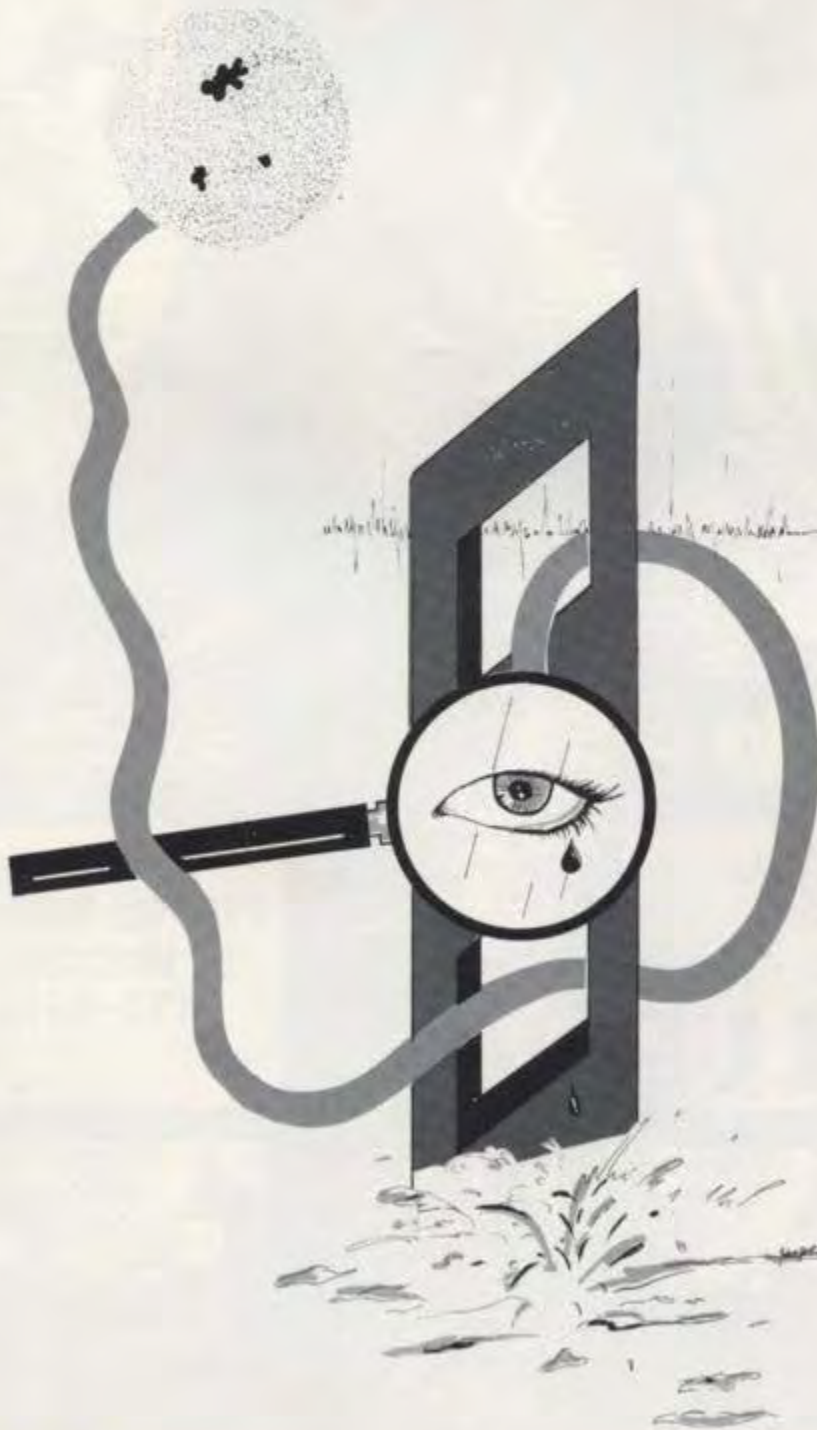


*The
New Voice*

O F N E B R A S K A



Our Turn

The Cover

Artist John Jett from Lincoln contributed his first cover for *The New Voice*. The work is entitled "Discovering the Disease," and clearly depicts the theme for this issue which is gay/lesbian health concerns. John can be reached by writing 4312 L St., Lincoln 68510, phone 488-1371. Contact him for freelance artwork.

To Good Health . . .

A toast to good health. May all gay men and lesbians take good care of their health through exercise, good eating habits, plenty of sleep, and avoidance of harmful chemicals such as cigarettes, liquor, drugs and poppers.

There was a time when I was growing up that the emphasis on good eating habits and exercise was not as predominant as it is now. Like others in my generation I had access to plenty of junk food. In junior high it was cool to smoke cigarettes. In high school I was introduced to marijuana at parties. College offered a wider assortment of available drugs and it seemed perfectly natural to take caffeine pills to stay up all night in order to cram for exams.

After college I accepted my sexuality and started drinking in gay bars. I also found it socially acceptable to use poppers. Wherever you went there were bad influences.

Today, exercise and a proper diet are all the rage. Look young, feel good and live longer. More gay men and lesbians are joining health clubs; more people are eating yogurt or salad for lunch.

Reality also has changed the lives of many people. AIDS, a deadly disease, has struck many gay men across the country. More men are becoming conscientious and are taking steps to protect their bodies. An increasing number of gay men are forming monogamous relationships or reducing their number of sexual contacts. Condoms and safe practices are becoming an important part of sexual exploration.

I hope that everyone reads this issue very carefully. Let's

look more carefully toward the future rather than to immediate gratification or peer pressure. To good health! Cheers!

--Larry Wiseblood, Editor

Coffeehouse Reunion

Remember the old Coffeehouse held at UMHE Commonplace in Lincoln? (The building near 14th and "Q" was sold to the University of Nebraska a few years ago.) Weekly dances, political meetings, a rap line, newsletters, and other social activities were common at UMHE in the late 60's and early 70's.

A reunion of people who attended Coffeehouse is being planned for June of '86. If you are one of these people please send your name and address to:

Reunion Committee Headquarters
26 South Holman Way #4E
Golden, Colorado 80401

Hurry so you can receive the April RCH Newsletter! It will include an update of people who have been contacted as well as a list of people whose addresses we need.

The mailing list is up to 140 people. Donations are appreciated to help cover the costs of mailing.

--Katie B.



Contact the following staff of *The New Voice* for advertising, classifieds, subscriptions, and articles:

Jerry Peck, Omaha
345-2181

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April 1986

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The New Voice of Nebraska

P.O. Box 80819
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Events

Romanovsky and Phillips to Perform in Lincoln

San Francisco-based singers/songwriters Romanovsky and Phillips have announced their plans for a two month spring tour for 1986, which began Feb. 22. The duo will take their music to college campuses, cabarets and concert halls in over 30 cities from Boston to Seattle. On April 18 Romanovsky and Phillips will be in Lincoln, performing at the Nebraska Union. The performance is sponsored by the UNL Gay/Lesbian Student Ass'n. as the main attraction for Gay/Lesbian Student Month.

Romanovsky and Phillips have been performing their original, out-of-the-closet music for over 3 years. Known for soaring harmonies, uproaring lyrics, and off-beat stage presence, Romanovsky and Phillips have won praise from critics, gained a loyal following all over the country and established themselves as pioneers in the world of gay men's music. Tickets are \$3/students, \$4/general admission, and are available at the UN-L Student Union, Kelly's, The Club, Cherchez la Femme, and The Boardwalk.

Dr. Clark Taylor to Conduct Workshops on Eroticizing Safe Sex

"When I was new to condoms, I asked experienced users what they did to make condoms hot. With their suggestions, I began an adventure which transformed me from a rubber-hater to an avid devotee," says Clark Taylor, the noted San Francisco sexologist, in his lead article for the *Hot 'n Healthy Times*, a safe-sex newspaper printed in San Francisco for which Dr. Taylor is writer, researcher, and technical consultant. Dr. Taylor's enthusiasm is no doubt a key ingredient in the success of his risk-reduction and safe-sex workshops, which have been packing 'em in in California. The workshops have been given for gay, bisexual, and heterosexual high risk groups, sponsored by the San Francisco Public Health Dept., the San Fran-

cisco AIDS Foundation, Stanford Univ. and San Francisco State Univ. They feature a relaxed, responsive atmosphere where participants learn that eroticizing the safe-sex guidelines is not only possible, but pleasant.

Thanks to the sponsorship of the Coalition for Gay and Lesbian Civil Rights, Dr. Taylor will conduct a workshop in Lincoln on Sat., Apr. 26 from 1:30-5 p.m. at the UNL Student Union. Space arrangements are courtesy of the UNL Gay/Lesbian Student Ass'n. The workshop is open to the entire community on a donation basis. James Broughton's all-male film "Devotions," with original music and poetry, which depicts the many ways men can be sensuous and tender, will be shown. The Imperial Court is considering providing funding for a second workshop, which would be conducted in Omaha Sun., Apr. 27, at a site to be announced. The Nebr. workshops will be entitled "How to Have a Hot and Healthy Romance: Eroticizing the Safe-Sex Guidelines."

As guest speaker at Stanford Univ. this year, Dr. Taylor said that people will have to depend on themselves, not the federal government, to prevent the spread of AIDS, because federal agencies sidestep their responsibility to disseminate explicit guidelines on safe sex. "America will survive its embarrassment, but we will not survive AIDS," he said. "We have to get serious about prevention." The Institute for the Advanced Study of Human Sexuality, where Dr. Taylor is an associate professor of sociology, has already produced two inexpensive educational videos in its AIDS prevention series, one of which is the favorably reviewed "All Hands on Dick." They are currently working on a third, "Rubber Crazy."

Those wishing further information about Dr. Taylor's visit, or about the AIDS prevention videos, may contact the Coalition's Health Concerns Committee at 483-1491, evenings.

YWCA Features Lesbian Films

The YWCA Womyn's Cultural Salons on April 18 will feature three Australian Lesbian films: 1 sci-fi, 1 soap-opera comedy, and a serious look at relationships. The films will begin at 7:30 p.m. at the Y. Admission is \$2.00. (Womyn only, please.)

Dorian Drake Wins Miss Stage Door '86

Dorian Drake, competing in a field of 6 contestants, won the 1986 title of Miss Stage Door at festivities held on March 15. Misty Lei was crowned 1st runner-up and Daniel Logan won the title of 2nd runner-up. Other contestants were Sabrina Golightly, Reva Shayne, and Echo LeAnne. The Miss Stage Door contest is the longest running show event in Nebraska and has seen 11 years of exciting competition. Dorian Drake performed to "I'll Never Love this Way Again" and to the mix "The Gift/Dangerour." Misty Lei's performance was to "New York, New York" and was followed with "How Will I Know." Danielle Logan displayed her talents with the songs "Invisible" and "Somewhere." Special entertainment was provided by Laura Lee--Empress V, Anne Marlow--Miss Stage Door 1985, and M.C. Liesa Durant, who was 1980 Miss Stage Door. Judging the show were Barb Johnston, Clayton Landholm, Tommy Maver, Toadie-Empress III and Vince Percy who is also known by his stage name Velvet-Empress IV and current Miss Gay Nebraska. The D.J. was Donry Schmidt and holding the spotlight was Roger. Special thanks also goes to the manager, Tom Deckard and owner, Mr. Bergeron.

