PHILADELPHIA—Hundreds of activists upset with proposed cuts in social services spending disrupted a city budget hearing Friday, and 12 protesters were taken into custody, authorities said.

Police led the protesters from City Council chambers after Deputy Police Commissioner Thomas McGeehan asked them to move from council members' chairs so the hearing could resume.

City Solicitor Seymour Kurland said he did not know if those detained would be charged.

Mayor W. Wilson Goode last month proposed a $2-billion budget that would cut spending for the homeless, AIDS and community organizations but bolster police and health clinic staffs. Goode was not at the hearing Friday.

400 Jam Chamber

The protest was organized by a coalition of labor and community groups. About 400 people had packed the ornate chamber gallery, carrying signs saying “AIDS Coalition to Unleash Power” and “Save City Health Services.”

Testimony by city finance officials had just begun when protesters began climbing over railings and seizing microphones on members' desks to make speeches or shout slogans.

Council President Joseph C. Coleman tried to gavel the protesters into silence several times but gave up before noon and called a recess. Most of the protesters then left, but about 40 stayed.

When city officials tried to reconvene the hearing, the 12 protesters who refused to go to the part of the room set aside for the public were detained. The hearing then proceeded quietly with a limited number of people allowed to sit in the spectators' gallery.
Children Used in Clinical Trial

Uproar Over AIDS Study

By David Perlman
Chooer Science Editor

Doctors seeking ways to ward off infections in sick infants and children with AIDS have come under fire from a militant group that accuses the physicians of "killing babies."

The charges — including accusations of "genocide" — come from San Francisco members of a national organization called ACT UP — the AIDS Coalition to Unleash Power.

After voicing their protests earlier this week to medical researchers at Children's Hospital Oakland, members of the group have planned a larger public demonstration at the University of California in San Francisco tomorrow.

Their anger is directed at a small-scale clinical trial under way at 11 medical centers around the country in an attempt to learn whether injections of gamma globulin, a component of the human immune system, can boost the immunity of the children with AIDS.

The confrontation illustrates a profound dilemma in the AIDS epidemic. Medical specialists believe that in order to test new therapies reliably and safely, it is vital to conduct the trials under what are known as randomized double-blind placebo-controlled conditions.

In this case, the placebo is albumin, an inert and harmless protein substance that has no effect at all. Half the young AIDS patients participating in the trial are being injected with the gamma globulin, and half are receiving the placebo.

Neither the parents of the children nor their physicians will know until the two-year trial is complete which patients are in which group. Only the researchers at the National Institute of Allergy and Infectious Diseases in Bethesda, Md., who are directing the trials, hold the coded assignments of the young patients.

Parents are free to remove a child from the process at any time. And if a child's illness grows worse or severe infections increase, then the parents and physicians can cancel the child's participation and make sure that gamma globulin rather than the placebo is being used.

To the members of ACT UP, many of whom have AIDS, using placebos at all in testing any new AIDS therapy is unthinkable. If the therapy is known to be safe, they demand that it be available to anyone who might conceivably benefit.

But to Dr. Diane W. Wara, the pediatrician directing the gamma globulin trials throughout Northern California, that argument is not only false, but potentially dangerous. Whether gamma globulin can truly help the children, or whether its risks outweigh its benefits, can only be determined clearly and without bias by administering placebos to half the children randomly, she maintains.

"I've been using gamma globulin to protect against bacterial infections in infants and children with other immune system defects since 1973," she said in an interview. "And I do believe it can improve the quality of life for our AIDS patients who are on AZT," an AIDS drug.

"But at least half the pediatricians disagree, and we have an obligation to the children with AIDS to know whether or not it can help before we use it for all kids with AIDS," she said.

AZT Trials

Wara is also directing another trial to see whether AZT, the anti-viral AIDS drug now licensed only for adult AIDS patients, can treat the disease safely and effectively in children. After 14 months, that trial is nearly complete.

"Now we all firmly believe the AZT will prolong the life of children who are sick with AIDS," Wara said. So she and her pediatric colleagues around the country are pressing the U.S. Food & Drug Administration to speed final approval of oral AZT for children.

She has already won a commitment from California health officials to pay the full costs of the AZT treatment for every young child in the state who needs it and cannot afford it.

