

YEAR IN REVIEW: THE EVENTS THAT MADE 2014 REMARKABLE

THE ADVOCATE

SINCE 1967

DECEMBER 2014/JANUARY 2015

ISSUE 1076

A close-up, high-resolution portrait of Vladimir Putin, the President of Russia, looking directly at the camera with a serious expression. He is wearing a dark suit, a light blue shirt, and a red tie with a small, dark, repeating pattern. The background is dark and out of focus.

**PERSON OF
THE YEAR**

What is STRIBILD?

STRIBILD is a prescription medicine used to treat HIV-1 in adults who have never taken HIV-1 medicines before. It combines 4 medicines into 1 pill to be taken once a day with food. STRIBILD is a complete single-tablet regimen and should not be used with other HIV-1 medicines.

STRIBILD does not cure HIV-1 infection or AIDS. To control HIV-1 infection and decrease HIV-related illnesses you must keep taking STRIBILD. Ask your healthcare provider if you have questions about how to reduce the risk of passing HIV-1 to others. Always practice safer sex and use condoms to lower the chance of sexual contact with body fluids. Never reuse or share needles or other items that have body fluids on them.

IMPORTANT SAFETY INFORMATION

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

STRIBILD can cause serious side effects:

- **Build-up of an acid in your blood (lactic acidosis),** which is a serious medical emergency. Symptoms of lactic acidosis include feeling very weak or tired, unusual (not normal) muscle pain, trouble breathing, stomach pain with nausea or vomiting, feeling cold especially in your arms and legs, feeling dizzy or lightheaded, and/or a fast or irregular heartbeat.
- **Serious liver problems.** The liver may become large (hepatomegaly) and fatty (steatosis). Symptoms of liver problems include your skin or the white part of your eyes turns yellow (jaundice), dark “tea-colored” urine, light-colored bowel movements (stools), loss of appetite for several days or longer, nausea, and/or stomach pain.
- **You may be more likely to get lactic acidosis or serious liver problems** if you are female, very overweight (obese), or have been taking STRIBILD for a long time. In some cases, these serious conditions have led to death. Call your healthcare provider right away if you have any symptoms of these conditions.

- **Worsening of hepatitis B (HBV) infection.** If you also have HBV and stop taking STRIBILD, your hepatitis may suddenly get worse. Do not stop taking STRIBILD without first talking to your healthcare provider, as they will need to monitor your health. STRIBILD is not approved for the treatment of HBV.

Who should not take STRIBILD?

Do not take STRIBILD if you:

- **Take a medicine that contains:** alfuzosin, dihydroergotamine, ergotamine, methylergonovine, cisapride, lovastatin, simvastatin, pimozone, sildenafil when used for lung problems (Revatio®), triazolam, oral midazolam, rifampin or the herb St. John’s wort.
- **For a list of brand names for these medicines,** please see the Brief Summary on the following pages.
- **Take any other medicines to treat HIV-1 infection,** or the medicine adefovir (Hepsera®).

What are the other possible side effects of STRIBILD?

Serious side effects of STRIBILD may also include:

- **New or worse kidney problems, including kidney failure.** Your healthcare provider should do regular blood and urine tests to check your kidneys before and during treatment with STRIBILD. If you develop kidney problems, your healthcare provider may tell you to stop taking STRIBILD.
- **Bone problems,** including bone pain or bones getting soft or thin, which may lead to fractures. Your healthcare provider may do tests to check your bones.
- **Changes in body fat** can happen in people taking HIV-1 medicines.
- **Changes in your immune system.** Your immune system may get stronger and begin to fight infections. Tell your healthcare provider if you have any new symptoms after you start taking STRIBILD.

The most common side effects of STRIBILD include nausea and diarrhea. Tell your healthcare provider if you have any side effects that bother you or don’t go away.

What should I tell my healthcare provider before taking STRIBILD?

- **All your health problems.** Be sure to tell your healthcare provider if you have or had any kidney, bone, or liver problems, including hepatitis virus infection.
- **All the medicines you take,** including prescription and nonprescription medicines, vitamins, and herbal supplements. STRIBILD may affect the way other medicines work, and other medicines may affect how STRIBILD works. Keep a list of all your medicines and show it to your healthcare provider and pharmacist. Do not start any new medicines while taking STRIBILD without first talking with your healthcare provider.
- **If you take hormone-based birth control** (pills, patches, rings, shots, etc).
- **If you take antacids.** Take antacids at least 2 hours before or after you take STRIBILD.
- **If you are pregnant** or plan to become pregnant. It is not known if STRIBILD can harm your unborn baby. Tell your healthcare provider if you become pregnant while taking STRIBILD.
- **If you are breastfeeding** (nursing) or plan to breast-feed. Do not breastfeed. HIV-1 can be passed to the baby in breast milk. Also, some medicines in STRIBILD can pass into breast milk, and it is not known if this can harm the baby.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Please see Brief Summary of full Prescribing Information with **important warnings** on the following pages.



STRIBILD is a prescription medicine used as a complete single-tablet regimen to treat HIV-1 in adults who have never taken HIV-1 medicines before. STRIBILD does not cure HIV-1 or AIDS.

I started my personal revolution

Talk to your healthcare provider about starting treatment.

STRIBILD is a complete HIV-1 treatment in **1 pill**, once a day.

Ask if it's right for you.

STRIBILD® 

elvitegravir 150mg/ cobicistat 150mg/ emtricitabine 200mg/ tenofovir disoproxil fumarate 300mg tablets

 **GILEAD**

Patient Information

STRIBILD® (STRY-bild) **(elvitegravir 150 mg/cobicistat 150 mg/emtricitabine 200 mg/ tenofovir disoproxil fumarate 300 mg) tablets**

Brief summary of full Prescribing Information. For more information, please see the full Prescribing Information, including Patient Information.

What is STRIBILD?

- **STRIBILD is a prescription medicine used to treat HIV-1 in adults who have never taken HIV-1 medicines before.** STRIBILD is a complete regimen and should not be used with other HIV-1 medicines.
- **STRIBILD does not cure HIV-1 or AIDS.** You must stay on continuous HIV-1 therapy to control HIV-1 infection and decrease HIV-related illnesses.
- **Ask your healthcare provider about how to prevent passing HIV-1 to others.** Do not share or reuse needles, injection equipment, or personal items that can have blood or body fluids on them. Do not have sex without protection. Always practice safer sex by using a latex or polyurethane condom to lower the chance of sexual contact with semen, vaginal secretions, or blood.

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

STRIBILD can cause serious side effects, including:

1. **Build-up of lactic acid in your blood (lactic acidosis).** Lactic acidosis can happen in some people who take STRIBILD or similar (nucleoside analogs) medicines. Lactic acidosis is a serious medical emergency that can lead to death. Lactic acidosis can be hard to identify early, because the symptoms could seem like symptoms of other health problems. **Call your healthcare provider right away if you get any of the following symptoms which could be signs of lactic acidosis:**
 - feel very weak or tired
 - have unusual (not normal) muscle pain
 - have trouble breathing
 - have stomach pain with nausea or vomiting
 - feel cold, especially in your arms and legs
 - feel dizzy or lightheaded
 - have a fast or irregular heartbeat
2. **Severe liver problems.** Severe liver problems can happen in people who take STRIBILD. In some cases, these liver problems can lead to death. Your liver may become large (hepatomegaly) and you may develop fat in your liver (steatosis). **Call your healthcare provider right away if you get any of the following symptoms of liver problems:**
 - your skin or the white part of your eyes turns yellow (jaundice)
 - dark “tea-colored” urine
 - light-colored bowel movements (stools)
 - loss of appetite for several days or longer
 - nausea
 - stomach pain

You may be more likely to get lactic acidosis or severe liver problems if you are female, very overweight (obese), or have been taking STRIBILD for a long time.
3. **Worsening of Hepatitis B infection.** If you have hepatitis B virus (HBV) infection and take STRIBILD, your HBV may get worse (flare-up) if you stop taking STRIBILD. A “flare-up” is when your HBV infection suddenly returns in a worse way than before.
 - Do not run out of STRIBILD. Refill your prescription or talk to your healthcare provider before your STRIBILD is all gone

- Do not stop taking STRIBILD without first talking to your healthcare provider
- If you stop taking STRIBILD, your healthcare provider will need to check your health often and do blood tests regularly for several months to check your HBV infection. Tell your healthcare provider about any new or unusual symptoms you may have after you stop taking STRIBILD

Who should not take STRIBILD?

Do not take STRIBILD if you also take a medicine that contains:

- adefovir (Hepsera®)
- alfuzosin hydrochloride (Uroxatral®)
- cisapride (Propulsid®, Propulsid Quicksolv®)
- ergot-containing medicines, including: dihydroergotamine mesylate (D.H.E. 45®, Migranal®), ergotamine tartrate (Cafergot®, Migergot®, Ergostat®, Medihaler Ergotamine®, Wigraine®, Wigrettes®), and methylergonovine maleate (Ergotrate®, Methergine®)
- lovastatin (Advicor®, Altoprev®, Mevacor®)
- oral midazolam
- pimozide (Orap®)
- rifampin (Rifadin®, Rifamate®, Rifater®, Rimactane®)
- sildenafil (Revatio®), when used for treating lung problems
- simvastatin (Simcor®, Vytorin®, Zocor®)
- triazolam (Halcion®)
- the herb St. John's wort

Do not take STRIBILD if you also take any other HIV-1 medicines, including:

- Other medicines that contain tenofovir (Atripla®, Complera®, Viread®, Truvada®)
- Other medicines that contain emtricitabine, lamivudine, or ritonavir (Atripla®, Combivir®, Complera®, Emtriva®, Epivir® or Epivir-HBV®, Epzicom®, Kaletra®, Norvir®, Trizivir®, Truvada®)

STRIBILD is not for use in people who are less than 18 years old.

What are the possible side effects of STRIBILD?

STRIBILD may cause the following serious side effects:

- **See “What is the most important information I should know about STRIBILD?”**
- **New or worse kidney problems, including kidney failure.** Your healthcare provider should do blood and urine tests to check your kidneys before you start and while you are taking STRIBILD. Your healthcare provider may tell you to stop taking STRIBILD if you develop new or worse kidney problems.
- **Bone problems** can happen in some people who take STRIBILD. Bone problems include bone pain, softening or thinning (which may lead to fractures). Your healthcare provider may need to do tests to check your bones.
- **Changes in body fat** can happen in people who take HIV-1 medicine. These changes may include increased amount of fat in the upper back and neck (“buffalo hump”), breast, and around the middle of your body (trunk). Loss of fat from the legs, arms and face may also happen. The exact cause and long-term health effects of these conditions are not known.
- **Changes in your immune system** (Immune Reconstitution Syndrome) can happen when you start taking HIV-1 medicines. Your immune system may get stronger and begin to fight infections that have been hidden in your body for a long time. Tell your healthcare provider right away if you start having any new symptoms after starting your HIV-1 medicine.

The most common side effects of STRIBILD include:

- Nausea
- Diarrhea

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

- These are not all the possible side effects of STRIBILD. For more information, ask your healthcare provider.
- Call your healthcare provider for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

What should I tell my healthcare provider before taking STRIBILD?

Tell your healthcare provider about all your medical conditions, including:

- If you have or had any kidney, bone, or liver problems, including hepatitis B infection
- If you are pregnant or plan to become pregnant. It is not known if STRIBILD can harm your unborn baby. Tell your healthcare provider if you become pregnant while taking STRIBILD.
 - There is a pregnancy registry for women who take antiviral medicines during pregnancy. The purpose of this registry is to collect information about the health of you and your baby. Talk with your healthcare provider about how you can take part in this registry.
- If you are breastfeeding (nursing) or plan to breastfeed. Do not breastfeed if you take STRIBILD.
 - You should not breastfeed if you have HIV-1 because of the risk of passing HIV-1 to your baby.
 - Two of the medicines in STRIBILD can pass to your baby in your breast milk. It is not known if the other medicines in STRIBILD can pass into your breast milk.
 - Talk with your healthcare provider about the best way to feed your baby.

Tell your healthcare provider about all the medicines you take, including prescription and nonprescription medicines, vitamins, and herbal supplements:

- STRIBILD may affect the way other medicines work, and other medicines may affect how STRIBILD works.
- Be sure to tell your healthcare provider if you take any of the following medicines:
 - Hormone-based birth control (pills, patches, rings, shots, etc)
 - Antacid medicines that contain aluminum, magnesium hydroxide, or calcium carbonate. Take antacids at least 2 hours before or after you take STRIBILD
 - Medicines to treat depression, organ transplant rejection, or high blood pressure
 - amiodarone (Cordarone®, Pacerone®)
 - atorvastatin (Lipitor®, Caduet®)
 - bepridil hydrochloride (Vasacor®, Bepadin®)
 - bosentan (Tracleer®)
 - buspirone
 - carbamazepine (Carbatrol®, Epitol®, Equetro®, Tegretol®)
 - clarithromycin (Biaxin®, Prevpac®)
 - clonazepam (Klonopin®)
 - clorazepate (Gen-xene®, Tranxene®)
 - colchicine (Colcris®)
 - medicines that contain dexamethasone
 - diazepam (Valium®)

- digoxin (Lanoxin®)
- disopyramide (Norpace®)
- estazolam
- ethosuximide (Zarontin®)
- flecainide (Tambocor®)
- flurazepam
- fluticasone (Flovent®, Flonase®, Flovent® Diskus®, Flovent® HFA, Veramyst®)
- itraconazole (Sporanox®)
- ketoconazole (Nizoral®)
- lidocaine (Xylocaine®)
- mexiletine
- oxcarbazepine (Trileptal®)
- perphenazine
- phenobarbital (Luminal®)
- phenytoin (Dilantin®, Phenytek®)
- propafenone (Rythmol®)
- quinidine (Neudexta®)
- rifabutin (Mycobutin®)
- rifapentine (Priftin®)
- risperidone (Risperdal®, Risperdal Consta®)
- salmeterol (Serevent®) or salmeterol when taken in combination with fluticasone (Advair Diskus®, Advair HFA®)
- sildenafil (Viagra®), tadalafil (Cialis®) or vardenafil (Levitra®, Staxyn®), for the treatment of erectile dysfunction (ED). If you get dizzy or faint (low blood pressure), have vision changes or have an erection that last longer than 4 hours, call your healthcare provider or get medical help right away.
- tadalafil (Adcirca®), for the treatment of pulmonary arterial hypertension
- telithromycin (Ketek®)
- thioridazine
- voriconazole (Vfend®)
- warfarin (Coumadin®, Jantoven®)
- zolpidem (Ambien®, Edlular®, Intermezzo®, Zolpimist®)

Know the medicines you take. Keep a list of all your medicines and show it to your healthcare provider and pharmacist when you get a new medicine. Do not start any new medicines while you are taking STRIBILD without first talking with your healthcare provider.

Keep STRIBILD and all medicines out of reach of children.

This Brief Summary summarizes the most important information about STRIBILD. If you would like more information, talk with your healthcare provider. You can also ask your healthcare provider or pharmacist for information about STRIBILD that is written for health professionals, or call 1-800-445-3235 or go to www.STRIBILD.com.

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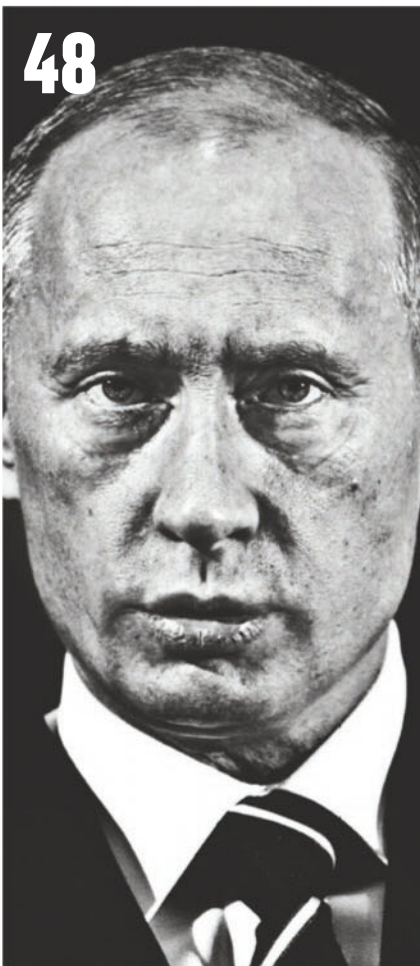
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When Francis Fukuyama declared in 1992 that we were at the end of history, he couldn't have imagined 2014, a year that saw global outrage over Russia and Uganda, and delight over marriage equality, *Transparent*, and even a bearded drag queen.

By Matthew Breen

ON THE COVER Photography by Junko Kimura

FROM LEFT: GRAHAM DENHOLM/GETTY IMAGES; DMITRY ASTAKHOV/AP/GETTY IMAGES (PUTIN); MICHELLE RODRIGUEZ



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By Brandon Voss



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AS IF TO SAY
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Editor's Letter

A **YEAR-END ISSUE** is always an exercise in nostalgia. We're reminded of the great and terrible events of the previous year—and it's a much needed reality check for those of us in magazines who are accustomed to constantly looking several months into the future. But the week we put this issue to bed, the news media were consumed with developments in marriage equality cases. The week was a study not in nostalgia, but in truly retrograde thinking.

The Supreme Court rejected the appeals of five states (Virginia, Utah, Indiana, Wisconsin, and Oklahoma) to keep their unconstitutional bans on same-sex marriage, raising the number of marriage equality states from 19 to a possible 30. I'm sure we'll all have a better handle on the precise number in a few days, but as I write this, some states' attorneys general are fighting to keep the marriage equality bans that were deemed unconstitutional—by rulings in 40 court cases.

