

2011 SUMMER

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Filing for Social Security Disability On Your Own

BY JACQUES CHAMBERS

If you are considering filing for Social Security Disability, you will often be told to hire an attorney or non-attorney advocate. There is no doubt that this is the best advice; however, in many cases, it is easier said than done. Most attorneys and advocates resist accepting clients at the initial application stage.

Part of the reason is how the advocates are paid. Social Security requires that an advocate who helps someone apply for benefits can be paid only on a contingency basis (that is, a fee can only be paid when the claimant is awarded benefits). Further, Social Security limits such payments to 25% of any retrospective payment from Social Security to a maximum fee of \$6,000.

Remember, though, Social Security does not pay any benefits at all during the first five calendar months of disability, so if you file immediately upon leaving work, it is very possible you will be approved for benefits before you are actually eligible to receive benefits, so there is either no or very little retrospective benefit for an advocate to receive that 25%.

Because of this, many advocates, especially, attorneys will not accept clients until they have been denied at least once or twice. The retrospective payments in such appealed cases will be much more substantial, increasing the advocate's fee.

Add to that the fact that 60% of initial applications are turned down and over 80% of the first level of appeals—Reconsideration—are also denied. Yet, most claims that go before an Administrative Law Judge, the third level of appeal, are approved. No wonder many attorneys only do the Administrative Law Judge appeals. Their chances for approval are greater and the retrospective

payment is high enough so the advocate's fee is usually the maximum of \$6,000.

The drawback for you, the claimant, is that it is not unusual for a disability claim to take two years to reach an Administrative Law Judge.

If you cannot find an advocate who will take your initial claim, you may want to go ahead and file for disability on your own. But rather than plan for a two-year wait to start your stream of disability income, you can apply in a manner that will substantially increase your chances of being in that 40% of claimants who are approved initially.

Before Applying

Know your disability and exactly what symptoms you have that keep you from working full-time in any type of job. Look up your condition in the Blue Book Listing of Impairments at ssa.gov/disability/professionals/bluebook/ to see if your condition meets any of the listings. If so, approval will be easier. You may want to discuss these with your doctor to make sure the record shows that you do meet a listing. You should also make sure all available objective testing is also included.

You may want to collect copies of all your medical records; this will definitely speed up the claims process. However, if you do, do *not* turn them in to your local Social Security office. Your medical records are not reviewed there but are examined by an Analyst at a state agency, typically called Disability Determination Services (DDS), and medical records often get lost in the transition. Once your claim is transferred there, you can contact your Analyst directly who can

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NEWSLETTER

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Eric Estrada, Mark Allen-Smith, Brian Stott,
and Cary Alexander*

CIRCULATION 12 000

LIBRARY OF CONGRESS NUMBER ISSN 1096-1364

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The Swiss Statement and Its Repercussions

BY NAM / AIDSMAP

There is evidence of some groups of gay men knowing, from the late 1990s onwards, that people with an undetectable HIV viral load were much less infectious, and were using this knowledge in sexual decision-making. Public discussion of this became much more high profile after a paper was issued by the Swiss Federal Commission for HIV/AIDS in January 2008.

The authors of the *Swiss Statement* have since said that they were surprised at the amount of attention their paper got and the global discussion it set off. It was intended purely as an in-country guideline directed at doctors and, significantly, at legal professionals. Much of the motivation for the statement lay in the fact that Switzerland had prosecuted and convicted a number of HIV+ people for exposing partners to HIV, and the doctors wanted there to be a statement saying that HIV+ people posed no risk to their partners if they were undetectable on stable antiretroviral therapy. They stated that unprotected sex between a positive person on antiretroviral treatment, and without an STI, and an HIV-negative person did not comply with the criteria for an “attempt at propagation of a dangerous disease” in the Swiss penal code nor for “an attempt to engender grievous bodily harm”.

Although the statement purely concerns the position of individuals and was not connected with the mathematical-modelling studies that

were starting to be issued which looked at the possibility of using viral control as a prevention measure, it was significant because it transformed the discussion around viral undetectability and infectiousness from one in which using viral load status to inform sexual-risk decisions was seen as dangerous, and a rationalisation for having unprotected sex, to one in which it became possible to talk about its legitimate use as a prevention measure.

Nonetheless, the statement caused widespread concern amongst some prevention and public health advocates who felt it was based on weak evidence in some areas and risked undermining people’s efforts to maintain and promote condom-based safer sex.

The statement said that people with HIV *are not* sexually infectious (“ne transmettent pas le VIH par voie sexuelle”), as long as the following conditions are met:

- The HIV+ individual takes antiretroviral therapy consistently and as prescribed and is regularly followed by his/her doctor.
- Viral load is ‘undetectable’ and has been so for at least six months.
- The HIV+ individual does not have any STIs.

The original statement made no distinction between vaginal and anal sex, though all the evidence the writers cited in support of the statement concerned heterosexual transmission,

such as the Rakai study, and they have since said that the statement only covered heterosexual transmission.

The statement had five co-authors, four of them Switzerland’s foremost HIV experts: Professor Pietro Vernazza, of the Cantonal Hospital in St Gallen, and President of the Swiss Federal Commission for HIV/AIDS; Professor Bernard Hirschel from Geneva University Hospital; Dr Enos Bernasconi of the Lugano Regional Hospital; and Dr Markus Flepp, President of the Swiss Federal Office of Public Health’s Sub-committee on the clinical and therapeutic aspects of HIV/AIDS. Significantly, its fifth author was a community activist, François Wasserfallen of the European AIDS Treatment Group, thus ensuring that community ‘buy-in’ for the statement was present from the start.

The headline statement says that “after review of the medical literature and extensive discussion” the Swiss Federal Commission for HIV/AIDS resolves that, “An HIV-infected person on antiretroviral therapy with completely suppressed viraemia (‘effective ART’) is not sexually infectious, that is, cannot transmit HIV through sexual contact.”

The Commission states that an HIV+ person in a stable relationship with an HIV-negative partner, who follows their antiretroviral treat-

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Silence Equals Death!

BY GERALD A. GERASH

The message “Silence Equals Death” of the ’80s and ’90s that we desperately and defiantly displayed on our T-shirts and banners or whatever else we could paste or splash it on, was the cry of PERSONS WITH AIDS and their friends. We screamed: “Stop the dying. We demand a medical response for this disease that is killing us!”

Today, many of us who now take the medication for granted are alive because of our pioneers’ wave after wave of protests to educate and challenge the doctors and the pharmaceutical companies. The demonstrations led by ACT-UP were dramatic and not always pretty, but they worked. Society responded and money poured into scientific research and the results were the astounding breakthroughs in research on HIV and the immune system, followed by treatment medication. I cherish and honor the memories of those heroes and heroines who fought, over the years, for their lives—and for the many who died while waiting for science to advance.

What an amazing legacy! Their militancy not only saved our lives, but has enriched and empowered our community and culture.

Here is the connection with today: There is significant scientific evidence that a cure for HIV is attainable in the near future. A Cal Tech scientist recently estimated within 10 years or even sooner. A cure has already been achieved with the “Berlin patient.” Right now, there is scientific progress towards duplicating the “Berlin cure” without the grave risks required of the Berlin patient. There are other amazing scientific projects, some of the best right here in the LA area, at USC, City of Hope, UCLA and Cal Tech and at the AIDS Research Alliance.

