

# The Aids Project Newsletter

JULY 1988

P.O. Box 4096  
Portland, Maine 04101

Subscription - \$10.00 per year  
Editor - David Ketchum

The AIDS Line: 1-800-851-AIDS  
or  
775-1267

## TAKING A STAND

by Gary Speights

Three years ago found me on yet another construction site; this one in Arizona. Before that, I'd worked on a high-rise project in Austin, Texas and previous to that, a condo project in southwestern Colorado.

It was on the project in Colorado that I broke up with my lover, a biker from Flagstaff, Arizona. We'd met two years earlier on a small site in Flagstaff. He was in the process of divorcing his wife. I was lonely, and he was hot. Together we traveled around the southwest on our motorcycles working various construction jobs. It was a good wild life, and I was missing it as I found myself, full circle; alone and back in Arizona.

Needing gas for the scoot and with no construction happening in Tucson, I decided to take the street route for a little cash by selling plasma. I figured ten bucks would get me to Phoenix where there's always work.

Cash in hand I putted into Phoenix expecting to be working by that same afternoon. It didn't work out that way, and once again I found myself at the blood bank door.

I was waiting patiently for my turn to bleed when I was called to the doctor's office. It was then he told me that my blood donated in Tucson had tested HIV positive. I was stunned. I didn't know much about AIDS at that time. All I knew was that I'd just been handed a death sentence.

That very afternoon I landed a job humping drywall for the crew. Every day I busted ass -- too busy to think about it. Every night I lay awake under the big Arizona sky next to my scoot, staring at the stars and wondering how long I had to live.

The pressure built day by day, and finally I broke and ran.

One afternoon, on a pay day, I gassed up the bike, packed up my shit in the saddle bags, and headed for L.A.

I didn't stop there. I sold my scoot and hopped a plane for Hawaii. I figured if I was to die, by God, it was going to be somewhere nice.

I lived in Honolulu for about six months, and it was there that I first tried to contact an AIDS Project for information and support.

I have to explain here that though I'm homosexual I've never really considered myself to be gay. I grew up in red neck New Mexico amongst the cowboys, oil field trash, and the like. My earliest sexual experiences were with these sorts of men; mostly married, mostly straight. I never mixed with the gay community and continued to associate sexually and socially with the straight crowd. I wasn't exactly in the closet, however, as I usually landed a bunk buddy within a week of starting a new construction job.

This is the reason, I think, that I had such a tough and nonproductive time with the AIDS Project in Honolulu. I was perceived as being nongay and so basically unwelcome. Island Mahu's can be cold, especially to straights.

To make a long story short, I moved to the Island of Kauai intending to finish my days by building a nice bamboo house in the jungle and settling in to await the Reaper.

After two-and-a-half years, I suddenly got a letter from my biker-lover, forwarded through my brother in New Mexico. He had gone on to Florida when we split up in Colorado and now wanted me to rejoin him.

I jumped at the chance and was on a plane the following week. I knew I couldn't have sex with him, but I had to tell him about the AIDS, and I hoped he would still be a supportive buddy to me. I really loved the guy.

## TAKING A STAND cont.

As is always with life, the unexpected is to be expected. My move to Florida was a total disaster. My buddy had in the three-year separation turned into a total alcoholic and druggie. His attitude had gotten even more hard-core biker than before. I never could tell him about my plight and only stayed three months - long enough to work and rebuild a little cash reserve.

The stress of that living situation was doing me in, and I had to get out of it. I'd had some weird medical problems on Kauai, and I knew the stress could exacerbate them.

Once again, I hopped a plane and flew north to Boston, then bussed up to Portland. I had no idea where I was headed; I simply wanted to be alone and at that time suicide was not out of the question.

If there's a God, it was he who directed me to this fair town.

I was amazed at what I found. The city helped me find shelter, food, and other needed items. I discovered the AIDS Project and for the first time actually met people with AIDS other than myself.