For the national gamma globulin trials in children with AIDS who are already taking AZT, nine will be at UCSF, three at Stanford, 12 at Children's Hospital Oakland, and a few more in Santa Rosa and Fresno. Several, including two at UCSF, have already been enrolled.

Slow Infusion of the Drug

All the youngsters, ranging in age from three months to 12 years, are being given AZT to treat their basic disease. And the injections, either the gamma globulin or the placebo, must be administered once a month by slow infusion into their veins — a process that requires three to five hours in the hospital each time.

Gamma globulin is a blood component that contains varied antibodies capable of fighting viruses and bacteria. The substance is pooled from the virus-free blood of many donors in order to provide as wide a variety of infection-fighting antibodies as possible.

But gamma globulin poses risks of fever, severe shock and low blood pressure, and if it does work in the AIDS patients, the children will have to receive the costly and disruptive infusions every month for the rest of their lives, according to Wara.

If placebos are not used in the trial, Wara argues, it would be impossible to know with certainty whether or not the gamma globulin was responsible for limiting or even preventing the infections and for the response to antibiotics.

The San Francisco AIDS Foundation does not support the charges that ACT UP is raising against the gamma globulin trial. If the rules for the trial are aggressively followed by the physicians involved, then the use of placebos is justified, says Pat Christen, the foundation's public policy director.
32 Arrested at an AIDS Rally in Manhattan

Demonstrators holding hands during a moment of silence yesterday in Foley Square. A march and rally sponsored by the AIDS Coalition to Unleash Power (Act Up) ended in a sit-in outside the United States Court House. Police arrested 32 protesters for disorderly conduct. They were demanding increased Government involvement in the fight against AIDS.
ACT UP/SF
Breaks Up, Goes 2 Ways

by Dave Gilden

Like an amoeba that grows too large, ACT UP/San Francisco underwent mitosis last week.

"After the publicity surrounding our actions at the International AIDS Conference, we got hundreds of new members and increased our revenue from $300 or $400 per month to many thousands," said ACT UP Secretary Jeff Herwitt. "But with 300 new people attending meetings, we also had 300 new opinions about what to do."

The resulting differences caused a breakdown in ACT UP's consensus decision-making process.

"ACT UP has been basically paralyzed since the conference," Herwitt noted.

Every vote was blocked by vetoes on the part of a few members, and this created personal animosities, which in turn led to more vetoes. Eventually, the consensus process itself became a bone of contention, Herwitt said.

At last Thursday's ACT UP meeting, attempts at reaching a temporary compromise system that would entail passage of resolutions by an 80 percent majority vote when consensus could not be reached were ultimately blocked by five members. This precipitated a walk out by 100 members interested in forming a new local ACT UP chapter, to be called ACT UP/Golden Gate.

The new group met Monday night and agreed to make decisions by a two-thirds majority vote for the time being.

Michael Wright, who led the walkout on Thursday said, "I didn't want to sit around and discuss process any longer. I wanted to get

(Continued on page 30)
Rethinking gay activism

ACT UP bolids and shrinks across nation

The campaign is apparently sputtering. “We’re not putting billboards in space. We’re not even talking about it,” says an angry Lawson says now. “It’s a very toxic subject. We’re burned. The press can either make you or break you.”

Lawson said the billboard was primarily designed to put scientific instruments in space, and his company — based in Roswell, Georgia — was only seeking a corporate sponsor.

“The campaign is reporting that the billboard was reported by both sides of his mouth,” said Daniel Okas Silverman, campaign director for the California Public Interest Research Group (CALPIRG) in San Francisco. “In his press release he talked it to a billboard. He’s just ready to change the name because of public pressure.”

On May 15, CALPIRG phoned Lawrence Livermore Laboratory, where aerospace engineer Preston Carter reportedly monitored a group of carter. (Carter wasn’t talking phone calls, but directing them to laboratory spokesman Jeffrey Gahring, who in turn said Lawson had nothing to do with it.)

Lawson also plays up the environment as an aspect of the billboard. The biodegradable billboard would burn up on re-entry, releasing ozone into the atmosphere and countering ozone depletion. During orbit the billboard would also contain sensors to monitor ozone depletion.

“Claiming that these ethereal eye- sores are good for the environment is a blatant case of greenwashing,” said Caroline Harwood, director of Earth Day. “They are nothing more than a dangerous gimmick and an attempt to blurish amat and demonstrate nature with corporate advertising.”