I want to reintroduce the slogan of the past, “Silence = Death.” I do not raise it in a flippant way, but in way that I hope respects its origins. I am saying the present refusal to adequately fund for HIV cure research is killing us. And that once again, silence equals death.

Too many of us are sick and suffering from HIV induced complications such as heart attacks, cancer, osteoporosis, high cholesterol, cognitive dysfunction (for which there are no effective pills!) and we are dying a lot sooner than we should. For many long-term survivors, treatment options are running out or have run out.

Dr. Michael Gottlieb, who authored the first report to the CDC identifying AIDS as a new disease stated recently on the 30th anniversary of AIDS, “I think the Berlin patient is an important proof of principle...that you can, in fact, eradicate HIV in someone who already is infected.... Now scientists in a number of institutions are working on safer ways to achieve the same result. I’m very excited about the potential for finding a safe way to eradicate HIV.”

Dr. Anthony Fauci, Director of the National Institute of Allergy and Infectious Disease (part of the National Institute of Health), referring to finding a cure for HIV, stated in a recent interview with Associated Press, “I want to pull out all the stops to go for it.” However, there still hasn’t been an adequate increase in the funding for cure research.

Today we know a cure is possible. The leading scientists are telling us that. With these facts, to remain silent about proceeding full throttle with funding for a cure means we will continue to die unnecessarily. I know I will die too soon and before that I’ll probably be hobbled by an HIV complication solely because of criminal neglect—the refusal to adequately fund for cure.

Why is hardly anyone speaking up and demanding more money for cure research? If those leaders and institutions who profess to act on our behalf and even say they exist for our best health interests continue to fail to address the problem, we need to tell them to get their heads out of the sand and shout, “Silence = Death!”

Fortunately, there is one national group that is focused solely on trumpeting the call for a cure: AIDS Policy Project (aidspolicyproject.org and [Facebook.com/AIDSPolicyProject](https://www.facebook.com/AIDSPolicyProject)). It is a group of AIDS activists, scientists, doctors and people like you and me, and has a wide range of supporters, including researchers, physicians, as well as playwright and ACT-UP founder Larry Krame.

At this moment, they are our only hope to get the message out and achieve radical change. Some of APP’s present projects:

- 1) To demand that NIH increase its HIV cure research allotment from the present 3% to 12%;
- 2) A new national campaign to support APP as the only organization devoted to advocating

cure research and finding the necessary funding (both private and government); and

- 3) Lobbying our congresspersons. There is a letter on their Web site for you to send to the NIH Director in support of increased funding.

Their Web site also has a simply written “Fact Sheet on AIDS Cure Research.” And join APP! There is no charge. You can also get more info by contacting:

AIDS Policy Project
5120 Walton Avenue
Philadelphia, Pennsylvania 19143
Telephone: 215.939.7852

While I consider APP the only hope at the present, I believe we need to recognize and deal with the following huge obstacles to overcome and bolster APP’s campaign for a cure:

Problem number 1: Scientists lack adequate funding to perform the research! The NIH gives 97% of its money allocated to HIV research for treatment research and only 3% for cure research. While treatment research is still important, it makes more sense to allocate a larger percentage to cure research, now that the possibility of a cure is much closer than realized. In addition to saving millions of lives, the national debt could be reduced by \$50 billion—a good chunk of the country’s budget crises.

Problem number 2: To my best knowledge, only four pharmaceutical companies in the US are investing in cure research. I suggest that the drug companies lack the incentive to find a cure when their corporate revenue will continue to boom by maintaining us on the treatment treadmill. However, the company that invests in the science and discovers the cure will become the premier pharmaceutical company of the world, make a lot of money for their shareholders and attract brilliant scientists.

Problem number 3: Us. We are uninformed. I hope this article will help us all become better informed and participate in whatever way you can in advocacy for a cure.

Problem number 4: HIV/AIDS-focused organizations and others that have strong programs and clinics servicing the HIV/AIDS community in the LA area. There seems to be no leadership or vision in the LA area advocating for a cure. Our community leaders seem to be

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“Am I Undatable Because I’m HIV+?”

BY JOE KORT, RELATIONSHIP EXPERT

I have a good job. I am athletic and health oriented. I am the boy next door. I live right outside of one of the largest and gayest cities in the world. I have awesome family and friends.

Oh, and I happen to have HIV.

Because of the latter, all the other traits I can bring to the table seem not to matter when it comes to dating. I have tried HIV dating Web sites and social events but I have been unsuccessful. Since my status does not define me and I do not like limiting myself to just HIV+ guys, I am open to dating anyone who fits into what I look for in a man. Although the statistics amongst gay urban males regarding HIV seem like this would not be an issue in 2011, it still is.

My question is how do I deal with HIV stigma and dating without giving up hope?

**Signed,
Seriously single and losing hope.**

Dear SSLH,

I love that you do not define yourself by your health status! Leading with who you are as a person rather than your health status as your primary image of yourself is going to shape your dating experiences. Using one’s status as an excuse or feeling victimized by it is a recipe for poor self-esteem and bad dating experiences.

I agree that even in 2011 the HIV stigma exists among gay men—and straight men and women as well for that matter. I had a client who is very handsome, physically in great shape with everything a partner could want in a man in terms of both looks and personality. He experimented on dating sites by posting two different profiles; one, which doesn’t mention his HIV status, and one that does. He received more in-

quiries than he can handle when he left his HIV status off and considerably less when he added it to his information.

I also like that you are not limiting yourself to only HIV+ men as a way to protect themselves from rejection. I have had clients tell me that after 2–3 dates they told guys of their status (before having any sexual contact of any kind) and have had gay men say insensitive things like, “Why didn’t you tell me that from the beginning I wouldn’t have wasted my time” or simply honest things such as, “You’re good looking and totally my type but I can’t put myself at risk.”

Whether said with sensitivity and honesty or in a mean, uncaring way, both can feel rejecting and be very upsetting.

While it makes sense to me that someone would protect themselves from rejection because of HIV infection, limiting yourself to one type of man makes dating all the harder.

While I want to make it clear that I am not minimizing the effects of having HIV and being in the dating scene by comparing to other health issues and physical traits, I *do* want to minimize it in the same way I would want anyone else to minimize an issue they have during dating.

My answer to your question is basically to treat it like any other physical or personality trait you may have in terms of disclosing something unique about yourself which might turn a potential partner away. I have had clients with issues around their penis shape and sizes, diagnosed with bipolar disorder, depression, recovering sex and/or chemical addictions, weight issues, and other various health and physical issues which they could not change.

Each of these men had to disclose to dating partners and had to face being rejected and judged.

When do you tell? I always encourage sooner rather than later by being transparent and getting things out on the table as you are getting to know each other. When is that? It is different for everyone. There is no specific time other than sooner. You have to feel it out yourself and by talking to friends, therapists and dating coaches about what feels right for you.

