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Together is a beautiful thing. This is a moment to celebrate. You’ve worked hard to get this far, and look at what you’ve accomplished. At Wells Fargo, we recognize your successes, and are committed to supporting the financial needs of our LGBT community, customers, and team members. Because when we work together to realize our dreams—it’s nothing short of a beautiful thing.
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We are proud to join the parade across America in honor of National Pride Month. We think it’s really something to celebrate.

Plus, join us in supporting The Trevor Project this year!

The Trevor Project provides life-saving crisis intervention for lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth.

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SOURCE: CENTERS FOR DISEASE CONTROL AND PREVENTION

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Brian Hargrove

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“You’ll laugh. You’ll cry. You’ll be home by 10.

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IRRESISTIBLE CAST! IRRESISTIBLE PRICE! GREAT ORCH SEATS AS LOW AS $75!”
For your HIV viral load, The **POWER to help you go from**

**A**

**to Being **

**undetectable**

- **ATRIPLA®** (efavirenz/emtricitabine/tenofovir disoproxil fumarate) has been proven **TO LOWER VIRAL LOAD** to undetectable* in approximately 7 out of every 10 adult patients new to therapy through 3 years†
- The most common (at least 5%) moderate to severe side effects in patients on ATRIPLA were diarrhea, nausea, tiredness, depression, dizziness, sinusitis, upper respiratory tract infections, rash, headache, trouble sleeping, anxiety, and common cold. Each of these was reported in less than 10% of patients

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**INDICATION**

**INDICATION** and **IMPORTANT SAFETY INFORMATION** for ATRIPLA® (efavirenz/emtricitabine/tenofovir disoproxil fumarate [DF])

**What is ATRIPLA?**

ATRIPLA is a prescription medication used alone as a complete regimen, or with other anti-HIV-1 medicines, to treat HIV-1 infection in adults and children at least 12 years old who weigh at least 40 kg (88 lbs).

**ATRIPLA does not cure HIV-1 infection or AIDS and you may continue** to experience illnesses associated with HIV-1 infection, including opportunistic infections.

**See your healthcare provider regularly while taking ATRIPLA.**

**IMPORTANT SAFETY INFORMATION**

What is the most important information I should know about ATRIPLA?

ATRIPLA can cause serious side effects:

- Some people who have taken medicine like ATRIPLA (which contains nucleoside analogs) have developed lactic acidosis (build up of an acid in the blood). Lactic acidosis can be a serious medical emergency that can lead to death.

**Call your healthcare provider right away if you get the following signs or symptoms of lactic acidosis:**
- feel very weak or tired
- have unusual (not normal) muscle pain
- have trouble breathing
- have stomach pain with nausea and vomiting
- feel cold, especially in your arms and legs
- feel dizzy or lightheaded
- have a fast or irregular heartbeat

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*Undetectable was defined as a viral load of fewer than 400 copies/mL.
†In this study, 511 adult patients new to therapy received either the meds in ATRIPLA each taken once daily or Combivir® (lamivudine/zidovudine) twice daily + SUSTIVA® (efavirenz) once daily.

**Who should not take ATRIPLA?**

You and your healthcare provider should decide if ATRIPLA is right for you. Do not take ATRIPLA if you are allergic to ATRIPLA or any of its ingredients.

**What should I tell my healthcare provider before taking ATRIPLA?**

Tell your healthcare provider if you:

- Are pregnant or planning to become pregnant: Women should not become pregnant while taking ATRIPLA and for 12 weeks after stopping ATRIPLA.
- Have kidney problems or are undergoing kidney dialysis treatment.
- Are breastfeeding: Women with HIV should not breastfeed because they can pass HIV and some of the medicines in ATRIPLA through their milk to the baby. It is not known if ATRIPLA could harm your baby.
- Have liver problems, including hepatitis B or C virus infection.
- Have liver problems, including hepatitis B or C virus infection.
- Seizures have occurred or may switch you to another medicine.
- Some people who have taken medicines like ATRIPLA (efavirenz/emtricitabine/tenofovir disoproxil fumarate) have developed serious liver problems (hepatotoxicity), with liver enlargement (hepatomegaly) and fat in the liver (steatosis). In some cases, these liver problems can lead to death.

**Call your healthcare provider right away if you get the following signs or symptoms of liver problems:**
- skin or the white part of your eyes turns yellow (jaundice)
- urine turns dark
- bowel movements (stools) turn light in color
- don’t feel like eating food for several days or longer
- feel sick to your stomach (nausea)
- have lower stomach area (abdominal) pain
- You may be more likely to get lactic acidosis or liver problems if you are female, very overweight (obese), or have been taking nucleoside analog-containing medicines, like ATRIPLA, for a long time.
- If you also have hepatitis B virus (HBV) infection and you stop taking ATRIPLA, you may get a “flare-up” of your hepatitis. A “flare-up” is when the disease suddenly returns in a worse way than before. Patients with HBV who stop taking ATRIPLA need close medical follow-up for several months to check for hepatitis that could be getting worse. ATRIPLA is not approved for the treatment of HBV, so you need to discuss your HBV therapy with your healthcare provider.

Real ATRIPLA patient.
For your HIV viral load,

**ATRIPLA**

• ATRIPLA can cause serious side effects:

**What is the most important information I should know about ATRIPLA?**

**INDICATION**

ATRIPLA is a prescription medication used alone as a complete regimen, and you may continue

children at least 12 years old who weigh at least 40 kg (88 lbs).

**What is ATRIPLA?**

- Some people who have taken medicine like ATRIPLA (which contains nucleoside

analog-containing medicines, like ATRIPLA, for a long time.

- Have ever had seizures or are taking medicine for seizures.

- Have kidney problems or are undergoing kidney dialysis treatment.

- Have liver problems, including hepatitis B or C virus infection. Your health-

care provider may want to do tests to check your liver while you take ATRIPLA

or may switch you to another medicine.

- Have ever had mental illness or are using drugs or alcohol

- Have ever had seizures or are taking medicine for seizures. Seizures have occurred

in patients taking efavirenz, a component of ATRIPLA, generally in those with a

history of seizures. If you have ever had seizures, or take medicine for seizures, your

healthcare providers may want to switch you to another medicine or monitor you.

**What important information should I know about taking other medicines

with ATRIPLA?**

ATRIPLA may change the effect of other medicines, including the ones for

HIV-1, and may cause serious side effects. Your healthcare provider may

change your other medicines or change their doses.

**MEDICINES YOU SHOULD NOT TAKE WITH ATRIPLA**

• ATRIPLA should not be taken with: Combivir® (lamivudine/zidovudine),

COMPLERA® (emtricitabine/riprovirine/tenofovir disoproxil fumarate),

EMTRIVA® (emtricitabine), EpiVir® or EpiVir-HBV® (lamivudine), Epzicom®

(abacavir sulfate/lamivudine), STRIBILID® (elvitegravir/cobicistat/emtricitabine/

tenofovir DF), Trizivir® (abacavir sulfate/lamivudine/zidovudine), TRUVADA®

(emtricitabine/tenofovir DF), or VIREAD® (tenofovir DF), because they contain the same

or similar active ingredients as ATRIPLA (efavirenz/emtricitabine/tenofovir disoproxil

fumarate). ATRIPLA should not be used with SUSTIVA® (efavirenz) unless recommended

by your healthcare provider.

• Vfend® (voriconazole) should not be taken with ATRIPLA since it may lose its

effect or may increase the chance of having side effects from ATRIPLA.

• ATRIPLA should not be used with HEPSERA® (adefovir dipivoxil).

These are not all the medicines that may cause problems if you take ATRIPLA. Tell your healthcare provider about all prescription and nonprescription

medicines, vitamins, or herbal supplements you are taking or plan to take.

**Important Safety Information is continued on the following page.**

Please see Patient Information on the following pages.
What are the possible side effects of ATRIPLA?

ATRIPLA may cause the following additional serious side effects:

• Serious psychiatric problems. Severe depression, strange thoughts, or angry behavior have been reported by a small number of patients. Some patients have had thoughts of suicide, and a few have actually committed suicide. These problems may occur more often in patients who have had mental illness.

• Kidney problems (including decline or failure of kidney function). If you have had kidney problems, your healthcare provider should do regular blood tests. Symptoms that may be related to kidney problems include a high volume of urine, thirst, muscle pain, and muscle weakness.

• Other serious liver problems. Some patients have experienced serious liver problems, including liver failure resulting in transplantation or death. Most of these serious side effects occurred in patients with a chronic liver disease such as hepatitis infection, but there have also been a few reports in patients without any existing liver disease.

• Changes in bone mineral density (thinning bones). Lab tests show changes in the bones of patients treated with tenofovir DF, a component of ATRIPLA. Some HIV patients treated with tenofovir DF developed thinning of the bones (osteopenia), which could lead to fractures. Also, bone pain and softening of the bone (which may lead to fractures) may occur as a consequence of kidney problems. If you have had bone problems in the past, your healthcare provider may want to do tests to check your bones or may prescribe medicines to help your bones.

Common side effects:

• Patients may have dizziness, headache, trouble sleeping, drowsiness, trouble concentrating, and/or unusual dreams during treatment with ATRIPLA. These side effects may be reduced if you take ATRIPLA at bedtime on an empty stomach; they tend to go away after taking ATRIPLA for a few weeks. Tell your healthcare provider right away if any of these side effects continue or if they bother you. These symptoms may be more severe if ATRIPLA is used with alcohol and/or mood-altering (street) drugs.

• If you are dizzy, have trouble concentrating, and/or are drowsy, avoid activities that may be dangerous, such as driving or operating machinery.

• Rash is a common side effect with ATRIPLA that usually goes away without any change in treatment. Rash may be serious in a small number of patients. Rash occurs more commonly in children and may be a serious problem. If a rash develops, call your healthcare provider right away.

• Other common side effects include: tiredness, upset stomach, vomiting, gas, and diarrhea.

Other possible side effects:

• Changes in body fat have been seen in some people taking anti-HIV-1 medicines. Increase of fat in the upper back and neck, breasts, and around the trunk may happen. Loss of fat from the legs, arms, and face may also happen. The cause and long-term health effects of these changes in body fat are not known.

• Skin discoloration (small spots or freckles) may also happen.

• In some patients with advanced HIV infection (AIDS), signs and symptoms of inflammation from previous infections may occur soon after anti-HIV treatment is started. If you notice any symptoms of infection, contact your healthcare provider right away.

• Additional side effects are inflammation of the pancreas, allergic reaction (including swelling of the face, lips, tongue, or throat), shortness of breath, pain, stomach pain, weakness, and indigestion.

This is not a complete list of side effects. Tell your healthcare provider or pharmacist if you notice any side effects while taking ATRIPLA.

You should take ATRIPLA once daily on an empty stomach. Taking ATRIPLA at bedtime may make some side effects less bothersome.

Please see Full Prescribing Information, including “What is the most important information I should know about ATRIPLA?” in the Patient Information section.

Please see Patient Information on adjacent and following pages.
**ATRIPLA® (efavirenz/emtricitabine/tenofovir disoproxil fumarate)**

(CD4+ cells), allowing your immune system to improve. Lowering the amount of HIV-1 in the blood lowers the chance of death or infections that happen when your immune system is weak (opportunistic infections).

**Does ATRIPLA cure HIV-1 or AIDS?**

ATRIPLA does not cure HIV-1 infection or AIDS and you may continue to experience illnesses associated with HIV-1 infection, including opportunistic infections. You should remain under the care of a doctor when using ATRIPLA.

**Who should not take ATRIPLA?**

Together with your healthcare provider, you need to decide whether ATRIPLA is right for you.

Do not take ATRIPLA if you are allergic to ATRIPLA or any of its ingredients. The active ingredients of ATRIPLA are efavirenz, emtricitabine, and tenofovir DF.

See the end of this leaflet for a complete list of ingredients.

**What should I tell my healthcare provider before taking ATRIPLA?**

Tell your healthcare provider if you:

- Are pregnant or planning to become pregnant (see “What should I avoid while taking ATRIPLA?”).
- Are breastfeeding (see “What should I avoid while taking ATRIPLA?”).
- Have kidney problems or are undergoing kidney dialysis treatment.
- Have bone problems.
- Have liver problems, including hepatitis B virus infection. Your healthcare provider may want to do tests to check your liver while you take ATRIPLA or may switch you to another medicine.
- Have ever had mental illness or are using drugs or alcohol.
- Have ever had seizures or are taking medicine for seizures.

**What important information should I know about taking other medicines with ATRIPLA?**

ATRIPLA may change the effect of other medicines, including the ones for HIV-1, and may cause serious side effects. Your healthcare provider may change your other medicines or change their doses. Other medicines, including herbal products, may affect ATRIPLA. For this reason, it is very important to let all your healthcare providers and pharmacists know what medications, herbal supplements, or vitamins you are taking.

**MEDICINES YOU SHOULD NOT TAKE WITH ATRIPLA**

- ATRIPLA also should not be used with Combivir (lamivudine/zidovudine), COMPLERA® (efavirenz, emtricitabine, tenofovir disoproxil fumarate), EMTRIVA® (emtricitabine), Epivir® (lamivudine), Epzicom® (abacavir sulfate/lamivudine), STRIBILD®, Trizivir® (abacavir sulfate/lamivudine/zidovudine), TRUVADA®, or VIREAD. ATRIPLA also should not be used with SUSTIVA unless recommended by your healthcare provider.
- Vfend® (voniconazol) should not be taken with ATRIPLA since it may lose its effect or may increase the chance of having side effects from ATRIPLA.
- ATRIPLA should not be used with HEPSERA® (adefovir dipivoxil).

It is also important to tell your healthcare provider if you are taking any of the following:

- Fortovase®, Invirase (saquinavir), Biaxin (clarithromycin), Zovirax® (acyclovir), Stocrin (cidofovir), and other antiviral medications; these medicines may need to be replaced with another medicine when taken with ATRIPLA.
- Calcium channel blockers such as Cardizem® or Tiazac® (clorpropamide) and others; Diovin® (indinavir), Selzentry® (maraviroc); the immunosuppressant medicines cyclosporine (Gengraf, Neoral, Sandimmune, and others), Prograf® (tacrolimus), or Rapamune® (sirolimus); Methadone®; Mycobutin® (rifabutin); Rifampin®; cholesterol-lowering medicines such as Lipitor® (atorvastatin), Pravachol® (pravastatin sodium), and Zocor® (simvastatin); or the anti-depressant medicines bupropion (Wellbutrin®), Wellbutrin® SR, Wellbutrin XL®; and Zoloft® (sertraline); the medicine used to treat seizures, such as Dilantin® (phenytoin), Tegretol® (carbamazepine), and others; Crixivan® (indinavir), Selzentry® (maraviroc); these medicines may cause problems with ATRIPLA.
- Videx® or Videx EC® (didanosine); tenofovir DF (a component of ATRIPLA) may increase the amount of didanosine in your blood, which could result in more side effects. You may need to be monitored more carefully if you are taking ATRIPLA and didanosine together. Also, the dose of didanosine may need to be changed.

**ATRIPLA® (efavirenz/emtricitabine/tenofovir disoproxil fumarate)**

- Reyataz® (atazanavir sulfate), Prezista® (darunavir) with Norvir® (ritonavir), or Kaletra® (lopinavir/ritonavir); these medicines may increase the amount of tenofovir DF (a component of ATRIPLA) in your blood, which could result in more side effects. Reyataz® is not recommended with ATRIPLA. You may need to be monitored more carefully if you are taking ATRIPLA, Prezista®, and Norvir together, or if you are taking ATRIPLA and Kaletra together. The dose of Kaletra should be increased when taken with efavirenz.
- Medicine for seizures (for example, Dilantin® (phenytoin), Tegretol® (carbamazepine), or phenobarbital); your healthcare provider may want to switch you to another medicine or check drug levels in your blood from time to time.

**These are not all the medicines that may cause problems if you take ATRIPLA. Be sure to tell your healthcare provider about all medicines that you take.**

Keep a complete list of all the prescription and nonprescription medicines as well as any herbal remedies that you are taking, how much you take, and how often you take them. Make a new list when medicines or herbal remedies are added or stopped, or if the dose changes. Give copies of this list to all of your healthcare providers and pharmacists every time you visit your healthcare provider or fill a prescription. This will give your healthcare provider a complete picture of the medicines you use. Then he or she can decide the best approach for your situation.

**How should I take ATRIPLA?**

- Take the exact amount of ATRIPLA your healthcare provider prescribes. Never change the dose on your own. Do not stop this medicine unless your healthcare provider tells you to stop.
- You should take ATRIPLA on an empty stomach.
- Swallow ATRIPLA with water.
- Taking ATRIPLA at bedtime may make some side effects less bothersome.
- Do not miss a dose of ATRIPLA. If you forget to take ATRIPLA, take the missed dose right away, unless it is almost time for your next dose. Do not double the next dose. Carry on with your regular dosing schedule. If you need help in planning the best times to take your medicine, ask your healthcare provider or pharmacist.
- If you believe you took more than the prescribed amount of ATRIPLA, contact your local poison control center or emergency room right away.
- Tell your healthcare provider if you start any new medicine or change how you take old ones. Your doses may need adjustment.
- When your ATRIPLA supply starts to run low, get more from your healthcare provider or pharmacy. This is very important because the amount of virus in your blood may increase if the medicine is stopped for even a short time. The virus may develop resistance to ATRIPLA and become harder to treat.
- Your healthcare provider may want to do blood tests to check for certain side effects while you take ATRIPLA.

**What should I avoid while taking ATRIPLA?**

- Women should not become pregnant while taking ATRIPLA and for 12 weeks after stopping it. Serious birth defects have been seen in the babies of animals and women treated with efavirenz (a component of ATRIPLA) during pregnancy. It is not known whether efavirenz caused these defects. Tell your healthcare provider right away if you are pregnant. Also talk with your healthcare provider if you want to become pregnant.
- Women should not rely only on hormone-based birth control, such as pills, injections, or implants, because ATRIPLA may make these contraceptives ineffective. Women must use a reliable form of barrier contraception, such as a condom or diaphragm, even if they also use other methods of birth control. Efavirenz, a component of ATRIPLA, may remain in your blood for a time after therapy is stopped. Therefore, you should continue to use contraceptive measures for 12 weeks after you stop taking ATRIPLA.
- Do not breastfeed if you are taking ATRIPLA. Some of the medicines in ATRIPLA can be passed to your baby in your breast milk. We do not know whether it could harm your baby. Also, mothers with HIV-1 should not breastfeed because HIV-1 can be passed to the baby in the breast milk. Talk with your healthcare provider if you are breastfeeding. You should stop breastfeeding or may need to use a different medicine.
- Taking ATRIPLA with alcohol or other medicines causing similar side effects as ATRIPLA, such as drowsiness, may increase those side effects.
- Do not take any other medicines, including prescription and nonprescription medicines and herbal products, without checking with your healthcare provider.

**What are the possible side effects of ATRIPLA?**

Changes in bone mineral density (thinning bones).

Kidney problems

Serious birth defects have been seen in the babies of women who take ATRIPLA during pregnancy. It is not known whether ATRIPLA caused these defects. Tell your healthcare provider right away if you are pregnant. Also talk with your healthcare provider if you want to become pregnant.

**Additional information**

- Do not breastfeed if you are taking ATRIPLA. Some of the medicines in ATRIPLA can be passed to your baby in your breast milk. We do not know whether it could harm your baby. Also, mothers with HIV-1 should not breastfeed because HIV-1 can be passed to the baby in the breast milk. Talk with your healthcare provider if you are breastfeeding. You should stop breastfeeding or may need to use a different medicine.
- Taking ATRIPLA with alcohol or other medicines causing similar side effects as ATRIPLA, such as drowsiness, may increase those side effects.
- Do not take any other medicines, including prescription and nonprescription medicines and herbal products, without checking with your healthcare provider.
• Avoid doing things that can spread HIV-1 to others.
• Do not share needles or other injection equipment.
• Do not share personal items that can have blood or body fluids on them, like toothbrushes and razor blades.
• Do not have any kind of sex without protection. Always practice safe sex by using a latex or polyurethane condom to lower the chance of sexual contact with semen, vaginal secretions, or blood.

What are the possible side effects of ATRIPLA?