Two weeks ago I was diagnosed as having AIDS. I guess I'm not too scared about it - I've had three years to think it over and prepare my head. And strangely enough, I am now more focussed in my daily living. I am trying to involve myself with the AIDS community, and help where I can. Perhaps I'm even beginning to discover my own gayness as well as my gay brothers and sisters. I've never experienced this feeling of community before.

Portland, thank you, for reaching out to me and helping me to find a place from which to make a stand. With whatever time I have, I hope to make up for all the lost years of being the only gay I knew. I've retired my macho ways and am open to learning about myself with your help. In return I hope to devote myself to the cause of Health and AIDS Education to those, who like myself, didn't know where to turn.

We have to stop AIDS and you can help.

Volunteer - get involved! Whether straight, gay or in-between, we need to pull together on this. We're all brothers and sisters you know. We're all at risk!

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### SPECIAL NOTICE

The AIDS Project Newsletter is now available on tape (audio) for those people who are visually impaired. Please contact the Aids Project office at 774-6877 for further information.

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# **CONDOMS ARE EFFECTIVE!**

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### AIDS PROJECT TARGETS BISEXUALS, MARRIED GAYS

The Hyacinth Foundation AIDS Project has launched a new education effort designed to reach and assist bisexual men and gay men in heterosexual marriages. Its purpose is to both convey information about AIDS to the above groups and, in turn, obtain voluntary, confidential information about the degree of risk these groups face relative to AIDS.

As part of this outreach, the Hyacinth Foundation has prepared a brochure entitled "Men and AIDS", which contains AIDS prevention information of interest to bisexual and married gay males.

A free copy of this brochure may be obtained by telephoning the Hyacinth Hotline, 1-800-433-0254. Callers should say they are interested in the Blue Project and wish to receive a brochure.

Specially trained hotline workers will also be available to answer any questions callers may have about AIDS, including prevention information and concerns about transmission. Additionally, callers will have the opportunity to complete a confidential survey which will help Hyacinth develop a profile of the AIDS risk level among bisexual men and married homosexuals. This groundbreaking work will provide vital, new data which will increase our understanding of AIDS and the transmission of the virus.

Copies of the brochure and confidential survey may also be obtained by writing to the Blue Project, c/o Hyacinth Foundation, 211 Livingston Ave., New Brunswick, NJ 08901.

## SAFE SEX GUIDELINES FOR LESBIANS

Most lesbians do not have a high risk of contracting or transmitting the AIDS virus at this time. But for lesbians who fit into one of the "high risk" groups, practicing safe sex is a must to prevent further exposure. For lesbians who are at low risk, learning and practicing safe sex is the healthiest way to stay sexually active and prevent AIDS from growing in our community.

### LESBIANS AT HIGH RISK FOR AIDS

Lesbians who share needles or any other paraphernalia (spoons, works, syringes) when using IV drugs. This is the single most important risk category for lesbians.

Lesbians who have had sexual contact with:

men who have been actively gay or bisexual since 1979

people of either sex whose sexual histories are unknown

people who use IV drugs

people who are hemophiliac, or who have received blood transfusions between 1979-85

Lesbians who have received blood transfusions or blood products between 1979-85.

### LESBIANS AT LOW RISK FOR AIDS

Lesbians who have been mutually monogamous with a partner since 1979.

Lesbians who have been celibate and have received no blood transfusions or blood products since 1979.

Lesbians whose sexual partners have not been at risk since 1979.

General Guidelines: AIDS experts are advising lesbians who believe that they run the risk of either contracting or transmitting the disease to follow safe sex guidelines. For safer sex, avoid sexual activity that involves contact with body fluids. The virus is transmitted through direct contact with infected blood, semen, urine, feces, and possibly vaginal secretions.

