the California Medical Association; Dr. David Werdegar of the San Francisco health department, Matt Coles of the ACLU; Helen Miramontes of the California Nurses Association; and (not shown) Ben Shatz of National Gay Rights Advocates.

Achtenberg also points to the venue of the challenge. "The courts in San Francisco," she notes, "are generally knowledgeable about AIDS and public health issues. There is reason to be hopeful that the errors in the initiative will be recognized.

Achtenberg and the Lesbian Rights Project are co-counsels, along with the NGRA, to the ACLU and attorney George Cumming Jr., of the firm of Brobeck, Phleger and Harrison. The challenge to the initiative will concentrate on two essential deficiencies. First, the attorney general's description of the initiative misled voters by obscuring the fact that the initiative would outlaw anonymous testing. Second, the initiative violates the state law limiting initiatives to a single subject. The attorney general's description is required by law to describe the initiative fully and to do so in no more than 100 words, a task that proved impossible because of the complexity of this initiative.

The narrow restrictions on ballot measures are intended to prevent abuse of the initiative process through misleading and vague language. "It is narrow and technical," Achtenberg says, "but the courts will consider only narrow and technical issues in a pre-ballot challenge."

The medical associations bringing the challenge, however, are more concerned about the health implications of the initiative. The California Nurses Association states that "voluntary, confidential or anonymous testing [is now] widely available as an adjunct to counseling for people who have engaged in high-risk behaviors. The alternative [anonymous testing] program in California has been very successful in providing a large population with pre- and post-test counseling in combination with testing."

According to Dr. David Werdegar, the director of the San Francisco Department of Public Health, 50,000 people have been tested in San Francisco since 1985. Twenty percent proved to be positive. The initiative would ban the alternate test sites and would not include counseling for people who undergo forced testing. These reasons led Helen Miramontes, RN, the immediate past president of the California Nurses Association, to tell a packed press conference on Wednesday that the Gann-Dannemeyer initiative is worse than the LaRouche initiatives, which would not have dismantled successful programs.

Miramontes is also concerned that the initiative will put health care workers at risk. "Implying that disclosure will protect the health care worker is false and potentially dangerous," she said in a prepared release to the press. "If health care workers believe that knowing the HIV status of patients will protect them, they are sadly mistaken. Only strict, universal infection control procedures will protect health care workers." The CNA urges its members to treat all patients as HIV positive.

The initiative, nevertheless, is co-sponsored by Dr. Lawrence J. McNamee, who claims to speak for some 800 California doctors organized as California Physicians for a Logical AIDS Response. The president of the California Medical Association, Dr. Laurens White, states that the CMA "neither represents nor recognizes this physician group."

In response to questions from the press, White contended that most of the 800 know little about AIDS and simply lent their names out of deference to a few activist colleagues. White appeared to be skeptical of the general level of awareness of AIDS among California's physicians. "The CMA," he said, "has

Continued on page 5
The following description of the Dannemeyer initiative is provided by the American Civil Liberties Union.

**Reporting**

Any doctor or clinic with "reasonable cause" to believe that a person is infected with the "probable causative agent" of AIDS must report that person to the local health officer within 48 hours. "Reasonable cause" could be interpreted as merely suspecting that a person belongs to a known risk group. All positive test results must be reported, even if the test is given by one's personal physician.

One must report oneself within seven days of learning of seropositivity. You must, at the same time, report the names of anyone from whom you may have contracted the virus and anyone to whom you may have transmitted it.

Results of tests taken before passage of the initiative probably are included by the initiative's reporting requirements, as well as other information given to doctors which might indicate seropositivity or infection.

Failure to report is a crime. Doctors must pay $250 for each case they fail to report.

Research projects with information linking research to the names of participants who are positive must report those names to the local health officer.

The state and counties are forbidden to offer anonymous testing.

Insurance companies may make unlimited use of test results. Employers may use testing for any purpose they choose. Currently, alternate test sites offer only anonymous testing; confidential test results may not be reported to public health officials, even for legal proceedings; and neither employers nor insurance companies may use test results for any purpose.

**Surveillance and Contact Notification**

Local health officers will be required to use "every available means" to get the names of everyone who has the virus, the names of whomsoever gave it and the names of anyone to whom it might have been passed on. They must then do whatever they deem necessary to "prevent" the spread of the infection. Once a health officer, in his official capacity, hears that someone may carry the virus, he or she must tell 1) spouses, 2) "known sex partners" and 3) anyone else the officer "reasonably believes" has been exposed.

**Other Disclosures**

Doctors and patients must give test results to patients and to local health officers; they may use their own judgment in telling other medical workers, persons they think are spouses or those who may have had any contact "believed to pose a threat of infection." The director of the state Department of Health may publicize results if he or she thinks it essential to control the spread of the epidemic. Doctors and health officials may be required to testify in court about test results and anything else which might lead them to believe that a person has tested positive in cases of persons accused of prostitution, failure to report, sodomy or furnishing blood. Written consent for testing is no longer required and general (oral) consent for diagnostic testing might be sufficient.

**New Crimes and Penalties**

The initiative makes people with HIV infection into a special class of criminals by increasing penalties for certain crimes, even though the virus could not possibly be transmitted in those cases — for example — rape by a foreign object. Anyone charged, though not convicted, of assault or "sexual-related" crimes, whether they could result in viral transmission or not, may be forcibly tested for HIV infection. The results are not confidential and will be recorded on a person's rap sheet. Persons who are not competent may be tested for any reason. Employers may wear protective gear if it doesn't interfere with their work.

**Triggering Laws on Contagious Diseases**

By declaring AIDS an infectious and communicable disease, the initiative could exclude people from jobs as foodhandlers and from work in schools. It could also require that anyone who visits or lives with a person with AIDS report the name of the person to the state Department of Health Services.

— Alex MacDonald
No On 96-
No On 102
Bumper Stickers
Available

The effort against the two AIDS initiatives on the November ballot has taken another step forward with the production of bumper stickers targeting both the Gann-Dannemeyer and Block mandatory-testing initiatives—Propositions 102 and 96.

The two initiatives, which threaten to destroy the progress California has made in coping with the epidemic, are opposed by the California Medical Association and many others in the medical community, as well as a broad spectrum of gay and lesbian activists.

The bumper stickers are red, white and blue and bear the message NO ON 96-NO ON 102 in large lettering; below, in smaller type is the slogan FIGHT AIDS—NOT PEOPLE!

"That phrase is the whole campaign in a nutshell," Rick Turner, merchandise coordinator, said. "It's the people opposing these initiatives who really want to stop this epidemic, and punishing people for being sick isn't the way to do it."

The bumper stickers are available for $1, which goes to Californians for AIDS Research and Education to fund the campaign. Buttons—in a different design, based on the "Just Say No" signs carried in the CSW Lesbian and Gay Pride Parade—are also on sale for the same price.

Organizations desiring large quantities are asked to call CARE at (213)662-4862 or (818)503-8271. Discounts are available on bulk orders.

LA Initiative
Campaign Selects
Board

by Zeke Zeidler

Community members selected the first board of directors of the newly-formed Los Angeles County Against Propositions 96 and 102. Over 100 community members gathered on July 26 and elected activists from over 20 community organizations to coordinate the local grassroots campaign against the Block and Dannemeyer initiatives.

The general body also set policy regarding the limited powers of the board, which will be headed by ACT UP's Ann Marie Capuzzi and Joe O'Donnell from March On and the Stonewall Democratic Club. The Valley Business Alliance's Dori Stubblefield will serve as the campaign's treasurer. Following the larger meeting, the board—which will be meeting Thursday evenings—created six committees to handle the campaign, including voter registration, fundraising, and actionally.

Although a statewide organization, Californians Against Proposition 102, has been formed to fight the Dannemeyer Initiative through major fundraising and media campaigns, the Los Angeles organization is the first group formed to oppose the Block initiative. Los Angeles County Against Propositions 96 and 102 has already endorsed Californians Against Proposition 102.
The Community Mobilizes Against Prop. 102

by Tim Taylor

"If you thought LaRouche was scary, look at Prop. 102."

That is the urgent message of the AIDS-reporting initiative on the November ballot are trying to convey to a sleeping gay and lesbian community that has not yet fully mobilized against the threat.

If Prop. 102 passes, it would virtually put out of business community-based organizations such as the San Francisco AIDS Foundation, the AIDS Health Project and Project Inform — among others — because of its requirement that health care workers report the names of people suspected of HIV infection to state officials.

