To those men who still believe they are immune...

BLEEDING WITH JOY

Early last fall I ran into a handsome, sunburned man on Castro Street, a hunky city farmer, thorn-hairy rough, who turned me on, who turned me over, who plowed my field until it bled with joy, with pain. My body felt as if a thousand horses had fun over it and furrowed me.

NORMAL

A week later, I returned to Normal, Illinois, to my lover, my teaching and my hothouse plants. Tried to revive the swollen, uncut cactus my boyfriend had almost killed with care while I was gone away. Then nearly spent myself blessing scores of freshmen essays with red ink. However, whenever deadlines met gave both of us a chance to flee, we stalked dodos and unicorns, licked memories and dreams, danced naked under trees at noon, at night.

SCRAPS OF PRESS REPORTS

And then, one day, it dawned on me that the hunky stranger, whose name I never knew, had dropped deathly seeds into my earth.

First I threw up disbelief, then anger, rage; drooled guilt, self-pity, fear, before I fought deficiencies, immunities, communities, before I tried to heal myself.

I saw frost on his sun-noses and instantly I knew that my minutes, my seconds of grace were running out. That moment an earthquake hit my brain; I felt old fuckblood turn to wine.

"No," I said with all my voice, "I am. I am not yours. So help me God. So help me... God."

"Die down, sucker. Smell the ground. You don't need God no more," he grinned, "I've come." He turned, removed his cap, unzipped his jeans, switched off the light. "For the last time, sweet ass, turn over." He dropped his boots, his voice: "Don't waste my time. I have to work fast lanes again. Lost souls. The usual shit. You know."

Stillness filled the dark. Silence. Except for the sound of black leather hitting the floor. The intimate stranger moved closer, bent over me. I felt his grip, his breath: "Remember, babe," he said, "hope and death are risks that must be run by all of you."

— Martin Thomas
Physician Andrews Explains Baths Rationale

By Rick Osmon and Michael Helquist

Dr. Rick Andrews is a psychiatrist and the immediate past president of the Bay Area Physicians for Human Rights (BAPHR). Born in Mississippi, he grew up in Oklahoma City. After undergraduate work at Trinity University, he began his study of medicine at the University of Oklahoma. Andrews came to San Francisco 11 years ago and trained for psychiatry at the McCauley Institute at St. Mary's Hospital. His coming out process -- which he describes as "agonizing but rewarding" -- was facilitated by therapy required of all psychiatric students, by a comfortable sexual relationship with a woman, and by the tolerant atmosphere of the city.

As a member of Dr. Mervyn Silverman's health advisory board, Andrews had discussed for months the health policy issues sparked by AIDS. Andrews first signed the petition that asked Silverman to close the baths; the next day he changed his mind and worked to find alternative measures. During Dr. Silverman's recent news conference in which he announced a ban on "sexual activities between individuals," Rick Andrews stood nearby as a supporter of the baths. Andrews had discussed for months with George Reilly, a psychiatrist and chair of BAPHR's Social Concerns Committee, called me on the phone in January of 1983 and told me that he had just been diagnosed with KS. George was my first close, personal friend who had AIDS. I then perceived AIDS as being much more serious; I've been very active in AIDS-related activities ever since.

What is George Reilly's condition now?

He died about two weeks ago. I received news of his death right in the middle of the bathhouse issue.

More and more of us have lost someone to AIDS, and it does change how you look at all of this. How does BAPHR help its members deal with the emotional strains of having patients or clients with AIDS?

We now have two support groups for our members.

Some members of the community have suggested that a number of gay doctors are getting overwhelmed by the emotions triggered by AIDS.

Day in and day out they find that much of what they're trained for isn't working. Suddenly they're caring for people who they can't cure.

They're failing.

Yes, they're failing and frequently their own response must be a frustrated but certainly understandable demand that somebody "DO SOMETHING!" When everything medical is being tried already, the next focus could easily be for a political solution. You with your medical background have been drawn into the political arena of public health policies: How do you feel about this new involvement?

Some of it has been very painful; for instance, when I supported the petition to Silverman to close the baths. That went against everything I had been telling him about government not intervening in this issue. We responded to what seemed a political threat. The Littlejohn initiative. But we were just individuals acting together.