ATRIPLA® may cause the following serious side effects:
• Lactic acidosis (buildup of an acid in the blood). Lactic acidosis can be a medical emergency and may need to be treated in the hospital. Call your healthcare provider right away if you get signs of lactic acidosis. (See “What is the most important information I should know about ATRIPLA?”)
• Serious liver problems (hepatotoxicity), with liver enlargement (hepatomegaly) and fat in the liver (steatosis). Call your healthcare provider right away if you get any signs of liver problems. (See “What is the most important information I should know about ATRIPLA?”)
• “Flare-ups” of hepatitis B virus (HBV) infection, in which the disease suddenly returns in a worse way than before, can occur if you have HBV and you stop taking ATRIPLA. Your healthcare provider will monitor your condition for several months after stopping ATRIPLA if you have both HIV-1 and HBV infection and may recommend treatment for your HBV. ATRIPLA is not approved for the treatment of hepatitis B virus infection. If you have advanced liver disease and stop treatment with ATRIPLA, the “flare-up” of hepatitis B may cause your liver function to decline.
• Serious psychiatric problems. A small number of patients may experience severe depression, strange thoughts, or angry behavior while taking ATRIPLA. Some patients have thoughts of suicide and a few have actually committed suicide. These problems may occur more often in patients who have had mental illness. Contact your healthcare provider right away if you think you are having these psychiatric symptoms, so your healthcare provider can decide if you should continue to take ATRIPLA.
• Kidney problems (including decline or failure of kidney function). If you have had kidney problems in the past or take other medicines that can cause kidney problems, your healthcare provider should do regular blood tests to check your kidneys. Symptoms that may be related to kidney problems include a high volume of urine, thirst, muscle pain, and muscle weakness.
• Other serious liver problems. Some patients have experienced serious liver problems including liver failure resulting in transplantation or death. Most of these serious side effects occurred in patients with a chronic liver disease such as hepatitis infection, but there have also been a few reports in patients without any existing liver disease.
• Changes in bone mineral density (thinning bones). Laboratory tests show changes in the bones of patients treated with tenofovir DF, a component of ATRIPLA. Some HIV patients treated with tenofovir DF developed thinning of the bones (osteopenia) which could lead to fractures. If you have had bone problems in the past, your healthcare provider may need to do tests to check your bone mineral density or may prescribe medicines to help your bone mineral density. Additionally, bone pain and softening of the bone (which may contribute to fractures) may occur as a consequence of kidney problems.

Common side effects:
Patients may have dizziness, headache, trouble sleeping, drowsiness, trouble concentrating, and/or unusual dreams during treatment with ATRIPLA. These side effects may be reduced if you take ATRIPLA at bedtime on an empty stomach. They also tend to go away after you have taken the medicine for a few weeks. If you have these common side effects, such as dizziness, it does not mean that you will also have serious psychiatric problems, such as severe depression, strange thoughts, or angry behavior. Tell your healthcare provider right away if any of these side effects continue or if they bother you. It is possible that these symptoms may be more severe if ATRIPLA is used with alcohol or mood altering (street) drugs.

If you are dizzy, have trouble concentrating, or are drowsy, avoid activities that may be dangerous, such as driving or operating machinery.

Rash may be common. Rashes usually go away without any change in treatment. In a small number of patients, rash may be serious. If you develop a rash, call your healthcare provider right away. Rash may be a serious problem in some children. Tell your child’s healthcare provider right away if you notice rash or any other side effects while your child is taking ATRIPLA.

Other common side effects include tiredness, upset stomach, vomiting, gas, and diarrhea.

Other possible side effects with ATRIPLA:
• Changes in body fat. Changes in body fat develop in some patients taking anti-HIV-1 medicine. These changes may include an increased amount of fat in the upper back and neck (“buffalo hump”), in the breasts, and around the trunk. Loss of fat from the legs, arms, and face may also happen. The cause and long-term health effects of these fat changes are not known.
• Skin discoloration (small spots or freckles) may also happen with ATRIPLA.
• In some patients with advanced HIV infection (AIDS), signs and symptoms of inflammation from previous infections may occur soon after anti-HIV treatment is started. It is believed that these symptoms are due to an improvement in the body’s immune response, enabling the body to fight infections that may have been present with no obvious symptoms. If you notice any symptoms of infection, please inform your doctor immediately.
• Additional side effects are inflammation of the pancreas, allergic reaction (including swelling of the face, lips, tongue, or throat), shortness of breath, pain, stomach pain, weakness and indigestion.

Tell your healthcare provider or pharmacist if you notice any side effects while taking ATRIPLA.

How do I store ATRIPLA?
• Keep ATRIPLA and all other medicines out of reach of children.
• Store ATRIPLA at room temperature 77°F (25°C).
• Keep ATRIPLA in its original container and keep the container tightly closed.
• Do not keep medicine that is out of date or that you no longer need. If you throw any medicines away make sure that children will not find them.

General information about ATRIPLA:
Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Do not use ATRIPLA for a condition for which it was not prescribed. Do not give ATRIPLA to other people, even if they have the same symptoms you have. It may harm them.

This leaflet summarizes the most important information about ATRIPLA. If you would like more information, talk with your healthcare provider. You can ask your healthcare provider or pharmacist for information about ATRIPLA that is written for health professionals.

Do not use ATRIPLA if the seal over bottle opening is broken or missing.

What are the ingredients of ATRIPLA?
Active Ingredients: efavirenz, emtricitabine, and tenofovir disoproxil fumarate
Inactive Ingredients: croscarmellose sodium, hydroxypropyl cellulose, microcrystalline cellulose, magnesium stearate, sodium lauryl sulfate. The film coating contains black iron oxide, polyethylene glycol, polyvinyl alcohol, red iron oxide, talc, and titanium dioxide.

Revised: January 2015

ATRIPLA® (efavirenz/emtricitabine/tenofovir disoproxil fumarate)
From the personalities to the politics to the pop culture milestones, here’s everything you need for the best Pride ever.
50 YEARS OF PRIDE

The Stonewall riots of ’69 are generally considered the start of the LGBT equality movement, but America’s first Pride rally was actually a few years earlier—July 4, 1965. Fifty years ago, 39 brave men and women gathered at Independence Hall in Philadelphia to demand the same basic rights we’re still fighting for today: life, liberty, and the pursuit of happiness.
What will you remember?

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10 things that rock our world this summer.

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THE PRIDE LIST

10 things that rock our world this summer.
1. “Deja Vu,” by Giorgio Moroder
Your summer soundtrack is here! Written and produced by the grandfather of disco, Deja Vu is Moroder’s 13th album in a career filled with incredible milestones. (Without his early work with Donna Summer and Philip Oakey, dance music and EDM might not even exist.) Deja Vu features a who’s who of popular music today including Kylie, Britney, Charli XCX, and Foxes, but it’s the swirling, euphoric title track with Sia that deserves to be the song of the season.

2. Keith Haring on this year’s 1800 Tequila Essential Artist Series limited-edition bottle
Each year, 1800 Tequila features an iconic artist’s work on a limited run of bottles in an effort to highlight their work and pay tribute to their career. This year, six of Keith Haring’s most iconic images land the honor. Just 31 at the time of his death, Haring’s graffiti-inspired images have become some of the most influential of the 20th century and are a great way to reflect on our past...and inspire a celebratory toast to just how far we’ve come.

3. 54: The Director’s Cut
Despite a cast including Ryan Philippe and Breckin Meyer, this tale of the legendary Studio 54 never stood a chance in its original release. Disney and the powers that be obsessed over it being “too gay,” ordering massive reshoots and ultimately replacing more than 30 minutes of footage with softer, more family friendly scenes. Nobody cared...and the film was a massive bomb. But on video, 54 became something of a cult classic—enough so that director Mark Christopher recently resurrected his original film, bringing back the darker storyline, the flawed characters, and the excised homoeroticism. His new cut—basically an entirely new film—debuted to rave reviews at the Berlin Film Festival earlier this year. Check it out through video-on-demand or the Blu-ray release scheduled for later in the year.

4. Lily Tomlin
After a few years out of the spotlight, Tomlin is back to garner more laughs. In addition to a recent live comedy tour, Tomlin has been praised for her turn in Grace and Frankie, starring next to Jane Fonda as a woman dumped by her husband so that he could cut out and date his male long-term business partner. And this August, she returns for her first starring film role in over 25 years. The movie Grandma tells story of a lesbian poet who goes on a road trip with her 18-year-old granddaughter following the death of her long-term partner, with at times funny, at times touching results.

5. Sense8
Created by Andy and Lana Wachowski, the ten-episode Netflix series follows eight characters scattered across the globe, each connected by shared violent visions. Perfect for a weekend binge, the series packs plenty of Matrix-style twists and turns plus ample LGBT content, including a closeted actor and a transgender blogger both struggling to find their place in the world.

6. Vienna’s Gay Traffic Lights
Put in place prior to this year’s uber-campy Eurovision Song Contest (which Vienna-native Conchita Wurst won last year), the gay traffic lights are now a permanent feature of the city. Featuring pairs of heterosexual and homosexual couples holding hands and emblazoned with small hearts, the lights drew instant praise from the public, with petitions collecting thousands of signatures asking for them to stay in place. Other Austrian cities as well as parts of Germany are now considering putting similar lights in place as well. Danke, Vienna!

7. Maya Avant on The Bold and The Beautiful
Although Maya Avant (played by actress Karla Mosley) isn’t the first transgender character to appear on daytime TV, she was the first major character to announce she had transitioned after fans had already come to know and love her after several years on the show. In a time when soaps are nearly extinct, Mosley praised the decision from producers to create her controversial storyline, saying it gave the series a chance to both entertain—and educate—viewers.

8. Sir by Mario Testino
This 450-page limited edition collection of images shot by famed photographer Mario Testino is way more than a coffee table book. Yes, it’s pricey ($700) but each of the 1,000 available copies is also hand-signed by Testino and comes bound in traditional Japanese fabric and sealed in a custom metal slipcase. Testino designed it to highlight the changing attitudes toward the male face and body. With its collection of images ranging from models to unknown men on the street to celebs like David Beckham, Josh Hartnett, Brad Pitt, and Jude Law, we just think it’s damn sexy.

9. Miley Cyrus
Yes, she can twerk. And sing the hell out of a pop song. But there’s something deeper going on within Camp Miley. The 22-year-old star has become a model for queer activism. In an interview with Out magazine a few months back, she said “I didn’t want to be a boy. I kind of want to be nothing. I don’t relate to what people would say defines a girl or a boy... Being a girl isn’t what I hate; it’s the box that I get put into.” Powerful words for someone who grew up on the Disney channel and who has nearly 20 million Twitter followers, most under 30. Cyrus has since started a series of “Happy Hippie” concerts benefiting charities for homeless LGBT youth on her Facebook page and has used her social media channels to campaign for other pro-equality causes. In the words of one of her most recent tweets: “NOTHING can/will define me! Free to be EVERYTHING!”

10. Ireland’s public vote in support of marriage equality
In a historic vote in late May, the Emerald Isle became the first country on the planet to legalize marriage equality through a public vote, with close to 65% of voters offering their support. The campaign to pass the measure was lead by a number of legislators, journalists, and celebrities including drag queen Panti Bliss, who became the unofficial face of the campaign. “The people of Ireland have struck a massive blow against discrimination,” said Irish deputy prime minister and Labour leader Joan Burton, adding—in a reference to LGBT rights pioneer Harvey Milk—“Hope will never be silent.”

Parents need to be more accepting of who their kids are and less concerned about what society thinks they need to be.”
NEIL PATRICK HARRIS, ACTOR
In the USA there are at least 200,000 homeless LGBT youth. Each day young people are kicked out of their homes for being who they are—Lesbian, gay, bisexual, or transgender. We have to do better to protect these young people. Learn more: www.aliforneycenter.org

EVERYBODY DESERVES A BED

Pride today is a bit less colorful than it was in the ’70s. And not just because so few of us are wearing platform shoes. No, the change is in our flag. The original version, designed by San Francisco artist Gilbert Baker, was originally emblazoned with eight different colors, each with its own meaning: hot pink for sex, red for life, orange for healing, yellow for sun, green for nature, turquoise for the arts, indigo for harmony, and violet for spirit. A six stripe flag was infinitely cheaper to produce, so the pink and turquoise were stripped off, creating the iconic rainbow flag we know and love.

Prior to the rainbow flag, one of the most common symbols of the gay community was the Greek Lambda. A sign of unity under oppression, it was officially declared the international symbol for gay and lesbian rights by the International Gay Rights Congress, in Edinburgh, Scotland in 1974.

FLICK PICKS

Actor Rex Lee has spent almost a decade playing hugely popular personal assistant Lloyd Lee on HBO’s Entourage. With the hit series finally making its big-screen debut this summer, we asked the self-confimed film buff to put together a list of his favorite coming out films.

“While I suspected I was gay relatively early in life, it took me years to come to terms with it,” Lee says. “Seeing one of these movies back then would’ve helped immeasurably. These films are unifying—and they let you know it’s OK to be who you are, so don’t underestimate their power.”

BEAUTIFUL THINGS

What it’s about: The story of two teenage boys in love, the film combines an old-fashioned love story with fresh, contemporary pacing and plot twists.

Why he picked it: “I really loved the music first and foremost,” says Lee. “There’s a lot of Mama Cass in there, and her music speaks to me; it speaks to owning your individuality and feeling alright about the fact that you might be slightly different from the people around you—and knowing that’s OK. The movie is just really sweet. And the actors are pretty hot too.”

EDGE OF SEVENTEEN

What it’s about: If John Hughes made a gay coming out story set in the ’80s, this would be it—the definitive Gen X take on Reagan-era rom-coms.

Why he picked it: “The main character’s relationship with his mother resonated with me. My mom had a hard time dealing with my coming out. The two were definitely at odds with each other throughout the film—but under all that tension, their differences really stemmed from trying to find a way to express their love for one another.”

TORCHSONG TRILOGY

What it’s about: Originally a 4 hour, 3 act play written by Harvey Fierstein, Torchsong centers around the life of a Jewish drag queen living in NYC in the late seventies.

Why he picked it: “To me, it’s so much more than a coming out film. It’s the story of an era. And Harvey’s writing is just fantastic. But really, more than all of that, I included the film in my list because of dialogue. I love it so much. Of every film I’ve ever seen in my entire life, it’s stayed with me ever since the moment I first heard it.”
In the USA there are at least 200,000 homeless LGBT youth. Each day young people are kicked out of their homes for being who they are—Lesbian, gay, bisexual, or transgender. We have to do better to protect these young people. Learn more.

www.aliforneycenter.org
Every diva needs her own signature empowerment anthem. But can you spot the track, minus the sequins, video effects, and vocoder realness? Now's your chance to find out. Check out these lines from 15 classic tracks, then see if you can match them to the artist who originated the song. Keep track of how many you get correct to see where you land on the charts. Good luck!

**POP QUIZ**

1. “You made me insecure
   Told me I wasn't good enough!
   But who are you to judge me
   When you're sitting in the dugout?”
   **(A)**

2. “Don't forget what my mom said
   Unless they paying your bills
   Pay them back to my mind”
   **(D)**

3. “You deserve the beat in life
   So if the time isn't right then move on
   Second best is never enough.
   **(F)**

4. “I'm dancing on my own
   I make the rules up as I go.
   And that's what they don't know.
   That's what they don't know.”
   **(E)**

5. “You call me up
   And you'll do much better, baby, on your own.
   **(B)**

6. “Misplaced
   Misunderstood
   Miss no way, it's all good.
   It didn't slow me down.”
   **(I)**

7. “Would it make you feel better
   To watch me while I bleed
   All my windows still are broken
   But I'm standing on my feet.”
   **(G)**

8. “I'm beautiful in my way
   Cause God makes no mistakes
   I'm on the right track, baby.”
   **(N)**

9. “I've got to show the world
   All that I wanna be
   And all my abilities
   There's so much more to me.”
   **(J)**

10. “Everybody wants to throw it all away sometimes
    And hey, yeah, I know what you're going through
    But don't let it get the best of you
    You'll make it out alive.”
    **(K)**

11. “I've seen a strong man cry
    We all forgive, we all forget
    We just keep believing.”
    **(C)**

12. “If this world makes you crazy
    And you've taken all you can bear
    We call you up.
    Because you know I'll be there.”
    **(H)**

13. “Don't forget what my mama said
    People talking since the beginning of time
    Unless they paying your bills
    Pay them bitches no mind.”
    **(M)**

14. “You don't have to feel like a wasted space
    You're original, cannot be replaced
    If you only knew what the future holds
    After a hurricane comes a rainbow.”
    **(O)**

15. “No matter what we do
    No matter what we say
    Everybody wants to throw it all away sometimes
    And hey, yeah, I know what you're going through
    You'll make it out alive.”
    **(L)**

**HOW'D YOU DO?**

- **Less than 5 correct:** Brush off the dirt and moss. You've definitely been living under a boulder.
- **6-11:** Congrats, Suburban Dad! The weekly carpooling is serving you well.
- **More than 12:** Karaoke Queen. We're impressed. You know your stuff.
- **All 17:** Master of the Beats! Well done.

**ANSWER KEY:** A-1, B-2, C-3, D-4, E-5, F-6, G-7, H-8, I-9, J-10, K-11, L-12, M-13, N-14, O-15, P-16.
Listen OUT Loud
Visit republicrecords.com/prideplaylist

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AND MORE!

happy pride!
#republicpride
What’s better than a great cocktail? How about three great cocktails! We criss-crossed the country, from NYC to LA to South Beach, asking bartenders for their favorite summer drink recipe, along with some tips on how even the most amateur mixologist can make it like a pro.

**CLASSIC CUBAN MOJITO**

**THE PALACE,**
1200 Ocean Drive,
Miami Beach, Florida

**Ingredients**
- 10 fresh mint leaves
- ½ lime, cut into wedges
- 1 tbsp sugar
- crushed ice
- 1 ½ oz white rum
- ½ cup club soda

**To make**
Add the mint, lime and sugar to the bottom of shaker and muddle to release the lime juice. Fill the glass almost to the top with ice, add rum and top off with club soda. Stir well, garnish with remaining lime and serve.

**EXPERT ADVICE ON… MULLDING**
For the best cocktails, always muddle ingredients before adding ice to the glass. Crush berries with as much force as you can muster but go easy on fresh herbs and citrus fruits. Too much muddling of either can make them bitter.

**XXX’S AND OOO’S**

**THE STONEWALL INN,**
53 Christopher Street,
New York City

**Ingredients**
- 1½ oz X-Rated Fusion liqueur (a blend of French vodka, blood orange, mango and passion fruit)
- ¾ oz Stoli Orange
- Splash of pineapple juice

**To make**
Add all ingredients to a shaker partially filled with ice and shake until cool. Strain cocktail into a chilled glass and serve with a slice of orange as a garnish.

**EXPERT ADVICE ON… THE BASICS OF SHAKING**
Fill the shaker half way with ice before adding other ingredients. This chills the liquids as you add them. Leave plenty of room for the ice to move around while you shake, and most importantly, shake it like you mean it. You’ll know you’re done when the outside of the shaker gets frosty.

**THE ELIZABETH TAYLOR**

**THE ABBEY,**
692 North Robertson Blvd,
West Hollywood, California

**Ingredients**
- ½ cup fresh raspberries and blueberries
- 2 oz Belvedere vodka
- 1 oz mixed berry schnapps
- splash of sour mix
- ½ oz Blue Curacao float

**To make**
Add berries to the bottom of shaker and muddle to release their juices. Add ice, vodka, schnapps, and sour mix and shake cocktail until cool. Strain into a chilled glass and top with a Blue Curacao float. Garnish with berries before serving.

**EXPERT ADVICE ON… GETTING YOUR FLOAT ON**
Adding a float to a cocktail means pouring a small amount of liquid to the top of the drink where it balances atop the other ingredients. To do it, pour the float over the back of a spoon so it disperses evenly over your drink.

**CHEERS QUEERS!**

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How to Save a Life

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- Most new HIV infections in women are from heterosexual contact (84%).
- An estimated 88% of women with HIV are diagnosed, but only 32% are virally suppressed.

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Approximately one in four people living with HIV infection in the US are women.
Most new HIV infections in women are from heterosexual contact (84%).
GET RIPPED NOW!

Summer is the season of cold beer, burgers, and ice cream. But it’s also a time of shorts and T-shirts, pool parties, and lots and lots of sun. Whether you’re hitting your local Pride week festivities, or just want to look better in your own backyard, we’re here to help. With the assistance of fitness expert Craig Ramsay, a trainer, public speaker, and author of Anatomy of Muscle Building, we’ve compiled a handful of tips to help you get in shape now and stay that way all summer long.

SET THE RIGHT GOAL

Don’t just say you want to drop 50 pounds, and leave it at that. As host of Bravo’s original fitness reality show Thintervention and fitness director for Rose O’Donnell’s R Family Vacations company, Ramsay knows the struggle of getting in shape requires a bit more strategizing. “Goals are a means for accountability,” he says. “It helps when they’re short term.” Pick a date that’s three or four weeks in the future, decide what you can reasonably achieve, and make that your target. Once that goal has come and gone, set another. Five pounds here and eight pounds there add up to serious results.