As progress goes, this week's was both speedy and spasmodic. In Nevada, marriages were set to start, then they were stopped, and then were set to start up again—glitches attributed to clerical errors in the order by Associate Justice Anthony Kennedy. More malevolently, Florida's Gov. Rick Scott said he'd stand by Attorney General Pam Bondi's vow to keep fighting for the ban despite having exhausted every single one of their legal options. Kansas governor Sam Brownback said he won't follow the federal appeals court rulings, and couples there are being deprived of their lawful rights. In South Carolina, Attorney General Alan Wilson and Gov. Nikki Haley are refusing, too. Call it denial, or call it pandering to conservative voters in the run-up to a midterm election. Is one any better than the other?

Ted Cruz, U.S. senator from Texas—the human embodiment of a wrench in the works—has gone full-tilt Michele Bachmann and said he'll introduce a constitutional amendment barring the federal government or the courts from overturning state marriage laws. No word yet on his plans for forcing gays into opposite-sex marriages or homo re-education camps.

Predictably, religious nuts said the action by SCOTUS would (a) bring an end to Western civilization, (b) subvert the laws of nature, (c) hasten the apocalypse. Can't argue with any of that, as those are clearly wait-and-see



scenarios. Nevertheless, my money is on (d) business as usual, apart from a lot of really great weddings.

But it's Cruz, Brownback, Haley, and the rest, and all the people to whom they're pandering, that are terminally caught in the past. And who is leaving them in the dust? Estonia.

This same week, the Estonian parliament passed legislation, which was signed into law by its president, giving legal protections to cohabiting couples regardless of gender as of 2016.

To recap: Estonia, a former Soviet country, will recognize same-sex unions. South Carolina, Kansas, and Florida won't. If Estonia can figure it out and look toward the future, one with dignity and equality for its citizens, why can't Kansas?

A handwritten signature in black ink that reads "Matthew Breen".

Matthew Breen, **EDITOR IN CHIEF**



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Brenden Shucart is an HIV/AIDS-LGBT rights advocate, actor, and writer who until recently served as editor for *Positive Frontiers*. In addition, his work has been featured in *The Advocate*, *Out There*, and *HIV Plus* magazine. Brenden's writing around HIV-related health issues and stigma has been described as "humanizing and heartbreaking" as well as "beautiful, honest, and important." He resides in Los Angeles with his boyfriend and their two dogs.



Stephanie Fairington (far right) is a journalist who writes on gender and sexuality. Her work has appeared in *The New York Times*, *The Boston Globe*, *The Atlantic* (online), *Elle*, and *Marie Claire*, among others, often covering the ways notions of gender and sexuality undermine social progress. She is writing a polemic on the immorality of the monogamy imperative. She lives in Brooklyn with her partner and their two cats.



Brandon Voss, a contributing editor of *The Advocate*, interviewed Rose Byrne for this issue's "A List," a Q&A column for which he has spoken to celebrities such as George Clooney, Zac Efron, and Melissa McCarthy. A former editor in chief of *HX* magazine, Voss has written for *The Advocate* since 2006. He also covers theater for Advocate.com and regularly contributes to *Playbill*. Born and raised in New Orleans, Voss now lives in Manhattan with his partner.

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CLINTON'S NEW CHALLENGE: THE MILLENNIALS

Millennials are more progressive on LGBT rights than Hillary was in 2008. Can she inspire them to the polls in a 2016 run?

BY KERRY ELEVELD

I don't see this as one expected, it's the Hillary Clinton would make one of her first campaign mistakes over the years. But there it is: Clinton went after NPR's Frankirah interview. Twenty times in those during a seven-minute exchange about same-sex marriage, DOMA, and whether Clinton had an actual change of heart on marriage equality or simply changed her political calculation as voter attitudes shifted.

But all seven minutes were a disaster. Clinton lost her cool only in the last minute and a half. It's also rare that her media offense was substance as much as in one time, though some publications, such as *The Atlantic*, argued otherwise: that after Clinton tried several times to sell down Clinton's true motivations for changing her marriage position, Clinton's patience waned.

"You know, I have to say, I think you are being very pessimistic, but you are playing with my words, and playing with what is such an important issue," Clinton said. Clinton pressed gently forward. "I'm just trying to clarify so I can understand."

Then came Clinton's worst moment. "No, I don't think you are trying to clarify," she charged. "I think you're trying to say I used to be opposed and now I'm in love and I did it for political reasons. And that's just flat wrong. So let me just state what I feel that you are implying and repudiate it. I have a strong record. I have a great commitment to this issue. And I am proud of what I've done and the progress we're making."

Up to that point, Clinton had played the happy warrior most of the way through the marriage question, selling down "I think we have all reached" and "I'm proud of our country."

The interview was filmed and aired and misinterpreted to death by the *Bulwer* media. To wit, in fact, according to me

Clinton stands on a key issue involving a movement that has mostly advanced her for years. After all, a November 2007 poll by Marist College found that Clinton, you, and Barack Obama were preferred Clinton (48%) over Obama (22%) and Edwards (7%), which roughly corresponds to what 2008 exit polls in New York and California would say about Clinton's past in the last interesting part of her position and probably the heart of her worries on same-sex marriage and LGBT issues.

What has almost could say well be a marriage case at the Supreme Court in either 2012 or 2013. If people think questions about Clinton's previous stance were therapy, say them. Do you support

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Spectator



Queen for a New Day

With the ubiquity of drag performance come higher expectations for a stand-out performer. So what makes the ideal star?

DRAG entertainers are everywhere nowadays, but that doesn't mean the art of doing drag is any easier to pull off. As costume designer Thea Miller says, "It's harder to pull off, since drag is on TV, at bars, in restaurants, on a beach, in a commercial, and all over the media these days. Like a Pucci poncho."

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CLINTON'S NEW CHALLENGE: THE MILLENNIALS

Politics contributor Kerry Eleveld's article described the problem a Hillary Clinton 2016 presidential campaign may have when it comes to inspiring progressive millennial generation voters, particularly surrounding her position on marriage equality. Reader Bob Mitchell wrote, "Leave it up to the states' won't cut it with millennials. They will see right through it. Obama burned everyone who voted for him, so I don't think we are going to see that replayed. The Republicans aren't smart enough to run Rand Paul, so we'll just see another bad-choices election." Commenter Jeff Justice lamented about the system as a whole: "I thought surely we'd see an alternative political party break through the two-party-system charade before the prevailing of marriage equality or marijuana legalization.... By the time definitive equality occurs for LGBTs, almost all other rights may be eroded. All we get with these two failed political parties are endless lie-based war, poverty,

pollution, in-effect human slavery, and the erosion of civil liberties." Reader Don Rockwell was more optimistic: "Who will the Republicans drag out of obscurity, another Palin? There is no recognizable name that can beat Hillary.... Get ready for progress." Reader Tommaso Brambilla wrote simply, "Warren 2016."

WE NEED A DRAG QUEEN FOR A NEW DAY

Michael Musto's column on the skills drag queens must have in the *RuPaul's Drag Race* era prompted a conversation about the loss of queer culture. Mark Scanlon-Greene opined, "The more LGBT people assimilate into the dominant culture, the less use there will be for drag queens, gay bars, and all the other accoutrements that came with gay liberation. Some think this is healthy. I am not one of them." Scott Westgard responded, "The world changes, and always will. There is room for all at the table, but you can't expect the gay subculture of the '70s to remain a constant in modern gay life. Some things are going to get lost in the cracks of time, no

matter how much we cherished them." Scanlon-Greene: "We are not required to go along with things just because the times are being changed by someone else. The drive to assimilate with the larger culture and adopt its norms (e.g., monogamy, marriage) may be comfortable for some, and preferred by many, but there were parts of the counterculture that improved the dominant culture. Without the 'competition' of the counterculture, there is nothing to hold the dominant culture in check. Resistance seems to be more futile than it used to be. Some people do not want/need acceptance from the dominant culture, and they do not want to be swept up by it."

BACKLASH ISN'T REAL

Editor in chief Matthew Breen's letter posited that setbacks are real, but the conservative reaction to the expansion of legal equality hasn't yet constituted a legitimate backlash. Tim Easton wrote, "Actually, the backlashes are very real indeed. Yet because of the magnitude of our spectacular victories federally and in many states concerning the ulti-

mate civil right of marriage, we can now choose to make these expected backlashes not emotionally painful anymore (except when the very real backlashes fuel oppression, violence, executions, etc.)." A reader called Michael added, "Not real" seems like an odd description. I suppose it's a proxy for 'isolated' or 'not relevant.' Of course, whether or not these recent events reflect a larger trend, and whether that trend is growing or shrinking, is not something we can determine quite yet. I will say, it's hard to imagine turning things back in any significant way." In early September Timothy Anderson wrote, "I am not sure it's quite the time to be so victorious. Less than half the states have marriage equality or employment discrimination protections." At press time for this issue, marriage equality had been expanded to as many as 30 states. How quickly things can change. In response to Breen's description of One Direction's Zayn as the cute one (the backlash against him was related to his #FreePalestine tweet), Richard Stewart wrote, "Liam's the cute one."



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ELECTION IDENTITY CRISIS

The Victory Fund is proud of its success rate, but it's not taking enough chances where we need victories: the South and Midwest.

BY KERRY ELEVELD

The Gay and Lesbian Victory Fund's mission seems simple enough—elect more openly LGBT candidates to public office, thereby spreading equality. But many people of late have taken issue with the organization for supporting gay Republican candidates against Democratic challengers who are equally pro-gay. Notably, Michelangelo Signorile penned an op-ed for *The Huffington Post* titled “Here’s Why You Shouldn’t Back a Candidate Just Because He’s Gay.” Signorile shredded the Victory Fund for endorsing an openly gay Republican from Massachusetts, Richard Tisei, who’s running against an avowed pro-LGBT progressive, Seth Moulton, to represent the state’s 6th Congressional District. The crux of Signorile’s argument has merit: A vote for Tisei is a vote for keeping the House of Representatives in GOP hands (what have they done for us lately?), while a vote for Moulton is a vote to

return the majority to Democrats (the party that passed hate crimes legislation and repealed “don’t ask, don’t tell” when last it controlled the chamber).

I get it. I greatly respect Signorile (and agree with his politics 90% of the time), but this scenario requires an alternative perspective. The problem isn’t supporting gay Republican candidates over progressive candidates; it’s that the Victory Fund doesn’t take enough chances on openly LGBT candidates in the places where we most need pro-LGBT voices now: legislatures in the South and some parts of the Midwest, and nearly every Republican caucus in the nation.

The Victory Fund loves to talk about its “win rate,” the percentage of candidates it endorses who actually get elected. From 2009 through 2013, it averaged an impressive win rate of 68%. In press releases and quotes, it often refers to this success rate using words like “extraordinary” and

“phenomenal.” This is obviously great for fundraising—everyone wants to give to a winner. But here’s the flip side of that coin: If you’re right that frequently in politics, you’re not taking enough risks. Much better for the Victory Fund would be a lower win rate because it got into races earlier and took more chances on candidates who didn’t necessarily look like a perfect bet. Those are the candidates whose campaigns can most benefit from the money and who are often running in places where they’re pushing the envelope. In other words, they’re running in areas of the country that need pro-LGBT voices the most.

Case in point: Trevor Thomas, who ran for Michigan’s 3rd Congressional District in 2012. Thomas should have been a great candidate for the Victory Fund. He was a proven LGBT advocate, a veteran of both the Human Rights Campaign and the Servicemembers Legal Defense Network,

where he served as director of communications during the final year of the successful effort to repeal “don’t ask, don’t tell.” He was running in West Michigan, a conservative section of a blue-leaning state that had elected only one openly gay lawmaker in its history—State Rep. Chris Kolb, who retired in 2007. That may have changed in November (at press time, there were five LGBT candidates running for the state legislature). But Thomas was ahead of the curve. He was also staunchly pro-choice, which is a rarity in socially conservative West Michigan (even for a Democrat), and his position on choice is one of the Victory Fund’s four criteria for endorsements.

Yet the Victory Fund did not endorse. Peter Rosenstein analyzed the organization’s failure to enter this race in a *Washington Blade* op-ed, and the decision boiled down to two reasons: (1) Thomas would be fighting an uphill battle in the general election; (2) Thomas wasn’t favored by the Democratic Congressional Campaign Committee (DCCC), mostly because his primary opponent, Steve Pestka, could self-fund his campaign. The Democratic establishment mistakenly assumed deep pockets would make Pestka more electable in the general election against the Republican incumbent, Rep. Justin Amash.

I tracked this campaign closely because I knew Thomas and also because the victor would ultimately represent the city I hail from: Grand Rapids, Mich. When Thomas first entered the race, local Dems were asleep at the switch, not even realizing they could win the seat because the area was usually so reliably red. But Thomas realized that Barack Obama’s candidacy shook up the district’s voting trends in 2008, when Obama narrowly won the district after George W. Bush had taken it by more than 15 points in the two previous election cycles.

Throughout the race, the Victory Fund passed up opportunities to give Thomas a boost. First, they said they would consider endorsing him if he could prove

STATS



49

Number of openly LGBT elected or appointed officials in 1991 when the Victory Fund was established

500+

Number of openly LGBT elected or appointed officials today



125

Number of candidates currently endorsed by the Victory Fund

his viability by raising \$100,000. Thomas filed his candidacy on Feb. 9, 2012, and surpassed that fundraising goal just seven weeks later. The following month, Thomas succeeded in making his primary challenger’s 2001 vote to defund Planned Parenthood a legitimate campaign issue, and Pestka ultimately changed his position, telling the *Battle Creek Enquirer*, “I don’t believe in making abortion illegal.” In June, Democratic pollster Mark Mellman found that Thomas’s biggest hurdle to beating Pestka was name recognition. Once voters were briefed on the positions, Thomas held a 22-point lead. Money could have helped with that, but the Victory Fund stayed silent with each passing month.

Thomas also amassed endorsements from serious political players, including former Michigan governor Jennifer Granholm, Rep. Diana DeGette of Colorado, who co-chairs the House’s Pro-Choice Caucus, and Rep. Barney Frank of Massachusetts, who said, “I think Trevor is the best Democrat to beat Justin Amash in the fall.” Additionally, Thomas earned the support of Planned Parenthood and the progressive veterans group VoteVets.org—both of which provided significant resources to him in the form of money, mailers, and volunteers. Thomas ultimately amassed a war chest of close to \$450,000, between donations made to his campaign and independent expenditures made by outside groups.

Meanwhile, Pestka’s game plan amounted to writing personal checks to his own campaign for nearly \$600,000, which accounted for about 75% of his total fundraising in the primary. The DCCC was right: Pestka could self-fund. He was also a man with antiquated views who wasn’t much interested in campaigning. Pestka won the August primary but was no match for the much younger, more exuberant, and equally deep-pocketed incumbent, who prevailed 53% to 44% in the general election. File that one under “Missed Opportunity.”

Thomas needed early money. A Victory Fund endorsement would have put him on the radar of scores of wealthy LGBT donors who use the organization’s list as a guide to their own giving. In fact, early money has always been the mantra for one of the most revered political action committees in the business: EMILY’s List, which stands for “Early money is like yeast” (it raises dough). The mission of EMILY’s List since its founding in 1985 is to “elect pro-choice Democratic women to office.” One data-driven analysis of the organization’s overall effectiveness published by the American Political Science Association in 2010 found that an EMILY’s List endorsement “almost quadruples the likelihood of electoral success” for candidates who seem the least likely to earn an endorsement (e.g. candidates who have less money or who are running in more conservative states). However, the same study found the organization’s endorsement had “absolutely no impact” on candidates for whom an endorsement would seem most likely (e.g. those with money running in more progressive areas of the country). In August 2012, EMILY’s List sent out a press





Victory Fund-backed candidates: Mark Pocan (Wis.), Kyrsten Sinema (Ariz.), Richard Tisei (Mass.)



release celebrating its own 70% win rate *during the primary season*—because primaries are where the action's at if you're trying to engineer a change in leadership of the country.

The Victory Fund did endorse four potential Democratic newcomers to Congress in 2012: Three of them had high-profile DCCC backing (Mark Takano of California, Sean Patrick Maloney of New York, and Kyrsten Sinema of Arizona) and one of them was an odds-on favorite from the start (Mark Pocan of Wisconsin). Of those four, Sinema was probably the longest shot and she likely benefited most from an early Victory Fund endorsement in February (along with an EMILY's List endorsement in April). But all four candidates won.

The other congressional newcomer the Victory Fund endorsed, who did not have DCCC support, was Richard Tisei, the Massachusetts Republican whose 2012 bid failed and who, at the time of this writing, was trying again in November 2014. For a pro-LGBT organization, there's a strategic case to be made for trying to elect more LGBT Republicans. GOP caucuses are where we desperately need pro-equality voices weighing in on the discussion. Right now, there's not a single openly gay voice among the 233 House Republicans. That has certainly not helped the cause of LGBT equality there.

Upon close examination of various progressive movements—including labor, immigration, reproductive rights, and environmentalism—it is clear that one advantage the LGBT movement has had in moving legislation and accelerating public opinion in our favor has been our ability to occasionally make appeals across party lines. In New York, for instance, we gained the freedom to marry because the Republican senate majority leader, Dean Skelos, both allowed the measure to come to a vote and let his members take a “vote of conscience” on it. Skelos's willingness to let the bill be voted on yielded four Republican “yeas” and a marriage tipping point that doubled the number of Americans living in states with equal marriage rights.

Strategically speaking, as a movement, we will be more successful if we diversify our support and are less dependent on Democratic control in state legislatures and Congress. In fact, before 2009–2010,



As a movement, we will be more successful if we diversify our support and are less dependent on Democratic control in state legislatures and Congress.”

the last time Democrats controlled both congressional chambers and the presidency was 1993–1994, and prior to that it was 1977–1980. I'd rather not trim down our shot at equality to one narrow two-year window every 15 years or so.