### SAFE LESBIAN SEX

Massage, hugging, body-to-body rubbing, socail (dry) kissing, voyeurism, mutual masturbation (each partner touching her own genitals), sex toys which are protected with condoms or cleaned and dried thoroughly between each partner's use, S/M activities that do not involve exchanging body fluids, and virtually any other activity that does not require sharing or contact with body fluids.

LOW RISK LESBIAN SEX (if both partners are low risk for AIDS)

(If you or your partner are high risk, test positive on the AIDS Antibody Test, or have AIDS or ARC, seek additional information regarding sexual activities)

French (wet) kissing, cunnilingus or analingus with a latex barrier, genital or anal contact with hands or fingers (including fisting) while wearing latex gloves or finger cots, and external water sports.

### UNSAFE LESBIAN SEX

Unprotected cunnilingus (especially during menstruation since menstrual blood is currently considered to be the same as any other type of blood), any type of blood exchange, unprotected oral anal contact, unprotected hand/vagina or hand/anal contact, urine or feces in the mouth or vagina, and sharing sex toys that have come in contact with body fluids.

For More Information Call: Lyon-Martin Women's Health Services (415) 641-0220  
S.F. AIDS Foundation Hotline (415) 863-AIDS

**No one can ignore  
AIDS.**

**The invisible time  
bomb**

**Anyone who is sexually  
active needs to  
practice safe sex.**



Sexuality seems to get more and more confusing every day. There's the Boy George look, Michael Jackson as Peter Pan, Annie Lennox as him/herself, actors playing women, actresses playing men, bi's, trannies, androgynes, one-sex-fits-all.

Where will it all end? It probably never will. Meanwhile, here's a short glossary to help those who may be bewildered by the new trends and terms.

**Ambisexual:** Someone who is sexual on both the right and the left sides.

**Antisexual:** One who is militantly opposed to sex in any form.

**A-sexual:** Better than B-sexual or C-sexual. The highest grade.

**Autosexual:** (a) A person who wants himself all to himself, or (b) someone drawn to cars.

**Bisexual:** A person who engages in sexual activity once every two years. (See "semisexual" for comparison.)

**Cinesexual:** One who is addicted to sex in movies.

**Circumsexual:** (a) A person who is sexual on all sides, or (b) someone who likes to give others the runaround.

**Disexual:** A passionate admirer of the Princess of Wales.

**Exsexual:** Someone who engages in sex with a former spouse.

**Extrasexual:** (a) Somebody extremely sexy, or (b) a person who has a fling with a being from outer space, then sells his or her story to the National Enquirer.

**Hypersexual:** One who exaggerates his or her experience.

**Hypnosexual:** Someone who puts his or her partner to sleep. (Compare to "narcosexual")

**Insexual:** The opposite of outsexual, used to describe anything that's fashionable at the moment, such as androgyny.

**Maxisexual:** Popular leading man in countless X-rated movies.

**Megasexual:** Elephants. Whales too. And hippopotamuses.

**Minisexual:** What turns Mickey on.

**Narcosexual:** A person who falls asleep during sex.

**Nonsexual:** Someone who never says "Oui".



**Omnisexual:** People who are excited by back copies of Omni magazine.

**Pansexual:** Someone who emulates Michael Jackson.

**Parasexual:** (a) One who is qualified to advise about sex but not to engage in it, or (b) someone who engages in sex while (1) sky-diving or (2) holding a small umbrella to ward off the sun.

