



The Health Issue



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FROM THE PUBLISHER'S DESK

Healthy, Wealthy and Wise



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While we are still in the midst of a worldwide pandemic, it can be easy to overlook some of the other major health issues and disparities that plague (no pun intended) our community. According to www.drugwatch.com, LGBTQ+ people are at greater or higher risk for:

- Acquiring HIV and other sexually-transmitted diseases;
- A higher rate of substance abuse and tobacco addiction;
- The development mental health issues, such as depression and anxiety;
- Suicide attempts;
- Certain types of cancers.

This month in our Features Section, we closely examine the six major health disparities for the LGBTQ+ community as well as how health professionals and patients can address them. In our Opinion section, I write about how our healthcare providers need to be our most vital allies and share my own issues trying to get treatment for HIV in

2008.

April 6 was International Asexuality Day, and in our Spotlight section we take a deeper look as to what it is and why it is so misunderstood.

April is also National Poetry Month, and our Marketing Manager and award-winning poet Carmen Murguia offers some tips on how to fit more poetry into your life.

The Spring season is not just the weather changing. There is a new season of events, happenings and entertainment blooming in Milwaukee and our own Michael Johnston fills you in on it all.

We hope you have a happy Spring and hope that there are many good things *blossoming* for you this season.

- William S. Gooden
Publisher,
Milwaukee Pride Life Magazine

THE OPINION EDITORIAL

Our Health Providers Should Be Our Greatest Allies

By William S. Gooden, Publisher
Milwaukee Pride Life Magazine

As LGBTQ+ individuals we face a number of social stresses in our lives, many of which take their toll on our physical and (most of all) mental well-being. With so many health disparities affecting our community, one would believe that our fervent allies would be our medical providers. But sadly, we still face prejudice, and in some cases, outright discrimination from the healthcare providers. From difficulties to finding LGBTQ+ -friendly mental health professionals to the difficulties faced by transgender men and women just trying to find medical help to realizing their true selves. The search for a medical professional who treats not only our ailments but our whole being can be challenging. Regrettably, it is something I have experienced firsthand.

When I was first diagnosed with HIV in 2008, my first doctor did virtually nothing. He provided minimal care and even less direction. Even worse, he did nothing to address my fears or frustrations of being newly diagnosed with HIV. Frustrated, I confided in a friend who had been positive for most of his adult life. Under his advisement, I made an appointment with his physician. During our first meeting, I was not optimistic that I would be any more successful with this doctor. However, as we spoke further, I became more convinced that he genuinely cared for me



as a human being and not just about my viral load. He counseled me about much of what I was going through mentally and emotionally, and most importantly, made me feel like a person again. This care continued over the next thirteen years until he retired in 2021. Before he did, he made certain I was acquainted with a new specialist who would provide me with the same level of care and service as the first doctor had given me.

If you have a healthcare provider that is not supportive of you or your lifestyle, then please find one that is, even if it takes sometime. Many healthcare providers note which ones are LGBTQ+ -friendly on their physician-finding sites or can direct you to one through their referral services. Also, many of our local community clinics can point you in the right direction. The worst thing for your health is having a healthcare provider that is unsupportive. Your doctor or RN should be your health advocate and support you in the achievement of your complete well-being.



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In The News

LOCAL & NATIONAL LGBTQ+ NEWS



Judge Strikes Down Military's Limits On Service Members With HIV

By Benjamin Ryan

In a landmark ruling, a federal court has ordered the Defense Department to end a long-standing Pentagon policy forbidding enlisted military service members from deploying in active duty outside the continental U.S. and being commissioned as officers if they have HIV.

Supporters hailed it as overdue legal affirmation that people receiving effective antiretroviral treatment for HIV are essentially healthy and pose no risk to others.

The judgment topples one of the country's last major pillars of HIV-related employment discrimination. Federal law has for decades barred employers from discriminating against people with HIV under the Americans with Disabilities Act of 1990. The military has stood alone as the sole U.S. employer maintaining such explicit discriminatory practices.

"This is one of the biggest rulings for people living with HIV and enshrining their protections under the Constitution in decades," said Kara Ingelhart, a senior attorney at Lambda Legal, which along with a team of private-practice attorneys litigated the cases.

The Pentagon still bans people with HIV from enlisting in the military or from being commissioned out of military academies. The new ruling, which could affect those other prohibitions, concerns service members who are diagnosed after they enter the military.

