



# Anthony Maselli

May 24, 2013

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Providence, Rhode Island  
Positive since 2012

On September 4, 2012, I tested positive for HIV. I was assured that HIV is no longer considered a death sentence and it is a chronic and manageable condition. That did not matter to me. It wasn't the fear of dying that worried me; it wasn't the images from the '80s of men lying alone in hospice covered in lesions that gave me a sinking feeling in my stomach. It was shame. I was ashamed because HIV transmission is not a mystery. People would think I was either very promiscuous or an intravenous drug user. I wished I had cancer instead; something I wouldn't have to own up to.

My upbringing was grievously religious and isolating. When I moved to Rhode Island in 2004, I came out of the metaphoric closet almost immediately. I started frequenting gay clubs and bars, as this was the best way I knew to meet like-minded people. After a few years, I watched my quest for love and acceptance become more frantic and desperate as a few cocktails and the occasional party drug transformed from social glue into major habits. During that time, I felt isolated and unaccepted. Deep loneliness led to self-medication. Self-medication led to poor decision-making. Personal safety was no longer a priority.

When alcoholism and cocaine addiction escalated into an assortment of other drug abuse, including meth, I got scared and I got help. Sobriety did not come easily; neither did my HIV diagnosis, which I received fifty days into my recovery. It took some time to accept it. But I did. Today, I am still living sober and consider myself to be in decent health.

But the thing I find impossible to accept is the current thinking among some young people that HIV is just another item on the list of chronic illnesses that they make a pill for. Knowing that people, young and old, purposely put themselves at risk because they are being taught that this is not a death sentence is horrifying to me. While it is true the number of HIV/AIDS-related deaths has dramatically declined due to modern medicine, this disease is not to be taken lightly. Treatment is indeed remarkable, but it is not necessarily a lifetime guarantee.

Beyond this, the fear and social stigma still associated with this disease, the daunting prospect of looking for love in an ill-informed society, the daily reminder of having to take medication, and the financial burden of endless prescriptions and blood tests are not fun things to live with.

The infection rate in Rhode Island, and in America in general, among gay and bisexual youth is staggering. I believe it's because AIDS stopped being a topic of conversation when they invented a few new drugs and when people in this country stopped dying gruesome deaths by the masses. Kids get a paragraph on HIV/AIDS in a health class if they're lucky, nobody talks about it at home, and churches don't think it's a problem. High school and college campuses are unsafe and uninformative, and young people don't know how to connect with like-minded people safely, because most of them aren't lucky enough to have even a single person in whom they can confide. So they go underground and get mixed up in the scene.

There is a depressingly low amount of support for LGBT youth who find themselves in precarious situations with their families, religious sects and peer groups. Making unhealthy decisions is less about reckless, just-for-fun, teenage shenanigans and more about finding oneself entangled in a last-resort lifestyle, drowning and grasping for love in a society who doesn't teach its youth how to take care of themselves because they are worthless. We simply do not spend enough on education and prevention because the politicians can sleep better at night by convincing themselves that this is not an American problem.

I don't mind speaking candidly on these topics because I don't think they are discussed enough. I want to see support made available and accessible to those affected by HIV/AIDS and addiction-related issues. The first step is to know your status. You also have to be conscious and present in your own life. If you worry that alcohol or drug use is impairing your ability to interact safely with others, find somebody who will help.

It's a long journey and nobody should have to walk through it alone.

What three adjectives best describe you?

Funny, emotional, contemplative

What is your greatest achievement?

Getting sober

What is your greatest regret?

The time I wasted before I realized I deserved better

What keeps you up at night?

Memories of when I screwed up; knowing there are people out there doing the exact same things I did

If you could change one thing about living with HIV, what would it be?

I would want others to be more empathetic than sympathetic. Simply to be understood

What is the best advice you ever received?

You don't have to do it alone.

What person in the HIV/AIDS community do you most admire?

Annie Lennox—no question. Her genuine concern for the state of our world and empathy for those suffering from disease is amazing to me.

What drives you to do what you do?

Hope. Finding hope. Sharing hope. It's the magic word.

What is your motto?

One day at a time

If you had to evacuate your house immediately, what is the one thing you would grab on the way out?

I don't have a ton of possessions I consider to be life or death items. Honestly, my Stribild is the first thing that came to mind.

If you could be any animal, what would you be? And why?

Some sort of bird. I used to have a lot of flying dreams, and I love plane travel. It's exhilarating.

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