We all have something that to a potential dating partner could risk rejecting. Dating is brutal and I consider it to be one of the most barbaric social requirements we have in finding a partner. There are no rules to follow or any allegiance to someone’s feelings. People come and go and say things that are insensitive or say nothing at all both of which can be very hurtful as you are exposing your heart and placing yourself in vulnerable positions.

That said, the most important thing to remember is someone else’s judgment of you is 90% about them and 10% about you. So if they choose to deny dating you understand this is about their own concerns and has nothing to do with you. You cannot take any of it personally.

You have to keep up your own hope and not give up whatever the issue is that you have—in your case it is being HIV+. I have seen many HIV-gay men not care about HIV status and both date and partner with HIV infected men. You cannot predict who those men will be.

All you can do is keep putting yourself out there and take care of your own feelings and protect your heart knowing it will get hurt and that is part of the dating experience for us all! 🙌

Joe Kort, PhD, is a sex and relationship therapist specializing in GLBT issues, Imago Relationship Therapy, Sexual addiction and male survivors of sexual abuse. He writes for www.MaleSurvivors.org, www.365gay.com, and is the author of 10 Smart Things Gay Men Can Do To Improve Their Lives.

SOCIAL SECURITY DISABILITY, CONTINUED FROM PAGE 1
provide you with what you need to send the records directly.

If you do not submit medical records, you will want to work with your Analyst to make sure the doctors send in their records promptly when requested.

Filing for Disability

I do recommend that you file online. It is easy, convenient, and you can save your work and complete the process over several days, so there is no pressure from sitting for a personal interview and having to do it all at once.

To apply online for disability, you need to complete two forms, the Adult Disability Report and the Disability Benefits Application. These online forms can be found at ssa.gov/applyfordisability/.

If you want to collect the information you will need for those documents in advance, you can print out the Adult Disability Report at ssa.gov/online/forms.html under the heading Disability Forms. Look for Form SSA-3368. This form covers your medical, educational, and work history. You can fill it out for easy entry online when you are ready.

The Disability Benefits Application will be asking for information about your military services, marriages, divorces, dependent children and parents, self-employment, recent employment, other government sponsored disability programs, and date and place of birth. They also ask your bank routing and account numbers so money can be deposited directly into your account.

The instructions for filing online are quite easy to follow. Each form will give you a code number so you can return to the applications at a later time. Be sure to write those numbers down or print out that page, as you will have to start all over if you lose those codes.

Feel free to estimate about dates such as when you first or last saw a doctor, or when you started or changed jobs. Remember, this is Social Security. They know exactly where you worked and when. Also, they are getting the medical records so they will get exact dates from them.

Once you submit your applications online, they will be sent to the Social Security office nearest your residence ZIP code. At the same time you will be asked to print out and submit an Authorization to Disclose Information to Social Security, a medical release. This document should be sent or delivered to the Social Security office. If you are collecting a state disability benefit, such as California SDI, they will want a copy of either the award letter or a check stub.

The address of your Social Security office will be shown on the receipts you print out when submitting the applications. I recommend you wait two to three working days before contacting that office to make sure your applications have been received and assigned to a Representative.

If possible, I recommend that you deliver the documents personally. By doing so, you can get the name and direct phone number of the Representative at Social Security handling your claim; you can also get a receipt for the documents you are submitting. Occasionally, based on the information in your applications, you will be asked to supply additional documents, such as a birth certificate or naturalization papers.

If delivering the forms is not convenient, I strongly recommend that you call the local Social Security office and get the name of your Representative so that you can send it directly to him or her. Social Security does remarkable work given the volume of business they have, but things do get lost. Having a copy of everything you submit will help keep your claim on track.

Social Security will then transmit your file to the state office of Disability Determination where it is assigned to an Analyst. Depending on the workload of the DDS office handling your claim, this assignment can take two weeks or more.

Once assigned, your Analyst will typically send you some questionnaires to be completed. The cover letter of these questionnaires will give you the name and direct phone number of the Analyst. It will also give you a DDS Case Number, which you should make a note of. Many DDS offices use this DDS Case Number as well as the Social Security Number when identifying your claim.

Once you know the name of your Analyst, you should call him or her. If you have medical records he or she will send you cover sheets and envelopes to submit them. If you don't have medical records, DDS will send requests for records to your doctors.

Because the Analysts are extremely busy, you can help speed up your claim by finding out when and to whom the requests for records were sent and follow up with each doctor to make sure they get the requests and send out the records.

When working with the Analyst, please keep their workload in mind. Many times you will only communicate with them through voice mail. Be patient with unreturned phone messages, and never, never argue with the Analyst. Your goal is to help them do their job, not argue for an approval.

Once the Analyst has reviewed your file, he or she will make a recommendation, which will be reviewed by an in-house physician—another area where claims often get delayed—where the decision is made or more information is requested.

Final note: Analysts are not allowed to discuss the decision by phone. All they can do is say that the claim has been returned to Social Security or is still being reviewed.

Helpful Hint: Denials tend to be mailed from the state DDS office and, occasionally from Baltimore, Maryland, in a business size envelope. Approvals, on the other hand, arrive in a 5½ × 8½ envelope, usually from the local Social Security office or Baltimore, MD. 📧

Jacques Chambers, CLU, is a Benefits Counselor in private practice with over 35 years experience in health, life and disability insurance and Social Security disability benefits. He can be reached by phone at 323.665.2595, by e-mail at jacques@helpwithbenefits.com, or through his Web site at www.helpwithbenefits.com.

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SWISS STATEMENT, CONTINUED FROM PAGE 3

ment consistently and as prescribed and who does not have an STI, is “not putting their partner at risk of transmission by sexual contact”.

However, they emphasise that, “Couples must understand that adherence will become omnipresent in their relationship when they decide not to use protection, and due to the importance of STIs, rules must be defined for sexual contacts outside of relationship.”


They add that heterosexual women will have to consider eventual interactions between contraceptives and antiretrovirals before considering stopping using condoms. They also say that insemination[ix] via sperm washing is no longer indicated when “antiretroviral treatment is efficient.”

The Commission goes on to say that it “is not for the time being, considering recommendations that HIV+ individuals start treatment purely for preventative measures.” Aside from the cost involved, they argue, it cannot be certain that HIV+ people would be sufficiently motivated to follow, and apply to the letter, antiretroviral treatment on a long-term basis without medical indications. They note that poor adherence is likely to facilitate the development of resistance, and that, therefore, antiretroviral therapy as prevention is indicated only in “exceptional circumstances for extremely motivated patients”.

The Commission also says that their statement should not change prevention strategies currently taking place in Switzerland. With the exception of stable HIV+ couples where HIV-positivity and the efficacy of antiretroviral therapy can be established, measures to protect oneself must be followed at all times. “People who are not in a stable relationship must protect themselves,” they note, “as they would not be able to verify whether their partner is positive or on efficient antiretroviral therapy.”

At a meeting in Mexico City in August 2008, Pietro Vernazza clarified some aspects of the statement. “We never thought of it as a statement that was to be delivered worldwide,” he said, but rather “it was meant only to be delivered to Swiss physicians to help them discuss sexual risk-taking with their patients and their steady partners.” He regretted the “ne transmettent pas” in the statement’s title and said that this absolute phrasing was ‘misleading’ in that it appeared to rule out the possibility of any residual risk.

