To the Editor

August 1, 1998

Through the Wire

Finally attention has been brought to the problems that we patient-inmates must endure on a daily basis here in the great state of Texas' pride and joy—the Texas Department of Criminal Justice, Institutional Division (S.O.S., May 1998). I, along with others in the Mark W. Stiles Unit, would simply like to thank you. Your editorial was so on target that we are truly surprised prison officials did not censor it. However, they may stop us from receiving future issues. You covered only a few of our problems, but they are significant ones. Overall, we're grateful someone made the effort to expose the unnecessary suffering and—in too many cases—deaths due to insensitive medical and administrative personnel. As POZ and people like Mr. Strub continue to fight for our rights as people with HIV, we have hope. Because the department is notorious for retaliation, some were reluctant to sign.

Guadalupe L. Gonzales II #669753
Anthony J. Pleasant #683688
Charles Morris # 612948
Vincent Rollins #533730
David Ballard #761218
Paulo Garza
Otis O. Hardaway #588631
Alfred C Thomas #714362
Shane Ervin #630707
William Maruels #627862
Lloyd Davison #577185
Anthony C. Jones #657093
Earl Mayfield #392766
Michael Jones #323033
Roy Jefferson #711755
Douglas McCray #642106
Anthony Owens #702887
Jimmy Smith #617785
Garry Peterson #678274
Willie Flowers #640721
Harold Yarbrough #489581
Micheal White #605582
Marquitt Walace #616214
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Larry Goodley #605684
Kenneth Rucken #576338
James Seals #648387
Eugene Jackson #656410
Enrique Vasquez, Jr. #792283
Laurence Smith #707621
LaSalle Barclay
Clifford McBrine #530376
Bruce Lee Tatum #786269
James Bradford #619697
Albert Granes #647735
James Shaffer #733988
James E. Reid #630650
Donald Williams #544573
Antonio Jacobs #596810
Otis Wilkins #389382
Raymond Lincoln #663213
Mustafa Smith #579803
Mario A. Guerra #418996
Powell James #645834
Conless Rivers #670751
Larry Hawkins #635496
Hadnot Augustus #503313
Granville Hogan #524070
Nicholas Edwards #524010
Larry Allen #705591
Raymond Hawthorne #654946
Gregory Branch #671019
Arthur C. Hobbs #720127
Michael Wright #641011
Marv Alridge #576299
Raymond G. Bryant #662702
Winston Byler #768853
J.C. Hall #742967
K.R. Tealer #710325
Nathan Pugh #750904
Michael Dess #693524
C. Gilbert #523128
E. Satterwhite #633806
Young, T. #640088
Anderson, B. #598530
D. Stewart #618813
S. Baily #602488
Jackie Burnett #653342
Larry Pryce #575055
Byron Hally #652658
Ricky Allen #646824
Eric Ray #767799

Michael Kellough #523980
Vernone Malik Garrett #650862
Robert Walker #559907
Claude R. Johnson #700042
Taylor D. Paden #611314
J. Wolf #748898
Sammie Robinson #509785
Michael Nickdau #664068
Stephen Sellers #662664
Ronald Nelson #779463
Kelly W. Duvall #619881
Blake L. Lieth #766620
Kenneth Irving #557498
W.M.F. Bunnell #674042
and 15 others whose signatures
POZ could not decipher.

Mark Stiles Unit, Texas
Department of Corrections
Beaumont, Texas

The inhumane prison conditions Sean Strub describes are hardly unique to Texas. In New York state, where I've educated inmates about HIV treatments for the past three years, the story is shockingly similar. Searches in which AIDS drugs are systematically destroyed are commonplace. Lockouts preventing inmates from getting food or water to take with their medicines are rampant. Guards deny passes capriciously so inmates are unable to pick up medications. And prison routines that force inmates to double dose or skip meds altogether are more the rule than the exception.

Our nation's correctional facilities will continue to be multiple-drug-resistant HIV factories as long as treatments for positive inmates rest in the hands of guards rather than medical professionals.

Carlos H. Arboleda
Gay Men's Health Crisis
New York City

As an inmate in the Mark Stiles Unit, I'd like to congratulate Sean Strub for acknowledging the medical problems here. Any kind of compassion in this so-called medical unit is very seldom felt. The security staff has no training in dealing with inmates with HIV. Harsh and unusual punishment seems to be the basis for this unit.

