LGBTQ+ Local News, Voices and Community
NOV 22 - DEC 5 2024|VOL 39 NO 16
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# Qnotes

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**Mission:**
The focus of *QNotes* is to serve the LGBTQ and straight ally communities of the Charlotte region, North Carolina and beyond, by featuring arts, entertainment, news and views content in print and online that directly enlightens, informs and engages the readers about LGBTQ life and social justice issues.

Pride Publishing & Typesetting, Inc., dba
***Qnotes***
P.O. Box 221841, Charlotte, NC 28222
ph 704.531.9988 fx 704.531.1361
Publisher: Jim Yarbrough
Sales: x201 adsales@qnotescarolinas.com
Nat'l Sales: Rivendell Media, ph 212.242.6863
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## Elected LGBTQ+ candidates make history nationwide in 2024

The 2024 election has down-ballot races worthy of celebrating. As they establish a strong resistance against anti-LGBTQ+ policies and laws made at the state and local levels, newly elected LGBTQ+ lawmakers around the country serve as a reminder that democracy is far from dead and will continue to hold the radical right accountable as we move forward towards the future.

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# LGBTQ+ candidates make history nationwide in 2024

## Many Candidates who ran this election cycle were first in their state's legislature and in the U.S. Congress

**by Jonathan Golian**

The return of Donald Trump to the White House is frightening. Along with him comes an administration chosen specifically to work directly with the executive, legislative, and judicial branches of our government to achieve their conservative goals.

Though there are seats being filled with those on the right that either have anti-LGBTQ+ legislation in mind or are supportive of such measures, there are also seats that have been filled by those who have more positive changes solidly on their agenda.

The 2024 election has down-ballot races that are worthy of celebrating, simply by virtue of being able to establish a strong resistance against anti-LGBTQ+ policies and laws made at the state and local levels. These people not only represent the community, but hold the possibility to initiate grassroots efforts from the places they now sit.

Indeed, the presence of LGBTQ+ lawmakers in offices around the country serve as a reminder that democracy is far from dead and will continue to hold the radical right accountable as we move forward into the future.

Here are some of the winners from this year's election, who will undoubtedly make a big difference.

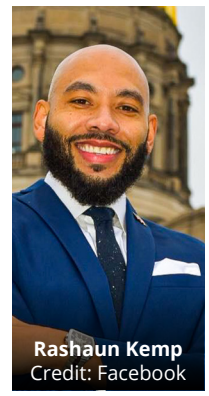
### Keturah Herron: First Out LGBTQ+ Person of Color Elected to Kentucky State Senate


Keturah Herron
Credit: Facebook

After previously becoming the first out LGBTQ+ member of Kentucky's House of Representatives, Keturah Herron was able to cross over to one of Kentucky's State Senate seats as the first out LGBTQ+ person of color elected to such a position.

Herron was a former policy strategist for the ACLU of Kentucky before going to the state's Congress, where, in just 17 days, they helped Breonna's Law get passed, which banned no-knock warrants in Louisville. The year after, Herron worked to extend the ban statewide through the General Assembly. Herron was also instrumental in getting legislation passed pertaining to school safety for children, restoring voting rights and expunging criminal records for non-violent offenders.

### Rashaun Kemp: First Out Gay Black Man Elected to the Georgia State Legislature


Rashaun Kemp
Credit: Facebook

While holding the position of senior director at the National Charter Collaborative, an organization that supports charter schools led by people of color, Rashaun Kemp became the first out gay Black man to be elected to the Georgia State Legislature. Kemp has had a lengthy career in education, including being a high school teacher and principal, which then led to him running a state education department. His husband, Ken, is a middle school counselor, and the two are parents to a two-year-old and a 20-year-old.

### Gabby Salinas: First Latina Lesbian Elected to the Tennessee House

Tennessee resident Gabby Salinas has become the first Latina and openly LGBTQ+ woman to be elected to the Tennessee State Legislature, representing Shelby County in District 96. An immigrant from Bolivia, Salinas ran unopposed by Republicans and Independents, allowing her to take the seat in Tennessee's House of Representatives without challenge.


Gabby Salinas
Credit: Facebook

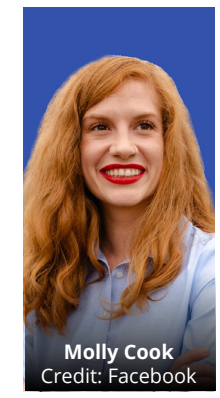
Salinas first entered the state of Tennessee in 1996 as a child in need of treatment for an aggressive cancer that left her sick and incapable of walking. After being turned away by a hospital in New York state, St. Jude Hospital in Memphis was able to provide the care she needed to treat Ewing Sarcoma, a type of cancer that affects bone and soft tissue. As a result of the challenges she and her family initially faced with the healthcare system, Salinas made healthcare a major part of her platform for District 96. Says Salinas of her election to office: "I'm up for the fight, up for the challenge of making Tennessee better. I'm really excited [about] the work that's ahead. I've always said I'm not a show horse. I'm a workhorse, and I'm ready to get to work."

### Sarah McBride: First Out Trans Member of the United States Congress


Sarah McBride
Credit: Facebook

Upon being elected to the U.S. House of Representatives, Sarah McBride has become the first-ever out trans member in the United States Congress. McBride pushed through barriers during her time at American University, where she became the first trans person to come out while serving as the student body president. In 2016, she made a speech at the Democratic National Convention, becoming the first trans American to address a major party convention. Four years later, she was elected as a Delaware State Senator, making her the highest-ranked trans elected official at the time.

### Molly Cook: First Out LGBTQ+ Member of the Texas Senate


Molly Cook
Credit: Facebook

Because she won reelection to her position as senator for District 15, Molly Cook maintains her position as the first out LGBTQ+ member of the Texas senate. Cook, who is bisexual, was initially elected through a special election last May, after former Senator John Whitmire resigned to become the mayor of Houston last January, making her the first person aside from Whitmire to hold the seat since 1983. Cook's victory in the general election means that she is officially senator for the next four years.

### Emily Randall: First Out LGBTQ+ Latina in U.S. Congress


Emily Randall
Credit: Facebook

After taking on a previous role as a community organizer, Emily Randall campaigned for the Washington State Senate and won in 2019, making her one of the first out lesbians in the state's legislature. As of 2024's race, Randall is ascending to the federal level, taking an open House seat in Washington's Sixth District, making her the first openly LGBTQ+ Latina member of Congress. ::

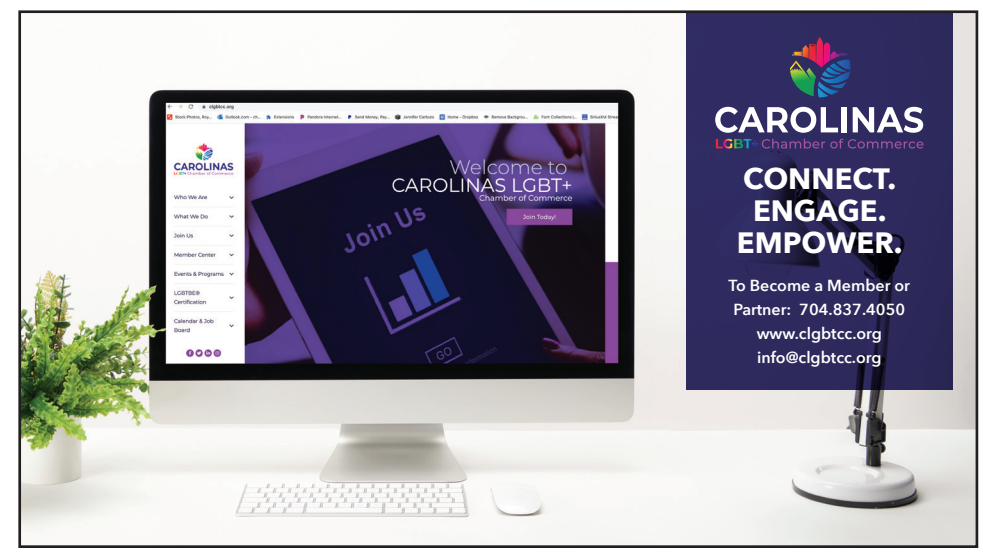

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# New group Trans United CLT kicks off with name changing clinic

## Website says group is city's only run by and for Trans individuals, promises more events to come



**by Jonathan Golian**
***Qnotes* Staff Writer**

While still a relatively new organization in Charlotte's LGBTQ+ community, Trans Unite CLT (TUCLT) has hit the ground running with both inclusive events and well-needed initiatives.

According to the group's website, TUCLT is "Charlotte's only non-profit exclusively for the Transgender community, run only by members of the Transgender community." The new organization was founded on July 13. Their membership has pushed to find effective ways to help and connect the trans community in the Queen City.

One of those ways was with the Name Change Clinic, hosted on Oct. 27. In partnership with Tabbris, Charlotte Gaymers Network (CGN), the Pauli Murray LGBTQ BAR Association, Cadawaller Wickersham Taft LLP, along with a few individuals in each organization like Katie Jenifer, as well as Jonny and Candelario Saldana. The event came off as a success during its first run.

Morgan Callahan, Co-Executive Director & Founding Board Member of TUCLT, spoke with ***QNotes*** about the many benefits the clinic brings to the city's trans community.

"The Name Change Clinic is a community led service designed to help transgender, nonbinary, and gender non-conforming folx begin the legal process of changing their names," Callahan described. "The clinic provides guidance with the required paperwork, including completion, printing and going over next steps so the process feels less confusing and bureaucratic, and like more of an affirming process that brings them one step closer to being who they really are."

In connecting with CGN, TUCLT will also be curating the former's tailor-made trans-inclusive event T4T for the foreseeable future. T4T is a community-centric event for the trans community, as well as anyone identifying as LGBTQ+ along with their allies, that combines entertainment, relaxation and connection during each session. The goal for these events is to give a respite to unwind, especially in the current political and cultural climate.



Members of Trans United Charlotte

Nora Morton, also a Co-Executive Director & Founding Board Member, was thrilled to be able to carry on the torch from CGN. "We feel that T4T events are a perfect addition to our offerings of support groups and community events," Morton jovially exclaimed. "Together, we look forward to expanding these popular meetups, ensuring more opportunities for members and allies alike to come together, unwind, and celebrate in a welcoming environment dedicated to unity and support."

The next T4T event will take place Friday, Nov. 15, while the Name Change Clinic is set to make a return on Jan. 4, 2025. Whether at these two events, or at a midway gathering dubbed "TRANSgiving" set for Nov. 23 at the Hygge location on 1026 Jay Street in Charlotte, the Queen City's transgender residents thankfully have another place to call home. ::



# Despite Trump election, Democrats score important NC victories

Despite the huge disappointment in the wake of former president Trump's purported victory against Democratic contender Kamala Harris, positioning him as the commander-in-chief for a second term, North Carolina was able to pull off some much needed wins in the form of breaking the legislative super majority held by Republicans.

In the place of Roy Cooper, come January, Democrat Josh Stein will be taking up residence in the Governor's mansion, beating out Lieutenant Governor Mark Robinson 54 percent to 40.2 percent. Robinson, who has been reported on many times in ***QNotes*** prior to the election, consistently took aim at the LGBTQ+ community, women and other marginalized groups well before CNN's report on Robinson's purported past adult bookstore and sex website activities made headlines. Democrat Rachel Hunt will be joining Stein at the top of North Carolina's legislature as the new lieutenant governor, displacing Robinson entirely.

Adding to the fortunes of the Democratic party is Dante Pittman's winning of a state House of Representatives seat over first-term Representative Ken Fontenot. Before the election, Republicans held 60 percent of the legislative seats, positioning the political group with a supermajority in the North Carolina chamber, which gave them the power to override all gubernatorial vetoes. Pittman's win breaks the Republican's grasp on legislative power, dissolving the supermajority, although they still hold onto the greater number of seats.

Other wins of the night include Jeff Jackson taking the attorney general role over Dan Bishop, Elaine Marshall maintaining her position as secretary of state over newcomer Chad Brown, Mo Green's election to the office of state superintendent over Michelle Morrow,



Former Attorney General Josh Stein, a Democrat, will serve as our next governor.
CREDIT: Facebook

and three house seats, including the 2nd District's Deborah Ross, the 4th District's Valerie Foushee and the 12th District's Alma Adams.

The Democratic Legislative Campaign Committee, a third-party group, released a statement in light of all the victories achieved for 2024: "Republicans have wielded their toxic supermajorities to enact an extreme agenda, including an egregious abortion ban, that was wildly out of step," remarked Heather Williams, the group's president. "Newly elected Democrats will play a key role in holding Republicans accountable as we work together to eventually overcome the egregious gerrymandering and other structural barriers to true representation in North Carolina." ::

*—Jonathan Golian*

# We Rock CLT Celebrates 10 Years with A Battle Of The Bands

On Dec. 7, We Rock Charlotte continues to celebrate a decade of service to the young girls and LGBTQ+ youth of the city by hosting their annual Battle of the Bands event.