“We also made it clear that the only person who can assess perfect adherence and regular check-ups would be a steady partner, and that it should only be the informed [HIV-negative] partner who could assess the risks for themselves.” The statement, he said, was “good news for a small number of people, but [for everyone else] prevention messages remain unchanged”.

Nonetheless, he defended the applicability of the statement at least to heterosexual couples in the light of subsequent research, including the Wilson paper in *The Lancet*, which said that gay male couples where the HIV+ partner was on treatment could reduce their transmission risk to virtually zero if they also used condoms, and said the estimated residual risk to heterosexual couples where the HIV+ partner was on treatment was of the same order as other possible, but unlikely, hazards such as the risk of dying in an air crash or avalanche. 

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SILENCE EQUALS DEATH, CONTINUED FROM PAGE 4

in a trance; their main—if not only—world view is treatment meds. Simply by their stating that NIH should allocate more than a measly 3% of all its HIV research funds to cure research would be a good start. These great institutions of social services should be advocating and coordinating advocacy for a cure, such as holding town hall meetings on the latest developments on a cure. APP knows scientists and doctors here who, in a heartbeat, would respond, participate, and educate. The HIV/AIDS organizations should be organizing people and the community to meet with our congressional representatives. What about a town hall meeting to organize the grass roots, like ACT-UP did, this time around for a cure? Are they really representing us effectively and humanely if these well-intentioned organizations still lack the vision to advocate for a cure at a time when not only the lives of people with HIV/AIDS, but the science itself, cries out for it?

For further info/discussion, please contact me at: gerashlaw@aol.com 

Gerald Gerash, early Gay Liberation activist, is in the process of forming Committee for A CURE. Contact Gerald at GerashLaw@aol.com for more information.

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Synergy Hematology/Oncology
5901 W Olympic Blvd, Ste 407
Los Angeles, CA 90036
323.525.1101, press 0

Mark H. Katz, MD
Kaiser West Los Angeles
6041 Cadillac Ave
Los Angeles, CA 90035
323.857.2064
HIV/AIDS specialist. Not accepting new patients currently, but will help new patients navigate the Kaiser system.

Matt Pekerol, MD
9201 W Sunset Blvd, Ste 616
West Hollywood, CA 90069
310.858.0880
pekerolm@hotmail.com
Openly gay board-certified internal medicine.
HIV/AIDS specialist. Accepts most PPO plans and Medicare.

Ilya Rachman, MD
948 N Fairfax, Ste 201
West Hollywood, CA 90046
323.654.2020
fax 323.654.2828

Jorge E. Rodriguez, MD
Orange Coast Medical Group
496 Old Newport Blvd, Ste 4
Newport Beach, CA 90263
949.646.1111
Accepts most indemnity and PPO health insurance plans, as well as Medical.

Peter Ruane, MD
5901 W Olympic Blvd, Ste 401
Los Angeles, CA 90036
323.954.1072
Openly straight ☺ IM/ID board certified HIV specialist. Most insurance including Medicare.
Free-to-patient Clinical Treatment protocols in the privacy of a small practice available to both insured and non-insured.

Myles Spar, MD, MPH
Venice Family Clinic / West Side Partners
604 Rose Ave
Venice, CA 90291
310.664.7607
fax 310.664.7676
Free comprehensive medical facility servicing the poor and uninsured populations of West Los Angeles.

MENTAL HEALTH SPECIALISTS

Barry Cardiner, MA, MBA, MFT
8430 Santa Monica Blvd, Ste 100
West Hollywood, CA 90069
Lic # MFT34301
323.874.1967
HIV+ psychotherapist. Accepts most PPO, POS insurance. Specialty areas: HIV issues, depression, abuse, addiction and recovery, relationships, grief.

Erin T. Childs, MA, LMFT
11650 Riverside Dr, Ste 7
Studio City, CA 91602
818.985.4200
etchilds@sbcglobal.net
Accepts most insurance plans, indemnity and PPO. Individuals and couples therapy. Issues of illness/wellness, addiction and mood disorders. Solution-focused.

Terence Ford, MA, Registered Intern
Located near Melrose and La Cienga
213.400.3474
Low-fee, individual psychotherapy. A calm, intelligent environment to work through your issues, whether HIV-related or not. Free initial consultation. Special low fee of \$40 if you mention Being Alive. Supervised by Dr. Steven Isaacman.

Payam Ghassemlou, MFT, PhD
9056 Santa Monica Blvd, #205
West Hollywood, CA 90069
310.801.2927
Gay male therapist, works with people with HIV and their significant others. Bilingual, accepts most insurance plans, no Medi/Medi.

Richard Gollance, LCSW, MSG
12402 Ventura Blvd, 2nd Fl
Studio City, CA 91604
818.503.7300
Psychotherapy. Primary focus: gay men in mid-life and beyond.
Ken Howard, LCSW
8430 Santa Monica Blvd, Ste 100
West Hollywood, CA 90069
310.726.HELP (4357)
www.gaypsychotherapy.com
Openly gay and HIV+ counselor. Psychotherapist. Life Coach. Helping gay men achieve their goals in career and relationships. Sixteen years experience working in HIV. Free, brief initial phone consultation. Fees negotiated individually. Insurance forms provided.

Luis O. Jarquin, Jr., MA, LMFT, Lic#41743
3350 E Birch St, Ste 100
Brea, CA 92821
714.528.9335
Individual, couple and family therapy; relationship difficulties; disclosure; coping with diagnosis; depression and anxiety.

Christopher Lawver, MA, MFT, Lic#40090
323.481.2090
www.ChrisLawver.com
Long-time advocate for affirming counseling for HIV and AIDS. I offer a sliding scale and accept most insurance plans.

Ronald Carey Rambo, LCSW, BCD
711 E Walnut St, #309
Pasadena, CA 91101
626.821.4063
225 S Civic Dr, #212
Palm SUMMERS, CA 92262
760.832.6701
Solution-focused individual, couple, and family therapy. Specialties include HIV issues, gay identity, addiction/recovery, mood disorders, relationships. Accepts most insurance plans.

Matthew Silverstein, PhD, MFT
8235 Santa Monica Blvd, Ste 309
West Hollywood, CA 90046
310.842.6124
e-mail: MSilversteinMFT@aol.com
Specialty areas include gay identity, HIV/AIDS issues, addiction recovery, dream work, spirituality. Sliding fee scale and able to accept most insurance (not Medi/Medi).

Fred Wilkey, EdD
Clinical Psychology
PSY8380
9056 Santa Monica Blvd, Ste 306A
West Hollywood, CA 90069
310.659.4455
Successful short-term therapy. Accepts Medicare and most insurance.

Tony Zimbardi, PsyD, MFT
Gay Male HIV+ Psychotherapist
323.851.1304
Enhance your quality of life. Dating, drugs, depression, anxiety are all common issues we have as poz men. I can help.

