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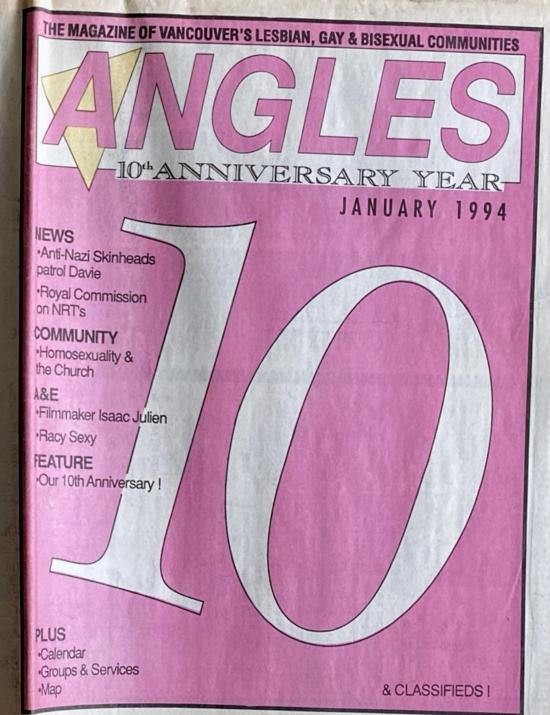
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Statement of principles

The Angles collective produces a lesbian/ray community magazine which offers a lesbian, gay or bisexual perspective on contemporary events, policies, arts and entertainment.

Angles is committed to the goals of gay, bisexual and leablan liberation. We aim to make available a range of perspectives on lestingsy liberation and information on perspectives hostile to lesbigay liberation. We recognize all components of the bisexual, leeblan and gay communities as part of lesbigay liberation.

Consistent with these principles and subject to space limitations, Angles access articles from all groups in the lesbian, gay and bisexual communities on their plans, policies and activities

As a collective committed to the international lesbigay liberation movement. Angles takes positions on questions of concern to gays, biseasual and lesbians Angles' commitment to the goals of lesbigay liberation includes a

- w the international lesbiggy liberation movement

 ▼ ending the oppression of bisexuals, lesbians and gays

 ▼ ending wimmin's oppression

 ▼ support for diversity, innovation and experiment in
- ways of living
- ▼ the right of wimmin to be independent of men ort for workers' defence of their economic and
- the free and unrestricted right to consensual sexual and affectiona's expression
- whe right of a prople of all ages, colours, physical appearances or abates to full and equal participation in all aspects, including sexual, of the lesbian, gay and bisexual communities, without exploitation
- ▼ the coverage of issues and events of importance and of interest to the gay, bisexual and lesbian communi

Angles is committed to the coverage of issues and nts of importance and of interest to the lesbigay munifies. We cefebrate the community's vements and victories.

Angles publishes articles which describe or assess vents of the larger community which are of significance or interest to Vancouver bisexuals, lesbians and gays. In addition to providing information, Angles analyzes the issues, draws conclusions and endorses or aponsors

Publishing Society of British Columbia, In the Vancouver Gay and Lesbian Centre, 1170 Bute Street, Vancouver V6E 126 Phone us at 686-8265 or fax us at 686-5405 Commissibly organizations are invited to contribute up to 300 words per issue on their activities, policies, and plans. We welcome submissions for publication, provided they are double spaced and either typed or handwritten legibly. Please contact one of the people below for more information.

ent Administrator: Scott Swan Calendar/Community Listings Co-ordinator:

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If you would like to help with production or pranning for stare issues, you are welcome to join us. Our collective ary merting is Menday, January 3, 7 pm. Our ollective business meeting is Menday, January 10, 7 m. Production for the next issue will begin Friday, Jacuary 21, at noon. Content deadline for the next issue is Wednesday, January 12, 5 pm Advertising deadline is Wednesday, January 19, 6 pm.

Thanks to the following people for their help in producing this month's issue: Anchan, Kasandra Kasle, Steve Bridger, Marish, Lorraine Chisholm, Jesse: Tara, Carlle Allda, Doug Barr, Myron Biett, 80b Bridger, John Cochrane, Doronn Datzell, Thomas Edwards, Nick Beston Ivan Ivanovich Kozachenko, Don McQueen, Hugh Ryane, Derek Vance Steel, Ed Stringer, Lindsay Straith, Raj Takhar, Ernest Von Rosen, John Watson, Bobby Wong,

Cover design by Laiwan

Angles was published by the Vancouver Gay Community Centre Society until December 1985 and under the name VCCC News from March 1979 to November 1983. Angles is entitled to membership on the board of the Vancouver Gay and Lesban Centre. The GLC operates a centre for community services at 1170 Bute. Street as well as the other services Listed in Angles'. Community Services page Printed in a union shop

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Second class mail registration number 6842. Vol. 12, No. 1, January 1994. ISSN 8824-2100.