The places where we most need a fresh crop of equality lawmakers are in the South and the Midwest, regardless of party affiliation. But the chances of finding Republican candidates in those regions who are both openly gay and pro-choice are presently pretty slim. I count myself an advocate for reproductive rights, and yet I see no reason why the Victory Fund should use one's views on abortion as a criterion for one's ability to advocate on behalf of LGBT equality. That essentially rules out Republicans (and even some Democrats) who don't live on the progressive edges of this country. It chokes off viable voices for LGBT equality in the caucuses where we need them most. In fact, all three gay Republican candidates for Congress in 2014 (Tisei, Dan Innis of New Hampshire, and Carl DeMaio of California) are pro-choice and hail from the country's more liberal regions on the West Coast and in the Northeast. While it would help the cause of equality to have an openly gay voice among House Republicans, in the long run it will help the cause more to geographically diversify where those calls for equality are coming from.

The Victory Fund is trying to have it both ways, aiming to be progressive and nonpartisan at the same time, which hamstringing its ability to do either thing really well. EMILY's List, for instance, has a one-line mission statement: “We elect pro-choice Democratic women to office.” Very straightforward. The Victory Fund should make an equally decisive choice and either follow the passionate counsel of Signorile by becoming unabashedly progressive or become a truly nonpartisan operation that keeps its options open nationwide. I would argue for the latter—not necessarily so it can support Republicans from places like Massachusetts, but rather so it can foster the candidacies of LGBT moderates and progressives, specifically in the South and the Midwest.

But no matter what side the Victory Fund comes down on, it should take more chances earlier, and in the places that need it most. ♦



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Top: Copies of Japanese boys' love novels seized during the raid in Henan Province. Above: A young woman arrested for writing explicit *dan mei* content is interviewed behind bars.

DANGEROUS WORDS

Slash fiction arrives and thrives in China, despite the constant threat of government crackdowns.

BY YUAN REN

Earlier this year, during a nationwide clampdown on online pornography, some 20 writers, allegedly under contract with “illegal erotic novel Web sites,” were arrested in Henan province, China, and numerous Web sites with explicit written and visual content were shut down. Most of these writers were young women, many of whom, according to footage from Phoenix TV, a Hong Kong broadcaster, were in their 20s, oblivious to the fact that they were breaking the law. The incident followed a similar spate of arrests in 2011—again of young female writers.

The women were all writers of gay fiction, known as *dan mei*, which over the past two decades has gained a vast and dedicated following in China, a country where homosexuality is still heavily stigmatized. A form of slash fiction, a genre that first appeared in America in the '70s and paired male characters from popular TV shows like *Star Trek* in unauthorized gay romances, it spread to China in the '90s from a type of Japanese manga known as “boys’ love” (BL). Focusing on male-to-male romance, *dan mei* (which may be literally translated as “indulgence in beauty”) has surprisingly spawned an exclusive fan base: Its readers and writers are nearly all straight young women and girls.

Additionally, both *dan mei*’s readers and writers view the genre as separate from mainstream gay fiction.

“*Dan mei* depicts the perfection of romance between beautiful young men,” explains 25-year-old Zhang Lu, who has been reading the genre since she was 18 years old. “It’s all about conveying the aesthetic appeal of its male characters through the writing,” Lu says, adding that *dan mei* is a woman’s romanticized fantasy of men—the reason for its success—rather than a man’s idea of homosexuality.”

There’s even a strong degree of gender elitism involved in its creation. According to one male author of *dan mei* who did not wish to be named, “The *dan mei* circle” simply does not accept that male authors are capable of writing it. He says that writers and fans “believe that it requires a complete detachment from reality and the male view of sex and homosexuality.”

A female former writer says, “*Dan mei* is a girl’s fantasy of gorgeous guys, often with feminine traits. It’s very naive in its depiction and does not feign realism.”

Andy, a 32-year-old gay man living in Shanghai, thinks these stories offer little appeal to male readers because their story lines and characters are too idealized. “Gay



Depictions of male-to-male romance from the *dan mei* novel *Delayed Love*

men in China read gay erotic fiction or go directly to gay videos, not *dan mei*,” he explains.

Beyond the literature itself, *dan mei* may be having some influence on attitudes toward homosexuality in China, among its legion of female followers at least. “*Dan mei* and homosexuality are completely separate ideas, but people who read *dan mei* will be liberal-minded towards the gay community,” says Lu.

In recent years, with the influx of Western TV and film into China, Benedict Cumberbatch, in his role as the title character in *Sherlock*, the popular BBC TV series, has gained cult status in *dan mei* circles, spawning countless depictions of gay romance between Sherlock Holmes and Dr. Watson, including explicit sexual content, such as this passage (translated from Mandarin) from a slash Web site currently accessible in China:

With three strokes [Sherlock] clawed opened John's shirt, lowering his head to kiss his Adam's apple, and then

“

The law doesn't differentiate between *dan mei* and gay fiction in any way, so if the government decides it's going to crack down on gay-related content, it'll just cast a wide net and go for *dan mei*, too.”

worked all the way down: the clavicle, nipples, navel. He deftly untied his belt, taking out John's blood-pumped penis. Although it wasn't large, it was beautifully formed, and a sudden idea flashed across his mind: Maybe he would like to taste it.

In addition to *Sherlock*, other characters from British dramas including *Downton Abbey* and *Dr. Who* have received similar treatment, causing the United Kingdom to be nicknamed the “Gay Kingdom” by *dan mei* fans. Literary content sites such as Jinjiang Literature City, as well as fan forums, have parts dedicated to the form. But despite its rather “soft” reputation, *dan mei*—like all other forms of art, literature, and film in China—must contend with state censorship. The narratives can be purely romantic or explicitly sexual, and depending on their content, can be treated in the eyes of the law as pornography, which is banned in mainland China.

“The law doesn't differentiate between *dan mei* and gay fiction in any way,” says a 28-year-old writer who asked not to be identified by name. In his view, crackdowns are a function of political whims, “so if the government decides it's going to crack down on gay-related content, it'll just cast a wide net and go for *dan mei*, too.”

For this writer, who in the past has received police warnings for his work, these episodes affect how far he is willing to push his writing. “Since the warnings, I've been much more restrained in what and how I write,” he says, equating the entire process to “a game of cat and mouse” and a search for “loopholes” to get around state laws.

For many readers and writers who see *dan mei* as a distinct literary field that deserves greater recognition in mainstream culture, such a development might not be possible until more freedoms are awarded to its writers and readers.

“Currently, *dan mei* is seen merely as an amusing category of fiction in terms of cultural and literary significance. Unless the bigger picture changes regarding freedoms and rights of homosexuality, it's difficult to see a promising future for the genre,” the writer adds.

With state censors keeping an eye on the genre, some of the most explicit forms of *dan mei* may continue to thrive only on foreign Web sites, accessible through a VPN (virtual private network)—the way some people reach blocked sites like Facebook and Twitter in China. Others may be willing to tread the fine line of judgment, and take their chances with the law. ♦

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CONFUSION AND SUCCESS MARK LGBT FINANCE

Family planning and anxieties about legal protections are having a significant effect on our bank accounts.

BY BRENDEN SHUCART

When it comes to gays and money, conventional wisdom holds that LGBTs have a very different relationship with their finances relative to their heterosexual peers, and new data seem to bear this out. Two recent studies shed light on the finances of LGBT families, and cast them in sharp contrast to the economic reality felt by their non-queer counterparts.

A January 2014 study titled “LoveFamilyMoney,” commissioned by the German financial services firm Allianz, indicates that in many ways, same-sex couples seem to be on better financial footing than heterosexuals. On average, same-sex couples without children had more retirement savings (\$310,700 versus \$251,100) and carried less non-mortgage debt (\$20,670 versus \$32,960) than “traditional” families, defined as adults ages 35 to 65 in opposite-sex marriages, with at least one child under 21 living at home, and no stepchildren, adult children, or other people in the household.

Same-sex couples without kids were also more likely to think of themselves as “wealthy” or “comfortable” (60%) than “traditional” families (52%) and far more than those in other “modern” family situations (40%), such as single-parent households or “boomerang” families, where an adult child comes back to the nest after living on his or her own.

Despite relative economic success and financial confidence, only 49% of LGBTs in a 2014 survey by Wells Fargo reported that they would feel comfortable walking into a bank and having an honest conversation about their finances. In the Allianz study, 48% of LGBTs said they use a financial professional or have used one in

the past, compared with 53% of “traditional” families.

Aaron Baldwin, an LGBT financial adviser for a Fortune 100 financial services firm, believes such hesitation is to be expected. As he notes, “Financial planning is normally triggered by a significant life event—marriage, the birth of a child, the purchase of a home, or the death of a close family member or friend.” And while death is universal, marriage, children, and homeownership each present special challenges that have historically kept them (and the need for financial planning) beyond the reach of many LGBTs.

Children very rarely come as a surprise for same-sex couples: Adoption, sperm donation, in vitro fertilization, a surrogate womb—each can represent a significant investment of time and money and require extensive planning and forethought. Heterosexuals, on the other hand, have to expend effort *not* to have children.

Additionally, buying a home becomes a risky investment without the certainty that your partner won’t be kicked out after you’re gone. “Traditionally, we’ve lived in a world that didn’t honor our relationships,” says Baldwin. “Thus, the financial-planning process was legally complex and expensive to execute.”

Historically denied the institution of marriage, LGBTs are enthusiastically embracing it. According to the Wells Fargo study, 61% of those surveyed want to be married either now or sometime in the future, and a whopping 85% said

“LoveFamilyMoney.”

Allianz (2014).

“Wealth, Brokerage & Retirement Group LGBT Survey.” Wells

Fargo (2014).

that marriage and family are becoming the “new normal.”

Love and commitment are clearly important considerations when getting married. However, just over half of LGBTs cited it as the most important factor (versus 80% in the national comparison

group). In the Wells Fargo study, 36% of LGBTs cited financial and legal rights as reasons to get married—the top three rights and benefits were health care decision making (61%), insurance and health care coverage (58%), and inheritance (56%). Same-sex couples also show a strong tendency to maintain separate finances. In the Allianz survey, four out of five couples in “traditional” families fully combined their finances compared with just over half of gays and lesbians.

That reluctance may be attributable to uncertainty. Even in a post-DOMA world, a large majority of LGBTs (83%) don’t fully understand how federal and state laws apply, including two-thirds (67%) of those in legal same-sex marriages, according to the Wells Fargo study.

The impact of the *Windsor* ruling, in which the U.S. Supreme Court dismantled the Defense of Marriage Act, “is still being heavily discussed by many within the LGBT financial-planning arena, as DOMA leveled only the federal side of the planning equation,” says Baldwin. “However many states still don’t recognize same-sex marriage, and therefore they exclude those associated state marriage benefits.” ♦



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Dorian, a gay nobleman in *Dragon Age: Inquisition*

ENTER THE DRAGON

Gay gaming comes of age in *Dragon Age: Inquisition*.

BY DEAN LEVENGOOD

Sera is the wild card, an elf who has endured prejudice and segregation. She's a free spirit, a cutup, and a badass. And she's a lesbian. Dorian is a mage and nobleman who had it all, but gave it up to fight injustice. He's dapper, handsome, a bit cocky—and a big 'mo. The Iron Bull is a mammoth mercenary who loves mayhem, but makes love to both ladies and gentlemen.

Over the past few decades, games have grown up to include adult stories, complex characters, more player interaction, and now, finally, in an AAA title—a classification of video games with the highest development and promotional budgets—gay romance. The third major game in the *Dragon Age* franchise, *Dragon Age: Inquisition*, which will be published November 18 by Electronic Arts, allows players to team up with and romance same-sex partners.

Mike Laidlaw, creative director for the *Dragon Age* series at the game developer BioWare, says it was important for everyone to have the possibility of a romantic relationship in *Inquisition*. In addition to being able to include Dorian and Sera as companions on the quest, a male Inquisi-

tor (the player-controlled protagonist) can take Dorian as a lover, while a female Inquisitor can attempt to win Sera's heart.

Previous BioWare games have included bisexual and gay characters, and queer characters exist throughout the *Dragon Age* universe, Laidlaw adds, including Mae, a transgender mage, and Herren and Wade, a shopkeeper and his high-strung blacksmithing partner. "These characters are very much a part of *Dragon Age*," Laidlaw points out. "The game welcomes new players by having in-game companions that can handle themselves, a tactical camera that pauses the action so players can plan their moves and get info on enemies, a sprawling world, and an epic story line."

Games have also become more welcoming by teaching the method of play, adjusting difficulty, and letting players design their own protagonists. Fantasy lovers can explore vast, varied landscapes and complex conflicts. And now that players can choose the gender and sexual identity they prefer, games are better equipped to let people play as themselves, or whoever they want to be. ♦

Over the past few decades, games have grown up to include adult stories, complex characters, more player interaction, and now, finally...gay romance.

GMHC OFFERS LIFE-SUSTAINING SERVICES FOR PEOPLE AFFECTED BY HIV AND AIDS




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New Client Intake
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Coordinated Care/Health Homes
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HIV Prevention for Men, Women & Youth
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COMPLERA is a prescription medicine for adults who have never taken HIV-1 medicines before and who have no more than 100,000 copies/mL of virus in their blood. COMPLERA can also replace current HIV-1 medicines for some adults who have an undetectable viral load (less than 50 copies/mL) and whose healthcare provider determines that they meet certain other requirements. COMPLERA combines 3 medicines into 1 pill to be taken once a day with food. COMPLERA should not be used with other HIV-1 medicines.

Just the **one**  for me

COMPLERA is a complete HIV-1 treatment in only 1 pill a day.

Ask your healthcare provider if COMPLERA may be the one for you.

COMPLERA does not cure HIV-1 infection or AIDS.

To control HIV-1 infection and decrease HIV-related illnesses you must keep taking COMPLERA. Ask your healthcare provider if you have questions about how to reduce the risk of passing HIV-1 to others. Always practice safer sex and use condoms to lower the chance of sexual contact with body fluids. Never reuse or share needles or other items that have body fluids on them.

It is not known if COMPLERA is safe and effective in children under 18 years old.

IMPORTANT SAFETY INFORMATION

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

COMPLERA can cause serious side effects:

- **Build-up of an acid in your blood (lactic acidosis)**, which is a serious medical emergency. Symptoms of lactic acidosis include feeling very weak or tired, unusual (not normal) muscle pain, trouble breathing, stomach pain with nausea or vomiting, feeling cold especially in your arms and legs, feeling dizzy or lightheaded, and/or a fast or irregular heartbeat.
- **Serious liver problems.** The liver may become large (hepatomegaly) and fatty (steatosis). Symptoms of liver problems include your skin or the white part of your eyes turns yellow (jaundice), dark “tea-colored” urine, light-colored bowel movements (stools), loss of appetite for several days or longer, nausea, and/or stomach pain.
- **You may be more likely to get lactic acidosis or serious liver problems** if you are female, very overweight (obese), or have been taking COMPLERA for a long time. In some cases, these serious conditions have led to death. Call your healthcare provider right away if you have any symptoms of these conditions.
- **Worsening of hepatitis B (HBV) infection.** If you also have HBV and stop taking COMPLERA, your hepatitis may suddenly get worse. Do not stop taking COMPLERA without first talking to your healthcare provider, as they will need to monitor your health. COMPLERA is not approved for the treatment of HBV.

Who should not take COMPLERA?

Do not take COMPLERA if you:

- **Take a medicine that contains:** adefovir (Hepsera), lamivudine (Epivir-HBV), carbamazepine (Carbatrol, Equetro, Tegretol, Tegretol-XR, Teril, Epitol), oxcarbazepine (Trileptal), phenobarbital (Luminal), phenytoin (Dilantin, Dilantin-125, Phenytek), rifampin (Rifater, Rifamate, Rimactane, Rifadin), rifapentine (Priftin), dextansoprazole (Dexilant), esomeprazole (Nexium, Vimovo), lansoprazole (Prevacid), omeprazole (Prilosec, Zegerid), pantoprazole sodium (Protonix), rabeprazole (Aciphex), more than 1 dose of the steroid medicine dexamethasone or dexamethasone sodium phosphate, or the herbal supplement St. John's wort.
- **Take any other medicines to treat HIV-1 infection**, unless recommended by your healthcare provider.

What are the other possible side effects of COMPLERA?

Serious side effects of COMPLERA may also include:

- **New or worse kidney problems, including kidney failure.** Your healthcare provider should do blood tests to check your kidneys before starting treatment with COMPLERA. If you have had kidney problems, or take other medicines that may cause kidney problems, your healthcare provider may also check your kidneys during treatment with COMPLERA.
- **Depression or mood changes.** Tell your healthcare provider right away if you have any of the following symptoms: feeling sad or hopeless, feeling anxious or restless, have thoughts of hurting yourself (suicide) or have tried to hurt yourself.

- **Changes in liver enzymes:** People who have had hepatitis B or C, or who have had changes in their liver function tests in the past may have an increased risk for liver problems while taking COMPLERA. Some people without prior liver disease may also be at risk. Your healthcare provider may do tests to check your liver enzymes before and during treatment with COMPLERA.
- **Bone problems**, including bone pain or bones getting soft or thin, which may lead to fractures. Your healthcare provider may do tests to check your bones.
- **Changes in body fat** can happen in people taking HIV-1 medicines.
- **Changes in your immune system.** Your immune system may get stronger and begin to fight infections. Tell your healthcare provider if you have any new symptoms after you start taking COMPLERA.

The most common side effects of COMPLERA include trouble sleeping (insomnia), abnormal dreams, headache, dizziness, diarrhea, nausea, rash, tiredness, and depression. Other common side effects include vomiting, stomach pain or discomfort, skin discoloration (small spots or freckles), and pain. Tell your healthcare provider if you have any side effects that bother you or do not go away.

What should I tell my healthcare provider before taking COMPLERA?

