

SECOND 1987 LESBIAN/GAY PRIDE ORGANIZING COMMITTEE MEETING  
Beth Morse

On Feb. 2, the second meeting of the 1987 Lesbian/Gay Pride Organizing Committee was held in Burlington. Again, seven people attended. The possibility of some statewide activity taking place in the week prior to the march itself was briefly discussed, but since there was only one person from outside the Burlington area present, nothing could be planned. (The idea of this would be to emphasize that the Pride celebration is a statewide event, not just a Burlington event.)

A theme is still needed. This is the fifth annual march and will be the first to happen after the ERA campaign last year and the anti-discrimination bill being introduced into the legislature this year; the theme/slogan could reflect our sense of still being here after all these events. Until there is a theme, posters and buttons, etc., cannot be planned. The main goal of the next meeting, Monday, March 2, will be to decide on a theme.

The march is scheduled for Saturday, June 20. It was decided that this year, instead of bringing in a single keynote speaker from outside the state, a number of local speakers will be invited, (both to give it a more local feeling and to save on the expenses). Lots of names of

## Long Distance Gay Father

My son turns nine next month. I won't be there for the party, instead we'll have to content ourselves with a phone call, a small gift sent out ahead of time, and the knowledge that we'll see each other again sometime this summer. From 2,500 miles away, that's about the only thing possible.

Like most of the rest of our interactions, it is a ritual which has developed over time to meet the special needs of a long distance father-son relationship.

Miguel was an accident. Maria (his mother) and I met at a lesbian and gay

well-known Vermont lesbians and gay men were suggested (you may be one of them!) as well as Gov. Kunin and the mayor of Burlington, whoever the mayor may be by June.

For movie fans, the possibility of two or three short movies is being looked into, with showings Friday and Saturday.

More help, suggestions and ideas are needed. There is a lot to be done and decided on and June is not that far away! The next meeting will be Monday, March 2 at 7:30 at the Peace and Justice Center. There is also another meeting scheduled for March 30, same time, same place. Please come, bring your ideas, your enthusiasm and your pride!

dance. We immediately became close friends, and when that friendship took on physical and sexual expression, neither of us gave any thought to birth control. Being good gay kids, it was simply not part of our frame of reference.

When Maria became pregnant and decided to have the baby, we tried to figure out appropriate parenting roles. It was assumed, from the beginning, that my fathering would be more than a biological act. Through the years, we have improvised, made up, and invented ways to deal with our very non-traditional family structure. By and large, it has worked well for all concerned. I feel privileged to play an active, if somewhat limited, parenting role; Maria loves being a mother and knows she can call on me at any time for support and help; and Miguel is turning out to be (if I may boast a bit) an exceptional young man.

Part of our ongoing closeness comes from the fortunate fact that for two years, while Maria studied and travelled in Europe, Miguel lived with me. Any parent who has gone through the two's and three's will tell you that you can't survive those years without a life-time bond forming. So it was in our case. Living as a single father and full-time student while

*continued, page 12*

## AIDS Info. Cont'd

from page 3

among those still negative but engaging in risky behavior.

Since most of the proposed testing is to be done in medical settings, what is the medical value of testing absent an intervention for those who are HIV antibody positive? Does a physician learn anything that would be relevant to the purpose of the hospital admission, or which would alter the care to be provided? If the purpose is to inspire physicians to do prevention counseling, why not conduct an educational campaign among physicians about counseling? What evidence is there that physicians or other hospital staff are prepared to do this kind of counseling?

Who will pay for testing and counseling? The CDC is not proposing major increases of federal funding to cover these costs.

What about the social costs of such a program? The CDC acknowledges that there is discrimination against those who test positive or who are in some way associated with A.I.D.S. Any testing program, at a minimum, should be accompanied by legislation banning discrimination on the basis of antibody status.

What will be the impact on health insurance coverage if test results become part of the medical record? Is the Medicaid / Medicare system prepared to pick up all

## CAGLR Receives Grant

The New Hampshire Citizens' Alliance for Gay and Lesbian Rights was recently the recipient of more than \$18,000 from the Federal Center for Disease Control (CDC) for A.I.D.S. education and risk reduction among gay and bisexual men in New Hampshire.

Planned are a wide range of services and activities that provide accurate information about A.I.D.S. and risk reduction in an atmosphere of trust and confidentiality. Activities include:

A.I.D.S. 101 -- a basic seminar on A.I.D.S. from medical and social perspectives. This is designed for larger groups of 10 or more in public settings and private homes with a social pot-luck dinner as well.

Safer sex education -- an informative and fun participatory program on how to practice and eroticize safer sex.

NAIL -- the New Hampshire A.I.D.S. Information Line, which began operation January 5th, offers direct and accurate information about all aspects of A.I.D.S.

those who will be denied coverage under the private system?

What assurances can be given to individuals that testing will not be the first step toward measures such as reportability, contact tracing and quarantine? Any hint of such a possibility will drive some people away from situations which might result in testing -- including seeking medical care they may need for non-A.I.D.S. related illnesses.

and A.I.D.S.-related stress. NAIL also provides referrals to confidential and trusted testing locations, private counselors, health facilities, and support groups throughout the state. Operating hours of NAIL are presently Mon-Wed from 7 to 10 pm. The number is (603) 224-3341.

CAGLR will also distribute A.I.D.S. and risk reduction information in bars and other businesses and will conduct a statewide survey among those in high risk groups. A media campaign will be conducted to reach rural gay and bisexual men who may not be exposed to information through other means.

CAGLR is planning these activities to reach as many people as possible throughout New Hampshire. If you would like to host a potluck dinner to allow your friends an opportunity to get information or simply talk about the impact A.I.D.S. has had on our lives, call CAGLR, and a member of the A.I.D.S. Education Committee can be sent as a facilitator.

Volunteers are needed for short and long term commitments, This is also a great way to meet new friends while making an impact on the spread of A.I.D.S.

*If you want to know when activities will be in your area, or to plan an activity in your town, please call the CAGLR office at 603-228-2355.*

*The Vermont Committee for A.I.D.S. Resources, Education and Services (Vermont CARES) offers a similar education program. If you would like to host a small A.I.D.S./healthy sex discussion for your friends in Vermont contact Vermont CARES at 802-862-5917.*