It would dismantle programs in California that have proven effective in fighting the spread of the epidemic by forbidding anonymous AIDS testing.

It would further allow employers and insurance companies to require HIV testing and use the results as a guide for determining eligibility for employment or insurance. And it would repeal existing antidiscrimination protections for people with AIDS and ARC.

According to San Mateo County Supervisor Tom Nolan, the statewide chairman of the No on 102 Committee, the ballot measure "just rips the heart out of all the positive programs we have going."

The outcome of this election is being watched closely throughout the nation as a test of whether a public climate exists to enact punitive AIDS legislation on the federal or state levels. Participants in the campaign realize that they are engaged in a high-stakes election of national significance.

"The bottom-line message is we cannot over-stress how important this is because if this thing passes in California, so goes the rest of the nation," said Tim Wolfred, executive director of the San Francisco AIDS Foundation.

Wolfred notes that AIDS service organizations across the country are nervously watching the outcome of the ballot initiative, fearing that if Prop. 102 passes in California it will precipitate a national backlash that will sweep through their state houses and in

"The bottom-line message is we cannot over-stress how important this is because if this thing passes in California, so goes the rest of the nation."

— Tim Wolfred

HIV, as called for in this initiative. Such mandatory testing would become a deterrent to widespread voluntary testing."

He added, "CMA cannot support many other provisions of this initiative, which are either unnecessary or would create hardship and inhumane treatment of persons infected with HIV."

Opponents of the ballot initiative hope that the strong position taken by the public health establishment will be followed with a string of newspaper endorsements and set a tone for the public debate.

There is strong evidence that an educated California electorate will not repudiate the onerous elements of Prop. 102, according to Dana Van Gorder, the Northern California campaign coordinator of the No on 102 Committee. He says that proponents of the existing public health policies have it within their control to win this campaign.

One promising indicator was provided by Prop. 102 foe Senator Pete Wilson, who last week conducted a state-wide poll that showed vast ignorance among the public about the ballot initiative and a clear opportunity to win public support if all the facts about Prop. 102 are communicated.

When given only the slimmest information that Prop. 102 was written to help doctors stop the spread of AIDS by requiring them to report the names of people who test positive for the virus,
the public overwhelmingly supported the measure by 60-25%, according to Wilson’s poll.

But when told that Prop. 102 would outlaw all anonymous test sites, cost taxpayers millions of dollars to implement, and allow insurers and employers access to test results, the poll results showed a dramatic reversal. Given that information, Prop. 102 failed 65-18%.

"I find the information in the Wilson poll very encouraging," said American Civil Liberties Union lawyer Matt Coles. "It says we can beat this thing."

The key to winning, according to Van Gorder, is raising the funds to pay for a targeted media campaign and recruiting the volunteers to mount a statewide field operation. So far, however, the late-starting campaign is lagging in both.

"My dream budget is $1 million," Van Gorder says, although he quickly adds that a more realistic goal is probably $750,000. Of this amount, he estimates that $340,000 will have to be raised in the Bay Area and Northern California.

But the No on 102 Committee has only $125,000 in the bank and party commitments of only an additional $50,000.

To be useful in reserving media time, Van Gorder says, "The time for people to help [financially] is early." The funds must be collected by October 1 in order to make the advertising reservations.

Getting on the airwaves is an important part of the strategy, and Wolfred notes that defeating Prop. 102 "has got to be a media campaign."

The campaign has been more successful in recruiting volunteers to work in the office. There are about 300 people Van Gorder describes as "pretty hard-core and regular."

But there is a need to shift focus away from the office and direct volunteers to the streets in a field operation that will engage in person-to-person voter contact.

Unlike the defeated propositions 64 and 69, this year’s ballot initiative doesn’t have the odor of being sponsored by extremist Lyndon LaRouche, who has a widespread public reputation as a right-wing loony.

The major backers of Prop. 102 are conservative US Representative William Dannemeyer and tax crusader Paul Gann. The combination of support from Dannemeyer and Gann gives Prop. 102 a veneer of respectability, opponents of the initiative say, and that makes the public relations campaign against it more difficult.

Expectations are that Dannemeyer and Gann will have a large pool of money to tap in promoting their cause.

More than $500,000 was raised and spent to put Prop. 102 on the ballot, with most of the contributions culled from a fundraising list kept by Gann. Van Gorder says Gann can tap even larger reserves in the coming months.

And there is concern that the insurance industry will come in at the last minute with its own large cash reserves to try to put the ballot measure over the top.

With Labor Day heralding the traditional start of general elections campaign there are signs that AIDS activists and the gay and lesbian community are finally waking to the threat. With approximately nine weeks before the general election, there will be a race between proponents and opponents of Prop. 102 to shape public perception about the ballot initiative.

Acknowledging that past initiative battles have exhausted the community, both financially and emotionally, Nolan is still adamant that "in the middle of a war you can’t sit out a major battle." He says, "I’m having a hard time figuring out why people are not taking this seriously. The fact is Dannemeyer can win."

But Coles continues to point to the Wilson poll as evidence that a Dannemeyer win can only result from a lazy response by AIDS activists.

Coles adds that beating a Dannemeyer/Gann-inspired initiative will also be profoundly more significant than earlier battles against LaRouche. A rebuff to Prop. 102 may finally put the AIDS extremists in their place, Coles says, and then he adds, "if I think we can beat this one back, we’re not going to see another one in quite a while."

Next week: Prop. 96, the Block initiative. How law enforcement officials are trying to single out prostitutes and sex offenders for AIDS testing.

No on 102
Phone Directory
There are campaign offices throughout Northern and Southern California to oppose Prop. 102. Locally you can call:
San Francisco 621-4450
Alameda 843-4272
Contra Costa 687-6416
Fresno (209) 264-2437
Humboldt (707) 445-6200
Marin (415) 472-1792
Monterey (408) 694-6161
Santa Clara/San Mateo (408) 298-8844
Santa Cruz (408) 426-6520
Sonoma (707) 579-1562
To contribute to the campaign, make a check payable to Californians Against 102 and send it to: 10 United Nations Plaza, Suite 410, San Francisco 94102, or call 621-4450.

Ballot Initiative Planning Meeting Called
A coalition of AIDS activists and gay and lesbian activists will meet Wednesday, September 14, at the offices of the San Francisco AIDS Foundation, 25 Van Ness Avenue, third floor conference room. The agenda of the meeting is to discuss developing a community-based grass-roots response to propositions 102 and 96. ACT UP San Francisco is the convener of the meeting.
Educating the California Voter: Results of a Poll on Prop. 102

Have you heard of something called Proposition 102 (also known as the Dannemeyer initiative)?

- Yes .................................................. 22%
- No .................................................... 64%
- Not sure ............................................ 14%

Proposition 102 was written with the intent to stop the spread of AIDS by requiring doctors to report to public health authorities anyone who tests positive to the AIDS virus, much as they currently do for venereal disease cases. Knowing this and nothing else, would you say you favor or oppose Proposition 102?

- Favor .............................................. 60%
- Oppose ............................................ 25%
- Not sure ........................................... 15%

Now suppose you learned that Proposition 102 would outlaw all anonymous testing sites, cost taxpayers hundreds of millions of dollars to implement and allows insurance companies to deny medical coverage if a person tests positive, even though the person may never develop the disease. Now knowing this, would you say you favor or oppose Proposition 102?

- Favor .............................................. 18%
- Oppose ............................................ 65%
- Not sure ........................................... 17%

Poll conducted September 2 by Dremer Sykes of New York using a statewide sample of 1,000. The margin of error is ±3.2%.

Political analysts say that the results of the third question prove that a well-educated public will vote against Prop. 102.
Doctors, Nurses Sue To Keep Dannemeyer AIDS Initiative Off Ballot

The California Medical Association, the California Nurses' Association and Dr. David Werdegar, director of the San Francisco Department of Public Health, brought suit July 6 to keep U.S. Rep. William Dannemeyer's AIDS Initiative, Proposition 102, off the November ballot.

Though promoted as a public health measure, the initiative would actually impede efforts to stop the spread of AIDS. The proposed initiative would forbid anonymous testing and require doctors to report the name of anyone "believed to be infected with the virus" to local health officers. Failure to report would constitute a crime and penalize doctors $250 each.

The suit approaches the initiative from a procedural aspect, for failing to cover more than one subject and charging that the petitions Dannemeyer used to obtain signatures for the initiative misleadingly failed to tell voters that the proposed law would ban anonymous testing.