The perception could easily be that you represented more than yourselves, that you represented a sizeable political constituency and that you were gay doctors asking for intervention.

Nevertheless, I was acting as an individual. The biggest problem I see now was that petition did not give a clear medical or political rationale for closing the baths. One of the problems I see is that this issue is more than a matter of medicine; it's a health issue. As a health issue there's no need to place it in the hands of the medical experts. We can all make common sense decisions; a great number of us already have.

Are you satisfied with the content of Silverman's announced decision?

I support what I believe is his intent and that is to prohibit sexual activities that can lead to the transmission of AIDS. He told us he was going to leave the area of "safe sex" open. I did try to encourage him to change the wording so that it would be more acceptable and more in line with the momentum in the community to encourage only safe sex. By allowing only safe sex in the baths they become beyond reproach. That way a gay man can have a clear conscience about going to the baths without any worry about what will happen. I do know that a personal agreement to practice only safe sex is a very radical act and that it will be uncomfortable and - at least at first - unsatisfying to many. But with so many of our friends dying I think we have to take radical actions.

I look at what we have already done and I feel very proud. Our whole community has made a quantum leap in confronting the problems in one of our gay institutions in the last three weeks. Gay men have achieved incredible behavior change in a very brief period of time. We have also created very effective support systems for each other and for the people with AIDS.

I also think this is more than an issue of gay sexuality; this is all about male sexuality. I think straight men can understand the issues here, of having sex readily available, of trying to keep sex balanced in one's life, of the difficulty in making changes in sexual behavior.

Consensus seemed to have been reached at the town hall meeting held at the Pride Foundation. Silverman's decision, no matter what the political pressure, came as an interruption of the community process.

The timing was unfortunately premature. But to go against it would have been counter-productive. I beseeched Silverman to give us more time, but he said he had to say what the medical group had decided. But I think we can all still win on this. There needs to be another town meeting to talk about the negative reaction in the community so that it doesn't work against us.

I think we will have time on this. I will work toward the community being able to handle this, to be safe and sexy. Any proposed legislation would become moot if we handle this ourselves. Our discussions should focus on the positive questions of what we are willing to do. I think Silverman should meet as soon as possible with the bathhouse owners to discuss all of this. And frankly, I'm hoping that this legal stuff will get so bogged down that we can get on top of this issue and work it out ourselves.
Richard L. Andrews, M.D.
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Merv,

I am still trying to figure out why you feel you must say "no sexual activity". Such wording clearly goes against everything we have been saying about "safe sex only". You seem to be obligated to communicate the consensus of the Tuesday group, and I think you should. But be clear that what was the CONCEPT that was agreed upon, not the precise wording. We ALL want to stop activities that can spread AIDS. We came to the decision we did to avoid the use of "masturbation" and other complicated possibilities. As the examples enclosed indicate, you can be EMPHATIC about the message: there will no longer be situations in baths that can spread AIDS; we all want that. The community can support that. You do not have to box yourself in a corner, or slow down the tremendous POSITIVE momentum that has occurred in the last 10 days.

Merv, I greatly respect you as an open-minded and wise man. PLEASE DON'T BE RIGID. WE (the community) are on the BRINK of some major changes. (Do you think BAPHR would have had an ad like that 2 weeks ago? Of course, we should have, but the impetus wasn't there.

You do not need to "compromise" yourself and would not be compromising your intention, or the group's intention, if you did not put this message out in a hard, rigid manner. If we had had more time, and hadn't been totally exhausted by all that occurred Tuesday, I AM CERTAIN that the group would have found this MARK acceptable.

PLEASE, PLEASE DON'T KILL this "patient" we have been talking about for so long. He is finally listening. He is finally ready to make some changes. As a person dedicated to health, I implore you to allow 'him' to change, not react and "throw out the baby with the reactive bath water."