BENEFITS COUNSELOR

Jacques Chambers, CLU
Benefits Consultant and Counselor
Chambers Benefits Consulting
2658 Griffith Park Blvd, #290
Los Angeles, CA 90039-2520
323.665.2595 or 888.739.2595
www.HelpWithBenefits.com

UPCOMING ACTIVITIES AT BEING ALIVE

Call Being Alive at 323.874.4322. We're located at 7531 Santa Monica Boulevard, Suite 100, West Hollywood.

Being Alive Board Meetings

The Being Alive Board of Directors meetings for 2011 will be held monthly. If you would like to attend, call for more information.

The Young and the Restless

Thursdays • 7:00–9:00pm

A new support group for the young and newly poz. All are welcome, but the focus are on the newly diagnosed and under 30. Topics include emotional and physical well-being, risk reduction and disclosure, HIV 101 and basic information, treat adherence, communication skills, and fellowship. Call Being Alive for more information.

Psychotherapy by appointment

Evenings • 10:00am–9:00pm

Licensed psychotherapy intern provides one-on-one and couples therapy. Call Being Alive for appointment.

Positively New

Wednesdays • 7:30–10:00pm

For newly diagnosed or newly identified HIV+ within the past three years. Get emotional support, discuss medical issues, and topics relevant to a new diagnosis. Facilitated by Brian Risley, lead treatment educator for APLA. Call 213.201.1547.

Silver Lake Meet-and-Greet Support Group

Fridays • 7:00–9:00pm

All those interested in attending a Being Alive peer support group in the Silver Lake area please contact Being Alive.

Positive Reactions West

Wednesdays • 7:00–9:00pm

At Being Alive. A small drop-in group in a safe, honest place to discuss issues and meet others dealing with HIV. Call Being Alive.

Ceramics and Pottery

Call Being Alive for location

Saturdays, Sundays, Mondays • 12:00 noon

Learn ceramics and wheel-throwing. Beginners to advanced are welcome.

Yoga

Beginning Yoga

Tuesdays, Thursdays • 3:00pm

At Being Alive in the Meditation Room. Call to make an appointment.

Saturdays • 10:30am

Call for location.

Healing Touch

by appointment

Thursdays • noon–5:00pm

Alternative healing by hands-on and energy-based techniques. Call Being Alive for appointment.

Hypnotherapy

Thursday

By Dean L. Williams, CHT. Call 877.667.5844.

Speaker's Bureau

Spread the word about prevention, treatment, living with HIV/AIDS. For more information, call Colin at 310.739.6504.

Acupuncture Services

by appointment

Mondays • 1:30–4:30pm

Every other Tuesday • 10:00am–1:00pm

Wednesdays • 10:30am–5:00pm

Thursdays • 10:00am–1:00pm

Every other Thursday • 3:00–6:00pm

Treatment for a range of conditions including pain management, neuropathy and other side effects, addictions, stress, headaches, and allergies. Call Being Alive for appointment.

Chiropractic Services

Fridays • 1:00am–4:00pm

Back and body adjustments. No appointment necessary. New clients, or clients who have not contracted chiropractic services in more than a year, must come in at noon to fill out paperwork.

BEING ALIVE SUPPORT GROUPS

Our goal is to provide a safe and confidential space where everyone can express themselves in an atmosphere of mutual respect and encouragement.

TUESDAYS

New Focus Group Forming 7:00–9:00pm.
Open to all who are HIV+. Facilitated by John Balma. Call or e-mail johnatbeingalive@gmail.com for more information.

WEDNESDAY

Wise Guys 7:00–9:00pm. Being Alive West Hollywood (Being Alive Green Room). Co-facilitated. A drop-in group for men over 35 in a safe, honest place to discuss issues and meet others dealing with HIV. Call Being Alive for more information.

Positively New 7:30–10:00pm. 1300 N Vermont Ave. (Doctor's Building 2nd floor Conference Room). Facilitated by Brian Risley, Lead Treatment Educator for APLA at 213.201.1547. A fairly large support group for those who are newly diagnosed or newly identify HIV+ within the past three years. Get emotional support, discuss medical issues and topics relevant to a new diagnosis.

THURSDAY

The Young and the Restless 7:00–9:00pm. A new support group for the young and newly poz. All are welcome, but the focus are on the newly diagnosed and under 40. Topics include emotional and physical well-being, risk reduction and disclosure, HIV 101 and basic information, treat adherence, communication skills, and fellowship. Call Being Alive for more information.

FRIDAY

Silver Lake Meet-and-Greet Support Group 7:00–9:00pm. An emotional and social support group in Silverlake area for HIV+ men to discuss current issues and solutions to life with HIV. Contact Being Alive for more information.

LOCAL RESOURCES

ACLU Lesbian & Gay Rights: 213.977.9500 x237
Aid for AIDS: 323.656.1107
AIDS Healthcare Foundation: 888.AIDSCARE
AIDS/HIV Discrimination Unit, LA City Attorney's Office: 213.978.2128
APLA: 213.201.1600
AIDS Research Alliance: 310.358.2423
AIDS Service Center: 626.441.8495
AIDS Services Foundation/Orange County: 949.809.5700
Asian/Pacific AIDS Intervention Team: 213.553.1830
Being Alive San Diego: 619.291.1400
Beth Chayim Chadashim: 323.931.7023
Bienestar Hollywood: 323.660.9680
Clean Needles Now: 213.483.5366
Common Ground, the West Side HIV Community Center: 310.314.5480
Congregation Kol Ami: 310.248.6320
CVS Pharmacy: 310.659.9810
Deaf Women Outreach: 323.478.8000 (TTY or voice)
Discount Medical Pharmacy: 323.661.8366

East Valley Community Health Center:
West Covina: 626.919.5724;
Pomona: 909.620.8088
Foothill AIDS Project: 909.482.2066
HALSA: 213.637.1690
Jeffrey Goodman Special Care Clinic (GLCSC): 323.993.7500
Jewish Family Services HIV/AIDS Program: 323.761.8800
LA Gay and Lesbian Center: 323.993.7400
The Life Group LA: 888.208.8081
Los Angeles Free Clinic: 323.653.1990
Los Angeles Patients & Caregivers Group: 323.882.6033
Minority AIDS Project: 323.936.4949
Narcotics Anonymous Hotline: 800-todayna
National AIDS Hotline: 800.227.8922;
800.344.7432 (en Español);
800.243.7889 (TTY)
The New Hope Learning Center: 213.251.8474
North East Valley Clinic: 818.988.6335
PAWS (Pets): 213.741.1950

Peer Education Program: 323.651.9888
Project Angel Food: 323.845.1800
Project Inform: 800.822.7422
Rue's House: 323.295.4030
South Bay Family Health Care Center: 310.318.2521 x236
Spanish Language AIDS Hotline: 800.400.7432 (SIDA) toll-free Southern California only
Tarzana Treatment Center HIV-Mental Health Project: 818.342.5897
THE Clinic: 323.295.6571
USC AIDS Clinical Trials Unit: 323.343.8288
Valley Community Clinic: 818.763.8836
Van Ness Recovery House: 323.463.4266
WeHoLife.org: 323.860.7323
Wellness Works Community Health Center: 818.247.2062
West Hollywood Community Housing Corporation: 323.650.8771 x2
Whittier Rio Hondo AIDS Project: 562.698.3850
Women Alive Coalition: 323.965.1564
Zahn Emergency Shelter: 213.438.1619

COMMUNITY BULLETIN BOARD

Notices for this Bulletin Board and the preceding Support Group sections should be submitted to Kevin Kurth via Community Bulletin Board, *% Being Alive* Newsletter, 7531 Santa Monica Boulevard, West Hollywood, California 90046; or send e-mail to Kevin@BeingAliveLA.org; or send fax to 323.969.8753. Please be concise and indicate if there is a fee. Please also renew notices every six months.