Ben Schatz of the National Gay Rights Advocates told the Dispatch that the lawsuit should not keep people from becoming involved in Californians Against 102, the statewide organization opposing the initiative. Schatz urges people to make the campaign a priority until the November election.

For an analysis of the Dannemeyer Initiative, please see the Guest Editorial on page 7 of this issue.
An Urgent Call to Action
Stop the New LaRouche!

July 4, 1989: You have just been fired from your job for testing HIV-antibody positive. When you get home you learn that you are being prosecuted because you did not turn in your sexual partners' names and addresses within a week of learning your results. The Dannemeyer AIDS initiative has passed.

Unless we take immediate action, California will pass an AIDS initiative this November far more dangerous than anything proposed by Lyndon LaRouche.

I cannot overstate the seriousness of this threat. The Dannemeyer AIDS initiative represents perhaps the greatest political and public health threat to people with AIDS and HIV infection that California has ever seen. Frighteningly, it has a very good chance of passing.

What the Initiative Does
The Dannemeyer AIDS initiative would eliminate all anonymous testing in California. It would wipe out the law that bars employers from forcing you to take the AIDS antibody test. It would allow insurers to test applicants for HIV. And it would allow testing without written consent.

But there's more. Any doctor or blood bank that believes you are HIV positive must turn in your name to the health department within 48 hours or face criminal charges. And if you test positive, you must turn in your own name and the names and addresses of all your sexual partners within seven days. If you don't, you will be guilty of a crime.

The initiative gives sweeping power to doctors and health officials to violate confidentiality. If you test positive, doctors are allowed to disclose your results to anyone they think has had sex with you, and they can be forced to reveal your results in court. Health officers are required to use "every available means" to investigate "all reported cases" of HIV infection and to inform persons known or believed to be their sexual partners. To make things worse, health officials are given broad authority to do what they want with a person's test results if they think it will help "control the spread of AIDS." This initiative turns our health care providers into state police.

Finally, in an obscure section, the Dannemeyer initiative copies the LaRouche initiative by defining HIV infection as an "infectious, communicable disease." Thus the Dannemeyer initiative, like the LaRouche initiative, could ban HIV-infected children from the schools and result in the firing of all seropositive foodhandlers and school employees. It also forces employers to allow uninfected employees to wear whatever "protective gear" they think will protect them against AIDS.

Implications
If the Dannemeyer initiative passes, the taxpayers will be forced to spend billions of dollars on measures which will actually increase the spread of AIDS. People who fear loss of their medical confidentiality will lie or simply avoid their doctors. The threat of criminal penalties, loss of employment and denial of insurance will cause people to stop donating blood and lead high-risk individuals to shun counseling, testing and participation in critical-ly important AIDS research efforts. Not only will these people lose the opportunity to seek out promising treatments for themselves, they will be forced away from medical information which can help them avoid infecting others.

The financial burden caused by the initiative will be staggering. If insurance companies are allowed to reject thousands of HIV-infected applicants, their medical cost will be picked up by Medi-Cal and public hospitals — in other words — by the taxpayers. Otherwise productive, active members of society, fired from their jobs because they test positive, will be thrown onto unemployment and then welfare. And the cost of identifying and interviewing hundreds of thousands of Californians who are known or believed to be infected with HIV — and then contacting all their sexual partners — is almost beyond calculation.

Indeed, what is to stop people from calling the health department with the "accusation" that someone they don't like carries the virus? Who will pay for the cost of investigating these rumors and pranks? And what will it do to the fabric of our society when rumors and accusations can lead state officials to demand that we reveal the most private and sensitive information?

Make no mistake about it, the initiative threatens everyone, infected and uninfected alike. If you are uninfected, an employer could test you and fire you on the basis of an all-too-common false positive result. If you are uninfected, you could be required to reveal intimate sexual secrets to a state official if anyone you have ever slept with is thought to be infected. If you are reported to the state health department as a person with HIV, you will be forced to turn in your sexual partners without their consent.

I, like you, don't have the time. I, like you, don't have the money. And I, like you, don't have the choice.

Continued on next page
Prospects for Passage

Yet in spite of the dangerousness of the initiative and the opposition to it by groups such as the California Medical Association and the California Nurses Association, it stands a very good chance of passing. One reason for the resounding defeat of the LaRouche initiative was our ability to dismiss LaRouche as an extremist. Unfortunately, Congressman Dannemeyer, while just as extreme as LaRouche—he was the only major California politician to endorse the LaRouche initiative—appears more “respectable” because of his title.

His position as a well-connected Republican congressman also gives him access to large sums of money, and may make it more difficult for Republican politicians who opposed the LaRouche initiative to oppose this one as well. His pandering to insurers and employers who want to require testing provides the initiative with another significant funding base. Finally, Dannemeyer has capitalized upon the name of Paul Gann, a well-known right-wing activist who is infected with HIV, by calling the initiative the “Paul Gann Public Health Act.” This clever packaging is likely to gain the sympathy of unwary voters.

And then there is us. We are preoccupied with our own health, the health of the people we love and with other political battles. We are sick of fighting for treatments and education while extremist politicians engage in obscene attempts to exploit the AIDS crisis for political gain. We feel frightened and overwhelmed. And that is exactly what the Dannemeyers and LaRouches of this world want.

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What You Can Do

I urge you to write to all of your elected officials and to all political candidates today and tell them that you will not support them unless they actively oppose this disastrous initiative. Next, think of all the groups you belong to—your company, your union or your professional organization, your church or synagogue, your neighborhood association, civic or AIDS service organization, your friends. Urge them to oppose the initiative and to make the fight against it a top priority. Do not settle for lip service. We deserve more, and we must demand it.

We also need your time and money. As I write this, activists around the state are beginning to organize. But because we are starting so late, I do not want to wait until an official campaign is finalized before I appeal to you for help. Promise yourself that as soon as the campaign is organized you will volunteer your time. Promise yourself that you will think carefully about how much money you are willing to give, that you will double that amount, and that you will promptly write a check. Reprint this article and distribute it widely. If you wish, you can send me your name, your available hours and your skills, and I will make sure the information reaches the right people.

Write to me at: National Gay Rights Advocates (NGRA), 340 Castro Street, San Francisco, CA 94114.

It is time for us to face up to the fact that all of our lives have been permanently and irrevocably changed as a result of the AIDS crisis. We must recognize that, while AIDS has brought out the best in many people, it has also brought out the worst in others. Even if we defeat this initiative, we will face more battles—and then more. And as more of us become ill, those of us who are healthy will have to work harder. For the easier to prey upon us, the more opportunists will arise to prey upon us.

It is time to stand up and fight. It is no longer a question of choice. It is a question of responsibility.

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Benjamin Schatz is the director of the National Gay Rights Advocates' AIDS
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For more than an obscure citation, The Dannemeyer Initiative copies The LaRouche initiative by defining HIV infection as an "infectious, communicable disease." Thus the Dannemeyer Initiative, much like the LaRouche initiative, could ban HIV-infected children from the schools and result in the firing of all seropositive foodhandlers and school employees. It also forces employers to allow uninfected employees to wear—and to purchase at their own cost—whatever "protective gear" they think will protect them against AIDS.

An Urgent Call—Stop The New LaRouche!

by Benjamin Schatz, Esquire
Director,
AIDS Civil Rights Project
National Gay Rights Advocates

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Prospects For Passage
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And I, like you, don't have the choice.
by Zeke Zeldler

A cross-section of statewide lesbian and gay political leaders met in Orange County on July 16 to establish "Californians Against 102," the Dannemeyer Initiative (please see the guest editorial on page L-7).

The meeting included a diverse representation of the community, such as the Municipal Elections Committee of Los Angeles (MECLA) and Californians for AIDS Research and Education (CARE). Although gay Republican activist Bruce Decker already formed Stop Dannemeyer/No On 102, the leaders decided to form a new organization to head up the major fundraising efforts and statewide media campaign.

The group decided that the committee would only deal with the Dannemeyer Initiative and not the Block initiative, proposition 96. While San Francisco has already had meetings which determined this approach, as the Dispatch goes to press a meeting is planned in Los Angeles at which local grassroots' organizers are expected to decide to focus on both initiatives.

The initial steering committee that was formed included representation from various regions. The Los Angeles members of the steering committee include No on LaRouche (grassroots) Fundraising Co-Chairs Diane Himes and Bob Craig; and one of the Los Angeles finance co-chairs will be Brian Rix, a MECLA major donor co-chair. Pat Callahan, Richard Hathaway and Richard Reinsch will serve as the Orange County representatives.