But Lawson believes corporate sponsorship of the space industry is the wave of the future, particularly when governments are strapped for cash. “This is already happening overseas. We are behind the times. Are we going to be last in line?”

Silverman isn’t impressed. “The next thing you know the sunset will be sponsored by a zodi cult.”

— Peter Hegarty

Welsh in the dog house

Joanne Welsh, the cop who charged Chief Tony Ribera with sexual harassment, wants to return to duty after three months on stress leave. But she says the department is trying to punish her by offering a choice of three paperwork assignments, one of them in the records room, known as a dumping ground for cops who have had their guns taken away. “It’s a well-known punitive work assignment,” she says. But Deputy City Attorney Dan Magnare says deputies who complained Welsh suggested the city is trying to wriggle out of paying her $10,000 in disability, arguing that the media hype Welsh whipped up about her sexual harassment charges — not her work environment — is the true source of her stress.

A new wave of unionism is hitting S.F. But its members are not blue, white or pink-collar — they are collarless, T-shirt wearing, college-educated activists, artists and intellectuals who work at nonprofits, environmental groups, bookstores and the like. The May 21 vote of employees at Green Apple Books to join the United Food and Commercial Workers Union follows the trail already blazed by Cody’s Books, the Exploratorium, the Sierra Club, UC grad students and more. UFCW organizer Bill Fiore explains: “Absolutely there’s an upsurge in union activity. These are educated people who see there aren’t many jobs to move to, so the only way to make their jobs better is to organize where they work.” The issues driving the new unionism, however, sound familiar: unfair terminations, too few benefits and demeaning treatment. “It may sound corny, but it’s all about dignity,” says Fiore.

Mayor Jordan’s speech to the San Francisco AIDS Foundation on May 13 is coming under fire from Supe Angela Alioto. Jordan proudly told the crowd that the city’s AIDS budget had been spared from cuts necessary to reduce the deficit. “If I make any cuts in AIDS programs Wendy will lock me out of the house,” the mayor said. A week later, the Health Department surprised the foundation by sending a letter saying that $67,000 was being cut from its media programs. Moreover, Jordan’s planned $56 million cut out of the Health Department budget will make a big reduction in services for many AIDS patients, particularly at S.F. General, which treats about 3,500 outpatients with AIDS each month. Dr. Paul Volberding, director of the AIDS program at General, is less than happy with the cuts. “These patients need X-rays, scans and other tests more than other patients,” he says. “With the cuts, they won’t get the necessary drugs, and the number of beds for them will be reduced.”

Ironically, the reduction in services will mean higher costs for the city as patients will be forced to crowd into emergency rooms to receive primary care, adds Volberding.

Pres Clinton’s apparent flip flop on banning nuclear testing has peace activists hopping mad. In his 1992 campaign booklet “Putting People First,” Clinton wrote that “to stop weapons of mass destruction from spreading [we should] take the lead in negotiating a Comprehensive Test Ban Treaty through a phased approach.” But in a report to Congress delivered May 6, Clinton advocated the resumption of testing by September 1993. There has been no testing since September 1992 under the current moratorium, which requires the President to negotiate a comprehensive ban by 1996. But a resumption in tests in the U.S. would probably prompt Russia and France to follow suit and thus kill any chances of a ban being signed.

— Continued on next page
Most ACT UP chapters nationwide have either founded or grown shagbag following years of confrontational street politics that were the hallmark of AIDS and gay activism. Larry Kramer, the New York playwright and founding patriarch of ACT UP, admitted in an interview that all is not well within the activist group. "Some ACT UP chapters, including L.A., New York, San Francisco and others, have declined in activity," he said. But he blames the demise of the D.C. chapter on political apathy. "ACT UP never really took root in D.C., mainly because the community is not an activist community," he said.

All ACT UP/Philadelphia, have pretty much abandoned the streets for more cerebral goals, like sending alternative treatment advocates to the 9th International AIDS Conference in Berlin later this year. Others have had major drops in membership, like ACT UP/New York, which has fallen from nearly 4,000 to 2,000 over the past year or two and to only about 150 members.

Ironically, some activists say their very success has partly contributed to the fall in more militant tactics. Vivi Ports of ACT UP/Golden Gate in San Francisco said, "All those demonstrations happened at the 1990 9th International AIDS Conference in San Francisco because they wouldn't let us in. And now, as a kind of counterpart to that, I'm speaking at the 9th International AIDS Conference because they invited me to. That's becoming much more of a common occurrence."