Starting off as Girls Rock Charlotte in 2014, the local non-profit has been a place for girls and gender diverse youth to explore themselves through the music landscape since its inception. What started off as summer music camps under the local Girls Rock chapter, put together by We Rock CLT founders Krystle Baller (they/them) and Kelly Finley, would end up being so much more. Staffed and curated by women and members of the LGBTQ+ community in and out of Charlotte's music scene (including Baller and Finley) We Rock CLT now boasts a plethora of programs that people of all ages can be a part of.

The next event, continuing the celebration of We Rock CLT's tenth birthday, is the finale of the Rock Roulette Fundraiser series. The initial event on Nov. 2 saw twenty musicians split off into multiple bands, using games to decide how artists would be grouped together. Throughout November these bands will experience a total of four practice sessions and learn three songs to present. On Dec. 7, each line-up will duel it out on Free Range Brewing's stage in a Battle of the Bands.

For the band that raises the most funds for We Rock CLT and the band that has the loudest crowd, awards will be given out at the end to celebrate.

The fundraising will benefit We Rock CLT's ability to continue creating programs for youth and adults to explore through music as well as film. Pitching in to the non-profit will also allow them to keep safe spaces available for women and the LGBTQ+ community in the many events and groups the organization curates, including clubs, workshops, concerts and yearly camps.

We Rock Charlotte's Rock Roulette



Rockstars Band 'Elephant Reserve' posing with founder Krystle Baller (center top) before a show Oct. 26.
CREDIT: Facebook

Battle of the Bands will take place at Free Range Brewing on Dec. 7, starting at 6:30 p.m. The exhibition is free for the public to attend. ::

*—Jonathan Golian*

# South Carolina LGBTQ+ groups reaffirm support after election

In South Carolina, advocacy groups catering towards teens and adolescents in the LGBTQ+ community are reaching out to those feeling uncertain about the future in the United States following the election results Nov. 5.

A number of groups in the Palmetto State are working quickly to get their messages out, among them the Carolina Youth Action Program (CYAP) and We Are Family (WAF).

The CYAP program focuses on political education, along with community organizing in order to fight domination, punishment and violence aimed at female and LGBTQ+ youth of all genders. In an Instagram post regarding the results of the 2024 election, CYAP confirms that while the outlook may look despairing, their mission has not changed.

"CYAP's mission, vision, and plans for 2025 remain the same regardless of an election outcome," the post reads. "We remain committed to the many folks in our immediate community and beyond. Though our work has been internal for some time, the shifts we have made and the groundwork we have laid will keep us stable and ready for what the coming months bring."

We Are Family is one of South Carolina's oldest non-profits, established in 1995. As per their mission statement on WAF's website, the organization provides life-affirming and life-saving programs for LGBTQ+ young people that have a lasting and measurable impact, with a focus on those who are BIPOC and/or low-income. WAF's programing is spread out through the state, aimed at bringing community initiatives to and uplifting the lives of youth up to age 24.

North Charleston's WAF chapter put out a statement on Nov. 6, looking to provide some comfort in the wake of the shocking results from the prior day. "If you are reading this, know that you are cherished beyond measure," the notice reads. "To the young people we serve, you are powerful, unique, and so incredibly important. You're on a journey to discover your true self, and that journey deserves to be met with compassion and understanding."

To put into perspective what LGBTQ+ residents in South Carolina may be facing more of in the near future, the Movement Advancement Project, an independent, nonprofit think tank founded in 2006 that rates every state via "policy tallies," the friendliness of LGBTQ-related laws and




CREDIT: Social Media

policies, placed the Palmetto State near the bottom of the list. Out of a possible 49, South Carolina's overall tally is -7.75, compared to bordering states Georgia (1/49) and North Carolina (6.75/49). The state's MAP rating makes South Carolina the fourth worst in the country, running right behind Tennessee, Alabama and Arkansas.::

*—Jonathan Golian*

# LGBTQ+ Crisis Hotlines spike after Trump's Presidential Win

## Youth in our community have reported an uptick in harassment from fellow students



**by Jonathan Golian**
***Qnotes* Staff Writer**

Following the results of the 2024 election, the Rainbow Youth Project, a national LGBTQ+ crisis help center, which typically receives slightly under 3,700 calls a month, has already surpassed that number in just the past six days, As one of many call centers that cater to LGBTQ+ teens and adolescents, they are not alone in seeing the increase in volume.

Across the United States, crisis lines and organizations like the Rainbow Project and The Trevor Project are seeing the spike.

The Trevor Project, a group focused on the prevention of suicide among LGBTQ+ youth, is said to have seen a 125 count increase in calls, texts and chat messages just on Election Day and the following Wednesday. Onelowa, another group that works with the LGBTQ+ community in that region, also has cited a jump in messages to their social media as well as emails from concerned citizens.

At the center of these calls, prompting the understandable panic, are many of the policies revealed in the months before the election. That includes anti-LGBTQ+ legislation nationwide, and closer to home, laws like South Carolina's ban on gender-affirming care for transgender youth.

Much of what comes from Project 2025, written by the extremist right wing organization Heritage Foundation, has been largely accepted by Republicans. Many are fearful it will be enacted with the start of the second Trump presidency. For a lot of people in our community, that spells danger for LGBTQ+ folks everywhere.

GLSEN, an organization which focuses on creating safe and inclusive spaces for LGBTQ+ youth, expressed immediate caution at the idea of protections like Title IX being done away with. Melanie Willingham-Jaggers, GLSEN's executive director, put into words after the results of the 2024 election what Project 2025 could expose LGBTQ+ youth to. "The threat posed by Project 2025 is real and immediate," they stated. "This plan seeks to undermine Title IX protections, removing vital safeguards that ensure the safety and well-being of LGBTQ+ youth."

The fearful response to the Trump victory was clearly evident the day after the Trump Campaign announced its victory.

In a report from The Washington Post, a 17-year-old trans teen from Raleigh, N.C., spoke under the condition of anonymity. Fearful of potential violence because of their gender identity, they said threats and comments from other high-schoolers began the moment they got on their school bus the morning after the election. "As soon as I got on, one kid said, 'Are you scared? You should be.' Later I heard a classmate say, 'I find most gay people annoying, and I hope Trump coming to power will solve this problem.'"

Even after lodging a complaint with administration over the comments, the harassment continued. "At school, all year, kids have been threatening to hurt me when Trump wins, and now that moment is here. I'm feeling really overwhelmed and worried about myself, my family and my country."

Also in the interview from the Washington Post, Lance Preston, the executive director of the Rainbow Youth Project, confirmed he had heard quite a bit already while fielding his share of calls.

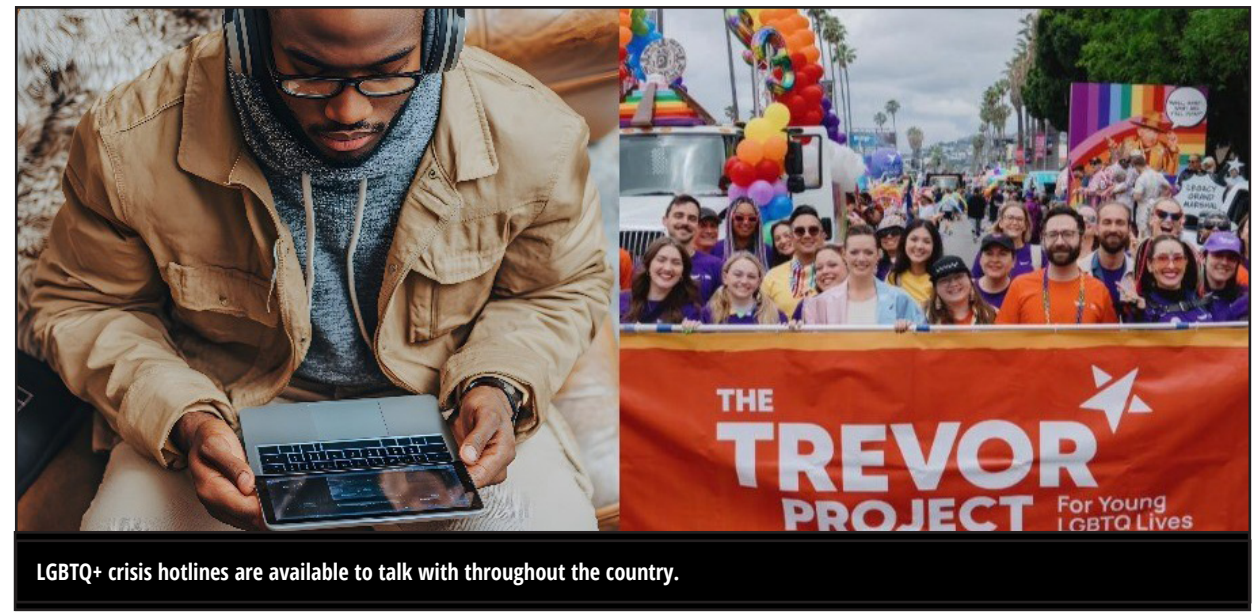
Three days before the election, a call came through from a nonbinary-identifying 16-year-old teen, describing a pact made with three other queer youths; the members would commit a "group suicide" if Donald Trump won the election.

Thankfully, a case manager was able to intervene, chatting with the high-schooler and helping them realize the situation was one they didn't want to follow through with.

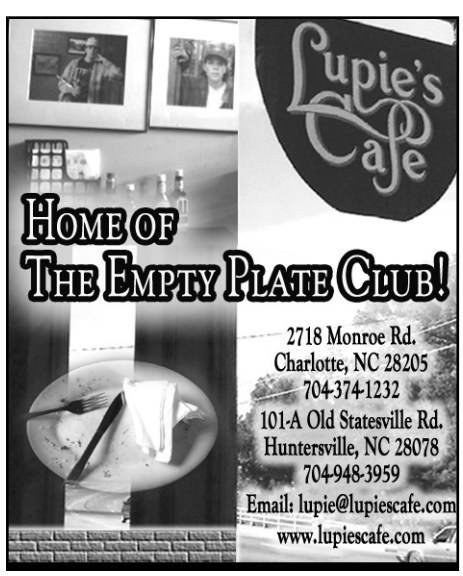
Teens aren't the only worried parties using these lines, according to Preston. About a quarter of the calls have been coming from middle-aged folks and seniors, which confirms an increase from the eight percent reaching out to express a growing sense of loneliness and isolation. In addition to concerns about losing access to gender-affirming care and being physically harmed by someone because of their gender identity or sexual orientation, they're expressing anxiety about the welfare of children and grandchildren.

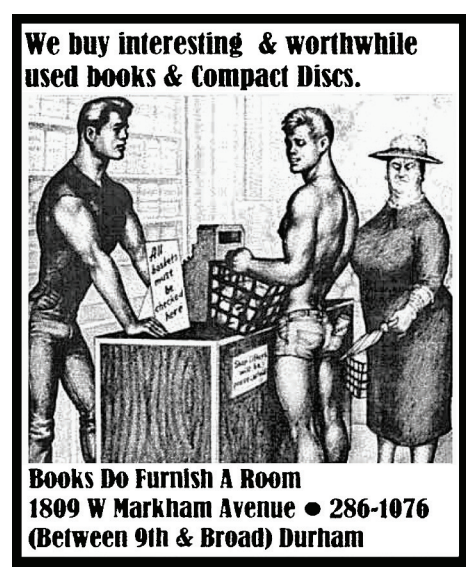
While the suicide pact exposed in the call to the Rainbow Youth Project was prevented, Preston said he hasn't been able to shake the effect the call had on him.

"I keep thinking," he said, "what if that one teenager had not called us?" ::




**LGBTQ+ crisis hotlines are available to talk with throughout the country.**






# Alternatives for housing challenges in Charlotte

## Shared living situation provides affordable alternatives



**by Jonathan Golian**
***Qnotes* Staff Writer**

All around the United States, housing, buying and renting costs have been on the rise. According to the United States Department of the Treasury's website, the two past decades in particular have shown a tremendous boom in housing costs, significantly outpacing incomes in most U.S. regions. This is especially a problem for those just entering the housing market between 18 and 27.

While the average rent in Charlotte has gone down by 1.5 percent, as reported by *Apartments.com*, that average is still high. Studio apartments tend to go for around $1,398 a month, while one bedrooms go for $1,454, two bedrooms for $1,757, and three bedrooms or more tend to go for a minimum of $2,160. Houses with two bedrooms and up start at an average of $1,750, and townhomes with one bedroom and up for $1,830. If a person is living on an annual income of $20,000 and below, the month's wages could be practically cleared out by the rental payment alone.