Miss Stage Door Review

1976 Renee Sheridan
1977 Mandy Doolay
1978 Dionne
1979 Jody
1980 Liesa Durant
1981 DeeDee
1982 Dietra Snow
1983 Chantelle Lace
1984 Laura Lee
1985 Anne Marlow
1986 Dorian Drake

--Larry Wiseblood



Feminist Margaret Randall Keynote Speaker During Women's Week

Margaret Randall, internationally recognized feminist, poet, and writer who is currently embroiled in a legal battle with the U.S. government seeking the right to remain in the country of her birth, will be in Lincoln, April 7 to give the keynote address for Women's Week, at 7 pm in the Nebraska Union Ballroom. Ms. Randall's talk is free and open to the public. Ms. Randall's visit to Lincoln is organized by UNL's Latin American Solidarity Committee (LASCO).

The Center for Constitutional Rights has filed a federal lawsuit on behalf of Ms. Randall. On October 2, 1985, Randall was told to leave the United States because an immigration official in El Paso, Texas, felt that her writings were too critical of certain U.S. policies. Randall, who was born in New York

City and raised in Albuquerque, New Mexico, gave up her U.S. citizenship in Mexico in 1967 to better provide for her three small children. She is now married to a U.S. citizen. Her elderly American parents and her brother reside in New Mexico.

The lawsuit raises fundamental questions about the constitutionality of the controversial McCarran-Walter Act, the McCarthy-inspired law passed over President Truman's veto in 1952. Several of this country's most prominent writers, including Alice Walker, Kurt Vonnegut, Grace Paley, Arthur Miller, and Norman Mailer, are seeking to reverse the Immigration and Naturalization Service (INS) decision (October 2, 1985) which denied her application for permanent status. Ms. Randall's latest trial, March 17, 1986, has ended with no final decision on her status.

Ms. Randall's visit is sponsored by the Latin American Solidarity Committee, the Women's Resource Center, a grant from the Nebraska Committee for the Humanities, the Central American Response Team, Women's Studies, UNL Convocations Committee, The

University Program Council, and the Fund Allocations Committee.

For more information, call Cindi Douglas (President of LASCO at 472-2597).

UNL Women's Week April 6-April 12

April 6: Women and Leadership Conference 12:45-7:30, East Campus Union. For current and potential leaders to learn additional leadership skills, interact with each other, meet leading Lincoln women.
Coffeehouse 6:00-11:00, Nebr. Union, 14th & R St. in the Crib, admission \$1. Features local women musicians & poets.

April 7: Margaret Randall-- Press Conf., 10:00 a.m., Nebr. Union, 14th & R Streets.
Open House 10:00-2:00, Women's Resource Center, 117 Nebraska Union.
Women's Crafts Exhibit 10:00-7:00 in Main Lounge, Nebraska Union.
Margaret Randall-Keynote Speech 8:00 p.m., Nebraska Union.

April 8: Woman's Spirit/Woman's Heart/Woman's Power 10:30 a.m.-

...Continued on page 4

please don't be left:

out in the
cold

How to have a hot n' healthy
Romance.....

eroticizing the safe-sex
guidelines.....

with Clark Taylor, Ph.D.

workshop for the community
sponsored by the Coalition for
Gay and Lesbian Civil Rights

Lincoln...Saturday, April 26
UNL City Union 1:30-5:00PM
(courtesy UNL/GLSA)

12:30 p.m. with Carol Bedient, Reflective Journeys, Cornerstone UMHE, 640 N. 16th.

Women and Eating Disorders:
A Nutritional View 1:30-3:30
with Karen Creswell, MSRD, HealthAmerica, Sandoz Main Lounge, 820 N. 17th.
Women Poets Read 3:45-5:30, English Dept. Lounge, 228 Andrews Hall, UNL Campus.
A Multicultural Dialogue 5:00-8:00 p.m., with members of the Women of Color Task Force, St. Marks, 1309 R St.

April 9: Women, Alcohol and Drugs (panel) 10:30-12:30 p.m., Georgian Suite B, Nebr. Union, 14th & R Streets.
Voices Behind the Wall 1:30-3:00, discussion by women in transition from prison about their personal and psychological needs, sponsored by the Transitional Life Center, Georgian Suite B.

Madonna Thunder Hawk and a panel from WARN 3:00-5:00, Regency A, Nebr. Union.
Activist for Native American rights and co-founder of Women of All Red Nations (WARN).
Followed by reception, 6-8 p.m. at the culture center.

April 10: Abuse of Women I:
Panel Presentation 10:30 a.m.-12:30 p.m., Georgian Suite B, Nebr. Union, 14th & R Sts.
Panel members will discuss several perspectives on violence against women.
Disposable Careers: Coping with Work and Family Conflicts, 1:30-3:30 with Jan Beeds, M.A., Georgian Suite B, Nebr. Union.
Casselberry & Dupree, 5 p.m., East Campus Great Plains Room.
Admission \$6.00 UNL students, \$7.00 non-students. Dynamic singing duo of African-American women "making music about women, about oppressed people in general and our own people in particular." (Listen for them on The Wimmin's Show).

April 11: Abuse of Women II:
10:30-12:30, Georgian Suite B, Nebraska Union, 14th & R.
Film and discussion on sexual harassment.
Judy Sloan, 8:00 p.m., Nebr. Union Ballroom. \$4.00 UNL students, \$5.00 non-students.
Character actress/comedienne,

Monday, April 14:
movie: "Rosie the Riveter" shown at 3:30 pm and 6:30 pm in Olin A, ground level, between Smith-Curtis and Olin Science Hall

"Career Expectation: Issues in the Workplace"
8:00pm Alabaster Lounge, 2nd floor, Old Main
Issues to be discussed: Sex Role attitudes, Sexual Harassment, Discrimination

What can women and men expect in the work place?
Do women and men expect the same in responsibilities? advancement? treatment?

Tuesday, April 15:
"Woman to Woman"
3:00pm, Alabaster Lounge, 2nd floor, Old Main
Carol Rogers, a sex therapist, will be sharing in an informal session--a discussion on women and sexuality.

"Women without Men: Living Arrangements"
7:00 to 8:30pm, Smith-Curtis Building, room 221

Women today live in situations outside of the traditional family setting. This panel will address the varieties of living arrangements available in this community and across America--the single woman, the divorced woman, the widowed woman, the lesbian woman, and the roommate and community participant.

Wednesday, April 16:
Wesleyan chapel speaker: The Rev. Debra J. Tompsett
-United Church of Christ, Blair
-United Methodist Church, Kennard
10:00am, Social Pit, 1st floor, Smith-Curtis Building

"Dating Expectation and Sex"
3:00pm, Alabaster Lounge, 2nd floor, Old Main
-5:00pm

Good relationships just don't happen, they have to be built. What are the possible roles you can play in building a relationship?
How do you prevent relationships from becoming exploitive?
Is date/acquaintance rape really becoming a problem?

"Women's Voices"
7:00 to 10:00pm, Elder Gallery, in the Vance D. Rogers Music Building, NW corner of the N.W.U. campus

An evening of song, dance, poetry, prose and artwork featuring Amethyst, Katie Boner, Bridget & Friends, Van Nee Van Vleck, Lori Hand, the Alligator String Choir, Twyla Hansen, and senior women artists: Ackerman, Knopp-Mohr, Lee, and Rudd.
A SPECIAL EVENING!!

Thursday, April 17:
"Parenting in the 80's"
7:00pm, Alabaster Lounge, 2nd floor, Old Main

-raising children in a non-sexist environment
-sharing roles
How can we create a non-sexist environment? Panel will include two married couples and two single parents.

Friday, April 18:
Forum Speaker: Charito Planas*
10:00am, Olin B

Play: "Sounds of our Town" written by Barry Mendrix and directed by Tracy Armagost (both N.W.U. students) April 18 & 19 at 7:00pm in the Enid Miller Lab Theatre, in the Annie McDonald Theatre Building, 51st & Washington. The play is about family relationships and how this particular family handles them.

Booth Fair, Great Hall, Smith-Curtis Building 9:00am to 3:00pm
Women's organizations will display brochures, flyers, posters, and mobil displays telling about their group and what they have to offer women in this community. As many as 50 groups may participate throughout the day.

*Charito Planas, who is speaking on Friday, April 13, is a businesswoman and lawyer as well as having been the first woman to direct the 75 year old Chamber of Congress of the Philippines. When martial law was declared in her country, her involvement in politics--particularly her support for the poor and oppressed--resulted in Marcos jailing her for 14 months without charges. She spent several months in solitary confinement.

In 1978, Ms. Planas ran with her longtime associate, Benigno Aquino, for a seat in the Philippine Parliament. Her attempt to expose the corruption and monumental vanity of Marcos resulted in her almost being arrested again. Fortunately, she was able to escape the Philippines. She now lives in the D.C. area and is using her dynamic speaking skills to tour the U.S.--speaking out about her experience.

Joseph Gerson says of a speech given by Ms. Planas at a conference on nuclear arms: "The standing ovation she received was both an expression of our deepest respect for her and a way for us to hold back the tears."

Quite a few women at Nebraska Wesleyan have been working on this Women's Week (N.W.U.'s first in 10 years) throughout the academic year. A great deal of thought and energy has been put into it, so plan to attend!!!

afs

Women's Week at Nebraska Wesleyan

Nebraska Wesleyan University has set aside the week of April 14 through April 19 to recognize and celebrate the accomplishments and contributions of women in work, community, and family. All women in the community are invited to attend the scheduled panels, speakers, and entertainment. The following is a day-by-day schedule of events:



Wheatley Moves Audience at Spirituality Conference

The Spirituality and Homosexual Persons Conference held February 28-March 1 explored the hope and the pain of being both Christian and homosexual.

The keynote speaker, retired United Methodist Bishop Melvin Wheatley, an outspoken supporter of gay and lesbian Christians, moved the audience with his powerful testimony. Wheatley declared that it was through homosexuals that he knew, including among others, a doctor who saved his life and his own son, who died two years ago from cancer. The former Bishop said that he came to realize that many of the prejudices against homosexuals were unfounded. "All our lives we have dialogued with gays, lesbians, and bisexual persons. We have done it through cruel closeting and whispered innuendo. A subject without a face is powerfully and spiritually destructive."

Wheatley stated that homosexuality, just like heterosexuality, is a "gift of God's grace. What I do with it is my personal, moral, and spiritual responsibility. It is neither a virtue nor a sin, but it can be sinful, promiscuous, or brutal. Or it can be other-centered, loyal, beautiful, and profound."

Wheatley argued that homosexuality arouses such violent reactions in people because it touches five important areas in our lives, including our own sexuality, our otherness, our need for change, burnout, and now with the AIDS crisis, even death.

The dialog conference also included six workshops--Reconciling Congregations, Biblical/Theological Understandings, Counseling Issues, The Church and AIDS, Family Issues, and the Church and Homophobia.

Over 60 people, from many religious traditions, gay, lesbian, bisexual, heterosexual, aged 20 to 80, lay and clergy, attended the conference which was sponsored by committees of seven denominational and interdenominational groups. Many of these 60-plus people left the conference with a renewed sense of hope

and encouragement from the speakers and other participants in the workshops. Yet, there was also a sense of the pain of separation and/or lack of acceptance from the churches of which they desire to be a part.