Your article is only the tip of the iceberg. Please publish this letter so those in positions to help may know about the death trap that Texas has placed us in. Many of us are homeless, drug addicts or victims of misfortune. But instead of drug-abuse treatment programs or life-management plans, Texas has sentenced us to "death row" in the Mark Stiles Unit. All the self-esteem, pride, dignity and will to live is drained from us daily. We are like sheep led to the

slaughter. We live in fear and are at the mercy of untrained, uncompassionate officials who are prejudiced against prisoners with HIV. This unit is a joke, and it's time the nation knows the oppression that we suffer.

Many of us are too weak to take a stand and are afraid to fight the administration because of disciplinary action that may affect our parole. Many of us are mentally worn down and emotionally oppressed. Just a fraction of us get the psychiatric help we need, while others suffer in silence. A certain danger may come to me as a result of this letter, but it's time someone stands up and speaks the truth.

I am begging you, on behalf of the inmate population here, please don't let this be your only article on the inadequacy of this place.

T.A. Young #640088
Mark Stiles Unit, Texas Department of Corrections
Beaumont, Texas

May's S.O.S. is very misleading, especially the statement that doctors in the Stiles Unit "substitute" anti-HIV treatment. All medicine is sent to the prison by the hospital, so there is no chance for doctors to change prescriptions. The correctional officers are not even allowed to pass out Tylenol, let alone prescription drugs. The pill dispensary is open as long as there's a line of people who need medication. They do not close the window on anyone, and those who come after the window is closed can always go to the infirmary. Nobody is ever denied emergency medicine. They are given a snack whenever they need to take drugs that require food.

The idea of condoms not being distributed is so funny—it is against regulations for inmates to have sex. I do not pay my taxes so they can have an all-expense-paid hotel for their orgies.

These inmates are not choir boys. You have taken the complaints of a bunch of men in prison—not for singing off-key in choir, but for proving they can't be trusted. If they're not above breaking the law, how can you believe they're above lying in order to make people feel sorry for them? For you to call the correctional officers lazy or cruel is beyond me. I'd like to know how many you spoke to from Stiles or other Texas prisons.

Connie Letien
Via the Internet

As an employee in the Stiles Unit, I have seen and heard of two of the instances Sean Strub wrote about, and I'd be hard-pressed to argue against him. However, Mr. Strub should at least have the professionalism to get both sides of the story before jumping on his proverbial soapbox.

Well-written and -researched articles presented with heart and objectivity will further the cause in a more receptive manner than the garbage written by Mr. Strub. When reading mail or surveys from incarcerated adults, consider the following: What got them incarcerated in the first place? Don't inmates use the media on a regular basis for unwarranted sympathy? How much research was done on the mindset of criminals and the games they love to play? Could there be viable reasons for the administration of medication that must follow guidelines or practices of a prison environment? The Mark Stiles Unit is a maximum-security facility first and a medical facility second.

Name Withheld
Employee, Mark Stiles Unit, Texas Department of Corrections
Beaumont, Texas

Her Back's Up

As the youngest member of the Presidential Advisory Council on HIV/AIDS, I have come to know cynicism before it bites ("A Council Resigned," May 1998). I chose not to respond to your survey because I did not see anything positive coming out of it. I am not in politics, I do not work for an AIDS agency, and I use the media only to share my HIV prevention story with others. I have nothing more to gain by being on the council than a good, healthy feeling of knowing that I tried to do something about this epidemic in my own small way, and knowing that my disproportionately infected and under-represented community has a clear, strong voice at the highest level of policy making.

POZ has rarely (if ever) covered any productive action of the council and has been no help in rallying community support or awareness for it. I may hold a position on the president's council, and some may even view me as one of the "powers that be," therefore they attack me. But I am no more than one poor, black child from the South who has been living with this disease longer than many have known its name—longer than POZ has been a magazine, longer than Clinton has been in office. Clearly, that should hold more clout than the erroneously inflamed pen of a journalist.

Denise Stokes
Atlanta

POZ responds: The possibility of resigning was raised by council members themselves, in the media, and it was a subject POZ found interesting enough to survey members on. In its coverage of news covering the council, POZ has always tried to be completely objective.

At Wits' End

“Impossible Dream” reads like a stream of automatic writing without much reason (May 1998). The writer needs to change medications and improve his state of mind. Hire some better journalists, and replace your editorial board. Help people, stop depressing them. Our lives are not hopeless.

Glen Nessel
Via the Internet

Obviously I’m getting bum meds, as I never seem to be able to do all the things these miracle models do. So glad to see that it irritates someone besides myself. I always enjoy a good laugh.