U.S. District Judge Leonie Brinkema of Eastern Virginia ruled Wednesday in the two cases, *Harrison v. Austin* and *Roe & Woe v. Austin*, in which a trio of men sued the military for HIV-related discrimination. The Air Force tried to discharge two pseudonymous plaintiffs, while the D.C. Army National Guard denied Sgt. Nick Harrison a commission in the Judge Advocate General's



Sgt. Nick Harrison

Corps, or JAG Corps, because they had HIV.

Brinkema ruled that the Pentagon's policy qualifying HIV as a chronic condition requiring a waiver was scientifically outdated and that it unfairly treated people with the virus differently from other service members living with chronic health conditions requiring routine medication.

"This is the first decision securing the rights of people living with HIV that is rooted in the equal protection clause of the Constitution," said Scott Schoettes, a former Lambda attorney in private practice in Chicago, who is co-counsel in the two cases.

Brinkema, who was appointed by President Bill Clinton in 1993, has ordered the Air Force to rescind the discharges of the two airmen. She further ordered the Army to rescind and reconsider its denial of Harrison's JAG Corps application.

Under the ruling, the Pentagon can no longer use the virus as a reason to discriminate against asymptomatic HIV-positive service members whose viral loads are undetectable thanks to antiretroviral treatment. In particular, the Pentagon may not separate, discharge or deny applications for deployment from such people.

The Justice Department could appeal the ruling to the 4th U.S. Circuit Court of Appeals. In January 2020, the court upheld a preliminary injunction in the case of the two airmen, blocking the Air Force from discharging them while their case was litigated.

President Joe Biden's 2020 campaign platform included a measure supporting the right of people with HIV to serve fully in the military. Ingelhart expressed hope that the administration will compel the Pentagon to reverse the remaining policies that discriminate based on HIV status.

The Defense Department is the world's largest employer, with 3 million service members worldwide.

The Pentagon referred questions to the Justice Department, which declined to comment.

In defending the two cases, the military argued that service members with HIV pose a theoretical risk to others, such as on the battlefield.

After the Pentagon appealed the injunction to the 4th Circuit in 2019, a group of former military leaders filed an amicus brief supporting the plaintiffs. The brief criticized as scientifically outdated the Pentagon's policy qualifying HIV as a chronic condition requiring a waiver and argued that the policy compromised military readiness.

Effective antiretroviral treatment for HIV has been on the market since 1996. Today, HIV is typically treated with a once-a-day pill.

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Pride Life Features

THE EVENTS AND PEOPLE THAT ARE SHAPING LGBTQ+ MILWAUKEE

Six Major Health Disparities Affecting the LGBTQ+ Community

By: Claire Gillespie

We all rely on health care services at some point in our lives, and many of us take them for granted. But not everybody has the same access to medical advice and treatment. As a result, certain populations suffer poorer health outcomes.

These are known as health disparities—defined by the Centers for Disease Control and Prevention (CDC) as “preventable differences in the burden of disease, injury, violence, or opportunities to reach your best health that are experienced by socially disadvantaged populations.”

In 2016, the LGBTQ+ community was identified as a “health disparity population” by the National Institute on Minority Health and Health Disparities, partly because individuals who identify as part of this group have less access to health care. LGBTQ+ people encompass all races, ethnicities, religions, and social classes. But when an LGBTQ+ person belongs to another marginalized group, such as being a person of color, it becomes even more difficult to find accessible, unprejudiced care. “These health disparities tend to amplify due to the intersectionality of oppression,” Kristen Martinez, an LGBTQ+ affirmative counselor at Pacific NorthWell in Seattle, tells Health.

A 2017 nationally representative survey of LGBTQ+ people conducted by the Center for American Progress bears this out. The survey found that nearly one in 10 LGBTQ+ individuals reported that a health care professional refused to see them in the prior year because of their actual or perceived sexual orientation. Nearly three in 10 transgender people reported that providers would not see them because of their gender identity.

Laura Durso, PhD, chief learning officer and executive director of Washington, DC’s Whitman-Walker Institute, a

nonprofit committed to advancing social justice and equality through health, tells Health that various factors may contribute to LGBTQ+ people not having equal access to basic medical services, such as mammograms or screening tests. “Lack of access to health insurance and quality coverage, greater vulnerability to poverty, and unwelcoming and discriminatory social environments all play a role,” she says.