50's Night is a Success

AND A GOOD TIME WAS HAD BY ALL! The 50s/60s night at The Chestfield on March 15th went off with a BIG bang. The evening started at 8 pm with the songs my lover spent 20 hours (honest-- 20 hours!) taping. Now, that's 20 hours of taping to get three

90 minute tapes. The poor woman had rug burns on her knees. And they weren't from getting wild and crazy, either! (Guess I wasn't in the right place at the right time. Darn!) So let's give credit where credit is due. The whole thing was Mouse's idea.

The absolutely amazing thing was that, although ex-lovers of ex-lovers were all there, there wasn't even any tension in the air! Everyone got along just fine. In fact, people who hadn't spoken to each other for a long time were even friendly with each other. Wish it could be that way always, but everyone will probably be back to normal and not speaking the next time

... Continued on page 6

ROMANOVSKY & PHILLIPS



Photo by Steve Kung

IN CONCERT Celebrating their Spring '86 National Tour

Nebraska Union Centennial Room
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Tickets available at:

UN-L City Union Kelly's The Club
Cherchez la Femme The Boardwalk

Sponsored by UN-L Gay/Lesbian Student Association
Promoted by Meg Christian
For information, call 472-5644



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they meet up again. Be that
as it may, I shall continue--

Another surprise was how many
people actually dressed for the
era! We even had Sha-Na-Na there!
And a dyed-in-the-wool "biker."
And a clean-cut greaser (I think
stock in Brylcreem must have hit
an all-time high that weekend.).
And bobby-soxers. The trophy
for best greaser went to Little
Feller. You'd swear you had
stepped into a time machine
and went back to the 50s when
you looked at her!

Rosie & Becky got the trophy for
the jitterbug contest. Yours
truly screwed up a bit, so Mouse
& I ran a close second. But
we did win the booby prize--
which Mouse said I needed more
than she did. Unfortunately,
I'm inclined to agree with her.
But I'm working on that.

To continue, Cowboy & I won the
trophy for the twist contest.
How we lasted through three
twist songs and not require
oxygen is beyond me, but we
did it. We had some tough
competition, for sure. And
yours truly won the best bobby-
soxer trophy. For the most part,
everyone stayed relatively sober;
no one got rowdy. We all simply
enjoyed ourselves.

ALL Mouse & I have to say about
it is that we've retired from
doing any more planning for
things like this. If someone
else wants to plan it and put
it all together, we'll be there
to support and enjoy.

Yes, a good time was had by all.
We all turned the clock back for
a night and thoroughly enjoyed
ourselves. Some of us even
went to breakfast as greasers
and bobby-soxers! But we sure
paid the piper on Sunday. To
the best of my knowledge, every-
one just sat and did nothing on
Sunday. How on earth did we
dance so much when we were in
school and not suffer the next
day??? Mouse says it's because
we were 20-25 years younger then.
Oh, well (sigh). Anyway, thanks
everyone for making the 50s/60s
night such a smashing success.
See you all around!

--CLA



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Health Concerns for Men

Venereal Disease

The term "venereal disease" is used for certain infections which are almost always passed on by sexual contact. The micro-organisms that cause them usually live in the infected person's genitals—or in some other place (such as the mouth or anus) where they have been put by sexual activity.

To infect another person, they usually have to enter the body through an orifice (such as the genital opening, anus, or mouth), and sexual activity gives them this chance. The first symptoms of disorder appear on the part of the body that has been in contact with the infected part of the infected person. Some are caused by bacteria, some by viruses, some by other micro-organisms. It is important for gay men to be aware of the different diseases caused by sexual contact and take whatever precautions are necessary.

Syphilis

Sometimes nicknamed "the pox" or "scab," it is the most serious of sexual infections. The Nebraska State Health Department reports that the number of cases of syphilis in the past few months has been going up at an alarming rate. A representative of the health department visited some local gay bars because of concerns about the increase of cases.

The incubation period is the period from which you catch the infection to the time you show the first signs. In syphilis, this is between 9 days and 3 months (usually 3 weeks or more). About 1000 germs are typically picked up on infection. After 3 weeks, they have multiplied to 100-200 million. If the disorder is untreated, they can invade the whole body, eventually causing death.

Syphilis has four stages:

I. Primary Stage: the first symptoms are seen in the parts of the body that have been in contact with the infected

person—such as the genitals, rectum, or mouth. A spot occurs and grows into a sore that oozes a colorless fluid (but no blood). The sore feels like a button: round or oval, and about 1/2-inch across. A week later, the glands in the groin may swell. There is no feeling of illness, and the sore heals in a few weeks without treatment.

II. Secondary Stage: bacteria has spread through the entire body. It may occur right after the primary stage, but usually there is a gap of several weeks. Symptoms may include headaches, loss of appetite, general aches and pains, sickness, and perhaps fever. Also, there are breaks in the skin, and sometimes a dark red rash, lasting for weeks or even months on the back of the legs, front of the arms or face, hands, and feet. Other symptoms can include hair falling out in patches, swollen glands throughout the body, and sores in the mouth, nose, throat, or genitals. All symptoms eventually disappear without treatment between 3 weeks to 9 months.

III. Latent Stage: This may last for a few months to 50 years. There are no symptoms. (After about two years, the person ceases to be infectious), but presence of the syphilis can still be detected by blood tests.

IV. Tertiary Stage: This occurs in about one-third of people who have not been treated earlier. The disease can now show itself by causing permanent damage to one part of the body. Common are ulcers in the skin and lesions on ligaments, joints, or on bones. These are painful, but tertiary syphilis is more serious if it attacks the heart, blood vessels, or the nervous system. It can then kill, blind, paralyze, cripple, or render someone insane.

Syphilis is not easy to diagnose. Its symptoms are often mild or indistinctive. Testing sores for bacteria or blood for antibodies is necessary. Neither always works, so repeat tests are important.

Treatment: Recent studies have reaffirmed the effectiveness of

penicillin in the treatment of syphilis. For primary, secondary, and latent syphilis, the treatment of choice is benzathine penicillin G. Syphilis in patients allergic to penicillin should be treated with tetracycline or erythromycin in the dose appropriate for the stage of infection.

Gonorrhea

Gonorrhea, which is sometimes nicknamed the "clap," has spread very rapidly among young people in recent years. There are over a half million cases reported in the USA every year, and the true figure is probably many times that number.

Like syphilis, gonorrhea is caused by bacteria that thrive in warm, moist linings in the urethra, rectum or mouth. It is normally passed on by sexual contact and cannot be picked up by physical objects. Unlike syphilis, the form of sexual contact involved is normally only genital or anal intercourse. Oral contact does not often pass on gonorrhea.

Symptoms in Men: After incubation (usually under a week, but sometimes up to a month), gonorrhea in a man shows itself in discomfort inside the penis, pain or burning sensation on urinating, and can involve a thick discharge, usually yellow-green from the tip of the penis. Later, it may spread to glands leading off the urethra and the bladder. Infection of the testes can also cause hard, tender swelling. If the infection is left untreated (testes), sterility may result.

If oral contact results in infection, it is mainly as a throat disorder that is often not recognized as gonorrhea. It is also unlikely to infect others because the lymph tissue where the bacteria can survive are deep in the tonsil area. Unlike syphilis, gonorrhea usually remains localized, but if left untreated can finally spread to the blood stream and infect bone joints, causing arthritis. Gay men can be infected in the rectum during anal intercourse. Often there

...Continued on page 8

are no symptoms, or only a feeling of moistness in the rectum.

Gonorrhea is diagnosed by laboratory analysis of any discharge or from a smear of an affected area. It is very important that gay or bisexual men let the doctor or therapist know about their lifestyle so the proper tests can be taken.

Treatment is with antibiotics, usually penicillin, although many forms of gonorrhea are becoming more resistant to it. Apart from avoiding infecting others through intercourse, the person being treated should also avoid masturbation and alcohol, since both can irritate the urethra and interfere with the cure.

Gay or bisexual men who have multiple sex partners should be tested for gonorrhea/syphilis on a regular basis. It is recommended that testing be done every 3-6 months. If you are uncomfortable going to your own private doctor, clinics are available in Omaha and Lincoln at no charge, and they do provide confidential testing.

Lincoln: Lincoln-Lancaster County Health Department
2200 St. Mary's Ave. 471-7800
Hours: Tuesdays: 1-3 pm
 Thursdays: 5-7 pm
Donations accepted.

Omaha: Clark Street Clinic
1728 No. 22nd 444-7750
Hours: Monday & Thurs 5-6:30 pm
 Tues & Friday 2-3:30 pm

Genital Herpes

Genital herpes is caused by a virus. The virus enters the body when a person comes into direct contact with someone who is infected and is shedding the virus. Sexual transmission is the most common way this happens. Once the virus is established in the body and an active infection develops, the individual exposed is capable of passing the virus to another person.

Once infected with genital herpes, a person may have recurrences throughout life. Unlike gonorrhea or syphilis, genital herpes is a virus and cannot be killed by anti-biotics such as penicillin. So presently, there is no cure.

Best estimates are that at least 5 million people in this country are infected with genital herpes.

Approximately 2 to 20 days after exposure, the first symptoms may be minor rashes or itching in the genital area. Then, one or more painful blister-like, fluid-filled lesions, sores or clusters of lesions usually develop. Also, swollen lymph glands, fever, aching muscles and a general "sick" feeling may develop.

The sores will eventually dry up and disappear, usually within a week to a month. The apparent "spontaneous" cure is, in fact, no cure at all. Even though the symptoms have disappeared, the disease has not. The virus remains alive inside the body. Recurring sores resemble the way they appeared initially, but usually aren't quite as bothersome. A person with genital herpes is advised not to have sex whenever the genital herpes sores are active, as the sores are highly contagious. Also, good hygiene is important while the sores are active.

Medications are available on the market to relieve the pain. But medication can't cure the virus or reduce the time the sores will appear.

Hepatitis B

Hepatitis B is a serious, sometimes fatal disease of the liver, which is transmitted from person to person by blood or by fluids that the body makes from blood, such as saliva, tears, semen, and the like. Because the vaccine for hepatitis B is relatively expensive, and in somewhat short supply, being vaccinated is recommended for persons at high risk for contracting hepatitis B who are not already immune to the disease. Doctors, dentists and other health personnel come into contact with blood during work, and are a high risk group that should be vaccinated. Sexually active gay men can come into contact with blood in products such as semen, saliva and the like through their lifestyle, and also constitute a high risk group.

But some doctors, gay men and others at high risk for hepatitis B by profession or lifestyle, are already immune to the disease. It is a good thing to have antibodies against hepatitis B virus. Many gay men do: They have acquired them through contact with a small quantity of virus, some time in the past.

FACING FACTS

We hope for cures, remission and prevention of AIDS. Until these hopes are realized, we must deal head-on with the problem that is haunting us daily.

At present, knowledge is our best defensive weapon, and the helping hand of a concerned community is the best assistance.

For more information about AIDS
• Its transmission
• And supportive resources available in Nebraska—

CALL

The Nebraska Aids Project
402-342-4233
6 p.m. - 11 p.m. daily

Now TOLL-FREE STATEWIDE (OUTSIDE OMAHA) 1-800-782-AIDS

Most don't remember ever being sick. Gay men and others at high risk of developing hepatitis B, who have not developed such protective immunity, should receive hepatitis B vaccination. A series of painless injections contain the non-infectious part of the hepatitis B virus, and allow the body to develop antibodies that will protect against infection in the future.