Mark Henson
Jacksonville, Florida

Guilt by Association

Yes, consenting adults have to accept responsibility for their sexual behavior and the risks to which they expose themselves (“From Unsafe to Illegal,” May 1998). But Uffe Gartner can’t be serious when he opines that a person who does not get tested commits a greater moral wrong than a person who knows he is positive and doesn’t inform his partner. The difference is that of one who ignores the cries of a drowning person vs. one who holds that drowning person’s head under water.

Jay Bradshaw
Sherman Oaks, California

The criminalization discussion was very disappointing. Even HIV advocates, it appears, are buying into the culpabilization/litigation reflex so absurdly prevalent in our society. It is telling that only the participant from Denmark [Uffe Gartner] had the sense to say that people are essentially responsible for their own health.

Nobody even touched upon the perverse inequity of criminalizing PWAs who themselves tend to be the victims of unprosecuted HIV transmission. What a revolting double standard to even think of applying to those living with this dreaded condition. But instead of politically effective indignation by those who claim to be HIV advocates, there was much whimpering about lacking prevention and half-hearted moralizing about PWAs being unilaterally responsible for safe, mutually informed sex. Let’s all just blame the victims—and then soothe our consciences with strained naiveté about transmission laws not being enforced. Criminalizing PWAs is not the answer. Yet with advocates morally bewildered and politically intimidated, I fear we can expect neither adequate prevention nor a constructive response to the fascists of health politics.

G.M.
Chapel Hill, N. Carolina

Head Over HEALs

Bruce Mirken made no attempt to provide an accurate account of HEAL and the dissident movement ("HIV Naysayers Find Their Achilles' HEAL," May 1998). Rather than attend HEAL meetings or interview members or leaders, Mirken used remarks by HEAL's detractors, excerpts from old fliers and speculation about the political affiliations of other dissidents as the foundation for his article.

Although I am the leader of the largest and most active of HEAL's 27 chapters and the author of the book mentioned in his article, I was not interviewed by Mirken. By leaving me out, he conveniently avoided having to reveal that I've been HIV positive, healthy and medication-free since 1992, and that I am the mother of a gloriously healthy 7-month-old boy.

Citing relevant facts about HEAL would have made it difficult for Mirken to portray us as a band of fools living in denial. He omits any mention of our advisory board, which boasts renowned doctors, scientists and journalists, and includes Nobel Laureate Dr. Kary Mullis, inventor of PCR.

Contrary to Mirken's claim, HEAL does not provide medical advice. Instead we offer medical, epidemiological and scientific information, in addition to providing a forum for uncensored discussion on HIV and health. Readers interested in making an independent evaluation of HEAL are encouraged to visit our website at www.heal-la.org.

Christine Maggiore
Founder/Director, HEAL
Los Angeles

Bruce Mirken responds: Maggiore forgets that I quoted leaders of two HEAL chapters and lengthily described a HEAL-sponsored meeting. I attended another meeting and conducted long conversations with several other leaders; space limitation required selecting the most representative statements. There were far more outlandish quotes I could have used. Much medical advice was indeed dispensed at those meetings. And at what Maggiore calls "a forum for uncensored discussion," AIDS Treatment News editor John James was shouted down with cries of "Queer killer!"

Kudos to POZ and Bruce Mirken for an investigative piece that not only enlightens but is sure to save lives. I used to have friends who were steeped in the kind of irrational denial Peter Duesberg devotees espouse, but they are all dead now (one of them was buried with a bottle of his beloved bee pollen in his suit pocket).

Grateful to be a now-aging (but healthy) AIDS activist (thank you, saquinavir, etc.), I used to tolerate these wild-eyed conspiracy theorists with mute pity, but now I think they're poisonous enough to deserve public chastisement and condemnation. As an astute journalist, Mirken took the commendable "high road" in his analysis, but the rest of us should feel free to denounce any group whose illogical ideology is steeped in conservatism and ultimately hastens death. Instead of tolerating these folks, we need to pin them to the wall and let them know we don't appreciate their pandering to those who are desperate enough to wish themselves "AIDS-exempt"—which is all the Duesberg claptrap amounts to.

James Bloor
Cleveland

Regarding your recent article slamming HEAL: Thanks for the publicity. Please, do keep up the attack.