According to a report conducted by *Bankrate.com* released this past August, more than one in three adults are living paycheck-to-paycheck, including 28 percent of Gen Z 34 percent of Millennials, 40 percent of Gen X, and 28 percent of the Boomer generation. When most of the paycheck goes towards mortgage or rent costs, it can feel impossible to have money for food, traveling outside of work, medical visits and any other unexpected expenses.

In addition to the generational groups listed, the impact affects a larger percentage of the LGBTQ+ community, as opposed to their straight counterparts. According to a 2020 study focused on LGBT People and Housing Affordability, Discrimination, and Homelessness conducted by the UCLA Williams Institute School of Law, LGBTQ+ adults as a whole have 15 percent or more odds of being poorer than their cisgender straight counterparts. Especially when considering age, race, urban living, employment status, language, education, disability and other factors that affect risk of poverty.

So, the question is, especially with LGBTQ+ individuals, what can one do to offset the costs of living in order to get ahead of the curve while still managing all of life's necessities? One such answer is shared housing, in which multiple friends, family members or acquaintances can get together to divide up the costs of rent or a mortgage.

Sharing living space with family members while paying rent could be a solution. Four years removed from the prime year of the COVID-19 pandemic, according to a housing data chart by *EyeOnHousing.org*, 12 to 16 percent of young adults in ages ranging from 25 to 34 are living with family members in North Carolina.

As a concept, multi-generational housing isn't as new a thing as independent living is, according to a Vox report released on April 1. Culturally, around the world, this type of arrangement is a norm, only to grow in popularity and then become normalized after World War II, a fact presented in Vox's April article by Donna Butts, executive director of Generations United, a nonprofit that researches and advocates for multi-generational households. There are multiple benefits for all parties involved. Not only would every member of the family gain from the joined incomes, but having access to care giving, whether for an elder in their later years or a younger family member recovering from illness and out of work, sharing living space can be a major plus.

But living in a family home or with relatives may not be an option for many, especially for the LGBTQ+ community. According to statistics gathered by Promising Futures, an organization that partners with communities to improve responses to family violence, one in three lesbian-identifying women experience domestic violence in their households during their lifetimes, possibly occurring in a family home or with a romantic partner. Additionally, one in four gay men will experience domestic violence at some point, as will transgender individuals, usually because of their gender identity or non-conformity.



**Noel Mills**

If living with immediate family or at home isn't an option, and it's too costly to find housing that can be supported on one income, what else is there? Answer: It's time to see what the likelihood is of a room being open for rent in a multi-room dwelling, whether scouting for it on craigslist, social media that also posts listings, or inquiring with a group of friends looking to split the difference on rent or mortgage costs.

In Charlotte's LGBTQ+ community, Keilen McNeill has found a solution by renting a space with others. He's not the only one. Another Queen City local, Noel Mills, has found success with a similar arrangement.

McNeill, 25, has been renting in apartment spaces on and off for the past two years. Starting in April 2024, he signed a new lease at the invitation of a close friend, along with two others that needed a place to call home. Together, the group found an apartment in the University area for $2,200 a month.

Being able to find stability, especially with the increasing prices in Charlotte's newer complexes, has helped McNeill manage life a bit better for a couple of reasons. "Other than just being able to make sure my bills are paid on time," McNeill said, "there's a good bit of emotional support as well, even with the others I've gotten to know over time."

Mills, also aged 25, was able to scout out a house in the outskirts of Charlotte near Mount Holly, managing a rental payment of $2,500 a month between himself and two friends. While the expense side of the arrangement is made easier with each household member on the lease, the compromise is the longer distance between each tenant's workplace, adding to costs otherwise cut by finding a residence where the prices haven't soared in the past few years.

A closer inspection of Mills and his roommates reveals the ability to occasionally work at home and, given where he resides near I-85, the length of time spent in traffic to and from his workplace greatly varies – a plus and a minus. "It's about a 25 minute drive without traffic," recalls Mills,"but, with traffic and the closer it gets to rush hour, the drive goes from 40 minutes to an hour."

McNeill's commute is similar, requiring a drive from the University area to where he clocks into work in South Charlotte, which he says is an estimated 35 minutes either way.

This is something that can be an issue, depending on the commute and status of the vehicle. However, with the splitting of housing costs in both cases, more finances are available to deal with the long daily drives, somewhat offsetting expenditures.

While saving on costs is an immediate benefit, compatibility and common interests, combined with the ability to socialize daily with the household with family, friends or roommates, contributes to being able to dodge loneliness, an aspect mentioned by McNeill that gives his shared living space another major plus.

As of May 2023, loneliness was declared a public health epidemic by U.S. Surgeon General Vivek Murthy, M.D., M.B.A. A study conducted by the American Psychiatric Association (APA) found that, in 2024, 30 percent of adults say they have experienced feelings of loneliness at least once a week over the past year, while 10 percent say they are lonely every day. In another poll conducted by the APA, as to where Americans ranked the greatest areas where they felt the highest sense of community and belonging, 65 percent listed their families while 53 percent listed being among their friends, and lastly, 20 percent pointed to their neighborhoods, whether apartment or house based, to be a favorite place to socialize.

Although Charlotte's boom in residential construction all over the city should help with the shortage of housing, dealing with the rising cost required to find a place of your own through shared living spaces is a solution to the problem, even if temporary. By cutting back costs for each tenant involved as well as sharing multiple aspects of daily living, many challenges are solved through a few compromises. ::



**Keilen McNeill**

# life, *positively*

Many things have changed in HIV care over the years. Now people live **life,** ***positively*** more than ever before. We're seeing treatments advancing more and "undetectable" is a reality for many people. Yes, there is still stigma and discrimination yet there is also health and happiness. Get tested and stay healthy.

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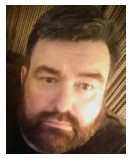
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# Positive but undetectable

## A look at what that means and how it impacts your life



**by David Aaron Moore**
***Qnotes* Staff Writer**

HIV was officially recognized and given the name we call it today over 40 years ago. According to the most recent report from the World Health Organization (WHO), an estimated 42.3 million people have died around the globe because of HIV related illnesses.

Despite that, it isn't uncommon to encounter individuals in the LGBTQ+ community who can honestly say they don't know anyone who has been infected. It's hard to believe a community that lost so many at the height of the AIDS pandemic, regardless of their age, isn't aware of that history.

It's unfortunate, but memories of the past are often dimmed by the actual passage of time. Developments in treatment for infection have also changed the reality of what the impact of HIV is now.

Once considered a death sentence, HIV infection almost always led to a full-blown case of AIDS and an eradicated immune system that left a patient incapable of fighting off infections and diseases that would eventually rob them of their lives.

That's not the case today. With advance prevention medications like PReP the number of infections have dropped dramatically. Antiretroviral therapies exist now that allow people infected to achieve undetectable status. Although they can't pass the virus along to others, however, that doesn't mean they're exactly HIV negative.

Because the fight against HIV isn't over and individuals are still being infected, it's important to make sure that our community understands the benefits of medications available in the 21st century, along with the possible drawbacks that can still occur with an HIV positive status.

For answers, we turned to Charlotte-based and exceptionally knowledgeable HIV/AIDS expert, J. Wesley Thompson.

A well known member of the LGBTQ+ community and recognized as an expert in the field of treatment for HIV, Thompson is a clinician emeritus, one of the founders of Amity Medical Group and holds such titles as Master of Health Science (MHS), Physician Assistant-Certified (PA-C), an HIV specialist with credentials from the American Academy of HIV Medicine (AAHIVS) and a Distinguished Fellow of the American Academy of Physician Assistants (DFAAPA).

Between extensive travel and various conferences, he was able to answer our questions via email.

***QNotes*: What does positive but undetectable actually mean? Is the virus completely eradicated or does it remain dormant in the body but with an extremely low viral load? If so, how low?**

**J. Wesley Thompson**: HIV positive means a person has been infected with HIV and will always be infected with HIV, but the HIV can be controlled with medication. Undetectable means that the viral HIV count is so low that the machine measuring it cannot find it in a blood sample. While most clinicians and patients are used to hearing an undetectable viral load meaning <20 or <50 on the lab reading; the CDC states that undetectable is <200. If ... you are undetectable, then you cannot pass the virus to another person during sex or if you share injection drug items. This is where the phrase U=U – undetectable equals untransmittable came from.

***QNotes*: Is there a point that medication to keep HIV undetectable theoretically becomes ineffective?**

**JWT**: If a person remains adherent to their medications, in theory, the medications can work for a lifetime. The newer medications are far superior to our early medications in the 1990s and there are few if any side effects for most people.

***QNotes*: Should people who are positive but undetectable disclose their status before any sexual activity?**

**JWT:** Each state has its own laws and many still consider not telling a partner you are HIV positive as a crime. North Carolina control measures were updated, and as of Jan. 1, 2018, if a person living with HIV is virally suppressed for six months or longer, they do not have to disclose their status to sexual partners or use a condom. If their partner is taking pre-exposure prophylaxis (PrEP), the person does not have to use a condom. In addition, a person living with HIV does not have to use a condom during sex if their sexual partner is also living with HIV.

***QNotes*: Are there any confirmed cases of transmission of HIV from a positive but undetectable individual to a sexual partner?**

**JWT:** Great question! And the answer is easy – no. We have no documented cases of an undetectable person transmitting HIV to an intimate partner.

***QNotes*: Even though an individual is undetectable, is their immune system still compromised and are they at greater risk with any kind of infection?**




**JWT:** Yes. I wish I could say that there are no risks with being HIV positive and undetectable, but there are. HIV hides in what we call the sanctuaries, such as the brain, so there are slight chances of increased risk of some cancers, some brain change functions, and the longer you live with HIV, the higher the risks become. Not all persons with HIV will experience complications, in fact, less than half do. Serious complications are very rare. A person can reduce the chances of complications by choosing a healthy lifestyle, eating well, sleeping well, and exercising.

***QNotes*: Are there any additional thoughts you wish to share?**

**JWT:** HIV has been in the human population since the late 1880s, starting in Cameroon and eventually spreading due to modern transportation such as trains and planes. We do not have a cure, but many scientists are working on one. My advice is to follow the trinity of pre-exposure prophylaxis (PrEP), treatment and prevention (TasP)(U=U), and post exposure prophylaxis (PEP). Knowledge of these three tools could be our cure to ending the HIV epidemic. ::

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# World AIDS Day and Latinx Community Engagement

## A look at rising HIV rates



**by L'Monique King**
***Qnotes* Staff Writer**

In 2021 UNC Charlotte collaborated with Johnson C. Smith University to host what would become an annual intercollegiate World AIDS Day event. The event would be chock full of community health organizations tabling and spreading awareness with throngs of students and community members attending.

The aim was to have providers in a non-clinical setting provide information, testing, different providers as diverse as the students and to create a continuum of care. And that's what happened. The Mecklenburg Health Department was there providing free rapid HIV testing and other organizations (like Quality Comprehensive Health Center/The Power House Project, RAO, RAIN and a few others) offered screenings, information and engaging activities.

That first event was quite successful – experienced first hand by this writer – on the campus of my alma mater, UNC-Charlotte and later at Johnson C. Smith University. It was also the day I met Sebastian Marin, a young man with a prominent Colombian accent and a zest for advocacy. Though my ability to speak Spanish is quite limited (mainly consisting of greetings, food, numbers 1 through 10, and a few profane words) we connected immediately.

That day, a coworker and I were tabling for the health and wellness community-based organization we both provided HIV intervention and prevention for. While on a break to spread the word about what was happening on the second floor of UNCC's Student Union, I spotted Marin walking by the room I and other community organizations occupied for the event. After trying to explain and realizing there was a bit of a language barrier I hooked his arm, placed a few condom lollipops (a stigma and harm reduction tool) into his free hand and brought him back to the room with me.

My guess would be that Marin was somewhat motivated and impressed by the condom lollipops and the event, though neither of us knew at the moment we were creating the foundation of what would become a lasting relationship in a fight for health equity for under served communities. I would later learn that Marin, an undergraduate student who at the time was part of UNCC's PLEASE (Peer Leaders & Educators Advocating for Sex Education) and our paths would cross again as he became involved in planning, promoting and spreading awareness about the World AIDS Day Event.

I did notice the Latinx community wasn't heavily represented at events like this or in conversations about HIV/AIDS health and awareness, although Marin would later join what he referred to as"an intercollegiate HIV awareness campaign, which propelled me to volunteer and expand an event to a series of monthly HIV testing events in the student union."

Since that time, he continues to advocate for sexual health awareness for the Latinx community and others with multiple efforts that include participating in monthly Getting to Zero meetings and contributing his insight to county Ryan White Planning Body meetings.

So what accounts for a lack of engagement of Latinx communities when it comes to HIV? There are a number of factors and barriers Marin was willing to discuss.

"When we think about barriers to HIV education and awareness, cultural competency and accessibility [matter]. When we think about awareness, stigma is a big part of that – discrimination regarding sexual behaviors and HIV status. People don't know as much as they should about resources like PrEP and living a full life for those already living with HIV.