But there is a real danger of rampant apathy. Parks adds, in this growing insider status, Clinton, for instance, has fallen short on such campaign promises as lifting the HIV immigration restrictions and naming an AIDS czar to coordinate federal programs to battle the epidemic.

AIDS activists and gay civil rights activists were being incredibly naïve if we thought that Bill Clinton was going to be our hero," said Parks.

**Keith Clark**

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George Cothran
Why Does the State Abuse Women With AIDS?

By Carol Tice

Though the carpet is worn in Mary Lucey's rented Venice home and the couch sports a few holes, her smile indicates the place is her idea of paradise. Her lover, Nancy, emerges from a back room to ask if she needs anything. A pair of big shaggy dogs lounge in the sunny entryway.

Only the stacks of protest literature and the tired look around Lucey's eyes break the homey mood. As she talks about her life, it becomes clear why this simple domestic scene gives her such pleasure. Addicted to heroin at eighteen, she eventually landed her in the California institution for Women at Frontera for drug use. She was paroled in 1988.

Last year, a one-night stand with her ex-husband left her pregnant. Six months into the pregnancy, she became ill and learned she had AIDS. One year ago, she had the baby and gave it up for adoption. (The baby has tested negative.)

Later she was returned to Frontera for a parole violation. "I got high and I got caught," Lucey, now thirty-two frankly admits. This time, as a woman with AIDS, her incarceration in Frontera's Walker A — the segregated ward for all of California's women inmates with HIV disease — was a new and nightmarish experience. (The ACLU has filed a lawsuit alleging a stay in Walker A constitutes cruel and unusual punishment.) Though she was released in a week, what happened in Walker A is never far from her mind.

Determined to help the women who remain on the ward, Lucey became active in the women's caucus of ACT-UP/LA (AIDS Coalition to Unleash Power/Los Angeles).

What happened when you were returned to Frontera?

I had my AZT on me, so they sent a medical technician-administrator over to interview me to go into Walker A. He took my AZT away and said, "You're not going to get this back until you see a doctor." I was out in a week and I never saw a doctor in that time. I was really shocked that they took my AZT away from me — how could they jeopardize my health like that? But then I got into Walker A and I was totally amazed at what was happening in there.

What were the conditions?

All these women were in there that were either HIV-positive, ARC [AIDS Related Complex], or AIDS. The people who were just positive were put in with people that were full-blown AIDS. The staff very seldom would touch anybody in the unit. I saw a lot of sick women that weren't being treated for simple things that can be treated. You had to have so many T-cells in order for the doctor to give you AZT. There were women having babies, and these women weren't getting six-week checkups. One woman had a yeast infection so bad she couldn't get out of bed. From what I hear, she still hasn't gotten treatment. So I'm surprised she's still alive.

There's no AIDS doctor. The infirmary does not have a license to treat people. So if somebody's dehydrated, they can't even give them an IV. They can't give injections. They're basically equipped to give out aspirin — that's the end of it. Also, when you go in front of the parole board, you have to wear a mask or you don't get paroled.

Other inmates are allowed Family Living Unit (FLU) visits, where their kids and spouses can stay over for two nights. But in Walker A, if you have children under eighteen, you cannot have a FLU visit with them. You cannot have a FLU visit with your spouse, either. A lot of these women in Walker A are doing a lot of time and they're not going to ever get out alive. And for them not to be able to spend any quality time with their children is really bad. They can come into the visiting area and see them, but visiting isn't private. So it's cruel.

I think if my parole officer thought I deserved to be in there, she would have left me there. I think she felt like I slipped, but it's no reason to give somebody a death sentence.

What sort of relationships develop among the women on Walker A?

There's a lot of tension. Also, there's no education for these women. They're not even going to hand you a pamphlet. You're in the dark. They have an AIDS counselor there — the women call her The Grim Reaper, because she has no compassion. She has that thing where she doesn't want to touch them. She hands you an AIDS maintenance book and says, "Here's the book, you're going to die, there's nothing more I can tell you." When I spoke to her, she knew less about the disease than most of the women did.

What problems have you been hearing about since you left?