Genital Warts

Genital warts are fairly common and very contagious. They are spread by sexual contact, perhaps caused by a virus and appear after 1 to 6 months' incubation, on, in, or around the genitals or anus. They are usually cured by repeated use of a resin application. If this fails, they may have to be burned off with chemicals or electricity.

Infestations—

Crabs

Crabs are human parasites, measuring about 1/8 of an inch long, that infect the pubic hair. Under a magnifying glass, their front extremities look like "crab" claws. The female lays five or six eggs daily which are firmly attached to the pubic hairs. The crab lice take two blood meals daily, leaving on the skin very small puncture sites that are very itchy. Over a few weeks, or months, these punctures of the skin and the trauma caused by excessive scratching create a very red, irritating rash in the groin area.

Although crab lice usually are restricted to the pubic hair, mustaches and body hair may also be infected in individuals whose infection is untreated for months or years.

Crab lice are passed through close physical contact (i.e. bed partners). Diagnosis is made by finding the small white "nits" attached to the base of the pubic hairs or finding an adult louse hiding in the hair itself.

One treatment is using a medical prescription of Kwell Shampoo, in which the infected hair (not eyebrows) is soaked for 4-6 minutes, rinsed, dried and then combed with a very fine tooth comb to remove the nits. Other non-prescription shampoos are

available. Read the directions very carefully.

Clothing and bedding should be washed in hot water, and clothing that must be dry-cleaned should not be worn for two weeks, allowing any possible nits to mature and die.

Scabies

Scabies, or "the itch," is caused by a tiny mite, which mainly lives on and around the genitals. The female mite burrows beneath the skin to lay her eggs.

The Symptoms: itchy lumps and tracks become noticeable after 4 or 6 weeks incubation. They can occur between the fingers, or buttocks, and wrists, and in the armpits, as well as on the genitals. The itching is worse in warm conditions. Chemicals can be obtained to get rid of the scabies, in the areas exposed.

There are OTHER SEXUALLY TRANSMITTED DISEASES. Examples of other infections and viruses are soft chancre, lymphogranuloma, venereum, granuloma inguinale, non-specific urethritis (NSU), and non-gonorrheal urethritis (NGU). These are usually not as serious as the before-mentioned diseases. But they can require treatment, and a doctor should prescribe remedies depending on the particular problem.

Worrying about getting a sexual infection is not a healthy attitude. The only way to be sure of not developing a sexual infection is to not have sex. But safeguards can be taken to severely reduce the risks.

- (1) Stay with one stable partner in a monogamous relationship.
- (2) Always use a condom, especially in anal intercourse. Men are also finding satisfaction in using a condom in oral sex.
- (3) Washing genitals and keeping clean can reduce the risks slightly.

If you develop an infection or virus, get medical treatment immediately. Follow medical instructions, return for prescribed check-ups, and avoid sexual contacts until you're sure you're cured. Also, make sure that all of your recent sexual contacts know what has happened so the disease won't spread.

AIDS

Acquired Immune Deficiency Syndrome (AIDS) was first identified as a disease in the U.S. in 1981 among gay communities in New York and Los Angeles. AIDS is a fatal, incurable disease that destroys much of the body's immune system, making it unable to resist infection and other disease. As of March 24, it had struck 18,376 people in the United States and claimed 9,865 lives.

There have been 13 cases of AIDS verified in Nebraska. Since AIDS was first detected in the state in 1983, the rate of occurrence has doubled every year.

Evidence strongly suggest that AIDS is transmitted through direct contact with body fluids such as blood or semen passed during intimate sexual activity, through the sharing of needles, and possibly through the transfer of blood products.

The mortality rate is very high. Over 80% of diagnosed cases have died within two years after the appearance of symptoms. 71% of AIDS cases diagnosed nationally are gay or bisexual men. AIDS is not highly contagious and it is not spread through casual social contact.

According to the Centers for Disease Control, each of three criteria must be present for a person to be diagnosed as having AIDS.

Test must show:

- (1) The presence of a reliably diagnosed disease, at least moderately predictive of cellular immune deficiency. Kaposi's sarcoma, or any one of several other rare cancers, or one of the opportunistic infections, or one of a growing number of conditions accepted as evidence for immune deficiency. Some persons may have more than one of the conditions at the same time, but only one is necessary for diagnosis.
- (2) Evidence of HTLV-III virus exposure. Currently, a positive HTLV-III antibody blood test is the commonest test used.
- (3) The presence of either: a decreased actual number of T-Helper cells in the blood, or a low ratio of T-Helper to T-Suppressor cells, found when the white cells are sorted out.

A person who satisfies only category 1 and 3 does not have AIDS. That person has a different disease caused by the HTLV-III virus, known as the AIDS related complex, or ARC.



Nebraska AIDS Statistics

1983	1
1984	2
1985	7
Jan, Feb, & March, 1986	3

13 Total Cases
11 homosexual/bisexual
2 blood transfusions

AIDS Related Complex (ARC)

Infection with the HTLV-III virus does not always cause disease. It may cause no disease at all (most common), AIDS, or the AIDS related complex (ARC). Persons with ARC have been exposed to the AIDS virus and it has set up infection. These persons are sick. Their lymph glands in the neck, under the arms, and all through the body swell up for months. They may feel sick and fatigued; have fevers; be awakened from sleep by profuse sweating; lose weight without trying; and experience other symptoms of illness. Although present

estimates vary, most experts agree that less than one-half of persons with ARC will develop AIDS. Presumably, ARC represents an effort by the person's immune system to mobilize, and fight off the AIDS virus.

A Positive HTLV-III Antibody Test

The HTLV-III antibody test was designed so that blood banks could destroy blood donated by persons with evidence of infection by the HTLV-III virus. The ELISA test, as it's called, is super-sensitive: although it's supposed to detect antibodies present in the blood as a result of infection by HTLV-III virus at some time, many false-positive results occur. A positive HTLV-III antibody test, by itself, does not mean that a person presently has, or will ever get, AIDS or ARC. It may mean that someone presently has the virus in their body, or it may not. A positive HTLV-III antibody test means only that a person was exposed to enough HTLV-III virus to develop measurable antibodies.

As of February, 1986, there is no reliable test for the HTLV-III virus itself. Because no other test is available, some individuals have decided to take this admittedly imprecise HTLV-III antibody test. The decision to have the antibody test taken should insist on confidential results, and careful interpretation of what the results mean for them. Persons who are antibody positive should consider themselves potential carriers of the virus, and should refrain from risky sexual practices.

LUBRICANTS WATER BASED

Name	Monoxydol-97	Container
Astroglide	no	squeeze bottle
Forplay	yes	squeeze bottle
H-R	no	tube
KY	no	tube
Ortho	no	tube
Probe	no	squeeze bottle

OIL BASED

Not For Use
with Condoms

Name	Monoxydol-97	Container
Albolene	no	jar
Elbow Grease	yes	jar
Lube	no	jar
Shaft	no	jar
Baby oil, mineral oil, Crisco	no	various

Hepatitis B

	Total Cases in Nebraska	Douglas County	Lancaster County
1983	57	23	19
1984	65	26	18
1985	72	35	22
1986-Jan & Feb	14	6	2

Gonorrhea

	Total Cases in Nebraska	Douglas County	Lancaster County
1983	2840	2002	347
1984	3018	2054	571
1985	3626	2601	530
1986-Jan & Feb	401	241	93

Syphilis

	Total Cases in Nebraska	Douglas County	Lancaster County
1983	40	19	9
1984	46	24	12
1985	36	25	10
1986-Jan & Feb	15	9	4

Asymptomatic Carriers

The vast majority of persons infected with the HTLV-III virus, and able to pass it along to others, have no symptoms at all, and can pass the HTLV-III virus on to others without knowing it. Attempting to avoid having sex with persons who look "sick" is not an effective way to avoid AIDS virus infection.

Remember that the AIDS virus reproduces within T-Helper cells. Because it gradually kills off these cells, the sicker a person is, the fewer cells this person has. Therefore, the most dangerous person to have sex with may be an apparently healthy person, who may have more of the HTLV-III virus.

Condoms Stop AIDS Virus

The following articles on condoms have been reprinted from The Hot and Healthy Times. The New Voice thanks Dr. Clark Taylor, sexologist for providing the material and allowing the magazine to reprint the articles. Also thanks to the Coalition and individuals on the Health Concerns Committee.

Researchers at the University of California San Francisco recently proved in laboratory tests that condoms can stop AIDS virus. The virus cannot penetrate the condom material of either latex or natural skin condoms unless the condoms are ruptured.

The UCSF condom study was commissioned by the San Francisco AIDS Foundation and was carried out by well-known AIDS researchers Dr. Marcus Conant, Associate Professor of Dermatology and Dr. Jay Levy, virologist and pioneer on the AIDS-associated retrovirus. The findings were made public in a press conference held in San Francisco on December 17, 1985.

...Continued on page 12

SAFE SEX GUIDELINES

UNSAFE

Rimming
Fisting
Blood contact
Sharing sex toys or needles
Semen or urine in mouth
Anal intercourse without condom
Vaginal intercourse without condom

POSSIBLY SAFE

French kissing (wet)
Anal intercourse with condom
Vaginal intercourse with condom
Sucking—stop before climax
Cunnilingus
Watersports—external only

SAFE

Massage, hugging
Mutual Masturbation
Social kissing (dry)
Body-to-body rubbing
Fantasy, voyeurism, Exhibitionism

Bay area Physicians
for Human Rights

Consumer's Guide To Condoms

by Clark Taylor and Jim Gamer

Below are easy to find condom brands with their "vital statistics."

Shape and Brand	Lubed	Width	Length	Remarks	Color
Type 1—Plain Ends					
Fourax	yes	3.0"	7.0"	lamb intestine	opaque
Ramses	yes	2.06"	7.5"	latex	clear
Type 2—Reservoir End					
* Sheik	yes	2.13"	8.0"	special lube, inexpensive, strong, stretchy, latex	opaque
Prime	yes	1.88"	7.2"	latex	clear
Sheik					
Feathertite	yes	1.81"	7.19	strong, thin	clear
Type 3—Contoured/Reservoir End					
Huggers	yes	1.86"	6.2	tapered	clear
Type 4—Ribbed/Reservoir End					
Sultan	yes	2.06"	7.5"	latex	clear
Excita	yes	2.0"	7.25	ultra ribbed	clear
Sensuals	yes	1.69	7.25	scented	colored
Arouse	yes	1.75"	7.25	Thin latex	pastels
Type 5—Rippled sides/Reservoir End					
* Gold Circle	no	1.9"	7.5"	Best non-lubed, thin, no taste or smell	clear
Secure	yes	2.0"	7.5"	light fluting	clear
Trojan Plus	yes	2.0"	7.75"	monoxynal 9 lubed	gold
Ramses Extra	yes	2.0"	7.75"	monoxynal 9 lubed	clear
Trojan Enz	yes	2.0"	6.5	poorly lubed	opaque
Man to Man	yes	2.0"	7.69	thin, very strong	clear
Man Form	yes	2.0	7.5"	extra lubrication	clear
Yamabuki #2	yes	1.88"	7.5"	Strong and thin	pastel
Type 6—Textured					
Yamabuki #3	yes	1.88"	7.5"	well placed nubbies	pastel
Zero-o	yes	1.75"	7.0"	high wrinkle	pastel

* preferred by consumer test panel

The AIDS condom study was patterned after a study conducted by Dr. Gonant in 1983 which demonstrated that the herpes virus could not pass through condoms. Five brands of commercially available condoms purchased at a local drug store (three made of latex, one of natural lamb skin and one of synthetic skin) were tested in Dr. Levy's UCSF laboratory.