MORE SUPPORT GROUPS

WHITTIER HIV+ GROUP

Whittier Rio Hondo AIDS Project (WRHAP) offers this group for all people with HIV. An open support group. Every other Saturday 10am–noon. For info, call Elizabeth Mendia at 562.698.3850. 6/2008

SPECTRUM / PASSPORT TO CARE

Various support groups. Yoga: Mondays 10:30am–noon, Building L. Relapse prevention workshop: Tuesdays 10:30am–noon, Building L. Heterosexual support group: Wednesdays 10:30am–noon, Building K. Food pantry: Thursdays 10am–5pm, Building L. Women's support group: Thursdays 11:30am–1pm, Building M. Soul food men's support group: Thursdays 4–5:30pm, Building N. Movie night: first and third Thursdays 6–8:30pm, Building L. Cocaine anonymous: Fridays 10:30am–noon, Building M. Grupo universal: Fridays 5–6:30pm, Building L. For more information call front desk at 323.563.4939. 11/2007

SOUTH BAY FAMILY HEALTHCARE CENTER

Comprehensive HIV/AIDS social service support—case management, mental health, prevention education, HOPWA, short-term rental assistance. Call Joanne Silva at 310.318.2521 x1422. 11/2007

TARZANA TREATMENT CENTER—HIV MENTAL HEALTH PROJECT

Support groups: HIV support, yoga, relapse prevention group, self-help, vocational counseling, and mental health counseling. For info, call Carol Bishop at 818.342.5897 x2195. 11/2007

SHABBAT LUNCH AND JEWISH HIV SUPPORT GROUP AT CONGREGATION KOL AMI

Come and schmooze and eat with fellow Jewish HIVers at Congregation Kol Ami in West Hollywood. We provide a safe, nurturing Jewish environment to talk about life with HIV, Jewish life, and life in general. 1200 North La Brea Avenue, West Hollywood. Call for time and date of next meeting. Reply in confidence to Rabbi Denise Eger at rabbid@kolami.org, or 323.606.0996, x100. 12/2006

APLA SUPPORT GROUPS

The following groups are ongoing and offered through APLA's Mental Health Services: HIV/AIDS Gay Male, HIV/AIDS Heterosexual, Substance Use and HIV, and Mono-lingual Spanish-speaking HIV/AIDS. For information in English and Spanish, call Walter Campos at 213.201.1621. 4/2006

METH AND GAY MEN

Feeling out-of-control? Having trouble finding intimacy? Promising to quit but using anyway? Worried that you need meth to have hot sex? On-going psychotherapy group meeting weekly for men concerned about crystal meth, sex, and intimacy. Conveniently located in Hollywood, this closed therapy group explores issues and feelings in a safe, confidential setting, Monday, 7–8:30pm. For more information, contact Glen at 323.993.7655, or Andre at 323.860.5804. Sponsored by the LA Gay & Lesbian Center. 2/2006

SPIRITUAL SUPPORT DROP-IN GROUP

For people living with HIV/AIDS or cancer, or dealing with grief or imprisonment. One-on-one spiritual support, primarily Catholic. Can make inter-faith referrals. For info, call 323.225.4461. 5/2004

BIENESTAR

Bienestar Human Services offers a variety of services and support groups for the Latino community, HIV+ client services, and HIV– prevention programs. Call Miguel Gonzalez at 323.727.7897. 5/2004

CHURCH OF THE VALLEY HIV+ SUPPORT GROUP

Thursdays, 6:30–8:30pm, Disciples of Christ Church, 6565 Vesper, Van Nuys. 818.786.4070. 5/2004

COMMON GROUND

HIV/AIDS drop-in support group for women and men, Mondays, 12:30–2pm; free; lunch is served. Gestalt Therapy Group, Thursday nights, 5:30–7pm, actively recruiting mem-

bers. Women's drop-in group, second and fourth Thursdays of the month, 12:30–1:30pm. Spanish-speaking drop-in group, Wednesdays, 10–11:30am. Call 310.314.5480. 5/2004

ALTAMED SUPPORT GROUP

For men and women living with HIV/AIDS. Meets Tuesdays from 2–3pm at AltaMed in Pico Rivera. For more information, call 562.949.8717. 12/2003

POSITIVES IN SOBRIETY

Open AA meeting for people affected by HIV. Meets every Sunday, 6pm. Great Hall in Plummer Park, Vista St., between Fountain and Lexington in West Hollywood. 323.656.0829. 12/2003

HIV BY THE BOOKS

Open AA meeting. Intimate book study for people dealing with HIV/AIDS issues. Meets every Friday, 7:15pm at Being Alive. 323.656.0829. 12/2003

LONG BEACH POZ PEERS

Social support group for HIV+ guys who want to meet other HIV+ guys. Contact David at 562.272.8810. 7/2003

FOUND SOBRIETY CRYSTAL METH ANONYMOUS

7pm. 11321 Camarillo St. (upstairs), North Hollywood, CA 91602. Go to www.crystalmeth.org for more information. 1/2003

PASADENA AIDS SERVICE CENTER

Support groups including Living Positive, HIV Symptomatic, Newly Diagnosed Group, Teen Group, HIV+ Spanish Women, Journaling Group, and Gay Men Over 45 Group. 1030 S. Arroyo Parkway, Pasadena. Call 626.441.8495: Jody Casserly, LCSW, x144. 8/2002

NA HIV+

Thursdays at 8:30pm. HIV+ and gay narcotics anonymous meeting. Members share their experience, strength, and hope that they and others may recover from the disease of addiction. HIV+ focused. Many new-comers at this meeting. 1919 N. Beachwood Dr., Los Angeles. For more information, call 323.850.1624. 6/2002

MINORITY AIDS PROJECT

Minority AIDS Project sponsors a variety of support groups for people of color. Call 323.936.4949. 9/2000

GRUPOS Y NOTICIAS EN ESPAÑOL

BIENESTAR

Bienestar Human Services offers a variety of services and support groups for the Latino community. HIV+ client services and HIV-negative prevention programs. Call Miguel Gonzalez at 323.727.7897. 11/2007

PROJECT ANGEL FOOD

Project Angel Food es una organización que provee comidas para las personas que viven con VIH/SIDA. Nuestros servicios están disponibles para personas que viven en nuestras áreas de servicio y que están oficialmente diagnosticado con el SIDA o VIH sintomáticos. Para recibir servicios, llame el 323.845.1810. 8/2001