“Those discriminatory environments cause LGBTQ people to experience minority stress—the stress associated with experiencing both institutional and interpersonal stigmas because of one’s sexual orientation or gender identity—which has been shown to be associated with negative health outcomes.”

These are the six main health disparities faced by the LGBTQ+ community.

1. Higher rates of sexually transmitted infections

In the United States, gay, bisexual, and other men who have sex with men (MSM) are the population most affected by human immunodeficiency virus (HIV). According to the CDC, adolescent and adult gay and bisexual men made up 69% of the 37,832 new HIV diagnoses in the US in 2018. The CDC also states that anal sex is the riskiest type of sex for getting or transmitting HIV, and most gay and bisexual men get HIV from having anal sex without protection—such as using a condom or taking medicine to prevent or treat HIV.

Gay and bisexual men are also at a higher risk for other sexually transmitted infections (STIs), such as chlamydia, syphilis, and gonorrhea, which can all greatly increase the chance of getting or transmitting HIV.

Figures show that LGBTQ+ people are more likely to have human papillomavirus (HPV) infection. According to a study published in *The Journal of Infectious Diseases* in 2017, gay, bisexual, and MSM are about 20 times as likely as



heterosexual men to develop anal cancer, of which HPV is a recognized cause. HPV is the primary cause of cervical cancer in women, but it’s also a risk factor for ano-genital cancers. In addition, it’s linked to head and neck malignancies, due to transmission of the virus via oral sex.

2. More substance use and abuse

Studies are conflicting, but some research suggests that substance use and abuse is more prevalent in the LGBTQ+ community than in non-LGBTQ+ groups.

According to a CDC report published in 2018 (based on data from the 2016 National Health Interview Survey (NHIS), 20.5% of lesbian, gay, and bisexual adults smoked, compared to 15.3% of heterosexual adults. Smoking increases the risk for coronary heart disease, stroke and lung cancer, and a host of other health conditions.

Research published in *LGBT Health* in 2019 highlights high rates of sub-

stance abuse disorders in the LGBTQ+ community. People who identified as lesbian or gay were more than twice as likely as people who identified as heterosexual to have a "severe" alcohol or tobacco use disorder, while people who identified as bisexual were three times as likely to have this kind of substance use disorder.

Boston's Fenway Institute is a commu-



nity organization dedicated to advancing health and well-being for sexual and gender minorities and those affected by HIV. Their 2016 report, *Improving the Health Care of Lesbian, Gay, Bisexual and Transgender People: Understanding and Eliminating Health Disparities*, says that other drug abuse may also be more common among LGBTQ+ as opposed to heterosexual men and women. One 2017 study published in the *Journal of School Health* found that transgender students were about 2.5 times more likely to use drugs like methamphetamines and cocaine than their cisgender peers.

3. Higher rates of mental health conditions

Many studies have suggested higher rates of mental illness in the LGBTQ+ community. A large cohort study published in *Pediatrics* in 2018 found that transgender and/or gender nonconforming (TGNC) youth were several times more likely to have attention

deficit disorders and depressive disorders than non-TGNC youth. And a meta-analysis of UK population health surveys, published in *BMC Psychiatry* in 2016, found that LGBTQ+ people are more than twice as likely as heterosexual men and women to have a mental health disorder in their lifetime.

"Queer and trans folks tend to be more prone to anxiety, depression, suicidality, eating disorders, and substance dependence, which are all the effects of systemic oppression," says Martinez.

Health care disparities can also lead to mental health issues in LGBTQ+ people, Martinez adds. "Remember that queer and trans folks have an understandable fear and mistrust of the health care system," she says. For starters, the DSM (Diagnostic and Statistical Manual of Mental Disorders, the so-called "psychiatric Bible") listed "homosexuality" as a disorder until 1973. And trans and non-binary folks still need a diagnosis of "gender dysphoria" (previously known as "gender identity disorder") so they can access life-saving and life-affirming treatment, like hormone therapy or feminizing or masculinizing surgery.

"If you are a trans man who can't find a provider to give you a pap smear due to systemic oppression, of course that will be affecting your mental health and well being, and how you see yourself and value yourself," says Martinez. "If you have to teach your health care providers about the lived experience of being trans and/or queer, that is a burden that should not be on your shoulders but often is, on top of accessing care, having resources to pay for care, and more."