GET YOUR BODY IN BALANCE

PH balance, that is. Water makes up 70% of the body; and for most of us, poor diets make that water extremely acidic. Adjusting your body’s PH to be more alkaline can really help with weight loss, says Ramsay. “Doing something as simple as adding lemon to your water helps to counteract that acidity,” he says. Squeeze lemon into your water at work, keep a chilled pitcher of lemon water in the fridge, and leave a glass of it by your bed, so you can drink some before you fall asleep and again when you wake up. Studies show that people who maintain more alkaline diets tend to lose weight the fastest.

AMP UP YOUR CARDIO

“I start most newbies who come to see me with an incline walk on the treadmill,” Ramsay says. “Start with 20 minutes, three times a week, and go up from there.” Do your training in the morning if you can, so you get it out of the way. “Boot camp classes and spin classes are also great options,” he says.

Or, if you prefer, focus on a single total-body exercise like the burpee. A YouTube search can show you the move with good form. “Try for 50 burpees—or 100—or whatever you can do, then up the number every workout so you’re always doing more than the session before,” he says.

CLEAN UP YOUR DIET

Most people know the basics: less soda, less sugar, and cut back your carb intake. Eliminating late-night meals and swapping in healthy options whenever possible, like for breakfast or your lunch at work, are easy ways to make a big difference without feeling too deprived. Whatever you do, avoid crash diets where you cut calories drastically. “I never recommend cutting calories by more than about 25% for somebody who is just starting a diet,” says Ramsay. When you try to make too dramatic a change, it’s far too hard to stick with long term.

RELAX AND RESTORE

Summer is a busy time; don’t run yourself ragged. “Make sure you’re getting enough sleep and allowing your muscles and joints time to repair,” Ramsay cautions. Get your stretching in. Visit the spa or schedule a massage every few weeks to help you unwind. “Getting fit isn’t just physical,” Ramsay explains. For any permanent change you want to make, it’s essential for your brain to be onboard with whatever your body is going through, he says. “That’s the only way you’re ever really going to end up looking and feeling your best, with a body you’re proud of,” he says.
OUT on the Hill
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facebook.com/NationalBlackJusticeCoalition
twitter.com/NBJContheMove
**The Next Battle in Our War for LGBT Equality:**
A look inside activist Michelangelo Signorile’s view of our future

*By Anne-christine d’Adesky*

**THE KING OF OUTING,** as some critics dubbed author, journalist, radio host, and activist Michelangelo Signorile in the late ‘90s, has never been shy about courting controversy. This spring, as the U.S. prepared for a potentially historic Supreme Court hearing on gay marriage, Signorile was busy doing media interviews for his latest book, *It’s Not Over: Getting Beyond Tolerance, Defeating Homophobia, and Winning True Equality*. The book is a well-organized, passionate call to arms against what Signorile describes as “victory blindness”—a condition affecting many of us in the wake of recent LGBT successes. That blindness prevents us from seeing the backlash that’s rising up against us, he warns, including a new, well-funded conservative ‘rebranding’ of the fight for equality.

Much of the evidence for Signorile’s argument comes from listeners of his daily SiriusXM radio show. “There’s a serious disconnect out there,” he says. “It’s really dangerous. I’ve found out from listeners that so many instances of discrimination are happening all the time. That’s the disconnect. And we’re missing it.” In his view, “We’ve made these huge wins—on marriage equality, increased visibility, cultural gains, but people are so focused on the victories that they’re almost intoxicated. We’ve been oppressed for so long that after a taste of victory, we can’t see what’s really going on.”

While Signorile is as thrilled as any other gay American about our victories, he’s begun documenting viewer calls about gay bashing, evictions, unfair job firings, transfobia, gay and trans teen suicides, and a larger constellation of homophobia, transphobia, and bigotry that permeates the country.

As more gay couples plan happy weddings, he argues, “It will become easier and easier to ignore this persistent physical and psychological violence, focusing on the big wins, telling ourselves it’s getting better—it’s gotten better—almost as a salve to that daily, cumulative, barrage of continuing injustice.”

**NOT EVERYONE AGREES.** Now that transgender actor Laverne Cox has graced the cover of *Time* magazine, and ESPN cameras captured NFL star Michael Sam’s happy smooch of his boyfriend to celebrate getting drafted, some pundits suggest the world has gone post-gay. Do we really need to even ask people about their sexuality anymore, they wonder? Should we care?

Absolutely, argues Signorile. In his view, ignoring the question is also a sign of homophobia—a lingering discomfort on the subject.

While many gay leaders have long argued against acts like outing, citing people’s right to come out at their own pace, Signorile still feels coming out, and forcing public figures out if necessary, is vital for equality to progress. It just helps to make society more aware, he says.

**"WE’VE BEEN OPPRESSED FOR SO LONG THAT AFTER A TASTE OF VICTORY, WE CAN’T SEE WHAT’S REALLY GOING ON."**
Anti-gay conservatives also still capture a lot of Signorile’s attention. He’s interviewed them on his radio show, gone to their rallies, and worries about just how successful they might be in the future. “Our enemies are rebranding themselves as victims who are being denied their religious freedom,” he warns. “We need to see this threat very clearly.”

While Signorile urges readers to take a chapter from other social movements, critics argue his views could delve deeper into the intersecting lines of race and class. In his book, he notes that 90% of LGBT homicide victims are people of color and transgender—an epidemic, he rightly concludes. He also shows great sensitivity to the nuances of gender within our community. But his arguments center on the battles of the gay movement in a broader sense and mostly on beltway politics and lobby groups. Experts still agree that the way forward for the LGBT movement, like the women’s movement, requires engaging deeply in national conversations about racial, financial, and gender inequality, too.

Looking ahead, Signorile’s biggest fear is a movement toward “incrementalism”—the tendency to push for small, manageable victories versus big, bold ones. That’s a costly mistake, he feels, citing gay marriage as a case in point. Many LGBT leaders found the idea outlandish until a grassroots movement pushed it forward. “We need federal protection and full equality. Nothing short of it will do,” he says. “We can’t celebrate and think it’s over. We can’t let down our guard.” Fighting words, indeed.

It’s hard to remember where she’s made the biggest impact: Goodfellas, Extra Virgin on the Cooking Channel, her hit TV Land series Younger with Hilary Duff, Dancing with the Stars, the legal drama Civil Wars, cameos on Friends and Ugly Betty; cameos in five Madonna music videos…the list goes on and on. What is clear is that when it comes to this multi-talented star, her passion for life (and for making a difference) knows no bounds.

1. Born in Jamaica, Queens, NY, in 1964, Debi says she’s been a “friend of the family” for as long as she can remember: “My mother has been swinging that rainbow flag since I was a child,” she laughs. “You have to understand that I’m a New Yorker, first and foremost. My mother had me at 16. Growing up, it was always her and the queens. Her and the queens going to Puerto Rico, her and the queens going to the city, her and the queens going to the club—going to the disco! I grew up with dancers and artists; I grew up around a very gay community.”

2. Her career has had ups and downs, but she loves every part of it: “I’ve had so many jobs getting to this point. As we grow, we discover—we take jobs for survival; we take jobs because we want to try something different. But with every job I’ve had, I make the most of it. One of my very first jobs was as a dental assistant. I knew it wasn’t going to be my career, but I went to work and I enjoyed my co-workers. It didn’t last very long because it wasn’t meant for me, but I’ve always tried to enjoy everything I’ve ever done—and I’ve had some really shitty jobs and some really horrible bosses.”

3. One of her biggest successes came from taking a gamble on something she believed in: “I’m a person who doesn’t like to wait around in between gigs. A few years ago, I went to Tuscany and met a man and we fell in love. He knew how to cook, and I love food, so we created a blog together called Under the Tuscan Gun. By accident, it became really successful. We had no PR. Nobody was helping us. It was just organic. And out of nowhere, Cooking Channel was like, ‘Hey! Would you like to bring your blog to life on a TV series with us?’ And that gave me an opportunity to produce, direct, write, act, create comedy...and eat! Life takes you in directions and I just try to stay open minded and see where it leads.”

4. Like a lot of us, she might wonder, “What would Madonna do?”—only, after a 30 year friendship, she actually knows the answer. “As much as I look up to her and am inspired by her work, we’ve always been a pair of Leos—we keep it real. At the end of the day, she’s normal, vulnerable, and as strong as everybody wants to believe. She gets all this hate directed at her, yet somehow she powers through it. And she comes out stronger for it. She gets so much abuse on a daily basis—people wanna rip her apart for her age or whatever, and she’s like “Fuck you all, I look great. I’m gonna do what I want!” She can outrun or outdo anybody. Physically. Mentally. I still admire that. Like, when I’m about to get on the treadmill, or when I’m trying to burn off the Tuscan food I’ve been eating and I don’t feel like doing it, I’m like, “But Madonna would. Stay with
THE FIRST TIME...
SANDRA BERNHARD

From her ground-breaking role as the lesbian best friend on Roseanne, to her smash-hit one-woman off-Broadway show Without You I’m Nothing, with You I’m Not Much Better, Sandra Bernhard has always been one of Pride Life’s first loves. So when we got her on the phone recently, we couldn’t help but ask about the most significant firsts in her own notorious career. To see her in person, head to New Orleans on June 20 or Fire Island on August 15.

Can you tell us about your first gay club?
“I spent my entire first summer in L.A. in 1974 at Studio One. That was the big gay disco there at the time. We’d go dancing every night. I was 19. I had a fake ID that I’d made myself from my Arizona driver’s license.”

First car?
“It was my great-aunt’s car. It was a Dodge Polara. It had a push-button gear shift. I think it was one of the only cars that ever had one. It was aqua blue and was actually pretty groovy—I kind of wish I still had it.”

First job before you were famous?
“I was a manicurist in Beverly Hills for about five and a half years. It was really the only job I had before comedy. Dyan Cannon came in once and I got to do her nails. Victoria Principal came in a few times, too. I had a big crush on her at the time, and she was super sweet and fabulous and a real ‘star.’ It was just fun to be around people like that, at that time in the seventies in Beverly Hills. It was such a glamorous time.”

Do you remember your first time on stage?
“It was a showcase at a place called Ye Little Club in Beverly Hills. The crowd was fantastic. My act was totally together. I was wearing safari shorts and a safari jacket and lace-up espadrilles. I remember it very clearly because that’s where I met my two mentors, Paul Mooney and Lotus Weinstock, who were established comedians at the time. They kind of took me under their tutelage and guided me along in my career. They really helped me.”

First time you felt like you’d really made it?
“I’ve felt it at different junctures throughout my career. The first time was back in the 1970s when I did the Richard Pryor Show. As soon as I could leave manicuring behind, I felt successful. There are bigger moments in your career and moments where you feel like you’re just sustaining. But once you’re at a certain point, I think you always feel like, ‘Well, I’ve established myself.’ That’s what you’re after.”

First big purchase as a “celebrity”?
“I bought my house in L.A. in 1986 after I did the Richard Pryor Show. As soon as I could leave manicuring behind, I felt successful. There are bigger moments in your career and moments where you feel like you’re just sustaining. But once you’re at a certain point, I think you always feel like, ‘Well, I’ve established myself.’ That’s what you’re after.”

Your most famous role may be as Nancy Bartlett on Roseanne. What was your first meeting with her like?
“I’d met Roseanne and Tom Arnold at our agent’s house. She introduced us—that’s really how it was done back then. That’s how you got the bigger roles—knowing people. They called me out of the clear blue two weeks later and said they’d love for me to come on the show. And it worked.”

The first gay couple in recorded history lived in Ancient Egypt in the year 2400 B.C.
1. She’s a self-proclaimed accidental activist specializing in gender discombobulation

Born Rory O’Neil in Ballinrobe, Ireland, Panti Bliss has been interested in the fight for equality for as long as she can remember. “I’ve always been stubborn and willful,” says Bliss. “I’m the child of two principled parents who have never been afraid to stand up and call out what they see as unfairness, and some of that rubbed off on me. As Rory, I’m quite reserved, but drag gives me a kind of armor from behind which I feel more comfortable being the focus of attention. In a way it also amplifies my voice. People pay more attention to an annoying 6’6” colorful drag queen than they do to an annoying 6’ brown-haired guy in a shirt. Though of course as a 20-year-old drag queen I was more interested in the free drinks and the boys than I was in changing the world...”

2. Her rise to national fame in Ireland included a scandal known around the country as “Pantigate”

In early 2014, Panti was appearing on a local Irish talk show and suggested certain members of the Irish media were homophobic. The journalists she mentioned claimed defamation and threatened legal action. The network that broadcast the program eventually caved, paying out large sums to the affected parties—and triggering a national debate over free speech that spread all the way to parliament. As the controversy over Pantigate began to subside, Ireland’s vote for the legalization of marriage equality was heating up, and Panti began speaking out on the subject and fighting for its passage, becoming a face of the movement in the process.

3. Her “Noble Call” speech given at the time of the controversy became a viral phenomenon and is considered by many to be one of the best speeches on equality given in the last 20 years

In a YouTube clip watched nearly 750,000 times, Panti gives an impassioned 10-minute speech on the impact day-to-day homophobia has on the lives of LGBT men and women. The notoriety the speech took on was a surprise to everyone, including Panti herself. “I had absolutely no expectations of that speech,” she says. “As far as I was concerned, the 500 people in the auditorium that night were the only ones who would ever hear it,” she says. “If I’d known how many people would eventually watch it, I would’ve brushed by fucking hair!”

4. When she’s not on the road making speeches, you can find her at her Irish club called, appropriately enough, Pantibar

“I’ve had the bar for eight years. I’d imagined myself growing disgracefully old there, hanging out behind the bar making a fool of myself over hot Brazilian boys and pulling pints for the gays. Only the hot Brazilian boys now work behind the bar, so hitting on them would be called workplace sexual harassment—and I ain’t ruining my nails by pulling pints!”

5. Her drag inspiration is a mash-up of Dolly and The Dowager.

“I don’t really “channel” any particular artists, though I am a big Dolly Parton fan,” she says. “My biggest drag influence is the 1969 movie The Prime of Miss Jean Brodie, starring Maggie Smith. I know! I can hear the younger gays scratching their heads. Sheesh! Download it, kids!”

6. She once appeared on Maury Povich, way back in 1998

“I got an e-mail from the Maury Povich Show,” she remembers. “They were looking for men who lived as women to go on the show with a family member for a ‘back to boy makeover.’ That night I was in the pub and told my friend Katherine about it, and she said, “I should pretend to be your sister so we can get a free trip to New York out of this!” I was young and broke, and it sounded like fun, so we did it. This was before YouTube and Maury wasn’t shown in Ireland at the time, so we thought nobody we knew would ever see it!”

7. She’s single. And looking...

“It’s a goddamn crime!” she says when asked why there’s no man currently in her life. “I think part of the problem is that I’m a national fucking treasure, and nobody wants to fuck a national treasure. I think they think it’d be like masturbating on Mount Rushmore! But I live in hope. I live in hope of a mocha-skinned well-endowed top coming along. But don’t we all...”

“In itself, homosexuality is as limiting as heterosexuality: the ideal should be to be capable of loving a woman or a man; either, a human being, without feeling fear, restraint, or obligation.”

— SIMONE DE BEAUVIOR, FRENCH AUTHOR AND PHILOSOPHER
YOUR SUMMER READING LIST

Tired of formulaic bestsellers and trashy tabloids? Next time you feel like hiding within the pages of a good read, grab one of these 10 titles selected especially for us by a few of the volunteers working at Giovanni’s Room, in Philadelphia—one of America’s first and oldest LGBT bookshops.

LANCE WAHLERT’S PICK:

STONE BUTCH BLUES: A NOVEL
BY LESLIE FEINBERG

Stone Butch Blues is the story of Jess Goldberg and his life growing up in a blue-collar town in the ’50s. Born a girl, Goldberg knows he is different from those around him and decides his only option is to live as the man he was meant to be, regardless of the consequences.

“Rightfully considered one of the most canonical novels ever on transgender personhood, this is also one of the savviest books ever written on the subject,” Wahlert says. It details what it is like to undertake such a change, and explains why it must be done.

SKIP STRICTLER’S PICKS:

ARCTIC SUMMER
BY DAMON GALGUT

A fictionalized biography of English author E.M. Forster and his years spent writing the masterpiece A Passage to India, Arctic Summer shifts seamlessly between scenes of intense humor and strange, foreign landscapes.

“The book also provides...
an incredible glimpse of Forster’s life with his one true love, a lowly tram conductor in Alexandria, and their intense lifelong commitment to each other,” Strictler says.

THE INDIAN CLERK: WA NOVEL BY DAVID LEAVITT

One of 2008’s most critically acclaimed novels, The Indian Clerk appeared on numerous bestseller lists and received dazzling reviews from dozens of critics. If you missed it then, it’s time to rediscover this real-life story about a British mathematician on the verge of proving a confounding hypothesis and an unknown (and unschooled) math genius, who ultimately becomes his lover. Despite the subject matter, which could be incredibly dull in the hands of a less talented writer’s hands, the book’s profound and absorbing tone, pacing, and story matter draw in Strictler, who is one among many who rave about this candid novel.

CARLY SEWELL’S PICKS:

CRUSH
BY RICHARD SIKEN

Winner of the 2004 Yale Series of Younger Poets prize, Crush is a masterful collection of poetry focusing on obsession and love. “Crush is a darkly intimate book that is truly spellbinding,” explains Weinberg. “Siken evokes a sense of urgency with his writing that makes it impossible to put down.”

THE AUTOBIOGRAPHY OF ALICE B. TOKLAS
BY GERTRUDE STEIN

One of the most popular, influential—and hotly debated—works by legendary novelist Gertrude Stein, Autobiography should be required reading for those curious about this talented writer living in early-twentieth-century Paris. Considered a joke by some, or an example of her literary genius by others, the tales detail Stein’s twenty-plus year romance with Alice B. Toklas. “Between anecdotes of her experiences meeting Matisse and Picasso and escaping the dangers of World War I, the shrewdly constructed novel speaks volumes about love, marriage, and the reality of the world Stein was inhabiting,” says Sewell.

THE SWIMMING-POOL LIBRARY
BY ALAN HOLLINGHURST

The sprawling story of the friendship between a young gay aristocrat and an elderly British Lord, The Swimming-Pool Library has been called witty, fascinating, and darkly erotic. “It’s a vivid novel with an incredibly large cast of characters,” says Weinberg. “I became very attached to—and enthralled by—the smart, privileged central character, Will Beckwith. He has high social status, endless curiosity, and democratic sexual appetite; and the story he gets involved with is complicated, intellectual... and sexy as all get-out.”

CHECK IT OUT FOR YOURSELF

Philly AIDS Thrift @ Giovanni’s Room is located at 345 South 12 Street in Philadelphia. The shop was founded in 1973 at the dawn of the LGBT movement. Today, it stocks more than 7,000 titles and has a database of more than 40,000 titles available for order. A site on the historical registry, the original bookstore closed briefly in 2014 but re-opened a few months later in a partnership with Philly AIDS Thrift, a nonprofit organization dedicated to fighting the spread of HIV and AIDS throughout the region. For more info go to phillyaidsthrift.com.
At tonight’s meeting, the theme is treatment for the disease. Most in attendance have been subjected to an endless array of medications, hoping that each time a biotech firm makes available a “breakthrough” pill, their lives will change for the better. Shared stories about the ravages of the disease are often surpassed by the rigors of simply trying to stay alive. The names assigned to the comments that follow are fictional, but the experiences each has undergone are anything but...

**CONFUSION** As the night starts, Carl starts out by describing his routine. “For several years, I’ve been taking pills three times a day. The first one requires fasting.”

“I also take several pills a day, some for HIV and some for related complications,” Juan adds. “An HIV pill can cause a condition that will necessitate another pill. And then another complication means another pill. It multiplies. Side effects come and go for no reason. You never know how long they’ll last or what to keep taking. And your doctor keeps giving you meds for each new thing.”

“I used to have to take seven pills a day,” says Ben. “Now I’m down to two. One of them needs to be taken with at least a 400-calorie meal.”

“I take the same medication as you, but I didn’t know that the meal had to be 400 calories.” “I was told that the meal must contain a high level of fat, so I take it with a peanut butter shake.”

“I thought the instructions said 450 calories?” says Ichiro. “And shakes don’t count! I take three pills, sometimes without food or water. I told my doctor and he said, ‘Yes, some people can do this.’”

**COMMITMENT** Even when doctors seem to be giving conflicting directions, the real test of meds is the result. Uncertainty is OK when it means survival.

“I take about 80 pills a day and that includes four HIV pills,” says Madelyn. “I miss once or twice a month. I’m not such a stickler anymore. When I hit the ten-year HIV mark, I eased up on myself.” “When I had to take 7 pills a day, I missed a lot of them,” Bruce remembered. “Since November, I’m down to two a day, and I do much better.”