ALTAMED GRUPOS DE APOYO EN ESPAÑOL

Todos los miercoles de 6–8pm le ofrecemos un grupo para hombres y tambien otro grupo para mujeres. Para mayor informacion: Juan—323.869.5403. 2/2001

WOMEN'S SERVICES

THE SERRA PROJECT/CASA DE LA MADONA Y EL NIÑO

A home for women and children living with AIDS and HIV. RN and MSW case management, medical transportation, bilingual—English/Spanish, family preservation and reunification. Call Martha Aldreta at 323.342.0705. 4/2008

PROTOTYPES WOMENSCARE

Complete medical treatment, follow-up, and case management, education available at WomensCare Center, Queen of

Angels/Hollywood Presbyterian. No fee, childcare available. 1300 N. Vermont, Ste. 401. Call Andrea Jackson 323.662.7420. East LA location: 5427 E. Whittier Blvd., Los Angeles 90022. Call Yolanda Salinas 323.869.5467. 11/2007

ESCAJEDA WOMEN'S CLINIC

Comprehensive health services for women with HIV/AIDS regardless of ability to pay. General and specialized HIV health care includes GYN services. Social Worker. Psychiatric services. English/Spanish speaking staff. For info, call 626.744.6140. Pasadena location. 12/2003

T.H.E. CLINIC FOR WOMEN, INC.

Offers specialized services for women living with HIV. Early intervention program, HIV testing. Staff speaks ten languages. Call Nola Thomas for information or appointments: 323.295.6571 x3109. 9/2000

LEGAL SERVICES

HALSA

A collaborative effort of AIDS Service Center, the L.A. County Bar Barristers, AIDS Project, the L.A. Gay & Lesbian Center, and Public Counsel. HALSA provides legal assistance in a variety of areas including bankruptcy, benefits, employment, housing, wills, powers-of-attorney to low-income people living with HIV, as well as comprehensive pro bono referrals. For more info, call 213.2637.1022. 4/2006

INSURANCE

Supplemental health and life insurance, serving our community. Contact Glenn at 818.774.1556 x33, or Glenn_Zorn@us.afiac.com. 9/2004

NOTARY PUBLIC

I live a few blocks from Being Alive in West Hollywood. Services are free if we can arrange a time to meet there. You can also come to my home on Palm Avenue and pay the regular \$10, or I can come to your place in West Hollywood for \$15. Call Michael at 310.659.4299. 2/2002

MEDICAL SERVICES

HIV OCULAR SPECIALIST

Lee Dodge, OD. 14429½ Ventura Blvd, Sherman Oaks, CA 91423. 818.783.8750. Fax 818.783.8779. lee@drdodgeod.com. www.drdodgeod.com. Accepts most PPO plans and Medicare. 6/2008

NORTHEAST VALLEY HEALTH CORP

Confidential comprehensive medical services for HIV/AIDS provided in English and Spanish at low or no cost in the SF Valley. Call Stefan Ruiz at 818.988.6335. 6/2008

UCLA CARE CLINIC

The UCLA Care Center conducts clinical research in HIV disease management, new medications, metabolic complications, prevention and therapeutic vaccines, opportunistic infections, AIDS-related cancers and co-infections. Contact Deon Claiborne at 310.557.9062. Provides specialty HIV care to those with private insurance, Medicare, or Medicare and Medi-Cal combined. Contact Mike Marcial at 310.557.2273. 11/2007

CHIROPRACTIC CARE

Spinal adjustments available for \$10 by appointment for HIV+ people who are uninsured and not working. Other services available. Brian Smith, DC, 8235 Santa Monica Blvd., Ste. 218, West Hollywood. 323.656.2652. 11/2007

JEFFREY GOODMAN SPECIAL CARE CLINIC

Provides HIV and STD testing, as well as treatment, case management, complementary therapies and AIDS Drug Assistance Program for HIV+ patients. 1625 N. Schrader, Third Floor, Los Angeles 90028. www.lagaycenter.org. Call 323.993.7500 for info. 11/2007

COMMUNITY BULLETIN BOARD

AIM HEALTHCARE FOUNDATION

Healthcare for adult-industry members. HIV/STD testing, referrals, counseling, GYN services. For clients diagnosed with HIV/AIDS at AIM Healthcare—free-for-life medication placement. Call 818.981.5681. Also in Woodland Hills: 19720 Venture Blvd., 818.961.0291. 11/2007

COMPREHENSIVE AIDS RESOURCE EDUCATION PROGRAM (C.A.R.E.)

Offers the following services: Out-patient, non-emergency clinic (sliding scale)—562.624.4999 • Dental center (sliding scale)—562.624.4949 • Testing/outreach (no charge)—562.624.4900 • AIDS drug assistance program (no charge)—562.624.4944 • Mental health program and nutritional counseling (no charge)—562.624.4914 • Case management / social services (no charge)—562.624.4900 • Family services program—562.624.4918. Located at 411 E. 10th St., Suite 107, Long Beach, CA 90813 (inside St. Mary Medical Center campus). 11/2007

ALTAMED HEALTH SERVICES

Comprehensive medical treatment for people with HIV/AIDS. In addition to medical treatment, we provide case management, support groups, and HIV testing. To make an appointment to see a physician, please call 323.869.5548. 11/2007

LAGUNA BEACH COMMUNITY CLINIC

Treats qualified clients for a low fee. Two HIV specialists accept Medical and Medicare. 362 3rd St., Laguna Beach, CA 92651. 949.494.0761. 11/2007

FREE RAPID HIV AND STD TESTING

At The SPOT, 745 N. San Vicente Blvd., West Hollywood, southwest corner of Santa Monica and San Vicente. Tuesday–Friday, 1–7pm, 323.993.7440. If you are experiencing STD symptoms, call 323.993.7575 between 11:30am–2:30pm to schedule an appointment. 11/2007

VALLEY COMMUNITY CLINIC, NORTH HOLLYWOOD

Offering free, anonymous HIV counseling service and testing Mondays 4–7:30pm, Tuesdays 2–7:30pm, Thursdays 12–3:40pm, and Saturdays 11am–4:30pm. Contact Walter Abb 818.763.8836. HIV case management everyday. Medical outpatient services for people with HIV. ADAP enrollment. For interview call 818.301.6334. www.valleycommunityclinic.org. 11/2007

AIDS HEALTHCARE FOUNDATION

AHF Clinics in Hollywood, Downtown, Sherman Oaks, the Westside, Upland, Lancaster, and West Adams provide care to people with HIV/AIDS regardless of ability to pay. No one ever turned away. Free HIV testings at our Out-of-the-Closet thrift stores. Call 800.AHF.2101. 10/2002

ANDREW ESCAJEDA CLINIC

Comprehensive health services for adults with HIV/AIDS, regardless of ability to pay. ADAP enrollment site and psychiatric services. Open to all HIV-infected, even if receiving medical care elsewhere. Pasadena location. Call 626.744.6140. 8/2002

TARZANA TREATMENT CENTER

Provides residential rehabilitation and medical detoxification programs for people with HIV/AIDS. Call 818.996.1051 x40. HIV outpatient clinic, Monday, Wednesday, Friday, 10am–6pm. Call 818.342.5897. 9/2000

USC AIDS CLINICAL TRIALS UNIT

Free clinical trials for people with HIV/AIDS. Located at 5P21, Rand Schrader Clinic, 1300 N. Mission Rd., Room 349, LA. For info, call 323.343.8288. 9/2000

METHADONE TREATMENT FOR HIV+ PEOPLE

If you are HIV+ and opiate-dependent, Western Pacific Rehab offers free out-patient methadone treatment at conveniently located sites. Call 800.223.3869. 9/2000

AIDS SERVICE CENTER, PASADENA

Free treatment education and advocacy via one-on-one counseling/assessment, monthly treatment forums, Treatment Library and more. Call 626.441.8495. 9/2000

WELLS HOUSE HOSPICE, LONG BEACH

A home-like environment serving Long Beach and Orange County. Volunteers always welcome. Contact Ron Morgan at 562.435.9363. 9/2000

LA COUNTY RAND SHRADER 5P21 HIV CLINIC

Provides comprehensive HIV care; services available in English and Spanish. Call 213.343.8255. 9/2000

T.H.E. CLINIC, INC.