4. Higher odds of obesity and eating disorders

A study published in the *International Journal of Environmental Research and Public Health* in 2019 looked at data from 2014–2017 Behavioral Risk Factor Surveillance System (BRFSS) surveys and found that bisexual and lesbian women were more likely to be overweight or obese than women who identify as heterosexual. However, gay men had significantly lower odds of being obese as opposed to straight men (there was no significant difference when it came to bisexual men). In addition, eating disorders and body image disorders may be more common among gay and bisexual men than heterosexual men,

per a study published in the *Archives of Pediatrics and Adolescent Medicine*.

"In comparison to their straight peers, LGBTQ+ individuals experience unique stressors such as bullying, harassment, fear of rejection, internalized homophobia, body image distress, barriers to accessing medical and mental health treatment, and violence," Sydney Brodeur McDonald, PhD, senior director for clinical services at Veritas Collaborative, a national healthcare system for the treatment of children, teens, and adults with eating disorders, tells Health. "These stressors place them in a higher risk category for the development of eating disorders and other mental health issues."

5. Higher rates of breast and cervical cancers

Although there's not a lot of data on cancer rates within the LGBTQ+ community, the National LGBT Cancer Network says LGBT communities are "disproportionately affected by cancer."

A 2000 study analysis of data from more than 93,000 women between ages 59-70 published in the *Archives of Family Medicine* suggests that lesbian and bisexual women have higher rates of breast and cervical cancer compared to heterosexual women. However, it's not known whether this is due to lower rates of screening, nulliparity (the condition of not having been pregnant), or other factors known to raise the risk of these cancers, such as alcohol use and obesity.

According to a comparative study of data on more than 800,000 men and women published in the *American Journal of Public Health* in 2010, women in same-sex relationships were less likely to have had a recent mammogram or Pap test than heterosexual women.

In 2013, a systematic review of all US and UK evidence on whether there is a higher rate of breast cancer in lesbian and bisexual women concluded that the only realistic way to answer this question is to collect sexual orientation within routine statistics, including cancer registry data, or from large cohort studies.

6. Greater risk of heart disease

A study published in the journal *Circulation* in 2018 found that lesbian, gay, and bisexual adults have a higher risk of heart disease and other

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Major Health Disparities

(Continued from pg. 5)

cardiac problems than heterosexual adults. Researchers at Miami's Baptist Health South Florida Clinic focused on seven areas of controllable heart health and found that people in sexual minority groups were more likely to be smokers and have poorly controlled blood sugar, which both contribute to heart disease.

How to help LGBTQ+ people get equal health access

If an LGBTQ+ person has had a bad experience with a medical professional, they might choose to stay away from health care settings. The 2017 Center for American Progress survey showed that once people experience discrimination in some form, they are more likely to

avoid doctor's offices. Among LGBTQ+ people who had experienced discrimination in the year prior to the survey, more than 18% reported avoiding doctor's offices out of fear of discrimination.

Whether you've experienced discrimination in a health care setting or not—or you have LGBTQ+ friends or family members who've encountered bias—your fear around care is valid, says Stephen Abbott, MD, staff physician at Whitman-Walker Health. “My advice is to seek out LGBTQ+ health resources and directories,” Dr. Abbott tells Health. “GLMA: Health Professionals Advancing LGBTQ+ Equality (previously known as the Gay & Lesbian Medical Association) maintains an LGBTQ+ inclusive provider directory.”

You can also search for organizations that advocate for and provide direct health services to LGBTQ+ populations in your state, such as Maine's Health Equity Alliance and the UCSF Center for

LGBT Health & Equity in California. The Trevor Project is a non-profit providing crisis intervention and suicide prevention services to LGBTQ+ youth (under 25s), while Trans Lifeline is a hotline run by and for trans people. And the LGBT National Help Center provides free, confidential peer support and information on local resources to help with anything from coming out issues to sexual abuse.

Due to COVID-19, with many health care services still not fully open, telehealth access could be an option, suggests Dr. Abbott. “When there is access to technology and the internet, telehealth can create a unique opportunity to connect LGBTQ+ communities, and other communities with limited access to care, from their homes or where they stay.”

Source: <https://www.health.com/mind-body/lgbtq-health-disparities>

Military's HIV Ban Lifted

(Continued from pg. 3)

Scientists have known for decades that HIV cannot be transmitted through casual contact. Extensive research led the global HIV scientific community to conclude in the late 2010s that people with undetectable viral loads thanks to HIV treatment cannot transmit the virus through sex.