Approximately a teaspoon of fluid containing high concentration of live AIDS viruses was pumped under pressure into each condom. The outside of the condoms were then dipped into a virus-free culture fluid for 30 minutes, and the culture fluid was tested continually over a three-week period. No viruses were present in the culture fluid even after this extensive testing period. The condoms, as expected, completely stopped the passage of AIDS viruses.

"The data confirm our long-standing Safe Sex Guidelines," stated Tim Wolfred, Executive Director of the AIDS Foundation. The Foundation has for some time promoted the use of condoms to prevent AIDS transmission, based on previous tests which proved condoms could stop herpes simplex, gonorrhea, syphilis and CMV. According to Jackson Peyton, the Foundation's Education Director, "We now have the scientific evidence that condoms prevent AIDS transmission as well as prevent other sexually transmitted diseases."

In a new series of ads for the San Francisco gay press, the SFAF is warning that unprotected anal sex is the chief cause of AIDS transmission in America, and that condoms are essential for the safety of anal sex. Condoms are also being recommended for oral sex.

How to Tell Him You Want to Use a Condom

John Acevedo, who works as a counsellor for the AIDS Health Project at Health Center #1, believes that changing how we experience sex demands new words, as well as new equipment--a whole long process of "re-eroticizing and re-educating."

Words like "we can't do it without condoms," Acevedo points out, are an automatic downer because as gay men we traditionally "react strongly to being told 'No, you can't do that.' We have this history of not wanting to say no." So instead of hastily erecting a latex barrier, he suggests, tell your hunk that yes, anal play would be GREAT and get specific

about how much you'd enjoy obliging him. "Because I like you, I want to make sure whatever happens between us stays healthy." If he answers, "I don't care about my health," says Acevedo, "he's sure not going to care about yours."

And he's sure not going to try it with condoms if you confide that "I've got to admit they really turn me off." The concealed message, according to Acevedo, is "Twist my arm, maybe we'll end up bareback after all."

Before even engaging in such conversations, says Acevedo, "I'd want to make sure I'd played with condoms before, masturbated with them, tried at least three or four different kinds so that I'm familiar with them. Then I can say 'Let me tell you which kind I like. Brand X would fit really good on yours.' You have to know what you're talking about, you've got to practice, you've got to be willing to confront your own fears and resentments."

One big problem, Acevedo acknowledges, is that for most of us, condoms have no erotic connotations--porno stars, for example, never rubberize.

Acevedo insists, there's no reason why a little imagination can't make putting on a condom sexy. No one is saying that intercourse with a rubber feels better than without one. But people tell him that "It's not as bad as they thought it would be," which is a start that creativity can expand into an actual plus.

--Carl Maves

Hot Sex With Condoms

You can't make rubbers feel exactly the same as naked skin. But you can explore the sensations of condoms. Once you do this, they can become as sexy as jock straps and as much fun as other toys.

EXPERIMENT! Try using condoms by yourself. If you're clumsy the first few times, don't sweat it. If you make a mess, open another rubber and start over again. Keep several types and sizes around so that you and your partners will have a choice.

FANTASIZE! Put your favorite fantasy partners into scenes with condoms while you masturbate. When you're cruising, think up ways you'd like to get the guys you see into condoms and what it would be like.

COMMUNICATE! Talking about condoms with your partner becomes easy with practice. Be honest about your feelings. If you are nervous or awkward, say so. If you are excited by rubbers, tell your man. It gives you room to experiment,

and takes the pressure off of performance expectations.

USE IMAGINATION! There are a thousand ways to make putting on condoms a hot part of sex instead of an interruption. Put a condom on your man very sensuously with your mouth.

LUBRICATE! Use generous additional water based lubricant. The lubrication on condoms helps, but is unusually not enough. You can heighten enjoyment by pouring just a little bit of lubricant into the reservoir tip before putting a condom on. This helps keep air out of the tip and greatly increases sensation when the lubrication seeps around the penis head. It takes a little practice to get the right amount, but is well worth the effort.

WET! Even the best water based lubricants dry out during use. But if you wet them with a little water they're as good as new. Have a container of warm water around such as a squeeze bottle sprayer, squirt gun or bowl.

Many people make the mistake of thinking that once they've put a rubber on, they have to ejaculate or else. This is a sure way not to enjoy condoms. Use as many rubbers during sex as you like.

Rubbers cut down on friction and can make guys last longer before shooting. This is a wonderful feature of latex for lots of men.

DILDOES! Condoms make dildoes and butt plugs easy to clean and the surface of the toys slicker so there's less wear and tear on body orifices.

Now you know some of the basics. But don't stop here. Ask around and try out some of the ideas that are interesting to you.

--Clark Taylor

How to Use a Condom

Condoms are easy to use. But some careful attention can maximize your pleasure and protection. Rubbers generally fail because of incorrect use-- they rarely leak or break due to faulty manufacture.

Be prepared! Keep a convenient supply of condoms next to your bed for every-time use. Take some with you on a hot date. Use condoms every time you have anal or oral sex.

1. Open package carefully. Tearing or long finger-nails can damage the rubber. Don't test rubbers by inflating them or stretching them.

2. Keep your penis free of grease and lube for best "holding power." A generous dab of water based lubricant in the tip of the condom will greatly increase sensation without slippage.

3. Gently press the air out of the receptacle tip before putting on the condom. Air bubbles can cause condoms to break. Plain-ended rubbers require about a half-inch free at the tip to catch the sperm.

4. Unroll the condom so that it covers the entire erect penis. If uncircumcised, pull back the foreskin before covering the head with the condom. Fitting an erect penis with a condom is best, but if the penis is soft, be sure to unroll the entire condom down to the base as the penis hardens. Smooth it to eliminate any air bubbles.

5. Use plenty of water-based lubricant. Do not use oil-based lubricants or saliva.

6. Hold onto the base of the condom after ejaculating to avoid spilling the sperm, or losing the rubber inside your partner. Withdraw gently.

7. Throw used rubbers away. Condoms should not be used more than once. Never go from one person to another before washing yourself well and changing rubbers.

8. Practice makes perfect. Experiment and talk with your partner to make condoms a sexy and exciting experience.

Water-Based Lubricants are Safe and Slippery

Oil and condoms don't mix! It's important to use water based lubricants with condoms, not those that are merely water-soluble. The water-soluble lubes wash out of your sheets but still contain oil, warns Les Pappas of the San Francisco AIDS Foundation, "and vegetable or mineral oil disintegrates the latex of a condom." No, the sheath isn't going to fall apart in front of your face, but it will get thinner and tend to break more easily.

Also, Pappas continues, "oil tends to trap various germs and it is very difficult to clean off- it lingers on the body." So if you and a partner are playing with condoms and planning any anal or oral action, you'd best avoid baby oil, Crisco, and popular lubricants like Elbow Grease and Albolene. More and more lubricants, Pappas believes, are going to include germicides and spermicides. The favorite so far is nonoxynol-9 which has been a feature for years in various condoms and contraceptive foams and gels. "Nonoxynol-9 effectively kills sperm," says Pappas. "But we've also found that it kills other things in the semen too--the herpes virus, for instance. And recent studies show that, at least in the laboratory, it kills the AIDS virus."

Nebraska AIDS Project Serves Nebraska with Toll-Free Number

A volunteer organization in Nebr. has started a telephone referral service to provide assistance to people with AIDS. Raymond Hoffman, president of the Nebr. AIDS Project, said the statewide information line will be staffed daily from 6 to 11 p.m.

Hoffman said about 40 volunteers have received training on the medical aspects of the disease, emotional reactions to serious diseases and public response to AIDS.

The organization has developed a referral network to help people with AIDS and their families receive the help they need and provide information to the public about the disease. Hoffman said the organization can put callers in touch with physicians, psychiatrists, psychologists, social workers, clergy and lawyers.

The line also will provide information on steps that can be

taken to reduce risk of exposure to AIDS.

The Nebr. AIDS Project is a non-profit organization formed last June.

Nebraska residents outside of Omaha can reach the service by calling 800-782-2437. The service is available to Omaha residents at 342-4233. (from the Associated Press)


AIDS Education Coalition formed

(The following article was reprinted from the February 7 edition of The Lincoln Star)

Nebraska organizations have formed an AIDS Education Coalition of Nebraska to provide education and information to the general public and high risk groups in the state.

There have been about 16,800 cases of AIDS reported in the United States, including 13 in Nebraska, said John Weston of the Heartland (Omaha) Chapter of the American Red Cross as he announced the formation of the coalition.

...Continued on page 14



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About 8,500 persons have died from the disease, and the death rate in Nebraska is 60 percent, he said during a Thursday morning news conference.

Ten of the Nebraska cases were reported from Douglas County and seven of those individuals have died, Weston said.

"Barring the advent of effective therapies for the disease or a vaccine to provide protection against the AIDS related virus, the key to stopping the spread of the disease is education," Weston said.

The coalition hopes to educate high risk groups, including gay and bisexual men, intravenous drug users, individuals with hemophilia and other blood coagulation disorders plus help alleviate the fear that has been generated among the general population, he said.

Members of the coalition are the Omaha and Lincoln chapters of the American Red Cross, Midwest Region Blood Services, Midwestern Region I Field Services of the American Red Cross, Nebraska Health Department, Continuing Education for Nursing Viral Syndrome Clinic at the University of Nebraska Medical Center, Douglas County and Lincoln/Lancaster County health departments, Metropolitan Omaha Med-

ical Society, Nebraska League for Nurses, Family Home Care/Family Hospice, Nebraska Civil Liberties Union, Catholic Archdiocese of Omaha, Inter-church Ministries of Nebraska, Greater Omaha Clergy Association, Third Culture of Lincoln, Nebraska AIDS Project and Imperial Court of Nebraska.

Other agencies and groups with an interest in the goals of the AIDS Coalition are invited to join the group and can obtain more information by contacting either the Omaha or Lancaster County chapters of the American Red Cross, Weston said.

NOTE: Several members of our lesbian/gay rights Coalition are participating in the Red Cross coalition, including representatives from Third Culture and Ministry in Human Sexuality. John Taylor, director of the Nebraska Civil Liberties Union and a member of our Coordinating Council, will service as Vice Chairman of the Red Cross AIDS Education Coalition. Also involved are representatives from several Omaha-based groups, including the Nebraska AIDS project.

Carry A Condom



Ken Diamond uses fingers to demonstrate a variety of condoms for William Kane. The demonstration does become more "realistic" in the healthy sex video "Inevitable Love," available from INTELLIGENCE IN VIDEO, P.O. Box 1107, NYC, NY 10023

Safe Sex Video Now Available

INEVITABLE LOVE is the condoms-and-romance video. Close to \$100 in condoms were needed to get the nine instances of condom use seen onscreen. But what's equally unusual for a gay-male sex feature, about half of the explicit sex footage in this 85-minute video is tenderly romantic.