HIV/AIDS testing, treatment, counseling, family planning, other services. For more information call 323.295.6571. 9/2000

PHARMACY SERVICES

EDDIE'S PHARMACY

As your community pharmacy, we are committed to provide the best service possible. Getting to you know and your individual needs is an integral part of that commitment. Small enough to care; large enough to meet your needs. Call 310.358.2400. 1/2006

ALL-IN-ONE PHARMACY

For all your pharmacy needs. Adherence tools and delivery provided free of charge. Treatment educators available for any questions you have. Most insurance accepted. Call toll-free: 866.255.6663. 11/2005

MOMS PHARMACY

The original adherence pharmacy. Services include free delivery, pager notification, and optional MOMS Paks medication packets, the ultimate adherence tool. For more information, visit www.momsparmacy.com, or call 866.993.6337. 8/2005

PERSONAL SERVICES

HOME DELIVERED MEALS

Jewish Family Services provides kosher meals (fresh or frozen) to the homebound. Call 323.761.8770. St. Vincent's Meals on Wheels: 213.484.7775. 11/2007

TRUE NORTH MESSAGE

Swedish circulatory massage. Tim Maloney, Certified Massage Technician. APSB. 818.244.3029. 818.726.9480 (cell). shaktim2001@hotmail.com. 1/2006

SPORTS MASSAGE

Deep tissue, soft touch, and Reiki therapy. Discount for HIV+. I've worked on athletes for over five years. Call Wayne at 562.235.8716 and mention this ad. 12/2005

COUNSELING

Payam Ghassemlou, PhD, MFT, gay male counselor. 310.801.2927. Sandplay Therapy—a fun, creative, and healing process to connect to your psyche's self-healing powers. 9/2004

RESIDENTIAL DRUG TREATMENT

Live-in drug treatment for people living with HIV/AIDS. For info, call Robyn at 818.985.8323. 2/2002

MESSAGE BY JEFFREY

Therapeutic touch at a discount for people living with HIV/AIDS. Contact Jeffrey at jjeffrey54@aol.com, or call 310.770.7515. 10/2001

PROJECT ANGEL FOOD

Project Angel Food's agency delivers nutritious meals to individuals with a formal diagnosis of AIDS or symptomatic HIV disease living in our delivery area. To start free meal delivery service, please call Client Services at 323.845.1810. 8/2001

FREE GROCERIES

Food and personal care items are provided to PWAs. Tuesdays, Wednesdays, and Thursdays, 10am–1pm. For more information, call Imani Unidos Food Pantry, 323.754.2320. 5/2001

LOW INCOME HOUSING FOR PWAs

1-, and 2-bedroom housing wait list. Contact West Hollywood Community Housing Corporation, 8285 Sunset Blvd., Ste. 3, West Hollywood, or call 323.650.8771, x2. 1/2001

50% MESSAGE DISCOUNT

Full hour Swedish massage. Legit. \$25. Designed for financially challenged HIV+ folk who are looking for a way to afford regular massage. Call Bruce at 323.660.5358. 9/2000

MISCELLANEOUS

HOLLYWOOD MENTAL HEALTH CENTER

We are accepting new HIV+ clients who are seeking individual or couples counseling. HIV+ clients may obtain services without any insurance, although Medi-CAL and Medicare are accepted. 1224 N. Vine St., Los Angeles 90038. Contact Chris Bridge, MSW, at 323.769.2125. 7/2009

ALLEGRIA HOUSE SHELTER

Assist families, and couples (gay or straight) living with AIDS. Sober living program. Contact Julie Lewis at 323.454.4200. 11/2007

CHOICES RECOVERY SERVICES

Has homes in Long Beach and Los Angeles, providing clean, comfortable, structured, drug- and alcohol-free living environments for men, women, straight, gay, HIV+, and dual-diagnosed individuals. Please call us for further information at 562.930.0565. www.choicesoflongbeach.com 11/2007

ZAHN EMERGENCY SHELTER

Welcomes singles and families with open arms to our sober living program. Priority is given to referrals living with HIV/AIDS. Referrals only. Please call 213.438.1619. 8/2006

MCINTYRE HOUSE

A non-profit residential substance abuse recovery and sober living program for men. Low-cost medical care and food provided. Contact Ed at 323.662.0855. 12/2004

STRENGTH IN NUMBERS (SIN)

A non-profit social network for HIV+ gay men that organizes and promotes fun and relaxed events in LA and Orange County. All HIV+ gay men are welcome. Events include pot luck, breakfasts, and bar nights. All events are low-cost, but everyone is expected to cover their own expenses. Check out our Web site for more information and updates on events: www.strengthinnumbers.org. 5/2003

TEENS REACH TEENS

Peer Education Program of L.A. offers educators to lead discussions on HIV/AIDS prevention in schools, group homes, and youth agencies. Call Wendy at 323.651.9888. 8/2002

HELPLINE FOR DEAF PEOPLE WITH HIV

A unique service run by HIV+ deaf people, providing referrals to other deaf and hard-of-hearing people with HIV/AIDS. Contact Emmett Haggen at 323.550.4258 (TDD) or 323.550.4255 (fax). 9/2001

AIDS EDUCATION/SERVICES FOR THE DEAF

Provides education to schools as well as one-on-one meetings and interpreters to Ryan White-funded HIV/AIDS services and testing with no charge to the service providers. Call 323.550.4250 (TDD/voice). Fax: 323.550.4244. 9/2001

HIV/AIDS MENTAL HEALTH PROGRAM

Common Ground offers mental health services to HIV+ residents of Los Angeles who cannot afford to pay. Call Mark Fairfield, LCSW, Director of Mental Health, at 310.314.5480. 4/2002

CRYSTAL METH ANONYMOUS INFO LINE

12-step program offering a 24-hour information hotline at 213.488.4455. 9/2000

AID FOR AIDS: FINANCIAL ASSISTANCE

Aid for AIDS provides financial assistance to people with HIV/AIDS. Help with pharmaceuticals, nutrition, monthly bus passes, rent, health insurance payments, utilities. For more info, call 323.656.1107. 9/2000