My friend Judy Cage called me up and said, "We have absolutely no heat. We haven't had heat this year. Women are getting sicker and sicker." You only get one blanket, and it's an army blanket. So a lot of the inmates were getting dressed in their clothes and sleeping in the same bed to stay warm. And they were being threatened that they would add six months of time for homosexual activities. Some of them don't have six more months. And all they were doing was trying to keep warm. I got through to the program director, and he went over and got the heat turned on.

I don't understand why these women are segregated. Even if they're just HIV positive, they're segregated from the rest of the prison, and that's another reason why women don't come forward and get tested. Because they're scared of being put in Walker A.

So you think there are women in the general prison population that are HIV-positive?

With as much needle exchange as is going on out there? Oh, definitely. There's roughly 2,600 women in Frontera. I'd say at least 500 are positive. And there's about 30 women in Walker A. Most women are terrified of going into Walker A, because there's death all around. It's real hard, if you're dying in there.

What's your life like now?

My life now — being an activist is a full-time job. Every day of my life has more quality time now. I really appreciate my freedom. I have a very good relationship. I'm really happy with my life. I thought that being positive, oh, it's downhill from here, but it's not like that. I like living a lot better now. I've been feeling real healthy, and I quit smoking.

Honestly, my support program is Nancy and ACT-UP, the women's caucus. We take every precaution to protect Nancy. We do practice safe sex — we're very cautious. She tests periodically and the tests always come back negative, thank God. But we don't put ourselves in a high-risk category. I think a lot of people don't tell their partners that they're positive, and I think you're risking somebody else's life, and you're playing God, and it's not right.

Due to the lack of response from prison officials, ACT-UP has created a new committee to address this issue. The Prisoners With AIDS Advocacy Committee United (PWAAUC) meets every other Sunday in Venice. For information, call the ACT-UP hotline, (213) 654-1639.
FRONTERA: Problems exist throughout facility, report says

Inmates are not provided comprehensive plans to treat their ailments or track their illnesses.
The announced inspection on Sept. 19-20 by the Department of Health Services was prompted by a series of articles in The Orange County Register that detailed a longstanding pattern of neglect by an ill-equipped and often indifferent medical staff.
The Department of Corrections has agreed Friday to write a plan to correct the myriad of problems found during the inspection, said Paul Keller, regional health services administrator.
The Department of Health Services evaluator found a paralyzed inmate with multiple sclerosis defecating in her bed because there was no one to help her to the bathroom.
In another case, the investigator found an anorexic inmate so thin he could not be measured.

"The inmates complained about the backup of the lower, showers, broken water, water, food brought to the unit covered with flies, cockroaches, infestation, crowding, lack of treatment conditions, medical problems ignored and a lack of therapy."

Inmates were observed menstruating in the infirmary for anorexia nervosa. She was weighed 40 pounds.

From 1990, when the first inmate was transferred to an outside acute-care hospital, the inmate was not able to be transferred to the outside acute-care hospital.

There were no diabetics among the inmates.

Fire hazards can be found throughout the medical facilities. Parts of the infirmary lack fire doors, adequate fire-alarm systems, working exit signs and smoke detectors. The generator cannot supply emergency lighting. Wiring was exposed and electrical plays were burned.

Oxygen cylinders were stored believed to be safe outside the infirmary.

Unsanitary conditions were found throughout the infirmary. Room vents were either missing or caked with thick layers of dirt and grime. Clean and soiled items were stored in the same location.

Infectious waste was stored in a large receptacle without a tight-fitting lid. Flies lighted around the container.

Also, inmate admitted with multiple sclerosis was found not to have a nursing assessment, patient-care plan or dietary assessment. She was unable to eat because the patient was at the height of her cancer patient.

The inmate, who is paralyzed below her waist, was not given a physical examination or therapy for upper extremities.

4 patients' records evaluated

A Department of Health Services' investigator reviewed the records of four inmates who were patients in the infirmary of the California Institution for Women.

The inmate's request for an inmate who said she was unable to eat because of her cancer patient.

The inmate, who is paralyzed below her waist, was not given a physical examination or therapy for upper extremities.

Also, the inmate was given a bath once a week, and it is the only time she gets out of bed.
ACT UP Blows Up

It had come to symbolize gay power in S.F. It was the fastest growing political group in town. Last week, it split into two camps. Is the rupture permanent? Michele DeRanleau reports.

continued on page 13
LATE SUMMER breeze cooled the evening air, but inside the Women’s Building on Thursday, September 13, the exasperation of 200 members of ACT UP San Francisco caused room temperature to climb as they braced for a fight — not the fight against AIDS, but a fight over how best to fight the disease.