“My doctor told me that my meds have a half-life of 48 hours,” says Lonnie. “If I miss one day, I don’t freak out. It’s still in my system.”
“I keep a small silver vial in my car,” Austin describes of his strategy. “It can be worn on a chain and contains one dose of my pills, so if I end up out overnight, I don’t miss my treatment.”

**COMPLICATIONS** “My pills usually make me sick,” says Martin with a sigh. “If I drink, it’s even worse. I can’t keep anything down.”

“I have memory issues because of my HIV, so no matter what I set up, I can’t always remember whether or not I took my pills, even when I look at the container,” Frank adds.

“When I started on pills, I read everything I could find describing all the possible side effects,” Scott says. “I was obsessive about knowing everything about my pills. Those days are over.”

“I used to have serious resentment to the reactions, especially transitioning to AZT,” says Harry. “There were times when I would be at work and the meds made me crap in my pants. Other times when I bled from the rectum. Those early meds were terrible.”

From the back of the room, Jason pipes up: “I’m newly diagnosed. I’ve only been on my meds for a month. If I miss a dose, I freak out and start calling people for advice. Is that normal?”

“Don’t worry about it,” Juan assures. “Your worrying will be worse for you than missing that pill.”

**STRATEGIES** “I never took pills before I had HIV,” Scott says. Tweaking my schedule made things easier.”

“What works for me is keeping my meds in the bathroom on the toilet tank,” says Davis. “I take a pill and turn the bottle upside down. At the end of the day, I know if I forgot one.”

Juan agrees: “It becomes part of your life. You move forward.”

“If you had told me everything that was involved when I first became HIV+, I would have broken down and cried,” Scott continues. “Facing the fact of taking these goddamn pills forever, it took me a year or two to accept it. Maybe I blamed myself for being HIV+ and wanted the pills to go away. They were like a punishment that never ends. That’s why I take my meds as soon as I wake up. It’s not what my doctor advises, but it lets me go through the day without thinking about it.”

**LIST OF NATIONAL HIV RESOURCES**

- AIDS.gov
- American Foundation for Aids Research amfar.org
- CDC NATIONAL AIDS HOTLINE 1-800-CDC-INFO
- CDC BUSINESS AND LABOR RESOURCE SERVICE 1-877-242-9760
- CDC NATIONAL AIDS CLEARINGHOUSE 1-800-458-5231
- U.S. Department of Health and Human Services aids.nim.nih.gov
- The Mayo Clinic mayoclinic.org
- Project Inform projectinform.org

“I don’t know how to overcome pill-fatigue,” says Martin. “I take 35 pills a day in two doses. Plus, I have to take cholesterol and blood pressure meds. It’s not just taking them all; it’s making sure you can pay for them. Dealing with an insurance company that isn’t always helpful... Some people talk about pill fatigue. That’s my pill-fatigue.”

**A LIFE SENTENCE** “Many years ago, I took 13 months off,” says Madelyn. “Eventually my numbers got bad. It took me over a year to get stable again.”

“I once took three months off,” says Billy. “My numbers got bad right away. When my doctor found out, he was really pissed. That was 28 years ago. All around you, men were dying. It was easier, really: Take it or die.”

“I used to take three-month holidays,” says Madelyn. “I did what I wanted to do. But for the last 15 years, I stopped that. I wouldn’t mind a holiday right now.” Her laugh is anything but genuine.

“One of the reasons I first came here is because I needed to be with others who were going through all this,” says Carlos. “Now many of us are becoming older and we have additional chronic illnesses. This is something we didn’t think about, but it has become part of our lives.”

**HOPE** After sitting silently in the room for more than an hour, and listening to the stories of the incredible men and women around me, I ask them if they’ve come to accept life with the disease. There’s head nodding and more than a couple of sighs. Many are grateful to have simply survived the ‘80s when the meds were terrifying and treatments involved upwards of 40 pills a day. There were expressions of thankfulness.

“And what about the future?” I ask. For the first time all night, the group falls silent. This final question cuts deeply—and painfully—into the heart of an HIV+ person, I later realize. Voices quaver. Eyes shift around the room. The gladiators are tired. But they haven’t given up. Some talk of treatments in development; others say they don’t expect to be set free in this life. But whatever happens, the room is in complete agreement: They will continue to do whatever it takes to fight the virus and the side-effects of the very meds they need to stay alive another day.
TRIUMEQ is a once-a-day pill used to treat HIV-1. TRIUMEQ should not be used by itself in some people. Take TRIUMEQ exactly as your healthcare provider tells you.

Is it time for you? Ask your doctor.

APPROVED USES

TRIUMEQ is a prescription medicine used to treat Human Immunodeficiency Virus-1 (HIV-1) infection in adults. HIV-1 is the virus that causes AIDS. It is not known if TRIUMEQ is safe or effective in children under the age of 18. TRIUMEQ is not for use by itself in people who have or have had resistance to abacavir, dolutegravir, or lamivudine.

TRIUMEQ does not cure HIV-1 or AIDS. You must stay on continuous HIV-1 therapy to control HIV-1 infection and decrease HIV-related illness.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about TRIUMEQ?

- Serious allergic reaction (hypersensitivity reaction). TRIUMEQ contains abacavir. Patients taking TRIUMEQ may have a serious allergic reaction to abacavir that can cause death. Your risk is much higher if you have a gene variation called HLA-B*5701. Your healthcare provider can determine with a blood test if you have this gene variation. If you get symptoms from 2 or more of the following groups while taking TRIUMEQ, call your healthcare provider right away: 1. fever; 2. rash; 3. nausea, vomiting, diarrhea, or stomach pain; 4. generally ill feeling, extreme tiredness, or achiness; 5. shortness of breath, cough, or sore throat. Your pharmacist will give you a Warning Card with a list of these symptoms. Carry this Warning Card with you at all times.

If you stop taking TRIUMEQ because of an allergic reaction, never take TRIUMEQ or any other medicine that contains abacavir or dolutegravir again. If you take TRIUMEQ or any other abacavir-containing medicine again after you have had an allergic reaction, within hours you may get life-threatening symptoms that may include very low blood pressure or death. If you stop TRIUMEQ for any other reason, even for a few days, and you are not allergic to TRIUMEQ, talk with your healthcare provider before taking it again. Taking TRIUMEQ again can cause a serious allergic or life-threatening reaction, even if you never had an allergic reaction to it before. If your healthcare provider tells you that you can take TRIUMEQ again, start taking it when you are around medical help or people who can call a healthcare provider if you need one.

- A buildup of acid in your blood (lactic acidosis). Lactic acidosis can happen in some people who take TRIUMEQ. This serious medical emergency can cause death. Call your healthcare provider right away if you feel very weak or tired; have unusual muscle pain; have trouble breathing; have stomach pain with nausea and vomiting; feel cold, especially in your arms and legs; feel dizzy/light-headed; or have a fast/irregular heartbeat.

- Severe liver problems. Severe liver problems can happen in people who take TRIUMEQ. In some cases, these severe liver problems can lead to death. You may be more likely to get lactic acidosis or serious liver problems if you are female, very overweight, or have been taking nucleoside analogue medicines for a long time. Call your healthcare provider right away if you get any of the following signs or symptoms:
  - yellow skin, or the white part of the eyes turns yellow; dark urine; light-colored stools; nausea; itching; or stomach-area pain.
  - Worsening of hepatitis B virus in people who have HIV-1 infection. If you have HIV-1 and hepatitis B virus infections, your hepatitis virus infection may get worse if you stop taking TRIUMEQ. Do not stop taking TRIUMEQ without first talking to your healthcare provider, so he or she can monitor your health.
  - Resistant hepatitis B virus. If you have HIV-1 and hepatitis B, the hepatitis B virus can change (mutate) during your treatment with TRIUMEQ and become harder to treat (resistant).

Who should not take TRIUMEQ?

- Do not take TRIUMEQ if you:
  - have the HLA-B*5701 gene variation
  - have ever had an allergic reaction to abacavir, dolutegravir, or lamivudine
  - take dofetilide (Tikosyn®)
  - have certain liver problems

What are other possible side effects of TRIUMEQ?

- People with a history of hepatitis B or C virus may have an increased risk of developing new or worsening changes in certain liver tests during treatment with TRIUMEQ. Your healthcare provider may do tests to check your liver function before and during treatment with TRIUMEQ.

- When you start taking HIV-1 medicines, your immune system may get stronger and begin to fight infections that have been hidden in your body for a long time. Tell your healthcare provider right away if you start having new symptoms after starting your HIV-1 medicine.

- Changes in body fat can happen in people who take HIV-1 medicines.

- Some HIV-1 medicines, including TRIUMEQ, may increase your risk of heart attack.

The most common side effects of TRIUMEQ include: trouble sleeping, headache, and tiredness.

These are not all the possible side effects of TRIUMEQ. Tell your healthcare provider if you have any side effect that bothers you or that does not go away.

Important Safety Information continued on next page.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088. Please see brief summary of Prescribing Information for TRIUMEQ on the following pages.

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What should I tell my healthcare provider before taking TRIUMEQ?

- **Before you take TRIUMEQ**, tell your healthcare provider if you:
  - have been tested and know whether or not you have a gene variation called HLA-B*5701.
  - have or had liver problems, including hepatitis B or C infection; have kidney problems; have heart problems, smoke, or have diseases that increase your risk of heart disease such as high blood pressure, high cholesterol, or diabetes; drink alcoholic beverages; or have any other medical condition.
  - are pregnant or plan to become pregnant. It is not known if TRIUMEQ will harm your unborn baby.
  - are breastfeeding or plan to breastfeed. Do not breastfeed if you take TRIUMEQ.

- **You should not take TRIUMEQ** if you also take:
  - abacavir (EPZICOM, TRIZIVIR, or ZIAGEN)
  - lamivudine (COMBIVIR®, EPIVIR, EPIVIR-HBV®, EPZICOM, or TRIZIVIR)
  - emtricitabine (EMTRIVA®, ATRIPLA®, COMPLERA®, STRIBILD®, TRUVADA®)

- **Tell your healthcare provider about all the medicines you take**, including prescription and nonprescription medicines (for example, antacids; laxatives; vitamins such as iron or calcium supplements; anti-seizure medicines; other medicines to treat HIV-1, hepatitis, or tuberculosis; metformin; and methadone) and herbal supplements (for example, St. John's wort). TRIUMEQ may affect the way they work, and they may affect how TRIUMEQ works.

Not an actual patient. Testimonial is based on a collection of real patient experiences.
BRIEF SUMMARY
TRIUMEQ® (TRI-u-meck)
(abacavir 600 mg/dolutegravir 50 mg/lamivudine 300 mg) tablets
Read this Medication Guide before you start taking TRIUMEQ and each time you get a refill. There may be new information. This information does not take the place of talking to your healthcare provider about your medical condition or your treatment. Be sure to carry your TRIUMEQ Warning Card with you at all times.

What is the most important information I should know about TRIUMEQ?
• Serious allergic reaction (hypersensitivity reaction). TRIUMEQ contains abacavir (also contained in EPZICOM®, TRIZIVIR®, and ZIAGEN®). Patients taking TRIUMEQ may have a serious allergic reaction (hypersensitivity reaction) that can cause death. Your risk of this allergic reaction to abacavir is much higher if you have a gene variation called HLA-B*5701. Your healthcare provider can determine with a blood test if you have this gene variation.

If you get a symptom from 2 or more of the following groups while taking TRIUMEQ, call your healthcare provider right away to find out if you should stop taking TRIUMEQ.

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<th>Group 1</th>
<th>Fever</th>
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<td>Group 2</td>
<td>Rash</td>
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<td>Group 3</td>
<td>Nausea, vomiting, diarrhea, abdominal (stomach area) pain</td>
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<tr>
<td>Group 4</td>
<td>Generally ill feeling, extreme tiredness, or achiness</td>
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<td>Group 5</td>
<td>Shortness of breath, cough, sore throat</td>
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A list of these symptoms is on the Warning Card your pharmacist gives you. Carry this Warning Card with you at all times.

If you stop TRIUMEQ because of an allergic reaction, never take TRIUMEQ or any other medicines that contain abacavir or dolutegravir (EPZICOM, ZIAGEN, TRIZIVIR, or TIVICAY®) again. If you take TRIUMEQ or any other abacavir-containing medicine again after you have had an allergic reaction, within hours you may get life-threatening symptoms that may include very low blood pressure or death. If you stop TRIUMEQ for any other reason, even for a few days, and you are not allergic to TRIUMEQ, talk with your healthcare provider before taking it again. Taking TRIUMEQ again can cause a serious allergic or life-threatening reaction, even if you never had an allergic reaction to it before.

If your healthcare provider tells you that you can take TRIUMEQ again, start taking it when you are around medical help or people who can call a healthcare provider if you need one.

• Build-up of acid in your blood (lactic acidosis). Lactic acidosis can happen in some people who take TRIUMEQ. Lactic acidosis is a serious medical emergency that can lead to death. Lactic acidosis can be hard to identify early, because the symptoms could seem like symptoms of other health problems. Call your healthcare provider right away if you get the following symptoms that could be signs of lactic acidosis:
  • feel very weak or tired
  • have unusual (not normal) muscle pain
  • have trouble breathing
  • have stomach pain with nausea and vomiting
  • feel cold, especially in your arms and legs
  • feel dizzy or light-headed
  • have a fast or irregular heartbeat

• Severe liver problems. Severe liver problems can happen in people who take TRIUMEQ. In some cases these severe liver problems can lead to death. Your liver may become large (hepatomegaly) and you may develop fat in your liver (steatosis).

Call your healthcare provider right away if you get any of the following signs or symptoms of liver problems:
  • your skin or the white part of your eyes turns yellow
  • dark “tea-colored” urine
  • light colored stools (bowel movements)
  • nausea
  • itching
  • stomach-area pain

You may be more likely to get lactic acidosis or serious liver problems if you are female, very overweight, or have been taking nucleoside analogue medicines for a long time.

• Worsening of hepatitis B virus in people who have HIV-1 infection. If you have HIV-1 and hepatitis B virus infections, your hepatitis virus infection may get worse if you stop taking TRIUMEQ. To help avoid this: Take TRIUMEQ exactly as prescribed:
  • Do not run out of TRIUMEQ.
  • Do not stop TRIUMEQ without talking to your healthcare provider.
  • Your healthcare provider should monitor your health and do regular blood tests to check your liver for at least several months if you stop taking TRIUMEQ.

• Resistant Hepatitis B Virus (HBV). If you have HIV-1 and hepatitis B, the hepatitis B virus can change (mutate) during your treatment with TRIUMEQ and become harder to treat (resistant).

• Use with interferon and ribavirin-based regimens. Worsening of liver disease has happened in people infected with HIV-1 and hepatitis C virus who are taking anti-HIV medicines and are also being treated for hepatitis C with interferon with or without ribavirin. If you are taking TRIUMEQ and interferon with or without ribavirin, tell your healthcare provider if you have any new symptoms.

What is TRIUMEQ?
TRIUMEQ is a prescription medicine used to treat HIV-1 (Human Immunodeficiency Virus-type 1) infection. TRIUMEQ contains 3 prescription medicines: abacavir (ZIAGEN), dolutegravir (TIVICAY), and lamivudine (EPVIR®).

• TRIUMEQ is not for use by itself in people who have or have had resistance to abacavir, dolutegravir, or lamivudine.

It is not known if TRIUMEQ is safe and effective in children.

TRIUMEQ may help:
  • reduce the amount of HIV-1 in your blood. This is called “viral load”.
  • increase the number of white blood cells called CD4+ (T) cells in your blood, which help fight off other infections.

Reducing the amount of HIV-1 and increasing the CD4+ (T) cells in your blood may help improve your immune system. This may reduce your risk of death or getting infections that can happen when your immune system is weak (opportunistic infections).

TRIUMEQ does not cure HIV-1 infection or AIDS. You must stay on continuous HIV-1 therapy to control HIV-1 infection and decrease HIV-related illnesses.

Avoid doing things that can spread HIV-1 infection to others.
  • Do not share or re-use needles or other injection equipment.
  • Do not share personal items that can have blood or body fluids on them, like toothbrushes and razor blades.
  • Do not have any kind of sex without protection. Always practice safer sex by using a latex or polyurethane condom to lower the chance of sexual contact with semen, vaginal secretions, or blood.

Ask your healthcare provider if you have any questions about how to prevent passing HIV to other people.

(continued on the next page)
Who should not take TRIUMEQ?

Do not take TRIUMEQ if you:

- have a certain type of gene variation called the HLA-B*5701 allele. Your healthcare provider will test you for this before prescribing treatment with TRIUMEQ.
- have ever had an allergic reaction to abacavir, dolutegravir, or lamivudine
- take dofetilide (TIKOSYN™). Taking TRIUMEQ and dofetilide (TIKOSYN) can cause side effects that may be life-threatening.
- have liver problems

What should I tell my healthcare provider before taking TRIUMEQ?

Before you take TRIUMEQ, tell your healthcare provider if you:

- have been tested and know whether or not you have a particular gene variation called HLA-B*5701
- have or had liver problems, including hepatitis B or C virus infection
- have kidney problems
- have heart problems, smoke, or have diseases that increase your risk of heart disease such as high blood pressure, high cholesterol, or diabetes
- drink alcoholic beverages
- have any other medical condition
- are pregnant or plan to become pregnant. It is not known if TRIUMEQ will harm your unborn baby. Tell your healthcare provider if you become pregnant while taking TRIUMEQ.

Pregnancy Registry. There is a pregnancy registry for women who take antiviral medicines during pregnancy. The purpose of the registry is to collect information about the health of you and your baby. Talk to your healthcare provider about how you can take part in this registry.

- are breastfeeding or plan to breastfeed. Do not breastfeed if you take TRIUMEQ. You should not breastfeed because of the risk of passing HIV-1 to your baby. It is not known if abacavir or dolutegravir passes into your breast milk. Lamivudine can pass into your breast milk and may harm your baby. Talk to your healthcare provider about the best way to feed your baby.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. TRIUMEQ may affect the way other medicines work, and other medicines may affect how TRIUMEQ works.

You should not take TRIUMEQ if you also take:

- abacavir (EPZICOM, TRIZIVIR, or ZiAGEN)
- lamivudine (COMBIVIR®, EPIVIR, EPIVIR-HBV®, EPZICOM, or TRIZIVIR)
- emtricitabine (EMTRIVA®, ATRIPLA®, COMPLERA®, STRIBILD®, TRUVADA®)

Tell your healthcare provider if you take:

- antacids, laxatives, or other medicines that contain aluminum, magnesium, or calcium (CARAFATE®), or buffered medicines. TRIUMEQ should be taken at least 2 hours before or 6 hours after you take these medicines.
- anti-seizure medicines:
  - oxcarbazepine (TRILEPTAL®)
  - phenytoin (DILANTIN®, DILANTIN®-125, PHENYTEK®)
  - phenobarbital
- carbamazepine (CARBATROL®, EQUETRO®, TEGRETOL®, TEGRETOL®-XR, TERIL®, EPITOL®)
- any other medicine to treat HIV-1
- iron or calcium supplements taken by mouth. Supplements containing calcium or iron may be taken at the same time with TRIUMEQ if taken with food. Otherwise, TRIUMEQ should be taken at least 2 hours before or 6 hours after you take these medicines.
- medicines used to treat hepatitis virus infections, such as interferon or ribavirin
- a medicine that contains metformin
- methadone
- rifampin (RIFATER®, RIFAMATE®, RIMACTANE®, RIFADIN®)
- St. John’s wort (Hypericum perforatum)

Know the medicines you take. Keep a list of your medicines with you to show to your healthcare provider and pharmacist when you get a new medicine. Ask your healthcare provider or pharmacist if you are not sure if you take one of the medicines listed above.

How should I take TRIUMEQ?

- Take TRIUMEQ exactly as your healthcare provider tells you.
- Do not change your dose or stop taking TRIUMEQ without talking with your healthcare provider.
- Stay under the care of a healthcare provider while taking TRIUMEQ.
- You can take TRIUMEQ with or without food.
- If you miss a dose of TRIUMEQ, take it as soon as you remember. If it is within 4 hours of your next dose, skip the missed dose and take the next dose at your regular time. Do not take 2 doses at the same time. If you are not sure about your dosing, call your healthcare provider.
- Do not run out of TRIUMEQ. The virus in your blood may become resistant to other HIV-1 medicines if TRIUMEQ is stopped for even a short time. When your supply starts to run low, get more from your healthcare provider or pharmacy.
- If you take too much TRIUMEQ, call your healthcare provider or go to the nearest hospital emergency room right away.

What are the possible side effects of TRIUMEQ?