M. Dennis Paul, PhD
HEAL/NE, Inc.
Via the Internet

It was good to see coverage of the AIDS dissident movement, but frightening to be confronted with such a hostile portrait of myself and my friends as rigid, all-or-nothing, black-and-white fundamentalists. While we dissidents do agree that HIV can't possibly cause the list of diseases now called "AIDS," there are profound disagreements among us. I've lately found many of my favorite dissident luminaries to be out of touch with the daily realities of living with AIDS. Yet I am still loyal, especially to Peter Duesberg, whose sound advice about the toxicity of drugs like AZT helped restore my health and optimism.

What the dissident camp can't seem to do—and must do—is put forth a logical, real-life message that helps people who want out of the old AIDS paradigm to escape from what HEAL founder Michael Ellner calls the "AIDS Zone." Doctrinaire libertarian-conservatives in the dissident camp would have us "just say no" to ASOs, SSD checks, subsidized housing and what camaraderie we still have in the minority communities we inhabit. And while HEAL/LA is strong on prevention—"Don't get tested and avoid hard drugs"—it is weak on solutions for those infected. I found a shocking lack of connectedness between HEAL/LA and those battling the crystal-meth crisis via harm reduction, despite HEAL's insistence on the dangers of gay party drugs. "Just say no" is Reagan-esque bullshit, so is expensive, overbearing 12-step rehab. What to do with a serious crack-cocaine or crystal problem? No answer.

Those of us who have reduced chemical toxicity by moderating or eliminating recreational drug use—and, more important, by not taking antiretrovirals—deserve a voice and a gathering place. I'm delighted to be alive and dissident at year 10.

G. Steven Rose
Boston

She's Testy

In "Vintage Gallo," Robert Gallo said, "We could end up only testing new approaches on people who fail everything else. That may not be a fair test…" (April 1998). From my perspective, that is the essential test and should be a major focus of research.

Sue Gibson
Dallas

Under Cover

One headline on the April 1998 cover read, "Breaking Through Is Hard to Do." My interest was piqued, but I had to wade through eight pages of ads before finally locating the contents page. Once there, none of the titles appeared to relate to the subject of "breaking through"—whatever that means—so I scanned the entire magazine in the hope of finding the article purely by chance.

Unsuccessful, I realized there must be another list of regular columns and features, and after another fruitless search, I finally found the second contents page. I carefully studied it and in a few minutes located the article, clearly identifiable with the word breakthrough highlighted in italics under the "Life" heading. Ecstatic at my brilliant detective work, I settled down, at last, to read the article.

I appreciate good design, and respect sophistication and cleverness, but I could tolerate less of these things if it meant locating a cover article in under 10 minutes. I don't expect you to revamp your publication, I just need to remind you that good design, by definition, never places form before function.

Bill Checkvala
Via the Internet

POZ responds: One man's sophistication is another's stupid mistake. We'll try harder.

The Other Side

I contracted HIV from a partner who lied about his test results. It's no wonder I took umbrage at the article that seemingly condoned Nushawn Williams' behavior ("Criminal Body," February 1998). I, too, find it disheartening that Williams became the national example of an ongoing

reality, but not for the same reason as writer Richard Goldstein. Far too many other HIV cases could and should have prompted the same public reaction. The general populace and, hopefully, more people with HIV are getting sick and tired of infected individuals who take “confidentiality rights” and their own denial to the extreme.

Melissa R. Dugas
Savanna, Illinois

Richard Goldstein wrote: “No law—short of mass confinement, Cuban-style—can prevent people who are sexually active from running into the virus.”

Cuba no longer practices mass confinement. Upon testing positive, people go to the special sanitarium to be assessed for a short period of time and receive counseling and medical support. They can then go back into society to their families and, if physically able, are free to return to their workplace.

Cuba treats its HIV positive people better than some Westernized countries. If the U.S. government lifted its ridiculous travel ban, you’d be able to find out for yourselves. Everyone else in the world has a chance to do so, except U.S. citizens, because of your government’s outdated economic embargo. Now talk to me about confinement.

James Reid
Canberra, Australia

Try This at Home

It is difficult for us to understand how any detailed discussion of names reporting can omit the anonymous, at-home HIV testing alternative (“Names Will Never Hurt You,” February 1998).

Anna Forbes diligently framed the larger issues of the debate, particularly the question of whether, if it causes people not to get tested, names reporting will be an effective tool against HIV. The validity of this challenge is supported by a California study that shows that 60 percent of people anonymously testing for HIV wouldn’t have done so if their names were going to be on a list. This study and others show that anonymous testing must remain a viable option no matter how the issue of HIV reporting is resolved.

Joseph T. Smith
Home Access Health Corp.
Hoffman Estates, Illinois

Letters to the editor should be sent with the writer’s name, address and daytime phone number

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