LESBIAN & BISEXUAL COMMUNITIES

FORUM

I heard it through the grapevine:

CONFIDENTIALITY VS SECRECY ABOUT HIV STATUS

Last August, a sexy Japanese leatherman I met in a bathhouse across the border wrote me a letter to let me know how appreciative he was of our having had sex at my place in Vancouver. He also told me that he is HIV positive and that he had made sure he did not jeopardize my bodily safety.

I was moved, grateful and reassured that among gay men courage and sensibility still abound. Out there are men courageous enough to put themselves into someone else's hands and trust him not only in the suspended reality of a sling but also in the everyday of our communities. I also recently came across an article in the AIDS Vancouver Volunteer Voice titled "Confidentiality: Why I Have to Hide Part of Myself at AIDS Vancouver" written by a volunteer of that organization. It acted as a catalyst for various thoughts about trust, confidentiality, privacy and secrecy that I had been ruminating on for a while (yes, like a cow!!). This anonymous writer does not properly flesh out some of the ethical issues that we, whether HIV-positive or -negative, ought to deal with. I emphasize "we" because AIDS and HIV in the gay community does not belong to those who have been diagnosed. those who have chosen to know, or those who are "promiscuous" (read: more than one man in your adult sexual life). Issues of confidentiality, secrecy and trust involve all of us and they are the homework we all have to do to effectively deal with sexual and social "safety," if there is such a thing. Confidentiality has a legal and a conventional meaning. For mple, "The code of ethics of the Canadian Medical Association requires that a physician keeps in confidence information derived from his or her patient and divulge such information only with the permission of the patient or if required to do so by law." (Caswell 21: 1990, required to do so by law. (Assropositive AIDS, Ethics and Law). A seropositive diagnosis is not "reportable" according to the brochure AIDS/HIV and Your Legal Rights in B.C. However, in the everyday world of our communities, there is no such normative standard. There is instead a widespread and traditional convention that one doesn't go around spilling one's beans on John, Peter and Paul about their sexual orientation or HIV status. However, what if we do? Are we breaching a legal standard based on an ethical standard? Well, no. When we tell someone else something as general as "He is HIV-positive," we are not telling anything about how that individual acquired HIV, are we? When we say, "He is heterosexual," we do not necessarily mean that he fucks missionary style. He might have twisted and perverse sexual proclivities. A no-no would be to sanction what he does in the privacy of his bedroom or to play candid camera with the

unsuspecting gentleman.
Unfortunately, our societal prejudices and homophobia tend to make us automatically press the fag alert button. What if the person got HIV from an accidental pinch with a syringe while cleaning rooms at a cheap downtown hotel? Now, keeping the misunderstanding between secrecy and confidentiality might be doing nothing but perpetuating those prejudices and stereotypes. Yes, AIDS doesn't only kill fags. However, it is still our Canadian reality that most of us living with HIV and AIDS are gay (not all Anglos, mind you!!). At present, it is likely that most horny individuals will not disclos their HIV status to their equally aroused trick du jour. This is fine as long as they have consistently managed to translate those many slogans like "Put it in if you dress it up" into reality. I say most gay men do try safe sex most of the time, and believe me I do extensive and intensive research to come to any such definitive conclusion. I refuse to carry a sign that says "I have AIDS and I love it". I firmly believe that I do not have a moral obligation of disclosing my status if I fuck safely with a trick. If it takes two to tango, is it the obligation of the HIV-positive partner to disclose his HIV status? One uses one's hats strategically. I mean you don't wear all your jewellery when you walk in a neighbourhood plagued by Nazi skinheads. This is not because you're closeted, have no self-esteem, and have no political vision. One simply doesn't waste

such fine pearls on swine. Mandatory testing is the goal of those who insist that gay men still each other the virus because we tend to ourt ourselves (paternalistic shit) or simply because we are immoral and do not have any sense of passing onto next generations

(religious bullshit).

It is usually assumed that it is the "contaminated" individual's responsibility to disclose his status. I think this might be true if one does it for worthwhile reasons and not for the wrong ones. Hiding one's HIV status or one's sexual orientation can only hinder in the long term many of the human relationships one tries to foster. Let's say I fall in love with my fuck buddy and I want to have him stay for breakfast, I dry swallow my AZT while he looks the other way, I panic when he talks of suntanning, and I roll over and play dead when he suggests jogging. How do I tell him what I really need and make him mine if the basics haven't been covered yet? Telling one's close friends might not take the terror and the sadness away, but it smoothens the bad ride at times; telling one's supervisor allows an individual to take time off work or to plan for the future; telling one's HIV status to the world sometimes allows some individuals to struggle with a tough bureaucracy around HIV to obtain

benefits and respect for all of us.