TRIUMEQ can cause serious side effects including:

- See “What is the most important information I should know about TRIUMEQ?”
- Changes in liver tests. People with a history of hepatitis B or C virus may have an increased risk of developing new or worsening changes in certain liver tests during treatment with TRIUMEQ. Your healthcare provider may do tests to check your liver function before and during treatment with TRIUMEQ.
- Changes in your immune system (Immune Reconstitution Syndrome) can happen when you start taking HIV-1 medicines. Your immune system may get stronger and begin to fight infections that have been hidden in your body for a long time. Tell your healthcare provider right away if you start having new symptoms after starting your HIV-1 medicine.
- Changes in body fat (fat redistribution) can happen in people who take HIV-1 medicines. These changes may include increased amount of fat in the upper back and neck (“buffalo hump”), breast, and around the middle of your body (trunk). Loss of fat from the legs, arms, and face may also happen. The exact cause and long-term health effects of these problems are not known.
- Heart attack (myocardial infarction). Some HIV medicines including TRIUMEQ may increase your risk of heart attack.

The most common side effects of TRIUMEQ include:

- trouble sleeping
- headache
- tiredness

Tell your healthcare provider if you have any side effect that bothers you or that does not go away.

These are not all the possible side effects of TRIUMEQ. For more information, ask your healthcare provider or pharmacist.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

(continued on the next page)
BRIEF SUMMARY (cont’d)

TRIUMEQ® (abacavir, dolutegravir, and lamivudine) tablets

How should I store TRIUMEQ?
- Store TRIUMEQ at room temperature between 68°F to 77°F (20°C to 25°C).
- Store TRIUMEQ in the original bottle.
- Keep the bottle of TRIUMEQ tightly closed and protect from moisture.
- The bottle of TRIUMEQ contains a desiccant packet to help keep your medicine dry (protect it from moisture). Keep the desiccant packet in the bottle. Do not remove the desiccant packet.

Keep TRIUMEQ and all medicines out of the reach of children.
General information about the safe and effective use of TRIUMEQ
Medicines are sometimes prescribed for purposes other than those listed in a Medication Guide. Do not use TRIUMEQ for a condition for which it was not prescribed. Do not give TRIUMEQ to other people, even if they have the same symptoms that you have. It may harm them.

This Medication Guide summarizes the most important information about TRIUMEQ. If you would like more information, talk with your healthcare provider. You can ask your healthcare provider or pharmacist for information about TRIUMEQ that is written for health professionals.

For more information go to www.TRIUMEQ.com or call 1-877-844-8872.

What are the ingredients in TRIUMEQ?
Active ingredients: abacavir, dolutegravir, and lamivudine
Inactive ingredients: D-mannitol, magnesium stearate, microcrystalline cellulose, povidone, and sodium starch glycolate. The tablet film-coating contains iron oxide black, iron oxide red, macrogol/PEG, polyvinyl alcohol—part hydrolyzed, talc, and titanium oxide.

THE STIGMA OF HIV

Even within the LGBT community, bias against HIV individuals runs rampant. Here’s what you can do to help stop it.

By JOSE LYON
It’s been six weeks since Brandon broke up with his boyfriend... and he’s hornier than he can ever remember in his 26 years on the planet. It’s already 2 o’clock in the morning and the bars are closing, so he reaches for his phone and that far-too-familiar yellow-and-black Grindr icon. Within minutes, he’s chatting with a hot tatted guy who is less than four blocks away. “I’m clean,” he types. “U B 2.”

Janie’s been flirting with Lynn hard for about a week. They met via Tinder. Lynn’s just what she’s been looking for: blonde, funny, quick-witted. And those legs... Her pics couldn’t be sexier. While planning out their first date for tomorrow night, Lynn mentions she has something important that Janie needs to know before they meet. “I’ve been HIV positive for the last year and half,” she types. Suddenly, it’s radio silence from the other end of the texting screen. That was three days ago. Lynn’s sent Janie a couple of follow-up messages, but so far, no reply.

Tony and Ben just finished their workout. Walking out of the gym, they bump into Robbie and say a quick hello. As they part ways, Ben elbows Tony: “Robbie’s looking really good isn’t? I heard he’s poz though. I think it’s the meds that are what’s making him look so good. You can generally tell when you look at them.

Freddie’s been living out and proud since he was a teen. When he was diagnosed with HIV at the age of 23, he immediately told his entire family. They rallied around him with incredible support. Today’s he’s in the best condition of his life. He’s on meds and his viral load is almost undetectable. But when he’s home visiting his parents, his mom can’t seem to stop washing her hands. When they sit down to watch a movie, she takes the chair across the room instead of the empty space on the couch next to him. In fact, the woman who couldn’t stop hugging her son while he was growing up hasn’t actually come in physical contact with him for more than two years.

These are just four stories. Four tales pulled from the lives of the more than 34 million men and women living with HIV/AIDS across the planet. That number is almost equal to the estimated 35 million individuals who have also passed away from HIV since it first began being diagnosed back in 1984.

Add them up and that’s almost 70 million lives directly impacted by this horrible disease. And as almost every single one of these individuals would attest, it’s not just fighting HIV and doing whatever you can to stay alive that’s a challenge. It’s also dealing with what the disease does to you socially—the way it impacts your own outlook on life as well as the way your friends, family, co-workers, and even random strangers you meet on the street deal with you when they think you might be HIV positive.

“Stigma is a very real problem, and people with HIV are feeling marked, they are feeling labeled,” says Mark S. King, a prolific author, columnist, blogger, and HIV/AIDS advocate, who writes candidly and controversially on his blog My Fabulous Disease (marksking.com). “This is serious and this is a shame.”

Merriam-Webster defines stigma as “a set of negative and often unfair beliefs that a society or group of people have about something.” It’s no different than racism, sexism, homophobia, agism...any sort of irrational bias against another group that you’re not part of. Talk shit about somebody in a bar who you think may be HIV positive based on how they look? You’re showing prejudice against them. Stop texting with that hottie you met in spin class when he tells you his levels are undetectable? You’re just steps away from that luddite hurling racial slurs to passersby that you find so disgusting. It’s a form of –ism, and you’re not as open-minded as you probably claim to be. Sadly, few of us are.

King found out he was positive in 1985, and
at the time, he says, you weren’t even supposed to get tested because you would be fired from your job; plus there were no treatment options, no life-saving drugs. “In the ’80s there was a lot of discrimination and stigma against those of us who were positive,” King says, “and it wasn’t just the straight people, it was gay men—kicking out their roommates...you couldn’t even get a manicure people were so scared.”

**The Reality of the Disease**

The reality of the disease is that with regular medical treatment and successful drug therapy, people with HIV can drive their viral loads to nearly undetectable levels. They can live normal, long, healthy lives, just like people without the disease. There may not be a cure for HIV yet, but it is manageable. Modern medicine has done its part to make the lives of people with HIV better. Now it’s our turn to do the same—and that means ending discrimination against men and women simply because they were dealt the blow of a condition any one of us could develop at almost any point in our lives.

“The fact is, even when many of us are trying to do the best we can, our own fears still get in the way,” says King. “We all want happiness, we want life to be as easy as it can possibly be. That’s why we see this prejudice; that’s why we see negative guys looking for other negative guys—we are all just looking for happiness and we want the easy road. That’s human nature, there’s nothing wrong with that.”

The key is finding a way to deal with each other a little bit more compassionately and understand that we are all in this together. We are all doing the best we can, but we could also always do a little better. “Words matter—‘clean,’ ‘disease-free.’ They matter,” he says. “We discount the experience of other people when we label them. We are not labels. I am not just gay, I am not just HIV positive.” There’s nothing wrong with having preferences as long as we communicate that in a way that is loving and respectful to others. “HIV is an invisible portion of people’s lives that they’re not talking about,” King says, “and the more we are not talking about it and the more invisible we are as people with HIV, the more license we are giving others to stigmatize us.”

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**Stigma Resources**

Where to turn for more info on how you can fight HIV stigma in your community:

- hivequal.org
- thestigma.org
- avert.org
- hivstigma.com
- thebody.com
- stigmaindex.org
- unaids.org
- aidsmap.com

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**What You Can Do to Help the Fight:**

Instead of referring to the infection as AIDS, call it HIV.

Remember that people don’t die from AIDS. They die from AIDS-related illnesses.

Never call someone an AIDS patient or AIDS victim. They are instead a person living with HIV.

If someone tells you they have HIV, don’t ask them how long they’ve had it, how they got it, or worry that you might get it as well. Be supportive and ask about their treatment and how you can help them.

Don’t refer to yourself as “clean” or “disease-free.” That implies that someone who has HIV is “dirty.” Instead, you should say you have tested negative for the disease.

Remember that you can’t develop HIV through mosquito bites, hugs, handshakes, sharing bathrooms or food, kissing, or sneezing.

Most importantly, go online and learn more about the disease. Most experts agree that stigma is triggered by lack of education. The less you know about HIV, the more likely you are to fear it—and the more likely you are to discriminate against those affected by it.

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**Words to live by...**

“We live in a completely interdependent world, which simply means we cannot escape each other. How we respond to AIDS depends, in part, on whether we understand this interdependence. It isn’t somebody else’s problem. This is everybody’s problem.”

BILL CLINTON

“It’s bad enough that people are dying of AIDS, but no one should die of ignorance.”

ELIZABETH TAYLOR

“HIV does not make people dangerous to know, so you can shake their hands and give them a hug—heaven knows they need it.”

PRINCESS DIANA

“No one can make you feel inferior without your consent.”

ELEANOR ROOSEVELT
If you are HIV negative and then you engage in unprotected sex, your HIV test result is no longer valid and your HIV status might have changed.

Get tested, PrEPare yourself, Use Condoms. We offer free, rapid, and painless HIV test and PrEP referrals. Visit us at 24 W 25th Street, 9th Floor, New York, NY 10010. Walk-ins are welcomed.

(212) 584-9325
How to find and support the most LGBT-friendly businesses and charities.

SAME-SEX MARRIAGE rights are steam-rolling across the U.S., and as more and more states are allowing gay marriage to be recognized as legal, those culture warriors on the wrong side of history are grasping and clawing at anything they can cling to, to prevent this monumental shift in attitudes.

Case in point is the recent “Religious freedom restoration” law passed in Indiana in March (similar laws are also in the books for 21 states) that was ostensibly about protecting religion, which the Constitution already does quite a good job of, but was revealed to just be a cloak for allowing businesses to discriminate against groups they don’t want to serve, gay marriage being the obvious canard. A pizza joint in Indiana was at the forefront of this ridiculous new law, and as a result, outed themselves as an anti-LGBT business.

Other companies have also made their displeasure with the forward march of gay rights well known—we’re looking at you, Chick-fil-A and Urban Outfitters—and thus make it easier to avoid their stores. Unfortunately, most closet haters are savvy enough to keep their bigoted ways out of the national news, making it hard to know which businesses you should frequent and which you should stay far away from. Thankfully, we live in the Internet Age, where prejudice and narrow-minded companies can be taken to task with just a little bit of sleuthing—check out our summary of the best online resources for finding the LGBT-friendly businesses and charities you should spend your money with.

BUSINESS MINDED The National Gay & Lesbian Chamber of Commerce (NGLCC) is a great place to start to suss out which businesses to frequent. “The first companies that the LGBT community should support are the 1.4 million LGBT-owned small businesses across the country,” says Sam McClure, a senior vice president at the NGLCC. “These businesses can be found through NGLCC’s 42 local affiliate LGBT chambers of commerce. There are live links to each of our local affiliate chambers on nglcc.org.” McClure also recommends going to your local NGLCC affiliate chamber’s website if you’re considering choosing a long-term business relationship, like a bank, insurance agent, or attorney.

When trying to check out which big corporations are on the up and up, McClure says that LGBT consumers should support companies that buy from LGBT businesses through their supplier-diversity programs. “The primary component of NGLCC corporate partnerships rests on a company’s dedication to the inclusion of certified LGBT business enterprises [LGBTBEs] in their supply chains,” she says. “Inclusion of LGBTBEs in supply chain opportunities is literally investing dollars...


TOP 5 NONPROFITS

Lambda Legal
The first legal organization dedicated to achieving full equality for lesbian, gay, bisexual, and transgender people.

American Civil Liberties Union
Tireless guardian of civil rights for all, they work to preserve the individual rights and liberties granted by the Constitution and the laws of the U.S.

Gay, Lesbian, and Straight Education Network
Works to assure that each member of every school community is respected regardless of sexual orientation or gender identity/expression.

National Center for Lesbian Rights
Dedicated to advancing the civil and human rights of LGBT people and their families through litigation, public policy advocacy, and public education.

National Gay and Lesbian Task Force
Trains activists and equips state and local organizations with the skills needed to organize campaigns to defeat anti-LGBT referenda and advance pro-LGBT legislation.

SOME OF THE MOST LGBT-FRIENDLY BUSINESSES

Airlines
American Airlines, United Airlines

Apparel
Levi Strauss & Co., Nike Inc.

Automotive
General Motors Co., Toyota Inc.

Computer
Apple Inc., Dell Inc.

Entertainment
AMC Entertainment Inc., Sirius XM Radio Inc.

Financial
American Express Co., Bank of America Corp.

Food & Beverage
Campbell Soup Co., Safeway Co.

Healthcare
Cardinal Health Co., UnitedHealth Group Inc.

Home Furnishing
Mitchell Gold + Bob Williams, IKEA

Hotel
Marriott International Inc., Starwood Hotels and Resorts Worldwide

Insurance
AIG, Cigna Corp.

Internet
eBay Inc., Google Inc.

Retail
A|X Armani Exchange, Best Buy Co.

FEELING CHARITABLE

Giving back to the community is just as important as supporting LGBT-friendly businesses, and again, taking to the Web will allow you to pinpoint exactly who is doing a good job of directing your money to the most-needed places. Philanthropedia, at myphilanthropedia.org, has an excellent ranking of nonprofits that are making significant contributions in LGBT equality on the national level, state, and local levels. The report came out in 2012, with an update slated for early 2017, but Lindsay Nichols, director of marketing at GuideStar, their parent company, said “these lists are meant to rank high-performing nonprofits based on their work over time—not just how a nonprofit is doing right now—so the report is still accurate of great work going on in the LGBT nonprofit community.”

Greatnonprofits.org also features an array of nonprofit categories to check out—each section has crowd-sourced ratings and reviews similar to Yelp. And charitynavigator.org, an evaluator of charities, aims to advance a more efficient and responsive philanthropic marketplace by utilizing a team of professional analysts to assess over 8,000 U.S. charities.

7 LGBT LOSERS

The last few years have seen amazing strides toward full LGBT rights, but these companies are digging in their heels and doubling down on denying universal acceptance of all humans, regardless of gender, sexual orientation, or religious beliefs. Stay far away from these companies and their products.

Hobby Lobby Stores Inc.  
ExxonMobil Corp.  
MillerCoors LLC  
Urban Outfitters Inc.  
Cracker Barrel  
Domino’s LLC  
Salvation Army
AND BABY MAKES THREE

Starting a family is one of the biggest decisions a couple can make. Here are a few things you and your partner should consider before starting the process.

You’ve found the man or woman of your dreams. You’re dating. You’ve moved in together. Before you know it you’re married. Maybe you escape to the ‘burbs; maybe you decide to stick it out in the city. Either way, the next step is usually straightforward: It’s time to start a family—and you’re about to become part of a booming trend.

In America’s 2000 Census, just 65,000 children were living with same-sex parents. In 2012 that number had jumped to 110,000 and continues to grow. For many couples, the road to parenthood is by adoption. But depending on your location, state laws, and the actual availability of adoptable boys and girls looking for a family, that isn’t always an option.

Enter surrogacy, a legal agreement in which a woman carries a pregnancy to term for the intended parents. In addition to allowing one or both prospective parents to use their own eggs or sperm, surrogacy is often a more attractive option for LGBT parents because it provides greater control over the process of starting a family than adoption. But hold up! Before you buy that double Maclaren for the twins, here are a few things to consider before starting down the road to surrogacy.

MAKING THE DECISION Matt and Josh Helmin-Walker of Connecticut were married in Central Park in November 2011. By the time both men met and went on their first date together years earlier, they both knew they had a mutual desire to start and raise a family. “It’s just something I knew was always going to be in the cards,” says Matt. Josh felt the same way, so the decision to move forward was easy.

Beyond both members of a couple being 100 percent committed to starting a family, potential new parents need to seriously consider the emotional and financial issues connected to bringing a new child into the world. What is your health like? How stable is your relationship? What is your financial situation? Can you afford not just the cost of raising a child, but also the expense of setting up a surrogacy—which can easily run upwards of $100,000? Where will you live? Will your career path change with children in the picture? If you don’t know the answers to most, if not all, of these kinds of questions, you’re not ready to move on.

By TONY ADAMS

MAPPING YOUR OPTIONS Matt and Josh got their newborn twins, Henry and Julianne, two years ago via surrogacy in India. Why there? Josh says, “India is a world pioneer in IVF [in vitro fertilization] techniques. Plus, India nearly beat the United States to birth the first ‘test tube’ baby in the 1970s. Not only is there state-of-the-art medical technology...
in India, but our American dollar stretched much further overseas. Doing surrogacy in the United States could have cost us $150,000 or more, and as a middle-class, newly-married pair of guys, that was entirely unrealistic for us. But in India, the exact same process, in world-class facilities, cost us about $35,000—almost exactly the cost of adoption in the United States.

Seymour and Colin McShain, a couple of 10-plus years living in Boston are the proud fathers of their son, Ethan, also delivered via surrogacy in India. “We knew it was going to take an investment of money and time, so India just seemed like the right choice for us,” says Colin.

Unfortunately, since the time of both couples’ surrogacies, Indian laws have changed and now offer international surrogacies only for married opposite-sex couples. But just as India was a popular surrogacy destination for years, there are still plenty of locations where the value of the U.S. dollar and availability of cutting-edge technology make surrogacies an attractive option. Mexico and Nepal are both extremely popular locations for international same-sex couples exploring surrogacy, and there’s a growing trend as well in moving surrogacies that might have once taken place abroad back to the States.

In fact, when it came time for Seymour and Colin to consider a second child, this time they opted for the U.S. Their daughter is due in July. “I’m very glad we are doing it in here this time,” Seymour says. “The technology here is superb. And, if you factor in travel expenses, the cost for us at least was a wash [abroad].”

If you opt to stick with the U.S., be prepared to consider looking at the options both within and outside your home state, since laws can vary both regionally as well as county by county within the same state. No state gets a 100% thumbs up for LGBT friendliness, but that said, most experts consider California, Nevada, and Wisconsin the most attractive to couples seeking surrogacy.

**FORMING A GAME PLAN** Whatever location you choose—U.S. or abroad—the next step in the process is the same: research, research, research.

“Dig in like crazy, learning as much as you can about any clinic you’re thinking of using,” says Matt. “Look for real-life accounts of those who’ve used the clinic. Second, make sure that you budget for the fact that the first round of IVF may not work. There’s often a fee to start another round.”

Seymour adds “One major difference here in the states is that you have to select your surrogate agency, your IVF doctor, and your egg donor—it’s not one-stop shopping like it was in India. Expect the surrogacy process to be a full-time job for at least one spouse.”

In addition to examining hospitals, clinics, and medical options, you’ll also want to consult with a surrogacy lawyer to make sure that your rights as future parents are fully protected.

**FINDING THE SURROGATE** Couples have two options when it comes to the woman carrying their future child, says Shahin Ghadir, M.D., a fertility specialist with the Southern California Reproductive Center in Los Angeles, CA. Find a surrogate who is also the egg donor and who is therefore the biological mother. Or select an egg donor as well as a separate gestational surrogate who is implanted with the fertilized egg and carries the pregnancy to term but has no actual genetic relationship.

There are three ways of finding a surrogate mom—going through a surrogacy attorney, hiring a surrogate through an agency, or a private search.

“I always urge couples to use a reputable agency and to choose a surrogate who has been thoroughly screened,” says Ghadir. “An experienced surrogate with a track record of success who already has her own children is often the most preferable choice.”

**BECOMING A FAMILY** The final step for a successful surrogacy is building the strongest support group possible. That kind of connection can be a life saver, especially if something goes wrong.

Couples need to be prepared for extreme stress, warns Colin. “Remember, there are no guarantees when a pregnancy is initiated. Difficulties and failures can be more trying than any of the financial costs. Be prepared for an emotional roller coaster.”

Yet, despite the difficulties, Seymour and Colin can’t wait for the birth of their second child. “I hope that when I’m old and gray, I’ll have my children around to support me,” he says with a laugh.
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Go one-on-one with three of music's most beloved out gay performers: legendary dance music pioneer Jimmy Somerville; Euro-pop superstar Mika; and New Orleans up-and-comer (and reality TV star) Big Freedia.

Show why you believe #LoveMustWin at the Supreme Court. 1. Post a photo or short video to Facebook, Instagram, Twitter, Tumblr or Vine. 2. Be sure to use the hashtag #LoveMustWin. 3. You may be featured by Freedom to Marry on social media.