"What makes [combating] this challenging is f*cked up legislation that doesn't address sexual health and goes as far as preventing educators and even penalizing them for having discussion with students on sexual and reproductive health," Marin continues.

"Cultural competency is another barrier. Many first generation Latinx people experience these barriers, especially surrounding language. It takes language to be able to navigate social and health care systems. These are people who already have experienced barriers to access in their home countries based upon the taboos surrounding sex, sexual behavior and religion. It all makes it hard to access sexual health care.

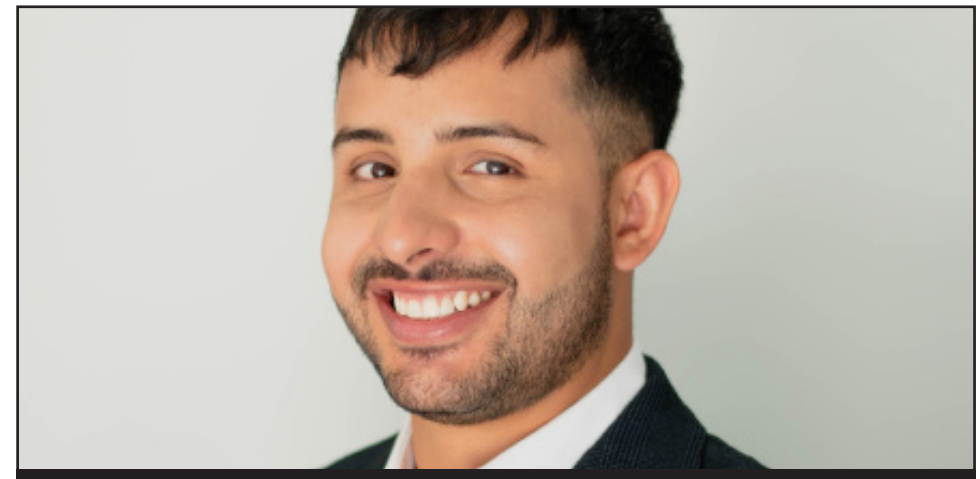
"When we look at the social determinants of health, particularly for someone who has already internalized stigma, working lower paying jobs and having few connections to affirming health and wellness; coming out and seeking care is extremely difficult."

At some point, data influenced by cultural barriers has been another contributor to the lack of engagement from the Latinx community. Simply put, focus and funding is directed towards data that shows the the greatest need and trickles down from there. When barriers prevent you from engaging people you can't gather the data needed to support them.

Statistics show that Black men who have sex with men (MSM) are at extremely high risk of contracting HIV. In both local and national efforts, the desire to respond in a manner that quells these rates has lead to a focus on that demographic. In context, this is not necessarily a bad thing, but it does mean that other populations, like the Latinx community and heterosexual Black women may lag behind when it comes to representation, engagement and care in the fight to end the epidemic of HIV.

Data collected by the North Carolina Electronic Disease Surveillance System (NCEDSS), data as of July 2024 and prepared by the Mecklenburg County Public Health Epidemiology Program in October 2024 shows a one percent decrease (from 2022 to 2023) in new cases for Black community members and a one percent increase for Latinx community members.

For both years (as well as previous years), the majority of new cases were found in men who have sex with men (locally and nationally). In 2023 Mecklenburg County had a reported 272 new HIV/AIDS cases. Of those 85 percent were found to be men; 63 percent were Black, 22 percent were Latinx and 18 percent were Caucasian.



**Sebastian Marin: 'La comunidad Latine es sinónimo de progreso. Y no vamos para atrás ni para tomar impulso.'**
CREDIT: Philip Crowther

To date, sexual contact remains the primary vehicle of contracting HIV across all races, ethnicities, genders and age groups. However, it is also important to note that data on the rates of new HIV/AIDS cases is subject to change as barriers are dismantled and new information becomes available.

Meagan Zarwell, PhD, is an Assistant Professor of Epidemiology and Community Health at UNC-Charlotte who definitely knows something about data, stigma and how social determinants of health can impact the individuals behind the numbers. Working tirelessly in partnership with academic and health organizations, she was one of the organizers of the intercollegiate world AIDS day event I originally met Marin.

Dr. Zarwell echoed many of Marin's sentiments, while adding a plea for change that offers greater health equity. "Several social, political, and cultural factors are likely interacting that contribute to increases in HIV diagnoses among Latine/x people," Zarwell said.

"For example, stigma and discrimination, access to culturally sensitive health services, language barriers, access to health insurance, housing and socioeconomic status among other factors likely drive disparities in the number of new diagnoses," Zarwell continued. "In addition, there have been missed opportunities to increase representation of Latine/x individuals in medicine, research, messaging and interventions to reduce HIV. It is a critical time to raise awareness and provide information about resources for Latine/x individuals in our community, including free HIV/STI testing, preventative medications, and treatment."

When Marin was asked what concerns him most about the future of Latinx health and wellness he replied, "I think my biggest concern is how divisive the country is and the fact that there is a very discriminatory agenda being promoted – especially when it comes to Transgender rights.

"It's just terrible. There are trends lead by Republican dominated states that limit access to reproductive services, access to abortion, IVF and having first access to clinics who provide services like HIV services, PrEP and care. If we take those clinics away, we are fostering greater gaps in access to care."

Marin's concerns are justified. According to a report from the National Institute of Health (NIH) the rate of infection for Transgender women is higher than the MSM population. From the NIH report: "Limited information ... is available regarding the needs of black TW and their risk for HIV. Numerous scholarly works and surveillance reports have combined TW with MSM, which has stymied our ability to understand the unique needs of black TW."

So what can be done? Are we any closer to reaching the CDC proposed goal of a 90 percent decrease in new HIV occurrences by 2030? According to Marin, probably not.

"Because we seem to be deepening the barriers to HIV services, care and further stigmatizing gender while seemingly creating more obstacles that allow people to live more fully. Hopefully – we will realize as a nation that we need to do better.

"We need to uplift each other when needed because, if you think about it from an economic standpoint, people who are sick do not produce and require someone else to care for them. When you think about that, on a social level; health equity is needed in order for people to live their best lives and in a way where they are able to continue to contribute to communities we love and share."

Marin added a more optimistic note. "I am hopeful that we – resilient, dedicated people – who are passionate and resourceful will eventually end the epidemic through working together. I recently witnessed an instance with the state of Tennessee.

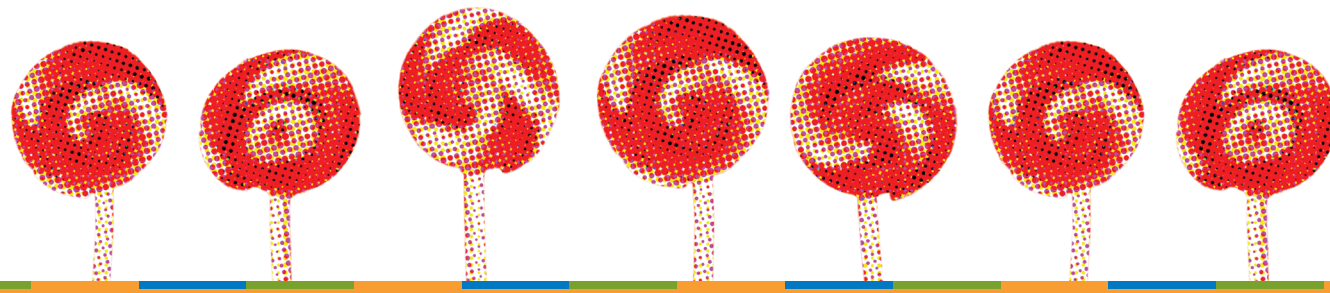
"They didn't want to take funding from the CDC for HIV management, but people worked around it. They somehow managed to continue to take care of the populations they serve. The sense of community and resourcefulness was very empowering and motivating. It gives me hope that one day we will get there." ::

# YOU CAN STOP HIV STIGMA

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**Share Facts** - Share what you know about HIV with others. HIV treatment works! People living with HIV can live long, healthy lives by accessing medical care and HIV treatment.

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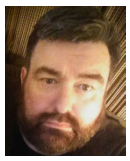
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# Coming out later in life and realizing you're HIV-positive

## One man's story about a failed hetero marriage and raising a family before coming out gay and positive in his 40s



**by David Aaron Moore**
***Qnotes* Staff Writer**

Each of us has a different life journey. That can be contingent on a variety of decisions we make and general happenstance.

Perhaps you were born into a progressive family that had no hard line, cut and dry boundaries on religion, which allowed you the opportunity to explore your identity at a young age. Or, you grew up in a regimented environment, steeped in religious beliefs. Both cases would impact a person's life path, but in dramatically different ways.

Michael Johnson's life began with a very religious family in a small Virginia town just across the border from North Carolina. They believed it was appropriate to indoctrinate him into the same philosophical belief system that was handed down to them from their parents. This isn't uncommon. Many people who are devout believe there is no room for questioning or disputing aspects of their religion, although they might question many other topics.

Johnson is gay. His real name is not Michael Johnson, and he agreed to speak with us only under the condition that his true identity would not be revealed.

He has always known that he liked other males. Even as a young boy he was aware of the crushes he had on other boys around his same age, while most of his male friends were interested in girls.

The religious teachings that his parents had spoon fed him practically since birth led him to the conclusion that his thoughts and desires were somehow wrong.

That carried over into his young adult life, when he married a woman and the two became deeply involved with a Baptist Church. Eventually they even made the decision to travel and spread their beliefs through a Christian missionary program.

"I knew through all of this that I was a gay man," Johnson recalls. "I just thought that if I held on to my faith and devoted myself to church life and a family, the feelings would eventually go away. They didn't."

Still, Johnson persisted.

He had two children with his wife. He continued to share a life with her for nearly two decades, although there was a gnawing reminder in the back of his mind that the world never felt quite right and he wasn't where he was supposed to be. That began to take a toll on him, his wife, the relationship and the family.

Johnson loved his wife. But he knew he wasn't "in love" with her, and he loved and cared deeply for the two children their union had created, but he was miserable. He began to disassociate from the family, and they began to notice. No one was happy.

For most gay men, their 20s and 30s are a time when they're becoming comfortable with their sexual orientation and are out exploring the world. That means getting to know other gay men, experiencing their own culture, romance and sexual exploration.

That wasn't the case for Johnson. He had no frame of reference for LGBTQ+ culture whatsoever. In the life he had at the time, he began to pull away from his family and the church that once meant so much to him; as he sank into a deep, dark depression.

"I was pretty damn miserable," he recalls. "I knew what I wanted, but I didn't know how to get there. I wanted sexual experiences, and I wanted a relationship with one man I felt connected to. But I felt an obligation to the woman I had married and the family we had created.

"I reached a point where I realized I couldn't be what I had been taught and what everyone else wanted me to be, and I couldn't have or be what was genuinely reflective of who I am. I couldn't find a resolution."

Johnson says at that point he decided the only way he could escape was by ending his existence. At the age of 44, he attempted suicide. Fortunately, he was found by his wife after taking an overdose of pills and was rushed to the hospital in time to save his life.

"I don't remember much after taking the pills," he says. "I just remember waking up later in the hospital and she was there, looking concerned and wanted to know what was wrong. Why did I try to take my own life?

"I couldn't be dishonest with her anymore. She saved my life and I wanted to give her back the chance to find happiness on her own or with someone else. I wasn't going to be able to give that to her. So I told her.

"She was devastated. She was angry. She hated me. She said some really awful things, but I realized that I had robbed her of the future she had envisioned."

Johnson's wife wanted out of the relationship immediately and requested full custody of the children with no visitation. She also wanted Johnson out of their house right away.

He was agreeable, but deeply saddened by the fact he would not be allowed contact with his children. With no family support and no place to go, Johnson moved into a residential hotel, where he would stay for the next few months.

While he was free to live his life the way he wanted to, he found himself sinking even further into depression, despite the freedom.

"Even though the times were hard when I was with my wife I never found myself drowning in self-pity," he recalls. "But being there alone, it was very sad and I self-medicated with alcohol, drugs and a lot of unsafe sexual encounters.

"I didn't realize that there was this LGBTQ world out there. I didn't know there were places where I could go socialize and meet other people like myself. The sheltered life I had led never exposed me to those things."

For Johnson, gay life was internet hookups, relatively anonymous sexual encounters and partying with people he barely knew in a hotel room.

Within just a matter of months following the split from his wife, Johnson found out he was HIV positive.



**On HIV infection: 'If you're going to be sexually active, get on some kind of PrEP as soon as you can.'**

"I know it's hard to believe, but I was faithful to my wife while I was with her. I didn't have sexual encounters with anyone else during our relationship at all. I had a few experiences before we were married, but that all stopped when we began to share our life together."

Johnson has always been proactive about his health and routinely had physical exams. "It's something I think is important. Especially if you're sharing your life with someone else. You need to take care of yourself so you can be there for them. I had never tested positive before, so I knew that I was infected after I left my wife."