According to Lambda Legal, nearly all of the approximately 2,000 members of the U.S. military living with HIV have undetectable viral loads.

Today, people treated for HIV have near-normal life expectancies.

“The military is being forced to acknowledge the current science regarding HIV: It is easily treatable; there are zero documented cases of transmission in combat; and, most importantly, it is never a reason for discrimination,” said Sarah Warbelow, the legal director of the Human Rights Campaign, who was not involved with the litigation.

Harrison, 45, an Oklahoma native who joined the military in 2000, was diagnosed with HIV in 2012 after he returned from a tour of duty in Kuwait.



Sgt. Nick Harrison

In May 2018, he sued the Army and the Defense Department for denying his application to become a military lawyer with the JAG Corps.

“It's nice to see the court make a decision placing science over stigma,” Harrison said of the judge's ruling.

In December 2018, Harrison's legal team further sued the Air Force and

the Justice Department on behalf of two airmen who received notifications discharging them from service because their HIV statuses prevented their potential deployment to the Middle East.

The policy, codified in a February 2018 memorandum and dubbed “Deploy or Get Out,” outraged the HIV community by forcing some HIV-positive service members out of the military, not previously a common practice, if they faced potential deployment.

Harrison said he keeps in touch with the two other plaintiffs, as well as a collection of fellow HIV-positive members of the military. “We're looking forward to the opportunity to go forward with our lives and to continue to serve the military in the best way possible,” he said.

His lawyers have also sued the Navy and the Air Force on behalf of a pair of cadets who were blocked from commissioning in the military after their military academy graduations because they had HIV. The case, *Deese and Doe v. Austin*, which is pending in U.S. District Court for Maryland, is in the discovery phase after the court denied the Pentagon's request for dismissal.

Source: <https://www.nbcnews.com/nbc-out/out-news/judge-strikes-militarys-limits-service-members-hiv-rcna23513>

In The Spotlight

SPOTLIGHTING MILWAUKEE'S AMAZING PRIDE COMMUNITY

What is Asexuality?

By: William S. Gooden, *Publisher,*
Milwaukee Pride Life Magazine

April 6, 2022 is International Asexuality Day. Long in the shadows, asexuality is finally becoming increasingly visible. It could help young people find themselves and their identities and change the way we think about sexuality. Nevertheless many do not understand what it is. In acknowledgment of International Asexuality Day, we explore some of the terms associated with it and explain them.

Asexual – A term used to describe someone who does not experience sexual attraction toward individuals of any gender. Asexuality is a sexual orientation, and is different from celibacy, in that celibacy is the choice to refrain from engaging in sexual behaviors and does not comment on one's sexual attractions. An asexual individual may choose to engage in sexual behaviors for various reasons even while not experiencing sexual attraction. Asexuality is an identity and sexual orientation; it is not a medical condition. Sexual attraction is not necessary for a person to be healthy.

- **Gray-A, gray-asexual, gray-sexual** are terms used to describe individuals who feel as though their sexuality falls somewhere on the spectrum of sexuality between asexuality and sexuality.
- **Demisexual** individuals are those who do not experience primary sexual attraction but may experience secondary sexual attraction after a close emotional connection has already formed.



Attraction – There are many different types of attraction, including:

Sexual attraction: attraction that makes people desire sexual contact or shows sexual interest in another person(s).

Romantic attraction: attraction that makes people desire romantic contact or interaction with another person or persons.

- **Aesthetic attraction:** occurs when someone appreciates the appearance or beauty of another person(s), disconnected from sexual or romantic attraction.
- **Sensual attraction:** the desire to interact with others in a tactile, non-sexual way, such as through hugging or cuddling.
- **Emotional attraction:** the desire to get to know someone, often as a result of their personality instead of their physicality. This type of attraction is present in most relationships

from platonic friendships to romantic and sexual relationships.

- **Intellectual attraction:** the desire to engage with another in an intellectual manner, such as engaging in conversation with them, “picking their brain,” and it has more to do with what or how a person thinks instead of the person themselves.

Romantic Orientation – Describes an individual's pattern of romantic attraction based on a person's gender(s) regardless of one's sexual orientation. For individuals who experience sexual attraction, their sexual orientation and romantic orientation are often in alignment (i.e. they experience sexual attraction toward individuals of the same gender(s) as the individuals they are interested in forming romantic relationships with).