"Healthy sex doesn't only refer to AIDS-related restrictions, says **INEVITABLE LOVE's** writer/director, Henry Mach. "Healthy also refers to positive attitudes about sex and about other gay people. This video isn't a warning about what we can't do, but a celebration of what we can do."

INEVITABLE LOVE, adapted from a story in Alyson Press' "Hot Living," follows two college friends, Gary and Hal (Pat Allen and William L. Kane) through their journeys of discovery about gay life and sex. This runs the gamut from a condom-putting-on contest in the barracks to a grand seduction using a pair of shoelaces, a feather, an ice cube, and a can of whipped cream.

"Being a new, gay-owned company, we didn't have preconceptions about what a 'porn movie' was supposed to be," says Mach. "So we set out to tell a story, and to show gay men smiling and laughing together. There's a fresh look to it; but most important, it's erotic and fun to watch."

INEVITABLE LOVE is available by mail order for \$75 from INTELLIGENCE IN VIDEO, Inc., PO Box 1107, NY 10023.

Five dollars from each sale will be donated to AIDS-service and research organizations.



Health Concerns for Wimmmin

Breast Cancer

While Lesbians may have a lower instance of sexually-transmitted disease than any other segment of the population, they should realize that they are still susceptible to breast cancer. This cancer strikes over 112,000 American women every year, killing 37,000 annually. In fact, one out of every 11 women will get breast cancer and its main target is women over 35.

As with every cancer, the key to affective treatment is early detection. Therefore, the Breast Self Examination (BSE) should be something that every woman does regularly.

Breast Self-Examination

The best time to examine your breasts is about a week after your period or if you're past menopause, on the same day each month that is the most convenient to you. The first step of the process is to examine your breasts in the shower. With flat fingers, move gently over every part of the breast: check for lumps, hard knots, or thickening. (Figure 1)



Figure 1

The second step should be done in front of a mirror. Look at your breasts when your arms are at your side and then when they are raised over your head: check for changes in the contour, any swelling, dimpling of skin or changes in the nipple. Then rest your palms on your hips and flex chest muscles--looking for the same things. (Fig. 2)

For the third step, place a pillow under your right shoulder and put your right hand behind your head. With the left hand flat, press gently in circular motions, moving clockwise around your breast. Start at the outermost top of your breast and move in circles inward to the nipple until every part of the breast has been examined. (Fig. 3,4)



Figure 2

Finally, gently squeeze each nipple to see if there is any discharge. Following these steps will help you detect any signs of breast cancer while it is still relatively easy to deal with.

If anything unusual is found during the BSE, a doctor should examine the problem to suggest further action. Several new tests are available now for examining the breasts for cancer. There is, of course, the typical mamography which involves taking an x-ray of the breast. Another technique is transillumination which involves shining a powerful light through the breast to detect the lump. There is also ultrasonography, which involves making a "picture" of the breast with sound waves. This method is especially valuable for identifying a fluid-filled lump. Thermography, which detects tissues that are warmer than normal, is not as specific but can be used to compare tissues in the breast over a period of time since it has no negative effect on the woman. This method has also been incorporated into portable monitoring devices which are valuable for women at high risk because they can monitor themselves without visiting a doctor constantly. The final non-invasive diagnostic test is the chaphanography which, like the transilluminator, shines a light through the breast--the image can be filmed and transmitted by a



Figure 3

television camera for use in second opinions and future comparison.

If it is discovered that the cyst is filled with fluid, a needle aspiration can be done, which involves drawing the fluid out to be analyzed for cancer.

If cancer is highly suspected or the lump is solid, a surgical biopsy can be done to remove the lump for analysis. At this time it is highly recommended that the tissue be tested to see if it is receptive to estrogen or progesterone (hormones). This information is important in deciding on treatment method if the tissue is cancerous.



Figure 4

If cancer is discovered, there are several options; each should be discussed thoroughly with the doctor. These treatments include different degrees of mastectomy--from a lumpectomy, which simply removes the malignant lump, to a classical radical mastectomy, which removes the breast, pectoral muscles and the nodes in the armpit. Chemotherapy (treatment with anti-cancer drugs) is also beginning to be used extensively, but since there are over 15 different kinds of cancer and infinite types of women, this is a highly individualized treatment based on the hormone test and other characteristics of the women. Radiation is also being used, but it is typically confined to cases where the cancer has spread and the doctor is attempting to halt it.

If a mastectomy is done, there are several options for reconstruction. If there is breast tissue left, implants of saline and silicone can be used to give the breast shape. If the mastectomy is radical, plastic surgery can be performed to reconstruct the breast. Here again this is something to be decided between the individual and her doctor.

Overall, breast cancer is something that should be dealt with promptly but not haphazardly. Don't hesitate to get second opinions on methods of treatment because a slight delay in decision-making usually will not make

...Continued on page 16

the situation worse. Further information is available from the American Cancer Society or the Women's Breast Cancer Advisory Council. There is also a Cancer Information Service that can be contacted by calling:

1-800-4-CANCER

If you suspect you have cancer, don't panic and don't hesitate to check it out. If you ignore it, it will get worse.

(Source: American Cancer Society)

-Jodi

If there is anything you want us to know, please contact us, or write The New Voice, P. O. Box 80819, Lincoln, Nebraska 68501.

Lung Cancer in Womyn

Here are some astounding facts about lung cancer in womyn:

Lung cancer is the #1 cancer killer in American womyn.

Lung cancer kills 37,000 American womyn each year.

1/2 of all lung cancer cases could be prevented if womyn did not smoke.

Smoking accounts for 50% of lung cancers in womyn and 10% of all cancer in womyn.

Womyn who smoke one or more packs a day have 8-12 times the risk of dying from cancer than do non-smokers.

While smoking is decreasing among men, the rate among womyn, especially teen-aged womyn, is increasing dramatically.

Often, chest x-rays and other tests do not detect lung cancer early enough to give it a cure rate.

As a smoker, how many times have you tried to "kick the habit"? Personally, I can't count on both hands how many times I've tried and failed. The statistics really bring the message home: smoking is BAD for you!

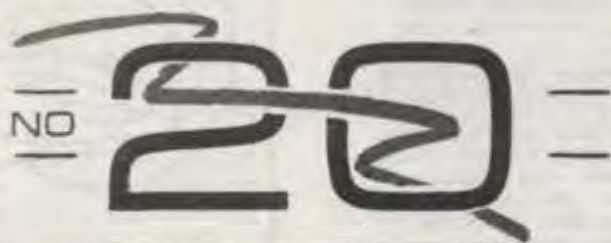
If you quit smoking, your risks will go down, starting immediately and eventually reaching the same level as non-smokers. There is evidence that many womyn do not gain weight when they stop smoking. Some will even lose weight because they feel better and are more active. Those who do gain some weight are able to shed any unwanted extra weight once the smoking habit is conquered. During the quitting process, it probably isn't a good idea to diet--instead, healthy snacks like raw vegies will help to distract you and prevent tension.

IMMEDIATE BENEFITS!

Shortly after you quit, you'll look and feel better. Coughing disappears and so will the odor of smoke that clings to smoker's clothes. You'll also experience a surge of self-confidence once you realize that you can control a seemingly impossible habit. Here are some tips for quitting:

1. PICK A DAY TO QUIT. Plan either to go cold turkey or to cut down gradually in preparation for the big day.
2. PLAN AHEAD. Think how you'll handle the tough times in the first few days.
3. THINK OF ONE SENTENCE that sums up your personal reason for wanting to quit smoking. Repeat it to yourself often and especially when you are tempted!
4. STOCK UP ON LOW CALORIE SNACKS. Cinnamon sticks and vegies!
5. DRINK A LOT OF WATER on your quit day and keep busy.
6. CALL THE AMERICAN CANCER SOCIETY for more information: how-to's, self-help, and group sessions.

-Chamla



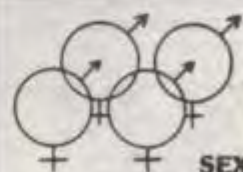
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Visit to the Gynecologist

I think few womyn look forward to visiting the gynecologist. Because there is physical and emotional discomfort involved, too many women won't go at all unless they've got an immediate problem. This is probably due, in part, to the negative feelings we have toward our bodies. As lesbians, we have the additional dilemma: whether or not to disclose our sexuality.

There is some evidence that lesbian womyn are receiving substandard health care, mostly because their physicians don't know about their sexuality. It isn't an easy decision--whether or not to reveal your sexuality to your own gynecologist. There are two questions that inevitably come up whenever a woman visits a gynecologist: (1) Are you sexually active? and (2) Are you using a birth control method? A lesbian, whose answers would probably be "yes" and "no" respectively, is faced with the gynecologist's unspoken assumption that the patient is heterosexual. Should she keep her sexuality a secret, her doctor will push for birth control--to prevent an unwanted pregnancy--unwanted, of course, by an unmarried and sexually active woman. The lesbian patient will be hard pressed to explain her way out of a prescription for birth control pills or a lecture on condoms, foams, and IUD's. It is a humiliating experience and most unfortunate, considering the patient/physician relationship should be on a level of intimacy.

Suppose the lesbian patient decides to confide in her physician. One of two things just might happen: the gynecologist will be horror-struck (or at least surprised) and might say, "Have you considered treatment?"--or the gynecologist might be interested in more details, perhaps too many... Ideally, a gynecologist should react as mine did--with an "Oh!" and a re-adjusted line of questions sensitive to our sexuality.

If a lesbian does not tell her physician that she is not heterosexual, any treatment and/or advice she receives will be heterosexually oriented and will not address her needs and concerns. What is more, the gynecologist will ask the same questions of the next patient, making the same assumptions about her sexuality. We owe it to ourselves and to other lesbian womyn to be open and honest with gynecologists. If yours can't handle it, see someone else.

Sandy

Osteoporosis

Most likely, all of us have seen an older woman on the street or in a store--stooped over, moving about painfully. This is not a symptom of normal aging. In most cases, these womyn are suffering from osteoporosis, which has only recently been addressed

by health professionals as a major health concern for womyn.

Osteoporosis ("porous bones") strikes one out of every four white womyn over the age of 65. Bones become brittle and thin and they break easily. Especially susceptible are those in the spine, hips, and wrists. As bones in the spine begin to deteriorate, a woman may suffer terrible back pain, develop a "hunchback" deformity, and shrink in height. She may also suffer periodontal disease, resulting in painful tooth loss.

More than 15 million Americans suffer from Osteoporosis. Persons most likely to acquire the disease have one or more of the following characteristics:

Female, caucasian or oriental, small-boned, don't exercise, don't drink milk, diet most of their lives, post-menopause, smoke, drink alcohol excessively.

Osteoporosis begins as a woman grows older and her body starts using calcium from her bones at a faster rate than the calcium can be replaced. Her bones become progressively weaker and, eventually, so brittle that they fracture easily.

Osteoporosis is an incurable disease, but it may be preventable if womyn take certain measure to guard against calcium deficiencies.

Eat foods rich in calcium. As adults, our bones have stopped growing in length and width but not in density.

Maintaining the strength of our bones is nutritionally our own responsibility. Two-thirds of all American womyn do not get enough calcium in their diets. Just two glasses of milk, in addition to other nutritionally valuable foods, will provide the body's calcium needs.