The steering committee chose Himes and San Mateo County Supervisor Tom Nolan to serve as temporary spokespersons. According to Nolan, "Major lesbian and gay political organizations in the state came together in Dannemeyer's backyard to map out strategy to defeat his initiative—102. We formed a steering committee from all parts of the state. We need an education campaign and grassroots effort—if Californians understand what's in it, they would overwhelmingly defeat it."

Nolan told the Dispatch that this initiative is worse than the previous LaRouche initiatives and the organizers will raise "whatever it takes" to defeat Dannemeyer. Along with fundraising, the committee will also be gathering endorsements and money from political organizations and political leaders.

The California Medical Association, California Nurses Association and Health Officers Association of California have already taken stands against the Initiative. A Los Angeles Times editorial on July, 17 declared that the initiative provides "Dangerous Direction on AIDS."

Himes, who also serves as the co-chair of MECLA and the statewide LIFE AIDS Lobby, said "I want to urge all segments of the community to come aboard and assist in defeating this disastrous initiative. It could wipe out two years of LIFE's efforts in one day. We need people's time and their money."

Himes assured the Dispatch that, "All are welcome. There will be liaison and cooperation between this steering committee and the community. We have no time for differences of style. We must work together to defeat Dannemeyer."

Ben Schatz, of the National Gay Rights Advocates, reiterated this point. "We need to make sure that there are all sorts or people in local groups. The campaign needs to have broad-based support."

The steering committee is requesting proposals from campaign strategists who wish to work for the Californians Against 102. They should be submitted before the next steering committee meeting on July 30.
Thank you for the rational and compassionate editorial “Dangerous Direction on AIDS” (July 12) opposing Proposition 102, the Gann-Dannemeyer initiative. We were personally appalled when we first heard about the bill. It is evident that its only purpose is to legalize discrimination against members of our society who desperately need our help and understanding.

We would also like to point out another, far more insidious initiative in this debate, the Block-Davis initiative, Proposition 96, which would allow the forced HIV testing of anyone who may bite, spit, scratch or transfer bodily fluids to a police officer, firefighter or emergency medical personnel. Of course, confidentiality would be virtually nonexistent, and “bodily fluids” will take on new and interesting definitions. It does not confine itself to the irrational discrimination of gays and IV users, but opens the door to random forensics on the entire population.

The fact that these propositions even qualified for November’s ballot should greatly distress anyone remotely concerned for human rights. To condemn and punish AIDS victims and/or AIDS “suspects” (and eventually terrorize the entire population) is an irrational and parasitic way to deny the disease its victims and destroy the people. Most people with the virus are reasonably healthy and can survive for many years as productive, tax-paying citizens, but it seems that both propositions would prefer to make them a burden to society by turning them into criminals. It is so sad to see that people think AIDS is not only of the disease, but also victims of ignorance, hatred and discrimination.

MARY and ROBERT FRANKLIN
North Hollywood

Your editorial is unadulterated disinformation. If the provisions of Proposition 102 are dangerous, then all other efforts to fight communicable disease in the bay area should likewise be labeled. Honestly ask yourself, if public health officials test with implied consent, confidentially report positive results, and conduct partner notification for other communicable venereal diseases, then why disregard these traditional procedures when it comes to AIDS? Apologists for the AIDS Task Force are the temporary leadership of the California Medical Assn., the American Civil Liberties Union and the National Gay Rights Advocates, can only defend this anomaly on political grounds.

Common sense and human decency cry out for physicians to encourage their patients to seek an early diagnosis of the disease so any opportunistic infections can be treated.

Your erroneous charge of “indiscriminate tracing” and “wholesale notification” not only reveals your innate lack of understanding of public health procedures, but it also magnifies your unprofessional and inhumane fear in the public, much as if you shouted “LaRouches” at the homosexuals do. This immature tactic is ludicrous.

The Times, militant homosexuals, ambulance-chasing lawyers and radicals at the top of the CMA do not want confidentiality for the infected. They want accessibility and accountability.

The Times really have the public’s best interest at heart? If so, it will encourage the re-election of corrupt public health policies. Either treat all communicable venereal diseases as public health problems instead of treating them all, as you do AIDS, like a civil rights problem.

California currently reports all full-blown cases of AIDS to public health officials and yet we hear of no instances of breaches in confidentiality. Why will the confidential reporting of HIV infections change this state of affairs?

REP. WILLIAM E. DANNEMEYER
R-Pullerton
Washington, D.C.

Proposition 102 is a dangerous idea that, if passed, will inhibit the battle against the spread of AIDS. Confidentiality is essential because victims of the disease already exist on the brink of social intolerance. To subject these people to further trauma and stigmatization would, in turn, deter them from seeking treatment that advances medical research.

Perhaps the most menacing provision of the measure is to replace voluntary testing with mandatory testing. Proponents of mandatory testing criticize their opponents as acting out of paranoia by denying AIDS sufferers the right to privacy. This is untrue.

AIDS has an incubation period of anywhere from five to eight years. Thus testing is at best inconsiderate and incomplete. Mandatory testing would give the public a false sense of security at the cost of inhibiting necessary behavioral changes to stop the disease’s spread.

Furthermore, mandatory testing would create an atmosphere of fear and hostility. To fully understand this disease, testing must be accompanied by personal data of those affected. Therefore, conditions must be conducive to such cooperation.

The attempts by Rep. Dannemeyer and the like to politicize this disease are not only ignorant but inhumane.

ADAM CRAIG HILL
Newhall

It seems so ironic that we should look to Washington, D.C., for leadership only to find the Reagan Administration unwilling to meet its responsibilities with reference to people with AIDS.

At the very moment when our county Board of Supervisors has authorized its legal counsel to draft local anti-discrimination ordinances to protect people with AIDS, the White House is unreasonably and irresponsibly silent (Part I, Aug. 3).

Those of us who serve on the Los Angeles County Commission on AIDS are keenly aware of the amount of harm that can be inflicted when prejudice, ignorance and fear motivate individuals and neighbors to blow the horn of blame on people with AIDS. Such negativism simply cannot exist anywhere in our community nor any place in this nation.

I believe that President Reagan should be condemned for this lack of insight and leadership. It is my fervent hope that his successor in the White House will correct this grievous wrong.

RABBI ALLEN FREILINGH
Chairman
L.A. County Commission on AIDS
Dangerous Direction on AIDS

The AIDS reporting initiative, Proposition 102, has now qualified for California's November ballot, stirring deep concern among many doctors and public-health workers. The concern is appropriate. This is a dangerous and potentially costly proposal that would undermine the present effective strategy for controlling the AIDS epidemic.

There are two major provisions of the initiative:

—Requiring that all persons who test positive to the presence of the human immunodeficiency virus (HIV) that causes AIDS report themselves or be reported to public-health officials. The change would amend the elaborate rules of confidentiality now in place and terminate anonymous testing that has proved to be an effective control strategy.

—Ordering public-health officers to pursue the at-risk contacts of those who are infected, a project that could cost billions of dollars while serving, in most cases, only limited public-health purposes.

In limiting provisions for confidentiality and substituting mandatory for voluntary testing, the initiative challenges a basic finding of the Presidential Commission on the HIV Epidemic. "Rigorous maintenance of confidentiality is considered critical to the success of the public-health endeavor to prevent the transmission and spread of HIV infection," the commission concluded. "Current public-health strategies for fighting the spread of HIV infection are entirely dependent on voluntary cooperation."

In commanding an extensive program of partner tracing and notification, the initiative would impose a diversion of money from other urgent needs identified by public-health officials in the areas of education and treatment. Indiscriminate tracing would cost millions, probably billions, of dollars. The wholesale-notification provisions contrast with the carefully crafted recommendations on notification of unsuspecting partners of infected persons developed by the American Medical Assn. and the presidential commission.

There appear to be many motives behind Proposition 102. Some doctors who are supporting the initiative are frustrated by existing laws restricting the ability of doctors to share AIDS test results with other health-care providers. That problem is now being addressed with legislation. Some of the sponsors, believing that AIDS has become a "politically protected" disease, argue that the existing policy is "ill-conceived and self-defeating," and that it is high time that HIV infection should be treated like other communicable diseases.