- **All your health problems.** Be sure to tell your healthcare provider if you have or had any kidney, mental health, bone, or liver problems, including hepatitis virus infection.
- **All the medicines you take**, including prescription and nonprescription medicines, vitamins, and herbal supplements. COMPLERA may affect the way other medicines work, and other medicines may affect how COMPLERA works. Keep a list of all your medicines and show it to your healthcare provider and pharmacist. Do not start any new medicines while taking COMPLERA without first talking with your healthcare provider.
- **If you take rifabutin (Mycobutin).** Talk to your healthcare provider about the right amount of rilpivirine (Edurant) you should take.
- **If you take antacids.** Take antacids at least 2 hours before or at least 4 hours after you take COMPLERA.
- **If you take stomach acid blockers.** Take acid blockers at least 12 hours before or at least 4 hours after you take COMPLERA. Ask your healthcare provider if your acid blocker is okay to take, as some acid blockers should never be taken with COMPLERA.
- **If you are pregnant** or plan to become pregnant. It is not known if COMPLERA can harm your unborn baby. Tell your healthcare provider if you become pregnant while taking COMPLERA.
- **If you are breastfeeding** (nursing) or plan to breastfeed. Do not breastfeed. HIV-1 can be passed to the baby in breast milk. Also, some medicines in COMPLERA can pass into breast milk, and it is not known if this can harm the baby.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Please see Brief Summary of full Prescribing Information with important warnings on the following pages.



COMPLERA®
emtricitabine 200mg/rilpivirine 25mg/
tenofovir disoproxil fumarate 300mg tablets

Brief Summary of full Prescribing Information

COMPLERA® (kom-PLEH-rah)

(emtricitabine 200 mg, rilpivirine 25 mg, tenofovir disoproxil fumarate 300 mg) tablets

Brief summary of full Prescribing Information. For more information, please see the full Prescribing Information, including Patient Information.

What is COMPLERA?

- **COMPLERA** is a prescription medicine used as a complete HIV-1 treatment in one pill a day. COMPLERA is for adults who have never taken HIV-1 medicines before and who have no more than 100,000 copies/mL of virus in their blood (this is called ‘viral load’). Complera can also replace current HIV-1 medicines for some adults who have an undetectable viral load (less than 50 copies/mL) and whose healthcare provider determines that they meet certain other requirements.
- COMPLERA is a complete regimen and should not be used with other HIV-1 medicines. HIV-1 is the virus that causes AIDS. When used properly, COMPLERA may reduce the amount of HIV-1 virus in your blood and increase the amount of CD4 T-cells, which may help improve your immune system. This may reduce your risk of death or getting infections that can happen when your immune system is weak.
- **COMPLERA does not cure HIV-1 or AIDS.** You must stay on continuous HIV-1 therapy to control HIV-1 infection and decrease HIV-related illnesses.
- **Ask your healthcare provider about how to prevent passing HIV-1 to others.** Do not share or reuse needles, injection equipment, or personal items that can have blood or body fluids on them. Do not have sex without protection. Always practice safer sex by using a latex or polyurethane condom to lower the chance of sexual contact with semen, vaginal secretions, or blood.

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

COMPLERA can cause serious side effects, including:

- **Build-up of an acid in your blood (lactic acidosis).** Lactic acidosis can happen in some people who take COMPLERA or similar (nucleoside analogs) medicines. Lactic acidosis is a serious medical emergency that can lead to death. Lactic acidosis can be hard to identify early, because the symptoms could seem like symptoms of other health problems. **Call your healthcare provider right away if you get any of the following symptoms which could be signs of lactic acidosis:**
 - feel very weak or tired
 - have unusual (not normal) muscle pain
 - have trouble breathing
 - having stomach pain with nausea or vomiting
 - feel cold, especially in your arms and legs
 - feel dizzy or lightheaded
 - have a fast or irregular heartbeat
- **Severe liver problems.** Severe liver problems can happen in people who take COMPLERA. In some cases, these liver problems can lead to death. Your liver may become large (hepatomegaly) and you may develop fat in your liver (steatosis). **Call your healthcare provider right away if you get any of the following symptoms of liver problems:**
 - your skin or the white part of your eyes turns yellow (jaundice)
 - dark “tea-colored” urine
 - light-colored bowel movements (stools)
 - loss of appetite for several days or longer
 - nausea
 - stomach pain

- **You may be more likely to get lactic acidosis or severe liver problems if you are female, very overweight (obese), or have been taking COMPLERA for a long time.**
- **Worsening of Hepatitis B infection.** If you have hepatitis B virus (HBV) infection and take COMPLERA, your HBV may get worse (flare-up) if you stop taking COMPLERA. A “flare-up” is when your HBV infection suddenly returns in a worse way than before. COMPLERA is not approved for the treatment of HBV, so you must discuss your HBV with your healthcare provider.
 - Do not run out of COMPLERA. Refill your prescription or talk to your healthcare provider before your COMPLERA is all gone.
 - Do not stop taking COMPLERA without first talking to your healthcare provider.
 - If you stop taking COMPLERA, your healthcare provider will need to check your health often and do blood tests regularly to check your HBV infection. Tell your healthcare provider about any new or unusual symptoms you may have after you stop taking COMPLERA.

Who should not take COMPLERA?

Do not take COMPLERA if you also take any of the following medicines:

- **Medicines used for seizures:** carbamazepine (Carbatrol, Equetro, Tegretol, Tegretol-XR, Teril, Epitol); oxcarbazepine (Trileptal); phenobarbital (Luminal); phenytoin (Dilantin, Dilantin-125, Phenytek)
- **Medicines used for tuberculosis:** rifampin (Rifater, Rifamate, Rimactane, Rifadin); rifapentine (Priftin)
- **Certain medicines used to block stomach acid called proton pump inhibitors (PPIs):** dexlansoprazole (Dexilant); esomeprazole (Nexium, Vimovo); lansoprazole (Prevacid); omeprazole (Prilosec, Zegerid); pantoprazole sodium (Protonix); rabeprazole (Aciphex)
- **Certain steroid medicines:** More than 1 dose of dexamethasone or dexamethasone sodium phosphate
- **Certain herbal supplements:** St. John’s wort
- **Certain hepatitis medicines:** adefovir (Hepsera), lamivudine (Epivir-HBV)

Do not take COMPLERA if you also take any other HIV-1 medicines, including:

- Other medicines that contain tenofovir (ATRIPLA, STRIBILD, TRUVADA, VIREAD)
- Other medicines that contain emtricitabine or lamivudine (ATRIPLA, Combivir, EMTRIVA, Epivir, Epzicom, STRIBILD, Trizivir, TRUVADA)
- rilpivirine (Edurant), unless you are also taking rifabutin (Mycobutin)

COMPLERA is not for use in people who are less than 18 years old.

What are the possible side effects of COMPLERA?

COMPLERA may cause the following serious side effects:

- **See “What is the most important information I should know about COMPLERA?”**
- **New or worse kidney problems, including kidney failure.** Your healthcare provider should do blood and urine tests to check your kidneys before you start and while you are taking COMPLERA. If you have had kidney problems in the past or need to take another medicine that can cause kidney problems, your healthcare provider may need to do blood tests to check your kidneys during your treatment with COMPLERA.
- **Depression or mood changes. Tell your healthcare provider right away if you have any of the following symptoms:**
 - feeling sad or hopeless
 - feeling anxious or restless
 - have thoughts of hurting yourself (suicide) or have tried to hurt yourself
- **Change in liver enzymes.** People with a history of hepatitis B or C virus infection or who have certain liver enzyme changes may have an

increased risk of developing new or worsening liver problems during treatment with COMPLERA. Liver problems can also happen during treatment with COMPLERA in people without a history of liver disease. Your healthcare provider may need to do tests to check your liver enzymes before and during treatment with COMPLERA.

- **Bone problems** can happen in some people who take COMPLERA. Bone problems include bone pain, softening or thinning (which may lead to fractures). Your healthcare provider may need to do tests to check your bones.
- **Changes in body fat** can happen in people taking HIV-1 medicine. These changes may include increased amount of fat in the upper back and neck (“buffalo hump”), breast, and around the main part of your body (trunk). Loss of fat from the legs, arms and face may also happen. The cause and long term health effect of these conditions are not known.
- **Changes in your immune system (Immune Reconstitution Syndrome)** can happen when you start taking HIV-1 medicines. Your immune system may get stronger and begin to fight infections that have been hidden in your body for a long time. Tell your healthcare provider if you start having any new symptoms after starting your HIV-1 medicine.

The most common side effects of COMPLERA include:

- Trouble sleeping (insomnia), abnormal dreams, headache, dizziness, diarrhea, nausea, rash, tiredness, depression

Additional common side effects include:

- Vomiting, stomach pain or discomfort, skin discoloration (small spots or freckles), pain

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

- These are not all the possible side effects of COMPLERA. For more information, ask your healthcare provider.
- Call your healthcare provider for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

What should I tell my healthcare provider before taking COMPLERA?

Tell your healthcare provider about all your medical conditions, including:

- If you have or had any kidney, mental health, bone, or liver problems, including hepatitis B or C infection.
- If you are pregnant or plan to become pregnant. It is not known if COMPLERA can harm your unborn child.
 - There is a pregnancy registry for women who take antiviral medicines during pregnancy. The purpose of this registry is to collect information about the health of you and your baby. Talk to your healthcare provider about how you can take part in this registry.
- If you are breastfeeding (nursing) or plan to breastfeed. Do not breastfeed if you take COMPLERA.
 - You should not breastfeed if you have HIV-1 because of the risk of passing HIV-1 to your baby.
 - Two of the medicines in COMPLERA can pass to your baby in your breast milk. It is not known if this could harm your baby.
 - Talk to your healthcare provider about the best way to feed your baby.

Tell your healthcare provider about all the medicines you take, including prescription and nonprescription medicines, vitamins, and herbal supplements:

- COMPLERA may affect the way other medicines work, and other medicines may affect how COMPLERA works.
- If you take certain medicines with COMPLERA, the amount of COMPLERA in your body may be too low and it may not work to help control your HIV-1 infection. The HIV-1 virus in your body may become resistant to COMPLERA or other HIV-1 medicines that are like it.

- Be sure to tell your healthcare provider if you take any of the following medicines:

- Rifabutin (Mycobutin), a medicine to treat some bacterial infections. Talk to your healthcare provider about the right amount of rilpivirine (Edurant) you should take.
- Antacid medicines that contain aluminum, magnesium hydroxide, or calcium carbonate. Take antacids **at least 2 hours before or at least 4 hours after** you take COMPLERA.
- Certain medicines to block the acid in your stomach, including cimetidine (Tagamet), famotidine (Pepcid), nizatidine (Axid), or ranitidine hydrochloride (Zantac). Take the acid blocker **at least 12 hours before or at least 4 hours after** you take COMPLERA. Some acid blocking medicines should never be taken with COMPLERA (see “Who should not take COMPLERA?” for a list of these medicines).
- Medicines that can affect how your kidneys work, including acyclovir (Zovirax), cidofovir (Vistide), ganciclovir (Cytovene IV, Vitrasert), valacyclovir (Valtrex), and valganciclovir (Valcyte).
- clarithromycin (Biaxin)
- erythromycin (E-Mycin, Eryc, Ery-Tab, PCE, Pediazole, Ilosone)
- fluconazole (Diflucan)
- itraconazole (Sporanox)
- ketoconazole (Nizoral)
- methadone (Dolophine)
- posaconazole (Noxafil)
- telithromycin (Ketek)
- voriconazole (Vfend)

Know the medicines you take. Keep a list of all your medicines and show it to your healthcare provider and pharmacist when you get a new medicine. Do not start any new medicines while you are taking COMPLERA without first talking with your healthcare provider.

How should I take COMPLERA?

- Stay under the care of your healthcare provider during treatment with COMPLERA.
- Take COMPLERA exactly as your healthcare provider tells you to take it.
- Always take COMPLERA with food. Taking COMPLERA with food is important to help get the right amount of medicine in your body. A protein drink is not a substitute for food. If your healthcare provider decides to stop COMPLERA and you are switched to new medicines to treat HIV-1 that includes rilpivirine tablets, the rilpivirine tablets should be taken only with a meal.

Keep COMPLERA and all medicines out of reach of children.

This Brief Summary summarizes the most important information about COMPLERA. If you would like more information, talk with your healthcare provider. You can also ask your healthcare provider or pharmacist for information about COMPLERA that is written for health professionals, or call 1-800-445-3235 or go to www.COMPLERA.com.

Issued: June 2014



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DAILY DOSE

THE FAMILY YOU ALWAYS DREAMED OF

People with HIV can have biological children of their own, despite the stigma and misconceptions.

BY DR. GUY RINGLER

In the past two decades, the life expectancy and view of life expectations for men and women with HIV have dramatically changed. With that has come a shift in how these men and women are able to look at building a family of their own.

HIV infection used to predict a dim and difficult future, but with the introduction of highly active antiviral therapy (HAART) and medical attention, it has become a chronic manageable disease. Today people with HIV can look forward to long, full lives, complete with all the opportunities that men and women hope to experience. That includes having biological children of their own.

In the 1990s, medical professionals recommended that individuals with HIV avoid pregnancy because of the risk of transmitting the virus to their sexual partner and the baby. It was considered unethical to allow conception when the life expectancy of the prospective parents would be tragically short and the offspring would begin their lives with a dangerous viral infection. Some HIV positive women chose to terminate their pregnancies to avoid the risk to their offspring. And those who chose to carry to full term were plagued with doubts about who would care for their children if they died. Laws were written that prohibited physicians from performing assisted reproductive procedures such as in vitro fertilization for couples with HIV.

Fortunately, the outlook for men and women with HIV infection has dramatically changed.

For HIV-positive men interested in having children, the first step is to find a fertility specialist experienced in working with men with HIV. All men with HIV looking to have a biological child should be on antiviral medication. Men with low or undetectable serum viral loads are much more likely to have undetectable levels of virus in their semen.

Medical studies have demonstrated that HIV viral particles are present in semen and infected white blood cells, but not in sperm. Assisted reproductive procedures use washed semen specimens in which sperm are separated from the seminal fluid and blood cells. Clinical studies have established sperm wash protocols to minimize the risk of viral particles being present in washed semen specimens. The washed and virus-free sperm samples may then be used for insemination, or for in vitro



fertilization preceding embryo transfer into a gestational carrier.

Additional steps to minimize the risk of viral transmission include testing semen specimens for the presence of HIV virus before the sperm wash procedure, or testing the washed sperm sample for HIV viral particles after the sperm wash process. Both of these procedures have been applied in clinical trials and have been shown to prevent the transmission of HIV infection to the recipients of the sperm or embryos, and to the offspring resulting from these treatment cycles. The results of over 8,000 treatment cycles have been published in the medical literature with no reports of HIV infection in the recipients or newborn children.

For women with HIV, the introduction of HAART and good prenatal care has essentially eliminated the transmission of virus from mother to child during

pregnancy. Women can now enjoy their pregnancy without fear of causing infection of their future baby.

Bringing this education to light despite the longtime stigmas can be tricky. Even when people see the evidence, they still often have doubts.

Last year the American Fertility Association honored Sir Elton John and David Furnish with an award for sharing their family-building story, which serves to educate others about egg donation and surrogacy. Now the Elton John AIDS Foundation has funded a grant to the AFA to provide educational materials on family-building treatment options to men and women with HIV. This has allowed us to bring seminars to Nashville and Boston in the last year, and to stream it online for anyone in the world to watch.

HIV is not an obstacle to becoming a mom or dad but a small challenge to overcome with advanced fertility care. Through our combined efforts we hope to bring optimism about future parenthood to individuals with HIV who desire to have children of their own. ♦

Dr. Guy Ringler has been working in the fertility field for more than 20 years, specializing in helping same-sex couples and individuals with HIV build the families of their dreams. He lives in Los Angeles with his husband, Mark Rios. You can find him on Twitter @gayfertility or at, CaliforniaFertilityPartners.com.

Student reporters
for *OutCasting*

END OF THE WORLD

Doomsayers and the things that will definitely end if you're allowed to get hitched

Life As We Know It

"This is something that I believe is the beginning of the end of Western civilization."

—**MATHEW STAVER**,
LIBERTY COUNSEL CHAIRMAN

Business

"They are not a live-and-let-live bunch. They are, 'We're going to ram this down your throat; we're going to force you to accept this or we're going to run you out of business.'"

—**RICHARD LAND**,
FORMER SOUTHERN BAPTIST
CONVENTION OFFICIAL

The Human Species

"Generally, if our country sees something as crucial to our very survival as a nation (not to mention as a species) we don't ask our politicians to rally around a battle cry to overlook it [traditional marriage] or invent some delusional version of it [gay marriage]."

—BLOGGER **MATT WALSH**

YOUNG, QUEER, ON THE AIR

An emerging voice in LGBT journalism, *OutCasting* covers the issues that gay young people care about—when the staff isn't studying for the SAT.

BY ALEX PANISCH

In late July, a reporter named Travis interviewed dramatist Maggie Keenan-Bolger about her play *Queering History* on public radio. In-depth, well researched, and punchy in the right ways, the spot had NPR-level production values, and Travis performed like a seasoned journalist. What makes all this remarkable is that most of the people working on the show—Travis included—are barely old enough to drive.

The program was an episode of *OutCasting*, a radio series from Media for the Public Good—MFPG's only series—produced and created by LGBT high school students and their straight peers to illuminate issues facing queer young people. "It's a resource for LGBTQ youth," explains *OutCasting*'s founder and executive producer, Marc Sophos, a broadcasting professional of several decades. "But it also serves to give information about LGBTQ issues to a general audience and inject an LGBTQ youth perspective into the media conversation we're having in this country."

Sophos came up with the idea for *OutCasting* in 2006, when the Elias Foundation, which has become one of MFPG's

backers, came to Sophos, asking how it could support underserved constituents. After Sophos reached out to local high school gay-straight alliances and assembled a volunteer staff, *OutCasting* hit the airwaves in October 2011, tackling topics including DOMA and its effect on bi-national couples, New York's Gender Expression Non-Discrimination Act, and teen suicide.