Practice moderation in protein, fiber and alcohol consumption. These can interfere with the body's ability to absorb calcium.

Exercise to strengthen bones. Inactivity causes bone loss. Biking, jogging, and walking are excellent.

Don't smoke. (Just another good reason to quit.)

Consider talking to your physician about estrogen therapy which will slow down calcium loss. However, there may be some unpleasant side effects. An additional note: calcium supplements are not the best way to obtain calcium. You are not getting the other nutrients like vitamin D and lactose that help the body absorb calcium. Also, some calcium supplements contain lead and other contaminants.

Osteoporosis cripples millions of older Americans and is extremely painful. Remember: you are never too young to think about preventing osteoporosis--but one day, you might be too old.

(Source: "A Mature Woman's Guide to Bone Health," National Dairy Council, 1985.)

APS

Uterine Cancer

While lesbian womyn are not usually subject to sexually transmitted diseases, they are subject to the uterine cancers that occur among other womyn.

Uterine cancer is the fourth most common cancer among womyn. There are approximately 55,000 new cases a year, but less than 10,000 will result in death. (This is largely due to the development of the Pap test.) Uterine or endometrial cancer, in the lining of the uterus, occurs mostly in womyn over the age of 40. At increased risk are womyn who are overweight, taking hormones, or who are having infertility or ovulation problems. Womyn who have had abnormal bleeding unrelated to menstruation, abnormal vaginal discharge, a hysterectomy for cancer of any of the female organs or a hysterectomy for a benign (non-cancerous) condition should have regular pap smears--perhaps more than twice a year, depending on a gynecologist's recommendation.

The Pap test itself, named for Dr. George N. Papanicolaou, is a relatively painless method of examining cells in the body of the uterus and the cervix. A cotton-tipped swab is inserted into the vagina to collect cells in the uterine body and a cervical scraper is used to collect cells in the cervix. The entire procedure takes no more than a minute or so and is no more uncomfortable for most womyn than inserting a tampon.

The collected cells are then examined under a microscope for abnormalities. It is important to note that not all abnormal Pap tests indicate cancer. Pap tests also reveal changes in cells that can lead to cancer. The Pap test may also detect infections and other related cancers.

If the cells on a smear are "dysplastic," meaning they appear immature with abnormal nuclei, there is a chance these cells will later develop into invasive cervical cancer unless treated. According to the American Cancer Society, "Serious problems can be avoided. The earlier the abnormalities are detected, the more amenable they are to treatment."

Receiving a Pap test and pelvic examination is not the most pleasant experience, but a little discomfort now may prevent much needless pain and anguish later on. More importantly, a Pap test just might save your life.

(Source: "The Pap Test," American Cancer Society, Nebraska Division.)

AFS



Other Health Concerns

There Are Risks with Artificial Insemination

According to a report in the March/April Lesbian Connection, there is a concern among Lesbians about the AIDS situation and the supplies of stored semen for artificial insemination. Because semen is a body fluid, the AIDS virus can be spread through the process of artificial insemination--sexual contact IS NOT required. If the semen is not tested for the presence HTLV-III/LAV, even semen stored in semen banks is suspect. And, according to the LC article, "detectable antibodies to HTLV-III/LAV may not develop until 2-4 months after exposure, which means that even a test of blood samples taken at the time of semen donation would not be a true indication of the presence or absence of the AIDS virus." If you are interested in conceiving a child through artificial insemination (using semen from an established bank), be sure to check out their testing procedure for the HTLV-III virus.

afs

Drug and Alcohol Misuse

During the past several years, there has been a great amount of public attention given to the AIDS crisis. It is referred to as the number one health problem in our country. Yet, there is another major health problem that threatens more gays and lesbians than the AIDS crisis. This is the misuse and abuse of alcohol and other drugs. Very little publicity or medical attention has been given to this long-standing problem in our community.

The available statistics on gay alcoholism are alarming. Data from a variety of sources place the toll of alcoholism among sexual minority persons between 20 and 32% of the gay population, with most reports finding that men and women are equally affected. The Fifield study is generally accepted as the best source available. Briefly, Fifield found that one out of ten gay people is in "crisis or danger stages" of alcoholism and needs treatment services. She found a second group of 22% in high risk of needing future treatment.

The Fifield study was substantiated by Lohrenz and Associates in cooperation with the Manninger Foundation. The study found 29% of the lesbian population in four smaller midwest cities abused alcohol. This means as many as one out of three gay persons misuse alcohol or will have problems in coping with alcohol in the future. This rate is four to five times the rate of alcohol misuse by the general population.

Being a gay man or lesbian in this country means facing alienation, isolation, and oppression. The result can be tremendous stress as it is often virtually impossible to avoid society's negative attitudes. Therefore, as many as one out of three gay persons find themselves seeking an escape.

Unfortunately, that escape too often comes in the form of alcohol and drugs. Many gays and lesbians feel that they must lead a double life, appearing heterosexual to those at work and spending nights and weekends among gay community members. For those who wish to be open, unpredictable risks are involved. These risks include losing the emotional support of family and friends or even the loss of job and housing.

Another stress is the fear accompanying the realization of being gay. This is a lonely process for many and a difficult one to handle emotionally. The reason is largely due to the non-gay society's belief that being a homosexual is not as good as being a heterosexual.

In addition to loneliness and oppression, another factor is the gay lifestyle, which includes the presence of alcohol in many social settings. The gay subculture is one where bars serve as the center of social events and becomes to gay persons what church, country club, and community centers are for non-gay people.

Consequently, this establishes the most available milieu in which young gay people explore their sexual orientation. They become exposed primarily to that segment of the gay/lesbian lifestyle that is caught up, often compulsively, in the bar scene, and have little opportunity to learn that the gay bar is used

by most gay/lesbian people as only a minor adjunct to their social lives.

In her study, Lillene Fifield found that, as a rule, gays spent approximately 80% of their recreational time in situations where alcohol is served. On the average, gay people go to the bars nineteen times a month and consume six drinks per visit.

Denial is the most common problem in the intervention and treatment of alcohol/drug misuse. For gay men and lesbian women, this denial process is even stronger because denial is a defense for not only the problem with drugs and alcohol, but with sexual orientation as well.

This is not to say that being gay causes substance abuse or that being gay gives one an excuse to abuse drugs and alcohol. Those who have studied this high rate of misuse point out that these factors in the gay lifestyle--oppression and the presence of drugs in many social situations--contribute to substance abuse. It is time that those of us who are gay and lesbian face the problem of alcohol and drug abuse. To question the prevalent use of alcohol and drugs in our social events may be necessary for the well-being of many of our brothers and sisters.

If alcohol or other drugs have caused you to have a more difficult time in a relationship. . .

- * if you have allowed dependence to interfere with your work or schooling . . .

- * if you have used resources that you should have spent on necessities but, instead, spent them for alcohol or drugs . . .

- * if you cannot become involved in a social event or a personal relationship without using alcohol and drugs . . .

- * then you need to question your personal use of alcohol and drugs.

Are you, or is one of your friends, the one out of three gays and lesbians who have, or will, have serious problems because of the misuse of alcohol and other drugs?

Support and help is available for those with alcohol and drug problems. The major obstacle is overcoming the denial of

the problem. One need not drink alcoholic beverages to be involved in social events. Our bars are supportive and encourage the patronage of those who order only non-alcoholic beverages.

If you or a friend have a problem with alcohol or other drugs, you can obtain assistance and further information by contacting:

The Third Culture, 474-1205 or Gay AA, 466-5214 in Lincoln, or

Gay AA, 345-9916 in Omaha

All these organizations have weekly meetings and support groups. They can also, when appropriate, provide a referral to individual counseling or treatment that is sensitive to the issues of sexual orientation.

--Don Williams

Suicide—The Unspoken Health Concern

Until the recent wave of suicides at Bryan High School in Omaha, suicide was more or less the "unspoken" health concern. For this reason, I think it is appropriate to include this subject in the Health Issue of The New Voice.

When a young person takes his or her own life, it is a tragedy for those left behind--and may seem to be an irrational act. In some cases, possibly quite a few, this is true. But in others, that young person has evaluated his or her chances of a happy, "successful," and fulfilling life in today's society, and he or she has come up very short. I am not saying this is a mature and rational process for a teenager; I don't believe most teenagers can accurately evaluate their own potential. I do believe, however, that this kind of introspection is possible and necessary for most adults.

In this society, life is a right and is guaranteed and protected in the Constitution. Closely aligned with the right to life are liberty and the pursuit of happiness. The framers of the Constitution recognized that liberty and happiness are important to the quality of life.

Having the right to something means having a choice. No woman, for example, is forced to have an abortion (by the courts, anyway), but she has the right to one if she meets certain criteria. Should not the same be true of the right to life? The right to life should involve a choice as well.

If I evaluate my life--its potential to be happy, productive, and meaningful--and I realize

it cannot and will not be any of those things, then I should have a choice about my right to life. No one should make that choice for me or for anyone else. Yes, it is a serious decision, certainly not one to be taken lightly. Therefore, it is inappropriate for anyone who is under legal age, emotionally-impaired, or coerced to make this decision. But the rational adult, who has made a careful evaluation, should be allowed to exercise a choice about his or her right to life.

I am not promoting suicide as a solution to or escape from life problems. Not at all—I have respect for life; this is precisely why I advocate choice. The decision may be painful for loved ones, but the quality of life is strictly in the eyes of the beholder.

AFS



"Handicap-Consciousness"

It is an 'invisible' handicap; unless you know it is there, you'll probably never guess.

On many occasions, friends have looked at me and joked, "Are you deaf?" after I've asked them to repeat something for the third time. As a matter of fact, I am not deaf (not yet) in the usual sense. I am perceptually hard of hearing, which means I can hear voices, but I can't distinguish the words. It is like trying to listen to someone with your head under water.

I have done myself a disservice by not telling my friends about my hearing problem. To avoid embarrassment, I've simply learned to over-compensate with other senses the same way most blind persons do. I can usually detect from expressions and tone of voice whether a person is making a statement or asking a question. Once in a while I miss a question, and I must look rather stupid.

...Continued on page 20

APRIL'S SUNDAY NIGHT MOVIES



April 6
GHOSTBUSTERS

April 13
Amadeus

April 20
Airplane I

April 27
THE BIG CHILL

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474-9962

Kelly's

Writing this down has helped me to consider my feelings about handicaps. My own has been a source of embarrassment, most of all, and I've tried to ignore it. I haven't had to deal with it, unlike the person who is visually or physically handicapped. Only now do I realize how handicap-prejudiced I have been.

"Handicap-consciousness" is more than not parking in the spaces reserved for physically disabled persons--it means acknowledging our own disabilities and learning to cope with them.

afs

Organizations

News from GLIS

The Nebraska Gay/Lesbian Information Support Line announces the resignation of Maggie as the administrator of the line. Maggie has served GLIS Line as administrator since its beginning two years ago. Because of personal time commitments, Maggie has asked the GLIS Line members to elect a new person to head the line. A general membership meeting was held on March 19 to elect a new administrator.

GLIS Line will be holding a training session for new peer counselors on

Friday, April 18: 7-10 pm
Sat, April 19: 9 am-noon
1-5 pm

GLIS Line depends on its volunteer peer counselors to operate the line every night of the month. Each volunteer works one or two nights at the present time.