TO LEARN MORE VISIT www.freedomtomarry.org/lovemustwin
Go one-on-one with three of music’s most beloved out gay performers: legendary dance music pioneer Jimmy Somerville; Euro-pop superstar Mika; and New Orleans up-and-comer (and reality TV star) Big Freedia.
I've finished a project and thought 'I should have an achievement for that. I could have done that, I could have done that.' I don't love this. I don't think. I should have, I should have done it. A few months ago, I was working on this album, and it's been so incredible. I'm not doing it for anyone else. You know what? I'm doing this for me. I'm really happy about this. I'm really proud of this. I'm really passionate about it.

It is! I'm the happiest I've been in my life. The past year, I've been very happy, very together with the music. I've been able to connect with people who are passionate about the music and the message. I've been able to connect with people who love the music and want to share it with others. That's been great.

How are you feeling about it now that it's finally out for the public to hear? You've said in interviews that you never thought you'd have an award for that. I should have an achievement for that. I should have done something.
Both as a member of legendary synthpop pioneers Bronski Beat and The Communards and in his own solo career, Jimmy Somerville has never been afraid of mixing danceable pop music with a message. His first, and perhaps biggest hit—“Smalltown Boy”—reflects on anti-gay discrimination while his latest release, “Homage,” examines the challenge of overcoming personal darkness to find your own joy.

PRIDELIFE: You’ve said in interviews that Homage is the disco album you always wanted to make but never got a chance to. How are you feeling about it now that it’s finally out for the public to hear?

SOMERVILLE: In the past, I’ve always just shied away from reading reviews and looking them up. But this time, the reviews have just been so incredible—anything that happens with this album at this point is an added bonus for me. It means I’ve done something good. It’s one of the first times in a while when I’ve finished a project and thought ‘I love this.’ I don’t think, ‘Should’ve done that, could’ve done that.’ I don’t feel any of that.

PL: That must be a great feeling.
JS: It is! I’m the happiest I’ve been in a long, long, long, long time. When I was working on this album, I realized, ‘You know what? I’m doing this for me. I’m not doing it for anyone else.’ And as I was working on it, I really started going back to the music that I loved and listened to as a young gay teenager. Looking back and getting inspired by those early days, it’s been great.

PL: There’s a fairly well-known story about the first time you were in a gay bar. Your first dance was to Donna Summer...
JS: Most people don’t know the most impressive part of that story. The most impressive thing about that moment is that I ended up doing the whole seventeen minutes of “Love Trilogy” in cowboy boots. [Laughs] I should get an achievement award for surviving 17 minutes of a dancing in a pair of cowboy boots.

PL: Well done! That ties in perfectly with one of the other topics we’re addressing in this issue...the role of clubs and dance music in forming community. Why do you think club culture has been so important for holding the gay community together for so long?
JS: The emergence of the dance floor was the emergence of a subculture. It was the emergence of communication. It was about strength in numbers. It was about people realizing, ‘I’m not alone.’ Suddenly, you had somewhere to go; somewhere where you could just let it rip. It was almost like a kind of therapy, but you did it on the dance floor. You just danced your ass off and you sang along as loud as you could to a chorus. Growing up, my great escape was being on the dance floor. I lost myself in music And a lot of times, I think it kind of saved me from myself.

PL: Changing gears a bit—you were really one of the first artists that was out, proud and didn’t hide your sexuality as you became famous. Do you feel like you opened doors for artists of today like Sam Smith and Bright Light Bright Light who also refuse to hide their sexuality?
JS: How we presented ourselves and how we spoke and what we spoke about was very different at that time. It was new. I think it did break down barriers. It allowed people to have a different picture in their head of who gay men could really be. It might be your grandson, or your son, or your brother, or your cousin.

PL: Was there ever pressure for you to censor yourself or to hide your sexuality?
JS: No. Honestly, I didn’t really think about it. I just navigated it in the only way that I knew. I was kind of out there on my own, finding my own way about. But I was also a young man with my own personal issues, so being an exhibitionist and getting attention was often in direct conflict with the fact that I was also painfully shy and couldn’t bear it sometimes.

PL: You’ve been very open about your political views over the course of your career. What are you feeling most passionate about today?
JS: My interest is in equality, that I have the right to be who I am. I have the right to live my life, and no one has the right to tell me who I can love and what kind of life I should be living. For me it’s as basic and as simple as that.

PL: So what’s next for you now?
JS: I’d like to tour. I’d like to get some stuff together, get some musicians, and do that whole thing. I’m also writing the next album. I’m going to keep doing what I’m doing—and enjoy it, and believe in it! I think every one of us has melodies in our heads. For me, melody is what life is all about. Just enjoying it. And dancing like a crazy banshee.
I feel a lot softer, and it's almost like I was becoming quite hard and growing toward the end of my twenties that more openly. It's funny—I almost feel open about my life, and start writing myself anymore, would be a lot more promised myself that I would not isolate to change… to change my attitude. I was done touring for it, I just decided a difficult part of my life. And after I produce—really intense—and it was quite rush of energy, and that's what I did.
Blessed with a soaring multi-octave voice, good looks, and some killer song writing chops, it’s easy to see why Mika exploded on the scene back in 2006. Fast forward 10 years and the London native has crafted his most personal and honest album to date. No Place in Heaven is filled with tracks detailing his life, love, family, and one incredible tribute to iconic Queen frontman Freddie Mercury.

**PL:** You’ve been working hard on the new album No Place in Heaven. How does it compare to your previous three?

**Mika:** How can I describe it? It’s very different. I was in a very different headspace from when I made [2012’s] The Origin of Love. That was truly a gratifying album to write, to produce—really intense—and it was quite a difficult part of my life. And after I was done touring for it, I just decided to change... to change my attitude. I promised myself that I would not isolate myself anymore, would be a lot more open about my life, and start writing more openly. It’s funny—I almost feel like toward the end of my twenties that I was becoming quite hard and growing up really fast. Now I’m thirty-one and I feel a lot softer, and it’s almost like the child side of me is able to run wild a little more freely.

**PL:** Do you remember the first song you wrote for the album?

**Mika:** It was a song called “Good Guys.” The song is an homage to all my heroes when I was younger—and all the people who I used to dream about being like. All these “good” guys. Most of them, in fact, were quite daring gay icons. There’s a line in the song that goes, It’s not the cowboys that are missing anymore—that problem was already old in nineteen ninety-four. Don’t be offended, this might seem a little wrong, but tell me, where have all the gay guys gone? And that is a message to me, saying, “Dare to be like those people that you dreamed of being like when you were a teenager.” That was the first song I wrote for the album. It’s about daring to be at ease with yourself, to be proud, but also daring to get out of your comfort zone.

**PL:** Speaking of “Good Guys”—Freddie Mercury has popped up throughout your early work, and his influence is definitely felt on this album as well. Is he one of those icons from throughout your life?

**Mika:** Yeah, there’s a song on the album—“Last Party”—that’s about him. It’s about when Freddie found out that he was HIV positive and he locked himself up in a club and had this crazy party for three days. It’s a homage not just to him, but to all people who find themselves in really difficult situations.

**PL:** Your songs and albums have always been really autobiographical. Does that continue into this new album as well?

**Mika:** Especially in this new one, yeah. I breached some things that I’d been afraid to in the past. I know that sounds crazy, but it was like, “Let me just write!” regardless of the consequences.

**PL:** Your previous records came out in quick succession. Did it help having a couple years between releases this time?

**Mika:** Definitely. When I came back to writing, I had this sense of urgency with the album. I thought I had to get it out really fast and really profit from that rush of energy, and that’s what I did.

**PL:** How has your sexuality influenced your work over the course of your career?

**Mika:** It’s always influenced my work. I think sex and sexuality are a firm part of the fabric of identity. It’s always been there in my work. They’re represented in color, in dress, in politics, in everything; it’s everywhere. It’s part of who we are and how we choose to show ourselves to the world. And I think that my transition through all this has been quite traditional and normal. The only difference is that I was under the spotlight. I was always asked my sexuality starting out and I’ve taken my time. It’s tough to be open. It’s tough to be candid about who you are and what your preferences are. We all tend to protect ourselves, but actually, there’s a huge amount of freedom in candor. The older you get, and the wiser you get, the more candidly you speak. No matter how wrinkly our faces may get, and no matter how hard it is to keep our bodies in shape, that’s what will keep us young inside and sexy, healthy, and happy.

**PL:** Do you wish this is something you would have known sooner in life?

**Mika:** Not really. I’ve seen the good that it does for me to be open about my sexuality, but I’m really happy that I took my time to get here—because it was sincere, you know what I mean? By the time I made that choice to formally..., to openly label myself, and to kind of talk about my private life openly, I was really ready to handle it. I was ready to make it a good thing and not just a label. I was really ready to implicate myself and go all out. Because that’s the point in life, right?
Bounce queen

Definitely, I created the beat behind Cameron Paul’s “Brown Beat” are the standard base beats for bounce. Is there any other sound you’re excited about right now? 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Bounce music’s biggest star Big Freedia is an industry vet who’s managed to command respect and admiration despite all odds as a black gay rapper. Now on tour, the Queen of Bounce is busy, to say the least, with a show on Fuse TV and a book due July 7. But the BDM (bounce dance music) maven always makes time for community, especially if you keep it funky fresh, keep it positive, and just be free.

PL: Your latest album and tour is titled “Just Be Free.” How did that become the life philosophy of Queen Diva Big Freedia?

BF: Basically it means not disrespecting anyone else and just living in my own lane and really just trying to stay humble so I don’t get off track and unfocused.

PL: How did New Orleans and your mom, who the Just Be Free tour is dedicated to, shape your perspective?

BF: Being raised in New Orleans and the struggles we had to go through and see as kids, we had to be strong and to stand up and fight for what we believed in. Things weren’t always easy, but we kept it moving and just chose to stay on a positive track.

PL: You’ve been at this since the ’90s. Do you feel like everything is finally coming together now?

BF: It is—and I’m just so honored represent my city [New Orleans] and have the platform to speak for a lot of people that can’t speak, to be a voice that can be heard. To give people inspiration to live, be free, and be themselves. Life is short. And sometimes we’re here one day and gone the same day. So I don’t take any moments for granted and I’ve had some moments where God has really saved my life. So now it’s time for me to live out my dreams as much as possible and help other people on their journeys.

PL: The Showboys’ “Drag Rap” and Cameron Paul’s “Brown Beat” are the standard base beats for bounce. Is there a future for you in terms of creating new base beats for bounce music to grow?

BF: Definitely, I created the beat behind “Gin In My System”—everyone in New Orleans uses it now. I’m working on the new album now, so there will be even more new sounds for the dance floor for everyone to get jiggy with.

PL: Working in rap, which can be so homophobic—though not necessarily more so than every other genre—how are you able to stay positive and creative despite that kind of challenge?

BF: You know, I really don’t get a lot of negativity because of the way that I carry myself—the way that I approach my network of rappers. If they don’t respect me I’m going to make them respect me. When that problem does come to me I act in a very professional way and say what’s on my mind and keep it moving.

PL: You’ve broken barriers beyond, “This is queer music, this is rap music, this is my music. You have it all coming together...

BF: I’ve always stayed positive, humble, and loyal to my craft, so everything has happened for a reason. A lot of times I don’t know what’s going to happen when I make decisions, but I try to make the right decision and go in the right direction for my career. That’s just the way that I was raised—I’ve always had hustle in me. A lot of times everybody’s depending on me to keep the movement going, so a lot of eyes are looking to me. But I stay focused and just try to keep representing.

PL: Over the years, you’ve collaborated with a lot of people. Any favorites?

BF: Katey Red, who was the first transgender male to come out with bounce music, was my favorite because we’re best friends and that was the original—we went back and forth writing tracks. Doing a track with Diplo (“Express Yourself” with Nicky Da B) was amazing. It was something new, and when he came to New Orleans I gave him a tour and he just fell in love with the sound and the music. It was also an amazing feeling to get the phone call that RuPaul wanted to collaborate (“Peanut Butter”). I’ve looked up to him for so many years—and for him to call me and want to do a song, I dropped dead right there.

PL: Last question: It seems like your roots of New Orleans, your family, have all been this unmovable base for you. What are a few mottos you live by?

BF: Your health is your wealth. It means that you need to take care of yourself to accomplish anything. My mama would also tell me, “Protect yourself, stand strong for what you believe in, fight for what’s yours, don’t take no shit off nobody”—because I was always picked on as a kid. But mama always threw me back out there and inspired me to keep pushing it back. Sometimes this world can be cruel, but you just have to be confident in who you are. When you love yourself, there’s nothing anyone can tell you or do to you that can take that away. I won’t let anyone take my joy.
Inside Instagram star Matt Crump's candy coated world.
HUE COLORS

Inside Instagram star Matt Crump’s candy coated world.
From neon-silhouetted palm trees to shimmering landmark signs to a recent series of somewhat controversial images shot in war torn Beirut—all backed by vibrant pinks, blues, greens, and oranges that do more than hint at dream-like realities—photographer Matt Crump has created some of the most striking images to hit the Internet in some time. The 30-year-old Texas native describes his work as Candy Coated Minimalism. “It’s a new movement in photography, filled with surreal colors,” he says. “It’s escapist, playful, and fun.”

Crump’s followers agree. In just the year and half since he began posting images on Instagram, he’s amassed more than 70,000 followers. That’s not counting all the daily visitors to his website (mattcrump.com) and his Twitter and Facebook, where prints of his one-of-a-kind pop art are selling like pastel-tinted hot cakes.

“The popularity of my images is not something I ever expected,” he says. “Growing up on the coast, I just loved bright, summery colors and beach themes.” He encourages that love of color and contrast, asking fans to post their takes on his signature style under the hashtag #candyminimal.

“When I’m planning a shoot, I look for brightly colored people or scenes. I’m not always sure where the inspiration comes from. Something will just strike me as special.” With more fans daily, it’s clear his candy coated dreamscapes are satisfying everyone’s sweet tooth.

CRUMPS 4 BASIC RULES FOR TAKING YOUR OWN ONE-OF-A-KIND SHOTS

PLAN THE IMAGE

“Find a subject in front of a uniform background and frame it with the final crop in mind,” he says. “A wall or clear sky is a good canvas since smooth and even backgrounds are easier to color-correct than cluttered ones. Minimalistic compositions usually have a singular focus with as few elements as possible, so carefully consider your position and your subject’s best, most interesting—and cleanest—angle.”

FRAME IT UP

“Use the gridlines on your phone’s camera to frame your subject. This will help you to get the most impact out of your composition. Put the subject at one of the intersections of those gridlines—this is called the rule of thirds, and it always leads to better images.”

MASTER-CROPPING BASICS

“A good crop is a crucial component in any photograph. I usually give my subjects plenty of negative space, suggesting a dramatic, larger-than-life feel. You can play with the crop in Instagram, but I prefer Diptic for iOS, as it provides better control for precision cropping. Diptic also lets you adjust the hue, brightness, contrast, and saturation of your photos, unlocking a treasure trove of color.”

DON’T BE AFRAID OF FILTERS

“They’re actually the best part of digital photography! Filters will give you that sweet, surreal coloration you’re craving. Lots of photo apps have filters, but I prefer PicTapGo and VSCOcam. PicTapGo lets you layer filters on top of each other, which is helpful when you’re trying to create your own unique style. The more you experiment, the better you’ll get at pulling cool candy colors out of your images.”
Phil Torres: biologist, photojournalist, and host of TechKnow on Al Jazeera America
Even in a place like Disneyland, Crump is able to strip away the layers, showing the minimalistic potential—and beauty—of a site teeming with tourists and all sorts of visual noise.

Model Enrico Frezza shows off his hours logged in the gym. For more of his adventures, check out @thefrezza on Instagram.
Even in a place like Disneyland, Crump is able to strip away the layers, showing the minimalistic potential—and beauty—of a site teeming with tourists and all sorts of visual noise.
As television creators explore new digital formats, a wave of gay characters, shows, and queers of all stripes are transforming the small screen.

By Anne-christine d'Adesky
As television creators explore new digital formats, a wave of gay characters, shows, and queers of all stripes are transforming the small screen.

By Anne-christine d’Adesky
This spring, American audiences were treated to a glimpse of the future by the Wachowskis, best known as creators of The Matrix. Sense8 is their new sci-fi series launched on Netflix as an original program. The show offers a fresh take on such themes as time, space, and the inner vistas of our human identity, personality, and gender. Sense8 is also part of a recent wave of TV programs with gay themes, characters, and major plot lines, often by openly gay creators. Many, like Sense8, start out as pilot shows with edgier content on streaming services like Netflix, Hulu, and Amazon, or as low-budget Web series that are less susceptible to censorship and ad dollars, before jumping to cable or primetime.

Over the past two years, the runaway success of Netflix’s prison drama, Orange Is the New Black, with its rich array of LGBT characters and story lines, has proven that playing gay is not only entertaining to America, but hugely profitable.

“I think that TV more than film is leading the charge when it comes to changing social morays,” said John Griffiths, a longtime TV critic at US Weekly and president of GALECA, the Gay & Lesbian Entertainment Critics Association. “The power, the influence, of TV—you just can’t underestimate it.”

Much credit goes to openly gay television professionals such as screenwriter/director Ryan Murphy (the man behind Glee, The New Normal, Nip/Tuck, and American Horror Story) and Sense8 co-creator Lana Wachowski, a vocal transgender activist. They admit to an overt mission to educate as well as entertain the general public, presenting less-visible LGBT voices, lives, and experiences in their work whenever possible. Heterosexuals like Jenji Kohan, creator of the wildly popular pot comedy-drama series Weeds and, now, Orange; and showrunner Shonda Rhimes (Grey’s Anatomy, Private Practice, Scandal) are also getting in on the act. One of the most popular creative forces in network TV today, Rhime’s most recent offering, How to Get Away with Murder, has some of most graphic gay sex scenes airing on network TV—scenes written by her longtime collaborator, Peter Nowalk, who is gay.

Meanwhile, feminist writer-director Jill Soloway has shattered a glass ceiling of her own with Transparent, a series that garnered a Golden Globe for actor Jeffrey Tambor in his role as a father who comes out as transgender. Already renewed for a second season, the story is based on Soloway’s father’s life and is the first foray into streaming video by Amazon Studios.

And those shows are just the tip of the new LGBT iceberg currently crashing into television sets across the U.S. Music-based series Empire, set in the hip-hop world, and the country music drama Nashville both explore a familiar gay narrative: the struggle to come out and find acceptance from family and in the world. Whether it’s the struggle for gay marriage, bullying of gay teens, or senior citizens facing their sexuality and coming out; the plots are often so real they might as well be reality TV.

Which begs the question: now that these series are so abundant, are they leading cultural change, or are they simply mirroring it? Both, feels Griffith, who has seen a steady evolution, rather than revolution, of LGBT visibility on TV. “It’s been slim pickings until recently,” Griffith says. The big breakthrough, he feels, was Modern Family—created by Christopher Lloyd and Steven Levitan (who are both straight). “That show was so influential for easing America into the idea of accepting a gay couple,” he says. It picked up a slew of awards for its comic look at the changing American family and celebrated a landmark moment last year when 10.2 million viewers witnessed the show’s gay couple—Mitch and Cam—exchange vows.

Just how different are today’s shows from those with LGBT characters airing just five or ten years ago? Here, the jury is mixed, especially when it comes to authentic depictions of gay life onscreen. HBO’s Looking was initially dubbed a Sex in the City for gay boys because of its frank depiction of life and Grindr-style hookups among male friends in San Francisco. A year after Looking debuted, Connor—a gay law student on How to Get Away with Murder—began shocking viewers with his weekly sexcapades, including what was likely broadcast TV’s first “rimming” scene.
BY COMPARISON, Nashville and Empire offer rather tepid scenes of gay sex and life. Both shows present conflicted gay characters who begin to open up as they meet openly gay lovers who then support them through the emotional turmoil of coming out. In Empire, Jamal Lion (played by actor Jussie Smollett) is a rising talent who bravely confronts his father’s intense homophobia and earns acceptance from hip-hop’s machismo world. Jamal also benefits from unconditional support from his fierce mama bear mother, Cookie—played by Taraji Henson in a breakout role.

Empire also focuses on the impact of Jamal’s coming out on his family, as does Netflix’s new divorce comedy, Grace and Frankie, a vehicle for Lily Tomlin and Jane Fonda. In the latter, two women—and longtime rivals—cope with life after their husbands come out as a gay couple. Coming out is a family affair, such shows tell us. Everyone is impacted and must adjust. It’s a story America is living with as well.