Voices cracked with frustration as the group tried to hammer out a compromise. One man sobbed visibly as he expressed his concern that the organization he had devoted so much effort to was reaching the breaking point. When he finished, half the people in the room clapped.

When the meeting broke up, a resolution was unanimously endorsed by Eric Chisulis, raising his hand for emphasis.

“We are not supporting positions now, we are simply bringing objections to the process on the floor,” Chisulis tried to keep the discussion flowing smoothly. But almost every objection was accompanied by whispered asides, snapping fingers to indicate approval, or loud groans of disgust.

It has been three months since the Sixth International Conference on AIDS, when members and supporters of ACT UP, angry at government inaction against the epidemic, had their dissatisfaction beamed into American living rooms during six steady days of protest. Since the conference, the local chapter of the organization has tripled in size.

It was a phenomenal rate of growth that, at first, was welcomed by the leather-jacketed activists who had ushered the group through its infancy. But it didn’t take long for many of them to realize that the organization would not be able to accommodate the internal political and procedural differences that accompany growth.

ACT UP had become, in the words of one member, “a quagmire of stagnation.” More often than not, the organization’s consensus style of decision-making — a process that required unanimity before any action could be taken — had led to increasing indecision. The rift between two emerging factions was widening.

On one side were the pragmatists who wanted the organization to focus its attention solely on treatment issues, in the hope of expediting the clinical use of medications that show some promise against AIDS, but are not fully tested. On the other side were the more idealistic members, who wanted to continue to fight the AIDS epidemic for the moment and to use the goals of AIDS to the AIDS movement in an effort to catalyze a political solution appropriate to the demands of the epidemic.

At the meeting, representatives from both factions met in what turned out to be a heated discussion, to try to iron out a compromise. But as time went by, more objections than solutions were raised, more amendments were proposed and more voices were raised against each other. Toward the end of the session, only a small group remained.

When the general body reconvened, the debate on whether to abandon decision-making by consensus in favor of a less unwieldy system continued. Local people agreed to put aside their personal objections to the proposal for the good of the group. Following a few minutes of discussion, Chisulis called for the final step in the consensus process. “Do we have any blocks?”

Three hands were quickly raised, once again paralyzing the group. Muttered curses accompanied the scraping of metal chairs across the wooden floor as half the members stood up and walked out of the room.

ACT UP San Francisco, the most vocal and visible local political organization in the fight against AIDS, had split up.

The AIDS Coalition to Unleash Power (ACT UP) began as a political expression of gay men’s very personal feelings of powerlessness as they realized that they were being left to die while the government and media acted as though the best way to deal with the epidemic was to ignore it. It was a movement born of frustration — not ideology.

Wayne Palmer was there at the beginning — one of those who “wasn’t afraid to fight and had nothing to lose” by signing the AIDS Action Pledge in 1986. He was also one of the 30 or so members of the pledge group who proposed changing their name to the AIDS Coalition to Unleash Power in January 1988. In doing so, they joined a growing national coalition dedicated to direct action for the purpose of bringing public attention to the epidemic.

“We were a group of people who discovered that no matter how far we had come or how many small successes we had gotten, graves still were being dug and people were still being written off by the government,” Palmer recalls.

Palmer, who is 28, remembers his parents’ involvement in the anti-Vietnam war movement of the ’60s, and likes to compare his political activity to that of his family. “The difference between the anti-war movement and us is that it was the increasing willingness on the part of people like Dobson to work within the system that precipitated the breakup of the San Francisco chapter. As some ACT UP members worried about the AIDS epidemic, others worried that the treatment issues in the issue were being taken by some of the more vocal and high-profile aids researchers. As ACT UP member raised questions about science and the government’s response to the epidemic, ‘we were increasingly looking at having the answers,’ says Jesse Dobson, who knows as much about the internal workings of the clinical trial system for new medical drugs as most researchers.

A columnist for the Sentinel, a San Francisco-based gay weekly, Dobson emerged as a leader in ACT UP after most of the leadership on an advisory group of the AIDS Clinical Trials Group (ACTG), which oversees AIDS research at the National Institutes of Health, was one of a handful of activists who have penetrated the AIDS bureaucracy and work inside the system back up the power of the street shakers.

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