"It's the most rewarding thing I've ever done in radio," Sophos remarks, who plans on expanding *OutCasting* by founding bureaus in New York City and other parts of the country. "And [it's] one of the most rewarding experiences I've had in my whole life."

With a New York City bureau, Sophos hopes that *OutCasting* will expand the number of queer perspectives it covers. "There's a lot more diversity among the kids here in New York than there is up in Westchester, so that's going to add a good dimension to the program," remarks Sophos. "It's the first of what we hope will be a whole group of bureaus in different places in the country, so *OutCasting* can reflect LGBTQ realities outside just the Northeast." ♦

NUMBER CRUNCH: BIG SCREEN LGBTs IN 2013

Despite overwhelming successes including *Milk*, *Blue Is the Warmest Color*, *Brokeback Mountain*, and *Weekend*, the depiction of LGBTs at the movies hasn't kept pace with audience sophistication. GLAAD's annual Studio Responsibility Index for 2013 analyzes major films with queer characters, and whether the characterizations are responsible ones.

1 Of **102 mainstream films** released by the major studios in 2013:

17

Included LGBT characters
(14 in 2012)

0

Included an LGBT lead character

2

Included transgender characters (one briefly shown in jail cell, other included to laugh at)

2 Number of those 17 films that **passed the Vito Russo test**®:

7

*Taking inspiration from the Bechdel test, the Vito Russo test assesses films on whether they feature an LGBT character "not solely or predominantly defined by their sexual orientation or gender identity," and whose removal from the film would significantly affect the plot.



3 Ratings for frequency and quality of LGBT depictions



20th Century Fox

Rating: Adequate

LGBT characters: 1 out of 14 films

Films: *Broken City*

Gross box office revenue: \$980 million

LIONSGATE

Lionsgate

Rating: Adequate

LGBT characters: 3 out of 21 films

Films: *Peeples*, *Instructions Not Included*, *The Big Wedding*

Gross box office revenue: \$1.04 billion



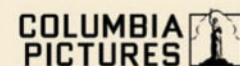
Paramount Pictures

Rating: Failing

LGBT characters: 2 out of 9 films

Films: *The Wolf of Wall Street*, *Pain and Gain*

Gross box office revenue: \$899 million



Sony Columbia Pictures

Rating: Good

LGBT characters: 3 out of 15 films

Films: *The Mortal Instruments: City of Bones*, *Battle of the Year*, *Grown Ups 2*

Gross box office revenue: \$1.03 billion



Universal Pictures

Rating: Adequate

LGBT characters: 3 out of 15

Films: *Kick-Ass 2*, *About Time*, *Riddick*

Gross box office revenue: \$1.28 billion



Walt Disney Studios

Rating: Adequate

LGBT characters: 2 out of 10

Films: *Delivery Man*, *Iron Man 3*

Gross box office revenue: \$1.63 billion



Warner Bros.

Rating: Failing

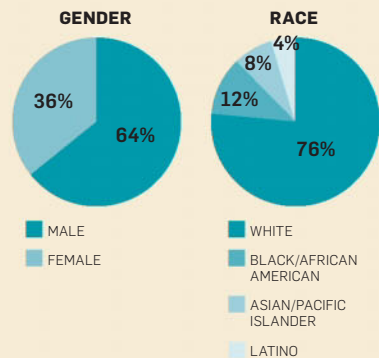
LGBT characters: 3 out of 18

Films: *We're the Millers*, *Grudge Match*, *The Hangover Part III*

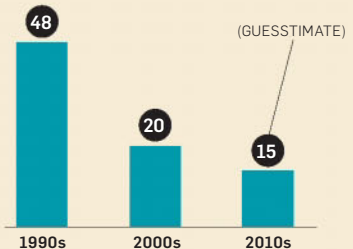
Gross box office revenue: \$1.74 billion



4 LGBT characters by gender and race



5 Of those who say their feelings towards gays and lesbians have become more favorable in the past five years, **29% say seeing gay/lesbian characters in movies was contributing factor.**



6 Number of films with a significant LGBT character that **grossed over \$1 million** at the box office

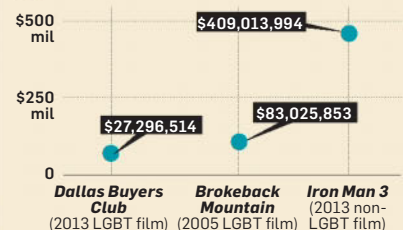
7

"I think Hollywood is amazed at how well *Brokeback Mountain* did, and they aren't ready to take that risk again."

—*Weekend* director Andrew Haigh to *Variety*



8 Domestic gross of LGBT vs. non-LGBT films





ANTHONY FRIEDKIN: THE GAY ESSAY

"At first, I felt a bit threatened by the whole idea of exposing myself to a culture I didn't understand," wrote Anthony Friedkin about his self-assigned project to document gays in Los Angeles and San Francisco in the turbulent years between 1969 and 1973. "I came to learn that the majority of the attitudes that I had been brought up with concerning homosexuals were false, and that gay people have been one of the most suppressed, abused, misunderstood groups since the beginning of modern civilization." His sensitive portraits taken in streets, bars, and dancehalls, are on display in "Anthony Friedkin: The Gay Essay" at the de Young museum in San Francisco through January 11, 2015. deYoung.FAMSF.org **MATTHEW BREEN**



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Stay for the romance.

Experience the
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and diversity
which is...
South Africa

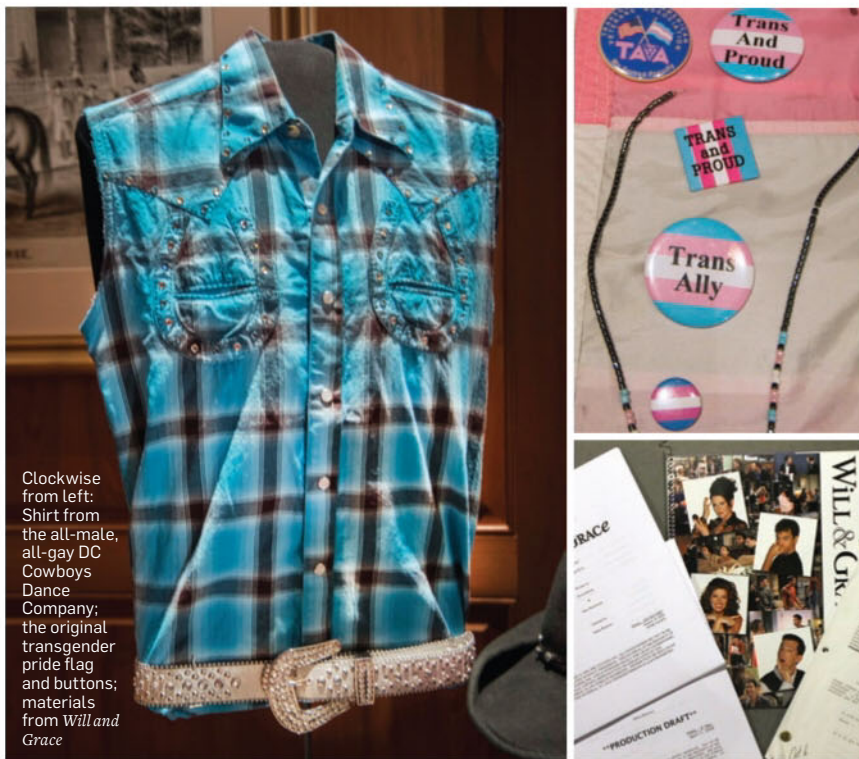
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Clockwise from left: Shirt from the all-male, all-gay DC Cowboys Dance Company; the original transgender pride flag and buttons; materials from *Will and Grace*

“

Pick any topic in our nation's past and there's a gender and sexuality aspect to it, so these materials enable us to create a more accurate and balanced history of the United States.”

—KATHERINE OTT, CURATOR, DIVISION OF MEDICINE AND SCIENCE, NATIONAL MUSEUM OF AMERICAN HISTORY

THE SMITHSONIAN'S QUEER COLLECTION

Our nation's history is more fully explored in the new acquisition of objects of LGBT significance.

BY STEPHANIE FAIRYINGTON

Over the summer, the Smithsonian's National Museum of American History, in Washington, D.C., announced the expansion of its LGBT collection. “As cultural sensitivities and politics have changed,” curator Katherine Ott says, “now seemed like an opportune time to more aggressively, directly, and openly collect LGBT materials.”

Dating back to the 19th century, the archive includes historical treasures across several disciplines, including medicine and science, political history, culture and the arts, and the armed forces. Stand-out items include a tennis racket from transgender maverick Renée Richards, who famously won a New York Supreme Court case against the United States Tennis Association, ensuring that she and other trans players would be allowed to compete as their reassigned sex; protest

signs from activist Frank Kameny, the co-founder, in 1961, of D.C.'s Mattachine Society, a gay advocacy group; the original transgender pride flag, designed by trans woman Monica Helms in 1999; a tennis dress worn by Grand Slam superstar Billie Jean King; and memorabilia from the set of *Will and Grace*, the groundbreaking TV show that helped bring gay awareness to households across the nation.

The collection also contains darker memories of LGBT history: documents from the military's “don't ask, don't tell” era, HIV- and AIDS-related medical equipment and medications, even a copy of *The Anita Bryant Story: The Survival of Our Nation's Families and the Threat of Militant Homosexuality* and ephemera from the virulent homophobe's antigay campaign.

“The grand mission of the Smithsonian

is the increase and diffusion of knowledge,” Ott explains, noting that the LGBT collection reflects that objective. “Pick any topic in our nation's past and there's a gender and sexuality aspect to it, so these materials enable us to create a more accurate and balanced history of the United States.”

It remains an open question, however, whether this noble precept will apply to controversial content. In 2010, the Smithsonian provoked the ire of queer activists when it kowtowed to conservative pressure to remove an exhibition clip of gay artist David Wojnarowicz's “A Fire in My Belly,” in which ants briefly crawl over a crucifix. Whether Ott and her colleagues will exclude inflammatory historical artifacts under political duress remains to be seen, but it's less likely four years later. “A lot has changed since then,” Ott muses, “so I hope it would play out differently today.”

“As a historian,” she adds, “my professional responsibility is to document what people do and say, even if it makes me uncomfortable.”






Ott wouldn't discuss works the museum is currently in talks to acquire, but shared her areas of interest: “It's a combination of media events and personalities that we all know about: Stonewall, the Compton's Cafeteria riot, *Bowers v. Hardwick*, Liberace, Rock Hudson. Oh, yeah, and I want to collect John Waters's mustache!” ♦

COURTESY OF THE NATIONAL MUSEUM OF AMERICAN HISTORY (COWBOY SHIRT, TRANSGENDER ITEMS, WILL AND GRACE)

NUMBER CRUNCH: TV'S LGBTs IN 2013-2014

The Network Responsibility Index from GLAAD, which rates LGBT content on 15 television networks during 2013-2014, showed more inclusion in TV than in film. Nearly half of MTV's prime-time hours were LGBT-inclusive. Not so the History channel, which received a failing grade. Did they assume we're a recent invention?

1 Ranking of **broadcast networks** by LGBT-inclusive prime-time hours

BROADCAST NETWORK	RANKING	% OF LGBT-INCLUSIVE PRIME-TIME HOURS	LGBT HIGHLIGHTS
	GOOD	37%	<i>The Voice</i> , Winter Olympics recap, <i>America's Got Talent</i> , <i>The Biggest Loser</i> , <i>American Dream Builders</i> , <i>Hollywood Game Night</i> , <i>Sean Saves the World</i> , <i>Chicago Fire</i> , <i>Dracula</i>
	GOOD	36%	<i>American Idol</i> , <i>So You Think You Can Dance</i> , <i>Glee</i> , <i>Brooklyn Nine-Nine</i>
	GOOD	34%	<i>Dancing With the Stars</i> , <i>Modern Family</i> , <i>Grey's Anatomy</i> , <i>Scandal</i> , <i>Nashville</i> , <i>Revenge</i>
	GOOD	33%	<i>America's Next Top Model</i> , <i>Capture</i> , <i>The Vampire Diaries</i> , <i>The Originals</i> , <i>The Carrie Diaries</i>
	ADEQUATE	28%	<i>Big Brother</i> , <i>The Good Wife</i> , <i>Survivor</i> , <i>Two and a Half Men</i> , <i>Under the Dome</i> , <i>Elementary</i>



2 Ranking of **cable networks** by LGBT-inclusive prime-time hours

1. **MTV:** Excellent
49%
2. **FX:** Good
49%
3. **ABC Family:** Excellent
42%
4. **Showtime:** Good
34%
5. **HBO:** Excellent
31%
6. **TLC:** Adequate
17%
7. **USA:** Adequate
17%
8. **TNT:** Failing
9%
9. **A&E:** Failing
6%
10. **History:** Failing
0%

3 The word from GLAAD:

ON FOX

"Captain Ray Holt [on *Brooklyn Nine-Nine*]...is a model of the right way to include a gay character in a comedy."

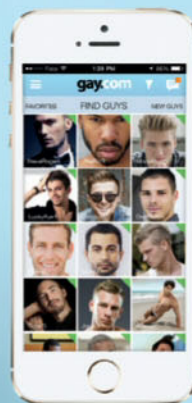
ON TRANSGENDER CHARACTERS

"The majority of depictions of transgender people on TV over the last 10 years were problematic to outright defamatory."

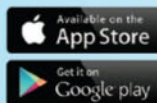
ON HBO'S *LOOKING*

"Not since Showtime's *The L Word* ended has there been a scripted show in which the lives of LGBT people were the dominant focus, and *Looking* stood out even more for its grounded storytelling and fresh, natural style."

Everybody is **gay.com**



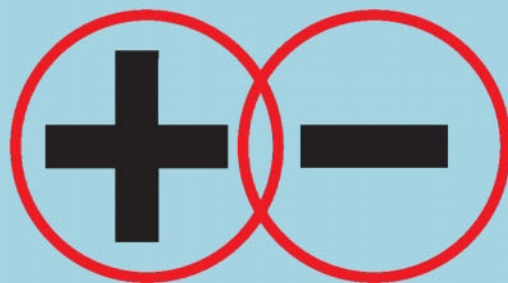
Get on the most rewarding gay social network and make a lasting connection. Scan this page with Layar to download.



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Anthony photographed by Exterface Studio, Paris

HIV IN 2014



FINDING TRU LOVE?

A spike in relationships that bridge the viral divide may be an unintended side effect of the use of Truvada for HIV prevention. **BY DANIEL REYNOLDS**

It is not easy to surprise Alex Garner, the founding editor of *Positive Frontiers*, who conducts HIV awareness and prevention programs in cities across the country. But during a recent trip to Los Angeles, he noticed a change that made him pause: Since his last visit only a few months earlier, gay men were beginning to talk more openly about using the drug Truvada as pre-exposure prophylaxis, or PrEP—used by HIV-negative people to prevent HIV infection.

Garner, who has been educating the LGBT community on Truvada's use for PrEP since it was first approved by the Food and Drug Administration and is the creator of one of the first blogs on the subject, observed that the drug was being mentioned in online dating profiles and in hookup apps like Grindr. Moreover, gay men were more likely to admit in conver-





sation that they were taking it, and they were discussing it in an increasingly “empowered, nonstigmatized way.”

“I wouldn’t say it’s become ubiquitous, but it’s become more noticeable than it was six months ago,” he says, recounting that a friend he had not seen in years stopped him on the street to talk about PrEP, which for Garner was “a clear indication things are starting to shift.”

This shift is good news for activists like Garner, who work to raise awareness and combat stigma regarding PrEP, which in studies has been shown to reduce the risk of HIV infection by up to 90% if administered daily. Until recently, advocating for PrEP has been an uphill battle. Notably, Michael Weinstein, the head of the AIDS Healthcare Foundation, has discouraged it due to his belief that it will decrease the use of condoms, as well as his fear that gay men will not take it as prescribed, and he has branded it a “party drug.” The phrase “Truvada whore” has also come into use among gay men as a slut-shaming label akin to the scarlet letter pinned on Hester Prynne, although recently gay and HIV awareness activists and PrEP takers have reclaimed the phrase much as young people did with the word “queer” 20 years ago.

Recent developments, including recommendations from the World Health Organization and the Centers for Disease Control and Prevention, have softened this stigma, particularly in light of the recent CDC report announcing that the annual number of new HIV diagnoses among gay and bisexual men between the ages of 13 and 24 increased by a staggering 132.5% between 2001 and 2011. WHO estimates that PrEP use by gay men over the next 10 years could reduce worldwide HIV transmission by 20 to 25%.

The impact of statistics such as these as well as PrEP’s heightened visibility has affected areas beyond the medical world, including social dynamics among gay men. Garner believes that as a result of PrEP, serodiscordant (or “magnetic”) couples, in which one partner is positive and one partner is negative, are becoming much more common.

“The fundamental dynamics between negative and positive men have shifted in a way that I personally haven’t seen in quite some time,” says Garner, who attributes this change to “PrEP as well as treatment, prevention, and the understanding of what one’s undetectable viral load means.”

As the saying goes, AIDS is no longer a death sentence. With proper medication and care, an HIV-positive person can suppress the virus in his body to the point that it is “undetectable,” a word that is also increasingly used in dating profiles. Translation? That individual has nearly eliminated the chance of passing the virus on to others, even if he practices condomless sex. This is called “treatment as prevention.”

All these new approaches to safer sex, Garner notes, have affected how negative and positive men relate to each other because they reduce a key emotional obstacle to love: fear.

“That impacts how fearful they are of the sex that they’re having, how fearful they are of one another, as well as the stigma that comes with the idea of someone being potentially infectious,” Garner says.

Garner, who has been positive for 18 years, has seen this impact in his own love life. Until recently, he had dated other positive men almost exclusively. But, he says, “PrEP changes that. The possibility of sort of having a short-term or long-term relationship with someone who is serodiscordant seems much more realistic now because PrEP is available.”