**Phonosexual:** A person who likes to talk about it on the telephone, preferably long-distance.

**Pixisexual:** One who is fond of elves.

**Polysexual:** One who is turned on by manmade fibers.

**Prosexual:** (a) Someone in favor of sex, or (b) a classification (compared, for example, to "semiprosexual").

**Protosexual:** Pertaining to sexual etiquette.

**Pseudosexual:** A person who pretends to be interested in sex but isn't.

**Quasisexual:** (a) Something resembling sex, or (b) a person who's all talk.

**Resexual:** Somebody who's middle-age crazy.

**Retrosexual:** Someone who fantasizes about sex during the 50's.

**Semisexual:** One who engages in sex twice a year.

**Stereosexual:** A person who insists on wearing his Sony Walkman at all times.

**Subsexual:** (a) Sex involving small cars, or (b) what Robert Mitchum was in "The Enemy Below".

**Synsexual:** Something you shouldn't be doing.

**Tautosexual:** Pertaining to the pointless repetition of sex.

**Trisexual:** A person with whom sex is a trying experience.

**SAFER  
SEX**

**CAN BE SENSUOUS!**

***Heterosexuals who still view the growing epidemic as a distant tragedy, the medical equivalent of a typhoon in Bangladesh, had better change their attitudes—and fast.***

by John Gamrecki

One of the most common medical problems among people with AIDS is seborrhea, or dry skin. While not exactly life-threatening, seborrhea can become a serious enough annoyance for the PWA who already has enough to worry about without the itching and scaling skin that seborrhea brings with it. There are things that you can do about it.

Having had to deal with seborrhea since before my diagnosis last August, I was very pleased to find that a side benefit of my taking egg lipids since March has been a significant skin improvement. I'm told that the stuff actually is used for cosmetic purposes in Japan, from which the PWA Health Group gets its current supply. There, however, it is apparently rubbed directly on the skin (to me a disgusting thought akin to rubbing your body with chicken fat). I would much rather swallow it.

Beyond egg lipids, I find Lubriderm works best for me as an all-around moisturizer. Everybody has his own favorites. A great find brought to my attention by my sister is Neutrogena Sesame Oil for after bath or shower. It's a wonderful smelling oil (also available in a non-scented version if you don't agree with me) that works well and is relatively cheap (about \$7 on 14th Street for 8 oz.). Beware staining clothing, however, and be sure to put on while you're still damp, otherwise you're just sealing in the dryness. Finally, don't take too many baths, particularly in warm weather, as this will just tend to aggravate the situation.

A serious skin problem that those who are considering using DNCB should be aware of is the possibility of serious staph infections or other types of allergic reactions. After applying DNCB to the skin for some months and seeing my lesions successfully fade and blur (and, in one case, just about fall right off), I made the mistake of wearing a pair of boots I don't often wear on an overnight trip out of town. The edge of the boot cut into the spot where the DNCB had been applied earlier in the day. Before I realized the seriousness of the problem, it had grown into a massive and antibiotic-resistant staph infection that had to be treated with Ceclor (at about \$2.50 a capsule). On top of that, I developed an allergic reaction to the adhesive used in the Band-Aids that I'd been covering it all with. I'm still waiting for the whole mess to finish healing, but it's obvious I have some permanent gouges, scars, and skin discoloration as a souvenir of the experience. Clearly, DNCB is a mixed bag that should be used with caution, even under a doctor's supervision, as I was.

Another of my skin-related problems that has come along with AIDS is the tendency to get small infections about the corners of the fingernails. If at all possible, this is the sort of thing you should avoid taking antibiotics for. Lord knows we PWAs are already taking far too many. After a particularly bad episode in which I only half-jokingly had resigned myself to the possibility of amputation, I have learned what a difference boiling clippers and other implements for 20 minutes (or soaking in alcohol) makes. Also try soaking the finger in hot water before giving in to antibiotics -- in my case soaking improved the situation almost back to normal within a few days.

Don't be afraid of the sun, even though I'm told it's immune-suppressive. I have always tanned well, and hope always to be able to get out in the sun once in a while, no matter what I'm told about how bad it may be for me. It makes me feel so much better, even with a grand total of 7 T-4 cells left. However, I have noticed a greater sensitivity to the sun's rays. Use caution and judgment.

Recently in reading Dr. Peter Selwyn of Montefiore Hospital's new book, AIDS: What Is Now Known, I came across a passage that stated that while dry skin is quite common a problem with AIDS patients, for unknown reasons it tends to disappear at the very end, just before death.