That is the view of one sponsoring organization, California Physicians for a Logical AIDS Response, headed by Dr. Lawrence J. McNamee. He is a member of the Los Angeles County Medical Assn. AIDS Committee, but the committee itself has voted to oppose his initiative. Another sponsor, Rep. William E. Dannemeyer (R-Fullerton), has billed publicity-driven proposals to protect AIDS-infected persons from discrimination on grounds that these are programs that encourage homosexuality and intravenous drug use because a majority of AIDS victims in the United States are male homosexuals and intravenous drug users. In making their criticisms, unfortunately, the sponsors of the initiative have offered no evidence that their sweeping proposals in the initiative would strengthen the efforts to contain the disease. In fact, they would not.

The careless, counterproductive proposals of the initiative are particularly evident when it is compared with the constructive proposals of the presidential AIDS commission, headed by Adm. James D. Watkins. Taken as a whole, the initiative would do great harm to the basic strategy supported by the presidential commission. The breaches in confidentiality alone could destroy the voluntary cooperation of high-risk populations that the presidential commission cited as essential. There are, no doubt about it, problems and imperfections in the AIDS program. The presidential commission identified two basic shortcomings in the present approach: an absence of anti-discrimination laws that would protect victims of the deadly disease, and inadequate funding of efforts to control the disease, including treatment for drug users. But the initiative addresses neither of these problems. Indeed, if adopted, Proposition 102 would exacerbate them.

Dannemeyer has emphasized his opposition to "unconstitutional legislation. And the mandates for wholesale contact tracing would squander the already limited resources available.

It is not surprising, in the face of such flagrant defects in the initiative, that the California Medical Assn. and the California Nurses Assn. have gone to court seeking to bar the initiative from the ballot. Proposition 102 would appear to violate constitutional restrictions that initiatives be limited to a single subject. Regardless of the outcome of the suit, the challenge at least makes clear the depth of opposition by many of the best-informed health-care professionals, including most of those directly involved in the effort to contain the AIDS pandemic.

"The initiative is bad medicine and bad public health," according to Dr. Laurens White, president of the California Medical Assn. We agree.
Has the Well Run Dry?

Campaign Against Prop. 102 Starts with Fundraising Problems

by George Mendenhall

Congressman William Dannemeyer (R-Fullerton) could have the last laugh if a crisis in funding the fight against his Proposition 102 "AIDS Reporting" initiative on the November ballot is not averted. An amazing $2.5 million was raised in 1986 to fight Prop. 64, a relatively minor piece of legislation from Lyndon LaRouche, but those funding sources are burned out or have shifted to AIDS associations and services. Only $250,000 was raised to fight LaRouche's Prop. 69 earlier this year. The campaign underway to defeat Dannemeyer is working with a modest $500,000 budget.

There is some question as to whether lesbians and gay men, who are the most motivated because of the devastation of AIDS in their community, can raise $500,000. One person gave $100,000 at the start of the 1986 campaign against LaRouche, and an additional 50 people gave over $500,000 within weeks. Over $1 million was spent for television to defeat Prop. 64, but no TV ads are planned for the coming campaign against Dannemeyer. The big money is no longer there to fight an AIDS initiative.

Amidst this fiscal crisis, ACLU attorney Matt Coles brings worse news. He says 80% of the state legislation restricting HIV testing and protecting confidentiality would be repealed if Dannemeyer's measure passes. He believes, "If it becomes law, it will halt useful AIDS legislation in Sacramento and take away much of our maneuvering room in the future. This initiative is far more dangerous than LaRouche was. It would be more difficult to challenge in court."

"This initiative is far more dangerous than LaRouche was. It would be more difficult to challenge in court."

— Matt Coles

A coalition of heavyweights have lined up against Dannemeyer's Proposition 102. They include Laurens White, president of the California Medical Association; health director David Werdegar; ACLU attorney Matt Coles; and Helen Miramontes of the California Nurses Association.

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Initial fundraising pledges have been set by lesbian and gay activists at the northern meetings. The pledges are: San Francisco, $125,000; Alameda, $75,000; Marin, $75,000; Contra Costa, $50,000; Solano, $50,000; Napa, $25,000; Sonoma, $25,000; Mendocino, $25,000; Humboldt, $25,000; and Trinity, $25,000.

The Dannemeyer initiative would permit employers and insurance companies to test employees for HIV infection and would require people who test positive to report themselves to a local health officer within seven days and name all of their sexual contacts. It says doctors and clinics must report everyone with AIDS and requires that health officers tell spouses and known sex partners that they may have been exposed.

No major challenge is being launched against a second AIDS measure on the ballot from Sheriff Sherman Block of Los Angeles, because the energy and resources are not there to fight it. Prop. 96 would require HIV testing of anyone who "interfered" with the duties of a police officer, firefighter or emergency medical person and placed blood, saliva or any other body fluid on such a person. The HIV test results could then be related to others in the immediate area who are exposed.

Even with the fiscal drought, planning for the No on 102 campaign is well underway here and in Southern California. Thirty Bay Area gay activists meeting at the SF AIDS Foundation since June resolved ways to fight the initiative with limited resources. They set guidelines that have led to establishment of the steering committee and statewide effort. This informal group, chaired by Pat Christen of the AIDS Foundation and Paul Boneberg of Mobilization Against AIDS, continues to meet to coordinate a grassroots effort in the nine Bay Area counties.

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Coles garnered the first publicity locally against Prop. 102 when he filed a lawsuit in Superior Court to have the measure removed from the ballot. Coles contends it violates a state initiative law and is misrepresented in its title.

The first major newspaper editorial was on July 17, when the Los Angeles Times editorialized, “The initiative would do a great deal of harm to the basic strategy supported by the presidential commission. The breaches in confidentiality alone would destroy the voluntary cooperation of high-risk populations the commission cited as essential.”

Campaign Organization
Local political consultant Dick Pabich and Diane Himes of the Municipal Elections Committee of Los Angeles are expected to head the Northern and Southern California No on 102 campaigns. Pabich is being assisted by Dana Van Gorder, who is on temporary leave from his job as an aide to Supervisor Harry Britt. Attorney Todd Dickinson is serving as finance coordinator.

A ten-member statewide steering committee has been meeting and is overseeing fundraising and campaign strategy. Northern California members are Pat Christen, SF AIDS Foundation; Paul Boneberg, Mobilization Against AIDS; Todd Dickinson, Bay Area Nonpartisan Alliance; Tom Nolan, San Mateo Board of Supervisors; and Don Sloan, Bay Area Municipal Elections Committee.

Northern and southern offices will be opened soon. Monies raised would be spent for polling, printing materials, office expenses, slate cards, fundraising expenses and accounting. Media advertising would be projected at $50,000 unless the money received exceeds present goals. County grass-roots efforts will be financed and run at the local level. “People power” will have to do in lieu of television commercials.

Grass Roots
Boneberg, a veteran of the No on 64 anti-LaRouche efforts, has again taken the active role in organizing the grass-roots effort outside of San Francisco. He says, “A number of counties are already plugged in, and we have people willing to work. We will not be able to pay the salaries and deliver materials to those outside of the city, but they are better organized now and capable of running their own campaigns. There is an office already open in Alameda.”

Tom Nolan, San Mateo Board of Supervisors, said the grass-roots effort will be extensive in Santa Clara and San Mateo counties under the direction of Bay Area Municipal Elections. “It is a different form of activity here,” he said, “as there is not the Castro Street kind of visibility, but we have always met our goals in raising money.” Nolan is taking a resolution opposing Prop. 102 to the San Mateo board this week and will then take the resolution to the other Bay Area county boards.

A separate organization to battle Dannemeyer has been formed by gay Republican activist Bruce Decker, an AIDS advisor to Governor Deukmejian. It will hold its first meeting on August 6. Stop Dannemeyer is a public relations group, bringing in professionals and medical groups to promote opposition to Prop. 102. Activists in the No on 102 campaign are hopeful that in future meetings responsibilities can be divided between the two organizations to avoid confusion.

Campaign Strategy
Pabich says the campaign will “attempt to tie 102 to LaRouche and his two previous initiatives, calling the Dannemeyer initiative LaRouche III. We will be emphasizing that AIDS is a medical issue and should be resolved by medical people — not politicians.”

August will primarily be for fundraising, with September set as the kick-off with press conference throughout the state.

Dickinson warns, “This time we are not dealing with LaRouche but mainstream people. Dannemeyer is a congressman and his co-sponsor of the initiative, Paul Gann, has had well-financed and successful initiatives in the past.”