Not surprisingly, Johnson's diagnosis came back after simple routine blood tests that he had many times before. He points to his lack of knowledge about HIV, safer sex practices and PrEP medications, all things that could have prevented him from becoming HIV-positive.

"Initially I was scared. Really scared. I was single and I felt very much alone. The little bit of information I had about HIV and AIDS was based on stuff I had learned when I was very young. It was frightening and dark and the equivalent of a death sentence back then."

Fortunately for Johnson, he had a physician who was extremely helpful. His doctor was aware his patient hadn't come out until later in life and, with a recently discovered positive diagnosis, needed to be educated about what kind of treatments are available in the 21st century.

Johnson also found a therapist. Someone who was able to help guide him around the guilt imposed upon him by his religious family members; the guilt he felt for ending the relationship with his wife and the compounded feelings of depression and shame he experienced over his newly found positive HIV status.

"I knew the kind of gay life I was experiencing wasn't what I wanted," he explained. "I wanted to share my life with someone. I wanted to experience real love. And all I could think was, now that I'm a positive middle-aged man, who is going to want me? I spent all these years trying to be something everyone else wanted and when I finally got the courage to find myself, I got infected. I was convinced I would never have what I wanted and that I gave up everything for nothing."

Although Johnson is HIV positive, it was an early diagnosis for him. His viral load was low, but not undetectable, and his immune system was largely unaffected.

In the years that have passed since that time, Johnson has found a sense of self-esteem he had not experienced before. Through a healthy dose of therapy and medication he has come to terms with his sexual orientation and his HIV status.

"My viral load is undetectable now and my immune system remains healthy. I can experience sex and romance and not worry about infecting anyone else. And I didn't have to throw away my faith, my perception of it has evolved. I think that's mostly because I found a church that was welcoming and affirming.

"But I'm not going to lie," he explained. "I wish I had found the inner strength to come out earlier in life and to know what I should have done differently not to end up in this situation. Physically, I am fine, but I will be taking medication, of some sort, the rest of my life.

"And that's one thing I am adamant about. Most people know their sexual orientation, at least by their teen years. Own it, embrace it and be yourself. Don't wait like I did. It doesn't hurt just you. It hurts other people, too.

"If you're going to be sexually active, get on some kind of PReP as soon as you can. If you're already infected or suspect that you are get tested and get on the medication that works right for you so you can live a normal life."

Despite the challenges he faced, Johnson came out at the end of a long dark tunnel to eventually find what he was looking for.

"I'm married again, but this time to a man. We live in a great neighborhood here in Charlotte that's very welcoming. And I'm fortunate enough that we're a good match.

"An evolving romance, shared interests and someone to come home to who loves you. What more could you ask for in life?" ::

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# The state of HIV in NC

## Reports indicate trans communities of color at most risk



**by Jonathan Golian**
***Qnotes* Staff Writer**

North Carolina, over 2024, has had its major set of problems to contend with. Some are easy to see, like the need for relief efforts after Hurricane Helene's trek through Western Carolina. Beneath the surface, however, there has been an invisible menace on the rise over the last few years, one of which multiple agencies have made their aim to rub out. Diagnosis? HIV.

Human immunodeficiency virus, or HIV, is a virus that weakens a person's immune system by attacking cells that fight off infection, specifically a person's CD4 cells, the white blood cells that play a crucial role in the immune system by activating other immune cells to fight infections. HIV spreads through bodily fluids and allowed to advance untreated, it can lead to Acquired Immunodeficiency Syndrome, otherwise known as AIDS.

According to the 2024 HIV statistics rates analyzed by *WorldPopulationReview.com*, while not part of the top ten states in America with the highest rates of HIV infection, North Carolina sits at number 11, with 12 diagnoses per 100,000 individuals in the state so far this year, totaling in 1,079 found. Per the same chart, 33,562 people are already known to be infected in the state.

The U.S. Center for Disease Control and Prevention (CDC), through their data, argues that the number is much higher. By their most current report, titled "HIV Prevention to End the HIV Epidemic in the United States: North Carolina," 37,200 individuals live with HIV in the state, with 12 percent of North Carolinians unaware of their status, and 1,200 new HIV infections confirmed following 40,778 tests that were provided to the state through CDC funding.




**Although testing and treatment are readily available, some individuals at risk in rural areas face challenges accessing healthcare.**

The LGBTQ+ community is not immune from the rise of the disease in North Carolina. In the most recent report published by the NC Department of Health and Human Services (NCDHHS), from 2022, the estimated HIV rates for gay and bisexual men was tallied at 15.3 per 100,000. Of the demographics attributed to the findings, Black men were affected the most at 2,044 reports, while Hispanic and Latinx individuals followed at 1,270 counts. Those that most reported their ages fell within the 13 to 30 years old range.

Two years later, newer reports chronicle

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FREE Confidential Testing | Rapid HIV | Rapid HEP C
Chlamydia & Gonorrhea
affinityhealthcenter.org/get-tested

WALK-IN TESTING
Monday - Thursday
8:30 am - 6:00 pm
Friday 8:30 am - 4:00 pm

FREE HIV SELF-TESTS
(York, Chester, and Lancaster County Residents)
affinityhealthcenter.org/request-a-test

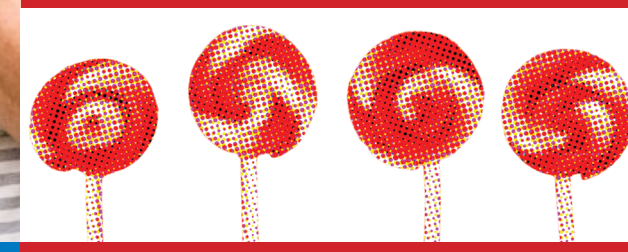





Affinity HEALTH CENTER

WORLD AIDS DAY

DON'T BE A SUCKER FOR HIV STIGMA



Affinity HEALTH CENTER
877.647.6363
455 LAKESHORE PKWY. | ROCK HILL, SC 29730
affinityhealthcenter.org

the rise in the rate of Latino men becoming infected. In an article dated June 24, 2024, WUNC North Carolina Public Radio reported that the most recent data, which claims that Latinos, who make up 19 percent of the United States population, are about 33 percent of new HIV infections.

In the same article, WUNC reported information from KFF Health News-Associated Press, which spoke with public health officials in Mecklenburg County, North Carolina, KFF was told there were no specific plans to address HIV in this population, or that plans are still in the works. With little to no tracking of the Latin population and HIV, the percentage could be far greater than any of the estimates health organizations have been able to track.

Transgender individuals living with HIV are tracked just as little, if not less, than Black and Latino populations, according to the website *Aidsvu.org*, which provides information on health planning, programming, and resource allocation for multiple minority organizations and individuals, including the trans community. Of the general data available from 2021 via AidsVU, transgender women account for 89 percent of new HIV diagnoses among transgender and AGI individuals, with Black and Latina transgender women representing 78 percent newly diagnosed, and Black and Latino transgender men accounting for 57 percent of new cases.

One of the greatest factors for the continued rise in HIV, especially among the LGBTQ+ community, is homelessness, according to a report titled "HIV/Aids And Homelessness," researched and written by Evelyn P. Tomaszewski, MSW, of the NASW HIV/AIDS Spectrum Project. It is the inability to access health care and medication, much less food, shelter and clothing, that keeps part of the population unable to regulate their conditions. A 2007 study by the National Coalition for the Homeless concluded that as much as 20 percent of the homeless populous live with the disease.

With many of these statistics in mind, an important question has to be asked: What can be done to stop the spread of HIV through communities, including our own? An answer, according to a story published with NC Health News on June 1, may in part lie with regional agencies.

Bridging the gaps where health care is often hard to come by, staff from the Western North Carolina AIDS Project (WNCAP), an Asheville-based organization, travels to rural locations in order to bring clients to doctors. Connection via automobile is but one way that WNCAP operates. The organization distributes numerous supplies, be it tests or clean syringes, throughout the communities in North Carolina in need.

WNCAP also keeps up with advancements in medicine by providing public education, supplying funding and policy advocacy.

While that promise of progress is there, as stated in the NC News Health article, not everyone survives, and the emotional losses are also taken on by grass-roots organizations like WNCAP, along with everything else.

As quoted from John Chaffin, WNCAP's community navigation coordinator, "It's not because HIV is deadly anymore. It is if it's not treated. It's not treated because we face a population of individuals who are underserved."

The Charlotte area has its own major organizational advocates for HIV prevention including RAIN. Established in 1992, the practice has pushed to provide comprehensive services to individuals and families affected by HIV in the Queen City. The advocacy center serves a range of ages, from 13 to adults, by providing advantageous means like medical case management and solutions through health insurance assistance, youth peer counseling, PrEP/PEP programs, early intervention services, HIV/STI testing and much more.

One crucial initiative put together by RAIN comes in the form of combating homelessness, through a program called The Havens, a subsidiary of RAIN which provides access to safe and affordable housing for those experiencing homelessness that also live with HIV or other disabilities.

Also in the Queen City is the Powerhouse Project, run by Quality Comprehensive Health & Wellness Together, that provides a safe, non-judgmental space for young men of color to access essential support services as well as HIV prevention and education. Quality also opportates a clinic and offers many other services on the west side of Charlotte not far from Johnson C. Smith University.

Rosedale Health & Wellness, located in Huntersville, also works with individuals who have contracted HIV, in partnership with Dudley's Place, offering client-centered services including treatment plans for HIV/AIDS, education sessions, mental health counseling, and many other services.

Finally, just south of Charlotte in Rock Hill, the Affinity Health Center serve's York, Chester and Lancaster counties. It was founded in 1994. In present day, the center has gone on to become a full-service family practice, continuously adding on to their robust high-quality yet affordable healthcare services like Hepatitis C Treatment and STD testing.

Although the election season is now over, another very important way to combat HIV in the LGBTQ+ community is to fight the anti-LGBTQ+ legislation hurting public health care. According to a report published on Oct. 29 by UNC Gillings School of Global Public Health, more than 500 anti-LGBTQ+ bills have been introduced in the United States this year alone. Of those policies, many have the potential to interfere with HIV prevention by increasing the stigma around it and through decreasing health care access.

"LGBTQ+ youth living in states with more discriminatory, anti-LGBTQ+ policies had lower levels of PrEP use," explained first author Nicole Kelly (PhD '24, epidemiology), a recent graduate of the Gillings School. "PrEP is essential to ending the HIV epidemic, and these discriminatory laws may be limiting PrEP use on a national level."

"Ultimately, I'd like to see anti-LGBTQ+ legislation repealed and replaced with protective policies for youth. In addition to protecting human rights, this step could potentially boost PrEP use and, as a result, reduce population-level HIV transmission."

One of the core issues regarding HIV is that, given the right amount of care and attention, it is preventable and – if infected – very manageable.

Through organizational outreach, connection with healthcare professionals and platforming bills that open up better health care policies in combating HIV there can be a better tomorrow for many infected individuals in North Carolina. ::



# HIV/AIDS service organizations

The Carolinas has a variety of community organizations, resources and services for those living with HIV/AIDS or those seeking to get involved in HIV/AIDS prevention, education and advocacy.

## North Carolina

### ASHEVILLE

***Western North Carolina AIDS Project***
554 Fairview Rd., Asheville, NC 28803
828-252-7489
*wncap.org*.

WNCAP provides case management, prevention and education programs, outreach, HIV testing and other services throughout Western North Carolina. In addition to its main office in Asheville, the group also has offices and a presence in Franklin and Shelby.

### CHARLOTTE

***Amity Medical Group***
East Charlotte
6010 E. W.T. Harris Blvd.
Charlotte, NC 28215
704-208-4134
9835 Monroe Rd Ste B,
Charlotte, NC 28270
704-208-4134
10508 Park Rd #130
Charlotte, NC 28210
(704) 461-0006
*amitymed.org*.

Amity Medical Group provides full-service, primary care medical treatment, as well as HIV/AIDS managed care under the direction of Dr. Richard Wynn and J. Wesley Thompson, MHS, PA-C, AAHIVS, DFAAPA. The practice also has an onsite pharmacy operating under the umbrella of Rx Clinic Pharmacy with Olivia Bentley, PharmD, CFts, AAHIVP as the director of clinical pharmacy services, provides free/confidential HIV testing, case management and prescribes HIV/AIDS medications. Its offices are open to the community as a part of a collaborative effort to provide care and access to agencies and services outside its doors.

***Carolinas CARE Partnership***
5855 Executive Center Dr., Suite 200,
Charlotte, NC 28212
704-531-2467
*carolinascare.org*.

Carolinas CARE Partnership provides free HIV/STD testing and counseling, mobile testing unit, housing assistance, peer training, case management and other services, prevention and education.

***Dudley's Place***
107 Commerce Centre Drive, Suite 202
Huntersville, NC 28078
704-977-2972
*myrosedalehealth.com/dudley*.