And it changes the relationship, too. “The context of the relationship isn’t about fear of transmission, and we can choose to have an intimate sexual experience without fear of transmission occurring,” he says.

Though advances in prevention have moved society to this “juncture where things are rapidly changing,” Garner points out that major obstacles remain. Slut-shaming endures, even among health care professionals, who may make judgments about the

sexual history of patients who choose to use PrEP. In addition, many at-risk individuals, particularly in low-income and minority populations, have limited access to the drug—both to providers who can prescribe it and the means to purchase it. A yearly prescription can cost upwards of \$10,000, a steep price to pay, although insurance companies are increasingly agreeing to cover the cost and the maker, Gilead, offers a small prescription assistance stipend.

For those negative men who have gained access to the drug, more doors have opened for finding a partner or relationship. And by

engaging in a drug regimen that may be similar to that of potential partners and making required quarterly visits to health care providers, these men are finding opportunities to not only connect with poz men but also engage in new conversations about health.

“For the longest time, we focused on the health and wellness and the engagement and care of positive men, and we sort of forgot negative men,” says Garner, adding that PrEP “provides an opportunity for us as a community to invest in [the] care of negative men in a way that we haven’t done in a long while and to really speak openly about the experience of what it means to be negative.”

Garner says the key to reducing stigma and increasing wellness is for both positive and negative men to talk openly about their health issues with each other. By having this dialogue, they may also rekindle that spark of commonality, in ways that can improve not just physical and but also mental health.

“It’s complicated and it’s messy and at times very difficult,” he says of these conversations, which is also true of love itself. “But I also think that goes back to this idea of commonality. The majority of positive men can remember what it’s like to be negative, so we share that experience...because we know the struggle at times to stay negative.”

First printed in HIV Plus magazine

THE HIV YEAR IN REVIEW

Potential cures were touted in soy sauce and tobacco, AIDS researchers died in a plane crash, and a seventh grader uncovered a mystery that has been killing people with AIDS in California for two decades. **BY DIANE ANDERSON-MINSHALL**



January 29

German scientists reported that extracts of the geranium plant *Pelargonium sidoides* block HIV from entering human cells. Researchers say that if the extracts can be developed into an HIV therapy, it'll be easy and cheap to produce.



April 28

Soy sauce as HIV cure? Not quite. But researchers at the University of Missouri confirmed that EFdA, a molecule related to a component of soy sauce, could be used to develop HIV-fighting compounds. The medicine could be more powerful than tenofovir, but users wouldn't develop resistance to it the way they do with the popular drug. Scientists at Merck are now trying to turn it into a treatment.



May 14

The Centers for Disease Control and Prevention came out in support of Truvada as PrEP, or pre-exposure prophylaxis, for some sexually active gay and bi men, making the drug the first U.S. government-endorsed HIV prevention pill.

July 1

Iowa became the first state in the nation to modernize its archaic HIV criminal statute, removing those convicted under the previous law from the sex offender registry.

C2C COUNTDOWN
TO A CURE
FOR HIV/AIDS
BY 2020

February 3

AmfAR, the Foundation for AIDS Research, announced the launch of Countdown to a Cure for HIV/AIDS, a research initiative aimed at finding a cure by 2020. The group is planning to invest \$100 million over the next six years.

June 13

In a pivotal appeal litigated by Lambda Legal, the Iowa Supreme Court set aside the conviction of Nick Rhoades, an HIV-positive Iowan who had been sentenced to 25 years in prison and registration as a sex offender after a single sexual encounter with another man, during which they used a condom. A week before the conviction was set aside, Rhoades had his GPS monitoring bracelet removed in a ceremony at Iowa's Grinnell College during the groundbreaking HIV Is Not a Crime conference.





July 8

Hemispherx Biopharma announced it is seeking South African government approval to study Alferon N, the only FDA-approved natural interferon, to see if it can suppress HIV replication and eliminate latent HIV. A study released by the Wistar Institute at the University of Pennsylvania previously showed that interferon decreases HIV-1 viral levels and controls the virus after antiretroviral therapy is discontinued.



July 17

Malaysia Airlines Flight 17 was shot out of the sky by pro-Russian separatists, killing all 298 people on board. Six of the dead were delegates bound for the 20th International AIDS Conference in Melbourne. Among them were famed researcher Joep Lange, the executive scientific director of the Amsterdam Institute for Global Health and Development and former president of the International AIDS Society, who helped improve access to antiretroviral drugs in developing nations, and his partner, Jacqueline van Tongeren, the director of communications for the Amsterdam Institute for Global Health and Development. Also killed were Pim de Kuijer, a lobbyist for Stop AIDS Now in Amsterdam; Lucie van Mens, the director of program development and support for the Female Health Co.; Martine de Schutter, a program manager at Bridging the Gap; and Glenn Raymond Thomas, a media officer for the World Health Organization.



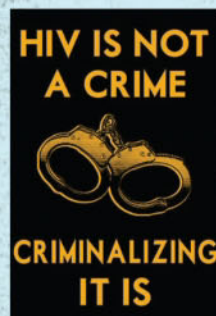
July 10

Doctors reported that the Mississippi baby proclaimed to be cured of HIV. (2013 news that spurred a National Institutes of Health study on aggressive antiretroviral treatment of newborns) wasn't cured after all. This leaves Timothy Ray Brown (above), also known as the "Berlin Patient," as apparently the only person ever cured of HIV.

PrEP

July 11

The World Health Organization announced its support for gay and bi men taking PrEP as an additional method of preventing HIV infection alongside the use of condoms. Officials said that PrEP could prevent 20% to 25% of HIV infections in gay and bi men over the next 10 years, leading to 1 million fewer men with HIV.



July 15

The U.S. Department of Justice called on states to eliminate or reform archaic HIV criminalization laws, marking what Scott Schoettes, the HIV project director for Lambda Legal and a new appointee to the Presidential Advisory Council on HIV/AIDS, called "a watershed moment in the fight to decriminalize HIV."



July 21

The LifeStyles Dual Protect condom with VivaGel, which inactivates 99.9% of HIV and HPV, was set to hit stores in Australia.



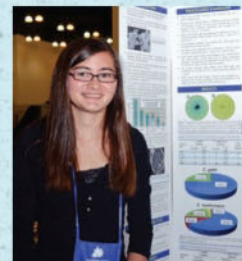
July 22

A new study showed that Tivicay suppresses HIV even in those who are resistant to other HIV antiretroviral drugs.



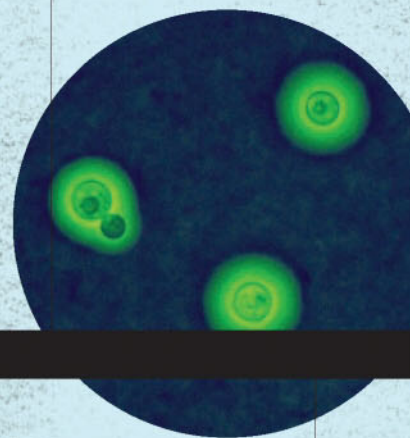
August 4

Researchers from the University of Louisville were given a five-year, \$14.7 million grant from the National Institutes of Health to develop a gel made with tobacco plants that prevents the spread of HIV infection. The plants, treated with a synthetic form of a protein found in red algae, yield a protein, called Griffithsin (GRFT), that surrounds the sugars around HIV cells and prevents them from entering uninfected cells.



August 21

A Southern California girl, Elan Filler, was credited with helping discover, at age 13, the local source of a life-threatening infection that affects those with compromised immune systems and, to a lesser degree, those who are otherwise healthy. Looking for the *Cryptococcus gattii* fungus, she gathered tree samples from areas around Los Angeles and grew cultures in Petri dishes. Researchers then matched samples from three different trees with the genetic fingerprint of *C. gattii* from infected patients.



September 8

GMHC board member Demetre Daskalakis, M.D., became New York City's new chief of HIV prevention, just over two months after New York governor Andrew Cuomo announced a plan to end the AIDS epidemic in the state by 2020. The out gay 40-year-old HIV specialist was a linchpin in tamping down last year's meningitis outbreak among gay and bi men in the city, doing on-site vaccinations at bathhouses and sex clubs at night after work. The vaccine campaign reportedly reached more than 16,000 men, stopping an outbreak some feared would resemble the onset of the AIDS epidemic.





PERSON OF THE YEAR VLADIMIR PUTIN

Driving the governmental, religious, and popular disdain for gays and lesbians, the Russian president became the single greatest threat to LGBTs in the world in 2014.

By **Jeremy Lybarger**

"Imagine a boy who dreams of being a KGB officer when everyone else wants to be a cosmonaut."

This quote appears early in *The Man Without a Face*, Masha Gessen's 2012 biography of Vladimir Putin. It's as succinct and illuminating a characterization of the Russian president as you're likely to find. The KGB, after all, perfected the thuggery, espionage, and aimless bureaucracy that are hallmarks of Putin's regime. The agency's crackdown on dissidents offered a blueprint for Putin's own strongman excesses. That he aspired to such a career as a child tells us something useful about his psychopathology: This is a man hardwired to intimidate.

Nowhere is this tendency more apparent than in his crusade against LGBT Russians. Since winning a third term in 2012, Putin has become ever more autocratic, and his antigay ideology ever more extreme. In June 2013,

he signed the infamous antigay propaganda bill that criminalizes the "distribution of information...aimed at the formation among minors of nontraditional sexual attitudes," with nontraditional meaning anything other than heterosexual. Individual violators are fined anywhere between \$120 and \$150, while NGOs and corporations can incur fines as high as \$30,000. International outrage flared in the months before the Sochi Olympics, in response to which Putin reassured the gay and lesbian community they had nothing to fear as long as they left Russia's children in peace.

Such incendiary rhetoric is a staple of Putin's political playbook. And in Russia, where the majority of media are state-owned, there's little public pushback. Tanya Cooper, a researcher with Human Rights Watch, argues that the average Russian is unlikely to seek diverse viewpoints. "When politicians, celebrities, and respectable



journalists in Russia tell you repeatedly, either on television or in print, that gay people are perverts, sodomites, and pedophiles, you just believe it,” she says.

According to Pew Research’s 2014 Global Attitudes Project, 72% of Russians think homosexuality is morally unacceptable. This hints at the increasing domination of the Russian Orthodox Church, which between 1991 and 2008 saw the number of adults calling themselves adherents increase from 31% to 72%. In July 2013, Patriarch Kirill I, leader of the church, deemed same-sex marriage “a very dangerous sign of the apocalypse,” a sentiment that appeals to Putin’s conservative base. Julie Dorf, a senior adviser at the Council for Global Equality, argues that Putin relies on the church to legitimize his rhetoric, and in turn, the church gets greater political access. “Without [Putin’s] personal agenda of using homophobia as a tool to keep himself buoyed domestically, I don’t think the church’s own homophobia would have risen to the same level,” Dorf says.

A September 2014 poll from Russia’s state-run Public Opinion Foundation found that of the two-thirds of respondents who said celebrities can be moral authorities, 36% cited Putin, putting him far ahead of Patriarch Kirill I, who was cited by just 1%. Indeed, Putin’s statecraft and overarching political vision have become staunchly Manichaean, as a struggle between diametrically opposed forces. As Mark Galeotti and Andrew S. Bowen wrote in *Foreign Policy*, “He does not see himself as aggressively expanding an empire so much as defending a civilization against the ‘chaotic darkness’ that will ensue if he allows Russia to be politically encircled abroad and culturally colonized by Western values at home.” Framed like this, Russia’s assault on LGBT rights is really just opposition to American hubris.

“THE POLITICAL POWER HE’S GETTING FROM THE ANTIGAY CAMPAIGN IS LESS ABOUT BEING MORALLY RIGHT THAN ABOUT DEFINING RUSSIA AS ‘NOT THE WEST.’ ”

“I’m not sure he’s a particularly moral person,” Dorf says. “My sense is that the political power he’s getting from the antigay campaign is less about being morally right than about defining Russia as ‘not the West.’ ”

Cooper agrees, and sees Russia’s anti-LGBT dragnet as the most appalling example of a broader rejection of foreign subversion. “The attack on the LGBT community in Russia started almost simultaneously with the attack on civil society and the demonizing of NGOs as foreign agents,” she says. “There was a campaign to expose all the evils of Western culture and say that immigrants, liberals who get their inspiration from Western political culture, and LGBT people are all Western exports and therefore alien to Russia.”

The notion of Russian purity is the cornerstone of Putin’s identity, underlying everything from photo ops to the annexation of Crimea. On his personal Web site, administered by the Russian Presidential Executive Office, we learn that “Putin prefers Russian cars,” is “particularly fond of fishing in Russia,” and as chairman

PREVIOUS PAGE: DMITRY ASTAKHOV/AFP/GETTY IMAGES. FROM LEFT: YURIK ADOBNOV/AFP/GETTY IMAGES. AFP/GETTY IMAGES. AFP/GETTY IMAGES



From left: A visitor walking past a giant oil portrait of Russian president Vladimir Putin in Moscow; an activist protesting at the Hanover trade fair in 2013; Putin and Orthodox patriarch Kirill during Putin's meeting with religious leaders in the Danilov Monastery in Moscow

of the Russian Geographical Society's Board of Trustees, is devoted to "[inspiring] people to love Russia." His 2012 state-of-the-federation address framed his nationalist fervor as a social awakening: "In order to revive national consciousness, we need to link historical eras and get back to understanding the simple truth that Russia did not begin in 1917, or even in 1991, but rather, that we have a common, continuous history spanning over 1,000 years and we must rely on it to find inner strength and purpose in our national development."

That LGBT Russians have no place in this development is simply a hard demographic truth. In 2013, Russia's birth rate exceeded its death rate for the first time in two decades—a trend Putin is keen to sustain. In language disturbingly reminiscent of Nazi propaganda, he told reporters in January that anything that gets in the way of Russia's population growth should be "cleaned up." In addition to LGBT undesirables, Russia's ethnic minorities also pose a threat, as do freethinkers who openly critique the regime. In a survey of the past two decades by the Committee to Protect Journalists, Russia was ranked the fifth most dangerous country for reporters, with at least 56 killed between 1992 and 2003; the International Federation of Journalists estimates the number is even higher. The message is clear: Putin's Russia, in grand Soviet tradition, is a country of the masses, not the individual.

Yet it's the masses that must safeguard individual liberties. The Sochi Olympics catalyzed an intense campaign for reform—there were widespread calls to boycott the games; President Obama criticized Russia's LGBT policies; a Change.org petition urging Olympic sponsors to condemn the anti-LGBT laws garnered more than 225,000 signatures—but nothing really changed. "After Sochi ended, attention shifted somewhere

else," Cooper says. When asked if there have been any positive developments for Russia's LGBT community since February, she answers simply, "No."

Recent headlines offer little to celebrate. On August 28, agents from Russia's Federal Security Service ransacked the home of Andrei Marchenko, a blogger whom they accused of masterminding a "gay terrorist underworld." On September 18, Queerfest, an annual LGBT rights festival in St. Petersburg, canceled most of its events after bomb threats and attacks that saw antigay protesters squirt festivalgoers with an unknown gas and green dye. On September 25, the Constitutional Court of Russia upheld the antigay propaganda law. And of course LGBT Russians continue to be assaulted or murdered with tragic frequency. On September 7, Yekaterina Khomenko, a 29-year-old lesbian who taught tango lessons to same-sex couples in St. Petersburg, was found dead in her car, a four-inch slash across her throat. Police initially called her death a suicide.

"Putin's not going away until 2024, so the situation, politically, isn't going to change for quite some time," Dorf says. The prospect of another decade under Putin is devastating. Despite encouraging developments such as the International Olympic Committee's new mandate requiring prospective host cities to sign an antidiscrimination clause, Russia's LGBT activists report few breakthroughs. What hope they have is precarious and underground. Their enemy is an eternal KGB agent with dreams of empire, a pragmatist and sportsman who crushes his opposition while still incongruously proclaiming, as he did in a *New York Times* op-ed, "[We] are all different, but when we ask for the Lord's blessings, we must not forget that God created us equal." ♦



**PHOTOGRAPH BY
BÉNÉDICTE DESRUS**

More than 100 gay Ugandans and their supporters met in the capital of Kampala on Valentine's Day to discuss the Anti-Homosexuality Act that threatens their safety.



YEAR IN REVIEW:

2014

This year, the Boy Scouts admitted gay youths, Michael Sam was drafted, Sochi became an international rallying cry, we won a bunch of marriage victories (and Eurovision!), and our rights in Russia, Uganda, and Arizona hung precariously in the balance. **BY MATTHEW BREEN**



Sochi Olympics

FEBRUARY 7 ➔ The 2014 Sochi Winter Olympics got off to a rocky start in the wake of Russia's Putin-backed law against gay "propaganda," Putin's equating homosexuality with pedophilia, legislation to remove children from the custody of their LGBT parents, a refusal to allow a Pride house for LGBT Olympians, protestations from Sochi's mayor that there were no gays living in the city (despite evidence to the contrary), condemnation of the country's antigay laws by several Olympics sponsors, widespread and unprosecuted victimization of LGBTs by nationalist thugs, U.S. State Department warnings to LGBT travelers to Sochi about possible fines and imprisonment, and the International Olympic Committee's inaction in addressing any of these matters. President Obama responded with evident symbolism by forgoing the games and sending a delegation that included a number of prominent openly gay athletes: hockey player Caitlin Cahow, tennis legend Billie Jean King, and figure skater Brian Boitano.

Commentator Johnny Weir's outfits



A policeman detains gay rights activists during a protest in Moscow on May 31.



Placing candles at the Homomonument in Amsterdam on February 7 during the opening ceremony of the Olympic Games.





Laverne Cox Covers Time



MAY 29 ➔ Actress and trans rights activist Laverne Cox was the first transgender person to appear on *Time*'s cover for its story "The Transgender Tipping Point." In April, Cox took the top spot in the *Time* 100 Reader Poll, momentarily displacing pop star Justin Bieber. On July 10, Cox became the first transgender person nominated for an Emmy award for her role in *Orange Is the New Black*.