“A lot of these sitcoms are set in homes and have a familial feeling. I do think that kind of thing has a deep impact on our culture,” states actress June Raphael, who plays a lesbian daughter on Grace and Frankie. She looks back to popular, long-running shows like Will and Grace that opened American eyes to the lives of gay people. “I remember being blown away by that show,” she adds. “I was amazed at how deeply these gay characters had entered into pop culture.”

It was through HBO’s Oz and Showtime’s Queer as Folk (and later, The L Word) that gay characters stopped just being funny sidekicks and finally began having sex on screen. And once they started, they had a lot of it. All three shows offered gay characters who were as horny, shallow, flaky, and dysfunctional (and in the case of Oz, as homicidal) as straight people—a breakthrough in authenticity.

Yet despite those advances, stereotypical gays still provide the easiest fodder for comedy—the nelly queen, the butch dyke prison guard—and remain the butt of jokes on primetime. However, it is getting better according to Rose Troche, the pioneering lesbian writer-director of indie film Go Fish. Troche sees real progress in depictions of LGBT characters on television. “I think we’re at the point where it seems you’re in an insular world if you don’t have a gay character,” she says. We’re here. We’re queer. Now we just need to figure out how to avoid being the stereotype. “It’s a staple of the half-hour sitcom: the gay joke,” she says. “Every comedy has one.” But she asks, “How central are those characters? It’s like the obligatory black character. So the mainly white cast has a black and a gay. Now gay is the new black.”

ONE POSITIVE EXCEPTION is Fox TV’s high school sitcom Glee, which ended its six-season run earlier this year. A breakthrough hit when it first hit the air, the series broke ground by featuring two young boys in love, the characters Kurt and Blaine, and two pretty cheerleaders, Santana and Brittany, who enjoyed Sapphic love. All were standout singing talents and quickly became beloved characters on the show. As the seasons progressed, we also got Wade, a black transgender student and McKinley phys-ed instructor Coach Beiste, whose final storyline detailed her transition to manhood. When you remember that this was a series most popular with teens and young adults, the breadth of diversity and good storytelling was remarkable.

LOOKING TO DRAMATIC sitcoms, ABC Family’s The Fosters, features a lesbian couple adopting and raising a brood of children—the evolution of the blended family, building on Modern Family. The Fosters are suburban, good looking, stable, employed, and biracial parents, and week after week, they’re putting a face to the social battle ground of gay adoption.

Where The Fosters really pushes content limits are its edgier plot lines,
including one that skirts the topic of incest, when an eldest son develops a crush on a new teenage girl up for adoption by the family. The Fosters recently featured the youngest same-sex kiss in U.S. broadcast history, a chaste peck on the lips between two 13-year-old boys who are best friends. The episode provoked a media storm after religious conservatives protested the kiss and YouTube yanked the scene off its website, before later recanting.

As a series, The Fosters also represents significant progress in the area of lesbian visibility; similarly, the kickass lesbian character Cosima on Orphan Black, who sports white-girl dreads and sexy librarian glasses, does as well. She’s a millennial TankGirl, a new poster girl for baby dykes. There are also more lesbians of color occupying television shows now than ever before, although rarely in major or starring roles. By and large, most of the lesbians on air today are still white, pretty, in great shape, and femme. In other words...they look pretty straight.

Troche isn’t alone in noting the dearth of butch lesbian characters on TV, as well as lesbians of color, apart from Orange.

“On The L Word, there was every type of lesbian on the show,” says GALECA’s Griffith, who praises Ilene Chaikin, the creator of L Word, for its diversity.

Similarly, HIV-positive characters and story lines are still rarely found on television, outside of the occasional AIDS drama or as tragic subplot in straight dramas.

We’re still waiting for characters like Empire’s Jamal to become even more real—to live an openly gay life, to potentially have HIV, to adopt kids, to fall in love and get married, to grow old and gray with the man he loves. But simply by existing on the air today, he is making a difference. As are the other LGBT characters on Orange, Sense8, Transparent, Nashville, and a dozen other shows. Looking ahead, then, can we expect a hot butch as president in some future West Wing? Stay tuned.
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Grace Towers

“Before Conchita Wurst, Grace was the bearded queen. We were shooting in the Castro when a cable car just pulled up next to us. We talked to the driver and he jumped out so we could get the shot. I love it! It’s blown up 6’ x 4’ in my living room.”
TAKING SHOTS

Well-known drag photographer Magnus Hastings spills the T on 6 of his favorite images.

Grace Towers

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With a summer exhibit at NYC’s Out Hotel plus an upcoming book and documentary on his work scheduled for release next year, it’s clear that Magnus Hastings knows a thing or two about what it takes to get a good shot of a drag queen. The self-taught photographer who grew up in England and now calls L.A. home attributes much of his success to his own affinity for the art form. “I was into drag as a little boy,” he says with a laugh. “I was dressing up, lip syncing, singing—but I grew out of it as I got older. I still feel like I’m shooting a world I know and understand, though. I may not be a drag queen anymore, but now I’m expressing my inner drag queen through photos.”

Working as an actor on the West End, it wasn’t until Hastings landed his biggest role ever that he knew he needed a change. “I was onstage every night, and suddenly I was over it,” he says. “I decided I never wanted to act again.” When his play ended, he turned his focus to photography—a pastime he’s enjoyed since those early childhood days in drag “I started taking photos in London, and within six months, I became very successful. But I’d always wanted to move to L.A., so a few years ago, I got my VISA and just went for it.”

Once in the City of Angels, Hastings turned the focus of his work from celebrities and musicians to drag performers. “I was shooting the big stars of the gay scene but doing them as if they were celebrity portraits,” he says. “People loved it. I started a Facebook page called Drag around the World, and everyone went mad for it.” His success there lead to exhibits of his work across the country, appearances on RuPaul’s Drag Race, plus an upcoming book deal that’ll finally get copies of his images into his fans’ hands.

“We’re just finishing the book now,” he says. “There are over a hundred different drag queens in it. I handpicked the best, most interesting performers...iconic people like Lady Bunny and Bob the Drag Queen, stars from Drag Race, up-and-coming performers (like our very own cover girl Misty Violet), the list goes on.

“The moment I pick up my camera to shoot a performer, I get so excited,” Hastings says. “I see it as an art form. It totally stimulates me and makes me want to produce the most amazing work I can. I’ve never been happier than when I’m behind the camera taking a picture of one of these amazing performers.”

In celebration of Hastings’ work, and as a preview of his exhibit and upcoming book, we asked him for the inside scoop on six of his favorite shots. For more on his images, including info on how you can buy your own copies, go to magnushastingsphotography.com.
Pearl Liaison
“I’d arranged to shoot Pearl in a friend’s apartment, but it was so hot her makeup was sliding off her face. So, we went to my hotel, blasted the AC, ordered champagne, and finished the shoot. It was a great experience that began as a nightmare—a real ‘make it work’ moment.”

Adore Delano
“I’d seen Adore perform in the Budweiser suit, so when we were shooting, I told her she had to bring it. I was driving around looking for a location and saw that wall and knew I’d found it. It was so on-brand for her. It just worked.”

Jiggly Caliente and friends
“With this one, they actually came to me. I’d shot Jiggly before, and she asked me if I could shoot all the city’s Asian queens together. We took the photo in the entrance to the nightclub next to where I was doing an exhibit.”

Alaska
“Alaska, my assistant, my dog, and I all hopped in the car to find a spot to shoot. We started off at Fat Burger then headed to a hamburger stand nearby. The day was ending, it was sunset, and the lighting was just perfect, all blurred and gorgeous.”

Courtney Act
“Courtney is basically my muse. We’ve done everything together since I moved to L.A. Now she’s off touring around the world—but whenever we can, we play together. We come up with ideas and just try things out for hours. This look is really different for her, but she looked so pretty!”
I. ON THE EVE of the historic Supreme Court oral arguments on gay marriage in April, one of the fiercest opponents of the LGBT movement set up shop on the courthouse steps, holding a press conference to get the media's attention. While gay activists weren't surprised that U.S. pastor and attorney Scott Lively, 57, the author of The Pink Swastika: Homosexuality in the Nazi Party, would welcome an occasion to once again spout his anti-gay rhetoric, some thought he might avoid the spotlight. After all, Lively stands accused of “crimes against humanity” for his alleged role as a key architect of Uganda’s infamous “Kill the Gays” bill and is the target of an unfolding international lawsuit filed by Sexual Minorities Uganda (SMUG) in U.S. federal court, with help from the Center for Constitutional Rights (CCR). Lively is represented by Liberty Counsel, well known as the legal firm linked to Dick Cheney; George W. Bush; and other top GOP leaders. Lively just lost his final appeal to get the lawsuit dismissed. Oral arguments are slated to start in early 2016. Already, SMUG v. Lively is being viewed by inter...
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Lively just lost his final appeal to get the lawsuit dismissed. Oral arguments are slated to start in early 2016. Already, *SMUG v. Lively* is being viewed by inter-
national legal experts as a watershed historic case—the first attempt of its kind to apply a decree of international law, the Alien Torts Statute (ATS), to a case of alleged persecution based on sexual orientation. Over the past 30 years, the statute was successfully used by CCR and other groups to pursue claims against foreign citizens and foreign corporations for grand crimes, including Haitian generals and Philippines ex-dictator Ferdinand Marcos. Recently, the pro-corporate Supreme Court has narrowed foreign ATS cases. But Scott Lively is a U.S. citizen, allowing SMUG, a Ugandan nonprofit, to file their lawsuit with the U.S. District Court in his hometown of Springfield, Massachusetts.

A SMUG victory could provide a new tool for the global LGBT and broader progressive movements to halt what CCR’s lead lawyer in the case, Pamela Spees, calls “Americans acting badly overseas.”

“People look at Lively and his rhetoric and assume it’s a speech case or an incitement case, and it’s not,” says Spees. “A lot of people don’t understand that Lively’s role in all of this is very clear. [His assertions are] you have to wipe the LGBT groups and allies off the political map. You have to silence them. This is a campaign of persecution against a class of people; it’s not one or two violations of human rights.” Evidence that CCR has gathered for the lawsuit reveals that Lively’s work in Uganda was part of a larger global plan to strip fundamental civil rights away from all LGBT communities. She noted with irony that Lively cited the First Amendment in trying to dismiss the lawsuit last fall, when “that is the right he was hoping to strip from others.”

**SMUG v. LIVELY** was filed on March 14, 2012, almost three years after Lively accepted an invitation from a Ugandan Christian pastor, Stephen Langa, to speak at an anti-gay conference in Kampala as an “expert” on homosexuality, and later, address Uganda’s Parliament. In a videotaped lecture, Lively warned a shocked audience that gays were child molesters out to recruit and corrupt their children and destroy their society. AIDS, he charged, was a just punishment for homosexuality. Lively’s take-home message: Gays had to be stopped—a warning that delivered a “nuclear bomb against the gay agenda in Uganda,” he boasted afterward.

SMUG’s brief summarizes the fallout: a catalog of anti-gay violence and rhetoric by local Ugandan pastors, local media, top politicians, and eventually, vigilante mobs incited via radio and church pulpits—and a draconian law—to root out and kill suspected gays and lesbians. Post-conference, Langa quickly drafted an anti-gay petition signed by thousands of now-concerned parents and eventually, vigilante mobs incited via radio and church pulpits—and a draconian law—to root out and kill suspected gays and lesbians. Post-conference, Langa quickly drafted an anti-gay petition signed by thousands of now-concerned parents and eventually, vigilante mobs incited via radio and church pulpits—and a draconian law—to root out and kill suspected gays and lesbians. Post-conference, Langa quickly drafted an anti-gay petition signed by thousands of now-concerned parents and eventually, vigilante mobs incited via radio and church pulpits—and a draconian law—to root out and kill suspected gays and lesbians. Post-conference, Langa quickly drafted an anti-gay petition signed by thousands of now-concerned parents and eventually, vigilante mobs incited via radio and church pulpits—and a draconian law—to root out and kill suspected gays and lesbians. Post-conference, Langa quickly drafted an anti-gay petition signed by thousands of now-concerned parents and eventually, vigilante mobs incited via radio and church pulpits—and a draconian law—to root out and kill suspected gays and lesbians. Post-conference, Langa quickly drafted an anti-gay petition signed by thousands of now-concerned parents and eventually, vigilante mobs incited via radio and church pulpits—and a draconian law—to root out and kill suspected gays and lesbians.

SMUG’s chairman Frank Mugisha denounced their own tenants and landlords and families expelled students suspected of being gay, while landlords and families denounced their own tenants and children to avoid arrest themselves. Meanwhile, the Kill the Gays bill awaited Presidential vote into law.

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**WE ARE COMMITTED TO THE CASE. OUR RESILIENCE SENDS A MESSAGE, TOO. AS MUCH AS WE ARE SMALL, IT’S A MATTER OF LIFE AND DEATH.**
“The bill is haunting us,” declared SMUG’s chairman Frank Mugisha to reporters, “If this passes, we will have to leave the country.” Behind this “pattern of organized persecution,” the SMUG lawsuit asserts, was Scott Lively—the mastermind.

III. “THE MOMENT” we sensed that evangelical forces were wanting to come up with legislation to criminalize our work and lives, we started reaching out to legal people and churches to figure out a way to halt them,” said Pepe Onziema, SMUG’s Programme Director, during a quick April visit to CCR’s New York office to plan strategy.

Encouraged by the High Court’s ruling, SMUG continues to petition the courts to uphold Ugandan laws that bestow basic civil rights to all Ugandans, such as speech and assembly. They chose CCR, a pioneer in international criminal cases, to go after Lively. He’s charged with a violation of international law—persecution—under three forms of liability that, if proven, constitutes a crime against humanity and two violations of Massachusetts state law (civil conspiracy and negligence).

“What makes it a good fit is that international criminal law in particular deals with big crimes,” explains Spees. “Persecution is one of them.” The hallmark is “a severe deprivation of fundamental rights.” “I think the way persecutory programs come about is that they involve a combination of people. There are architects and managers, there’s a conspiracy, there are implementers, and there are people who share the intent and participate with that purpose. That is Lively’s role in this,” she says, explaining why the crimes against humanity charge fits.

Beyond Uganda, Lively has taken his anti-gay agenda to Russia and other countries and used the Internet to offer advice to lawmakers and pro-right groups on how to implement anti-gay campaigns and laws. “If you take the percentage of the LGBT population in Uganda, or in Russia, the numbers of people he has been able to strip rights from is astounding,” Spees adds.

A key aspect that’s been closely watched by legal experts is the argument of persecution based on sexual orientation, a new area of international law. In his plea to dismiss the case, Lively argued that there’s too little legal precedent to try an ATS case based on sexual orientation. Not so, say legal experts. “We are dealing with the Law of Nations,” states Ralph Steinhardt, who won an ATS case against Ferdinand Marcos years ago. “If you can establish that what he did was a tort (civil wrongdoing) and that there are international authorities making it wrong, you don’t need legal precedent. You have established the statute.” What remains is for Spees and CCR to show that Lively’s actions amount to persecution. Here, questions of intent and scale matter a lot.

“The Alien Torts Statute has been interpreted to require that violations rise to a certain level,” says Beth Stephens, an international law expert and cooperating attorney who has worked with Spees in the Lively lawsuit. “The ATS does encompass the concept of persecution based on status, and LGBT people fall within this prohibition. So I would say that working to restrict the rights of LGBT people constitutes persecution under international law and is thus a violation of the ATS.”

SMUG’s director agrees. “We are not dealing with common ordinary individuals in this case,” states Onziema. “It’s a lawsuit against Scott Lively and he’s a person our own government has backed up, so to speak. He may not be powerful in the [United] States, but he is in Uganda.” Today, Onziema and other LGBT activists remain vulnerable due to a softened but still harsh version of the Kill the Gays bill that awaits reintroduction and anti-gay attacks that continue. But the legal victory and the lawsuit have also empowered activists. “It provides us with a certain level of safety, because we know we are safe with our lawyers, and the international community knows we have this case,” says Onziema. The lawsuit also provides ammunition to educate Ugandans about the agenda of the anti-gay lobby. “We are not going to keep quiet about any form of inequality in the name of religious sovereignty,” says SMUG’s leader. “We are committed to the case. Our resilience sends a message too. As much as we are small, it’s a matter of life and death.” To activists beyond Kampala, that message is being heard. Gay advocacy and legal groups in Malawi, Zimbabwe, and elsewhere have reached out, eager to learn from SMUG and the case.

IV. WHILE FORMER dictators accused of mass crimes tend to hide, Lively appears energized by
I first started going to clubs when I was about 13. I met so many people there. My group of friends grew from a couple of people to more than fifty. It was so exciting, so fresh. It just felt really like our time—really punk and exciting. It was such a subculture. The people were a massive part of it. Meeting like-minded people was a huge draw to the club. You'd meet people you'd get on with and that you wouldn't necessarily meet anywhere else.

One thing I immediately noticed is how few club nights there are for gay women. That whole element of meeting somebody is a complete revolution. Gay women and gay men are so different in the way they socialize and meet one another.

There are loads of people I know from that time in the early 2000s that I'd see every single week—and a lot of them are still really good friends of mine. There was definitely a family thing and it lasted.

I think the main things I've noticed that have changed now—unless it's a really extreme gay club, as in they literally have to stamp the club with a name like Meat Fest—the difference now is that things are so very mixed. You can have a party in a gay bar and the crowd will be completely mixed. And nobody cares. It's absolutely fine. That wasn't always the case.
HANNAH HOLLAND
DJ (LAZERTITS @ DALSTON SUPERSTORE)

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F orty years after disco changed pop culture forever, dance music is once again king. From streaming music channels to the festival circuit to the top of the charts, the genre has never been more popular. What you call it may depend on your age: house music, techno, electronica, EDM. It’s all music designed to make you move, groove, and lose yourself to the beat.

What has changed with the passing of time, however, is the way people consume their favorite tunes. And nowhere is that change more evident than in the middle of the dance floor under that iconic mirrored disco ball. What was once the foundation for community and self-discovery (and plenty of hedonism as well) has evolved and grown to meet the needs of our harried, insta-digital lives. Goodbye to the Hustle. Adios Electric Slide. It’s time to Werk. And Twerk. And if you can grab a selfie while you’re at it, all the better.

Yes, club culture has definitely undergone an era of change. And nobody knows that better than the DJs serving up the beats in our most treasured clubs. They’ve seen it all, night after night, and lived to tell the tale. We asked eight of our favorite resident DJs to share a bit of their experience—their memories, their observations, and where they think the dance floor goes from here. These are their stories, in their own words.

MARK MOORE
DJ/PRODUCER
(S’EXPRESS)

“When I started going out as a teenager in the early 1980s, clubs were very mixed in terms of straight and gay—there was a lot of experimenting going on.

“The first proper gay club I went to was totally different. It was mostly guys, clone types. I was 16. In the 1980s, there were less avenues to meet other gay people. You had clubs, the lonely hearts column in Time Out, or cottaging [cruising for sex in public restrooms], so in the clubs the family feel was a major thing.

“I still think you get that family thing now. Although now you have so many more options to meet. You don’t even have to be on the gay scene now if you don’t want to. You can go on Grindr. If you’re a straight guy who likes to dabble you can be on Tinder and you can switch it over from searching for women to searching for men. Suddenly, you see a lot of straight guys who probably wouldn’t bother going to a gay club suddenly hooking up with gay guys. Going to a gay club isn’t as essential.

“Having said that, I don’t think it’s ever going to go away. People still want physical contact. They need it. Not just for sex, but for connecting with people who share the same outlook as you.”
“From here. These are their stories, in their own words. Their observations, and where they think the dance floor goes. Night, and lived to tell the tale. We asked eight of our favorite beats in our most treasured clubs. They've seen it all, night after night. And nobody knows that better than the DJs serving up the music, and all the better. It's time to Werk. And Twerk. And if you can grab a selfie while insta-digital lives. Goodbye to the Hustle. Adios Electric Slide.

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Louie Vega, Kenny Carpenter, Mark Moore, are all the best to meet people face-to-face and have a different kind of experience.”

“LARRY TEE
DJ/PRODUCER

I started going out during the disco era in the late 1970s in Atlanta, and there wasn’t even such a thing as gay then. So these gay discos—there was this feeling, a euphoric feeling, like, ‘Oh my god, I can’t believe there are other gays.’ And there were a lot of them. I was just thrilled.

Around that point people started coming out. Before then, people just didn’t talk about being gay. A lot of people got disconnected from their real families for coming out. So there was a sense, in the discos, that ‘this is all we have.’

I started DJing in the late 1980s, and between 1991 and 1993 I played with Frankie Knuckles at the Roxy in New York. Frankie tried to create an environment with his music that was loving, and that’s why people really felt part of the family when he was DJing. I think there is less of that in a lot of the gay clubs now. The drug culture, after-hours parties, and sex parties that happen now have something to do with that. Back in the day, it seemed like there was more emphasis on the music.