Dudley's Place is an HIV non-profit housed at Rosedale Health and Wellness. The mission is to enhance the overall care of Rosedale's HIV population. Offering a wide range of services including mental health counseling, nutrition counseling, food and toiletries assistance, support groups, peer navigation, community education, free testing and transportation services.

***House of Mercy***
P.O. Box 808 (100 McAuley Cir.), Belmont, NC 28012
704-825-4711 (administration)
704-825-3000 (residence)
*thehouseofmercy.org*.

House of Mercy provides housing and compassionate care for persons living with AIDS. In addition to room and board, House of Mercy coordinates medical care and therapies plus a variety of supplemental services to enhance the physical, emotional and spiritual lives of its residents.

***Mecklenburg County Department of Health***
249 Billingsley Rd., Charlotte, NC 28211
704-336-4700/704-432-TEST (8378)
*bit.ly/2FpddQK*.

Provides testing, case management, awareness, education and other services at various locations, events and times throughout the county and year.

***The PowerHouse 2 Next Generation***
3552 Beatties Ford Rd., Charlotte, NC 28270
980-228-3008
*facebook.com/ThePowerhouseProject/*.

PowerHouse 2 is a drop-in center and safe space for Black and Latino gay or bisexual men or men who have sex with men. The group offers a computer lab, weekly empowerment programs and workshops, retreats for men over 25 years old, social events, monthly discussion groups for men 18-29 years old and free and confidential HIV testing, which is always available during hours of operation. The PowerHouse Project is a program of Quality Home Care Services.

***Quality Home Care Services***
2202 Beatties Ford Rd., Charlotte, NC 28207
980-819-8063
*qhcsnc.org*.

Quality Home Care Services provides a variety of services for those living with HIV including case management, HIV/AIDS prevention programs and testing, substance abuse treatment, community-based rehabilitation services for those with mental development disabilities and other services.

***RAIN***
601 E. 5th Street, Suite 470, Charlotte, NC 28202
704-372-7246
*carolinarain.org*.

RAIN engages the community to transform lives and promote respect and dignity for all people touched by HIV through compassionate care, education and leadership development. Services include CARE Management, Peer2Peer support and outreach, support groups for youth, faith-based training, chaplain services and caring volunteers who provide practical support to persons living with HIV and AIDS. RAIN also provides HIV awareness and prevention education programs to thousands of people each year and is the only HIV non-profit in the Charlotte metropolitan area providing direct client services.

***RAO Community Health***
321 W. 11th St., Charlotte, NC 28202
704-237-8793
*raoassist.org*.

RAO Community Health is a non-profit committed to providing awareness, support, and services for those living with HIV/AIDS and other health disparities; along with providing prevention and education for those looking to protect their sexual health. Some of the services and programs include: PrEP program, support group for those living with HIV, and educational training for volunteers. RAO also provides housing assistance and toiletry pantry services for those in need with HIV.

***Rosedale Health and Wellness***
103 Commerce Centre Drive, Suite 103
Huntersville, NC 28078
(704) 237-8793
*myrosedalehealth.com*.

Rosedale Health and Wellness is a full-service HIV/infectious diseases clinic that offers a variety of medical services. Staff, under the direction of Dr. Frederick Cruickshank, work closely with medical case management organizations and engage in clinical trials, among other services. It houses a Walgreen's Specialty Pharmacy to support the needs of its clients and patients.

### EASTERN

***PiCASO***
***(Pitt County AIDS Service Organization)***
3219 Landmark St. Suite 9A, Greenville NC, 27834
252-830-1660
*picaso.org*.

Starting as a grassroots organizationfocused on supporting those living with HIV/AIDS, providing buddy programs, nutritional support and healthcare advocacy, the agency changed over the years to a case-management-focused agency working with long-term client support. Currently, the group provides HIV testing, education and advocacy and emergency funding for those living with HIV/AIDS.

### TRIAD

***Positive Wellness Alliance***
400 E. Center St., Lexington, NC 27292
336-248-4646
704 Brooktown Ave.,
Winston-Salem, NC 27101
336-722-0976
*positivewellnessalliance.org*.

Positive Wellness Alliance is a community-based organization that provides medical case management, financial assistance, life skills management classes, support groups and housing assistance. It serves Davidson, Davie, Forsyth, Iredell, Rowan, Stokes, Surry and Yadkin Counties.

***Triad Health Project***
801 Summit Ave., Greensboro, NC 27405
336-275-1654
501 W. Westwood Ave., High Point, NC 27262
336-884-4116
*triadhealthproject.org*.

Triad Health Project provides case management and other client support services, HIV testing and prevention outreach, medical, social service and legal referrals, food pantry and nutritional resources and education, support groups and education, art and exercise programs.

### TRIANGLE

***Alliance of AIDS Services – Carolina***
3109 Poplar Wood Court Suite 200, Raleigh, NC 27604
919-834-2437
*aas-c.org*.

Alliance of AIDS Services-Carolina provides case management, HIV/STD testing and counseling, emergency assistance for rent and utilities, transportation assistance, housing information and referrals, mental health, substance abuse and support group resources, referrals and programs.

***CAARE – The Healing Center***
***(Community Action Advocacy Restoration and Empowerment)***
214 Broadway St., Durham, NC, 27701
919-683-5300
*caare-inc.org*.

CAARE – The Healing Center's mission is to provide effective prevention and case management services to at-risk persons and their families in Durham by referring health and social resources that can alleviate isolation yet foster independence; to empower the population with preventative health education, counseling, and testing by establishing and maintaining networks and utilizing resources that address the health and social needs of the community; and to provide decent housing that is affordable to low- to moderate-income people.

### COASTAL

***New Hanover Regional Medical Center***
2131 S. 17th St., Wilmington, NC 28401
910-667-7000
*nhrmc.org/services/hiv-aids*.

New Hanover Regional Medical Center provides comprehensive care for patients of all ages and throughout each stage of HIV, from acute HIV to latency to AIDS. Satellite clinics are in Whiteville, N.C., Jacksonville, N.C. and Burgaw, N.C.

### WESTERN

***ALFA***
1120 Fairgrove Church Rd. S.E., Suite 28,
Hickory, NC 28602
828-322-1447
*alfainfo.org*.

ALFA, formerly known as AIDS Leadership Foothills Area-Alliance, has provided supportive services to those infected and/or affected by HIV/AIDS. ALFA currently provides supportive and medical case management, prevention education, and outreach to a nine-county service area. ALFA's service area consists of Alexander, Alleghany, Ashe, Burke, Caldwell, Catawba, Lincoln, Watauga and Wilkes Counties.

### SOUTH CAROLINA

***Affinity Health Center***
455 Lakeshore Pky., Rock Hill, SC 29730
803-909-6363
*affinityhealthcenter.org*.

Affinity Health Center, formerly known as Catawba Health Care, provides primary care and specialist referrals, nutritional counseling, counseling and mental healthcare/services, dental care,

case management and support, HIV specialty care and HIV/STD testing. It serves York, Chester and Lancaster Counties with satellites in Clover, Fort Mill and York, S.C.

***AID Upstate***
13 S. Calhoun St., Greenville, SC 29601
864-250-0607
811 Pendleton St. Suite 11, Greenville, NC 29601
*aidupstate.org.*

AID Upstate provides supportive services to people affected by HIV/AIDS in Anderson, Greenville, Oconee and Pickens Counties of South Carolina. Its medical needs are handled in partnership with New Horizon Family Health Services (Greenville, S.C.) and ANMED Infectious Disease Clinic (Anderson, S.C.).

***Careteam +***
100 Professional Park Dr., Conway, SC 29526
843-234-0005
*careteamplus.org.*

Careteam provides supportive services for individuals living with HIV, including medical care, case management, HIV testing, counseling and education, risk assessment and counseling and screening in Horry, Georgetown and Williamsburg Counties.

***Palmetto Community Care***
5064 Rivers Ave., Charleston, SC 29405
843-747-2273
*aids-services.com*.

For more than two decades, Palmetto Community Care (formerly known as Lowcountry AIDS Services) has been serving those living with HIV/AIDS in Berkeley, Charleston and Dorchester Counties. It provides case management, access to medical care and housing, financial, nutritional and legal assistance along with other supportive services in the Charleston area. PCC also works to prevent the growth of the epidemic through education, media campaigns, community outreach and free, daily HIV/STD testing.

***PALSS***
***(Palmetto AIDS Life Support Services)***
2638 Two Notch Rd., Suite 108,
Columbia, SC 29204
803-779-7257
*palss.org.*

Palmetto AIDS Life Support Services offers free services to individuals who have been diagnosed with or are at risk of contracting HIV/AIDS, as well as providing support to its clients' loved ones. It offers HIV testing, among other healthcare needs, along with support groups and adjunct assistance. PALSS maintains a food pantry for its clients.

***Piedmont Care Inc.***
Wells Fargo Building
101 N. Pine St., Suite 200, Spartanburg, SC 29302
864-582-7773
*piedmontcare.org*.

Piedmont Care is a non-profit organization providing HIV/AIDS care, prevention and advocacy in Spartanburg, Cherokee, and Union counties of South Carolina.

***CareSouth Carolina/Care Innovations***
1268 South Fourth St., Hartsville, SC 29550
843-857-0111
737 South Main St., Society Hill, SC 29593
843-378-4501
*caresouth-carolina.com/care-services/hiv-aids/.*

CareSouth Carolina, through Care Innovations, provides comprehensive HIV/AIDS primary health care for individuals in Chesterfield, Darlington, Dillon, Lee and Marlboro Counties. These services are made possible through a federal Ryan White Part C grant. Patients can have a "one-stop shop" experience at CareSouth Carolina.

***South Carolina HIV/AIDS Council***
1813 Laurel St. Columbia, SC 29201
803-254-6644

The South Carolina HIV/AIDS Council works to reduce the spread of HIV/AIDS statewide. It provides this through community mobilization, prevention, education and advocacy, while improving the quality of life for those affected by HIV/AIDS.

## Regional/Advocacy/Info

***AIDS Legal Project at Duke School of Law***
*law.duke.edu/aidsproject/.*

The AIDS Legal Project provides confidential legal representation to low-income HIV-infected clients with legal problems relating to their diagnosis. Legal assistance is provided by law students under the supervision of attorneys.

***North Carolina AIDS Action Network***
P.O. Box 25044, Raleigh, NC, 27611-5044
*ncaan.org*.

The North Carolina AIDS Action Network is a statewide advocacy organization fighting for the rights of people living with HIV/AIDS, their loved ones and those at risk of acquiring HIV/AIDS in North Carolina.

***North Carolina Department of Health and Human Services***

HIV/STD Prevention and Care
*https://epi.dph.ncdhhs.gov/cd/stds/program.html*

***NC Harm Reduction Network***
*nchrc.org.*

The North Carolina Harm Reduction Network is a statewide grassroots advocacy, resource development and coalition-building organization that provides direct services for a variety of issues, including drug use, sex work, immigration issues, genders, sexually-transmitted diseases and HIV.

***Planned Parenthood***
***Various locations***
*bit.ly/2zEFblq.*

Planned Parenthood's various locations across the state provide safer sex education and information and HIV testing.

South Carolina Department of Health and Environmental Control

***HIV/STD Education and Prevention***

*bit.ly/2NVkWHw.*

*[Ed. Note: qnotes has prepared this comprehensive list of ASOs, etc., for our readers. To that extent, organizations and agencies may have been omitted. If readers will email editor@qnotescarolinas.com with other listings (must have full name, address, phone number and website), qnotes will be happy to add them to the compilation. List accuracy and integrity are vital. Please report any errors or changes that need to be made.] ::*



# Free HIV testing locations

## Providing a vital lifeline for those effected by HIV/AIDS

According to the Centers for Disease Control and Prevention (CDC), many individuals have never been tested for HIV. In addition, the CDC states that of the thousands of new HIV diagnoses every year, many are likely transmitted by those unaware that they are HIV-positive.

There are a number of free HIV testing sites across North Carolina and South Carolina. Many also offer testing for other STDs, as well as vaccines for hepatitis and HPV.

Call for information on days, times and for information on all the services they offer. You can also visit gettested.cdc.gov to search for more testing sites in your area.

## North Carolina

**CHARLOTTE**

***Amity Medical Group***
East Charlotte
6010 E. W.T. Harris Blvd.
Charlotte, NC 28215
704-208-4134
9835 Monroe Rd Ste B,
Charlotte, NC 28270
704-208-4134
10508 Park Rd #130
Charlotte, NC 28210
(704) 461-0006
***South Charlotte***
10508 Park Rd., Suite 130
Charlotte, NC 28210
704-208-0006
*amitymed.org.*

***Atrium Health NorthPark***
251 Eastway Dr., Charlotte
704-446-9991
*atriumhealth.org*.

***Carolinas Care Partnership***
5855 Executive Dr., Ste. 101, Charlotte
704-531-2467
*carolinascare.org*.

***Lake Norman Community Health Clinic***
14230 Hunters Rd., Huntersville
704-316-6611
*lnchc.org*.

***Mecklenburg County Health Department***
Southeast Campus
249 Billingsley Rd., Charlotte
704-336-6500
*bit.ly/2qGKnkY*.