The attorney says Republican support would help the No effort. “Some Republicans on the right wing will be coming out for Dannemeyer. If the GOP establishment says no to 102 it would make our role easier. If not, it would really be a challenge. This could become a partisan party issue.”

The California Republican Executive Committee voted to endorse Prop. 102 in April. An override of that decision may be attempted at the GOP’s state convention in September. The positions of Senator Pete Wilson and Governor Deukmejian will influence any such vote.

Wilson has “no position at this time on the initiative,” according to his Washington, DC, office. The senator will be asked about his position on 102 when he appears as the speaker at the local Concerned Republicans for Individual Rights’ annual dinner on August 22. Deukmejian has not taken a position on 102. He opposed 64 and 69 in the final days of those campaigns.

Plans are being laid to finance the northern campaign. There will be a major celebrity fundraiser, business and professional receptions, political club receptions, a united labor function and house parties. The mailing lists of many nonprofit Bay Area AIDS groups will be used.

Dickinson adds, “We cannot do as much professional fundraising because we will not have the paid staff. However, I am confident that we can have a good campaign with our limited budget.”
Gann Will Wreck AIDS Prevention Work

By Benjamin Schatz

July 4, 1989: You have just been fired from your job for testing HIV-antibody positive. What’s your first thought? That you are being prosecuted because you did not turn in your sexual partners names and addresses within a week of learning your results. The Dannemeyer-Gann AIDS initiative has failed.

Unless we take immediate action, Californians will pass an AIDS initiative this November, which is far more dangerous than anything proposed by Lyndon LaRouche.

Learned by Cautious Mentorship of this Threat. The Dannemeyer-Gann AIDS initiative mandates punitive, reflexive, and public health threats to people with AIDS and HIV infection that California has never seen. Frugality is the only good chance of escaping it.

What is the initiative do?

The Dannemeyer-Gann AIDS initiative would eliminate all HIV awareness testing in California. It would wipe out the law that bars employees from forcing you to take the AIDS test in the workplace. It would make it illegal for any doctor or bank that believes you need such a test to force you to take one. It would lose your ability to prevent doctors and health officials to violate confidential health information. This would allow doctors tocollect all your information without your knowledge.

But there’s more. Any doctor or bank that believes you need such a test must make sure in your health department with them that you are receiving all your sexual partners within seven days.

If you don’t, you will be guilty of a crime. The Dannemeyer-Gann AIDS initiative also requires that doctors and health officials to violate confidential health information. This would allow doctors tocollect all your information without your knowledge.

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Amyl: Continued From Page A-6

The bulky HHS report on poppers and KS, which HHS Secretary Otis R. Bowen forwarded to Sen. Orrin Hatch in compliance with the Anti-Drug Abuse Act of 1986, that act required HHS, the FDA, and National Institute on Drug Abuse (NIDA) to undertake the review.

HHS's Report
Bowen forwarded to Congress a report which contained a variety of sociological and medical information on poppers, based on common information on the "tush" it gives to a rare instance of violent mortality associated with accidental exposure to poppers.

Enclosed in the report is a survey of young people, age 13 to 22, first published in the June 1986 Clinical Pediatrics. It said 56% of these young people found the "high" obtained from amyl was good, while 44% found it unpleasant. And the researchers say the odor of amyl is "not pleasant." Still, in a 1984 study of...

STUMPF, From Page A-13

Highway, near his home that he lived at 1209 Rivers, St. Anne's Funeral Home, 10, 300

Funeral services will take place at Revell Funeral Home in Indian

Orchard, Mass., with interment at St. Anne's Cemetery in Three Rivers, Mass.

Also, a memorial service was held July 10, 1988 at his home in Los Angeles. He will be remembered by his family and so many loved friends that flowers donations may be designated in his name to AIDS Project Los Angeles Home Health Care Study, 3070 Wilshire Blvd., Suite 300, Los Angeles, CA 90010.

Wayne's years were always filled with a lot of love and beauty.

He fought this disease with much courage, never giving up. He had his humor and will about him until his short life ended. He was a truly inspired and to anyone who knew him, a kind, gentle man who was friendly to everyone.

The family expresses its appreciation to Linda Cook and Robert Anderson, who were his nurses at home. They were very good with Wayne and truly cared for him with love and understanding. Wayne was very fond of them.

He is survived by his loving family, his parents E.D. and Dorot, three sisters, Virginia, Wendy and Drew, and many friends. The family suggested donations in his memory to AIDS Project Los Angeles.

Amyl: Continued From Page A-6

high school seniors, 10% of 17,000 students surveyed used amyl. Elsewhere the unpleasant odor of poppers is compared to the odor of sweaty gym shorts and pock straws. Clinical Pediatrics notes that in 1988 this drug was restricted to prescription use only because of its increasing abuse by many home users. Isobutyl nitrite, a legal drug said opaque, soon took the place of amyl nitrite in the homosocial community.

Among young people, a federal survey found amyl use closely associated with cocaine and marijuana use. In one study of young amyl users, 96.5% had tried cocaine. And in one more federal drug officials find a ban on poppers dangerous.

The retail ban could prompt in individuals, particularly adolescents, to seek out butyl nitrite from unlicensed sources or other substances of abuse with greater health risks as a substitute for butyl nitrite. Daring adolescents toward the illicit black market in drug substances introduces these young butyl nitrite users to underground streams of illicit trafficking with attendant exposure to far more dangerous substances."

The HHS report says.

Extending that observation to the Gay community in general, Voeller noted that "Anybody can make poppers in their own kitchen." He concludes that if banned, homemade poppers are going to be widely available. According to Voeller, studios of homemade poppers vs. those made by major manufacturers show that the homemade variety contains many impurities. Voeller asks, "Why legalize something that is relatively clean?"

Current health risks associated with poppers made by major manufacturers, the HHS report concludes, are too minor to warrant the diversion of resources that would be required for the FDA to regulate the product.

FDA conducted a full medical and scientific evaluation of the risks posed by butyl nitrites in its 1985 'eight-factor analysis'...FDD and NIDA have reevaluated butyl nitrite as required by this Act.

Notwithstanding the fact that butyl nitrite products are abused and present certain risks, it is FDA's position, supported by analyses in this report and elsewhere, that the severity of the health risk does not warrant a ban. FDA's regulatory discretion in trying to regulate butyl nitrite products..."

Previous Ban Attempts
Every approach has been used to ban poppers — apparently only because of sex-related use of the drug. First, amyl itself was made a prescription drug. Then in 1981 the Consumer Product Safety Commission, which had been asked to declare poppers a hazardous substance, concluded that "the available toxicity and injury data do not support the position that the degree or nature of the hazards associated with this product is such that the public health and safety can only be adequately protected by removing this product from the channels of interstate commerce."

The commission again refused to ban the product in 1983 and in 1984. In 1985 and 1987 the Food and Drug Administration refused to regulate poppers.

On May 4, 1988, the Senate Committee on Labor and Human Resources completed its investigation. In the 1987 HHS report and "concludes that no further federal action as to amyl nitrite is warranted. However, in view of the Report's finding of somewhat increased (popper) use by high school students, the Committee recommends that the States consider prohibiting access by minors to amyl nitrite products."

But about the same time, Henry Waxman inserted into an omnibus bill a short provision, less than one page-long, declaring that "butyl nitrite shall be considered a banned hazardous substance under section 8 of the Consumer Product Safety Act (15 U.S.C. 2057)." The bill allows poppers to still be made and sold, but not for inhalant use or "euphoric or physical effects."

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THURSDAY 8PM
Peggy Minafee with Howie Gold

FRIDAY 9 PM
Two of a Kind
Sandee Hirsh & James Stoffo

SATURDAY 9 PM
Eclipse
Jack Stanton & Ron Levy

Eclipse
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Update
Wednesday, July 20, 1988
LOS ANGELES — A bill to ban the sale of butyl nitrite nationally has been introduced in Congress by Rep. Henry Waxman, D-Los Angeles, and will likely cite American Representatives as part of an omnibus drug bill. Waxman did not hold hearings on the bill, which is being pushed through to the floor of the House for a vote.

Amy of butyl nitrite is widely used as an inhalated sexual stimulant. It was initially claimed to be "the" cause of AIDS, but supporters of that theory backed off and in a 1986 study claimed it was related to Kaposi's sarcoma. No other studies have been able to produce data linking the chemical to KS.

A study frequently cited as doing so, itself concludes flatly that there is no link.