Continued on pg. 11)



Cordially Yours, Again!

YOUR MONTHLY DOSE OF WHO'S WHO AND WHAT'S HAPPENING

“I’m No April Fool”

Is it just me or are we all playing “Beat the Clock”? Time seems to be going so darn fast, it’s like every 15 minutes is breakfast! The First Quarter of the year is here! Amazing!

We’ve sprung forward, losing an hour over a weekend, but have longer days, the seasons have changed from winter to spring, and we’ve survived March Madness! April, a lovely month, even though their showers bring those May flowers...I can live without April Fool’s Day. **Saturday, April 2 Ramadan** begins. The Most Important thing You can do this month is to Vote! **Tuesday, April 5th** it is your Duty! I had the pleasure of meeting Mayor Cavalier Johnson at The Hunty Club of Hamburger Mary’s and Mayor Johnson totally impressed me, captivated me with his ability and commitment! Also, on the Ballot for the 15th District Supervisor Peter Burgelis. Mr. Burgelis is driven, devoted, and so compassionate. He is young, fresh and will be ever so good for this town!

Due to COVID-19, many of us haven’t taken vacations, or at least extravagant getaways like an ocean voyage. **The Milwaukee Repertory Theater** is offering you an opportunity with “*Titanic, the Musical*” **Tuesday, April 5th – Sunday, May 15th**. The **Quadracci Powerhouse**. PRIDE Night is Friday, April 8th. To take advantage of seeing this fist-rate Tony Award Winning, seldom mounted production, with a significant discount, when making your reservation, use the Code Word: PRIDE! A very special pre-show reception will be held in **The The Rep** has two other pieces I must see “*My Way*” a Tribute to The ‘Chairman of the



By: Michael Johnston

Board, Frank Sinatra in the **Stackner Cabaret** through **Sunday, May 1**. And in Honor of Pride, Miss Judy Garland, “*Get Happy*” **Thursday, May 5th – Friday, July 1**, also in the recently facelifted Stackner. **Tuesday, April 5th** is very popular evening for Theater in Milwaukee! **The Marcus Center for the Performing Arts** has their highly popular Broadway Series continuing with “*Ain’t Too Proud*” **Tuesday, April 5th – Sunday, April 10th** The Juke Box Musical based on the career of Motown royalty The Temptations. There are two more Broadway Hits to hit the Cream City this season sir Andrew Lloyd Weber’s purrrfect “*Cats*” **Tuesday, May 10th – Sunday, May 15th** and later in the month of May, **Tuesday, May 31 – Sunday, June 5** Roald Dahl’s “*Charlie and the Chocolate Factory*” which Willie Wonks was based on, how sweet is this?

With COVID-19 in better check, this year **The Milwaukee Art Museum (MAM)** will once again host Art in Bloom **Thursday, April 7 – Sunday, April 10**. MAM will even extend their

hours until 8:00 so you can take in the masterful work of our local Florist, as they recreate Masterpieces in flora. One thing that is different this year, to keep crowds at a more limited capacity, MAM is requested you make a reservation. This truly is one of my most favorite spring-time events!

Closing out the week, **Friday, April 8th Skylight Music Theatre** raises the curtain on “*Raisin*” **Friday, April 8th – Sunday, April 24** in the sumptuous Cabot Theatre. “*Raisin*” is rarely done, and the musical based on the late Lorraine Hansberry classic “*A Raisin in the Sun*”. Though this Tony winner dates back to 1974, the message is as important today, than ever before! Skylight is closing out this challenging season with a very special Wisconsin debut of Dennis DeYoung’s “*The Hunchback of Notre Dame*” **Friday, May 20 – Sunday, June 12**. You all know and love Dennis DeYoung, the Rock ‘n Roll legend of Styx with such hits as “*Babe*”, “*Come Sail Away*”, and “*Lady*”. This is an Epic, not to be missed Production, Directed by Skylight’s very own Michael Unger. **April 15th** marks Good Friday, for some of us, Every Friday is Good!

The following day, **Saturday, April 16** “*Bosom Buddies*” at **La Cage** 5:00 pm, Maple Veneer and Karen Valentine welcome Drag King, Richard FitzWell. **Saturday, April 16th** is also Passover, this year. **Sunday, April 17th** is **Easter** – is there Still an Easter Parade? Hopefully, your basket won’t be too full, and you won’t be on a jellybean high, because the next day, **Monday, April 18th** is **Tax Day** and you must see to or

make necessary arrangements with regards to the IRS.