***Mecklenburg County Health Department Northwest Campus***
2845 Beatties Ford Rd., Charlotte
704-336-6500
*bit.ly/2qGKnkY*.

***Novant Health***
(Fee based)
1900 Randolph Rd., Suite 216, Charlotte
704-316-5330
*bit.ly/36cVfLH*.

***Planned Parenthood South Atlantic Charlotte Health Center***
700 S. Torrence St., Charlotte
704-536-7233
*bit.ly/2GIKJzV*.

**RAO Community Health**
321 W. 11th St., Charlotte
704-237-8793
*raoassist.org*.

***RAIN***
601 E. 5th St., Ste. 470, Charlotte
704-372-7246
*carolinarain.org*.

***Rosedale Health and Wellness***
103 Commerce Centre Dr., #103,
Huntersville
704-948-8582
*myrosedalehealth.com*.

***Quality Home Care Services Inc.***
3552 Beatties Ford Rd., Charlotte
704-394-8968
*qhcsnc.org*.

***Reserve Health***
(Fee based)
135 W. 10th St., Charlotte
704-626-3994
*reservehealth.com*.

***University of North Carolina at Charlotte Student Health Center***
9530 Poplar Terrace Dr., Charlotte
704-687-7400
*studenthealth.uncc.edu*.

***Urban Ministry Center***
945 N. College St., Charlotte
704-347-0278
*urbanministrycenter.org*.

***Walgreens Specialty Pharmacy***
1500 E. 3rd St., Charlotte
704-526-4651
*bit.ly/2zwQgVt*.

**ASHEVILLE**

***Buncombe County Department of Health***
40 Cox Ave., Asheville 28801
828-250-5000
*buncombecounty.org/Governing/Depts/Health*.

***Asheville VA Medical Center***
1100 Tunnel Rd., Asheville
828-298-7911
*asheville.va.gov.*
Eligibility requirement: Only open to veterans.

***Planned Parenthood South Atlantic Asheville Health Center***
68 McDowell St., Asheville
828-252-7928
*plannedparenthood.org/planned-parenthood-south-atlantic*.

***Western North Carolina AIDS Project***
554 Fairview Rd., Asheville
828-252-7489
*wncap.org.*

***Carrboro University of North Carolina School of Medicine***
301 Lloyd St., Carrboro
984-538-1031
Appointment Only
*unc.live/2PomrRU.*

***Chapel Hill Piedmont Health Services Inc.***
107 Connor Drive., Chapel Hill 27514
919-933-8494
*piedmonthealth.org.*

***Planned Parenthood Chapel Hill Health Center***
1765 Dobbins Dr., Chapel Hill
919-942-7762
*plannedparenthood.org/planned-parenthood-south-atlantic*.

***Orange County Health Department Southern Human Services***
2501 Homestead Rd., Chapel Hill
919-245-2400
*orangecountync.gov/health*.

**DURHAM**

CAARE – The Healing Center
214 Broadway St., Durham
919-683-5300
*caare-inc.org*.

***Durham County Department of Public Health***
414 E. Main St., Durham
919-560-7600
*dconc.gov/publichealth*.

***Gateway Campus, Durham***
4113 Capitol St., Suite B, Durham
919-251-9444
*https://gatewaywomens.care/services/sti-testing/*

***Lincoln Community Health Center***
1301 Fayetteville St., Durham
919-956-4000
*lincolnchc.org*.

***Planned Parenthood South Atlantic Durham Health Center***
105 Newsom St., Suite 101, Durham
919-286-2872
*plannedparenthood.org/planned-parenthood-south-atlantic*.

***Samaritan Health Clinic-East***
507 E. Knox St., Durham
919-407-8223
*samaritanhealthcenter.org*.

***Samaritan Health Clinic-South***
3205 University Drive, Suite 107, Durham
919-407-8223
*samaritanhealthcenter.org.*

***Triangle Empowerment Center***
931 E Main St, Durham, NC 27701
800-806-3558
*triempowerment.org.*

**FAYETTEVILLE**

***Planned Parenthood South Atlantic Fayetteville Health Center***
4551 Yadkin Rd., Fayetteville
866-942-7762
*plannedparenthood.org/planned-parenthood-south-atlantic.*

***Fuquay Varina***
Hand of Hope Pregnancy Centers
607 N. Ennis St., Fuquay Varina
919-577-9050
*yourchoicepregnancyclinic.com.*

**GREENSBORO**

***Alcohol and Drug Services***
1101 Carolina St, Greensboro, NC 27401
336-333-6860, ext 250
*adsyes.org/free-hiv-testing.*

***Guilford County Health Department***
1100 E. Wendover Ave., Greensboro
336-641-3245
*bit.ly/2T2TUzO.*

***Nia Community Action Center Self Help Building***
122 N. Elm St., Ste. 520, Greensboro
336-617-7722
*niacacinc.org.*

***Piedmont Health Services and Sickle Cell Agency***
1102 E. Market St., Greensboro
336-274-1507
*piedmonthealthservices.org.*

***Planned Parenthood South Atlantic Greensboro Health Center***
1704 Battleground Ave., Greensboro
336-373-0678
*plannedparenthood.org/planned-parenthood-south-atlantic.*

***Triad Health Project***
801 Summit Ave., Greensboro
336-275-1654
*triadhealthproject.org.*

**GREENVILLE**

**Pitt County AIDS Service Organization (PiCASO)**
3219 Landmark St., Ste. 9B, Greenville
252-830-1660
*bit.ly/2Nz4NIT*.

**High Point**

***Guilford County Health Department***
501 E. Green Dr., High Point
336-641-3245
*bit.ly/2T2TUzO*.

***Piedmont Health Services and Sickle Cell Agency***
401 Taylor Ave.., High Point
336-886-6261
*piedmonthealthservices.org*.

***Triad Health Project***
501 W. Westwood Ave., High Point
336-884-4116
*triadhealthproject.org*.

**HILLSBOROUGH**

Orange County Health Department
Whitted Human Services Center
300 W. Tryon St., Hillsborough
919-245-2400

*orangecountync.gov/health*.

**RALEIGH**

***Alliance of AIDS Services- Carolina***
3109 Poplarwood Ct suite 200, Raleigh
919-834-2437
*aas-c.org*.

***1st Choice Pregnancy Solutions***
4237 Louisburg Rd., Raleigh
919-554-8093

***Gateway Campus, Hillsborough***
1306 Hillsborough St., Raleigh
919-833-0096
*https://gatewaywomens.care/services/sti-testing/*

***LGBT Center of Raleigh***
19 W Hargett St UNIT 507, Raleigh, NC 27601
919-832-4484
*lgbtcenterofraleigh.com.*

***Urban Ministries of Wake County Open Door Clinic***
1390 Capital Blvd., Raleigh 27603
919-836-1642
*urbanmin.org.*

***Planned Parenthood South Atlantic Raleigh Health Center***
100 S. Boylan Ave., Raleigh
919-833-7526
*plannedparenthood.org/planned-parenthood-south-atlantic*.

***Wake County Human Services Center at Departure Drive***
5809 Departure Drive, Raleigh 27616
919-212-7000
*bit.ly/2JWiz4A*.

***Wake County Human Services Millbrook Human Services Center***
2809 E. Millbrook Rd., Raleigh
919-431-4000
*bit.ly/2JWiz4A*.

***Womens Center of Wake County Incorporated***
2200 New Bern Avenue, Raleigh 27292
919-829-3711
*wcwc.org*.

***Your Choice Pregnancy***
1701 Jones Franklin Rd., Raleigh
919-758-8444
*yourchoicepregnancyclinic.com*.

**WILMINGTON**

***Planned Parenthood South Atlantic Wilmington Health Center***
1925 Tradd Ct., Wilmington
910-762-5566
*plannedparenthood.org/planned-parenthood-south-atlantic*.

**WINSTON-SALEM**

***Forsyth County Department of Public Health***
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# Holiday gift ideas for the LGBTQ+ reader

## A look at fiction and non-fiction titles, as well as other genres of interest to the LGBTQ+ reader



**by Terri Schlichenmeyer**
***Qnotes* Staff Writer**



So you looked at the calendar the other day and... *eeeek*. You're not very far away at all to the holidays and you're way, too, uncomfortably far away from having everything ready. At the top of your list is fulfilling your gift list, but you're out of ideas and now what? How about a book? How about one of these great books....

**Fiction for the LGBTQ+ Reader**

If there's someone on your gift list who'd enjoy a coming-of-age story, **"Shae" by Mesha Maren** (Algonquin Books, $28.00) is a good choice to give. It's a boy-meets-girl tale, but when a pregnancy happens, it spurs bigger changes in their lives than just parenthood.

If a fun little rom-com is what your giftee loves to read, then look for **"We Could Be Heroes" by Philip Ellis** (Putnam, $20.00). It's a light tale of a chance encounter and a friendship that starts out small and becomes pretty super. You might want to wrap it up with **"Love and Hot Chicken" by Mary Liza Hartong** (Wm. Morrow, $30), a sweet, funny story of two Tennessee women, a chicken shack and amour.

If your gift recipient loves rom-coms, there are a bunch to choose from this fall. Consider "The Ride of Her Life" by Jennifer Dugan (Avon, $17.99), a girl-meets-girl novel of a new ranch-owning horsey-girl and the farrier who disagrees with her ranching ideas.

**Nonfiction for the LGBTQ+ Reader**

The person on your gift list who loves memoirs will devour **"Cactus Country" by Zoe Bossiere** (Abrams Press, $27.00), the story of an eleven-year-old and a new start in which everyone sees him as the boy he is. But life as a trans boy isn't easy in the beautiful area he's come to embrace, and neither are the people who surround him. Wrap it up with **"The Long Hallway" by Richard Scott Larson** (University of Wisconsin Press, $21.95), a memoir of a boy who identifies with a movie monster who helps him see that hiding parts of himself can help him come to terms with who he is.

For the trans man or woman on your gift list, look for **"The Last Time I Wore a Dress" by Dylan Scholinski and Jane Meredith Adams** (Penguin Publishing), a story of abuse, bullying, mental anguish and a happy ending. This book was first published more than 25 years ago but now has a new, satisfying and joyful ending... Wrap it up with **"Mama: A Queer Black Woman's Story of a Family Lost and Found" by Nikkya Hargrove**, the tale of a love, responsibility, and more love.

If the individual you're purchasing a gift for is exploring their sexuality,**"Fierce Desires: A New History of Sex and Sexuality in America" by Rebecca L. Davis** (Norton, $35) might be a welcome gift.

**Politics**

Has your gift recipient been dismayed at the political landscape for the past several years? Then **"Good Reasonable People" by Keith Payne** (Viking, $29.00) should be the book you wrap up to give. There is a way back to unity and away from polarization, Payne says, and with an explanation of the psychology behind it, it's do-able.

Be sure you know where your giftee's politics lie if you wrap up **"The MAGA Diaries" by Tina Nguyen** (One Signal Publishers, $28.00). Nguyen cut her teeth in the conservative movement, though she never felt entirely comfortable there. Eventually, she needed to get out; how she did it is a story the right giftee will love.

The person on your list who's mourning the end of the political season, will be happy to get **"The Handy Civics Answer Book: How to Be a Good Citizen" by David L. Hudson, Jr. J.D.** (Visible Ink Press, $29.99). It's a large, heavy book about our American documents, the Amendments they should know about, what it means to be a "good citizen," and more.

Remember the Reagan years? For your giftee that does, too, **"Dear Mom and Dad" by Patti Davis** (Liveright, $27.99) will be a great gift to unwrap. Davis, of course, was the Reagan's daughter, and this love letter to family and country is perfectly appropriate this year. Wrap it up with **"Woodrow Wilson: The Light Withdrawn" by Christopher Cox** (Simon & Schuster, $34.99), a hefty biography about a "superbly unsuited" man who nevertheless became our 28th President.

Here's a political issue your activist will want to know more about: **"The Stolen Wealth of Slavery: A Case for Reparations" by David Montero** (Legacy Lit, $29). Part history, part business, part eye-opener, this book is one of the better looks at this controversial subject.

**Pets and Animals**

For the dog lover on your gift list, **"Rethinking Rescue" by Carol Mithers** (Counterpoint, $28.00) will be a welcome present. It's the story of Lori Weise, Los Angele's "Dog Lady," who helps pets and their owners in the city's poorer neighborhoods. It's also a basic history of animal rescue and activism.