Vladimir Luxuria (center), crusader for transgender rights, is led away by friends on the Olympic Plaza. Luxuria was soon after detained by police.



Executive Order



JULY 21 ➔ President Obama signed an executive order adding sexual orientation and gender identity to the categories protected in the existing anti-discrimination executive order covering federal contractors.



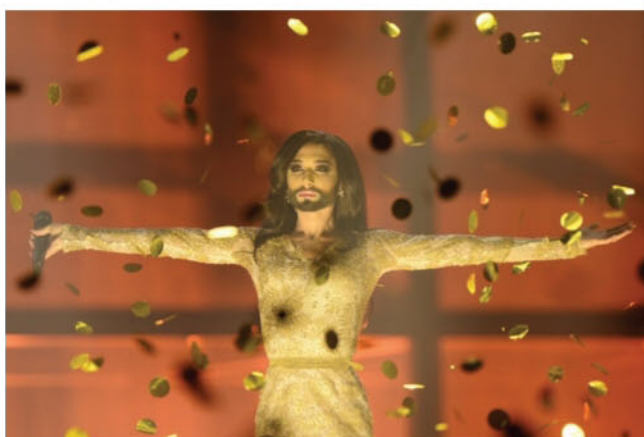
MacArthur Genius Grants

SEPTEMBER 17 ➔ The John D. and Catherine T. MacArthur Foundation awarded "genius grants" of \$625,000 each to three queer winners: civil rights attorney Mary Bonauto (civil rights project director at Gay and Lesbian Advocates and Defenders, *Gill v. Office of Personnel Management*); cartoonist and graphic memoirist Alison Bechdel (graphic novels *Fun Home* and *Are You My Mother?* and long-running comic strip "Dykes to Watch Out For"); and playwright Samuel Hunter (*The Whale*, *The Few*, *Rest*, and *A Great Wilderness*).



Uganda

MARCH 19 ➡ U.S. Secretary of State John Kerry announced plans to send American scientists to Uganda in an effort to counteract the flawed “science” cited by Ugandan president Yoweri Museveni when he signed into law the Anti-Homosexuality Act, which imposes prison sentences for same-sex sexual activity between consenting adults and criminalizes anyone who “aids or abets” homosexuality or LGBT people. When Museveni signed the law in February, he pointed to a so-called scientific report from antigay Ugandan lawmakers “with medical backgrounds,” and concluded that homosexuality was partially innate but mostly influenced by environment and active recruitment. On August 1, the Constitutional Court of Uganda ruled the law invalid but parliamentarian David Bahati said the government would appeal to overturn the ruling.



Conchita Wurst Wins Eurovision

MAY 10 ➡ The annual Eurovision Song Contest ended with a victory for Conchita Wurst, Austria’s bearded drag queen contestant, and her 007-style torch song, “Rise Like a Phoenix.” Upon winning, Wurst, the alter ego of Thomas Neuwirth, said, “This night is dedicated to everyone who believes in a future of peace and freedom. You know who you are. We are unity and we are unstoppable!” Her beard became a meme in LGBT rights protests in Russia over the summer.



Michael Sam

MAY 10 ➡ Michael Sam became the first openly gay football player in the NFL. He was drafted by the St. Louis Rams, and congratulated in a statement by President Barack Obama. He made his professional debut on August 8, but was cut by the Rams later that month. On September 3, he was added to the practice squad of the Dallas Cowboys.



AFP/GETTY IMAGES (UGANDA); CONCHITA: DILIP VISHWANATH/GETTY IMAGES (SAM); STEWART HOUSE/GETTY IMAGES (BOY SCOUTS); SLAVEN VLASIC/GETTY IMAGES (ROBERTS); MIKE COPPOLA/GETTY IMAGES (PAGE)

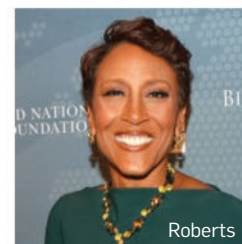


Ugandan men celebrate on August 9 during the annual gay pride in Entebbe, Uganda.

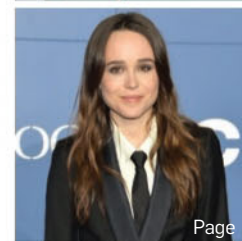


Boy Scouts

JANUARY 1 ➔ The Boy Scouts of America implemented its policy to allow openly gay young people into the ranks, though gays and lesbians over age 18 are still barred from serving as scout leaders, troop members, or volunteers. After a long debate, the organization's national board approved the policy change in a 2013 vote, as a compromise for an organization facing declining sponsorship due to discriminatory policies, and declining membership.



Roberts



Page

Comings Out

Jim Ferlo, Pennsylvania state senator

Michael Sam, NFL player, Dallas Cowboys

Robin Roberts, anchor, *Good Morning America*

Kristian Nairn, actor, *Game of Thrones*

Djuan Trent, Miss Kentucky 2010

Ellen Page, actress, *X-Men: Days of Future Past*

MK Nobilette, *American Idol* contestant

Tyler Glenn, lead singer, Neon Trees

Pat Patterson, former WWE wrestler

Sam Smith, singer

Derrick Gordon, basketball player, University of Massachusetts

Daniel Franzese, actor, *Mean Girls*

Matt Llano, professional distance runner

Lauren Neidigh, swimmer, University of Arizona

Lauren Morelli, writer, *Orange Is the New Black*

Samira Wiley, actress, *Orange Is the New Black*

Patricia Yurena, Miss Spain 2008 and 2013

Vicky Beeching, singer-songwriter

Ian Thorpe, Olympic swimmer

Brad Thorson, former NFL prospect

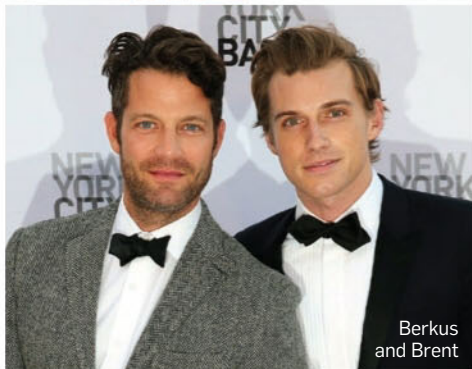
MILESTONES



Jackson
and Landau



Etheridge
and Wallem



Berkus
and Brent

Weddings

Vivian Boyack and **Alice "Nonie" Dubes**, ages 90 and 91

Neil Patrick Harris (actor) and **David Burtka** (actor)

Nate Berkus (designer and TV host) and **Jeremiah Brent** (author)

Melissa Etheridge (musician) and **Linda Wallem** (writer and producer)

Jodie Foster (actress and director) and **Alexandra Hedison** (photographer)

Lily Tomlin (actress) and **Jane Wagner** (writer)

Cheyenne Jackson (actor) and **Jason Landau** (actor)

Tom Ford (fashion designer) and **Richard Buckley** (journalist)

Linda Perry (musician) and **Sara Gilbert** (talk show host)

Dot-Marie Jones (actress) and **Bridgett Casteen**

Meredith Baxter (actress) and **Nancy Locke** (contractor)



Bashing in Philadelphia

SEPTEMBER 23 ➔ Three people were charged by police in the physical attack on a gay couple in Philadelphia on September 11. Both victims suffered facial fractures. Police released closed-circuit surveillance footage of the group of as many as 15 suspects, and amateur online sleuths matched the alleged assailants to Facebook check-ins of a group at an area restaurant. The attack outraged residents and politicians, as Pennsylvania has no protection for sexual orientation in the state's hate crimes statute.



Sultan of Brunei

MAY 1 ➔ Under Sultan Hassanal Bolkiah (below), Shariah law commenced in Brunei. The law will eventually include the death penalty by stoning for those found guilty of homosexual acts. Boycotts against properties owned by the sultan kept much of Hollywood away from the Beverly Hills Hotel and much of the fashion industry away from Milan's Principe di Savoia. The Dorchester Collection Fashion Prize was canceled this year after *Vogue* editor Anna Wintour and other fashion industry notables boycotted the event.



Arizona

FEBRUARY 20 ➔ The Arizona legislature passed the so-called "license to discriminate" bill and sent it to Gov. Jan Brewer (above) for her signature. The measure would have given legal protection to businesses and individuals that denied goods and services to certain consumers—including LGBT individuals, same-sex couples, single women, or people of different religions—on the grounds that serving them would place a substantial burden on their exercise of religion. On February 26, the governor vetoed the bill.



Marriage Equality Rulings

JANUARY 6 ➔ The marriages that began in Utah at the end of 2013 (in the first post-*Windsor* marriage decision) were stayed by the Supreme Court. On January 10, U.S. Attorney General Eric Holder announced the U.S. government would recognize the marriages performed in Utah between December 20, 2013, and January 6, 2014. Most states with constitutional bans were in the midst of cases challenging those bans.

OCTOBER 6 ➔ The Supreme Court rejected appeals from five states (Indiana, Oklahoma, Utah, Virginia, and Wisconsin). Because the rulings struck down bans in other states as well, the appeals court decisions raised the number of marriage equality states from 19 to 30, plus Washington, D.C. The following day, a federal appeals court rejected bans in two more (Nevada and Idaho), though as of press time, Idaho must await further action before marriages can begin.

“With discernment we see not shadows lurking in closets or the stereotypes of what was once believed; rather, we see families committed to the common purpose of love, devotion, and service to the greater community.”

—Judge Michael McShane, in a decision in the U.S. District Court for the District of Oregon, on May 19, 2014

MILESTONES



Looking



The Normal Heart



Transparent

Television

The small screen was huge for LGBTs in 2014. **Looking**, an HBO series from *Weekend* director Andrew Haigh, was heralded as a refreshing look at the lives of three gay men in San Francisco.

The much-anticipated film version of Larry Kramer's play **The Normal Heart** premiered on HBO on May 25, starring Matt Bomer, Mark Ruffalo, and Julia Roberts, and directed by Ryan Murphy.

Transparent, a new dramatic comedy series from Amazon.com, created by Jill Soloway (*Six Feet Under*) and starring Jeffrey Tambor (*Arrested Development*) as Maura, a 70-year-old transgender woman who is just coming out to her family, premiered to nearly universal acclaim. Numerous transgender consultants were enlisted in the series, and approximately 20% of the crew is LGBT.



St. Patrick's Day Parade

SEPTEMBER 3 ➔ Organizers of the Saint Patrick's Day parade in New York City announced that they would end the ban on LGBT-affiliated groups. 2015 will mark the first year since the parade began in 1762 that LGBT groups will march with the organizing committee's consent.



Mozilla CEO Resigns

APRIL 3 ➔ Fewer than two weeks after being named CEO of Mozilla, the tech company he co-founded, Brendan Eich stepped down. Eich's appointment had been the subject of controversy after it was revealed that he donated \$1,000 to California's Prop 8 antigay campaign in 2008. The company's employees (not LGBT activists) pressured Eich to resign, sparking a vigorous public debate.



Opening ceremony of the Gay Games on August 6



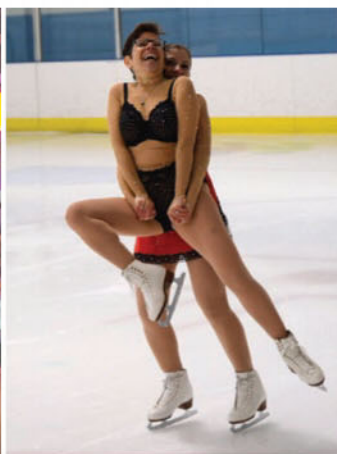
Barneys

JANUARY 31 ➔ Luxury retailer Barneys New York's Spring 2014 campaign, titled "Brothers, Sisters, Sons & Daughters," featured 17 transgender models photographed by Bruce Weber and interviewed by *Vanity Fair*'s Patricia Bosworth. Rather than releasing a traditional catalog, Barneys released portfolios with photos of the models and their stories, along with a series of videos to coincide with the campaign.



California Bans Gay Panic Defense

SEPTEMBER 27 ➔ California became the first state to officially ban "trans panic" and "gay panic" legal defenses. In the past, defendants in murder cases could ask for a lesser charge of manslaughter, claiming they were so shocked to learn that their victim was gay or trans that they had no recourse besides violence, as in the 2011 murder trial of teenager Brandon McInerney for the killing of classmate Larry King. McInerney cited "gay panic" and pled guilty to second-degree murder and voluntary manslaughter and was sentenced to 21 years in prison. The new law makes clear that a defendant's fear of a victim's sexual orientation or gender identity may not be used as a legal defense.



Gay Games Cleveland

AUGUST 6 ➔ Some 8,000 people from 48 states and 51 countries registered for the Gay Games in Cleveland and Akron, Ohio, this year—but a whopping 25,000 came to town for the event. Though the two cities have less international cachet than previous host cities such as New York, Amsterdam, and Cologne, the games

were a rousing success. Event organizers cited record-setting performances by a 99-year-old in the 100-meter dash, and a Masters swimmer in the 50 free, and successfully handed off the flag to a delegation from Paris, the host city for the 2018 Gay Games.

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Aaron – St. Louis, MO
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Spectator



FILM / MICHAEL MUSTO

Holding Out for a Gay Hero

Are we bucking the cinematic miserable-queers trope at last?

Good news arrives on November 21 with the premiere of *The Imitation Game*. The film features Benedict Cumberbatch as a real-life gay hero: Alan Turing, the brilliant mathematician who famously broke the Enigma code and, in the process, helped bring about the end of World War II. Winston Churchill later said Turing made the single greatest contribution of anyone when it came to defeating the Nazis. That's pretty major, though this isn't totally a feel-good story. The man who knew secrets had his own, since this wasn't exactly a time for Pride parades and *Drag Race*

reunions. In fact, Turing (who was socially awkward to an extreme) was prosecuted for homosexuality, suffered chemical castration as a punishment, and was found dead in 1954 in an apparent suicide. It wasn't until last December that Queen Elizabeth II pardoned him for his transgressions. (Mighty white of her.) But still: He was gay! And a hero! And they made a movie about him!

Cumberbatch is superb as the heroic criminal (illegal hero?), who comes out to a colleague and also to his fiancée (Keira Knightley) as he searches for viable choices in a repres-

sive time. The film is framed by flashbacks told from his arrest, and as personal tensions mount, so do his triumphs. The result is an absorbing drama that gays need to see.

That might not sound startling, except for the fact that cinema's track record in handling gay issues has been splotchier than a twink on a high-gluten diet. English-language movies generally deal with sympathetic gays, as long as they're either cartoony (*Priscilla*) or doomed (*Philadelphia*) or both (*Kiss of the Spider Woman*). Many times, the likable screen gays have no love lives, since they're on hand to emit snappy one-liners, then flit away (like all those effeminate sidekicks in 1930s Fred and Ginger musicals). Or gays have been portrayed as victims, psychos, and human punch lines, present to add either horrifying anguish or cheap laughs. Even today, the idea of a gay hero movie seems like a revolution.

The 1950s and '60s were a particularly toxic time for gay-themed films, thanks to a batch of adapted plays that didn't exactly elevate the discourse. In *Tea and Sympathy* (1956), a boy who's called a sissy gets the gay fucked out of him by the concerned wife of his coach. In *The Children's Hour* (1961), a bratty little girl's rumor mongering about her teachers' lesbianism has very real results, like devastation and suicide. *Staircase* (1969) has two old gays bickering, and *The Killing of Sister George* (1968) shows that dykes can be sadistic too. Meanwhile, *The Boys in the Band* (based on the 1968 play) revels in the fun camaraderie of a group of gay NYC friends, though after a few drinks (and the entrance of a self-loathing character), wildly destructive recriminations ensue and you want to kill yourself.

In some ways, these films are merely reflecting the stigma of being gay during their eras, as well as the angst and pitfalls of being closeted. But some of them tend to add to the pain with broad strokes of ugliness and stereotyping.

Fortunately, the '60s were a time of transition when people were experiencing varied sexual phenomena, and by the time the decade was over, everyone was ready for a breakthrough. It came with the 1971 British film *Sunday Bloody Sunday*, in which a hot young stud simultaneously beds a couple of friends played by Glenda Jackson and Peter Finch, leading to all sorts of complications. The result was sophisticated and very refreshing.

The '80s brought a mixed bag of more breakthroughs (*Silkwood*, *My Beautiful Laundrette*) together with some ill-received throwbacks (*Cruising*) and downright whitewashes (*The Color Purple*). But in general, gays were becoming more integrated into the palette of available characters, and they didn't always have to be pathetic to gain a place at the big-screen table.

Alas, the more we moved ahead, the more baby steps we took back. In the 1990s, gay guys were often bitchy best friends to pretty women, but Greg



Enough! Let's show some gays who've done good and have actually lived to enjoy the rewards!

Kinnear's gay artist in the 1997 seriocomic *As Good As It Gets* had the potential to exhibit more soul than that. Unfortunately, the guy is victimized and lonely and has to rely on a big creep (Jack Nicholson) for a lifeline. It didn't sound like any gay guy I've ever met, or would *hope* to meet.

More problematic was the rash of (mostly fine) films that equated LGBTs with murder and death. No one seemed to be conflating "gay" and "happy" in this uneasy period. In 1999, *Boys Don't Cry* was the beautifully filmed true story of trans man Brandon Teena, who met a grisly fate. In 2003, the powerful *Monster* showed how an abused lesbian became a real-life serial killer. In 2005, *Capote* focused on renowned (and real) author Truman Capote's fixation with a murderer he was writing about. And the same year, *Brokeback Mountain* showcased a couple of gay cowboys who, though fictional, are shrouded by inevitable tragedy. (And they hardly end a World War in the process.) Sure, these films have value in that they reveal some of the horrors that come out of oppression. But enough! Let's show some gays who've done good and have actually lived to enjoy the rewards!