The 52nd Annual **Earth Day Celebration** will take place **Friday, April 22**. This **Friday, the 22nd**, also launches the “*MIAD Senior Exhibition*” concluding **Saturday, May 7**, here is an ideal opportunity to invest in an up-and-coming artist. You discover an artist, and you watch them become the talk of the town! One day, you can say “I knew them when”! **Wednesday, April 27** if you’re fortunate enough to have one is **Administrative Assistant Day**, you must Celebrate them! Yes, as I refer to it as, Miss Agnes Gooch Day!

And we close out the awesome month of April with **National Arbor Day** on **Friday, April 29th**.

For the Fans of “Downton Abbey”, Guilty! You have to high tail it over to the **Charles Allis Art Museum** and take in “*Dressing the Abbey*” dressing the Allis until **Monday, May 30** (Memorial Day) The **M & M Club Reunion Party** is A - Go! And will be taking place on Mothers’ Day **Sunday, May 8th** Noon – 6 pm at **The Tied House AKA The M & M Club 124 North Water Street**. Parking is a major problem so consider Lyft, Uber, Bus, Walking, Car Pooling, etc. ... Why Mothers’ Day? The Bar closed on Mothers’ Day 2006, after over 30 years of Beer, Cocktails, Meals, Shows, Memories, Laughs, Love, Friendship, Life, History and ironically, even though this



Institution has been closed for 16 years the memories have lived on in our hearts and are as real today, as when we lived them!

The Florentine Opera Company closes out their sensational season with an old warhorse, to end all old warhorses Puccini’s outstanding opus “*La boheme*” **Friday, May 6** and **Sunday, May 8** at **t The Marcus Center for the Performing Arts**, with costumes by Robert Sharon! Michael Pink’s **Milwaukee Ballet** close out their highly acclaimed year with “*Beauty and the Beast*” **Thursday, May 19 - Sunday, May 22**. **PrideFest 2022** is scheduled for **Thursday, June 2, Friday, June 3, and Saturday June 4!**

On **Sunday, June 5** *The PRIDE Parade* will take place on South Second Street at 2:00 p.m. This way one can take in all the different celebrations through the city and not miss anything! My good Friends of the **Milwaukee Gay Sports Network (MGSN)** are planning their historic *Big Gay 5 K Run/Walk* to return this year as well, so plan on joining in! Even as I do, as part of the Cheering Section – Rah!

While Nature is starting to bloom, bud, and awakening once again ... Please remember, it’s the glamour, not the grammar as I remain **Still Cordially Yours, Again!**



DHS Approved 10/15/2020

For information on long term care options, call your local Aging and Disability Resource Center.

800-963-0035 TTY: 711
www.mychoicewi.org/MPM





Celebrate Poetry in April for National Poetry Month

By Carmen Murguia,
award-winning published poet and
Marketing Manager for
Milwaukee Pride Life Magazine

**"Honestly, I wish I were dead!
Although she too cried bitterly
when she left, and said to me, Ah,
what a nightmare it is now. Sap-
pho, I swear I go unwillingly"**

wrote Sappho, who was the first woman and lesbian in Western literary history to express her own individual ideas (*Sappho and the Greek Lyric Poets*, translated by Willis Barnstone, Schocken Books). Sappho and Homer were the first of many great poets whose works on women loving women and men loving men laid the groundwork for our rich Lesbian, Gay, Bisexual, and Transgender history. The feelings of freedoms, of desire and yearning, of triumph and tragedy were expressed through poetry, and to miss it is to miss a rich aspect of our culture. Not to mention poetry readings, feminist and Gay owned bookstores are the ideal place to cruise or for meeting your soul mate!

"Poetry can bring together those parts of us which exist in dread and those which have the surviving sense of a possible happiness, collectively, community, a loss of isolation." Poet, feminist thinker, and political activist Adrienne Rich in an interview with Bill Moyers, *The Language of Life: A Festival of Poets*.

Unfortunately, for many of us, poetry and prose that was not forced upon us as a part of "our American literature" did not come until after high school - a time when we were able to choose what we wanted to read and formulate our own ideas about life as we understood it. Po-



ets, scholars and essayists like Adrienne Rich, Walt Whitman, Audre Lorde, Tennessee Williams, and Cherrie Moraga questioned beliefs and reflected on subjects such as heritage, loving women and men, and the politics of oppression with honesty and candor.