Gee, on second thought, maybe I will learn to live with it. . .

(Reprinted with permission from The PWA Coalition Newsline of New York City)

## COMMENTS

We welcome your thoughts and suggestions to help the Newsletter meet your needs. If you have an event in your area that you would like to have published in The Aids Project Newsletter, please contact us at The Aids Project - 774-6877 - or by mail to the attention of: David Ketchum.

**All any responsible health advisor can say is: Understand the risks and make your own decisions.**

INSURANCE NEWS

Insurance companies paid out an estimated \$292.2 million in AIDS-related life and health insurance claims in 1986, about 0.67 percent of all life and health claims distributed that year, according to a survey conducted by two industry associations.

The survey, released by the American Council of Life Insurance and the Health Insurance Association of America, polled over 700 companies, and estimated their results on the basis of the 275 responding insurers, representing 46% of the insurance industry's claims for four major product lines. AIDS-related estimates put life insurance death claims 0.9 percent and attributed AIDS-related treatment at 0.7 and 0.3 percent of individual and group health claims, respectively. The association warned, however, that survey results may underestimate actual claims because of under reporting of AIDS-related information on death certificates or health claim forms.

Meanwhile, a government study indicates that most health insurance companies are attempting to reduce their liability for AIDS claims by screening for HIV as part of the application process. According to the Office of Technology Assessment, a nonpartisan research arm of the U.S. Congress, about half of all commercial insurers routinely require some applicants, primarily men, to submit to the antibody test as a condition for obtaining individual and family health coverage.

The insurers claim the right of refusal to seek coverage to persons found infected with HIV because of the probability of becoming ill. This has led some providers to consider sexual orientation in underwriting decisions according to the report, and several insurers were found to have used intrusive measures, such as the interviewing of an applicant's neighbors, in order to ascertain sexual orientation.

The consideration of sexual orientation is directly contrary to guidelines issued by the National Association of Insurance Commissioners. said the agency, which states that "sexual orientation may not be used in the underwriting process or in the determination of insurability." A health insurance industry spokesman confirmed that insurers do not "condone the use of sexual orientation to identify AIDS risks." Nonetheless, the congressional report pinpointed 18 insurance companies which considered sexual orientation in the application process, five of whom said it could affect premiums, coverage limits, and the acceptance or rejection of an application.

Currently, only California and the District of Columbia prohibit the use of HIV testing for insurance purposes. Maine also provides some protection by prohibiting an insurer from inquiring into whether an applicant has been tested. Furthermore, nine states have adopted policies forbidding providers to use sexual orientation as a factor in the underwriting process. But with AIDS-related medical costs projected to reach \$8.5 billion by 1991, the incentive to further limit insurance liability through screening and intrusive investigation may only grow stronger.

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## SUBSCRIBE

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SUBSCRIBE NOW TO THE AIDS PROJECT NEWSLETTER

THIS NEWSLETTER RELIES TOTALLY ON SUBSCRIPTIONS TO EXIST. WE ARE GRATEFUL TO THOSE WHO HAVE SUBSCRIBED, AND TO THOSE WHO HAVE NOT, PLEASE DO SO NOW. \$10.00 COVERS ONE YEAR (12 ISSUES). PLEASE MAKE YOUR CHECK OR MONEY ORDER PAYABLE TO "THE AIDS PROJECT". THANK YOU.

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NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_



# FEDERATION of PARENTS and FRIENDS of LESBIANS and GAYS, Inc.

P.O. Box 20308  
Denver, Colorado 80220  
(303) 321-2270

## FOR IMMEDIATE RELEASE

The Northeast Region of the Federation of Parents and Friends of Lesbians and Gays will be holding a conference on July 9, 1988. The Northeast Regional Conference will be held at Western Connecticut State University in Danbury, Connecticut. The Conference will begin with registration at 8:00 AM and will conclude at 5:15 PM.