Dr. Bruce Voeller of Los Angeles, founder of the Mariposa Foundation and long a critic of the effort to ban or regulate butyl nitrite, also well known as "poppers," called the new effort to ban "anti-social and not an orthodoxy scientific one.

Voeller, activists, attorneys, and manufacturers of the chemical all complained they have been unable to get direct

ly from Waxman — or even his aides — any comment on why he is pushing the bill through Congress. But they did say activists believed Waxman was pushing the bill at the request of Los Angeles Congressmen Mel Levine, D-District 27th Dist.

Voeller emphasized that the intoxicating effects of pop-

pers and the much longer-lasting intoxicating effects of alcohol. He said that intoxication's effect on safe sex decisions should be a greater concern than any links between poppers and KS.

Los Angeles County District Attorney, Jeff Voeller, also expressed alarm at the consequences of banning the drug: the proliferation of impure homemades poppers among smugglers and sellers.

In 1985, Voeller was part of a successful lawsuit claiming a link between KS and poppers, recently appeared in the New England Journal of Medicine and drew chuckles from Voeller.

Governor Urged To Revers

AIDS Vetoes

LOS ANGELES — At a city hall press conference, key legislators and AIDS officials yesterday urged Gov. George Deukmejian to reconsider $30 million in AIDS cuts to the state's $103.8 million AIDS budget.

(A detail of the budget with and without veto is attached on page A-2 of this issue.)

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**Nation & World**

Congressman Gerry Studs apologized to voters this month who had difficulty reaching his office. "I apologize. I also sympathize. Because of glitches in a new campus telephone system, I have recently installed throughout the House of Representatives, I was also unable to reach my office."

**Supreme Court Justice Byron R. White may retire from the court after its 1988-89 term, reports the National Law Journal. White wrote the Hardwick decision which exhibits a religious obsession with homosexuality and declares that Lesbians and Gay men may be barred from privacy under the federal constitution. Appointed by President John F. Kennedy in 1962, he usually sides with Rehnquist. If White does retire as the Journal indicates, the next president will have an early opportunity to appoint a Supreme Court Justice.**

Maryland's Court of Special Appeals decided May 19 that it did not violate the constitutional right of privacy for a trial judge to sentence Steven Schochet to five years in prison for having oral sex with a woman to whom he is not married. The court reasoned that the U.S. Supreme Court in Hardwick had limited the right to privacy to "sexual intercourse but not marriage, regardless of whether the extramarital intimacy were heterosexual or homosexual." If voters want to alter the oral sex, the court said they should instruct their legislators to change state law. A dissenting opinion noted that according to public opinion research, the overwhelming majority of heterosexuals engage in oral sex.

**AIDS Walk New York raised $2.5 million during the May 15 event, which began with a musical send-off at Lincoln Center. Among the first of 100,000 people to participate, with a walk funds totaling $1,000,000 raised was are available at $95 each from GLA Vant, P.O. Box 3449, Camden, CA 90010. Aids are now being accepted for the 1989 edition.**

Sacramento AIDS Foundation, struggling with budgets and pending state budget cuts, wrote to the State Assembly May 16 with an appeal for a $200,000 grant from the state's surplus unused AIDS funds for 1987-88, reports from Sacramento. The Foundation wrote that $20,000 of the funds recently allocated were to be used to increase the Foundation's Yellow Express train, which has been operating in a corridor in the San Francisco area. The Foundation's current caseload is over 200.

**California AIDS Budget 1988-89**

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<td>California AIDS Budget Totals:</td>
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ST. GABRIEL, La. — A guard at the Hunt Correction Center here faces charges of criminal malfeasance for sexually abusing a prisoner after his penis was "partially detached" when he forced the prisoner to perform oral sex.

The prisoner, James Maness, is planning to file a civil suit against the guard and the prison.

According to the Baton Rouge Morning Advocate, guard James Scales Jr. attempted to cover up his abuse of Maness by claiming the prisoner assaulted him with a knife. His story was disputed by another guard who told investigators that Scales asked to borrow his knife when he noticed Scales was bleeding from the groin area.

Sheriff Freddie Pitts, an investigator in the case, said a prison SWAT team carrying a shield and riot batons pinned Maness to the wall of his cell and beat him after the incident. Pitts also said a search of the cell revealed no weapon.

According to Gay Community News, Maness' lawyer Henry Walker said the case against the prisoner is strong since Maness had filed written complaints about Scales' previous abuses, but prison officials had ignored them.

Maness has been transferred to another prison and placed in isolation. Walker said that Maness told him he has not received any medical attention for injuries he received in the beating.

BETHESDA, Md. — Additional volunteers are being sought for the AIDS vaccine study that is under way at the National Institute of Allergy and Infectious Diseases (NIADD) here.

The study is designed to determine the best dosing in regimen and the nature of the antibody and cell-mediated immune responses to the vaccine. At the recent AIDS conference in Stockholm, NIADD scientists said initial results of the study are promising.

Dr. H. Clifford Lane, Deputy Clinical Director, NIADD, said 20 volunteers had developed an immune response to the vaccine. He presented data on 60 volunteers who have been inoculated using escalating doses of a recombinant AID vaccine made by MicroGeneSys, Inc. of West Haven, Conn.

The vaccine consists of purified envelope protein, gp 160, derived from the genetic material of the HIV virus which is believed to cause AIDS. Participants in the study are healthy homosexual and bisexual men who are at low risk of HIV infection.

Of 16 volunteers who received 40 micrograms of the vaccine, 10 showed an antibody response. Of 15 who received 80 micrograms, 10 have developed antibodies. Local reactions such as tenderness, redness, and swelling, have been infrequent and fever of up to 24 hours duration, common in any vaccine, occurred in some volunteers. No serious toxic effects have been seen.

Volunteers must be healthy homosexual or bisexual men at low risk of HIV infection who are able to come to NIADD once a week for the first month after vaccination, and subsequently once per month for the next year. Travel expenses for volunteers who are not local will be paid by NIH.

To obtain more information or to volunteer, call (301) 455-3027.
ACT UP Presses for AIDS Ward

LOS ANGELES — Nearly 100 people gathered on County Hospital's second floor on Wednesday, July 9, to demand that the facility organize an AIDS unit in addition to the two AIDS units that the protesters had kept an all-night vigil in a mock AIDS unit they set up in the hospital grounds.

In the wake of the protest, sources close to hospital officials said administrators and senior physicians have agreed to support creation of an AIDS ward.

The action was the second time the AIDS Coalition to Unleash Power/Los Angeles (ACT UP/LA) had organized a protest against the lack of an AIDS unit at County/USC Hospital. The first demonstration occurred April 30, shortly after the County AIDS Commission empowered a task force to report on the feasibility of creating an AIDS ward. Although the task force had until July 15 to submit its report, it has failed to do so.

According to the Los Angeles Times, members of the task force say they are too busy to meet.

At the Friday, July 15 meeting of the County AIDS Commission, the task force, chaired by Ewing D. Young M.D. asked for an extension of its deadline.

"We were told today by the chairman of the task force that his group had not ever, that they'll hold their first meeting on July 15," said John Fail of ACT UP/LA.

"Well, if they're too busy to meet, they should find people who aren't too busy," said Fail. "Obviously, they didn't care enough to make time."

"We are nine years into this epidemic, County Hospital still doesn't have a dedicated AIDS unit, and the task force waits while more time to study the issue. It's criminal negligence at best — the task force should listen to the hospital's leaders, who support instituting an AIDS unit," said ACT UP/LA member Peter Cashman.

Currently, a person with AIDS or AIDS related complex (ARC) is admitted to hospital wards according to the opportunistic infection he or she has at the time. For example, a person diagnosed with pneumocystis carinii pneumonia would be placed in the respiratory ward if it is available. If the ward is full, the patient would be placed in any available space.

Cashman said an AIDS ward would attract health care professionals who could treat many infections a PWA or PWARC may have at one time, not just one infection. With newly funded patient morale would improve due to the proximity of many people dealing with the same syndrome. Patients admitted to the ward more than once would be familiar with the facilities and the staff.

Dedicated AIDS units have proved successful at a number of local private hospitals and at San Francisco's General Hospital.

Creation of a dedicated AIDS ward at County/USC Hospital might require some start-up funds, but because of the volume of AIDS patients, ACT UP/LA spokesman John Fail said the ward would save them money in the long run.

"He also said he did not believe cost was an issue."

"Honestly, I think it's just bureaucracy. There's no sense of urgency," said Fail.