To be a peer counselor on the line does not require one to have counseling skills. The training sessions are designed to help you develop your own talents for listening and sharing and to become an effective "peer" to the caller. Many of the callers' needs are met by giving them information provided in the information and referral manual. Others just need someone to talk to and to know that someone is listening.

You are needed to help. Won't you consider volunteering and working with GLIS Line?

For further information or to volunteer, call Don or Pat at 474-1205, or Ben at 476-9913.

Doctors and Dentists Respond to Survey

At least 182 Nebraska doctors, psychiatrists, and dentists have responded to an effort by the Nebraska Coalition for Gay and Lesbian Civil Rights and the Nebraska AIDS Project to establish a health care referral list.

Nearly 4,000 letters were sent early this month to physicians and dentists throughout the state asking them to fill out a form indicating whether they would be comfortable treating gay or lesbian patients and non-gay patients who may be at risk for AIDS. The letter also asked them to indicate whether they would like more information about AIDS, sexually transmitted diseases and human sexuality.

Approximately 168 letters were favorable and several of these doctors asked for additional information or expressed willingness to treat high risk groups. It was estimated that 4.5% of the returns were sent back. Only six of the letters were negative and these responses were antagonistic or degrading to gays or the AIDS disease.

Most of the responses came from Omaha and Lincoln. The rest of the returns came from scattered areas across the state.

The referral list may eventually be utilized by the Douglas and Lancaster County Health Departments and the Nebraska AIDS Project.

--Larry Wiseblood

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AND SUPPORT LINE

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LINCOLN, NE
68509

475-4697

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8:00p.m. to 12:00a.m.

FRI. & SAT.
8:00p.m. to 1:00a.m.

GLIS

Thank You MAGGIE

The volunteers and peer counselors of the GLIS Line express their gratitude to you for serving as Administrator of the GLIS Line the past two years. And for all that you have done for the community, we give you our heart felt thanks.

New Center Open

The new Community Center is open for use at 2845 R Street. Meeting space is available for all groups by calling 474-1205 or 435-0967. If your group has announcements, pamphlets or other publicity material, a bulletin board and literature rack will be available. Plans include development of a resource library for community use. If you would like to share, please consider donating books or other resource material to the center. The center still needs several items which would make it more useful and enjoyable: a file cabinet, folding chairs, a large folding table, card tables, a ceiling fan, bulletin board, literature rack, and some plants. Please call if you can help with any of these items. Stop in and visit! This is your center!

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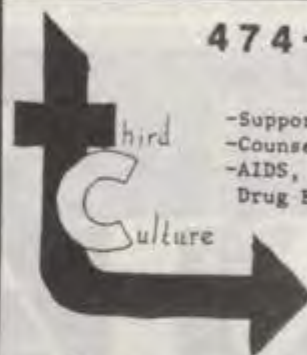
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Resource Center Looking for a Name

Lincoln's new community resource center is looking for a name. Not just any name, but a name that will be recognized by the entire gay/lesbian community. The center has been a gathering spot for local organizations and in the future will offer more services, such as counseling and a media center. To help the center gain a better foothold requires a good name that everyone can be proud of. The New Voice will help sponsor The Name The Center Contest.

First prize will be \$25 and a small recognition plaque which will be kept at the resource center. Entries must be received by May 1 and should be sent to: Name the Center Contest, P.O. Box 80819, Lincoln 68501. Contestants should write the name on an 8½ x 11 sheet of paper in bold letters (at least 1 inch in depth and width). Submit your entry now!



Contestants Sought

Contestants interested in entering the upcoming Imperial Court Coronation and Athena I must be present at Stars Restaurant on May 5 at 7 p.m. All entries will be interviewed and a \$25 application fee will be required from all contestants. Athena I is a new category this year and will be given to a deserving woman in the community. It is stressed that winners of the coronation serve the community and need to be responsible, hard-working people who can commit time and energy to the Imperial Court.

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Imperial Court News

Congratulations to new officers, elected Jan. 6. They include vice-pres. and treasurer Richard (Dick) Brown, secretary JoJo Morrison, and future board members Jeffrey Bosiljevac, Ron Brown, Marty Larson (Muffy) and Pat Phalen. Scott Rezek's term was extended until coronation.

The theme for coronation will be Roaring 20's. It will be held at the Carter Lake Warehouse Ballroom. Tickets will be \$7.50 in advance and \$10 at the door. This year we have added Athena I to the coronation, to represent the women.

Applications for Emperor, Empress, Athena, and the board of governors are available at the bars. Details of the events during coronation weekend will be posted in the bars. Watch for details.

Contratulations also to Miss Vanessa Anderson, Miss Queen of Comedy. Other contestants were Muffy Rosenberg, Stella Dallas, And Miss Gay Rural Nebraska, Victoria Towne.

On April 6 there will be the Closet Ball at the Max, 9 p.m., with a \$2 cover charge. It will be hosted by Miss Closet Ball, Iamarda Max, with Empress V Laura Lee. Completed applications must be turned in 24 hours before the ball. There will be a \$10 entry fee. This is the first time that this event has been open to women.

During April 11-13, 1986 Empress Laura Lee, Emperor Gary West, members of the board, the royal family, Velvet (Miss Gay Nebr.) and friends--approximately 15 of us--will attend the Denver Coronation of the Rocky Mountain Empire. At this time we will attend at our own expense, with a small sum being donated.

AIDS Committee report: Don (Flowers) Rondolf is chair and Kevin Lee is medical liaison for the Imperial Court. Don has been appointed vice chair for financial development for the American Red Cross subcommittee on AIDS education in Nebr. Kevin was also appointed vice chair for the speakers bureau for the Red Cross subcommittee. A check for \$10,000 has been presented by Don to the G.R. N.L. (Gay Rights Nat'l. Lobby --Political Education Project) in Houston, Tx. Finally, Don attended the March 14-16 Nat'l. AIDS Forum in Washington, D.C. at his own expense.

The Imperial Court has now purchased a tape library. The tapes will be housed at American

Red Cross. They will be for educational use in order that volunteers and patients may learn more about the disease and ways to help cope with problems that arise due to AIDS. For more information contact Mary Tourek, American Red Cross, 42nd & Dewey, Omaha, Nebr.

We are looking forward to Gay Pride Week, including the parade, art fair, and candlelight vigil. We are working with other organizations to make this a better year for all of us. Gary West, Emperor V
Laura Lee, Empress V
JoJo Morrison, Sec. B.O.G.

Marilyn Major, MSW, ACSW

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Notice

Lincoln Bars Announce New Door Policy

For quite some time, the Lincoln gay Bars have admitted gay persons under the age of 21. This was done with the understanding that at no time would persons under 21 purchase or consume alcohol. Unfortunately, many have disregarded this and have chosen to do otherwise. In addition, some have been drinking alcohol in the parking lots, bringing bottles into the bars' property. Some have also mixed liquor with soft drinks from the Bar.

The State Laws clearly forbid this activity. It is with much regret that we must put an end to this activity because the risks are greater than what we, the owners of the four Lincoln Bars can deal with. It is unfortunate that a small group of people have placed at risk one of the few places in which gay people can meet without fear. We are not willing to risk our business over broken promises by a few individuals. So Stop It Now! Or we will change the age limit to 21 years of age. You must carry a current Photo ID if you are 17 years or older **at all times when you are in the four Lincoln Bars—**

The Boardwalk
Kelly's
The Club
Cherchez la femme

Gail's Hit List

April

1. **BAD BOY**
--Miami Sound Machine
2. **HIT THAT PERFECT BEAT**
--Bronski Beat
3. **WHAT HAVE YOU DONE FOR ME LATELY**
--Janet Jackson
4. **YOU LOOK GOOD TO ME**
--Cherelle
5. **WEST END GIRLS**
--Pet Shop Boys
6. **TWIST MY ARM**
--Pointer Sisters
7. **ANOTHER NIGHT (remix)**
--Aretha Franklin
8. **IF YOU SHOULD EVER BE LONELY**
--Val Young
9. **NO FRILLS LOVE**
--Jennifer Holliday
10. **LET'S GO ALL THE WAY**
--Sly Fox
11. **NEW TOY**
--The Flirts
12. **YOU NEED MORE CALYPSO**
--Ralph McDonald
13. **POWERDRILL**
--Goon Squad
14. **STRANGER (In A Strange Land)**
--Pamela Stanley/Paul Parker
15. **RIGHT BETWEEN THE EYES**
--Wax

Gail's Hit List is a monthly courtesy of The Boardwalk/The Club, Lincoln

Classifieds

Need a Roomate- GM, financially responsible to share three bedroom home in SW Lincoln. \$150+ 1/3 utilities. Call Ed/Pat 435-7768

Gay Pride Week is Coming Soon! Support Gay Owned & Operated Businesses. A message from the Boardwalk

Judy Sloan in Concert- Friday, April 11, 8pm Nebraska Union Ballroom Judy Sloan is a character actress/comedienne and will perform a one-woman series of vignettes focused on the lifestyles of a variety of female characters. Admission- \$4 for UNL students \$5 for non-students

NOTICE- Due to the new city ordinance concerning sex in public parks, restrooms, and adult bookstore, Lincoln Police advised us that there will be arrests made this year. We give you a safe place to meet.

The Boardwalk/The Club

Casselberry & DuPree Concert- Thursday, April 10, 8pm Nebraska Union Crib Dynamic Singing Duo "They make music about women, about oppressed people in general, and our own people in particular." \$6 for UNL students, \$7 non-students

Party all night! Follow the lights! The Boardwalk/The Club 20th & O

We light up our life for you!



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Open Mon.-Sat. 12-5

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CELEBRATE!

There are many occasions that warrant more than a phone call to announce an event. Whether for a business or social gathering, Accent Printing/Copycenter can help you with all your printing and paper needs. Invitations, announcements, thank-yous, banners, programs and festive decorations can all be obtained with one easy stop. Our catalogs feature a wide selection of colors and styles—or we can print your original ideas and designs. Either way, Accent is here to help ensure a carefree celebration.

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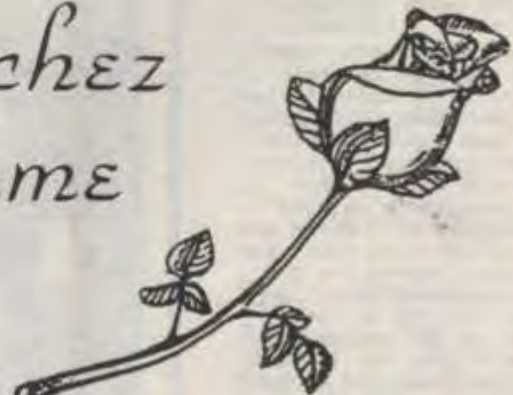
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La femme*

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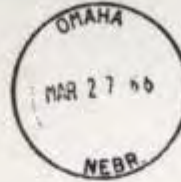
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THE MAX
OMAHA, NEBRASKA

Dear Bob,

3-26

I was on my way to L.A.
but I've decided to spend
the rest of my vacation
in Omaha (don't laugh)
The Max is the most
fantastic bar I've seen
between both coasts! a
it's got everything! a
great disco, two quiet
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Men, Men! Forget about
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weekend. Love Steve



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