The Conference schedule includes six sessions which everyone will attend. The sessions are Creative Fund-raising, Helping Gay and Lesbian High School Students, Sharing Our Experiences, Effective Public Relations, "Too Little, Too Late" (a film about AIDS), and Organizing "Coming Out to Parents" Workshops.

The cost for attending the Conference is \$25.00 which includes lunch. Housing is also available for an additional fee.

For more information contact Tony Lewis at (603) 424-3252 or Jackie Shultz at (717) 238-2376.

For Maine P-FLAG information, please call Sally Debor at 729-0519.

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The AIDS Project will hold a volunteer training session Tuesday, July 12 at 7 p.m. in St. Luke's Church in Portland. The training is for those who wish to help people with AIDS with driving, housecleaning, cooking, and other practical tasks.

TAP especially needs volunteers who are available weekdays, but people free primarily on weekends are also welcome to attend.

Those who wish to take part in the training should contact Eunice Cox, volunteer coordinator, at The AIDS Project, phone 774-6877.

The July 12 training will take about two hours and will be held in Upper Parish Hall in St. Luke's Church. Although the church faces State Street, the entrance to the hall is on Park Street, through the church parking lot. As you enter Park Street from Congress Street, it is the second parking lot with a gate on the right.

SPECIAL EVENTS cont.

There will be an all Chopin recital at the home of Michael Viens of Cape Neddick, Maine on Sunday, August 7, 1988. A \$10.00 donation is requested. Anyone interested please call Michael Viens at 646-3534. All proceeds will go to The Aids Project.

ALL SINGING/ALL DANCING/ALL CONCERNED 88!---will be at the Portland Performing Arts Center on Septmber 16th & 17th. Tickets will be \$15.00 per person. Please contact Ed Wimert at The Aids Project between 9am-12noon, Monday thru Friday at 774-6877 for further information.

ROMANOVSKY AND PHILLIPS CONCERT to be held at the Portland Performing Arts Center on Friday, September 30th. Tickets are \$17.50 per person. Proceeds to benefit The Aids Project. For further information, please call Ed Wimert at The Aids Project between 9am-12noon, Monday thru Friday at 774-6877.

ALL SINGING/ALL DANCING/ALL CONCERNED 88 and the ROMANOVSKY AND PHILLIPS CONCERT will both benefit the Aids Project. Please plan your dates now, and help support all three special events.

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STATISTICS

As of June 28, 1988 there have been 83 diagnosed cases of AIDS in Maine. Of the total 83 cases, 37 have died. People who have tested positive with the AIDS virus (in Maine) is now at 300. National Data as of June 22, 1988: diagnosed cases of AIDS 65,099. Deaths 36,874.

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HOW CAN YOU HELP?

THERE ARE MANY WAYS YOU CAN HELP TAP. FOLLOWING ARE SEVERAL SUGGESTIONS. CHECK THOSE YOU CAN DO:

\_\_\_\_\_ YES, I WANT TO HELP TAP. I WOULD LIKE TO BE A VOLUNTEER. SEND ME AN APPLICATION.

\_\_\_\_\_ YES, I WANT TO HELP TAP. I AM ENCLOSING A CONTRIBUTION.

\_\_\_\_\_ YES, I WANT TO HELP TAP. I CAN DONATE NEEDED ITEMS OF FOOD, CLOTHING, HOUSEHOLD GOODS, ETC. CALL ME AT:

\_\_\_\_\_ YES, I WANT TO HELP TAP. SEND ME INFORMATION ON WHO I SHOULD CONTACT IN STATE AND FEDERAL GOVT. TO INCREASE FUNDING FOR AIDS EDUCATION & SUPPORT SERVICES.