Of course *Milk* (2008) is a classic about a real-life trailblazer—who was killed. But I did like 2010's *The Kids Are All Right*, the well-observed film about a lesbian couple's domestic dramatics. As played by Annette Bening and Julianne Moore, the couple seemed feeling, funny, and fierce—until one of them had to go and sleep with a man. Oh, Hollywood.

And Jared Leto won an Oscar for playing a saucy trans woman in *Dallas Buyers Club* in 2014. But then she had to die, of course.

Fortunately, 2014 has already had one queer-positive triumph: *Pride*, about the gays who supported striking miners in Thatcher's U.K. And even going beyond *The Imitation Game*, Steve Carell is set to play an unpunished gay hero. In *Freeheld*, Carell will be Steven Goldstein, the Garden State Equality founder who helped move domestic partnership rights forward. I'll buy the gay popcorn. ♦



Michael Musto is the author of *Manhattan on the Rocks*, *Downtown*, and *Fork on the Left, Knife in the Back*, and a weekly columnist for OUT.com.

A photograph of three young men in an urban setting. The man in the center is wearing a green quilted leather bomber jacket over a white V-neck shirt. He has a tattoo on his left chest and is looking down. The man on the left is wearing a red beanie, a grey jacket over a white shirt, and has a beard; he is looking towards the center man. The man on the right is wearing a dark jacket over a grey shirt and a dog tag necklace; he is smiling and looking towards the center man. The background shows a brick wall and a bridge.

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FILM / DARNELL L. MOORE

I'm on My Way

Selma's scenes of struggle and violence in the 1960s conjure contemporary comparisons for out actor Colman Domingo.

Colman Domingo twice rejected director Ava DuVernay's offer to join the high-profile production of *Selma*, a film that recalls the 1965 Selma-to-Montgomery protest marches, a critical juncture in the African-American civil rights movement.

It's not often that Oprah Winfrey produces and takes a part in a film, but she's doing so in *Selma*. Nevertheless, Domingo, a critically acclaimed actor and playwright, told DuVernay that he had already committed to bringing his one-man play, *A Boy and His Soul*, to his hometown of Philadelphia. DuVernay, who took up the long-gestating Martin Luther King Jr. project, would not take no for an answer.

"Oh, my God. Is he actually saying no?" DuVernay recalls thinking with a laugh. "I had to call David Oyelowo [the actor cast as King] and tell him, 'Please call your friend and tell him he wants to do *Selma*.'"

Domingo relented; he portrays the Rev. Ralph Abernathy, King's confidant and comrade in the film, which chronicles the 1965 voting rights campaign led by King and other leaders. On March 7, 1965, some 600 marchers attempted a 54-mile march to protest voting inequalities and to channel anger over the killing of voting rights activist Jimmie Lee Jackson. Police attacked the marchers with billy clubs and tear gas on Bloody Sunday, as the first day of the march came to be known.

DuVernay's masterful depictions have a special resonance as images of the crisis in Ferguson, Mo., continue. "It's the same thing. A young brother gets killed, there are injustices that are systemic in the community, legislation is all out of whack, and people start to react and try to figure out a way to take action, mobilize, and try to change the circumstances," DuVernay says. "Same thing in Ferguson. There's a heavy police presence. One happened in 1965, and one happened in 2014."

Selma will appear on the big screen during a moment when many black Americans are questioning the extent to which racial justice has been achieved in the United States, especially following the Supreme Court's decision to invalidate a key aspect of the Voting Rights Act of 1965. Americans have simultaneously witnessed progress among LGBT advocates, who have fought for the right to marry and other equal protections under the law. DuVernay notes that the LGBT fight for equality is an "age-long struggle that stands side by side with the African-American struggle for rights."

The connections between the black struggle and the LGBT fight for equal rights is clear to Domingo, who is gay.

"What my community asks of me, what the world asks of me, is to be useful and to use my gifts, and to hopefully shine a light on some-

thing which hasn't been said, or to write something I feel needs to be added to the experiences not only of African-Americans, but of humans and human nature," Domingo notes.

Domingo is no stranger to roles primed to instigate change. He has appeared in *Lincoln* by Steven Spielberg, several films by Spike Lee, *Lee Daniels' The Butler*, and *The Scottsboro Boys* on Broadway.

Working on *Selma* gave Domingo a chance to view some civil rights giants, including Diane Nash and Ralph Abernathy, as human-sized. "By meeting people like Andrew Young and John Lewis, I was able to see them as ordinary human beings doing extraordinary things," he says. "I always looked at these leaders, but I didn't look at the people who were following these leaders, because you couldn't have a movement if it weren't for these so-called 'extras,' or people who are being sent out there to constantly be arrested, and these teenagers, people who felt motivated to just do work they thought was right."

Though Domingo and DuVernay have high praise for actor David Oyelowo's depiction of King, both insist portrayals of often forgotten leaders—including women like Amelia Boynton and Richie Jean Jackson, and Bayard Rustin, who was gay—are as important. Actor Ruben Santiago-Hudson plays Rustin in this film. "Bayard Rustin is always left out of the narrative because many would be uncomfortable with [him], but that's part of our history," Domingo says.

DuVernay agrees: "It was my responsibility to make sure that I, as a black woman, was in this script somewhere. Women's role were written and integrated into the narrative. It was really important to me that Bayard Rustin be included in the film. He was a firebrand. He was an effing badass."

Selma depicts a movement in a long conflict marked with defeats and triumph. And for those, like Domingo, who exist within the space where the black and LGBT identities intersect, the film is a reminder that the struggle for visibility and equality continues. ♦

Selma opens in limited release on January 9.



Darnell L. Moore is a Brooklyn-based writer and activist. He writes about the politics of race, gender, and sexuality.



Colman Domingo and David Oyelowo (third and fourth from left) in *Selma*



Leighton Meester
and Gillian
Jacobs in *Life
Partners*

FILM / DIANE ANDERSON-MINSHALL

Love, Millennial Style

There's a message in *Life Partners*, a movie about young women's relationships. But not hearing the message loud and clear may be the whole point.

With few exceptions, there is a very specific type of TV show I enjoy: the kind where people die mysteriously and their death needs to be solved via police work or forensics or a witty but sexily misanthropic British investigator. The few exceptions often involve characters (or the actors behind them) who move me in particular ways. I've loved James Spader since *Pretty in Pink*, so I watch *The Blacklist* religiously; Eden Shur's Sue Heck is a plucky, I'm-sure-she'll-come-out-as-a-lesbian teen on *The Middle* who reminds me of the hopefulness and misery of high school, so I watch her even in reruns.

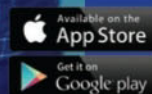
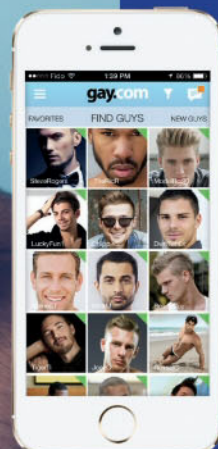
But I wasn't a *Gossip Girl* fan. The fact that *Gossip Girl* was aimed at women a decade or two younger than I when it debuted, together with articles like one in *The New York*

Times heralding it as "the first [show] to have been conceived, in part, as a fashion marketing vehicle," did nothing to encourage me to click over to the CW.

You'd have to be under a rock, however, not to see the huge cultural impact the show has had on teenage girls in the last decade (the series ended in 2012). The actresses it catapulted to fame, Blake Lively and Leighton Meester, who played Serena and Blair respectively, could write their own tickets, which is why it's of such importance that Meester, while working on Broadway and recording her surprisingly wonderful debut album, *Heartstrings*, chose to star in *Life Partners*, a smart sleeper film that chooses the millennial take on lesbian issues, the quarter-life crisis, and the indefinable and nuanced intricacy of female friendships.

"That's what attracted me to the project, the way it captured the complexity of female friendship," Meester says. "Portrayals of women are often very one-dimensional, and often in films and television we're watching two girls who are friends, but their relationship is based on basically talking about dating a guy in the room or just out of earshot. [Women are] better than that, but unless we're doing movies that are written by women and directed by women, we're not going to be able to capture it in a realistic way."

Life Partners was written and inspired by longtime friends Joni Lefkowitz, who is an out lesbian, and Susanna Fogel, who is not. The duo already have a following from starring in



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their own Web series, *Joni and Susanna*. Meester was a fan of the Web series and now calls Fogel and Lefkowitz “wonderful people” and great friends. She says she really liked their philosophy and their vibe and their vision, and that being on the *Life Partners* set “was the best time I’ve ever had doing a movie or anything.”

Meester didn’t have to do extra research on positive female relationships. “My friends are made up entirely of really incredible women. I’m a bit of a brag, but all my friends are just beautiful, intelligent, and talented women, and we all are just 100% supportive of each other, and I think that that [sort of female friendship] is underrepresented in film.”

The women-centric nature of *Life Partners* permeates each frame, besting other attempts that may have trod similar territory (TV’s *Playing House* or the film *Kissing Jessica Stein*) but just left lesbian audiences wanting more.

In American cinema, the kickoff of the film genre of the quarter-life crisis—the confusing period of time when 20-somethings catastrophize over growing up, committing, or taking responsibility in the real world—was *The Graduate*, the 1967 film so frequently referenced in pop culture that “Mrs. Robinson” is all you need to say to evoke it nearly 50 years later.

There have been dozens since, each reflecting its generation, including the Gen-X Brat Pack classic *St. Elmo’s Fire* (a movie my teenage friends and I saw numerous times because at 16 we so identified with the characters), the brutally brilliant *Fight Club* (another fave), and HBO’s *Girls* (which is changing the portrayal of women on TV with each new episode).

Life Partners upends the quarter-life crisis trope with Meester as Sasha and *Community*’s Gillian Jacobs as Paige, two interdependent women who have been essentially co-pilots in life, even though one is gay and one is not. And though a man is involved, he’s a catalyst rather than an obstacle (as in nearly every other film with a lesbian-straight girl-straight guy triangle).

A decade ago this film would have been different, with two clear options: Sasha—as a schlubby lesbian who has one-night-stands with dumb 20-year-olds, eats junk food, and drinks booze straight out of the bottle—would either fall in unrequited love with her straight best friend, making for heartbreaking drama at best (call it the *Children’s Hour* trope), or Sasha’s character would actually be a man, Ashton Kutcher perhaps, and he and Paige would indeed fall in love at the end (à la *A Lot Like Love*, *When Harry Met Sally...*, *Made of Honor*, and dozens of others).

It’s no spoiler to say that neither of those two things happens, and the fact that they don’t makes *Life Partners* refreshing, new, and introspective for a film with a lesbian central character. It will appeal to anyone who likes to eat cake, talk on the phone, and watch *The Bachelor* with friends. But buried so carefully in the story of women dealing with their friendship when one falls in love with a man and steps over to the grown-up side of the fence faster is a crucial undercurrent. It’s a statement that the people of Meester’s generation don’t care so much about labels, or about who they fall in love with, and are less threatened by gay or bi people than any generation before them. In the same way that a lack of a prejudice can be invisible until noted, this sub-

The people of Meester’s generation don’t care so much about labels, or about who they fall in love with, and are less threatened by gay or bi people than any generation before them.

text is played out so subtly on-screen that one could easily not realize it’s there.

Life Partners starts out at Pride: The scene, filmed at the Long Beach, Calif., LGBT event in 2013, features Paige and Sasha casually wandering through the rainbow-saturated festival, chatting about things young women talk about. It’s the kind of scene that in a ’90s film (*Clueless*, *Romy and Michele’s High School Reunion*, et al.) would have been shot in a mall.

The movie offers other nods to the way diversity is celebrated among millennials today: The lesbian *SNL* star Kate McKinnon makes her major-film debut; *American Horror Story*’s Gabourey Sidibe upends the post-*Precious* (male) pundit backlash about her body by playing a sexy and sexually active lesbian; *The OC*’s nerdy teenager, Adam Brody, plays an affable and unthreatening young man who doesn’t bat an eyelash at his girlfriend’s intimacy with her lesbian best friend. Because, you know, who cares? To him it’s as normal as being left-handed.

“Exactly!” says Meester. “[Being gay is] not a choice. It’s not a personality trait. It’s just part of [the characters], part of life. I think Sasha has known since she was young that she’s gay, and from there on the struggle to find somebody to be with, and the struggle with finding herself and her sort of meaning in life and what she wants to do with her life—her job, her friendships—none of it is really impacted by the fact that she’s openly gay.”

But is it an anomaly, or does *Life Partners*—which premiered at Tribeca and will most likely be a small-scale hit—reflect a change in cinema for LGBT characters?

Meester hopes LGBT roles will continue to be more common while at the same time less fraught. “[A gay theme] doesn’t have to be the main focus of the plot. There can and should be films about gay and lesbian relationships where that’s not the main topic of discussion,” she says.

After all, she says, “it’s just a romantic comedy.” In that one sentence, Meester, who was anointed by the CW and the *Teen Choice Awards* and *Seventeen* magazine as the voice of a generation, suggests that a whole new archetype for queer characters in movies doesn’t have to come from cultural revolt. Unless, of course, a romantic comedy is the perfect vehicle for revolution. ♦



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Rose's Turn

A Golden Globe and Emmy nominee for her hard work in *Damages*, Rose Byrne softens as motherly personal assistant Grace Farrell in *Annie*, Jay-Z and Will Smith's big-screen update of the musical classic, in theaters December 19. Also currently starring in the Broadway revival of *You Can't Take It With You*, the 35-year-old Aussie explains why, at least to gay fans, she's always a bridesmaid.

I probably don't have to tell you that your boyfriend, Bobby Cannavale, has a big gay following.

Oh, I am well aware. When we're out on Fire Island together, there are certain areas where he gets a little harassed. I love it. But I think he's one step away from getting kidnapped by some guy who tries to turn him. And who could blame them?

Do gay fans harass you?

I have this funny accent in real life, so I can go out and blend in. I've never been scrutinized by the paparazzi. Bobby's pretty hard to miss, but I tend to go quite unnoticed.

You can't hide from us at the Longacre Theatre stage door.

I am feeling that love on Broadway right now, which is

magnificent. The gay community has incredibly good taste, so I'm very flattered to have their approval and support.

You grew up in Balmain, a suburb of Sydney. What was your introduction to the LGBT community?

I started going to Sydney's gay Mardi Gras at a pretty young age. It was so much fun. I came from a very liberal, loving, and nonjudgmental household, so I was quite lucky. When I was 17 or 18, one of my dear friends at acting school was a gay guy. There are a lot of gay people in the arts, as you know, and shared interests are a good start to any friendship.

Have you ever played a lesbian role?

As a teenager, I did a couple episodes of *Fallen Angels*, an Australian television show, playing a young girl who happened to be gay. There was nothing sexually explicit required, so it wasn't confronting in that sense. I was an eager young actress, and it was an opportunity to explore a different and interesting character. Since then, I've not been approached to play a gay part.

Many viewers noted sexual tension between Ellen and her mentor, Patty, the attorneys that you and Glenn Close played in *Damages*.

Yeah, a lot of people in the gay community thought Ellen and Patty should get together, which was pretty funny. At least people were discussing the show, whatever they took away from it. Some people saw sexual tension. Others saw a mother-daughter story or an abusive relationship. Everyone interpreted it or related to it in a different way, and that's the great

thing about art.

Helen, your prissy character in *Bridesmaids*, had quite a girl crush on the bride. To quote Kristen Wiig's character, "What woman gives another woman a trip to Paris? Lesbian!"

That's part of the joy of working with a wonderful improviser like Kristen Wiig. She came up with that line on the spot.

Your character in *Neighbors* memorably kissed a girl at a frat party and seemed to like it.

Well, I think she'd had some shots of tequila.

Was that your first same-sex kiss?

Oh! Yeah, I suppose so. It was really more of a peck than a kiss, but—can we talk about something else?

Fair enough. Do you have a history with the musical *Annie*?

I really loved the original film, which came out when I was at the perfect age, so I just devoured it. Those wonderful performances were ingrained in my memory as a young girl. Ann Reinking is such an icon and so incredibly talented, so it's a bit surreal to end up playing her part. But our *Annie* is really a reimagining, so hanging on to memories of the original would've held us back.

Did the singing and dancing intimidate you?

I was daunted, but that seemed like a good reason to do it. This is my very first musical, really, so I didn't want to screw it up.

Do you see more musicals in your future?

[Laughs] Sure, I'm already planning my one-woman show: *From Balmain to Broadway!* I can't wait. ♦



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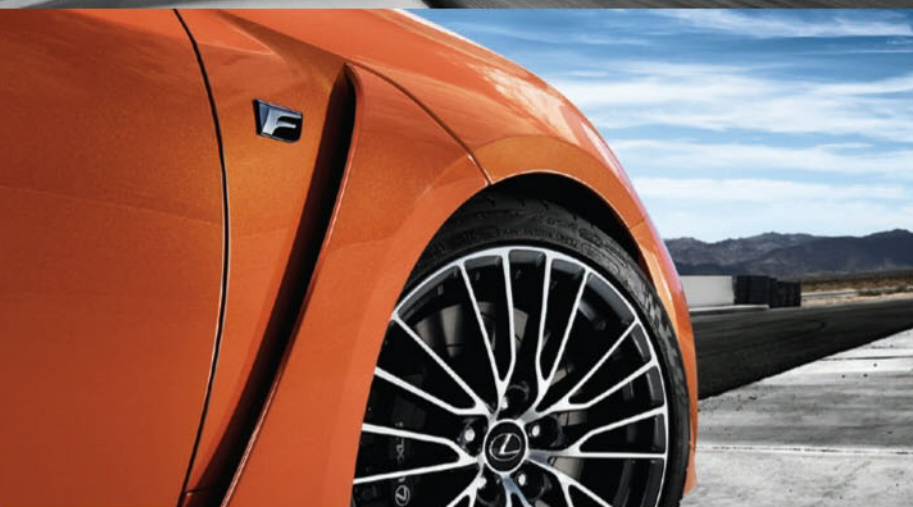
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