Is there someone on your gift list who's wild about animals? Then **"Meet the Neighbors: Animal Minds and Life in a More-Than-Human World" by Brandon Keim** (Norton, $29.99) will make a great present under the tree. It's a look at wild animals and the ways they're not quite so different from us. Pair it with **"Earthly Bodies: Embracing Animal Nature" by Vanessa Chakour** (Penguin Life, $20), another, differently nuanced book about animal and human behavior.

The grieving pet owner on your list may like **"I'm Still Here: A Dog's Purpose Forever" by Cathryn Michon** (Andrews McMeel, $19.99). It's a story as told by a dog who crossed the Rainbow Bridge, but never really leaves. Hint: Wrap it up with tissues.

If you have a cat lover on your gift list, **"Cats of the World" by Hannah Shaw and Andrew Marttilla** (Plume, $32.00) will be exactly the right thing to wrap. It's filled with stories and photographs of cats, cats, kittens and owners, taken from around the world. ::



# Joan Crawford's Angel Food Cake

## Tasty Holiday Treats

**by QNotes Staff**

Joan Crawford has been dead since 1977, but her place as a queer icon has never waned. Following the release of the film Mommie Dearest in 1981 (based on a book by her daughter released in 1978) the late actress captured a new generation of queer fans. Inspired by Faye Dunaway's over-the-top interpretation of Crawford, LGBTQ+ viewers were delighted by the camp quality of the movie and sought out the classic films Crawford had appeared in during her lengthy career.

She was nominated and won an Academy award for "Mildred Pierce," (1945), the story of a struggling woman who starts out baking cakes and making pies for neighbors and parlays her talents into a successful chain of restaurants. In 1947 she was nominated for (but didn't win) another Academy Award for the film "Possessed" and her role as the schizophrenic caregiver Louise, who loses her grip on sanity and offs an uncaring boyfriend.

She appeared in several other films before her death 30 years later, among them, the Academy Award nominated "Sudden Fear" (1952) the bizarre but legendary Western "Johnny Guitar" (1954) and the enormously successful horror/exploitation flick "Whatever Happened to Baby Jane?" (1962).

The latter inspired openly gay producer Ryan Murphy to create the miniseries "Feud: Bette and Joan" for the streaming and cable network FX in 2017. The series explored the relationship between Crawford and actress Bette Davis during the making of "Whatever Happened to Baby Jane?"

Once again, an entirely new younger generation, this time in the 21st century, was inspired to seek out the original film works of Crawford and this time, Davis.

There's a touch of irony to the holiday treat we're sharing with you in this installation of our ongoing series: it's called Angel Food Cake. As evidenced by the films we've discussed here, Crawford's portrayal of a woman that made cakes and pies won her an Academy Award. Crawford's characters in most roles she played were usually very far from being an angel, although Crawford herself was known to be bisexual, an ally to the gay community, a reliable friend and clearly a camp icon.

If you're looking for a relatively light and easy to make holiday cake for any upcoming holiday dinners, consider this one. It serves 10, and the creator of the recipe is quite likely to spur some interesting conversion among guests.



**Joan Crawford's Angel Food Cake**

**Ingredients:**

- 1 cup cake flour
- 7/8 cup, plus 3/4 cup sugar
- Whites from 12 large eggs
- 1/2 tablespoon cream of tartar
- 1/2 tablespoon vanilla
- 1/4 teaspoon almond extract
- 1/4 teaspoon salt

**Directions:**

Preheat the oven to 350 degrees.

Sift the cake flour and 8 cup sugar together three times.

In a large bowl, beat the egg whites, cream of tartar, vanilla, almond extract, and salt until foamy.

Add the remaining sugar, 2 tablespoons at a time, and beat until stiff peaks form.

Gradually sift the flour mixture over the beaten egg whites and fold it in, just until the flour disappears.

Spoon the batter into an ungreased 10-inch tube pan, and gently cut through the batter with a knife to spread it evenly.

Bake for 1 hour.

Let it cool for 10 minutes and then invert onto a rack to cool completely.

This recipe most recently appeared in Frank DeCaro's "Dead Celebrity Cookbook Presents Christmas in Tinseltown," published by Health Communications Incorporated in 2012. ::


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# ‘A Little Queer Natural History’

## Out In Print



**by Terri Schlichenmeyer**
***Qnotes* Staff Writer**

“A Little Queer Natural History” by Josh L. Davis
c.2024, University of Chicago Press
$16.00
128 pages

When you were a small child, someone taught you about the birds and the bees. It might’ve been a parent or other adult who explained where babies come from, or another kid who filled your head with scary, exciting things that you believed until you learned better. However you learned the facts of life, it changed you forever and in the new book, ‘A Little Queer Natural History’ by Josh L. Davis, there’s more to the wild story.

You are not alone. Just look around.

All kinds of creatures share the planet with us, but, in the same way that you shouldn’t judge a person at first glance, you can’t jump to conclusions about those creatures. That’s especially true with sexual behavior. While we can’t rightly attribute human feelings or intentions to them – animals likely don’t understand gay from straight – we may assume “that most species of animal probably exhibit some form of queer behaviour...”

Take birds, for instance: Early twentieth-century explorers noted the Adelie penguin for its male-male partnering activity. Female Western gulls often raise their chicks with female partners. Female pheasants may “present as males” if their estrogen is depleted.

As for mammals, Western lowland gorillas and bonobos both engage in sexual activity with either sex. Domestic sheep, hyenas and giraffes also “could be considered to have a sexuality that we would define as homosexual or bisexual.”

And “When it comes to sex in plants,” says Davis, “all bets are off.”

Komodo dragons can reproduce through parthenogenesis, or without fertilization. Parrot fish are able to change sex if they need to. Morpho butterflies are gynandromorphs, having “both male and female tissue within... a single individual.” Castrated male cane toads will develop egg cells due to a “Bidder’s organ.” Even dinosaurs are included in this book.

“Despite sex often being viewed as a fundamental for life on Earth,” says Davis, “there is still a lot we don’t know about it and scientists are constantly learning more.”

When you first get “A Little Queer Natural History” in your hands, you’ll notice how whisper-thin it feels. Don’t let that fool you; the pages may be light, but what you’ll find is not.

No, author Josh L. Davis stuffs each entry tight with real scientific information, and he uses actual scientific terms to do it. There’s zero dumbing-down in that, but Davis is quick to explain terms and ideas, which helps readers to completely understand what’s here. For sure, you’ll feel like a smarty-pants as you make your way through this book.

Readers, however, may scratch their heads and wonder why some of the entries are included – it may be a stretch to include fossilized creatures or male animals that care for their offspring, for instance. Chances are, though, that you’ll be so captured by the knowledge contained in each short chapter that you won’t mind.

“A Little Queer Natural History” is a smart book, perfect for quick reads at random at this busy time of year. If that’s what you need now, enjoying it’s a fact of life. ::







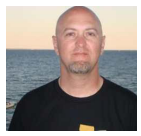

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# For the love of Lea

## an interview with Lea DeLaria



**by Gregg Shapiro**
***Qnotes* Contributing Writer**

Sometimes, I can't believe my good fortune. When I look at the list of musicians I've Interviewed over the years, it makes me love my job even more than I already do. Over the course of those years, I've even had the honor of interviewing some of these performers more than once. For example, I first interviewed Lea DeLaria in 2001, and then again in 2005. Nineteen years later, after so much has happened in Lea's career, including her portrayal of "Big Boo" in the acclaimed Netflix series "Orange Is the New Black," I couldn't wait to speak with her again.

**Gregg Shapiro: Lea, your cover of Neil Young's "Philadelphia," from your "Double Standards" album, still brings me to tears. Why did you choose to cover that song?**

**Lea DeLaria**: The concept of the record "Double Standards" was to take college rock/alternative rock tunes that were standards and do them like jazz standards. Being a child of the seventies, eighties and nineties, I obviously love that genre of music. There were so many songs on the list! We started out with a list of like 75 songs. We whittled that down to 20, and then went, "Wait a minute, what about these songs?" It was kind of crazy. When we got to the final list, we looked at it, and said, "Who's missing?" Bowie was missing, and so was Neil Young. We also realized we didn't have a soulful ballad. The producer and I both said, "We should do Neil Young's "Philadelphia." Because everybody always goes to The Boss's "Philadelphia," but I think this "Philadelphia" is way better.

**GS: I completely agree! I'm glad you mentioned Bowie, because your "House of David" album was released before the passing of David Bowie. Do you know if he was aware of it or heard it?**

**LD**: Oh my God, yes! He's the reason the album got made. He died six months after it was released. Warner Jazz, the label I was on, went under, so I had to crowdfund it. I did a GoFundMe. When you go to people's crowdfunding things, they're like "Give me $20, and I'll give you a signed something." Mine was like, "Give me $100, and I'll fly to your town, and we'll have lunch in McDonald's." Stuff like that. It's me, right, it's hilarious. We were doing just fine. I think we asked for 32K, something like that, which is reasonable for a record of this size. We were moving along, everything was fine. Then one morning I woke up and I looked at it and we had surpassed...we had gotten all these donations during the night and had gone way past the 32K that I asked for; it happened overnight. I was about to go on my social media and thank everyone for donating, say how happy we are that we're gonna make this record kind of thing, and my phone rang. It was my girlfriend at the time. She said, "Lea, David Bowie is tweeting at you," and basically, I guess David Bowie told all his people to donate to this record, and that I was someone that should be doing this, basically. Then, in even bigger support, when we released the album, we released the cover exclusively on David Bowie's website. It really did help the sales. This record sold really well. He was in complete support. I did a residency at a little jazz club here in town, midnight shows of the David Bowie album, and his entire band came during the course of that residency. We were in the process of trying to get David there to see it, which he apparently really wanted to do, and of course, he died. That's how much he was living his life until the end.

**GS: Janis Siegel of Manhattan Transfer fame joined you on your rendition of "Suffragette City." In the recording, you even commented about sitting back and listening to her sing.**

**LD:** Like I've been doing my whole life.

**GS: What made her the right duet partner for you?**

**LD:** Janis reached out to me through social media about two years before that. She said that she had heard my cover of Blondie's "Call Me" because Gil Goldstein, who arranged "Call Me," is someone who I've worked with very closely, had played it for Janis. She reached out to me and asked me if I would join her on stage because she and Gil had done an arrangement of Sondheim's "The Story of Lucy and Jessie," and wanted to know if I would do this duet with her. I said I'd be happy, and then Janis and I became very good friends. In fact, I'm an officiant, and I married Janis' son to his wife. We've become very tight. Janis and



Lea Delaria
Credit: Tina Turnbow

I have done many duets together and we both are mean-ass scat singers, so she was the obvious choice. In fact, on her next record, which I think is coming out in the spring, we did a duet of "Down for Double." Then I'm recording my next record called "Fuck Love," and she's going to do another duet with me.

**GS: I'm so glad you mentioned your next record because I know you don't need to be reminded, but it's been almost 10 years since you released "House of David."**

**LD:** It's very difficult in the music industry right now. I'm just gonna be honest; I've also been really fucking busy. I do a lot of things and I've been doing all of them. It takes time to get music and arrangements together. I worked on that Bowie record probably for three years. Those arrangements don't just fly out of my ass [laughs]. My go-to partner of choice, Nette Mason, and I do these arrangements together. We work really fucking harder on them. And then I tweak them and do them in concert and tweak them some more, and then we go into the studio. It just took a while for us to come up with the concept. The concept is fuck love, and it's all love-gone-wrong songs. It's getting the typical DeLaria treatment. We've got everything from a Betty Hutton song all the way to Dua Lipa. There's a lot in this record. We've even got The Chicks! We've got this gospel version of "Goodbye Earl." It takes time to get this together. But every time we put a date in to record, I get a movie or I get a play [laughs], and it gets pushed. This has been going on for about a year and a half, which is actually good because we'd still like to tweak these arrangements a little bit. Hopefully, we will be recording at the beginning of next year, maybe even sooner.

**GS: Lastly, you also said something about a movie...**

**LD:** Oh, my God there's so much! There's currently a movie that's on Amazon Prime - it's called "Holy Irresistible." It's a funny little independent film. I'm hilarious. I play a woman dying of cancer [laughs]. I'm the executive producer of a short called "Possum." I've made four movies so far this year. I've got to make another one and I'm shooting a television pilot at the end of October. I'm in this movie called "Tow," which has two Academy Award winners in it: Octavia Spencer and Ariana DeBose, and Rose Byrne, too. When I say I do a lot of things, I do a lot of things.

**GS: Do you think you might have another book in you?**

**LD:** I've been contacted. I think what's gonna happen is this book is going to be a memoir. I think somebody needs to set the historical record straight, because there are a lot of there's a lot of misinformation about our movement, especially what I would call my side of that movement which is more of the dykes and faggots and queers, oh my! Rather than the mainstream, middle-class, assimilationist side of that movement. That's what I'm thinking about. But I've got to be honest. I've got a play/comedy special in my head that I think is gonna come first. I've got a television series that I've been pitching that I think is gonna come first. I'm not not writing, I'm just writing other things. ::

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