The writer of the "Volunteer Voice" article wishes that information could be safe. Sorry, it can't. Have you heard of the slogan
"Knowledge is Power"? I also think that
"Knowledge is Danger". The moment one gets
information and know-how, one acquires power, but one is also expected to take a stance in life. If I'm diagnosed with HIV, I act upon it and I try to make the best decisions based on that information. That information can cause me an emotional breakdown, lead me to spend all my savings on so-called alternative therapies, or it can lead me to try desperately to find love in all the wrong places. Information is meant to be circulated. ACT UP's slogan "Silence = death" embodies that necessity to say "I am what I am" clearly, to denounce injustice or to vent my anger in constructive ways. Now, information can be used for different purposes and this will determine the shape it takes. A piece of gossip, slander, a libel, an obscenity or a lie are intended to be weapons to destruct or oppress. A conversation, an advice, a personal comment are intended to circulate information. Information is not safe. Driving cars is made safer by using the seat belt, sex is made safer by using latex condoms and water-based lubes,

however there is not hiding from twists of fate, shit happens!! What is safe? In my fantasies I fuck hard and dry, no condoms.

Keeping our HIV status a secret makes this information a signed blank cheque for emotional extortion. It becomes a weapon to hurt, a bleeding wound. Our anonymous writer is hurt by staff conversations at AIDS Vancouver about "those people with HIV" and

he finds himself unable to stand his ground and say "cut the crap, will you?" In the experiences of many men living with HIV being open and clear about their status and how they want to be perceived has meant for them circling one of the biggest rocks in the road. Yes, it is true that there are assholes out there in our own community who flee our pristine sheets in scandal and scorn when one tells them one is positive. If they only knew last night when they insisted on rimming you without covering you treasure with good old reliable Saran Wrap. It is unfortunate that more than ten years into this crisis, there remains some widespread denial and apathy about this epidemic. When it comes to heterosexual people responses vary, but most of the time they either do not acknowledge any of this. It simply doesn't

register (hello in there!!) or they are pretty cool bout it (mostly women).
Finally, I would like to make a comment about AIDS Vancouver. I believe the standards

there's a rumour. I have something to tell you... (HIV positive

AIDS!

of confidentiality are observed quite well in that organization. Exceptions, there always are. Our anonymous writer speaks of "numerous instances where staff has broken confidentiality in the in the interest of informing others," I wonder how a staff person is supposed to carry on with her work load without telling someone else some significant details about a client. Is that information used to denigrate the client? No. Is a doctor prevented from explaining in detail my body problems to a specialist so he can fix me? No.

However, our incognito writer touches on a very important point when he complains about the "us/them" mentality that I insist is promoted by making sexual orientation and HIV status a secret. There is in the literature, in the safer sex campaigns and workshops and in the medical establishment a strong tendency to create boxes: patients and doctors, healthy and diseased, alive and dead, HIV-positive and HIV-positive and sexual under the property time. HIV-negative, and safe and unsafe. Every time we create a binary, we also establish a hierarchy of assumptions. Doctors are more intelligent and always better prepared than patients (something PWAs have put to the test, thank you), HIV-positives are less of a person than HIV-negatives, homosexual men are less masculine than heterosexual dudes, therefore less worthy than heterosexual males, and many other assumptions that we need to fight everyday. Keeping the HIV status as a terrible secret does not help in this struggle to break on oppressive labels.

Being open about one's status helps create a more comprehensive image of who we are, how diverse we are and how powerful in our own situations we have become. Being open about one's HIV status also brings some of our pressing issues right in front of people's noses. It is not so easy to dismiss us, it is not so easy to say "we have done enough for those "infected" with HIV." I admit that once one has faced the world openly as an HIV-positive individual, one is required explicitly and implicitly to be constantly educating others. I sometimes wonder if this is the first time that members of society had to face death and illness. Were we immortals before 1980?

Finally, I react very strongly to our anonymous writer's statement that "AIDS Vancouver tends to use PWAs and people with HIV" because they are invited to implement programs. Although I strongly agree that any support or educational program in a non-profit organization should by definition be participatory and enhance reciprocity, that is giving as much as receiving, I don't see how AIDS Vancouver can be accused of "using" people. An AIDS testimonial in a speaking engagement for example might not directly be a therapeutic session for the PWA speaker, but it is not supposed to be (neither for him nor for the audience). We have to do our homework to understand that a testimonial or a workshop is only an opportunity for dialogue. We cannot determine what people are going to feel for us. It is tedious and depressing to see someone feel pity for me, and it is also sad that they cannot be passed that emotion to do something more constructive with their feelings.

Francisco Ibañez is a Latino gay man living with AIDS. He is doing PhD research at Simon Fraser University.