\_\_\_\_\_ YES, I WANT TO HELP TAP. I CAN'T DO SO RIGHT NOW, BUT ADD ME TO A MAILING LIST OF CONCERNED PEOPLE.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TOWN: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SEND THIS FORM TO:

The AIDS Project  
P.O.Box 4096  
Portland, Maine 04101  
(207) 774-6877

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NEW NEWSLETTER

The Client Advisory Committee of The AIDS Project recently published the first newsletter produced exclusively for PWA's, PWARC's and HIV seropositive persons in Maine. If you are a PWA, PWARC or HIV seropositive individual and would like to receive this newsletter, please call The AIDS Project at 774-6877.

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LET'S HUG

THERE'S A HUG TO SAY  
I LOVE YOU  
AND A HUG TO SAY GOODBYE  
THERE'S A HUG TO SAY  
HOW ARE YOU  
AND A HUG TO SAY, WE TRIED  
THERE'S A HUG TO BOND  
A FRIENDSHIP  
AND A HUG WHEN THE DAY  
IS THROUGH  
BUT THE HUG I LOVE  
IN ALL THE WORLD IS  
THE HUG I GET FROM  
YOU!



ONGOING CALENDAR

Every Tuesday from 10:30am to 12noon at The Aids Project - 48 Deering Street Portland - there is a group meeting for all PWA's, PWArc, caregivers, and family members, to share your thoughts and feelings relative to AIDS. The meeting is conducted by Jacob Watson, M.A. Jacob is a psychotherapist specializing in loss and transition and is a staff member of the Elizabeth Kubler-Ross Center.

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Every Tuesday evening 7:00pm to 8:30pm at 29 Cushman St. - Portland - there is a group meeting for all lovers, caregivers, friends, and family members only. The meeting will be conducted by Brooke Alexander, an Episcopal priest and pastoral counselor. Call Brooke at 772-1678 for further details.

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ACT UP - Boston. 30,000 plus are dead from AIDS - haven't you been silent long enough? Join ACT UP - Aids Coalition To Unleash Power - United in anger and committed to direct action to end the AIDS crisis. Meetings every Tuesday at 7:30pm in Boston. Call 617-49ACTUP.

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On the first Tuesday of every month at The Aids Project - 48 Deering ST., Portland - there is an A-Line Staff Meeting at 6:00pm.

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Support Group for Parents of Adult Gay Children will meet the 2nd Tuesday of every month. Please call 774-HELP for time and place.

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DEAN (Downeast AIDS Network) educational and business meeting the 2nd Tuesday of every month at Ellsworth City Hall Council Chambers at 7:30pm. DEAN now has a newsletter and a support group for PWA's, HIV+, family members, and lovers. Call Tracy or Lynnsey at 326-8546 for more information.

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Support Group for Parents and Friends of Lesbians and Gays will meet the 4th Tuesday of every month at the Pilgrim House - 9 Cleaveland St. - Brunswick, Me. - call 729-9843 for further information.

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Every Wednesday in Augusta at the UU Church, Winthrop Street across from the Kennebec County Court House, 7pm-8:30pm, alternates each week between a group for PWA's only and a group which includes PWA's, families, etc. Call Ken LaFleur at 626-3435.

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There is a new AIDS support group forming in the Lewiston area for PWA's, lovers, friends, and family members. It will meet on Thursday afternoons at Clover Hospice in Auburn, beginning April 21st. Call Evelyn Piper-Keene at 783-9095 for information.

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There is now an AIDS support group in the Bangor area meeting every Thursday evening. Anyone interested in the group should call 469-7343 or write EMAN P,O,Box 2038, Bangor, Maine 04401.

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There is a new support group for people who are HIV+. It meets Thursday evenings from 5:30pm - 7:00pm at The Aids Project. The facilitator is Jacob Watson. No advance contact needs to be made to attend this group.

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Every Friday evening 6:00pm to 7:30pm at The Aids Project - 48 Deering St. - Portland - there is a support group meeting for PWA's and PWArc ONLY. Call 774-6877 for further information.

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WHEN YOU SEE SOMEONE WITHOUT A SMILE,  
GIVE THEM ONE OF YOURS.....



*Gap Newsletter  
July 29 81*

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