I do think the dance floor has changed the way that people view gay culture, but I still think things are really segregated, especially in America. When I was DJing the Las Vegas circuit with Steve Aoki it was really clear there was a big divide: there was the straight crowd and the gay crowd.

One of the things I think is most interesting now is that the conversation has drifted away from, ‘Oh, I’m gay,’ to the realization that there are shades of gender. It’s a new conversation that’s happening in nightclubs.”

“KIM ANN FOXMAN
DJ/ PRODUCER
(FIREHOUSE)

“I went to my first gay club when I moved to San Francisco, when I was 19. I remember I used a fake ID. It was a mixed crowd, more gay men than anything else. My gateway to the gay bars were actually raves, which were very polysexual, and I discovered many other gay people like myself who also loved dance music, which was a big turning point for me in my life. It really helped me in my process of discovering myself and my sexuality.

“I think DJ culture is really important for the LGBT community because it has so much history. The dance floor has always been a meeting place for the LGBT community, and house music and disco played a big role in bringing people together.”

“DJ culture went through some phases in New York. It has such important, legendary roots, like The Loft and Paradise Garage, but during my years of living here, New York’s nightlife has been through some hard times. After Mayor Giuliani enforced no dancing laws, it took forever for New York to get back on its feet. It was hard to find a good place to dance and a good DJ that could mix, but now its back on top again.

“I think clubs are still probably one of the best ways to meet people. People use Grindr and Tinder nowadays as well, but for me nothing is sexier than a personal connection, especially on the dance floor.”
I grew up in upstate NY and started sneaking out to clubs at 14. Of course it was mind blowing and so exciting because I wasn’t out at the time. Ain’t nothing like making out to a remix of Madonna’s ‘Crazy For You’ in the middle of a packed dance floor to get your teenage dick hard.

Clubs are very important for the gay scene. This is the first place that so many LGBT youth find their true selves and a sense of togetherness with like-minded others.

People talk about how much has changed, but the essentials remain the same: loud music, colorful characters, and a place to lose yourself.

We absolutely create our own families in this world; they are essential. The nightlife community is relatively small, we depend on each other constantly, so it’s not a scene.

There was a real togetherness among clubbers when I started going out, which I’m not sure you get so much today. Back then you really felt like you were part of something special. I feel that face to face will always be the best way of meeting, but no one can deny apps are a new middle man in the way people choose to hook up.

“What we’ve noticed by now is that young people don’t feel so much of a need to go to an exclusively gay party anymore. They can hang out comfortably with straight friends at parties that aren’t focused on their sexuality. And gay clubs have a much more open door policy these days. I think also there are a lot more prominent gay music producers who people follow now, which has brought our scene to the attention of all clubbers. The dance floor is not such a secret society to the mainstream anymore.”
NITA  
**DJ (CARRY NATION/ BLOCK 9)**

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Romantic getaway, honeymoon, or family retreat—It doesn’t matter. These 7 amazing destinations welcome same-sex vacationers with open arms.

By Shira Levine
When it comes to gay-friendly travel, New York couple Steven Cordoves and Michael Gulizio aren’t the cruise ship type. Yet, a few years back, they somehow found themselves booked aboard the Atlantis for a gay cruise in the Southern Caribbean.

“If anything, it was a great way to relax and quickly see a bunch of places,” says Cordoves, who has been with Gulizio for nine years. “Whatever we liked, we knew we could return to explore in the future.”

The first thing they discovered on the trip? They will not be returning to St. Lucia.

“When we disembarked, there were actual crowds of protesters—the locals didn’t want our ship there,” says Cordoves. “The cruise director told us to minimize contact with the people in the street. We only lasted 15 minutes walking around the port town before we gave up and got back on the ship.”

Curaçao, the Dutch Antillean Island some 500 miles to the east of St. Lucia elicited a completely different memory.

“The town rolled out the rainbow carpet!” he says. “Every business had flags. Everywhere we walked in, we were welcome.”

Typically the New York dentists, who operate the business CoreSmiles.com, rely on word-of-mouth recommendations. Following their cruise experience, they have also started using travel sites like gaytravel.com and gaycities.com to vet future excursions. “We literally do a Google search now before every trip,” says Cordoves.

For your personal safety—and for the best experience possible—we recommend every traveler do the same. To help you get started with your vacation planning, we’ve also put together a little cheat sheet of potential trips to consider. These seven destinations criss-cross the globe, from scenic beaches to historic cities and everywhere in between, and are all LGBT-friendly.

Curaçao

This beautiful island and its “Live and let live” philosophy make it a pioneer in gay and lesbian travel. The C of the “ABC Islands,” Curaçao is located just 35 miles north of Venezuela and south of the hurricane belt. That means year-round sun plus a delicious blend of cultures, as indicated by the island’s four official languages—Dutch, Spanish, English, and Papiamentu. Curaçao also boasts 17 different hotels and attractions that have been approved by the International Gay & Lesbian Travel Association (IGLTA)—the most of any Caribbean island—so it’s also the most outwardly gay-friendly of the Caribbean islands and a true safe haven for the LGBT community.

We love the chic, boutique Floris Suite Hotel in Curacao’s capital city of Willemstad—essentially, the hot spot for all things queer on the island. It’s the official host hotel of Curaçao’s annual Pride Festival, and its Rainbow Lounge is world famous for its year-round DJ’d pool parties. The nearby Mambo Beach Club turns up the fun on weekends, while vibrant Cafe de Heeren offers all-day fun with its combination café and dance club.

For adventure, Curaçao is home to some of the world’s best reefs for diving and snorkeling. Northern Curaçao’s rugged Christoffel National Park and Shete Boka National Park are ideal for hiking and exploration. Or, for a once-in-a-lifetime experience, check out the Curasub (curasub.com), a tourist-friendly mini-sub that descends 1,000 feet below the sea’s surface, offering you the chance to explore the unknown at depths far below those most divers will ever reach.
ICELAND

Home to countless glaciers and more than 30 active volcanic systems, Iceland really is the land of fire and ice it’s always made out to be. With a population of just over 300,000, it’s also a nation of tolerance and home to the world’s first openly lesbian head of state, Jóhanna Sigurðardóttir.

As capital cities go, Reykjavík packs ample pre-Cold War charm, thanks to its abundant Soviet-era architectural designs. But thanks to inspiration drawn from all those dark days when the sun never rises, it also boasts plenty of hipster-friendly cultural experiences including exotically weird bars, sexy lounges, and festive nightlife. Trúnó is the most popular gay bar in the city, with the action usually starting well after midnight.

From the capital, your options for day trips are nearly endless. Hop in a car and travel south to track down the sometimes elusive Aurora Borealis—the Northern Lights. Be sure to pack a swimsuit, too, so you can soak in the region’s natural hot springs and baths. Head west and waterfalls dot the landscape. Or, strike due north to the Snaefellsnes Peninsula, where the combination of jagged cliffs, snow-capped peaks, and remarkable seascapes provided inspiration for Jules Verne’s classic novel *Journey of the Center of the Earth*. Check out pinkisland.is for a number of affordable and well-planned day-trip options.

ARGENTINA

Brazil is a favorite escape for same-sex travelers. Yet southwest of the land of Carnival and samba lies Argentina—one of Latin America’s most gay-friendly locales. Since the country’s 2009 legalization of same-sex marriage, more than 10,000 couples have tied the knot there, and 150,000 visitors annually attend its Gay Pride.

Buenos Aires, oft dubbed the ‘Paris of South America,’ is a mecca for all things gay and cultural, with ample food, wine, music, and architecture. Plus it’s one of the most budget-friendly stops in the region.

In the southern state of Nayarit, midway down Mexico’s west coast, lies the Riviera Nayarit—192 miles of pristine Pacific Coast outlined by the Sierra Madre Mountains.

Start your visit with a trip to Punta Mita, a 1,500-acre beachfront village located on the north end of Banderas Bay and about 30 miles north of the Puerto Vallarta airport. For travelers who have money to spend, the local Four Seasons offers the grand luxury and world-class restaurants you would expect, plus adult pools, well-stocked cabanas, and even pool valets who come by frequently offering indulgences ranging from ice cream to custom cocktails to foot massages.

For those looking for a bit more affordable stay, there’s the all-inclusive Hard Rock Hotel in Nuevo Vallarta, which offers live concerts and shows every night. And should your trip go extremely well, both hotels, along with the nearby Iberostar Playa Mita, can also help to set up a “symbolic wedding” (a pre-Columbian ritual that spiritually unites a couple through the four elements).

When you tire of pools and sand, jump in your rental car to check out some of the numerous gay-owned establishments in the area, including Billy Bob’s bar in the historic port of San Blas—one of the prime bird-watching spots of the Northern Hemisphere with over 400 species showing up on a regular basis, along with resident crocodiles, butterflies, turtles, and other wildlife. Then head up to the rustic fishing village of Sayulita. Home to expats from around the globe, this vibrant surf community is filled with art galleries, local arts and crafts, and farm-to-table restaurants and is an ideal end-cap to any visit to the area.
As the first country in Africa—and the fifth in the world—to legalize same-sex marriage, South Africa is a remarkable destination. Start with a safari through Kruger National Park, with its breathtaking vistas and abundant wildlife. African Safari Consultants, a specialty operator and parent company of Savvy Navigator (which specializes in gay vacations) is a great resource.

For more intense man vs. animal experiences, consider shark-cage diving with a posse of Great Whites aboard Marine Dynamics (sharkwatchsa.com) two hours north along the Western Cape in the fishing village of Gansbaai. Boulders Beach makes for an entertaining visit with its commune of quirky and loud African penguins. And at the Spier Estate in Stellenbosch there’s a Cheetah Outreach Center, where local big cats Hemingway and Heathcliff are always looking for a bit of extra attention.

After your animal encounters, head to Cape Town. Teeming with post-colonial European style, the oceanside metropolis offers something for everyone, including ample beaches for surfers and sunbathers; a cable-car ride to the top of Table Mountain; and Camps Bay, a suburb and home to a 1786 guardhouse turned haute cuisine hot spot, The Roundhouse. And there is no point in visiting South Africa without exploring the region’s fertile wine-making valleys, which spread from Stellenbosch to Franschhoek. An especially lucky few may even score reservations at the Tasting Room, the restaurant within Le Quartier Francais resort, often referred to as the very best in all of Africa.

June is peak honeymoon season pretty much anywhere there’s a coastline. However, at Frederiksted’s Sand Castle On the Beach, co-owner Simone Walker is fairly certain September 2015 will be an even busier and more joyous time. “Legislatively, if everything goes right in June with the U.S. Supreme Court ruling, we’re going to have a massive Pride party in September,” says Walker. Since the U.S. territory is also protected by American anti-discrimination laws, the country would have plenty of cause to celebrate. “We want to wait and see and then plan something big and exciting,” she says.

A pristine stretch of beach with deep blue waters, hidden coves, and a backdrop of lush green mountaintops, Frederiksted—known locally as “Freedom City”—is where the emancipation of enslaved Africans took place centuries ago. Today, the joyous vibe is just as evident within the island’s gay-friendly community. “There’s a feeling of openness that feels like you can literally let your hair down,” says Walker. “If you like to meet perfect strangers and then become lifelong friends, this is a place where you can do that.”

Besides Sand Castle, other especially gay friendly locations on the island include the Buccaneer, Caneel Bay in nearby St. John, the Ritz-Carlton in St Thomas, and the Palms at Pelican Cove, a family-owned resort based in Christiansted.
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London in 1972 attracted only 150 people, a vibrant LGBT scene in the world. From a bar, club, or party—and the most vibrant LGBT scene in the metropolis you’re never too far away from the party. With same-sex marriage and equality legislation now firmly in place, and an ongoing tradition of diversity and acceptance. When a gay man (or woman, for that matter) is tired of LGBT London, then you can safely say that he or she was just pretending and was probably straight all along.

One of the world’s great cosmopolitan cities, steeped in history and tradition, but constantly looking to the future—see the gleaming towers straight out of Bladerunner springing up overnight in the city’s financial district—it’s a city with a long tradition of diversity and acceptance.

With same-sex marriage and equality legislation now firmly in place, and an increasing queer presence in the media and in public life, there’s never been a better time to be a gay man or woman in the UK’s capital. No matter where you are in the metropolis you’re never too far away from a bar, club, or party—and the most vibrant LGBT scene in the world.

The first-ever Pride demonstration in London in 1972 attracted only 150 people, but today’s Pride brings in 30,000 just for the parade itself, with close to a million more lining the route and joining in the parties and celebrations in any of the 100-plus gay and gay-friendly establishments in the city. Pride Day is Saturday, June 27, following a week of LGBT-themed events throughout London.

This year’s parade kicks off on Baker Street, and winds along Oxford Street, London’s premier shopping district, before heading down posh Regent Street. It’s here that the crowds of onlookers are three or four deep, so if you want a good look at the parade try to make your way to the world-famous Piccadilly Circus and the Eros statue, where you’ll get a better view.

Everything wraps up in iconic Trafalgar Square, where a main stage hosts a series of live acts and speeches of support from the main political parties, before decamping to the nearby gayborhood of bohemian Soho, with parties lasting here and in the capital’s other two main LGBT villages well into the night.

**SPOTLIGHT ON...**

**LONDON PRIDE 2015**

*By NIGEL ROBINSON*

They say when a man is tired of London then he’s tired of life. When a gay man (or woman, for that matter) is tired of LGBT London, then you can safely say that he or she was just pretending and was probably straight all along.

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**SOHO, CENTRAL LONDON**

Still the soul of gay London, Soho remains queer central, despite the emergence of new gay villages to the south and the east of the city. Its days of red-light sleaze have long since passed, but it retains its raunchy and sexy charm, even in the face of increasing gentrification and a number of bars, both gay and straight, closing in recent years across the capital. Nowhere else will you find more gay and gay-friendly establishments in such a small area.

Soho has embraced the LGBT community ever since Oscar Wilde famously dined with his “panthers” at Kettners restaurant (29 Romilly Street), and poets Verlaine and Rimbaud engaged in drunken quarrels on Old Compton Street. The grande dame of Soho remains Comptons (52 Old Compton Street), a refreshingly down-to-earth and “blokey” pub.
usually packed nightly with men of all ages and types. Downstairs can be, cru‐
y and while the upstairs lounge bar is more laid back and feels almost like a gentleman’s club.

Just around the corner, Rupert Street (50 Rupert Street) attracts a more stylish and fashion‐
conscious crowd, serving food during the day, and featuring DJs in the evening to bring in the pre‐clubbing crowd. Opposite, The Yard (57 Rupert Street) is a little piece of New York in London with a loft‐style bar and an open courtyard, making it perfect for cocktails on long summer evenings.

G.A.Y. (30 Old Compton Street), the biggest bar in Soho, is cheap, trashy, and doesn’t mind who knows it. Popular especially with the younger “gaybies,” its soundtrack of cheesecake pop hits, plasma screens, and cheap drink promotions guarantee you a fantastic night out. Also popular with the party crowd are the two Ku Bars (38 Lisle Street and 25 Frith Street), with easy vibes and famously good‐looking barmen, and She Bar (23a Old Compton Street), a recent and welcome stylish addition to the capital’s lesbian scene.

Drag has always been a feature of the London gay circuit, and with the sad demise this year of north London’s Black Cap, one of the best places to get a drag fix is Molly Mogg’s (2 Old Compton Street), a friendly and tumbledown one‐room boozer probably half the size of your living room. If your idea of drag is RuPaul, then you’re in for a shock: British drag owes more to Victorian music halls than twenty‐first‐century drag races—it’s loud, brash, and often very filthy!

LGBT Soho is more about pubs and bars than clubs, but for a swish and sophisticated night out you can’t do any better than the swanky Shadow Lounge (5 Brewer Street). Technically a members’ club, if you dress to impress you should get in, and you might even spot the odd Brit celebrity behaving disgracefully on its state‐of‐the‐art dancefloor.

Now part of the G.A.Y group, legendary superclub Heaven (Villiers Street) draws one of the most diverse crowds. Top nights include Porn Idol on Thursdays, and G.A.Y on Saturdays, when the club features live pop acts (Madonna and Kylie have both performed here).

VAUXHALL, SOUTH LONDON

Over the past decade or so, the growth of Vauxhall as a gay village, just ten minutes’ tube ride from central London, has been phenomenal. The center of gay clubland, it doesn’t get going till late, but when it does, it packs an explosion that will get you dancing from Thursday evening to Monday morning and beyond.

Fire (39 Parry Street) is the fierce and pumping, hands‐in‐the‐air, amyli‐up‐the‐nose, perfect‐pecs hedonistic heart of Vauxhall, a never‐ending mini‐circuit‐ party for the hardcore that seems never to close and plays host to some of the biggest and most frenetic club nights in town including Beyond, A.M., and the legendary Orange. Queen of the Vauxhall scene, though, is the Royal Vauxhall Tavern, or RVT as it’s known (372 Kennington Lane). The oldest gay venue in South London, it’s a place that every LGBT tourist should visit at least once in their lives. It’s the home of a crazily varied range of club nights, including alternative comedy performances, gay bingo, the unmissable Duckie on Saturdays, and the Sunday Social, featuring cutting‐edge cabaret and an up‐for‐it and friendly crowd grooving to commercial house and dance anthems. We have it on good authority that Freddie Mercury once brought Princess Diana here dressed as a man (Diana, that is, not Freddie!).

Not actually in Vauxhall itself, XXL (at Pulse, 1 Invicta Plaza) deserves a mention as one of the more attitude‐free men‐only venues in south London. Originally for bears only, it now attracts a crowd of all types and ages up for a good time of boozing and cruising to commercial house.

EAST LONDON

A vaguely defined area that includes the trendy East End areas of Shoreditch, Hoxton, Hackney, Dalston, and Haggerston, this is hipster heaven and a welcome change to the sometimes over‐ commercialized scene in Soho, or the manic, full‐on intensity of Vauxhall. Most venues and nights here are polysexual, some are downright weird, and you’ll discover a real sense of queer community and innovation that you might not find elsewhere.

The legendary Joiners Arms is no more and is being turned into apartments, but making a play for the title of queen of the “Faggarston” scene (as they like to call it around here) is newcomer The Glory (281 Kingsland Road). Run by alternative drag legend Jonny Woo, it’s already making waves on the East London scene, describing itself as a super‐pub, a cutting edge performance space, and a late night disco haunt.

Just down the road, the George & Dragon (24 Hackney Road) has been packing in the hipsters, the fashionistas, the sexually suspicious, and the uselessly beautiful for years. A true East End queer gem, it’s best to get here early to enjoy great tunes from some of the most innovative DJs around.

Open throughout the day, the Dalston Superstore (117 Kingsland Road) really comes into its own at night with some great DJ nights, including Dirty Diana, Jon Pleased Wimmin, and Clam Jam for “lesbians and their gay boyfriends,” while East Bloc (217 City Road) serves up a variety of wild nights Wednesday through to Saturday.

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What Pride Means to Me...
By Margaret Cho, comedian, actress, and all-around badass

“I grew up in San Francisco in the seventies, so I learned about Pride early on. The first march I went to was probably around ’77. I’d been to smaller events before that, though…the sense of political conscience was always around me.

“My activism started with Harvey Milk. He was really the first political figure that I came to admire and love. His assassination was such a terrible thing. It wrecked the city and our community for a long time. I remember my parents wouldn’t let me go to his vigil because they thought it would be too sad for me, too much tragedy. It was very spontaneous and important—almost like a Pride event in its own right.

“Comparing that to Pride today, the change is incredible. It’s really exciting to see these huge, very celebratory events. I’ve been to Gay Pride events all over the world. And when you see how incredible and diverse they are while still having the same sort of feeling of celebration—it’s really empowering and exciting.

“When I think about Pride now, it’s about community, self-acceptance, and love for the people around you. It’s a celebration of being different but also of having this common sense of family. For those who are struggling and looking for family or self-acceptance, just know that it keeps getting better and better all the time. I’ve seen it in my own life. You sort of grow into what you’re meant to be.

“If you’re an LGBT youth, acceptance can be very hard in the beginning. You do feel different and you do feel like you don’t belong. Having Pride is vital in these cases. It helps you connect to the community and learn that things are always going to be changing for the better. If you want to make a difference, go online. Go on social media. Comment on things daily. Make jokes. That’s the final part of being proud—knowing that everyone can play a part in educating the world on what we should be doing and where we should be, and bringing it all to a better place.”

CATCH MARGARET’S NEXT COMEDY SPECIAL, PSYCHO, ON SHOWTIME THIS FALL. FOR A FULL RUNDOWN OF HER LIVE CONCERT TOUR DATES (INCLUDING SOME THIS SUMMER) AS WELL AS TIDBITS ON OTHER FUTURE PROJECTS, GO TO MARGARETCHO.COM.
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