PLEASE MERV, WORK WITH US. WE NEED YOU SO DAILY RIGHT NOW. And like it or not, what you do, here in SF, will affect the rest of the gay world. I earnestly ask you to remember Kennedy and other great leaders in times of crisis and make that wise and compassionate, and CORRECT, decision.

many, many thanks, Ric
Department for the City and County of SF, it is my recommendation that ANY AND ALL such activity that might allow for the transmission of an AIDS agent, must stop in gay bathhouses and other such establishments. In the ensuing weeks, I will be working out the details of this recommendation with a variety of government, medical, and community groups. In fact, I welcome and seek the cooperation of the owners of these establishments in this serious undertaking. I understand that this establishments have served a social and educational role for many gay men, and this can continue. But let me make it perfectly clear that I am committed to seeing that these places no longer facilitate the spread of AIDS.

The bathhouses are not really the problem. As many gay physicians have said, what counts is what you do, not where you do it. Large numbers of gay men have made significant and far-reaching changes in their sexual practices to remove the risk of getting AIDS and they are to be commended. But there is still much to be done. The incidence rates for AIDS are not falling, not staying the same, but are in fact rising. We must all work together to step up efforts to curb this epidemic, and I pledge the Health Department's full support for more educational efforts, greater distribution of this information, and further efforts to support individuals in making these difficult changes in their lives.
We must deal with the medical facts as we know them: the best medical opinion considers AIDS to be transmissible by high risk sexual activity. This activity is facilitated in businesses such as bathhouses and sex establishments. It is not the businesses that are the problem, but the type of activity that takes place there. As many gay physicians have said, what counts is what you do not where you do it. I agree with this and therefore do not find it necessary to close such establishments in order to reduce this high risk activity. But this growing health emergency is such that I, as the Director of Health, must now insist that ALL SUCH ACTIVITY WHICH PERMITS THE TRANSMISSION OF THIS DISEASE FROM ONE PERSON TO ANOTHER MUST STOP. Procedures to initiate this action and ensure compliance will be communicated shortly.

I would ask for the continued cooperation and involvement of the gay community, and indeed bathhouse owners as well, in this effort. These establishments can continue to serve social needs, be a major focus for educational efforts, We all need to work together during these trying times.

Possible questions:

A) So there will be no sex at all in bathhouses?

Let me repeat that there will be NO activity which could possibly permit the transmission of the AIDS agent. (In simple terms, this means no passage of body fluids from one person to another)

B) What sex can occur in these places?

As Director of the Health Department I cannot approve of any sexual activity in licensed or unlicensed facilities. But clearly it is the kind of activity that permits transmission of the disease from one person to another that is the focus of my concern. Details will be worked out shortly.
As you all know, this last week has been an intense time. A number of things have happened, some of which have been controversial, which I think have actually allowed, perhaps for the first time, a more open and honest discussion of the medical and social issues involved with gay bathhouses and similar establishments. This has perhaps even allowed me to look more directly at this very complex issue.

In SF alone, over 10 people a week come down with this deadly disease called AIDS. Most of the people in this city are young gay men, who are being stricken down in the prime of their life. We are being robbed of so many productive members of our greater community. I tell you to remind you of the seriousness of the situation. There is overwhelming medical consensus to suggest that AIDS is contracted through blood to blood transmission. In a few cases this has involved transfusion with blood products. In other cases, it appears to be transmitted through sharing of needles by IV drug abusers. But neither of these account for the overwhelming majority of men in SF who are coming down with this disease. Instead, it is intimate sexual activity that is the culprit. It is well established, and makes sense, that the more partners one has, the greater the risk for contracting AIDS. In short, AIDS is a STD.

Last Tuesday I called together a group of physicians, epidemiologists, and researchers to discuss and advise me on these complex medical/social issues. It would be an understatement to say that everyone present was gravely concerned about the increasing incidence of this confounding disease. Through six hours of intense discussion, a consensus was reached that was unanimous, but I want to make it clear that I alone am able to make this decision and take full responsibility for it. Therefore, as the Director of the Health
PRESS RELEASE - FOR IMMEDIATE DISTRIBUTION

April 2, 1984

Recently, there has been some confusion in parts of the press and the public regarding the official position of the Bay Area Physicians for Human Rights (BAPHR) about sexual activity at gay bath houses and similar establishments during the AIDS crisis.

We wish to restate our opinion that certain types of sexual practices, no matter in what location they occur, increase the risk of contracting all sexually transmitted diseases, including AIDS. What counts is what you do, not where you do it.