Metro

A rummage sale on Saturday, July 30, from 3 to 7 p.m. in the parking lot of club, 3626 Sunset Boulevard in Silverlake, benefits the Whitman-Brooks Foundation and its programs. Discover new treasures at incredible low prices, and help Whitman-Brooks, an educational foundation which advocates coming-out as the goal in developing a positive image for the Gay Identity. It sponsors an urban gathering program, personal growth seminars and community awareness seminars. For info or to volunteer call: (213) 353-0523.

A Lesbian studies introductory course. The Lesbian Experience, its challenges and successes, will be offered Wednesday evenings, 6 to 9:30 p.m., at S.C.T.A. The course offers an overview of the 20th century's Lesbian experience from cross-cultural and multi-racial views, a comparative exploration of feminist and Lesbian theory and politics, and a look at the roots and manifestations of Lesbian politics and theory. Applications need to be completed by June 30. For information call: (213) 748-0258.

AIDS Awareness Luncheon on Wednesday, July 20, 12 noon to 1:30 p.m. at the Hollywood Roosevelt Hotel, 700 Hollywood Boulevard. The luncheon will feature a keynote address on AIDS prevention, an AIDS education segment and a viewing of "It's Our Health" and "No On 96."

\end{verbatim}
Global Survey

Study Says AIDS Laws Blame Victims

Associated Press

Boston

Many new laws enacted around the world in response to AIDS are discriminatory and based on irrational fears that it is a "foreigners' disease" and not a global problem, according to a survey released yesterday.

The number of health organizations around the world that have enacted legislation in response to the deadly disease is unprecedented, according to the survey of international laws and policies prepared by the Harvard School of Public Health and commissioned by the World Health Organization.

"We're seeing an increase in the use of coercion, quarantine and criminal prosecution against AIDS victims," said Larry Gostin, director of the American Society of Law and Medicine and an associate professor at Harvard's School of Public Health. He presented highlights of the survey at the 10th National Lesbian and Gay Health Conference and AIDS Forum.

"It's becoming a syndrome of blaming the victims," Gostin said.

One of the countries most guilty of using criminal statutes and coercive measures to penalize AIDS victims is the United States, Gostin said.

"We found at least 50 criminal prosecutions of people with the HIV virus and uncovered at least a dozen more statutes for quarantine, isolation or criminal prosecution of people (in the United States)," said Gostin. He called the study a "real eye-opener."

Cuba and the Soviet Union have among the toughest laws designed to combat the fatal disease, according to the study. Cuban officials test all returning foreign citizens for AIDS, including soldiers, and are keeping 150 people who have tested positive for the AIDS virus in perpetual quarantine.

Soviet officials recently passed a law calling for compulsory screening of all AIDS high-risk groups such as intravenous drug users, homosexuals and prostitutes, and may test foreign diplomats.

The survey, which was sent to health officials in every country, found that 45 percent of the 77 countries that responded have AIDS legislation, the first time that health officials around the world have developed laws for just one disease, Gostin said.
Partner Notification Can Be Useful Tool Against AIDS Spread

By NEIL R. SCHRAM

The American Medical Assn. and presidential AIDS commission have recently encouraged increased use of contact tracing (now also called "partner notification") to reduce the spread of the human immunodeficiency virus (HIV). To many people, especially in the gay community, contact tracing is very threatening. However, information about programs in Minnesota, South Carolina, Colorado and California has shown that partner notification can work as a small part of a major community AIDS prevention program.

The primary goals of contact tracing for HIV are to locate people who are unlikely to know that they may have been exposed to HIV, and to provide them with counseling on low-risk behavior and on the advisability of testing to see if they have been infected. For example, in large cities the primary target is usually women of childbearing age who may have had sexual contact or shared needles with infected men.

Because partner notification is both expensive and labor-intensive, every community sets priorities concerning whom to contact and counsel. In San Francisco, tracing is currently limited to partners of heterosexuals with AIDS going back to 1979. In Colorado, tracing is done only for partners within the past 12 months. In a rural South Carolina county, there was tracing from the only individual who tested positive, a gay man, but tracing was done only within that county. Successful contact tracing can only be voluntary. No law or procedure can force someone to name contacts whom he or she "forgets." Thus it requires a spirit of cooperation and trust between public-health officials and the community.

Confidentiality must be guaranteed. This means that people are notified and counseled in person. Sometimes, after several failures to locate someone in person, efforts are made by telephone or letter but only to persons who are known to have met the primary target. No information about the reason is provided by phone or mail. Proof of identity is then required before information about likelihood exposure is given. A person is never told who gave his or her name as a contact. It is only because of this provision that some people have sought assistance in notifying prior partners whom they were unwilling or unable to notify themselves. The fear that gay bisexual men have is that someone will approach them at work or home and expose their sexual orientation, resulting in loss of job and/or family disruption. This does not happen in successful programs, and guarantees must be established within programs to be certain that it does not happen.

Contact tracing is expensive—$110 to identify an infected individual in South Carolina (compared to $500 at a government-funded test site) and $2,203 in San Francisco. Because of the cost it is obvious that only a small number of people can be reached this way. Thus widespread community prevention programs and anonymous testing programs must continue to be the major focus of AIDS prevention. In South Carolina, the good news is that the gay men who were intensively counseled after contact tracing had a marked increase in condom usage for anal intercourse. This is the only study showing that contact tracing results in behavioral change. All programs need an evaluation to see if they are effective, not just in identifying people but in reducing high-risk behavior as well.

Many people at increased risk for AIDS—gay and bisexual men, IV drug users, and blacks and Latinos, who make up the vast majority of heterosexual AIDS cases—have good reason to mistrust governmental authority. Public-health officials in any community constituting a partner-notification program need to meet with representatives of these at-risk groups as well as with women's groups, since women of childbearing age are likely to be a top priority for tracing in all communities. Information about the methods of contact tracing and procedures for guaranteeing confidentiality must be discussed.

Politicians, physicians, and others who treat contact tracing as a punitive measure must be encouraged to stop such behavior because it leads to further distrust and can destroy the effectiveness of a contact-tracing program.

If the resources and personnel are made available and if confidentiality is guaranteed, then with community cooperation a successful partner-notification program can save lives. However, an improper program can destroy lives. The choice is obvious.

Neil R. Schram, an internist, is a member of the Los Angeles County Medical Assn. AIDS Committee.
Action on the AIDS Front

Bipartisan support has developed in Sacramento on legislation to protect people with the AIDS virus from discrimination, an important development in implementing a key recommendation of the Presidential Commission on the Human Immunodeficiency Virus. California may be the first state, since the release of the commission's report, to move ahead in this way.

The bill, AB 3795 by Assemblyman John Vasconcellos (D-Santa Clara), would provide the same protections for those who test positive to the AIDS virus but have no symptoms of the disease that already exist for those who have been diagnosed as having AIDS. They would be protected as to both housing and employment, as recommended unanimously by the governor's own Fair Employment and Housing Commission.

The Los Angeles County Board of Supervisors has also agreed to act on the issue of discrimination—a welcome step in the county with the second-largest AIDS caseload in the nation. The board has ordered the drafting of an ordinance to provide protection against discrimination in housing and employment for those with AIDS, those with AIDS-related complex and those infected with the virus. The proposal won the support of Supervisors Deane Dana, Ed Edelman and Kenneth Hahn; Supervisors Pete Schabarum and Mike Antonovich were opposed.

The state anti-discrimination bill is one of four major elements of AIDS legislation sponsored by the California Medical Assn. All would facilitate the work of health-care providers and public-health officials in restraining AIDS. Two of the measures would relax California's uniquely stringent confidentiality laws—one to allow health-care providers to share HIV test results among themselves as needed, the other to permit the sharing of test data with public-health officers to enable them to do contact tracing of unsuspecting persons at risk from contact with infected persons.

The fourth bill, SB 2840 by Sen. Gary K. Hart (D-Santa Barbara), also would implement a key recommendation of the presidential commission—expanding education and counseling on AIDS.

These constructive proposals address important problems while avoiding the negative consequences inherent in such other proposals as Proposition 102, which has qualified for the November ballot; it would mandate reporting and contact tracing in ways that would disrupt the existing effective structure of the AIDS containment program. That proposition is, for obvious reasons, being vigorously opposed by the California Medical Assn. and most public-health workers.

As the presidential AIDS commission reported, "HIV-related discrimination is impairing this nation's ability to limit the spread of the epidemic." That is the reason the growing support for AB 3795 is so important to everyone in California.
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