We continue to discourage unsafe sex practices in all areas, including bath houses.

We strongly favor, and request assistance for, educational programs to help reduce risks. Furthermore, we think that such efforts may be especially significant at bath houses and similar establishments.

We affirm our belief that government intervention in the sexual behavior of consenting adults should be avoided.

Most importantly, we believe that voluntary action by our community is the best method to encourage safe sex. In these difficult times, let us act with concern and responsibility for each other.
March 11, 1983

Charles David, M.D.
Chair, Reference Committee
California Medical Association

Dear Dr. David,

As President of an organization of over 300 physicians, I want to express our grave concerns about Dr. John Ford's resolution, "Adverse Health Consequences of the Promiscuous Homosexual Lifestyle." This resolution in not only inaccurate but highly inflammatory and counterproductive.

There is no conclusive evidence as to the cause of Acquired Immune Deficiency Syndrome (AIDS). The "suggestion" that this syndrome occurs because of the "irregular sex practices" of male homosexuals is unfounded, as is the inference that the disease originated in the gay community and is "spreading" to other groups.

Dr. Ford's use of such phrases as "aberrant sexual practices," "grossly promiscuous lifestyle," and "homosexually-conditioned disease" reflects not only a scientific and sociologic misunderstanding of the issues but suggests a hostile and negativistic attitude.

AIDS is indeed a serious public health problem which deserves the attention of all physicians. Our organization has given the highest priority to meeting the clinical needs that AIDS poses, as well as educating both the public and medical community. We strongly encourage the CMA to support funding for the much-needed research towards understanding, treating, and preventing this disorder.

We offer our assistance in any way that might be helpful.

Sincerely yours,

Richard L. Andrews, M.D.
President
Dear Merv,

Please pardon my informality but I wanted to send this off today. You have asked that we bring up questions/concerns re: AIDS, even before our scheduled meeting, so here I am.

My concern is about condoms. Although the Advisory Board has discussed this, I'm not sure the matter has been resolved. I'm hearing more people question the safety of condoms in preventing the transmission of the AIDS agent. BAPP's Risk Reduction Guidelines state: "the use of condoms for intercourse would provide the logical barrier to reduce the likelihood of foreign material or germs in your partner's semen gaining direct access to the bloodstream." The Health Department's brochure simply states: "each of you has a vital interest in seeing that a condom is used."

What message is the community getting? That one can have sexual intercourse the "safe" if a condom is used? I think this is what most people are interpreting from our recommendations, and I'm not sure this is what we want to be saying.

I strongly urge your Department to do some "research" on condoms. How effective are they in stopping transmission of GC, Hepatitis B, etc. The latter would seem particularly useful since many think AIDS is a virus. Once we have this "hard evidence," we'll be in a better position to make recommendations.
We may find that our message should be: "Condoms may reduce your risk..." etc., etc. At least with some research, we'll be able to answer those who have questioned the safety of using condoms.

It would be great if we had some information by the next board meeting and could discuss this further.

Thanks very much for your ongoing assistance.

Warm regards,

Ric Andrews
Member, Medical Advisory Board on AIDS
To the gay community:

THIS IS DEADLY SERIOUS.

This was a half-page ad. in early 80's, when I was President of Gay Freedom Week. I wrote Ad.

B.A.R. in San Francisco another year around, down with AIDS.

Climbing with vision.

Practices must change.

- in our bath houses
- in our sex clubs
- in our bedrooms
- EVERYWHERE

Learn the facts about safe sex:

- no rectal sex
- no exchange of semen, blood, urine, feces

THERE IS NO GAY FREEDOM IF YOU'RE DEAD.

Let's help each other to change and survive.
To the gay community:

THIS IS DEADLY SERIOUS.

Each day in San Francisco another gay brother comes down with AIDS.

The rate is climbing with no cure in sight.

Our sexual practices must change.

- in our bath houses
- in our sex clubs
- in our bedrooms

EVERYWHERE

Learn the facts about safe sex:

- no rectal sex
- no exchange of semen, blood, urine, feces

THERE IS NO GAY FREEDOM IF YOU'RE DEAD.

Let's help each other to change and survive.