Fortunately, and in many places, hopefully, there are more educators today who introduce LGBTQ+ teens to poetry that speaks a language we long to find ourselves. A good example of this poetry is found in the work of great American poet Walt Whitman (1819-1892).

Because of his celebration for sensuality and the mere mentioning of body parts, Whitman evoked hostility and admiration alike in the mid-19th century. Here is Walt Whitman's *As Adam Early in the Morning*:

**"Bad love last like a big
ugly lizard crawl around the house
forever
never die
and never change itself
into a butterfly. "**

How different our lives would be without works that reflect a// of who we are. Without knowing about the existence of our history through poetry, why would a young person be at all interested in literature? And why would we write without censoring ourselves for fear of being ridiculed for our experiences? Or how could we affirm any validation about being queer or Transgendered and being proud? Or think that as LGBT people of color, would our story be any different from that of our white brothers and sisters?

Discovering LGBTQ+ poetry reinforces both a need to uncover the truth about who we are and a desire for documenting our own unique stories in a clear and effective way.

"Writing produces anxiety. Looking inside myself and my experience, looking at my conflicts, engenders anxiety in me. Being a writer feels very much like being a Chicana, or being queer - a lot of squirming, coming up against all sorts of walls. Or its opposite: nothing defined or definite, a boundless, floating state of limbo where I kick my heels, brood, percolate, hibernate, and wait for something to happen?" - Gloria Anzaldúa, excerpt from *Something to Do with the Dark, The Graywolf Annual Rve: Multi-cultural Literacy*.

For many, poems are the link to understanding each other; poetry is much like opening a vein and saying, "Here." So when we've read a coming out piece, we are able to understand our own coming out process and the feelings associated with feeling like the only one or, weird, or reaffirming our blessing and our uniqueness. And when we read poetry of tragedy, heartache and of finding a new love, there is something that im-

pacts us in a quiet and victorious way.

Poems about *Heartbreak That Go On and On* by June Jordan, from Haruko/love poems "Walking forth from the bower":

*"Refresh'd with sleep,
Behold me where I pass, hear
my voice, approach,
Touch me, touch the palm of
your hand to. my body as I pass,
Be not afraid of my body."*

As LGBTQ+ people, poetry also transcends a deeper level within us. Poetry speaks directly to us from our particular culture, our region of the country, written in our native tongue. As we are reading, we can often hear those poets who share our sense of humor and personal experiences. It's amazing when these

complexities about how and where we grew up appear before us in black and white because it's as if we've come upon someone who has documented a part of our life story.

April is National Poetry Month in the United States. Celebrate another vital aspect of your LGBTQ+ history by attending a poetry reading or perusing your favorite library or bookstore's collection of LGBTQ+ poetry. If you're traveling to New York, I suggest visiting the Oscar Wilde Memorial Bookstore, the first Gay bookstore in America, 15 Christopher Street; and the International Gay Information Center inside the New York Public Library, Fifth Avenue between West 40th & 42nd Streets. In San Francisco, visit the San Francisco Women's Center - Women's Building, a resource for women of color and Lesbian hosts readings, 3543 18th Street,

between Valencia & Guerrero Streets; and the James C. Hormel Gay and Lesbian Center located in the San Francisco Public Library.

Join a LGBTQ+ version of the "Dead Poets Society"...or why not start one! In fact, write a poem@ Write a poem about coming out and share it with someone who you've been wanting to tell, or write a poem that begins with "Dear Lover, I hope this poem finds your, dear lover..."

Chicana Lesbian poet a Carmen Alicia Murguía is the author of "*The Voices Inside: Mi Alma, Mi Cuerpo y Mi Espiritu*" (1993) and "*Brown Pride*" (2002), "*The New Carmen! ¡La Nueva Bizet!*" (2008), "*Love!*" and "*A Poem for All My People*" (2017) which was illustrated by Gabriela Rivero. You can find her books available on Amazon.com or Outwords Books.

What is Asexuality

(Continued from pg. 7)

Examples of Romantic Orientations (not an exhaustive list):

- **Aromantic:** individuals who do not experience romantic attraction toward individuals of any gender(s)
- **Biromantic:** romantic attraction toward males and females
- **Heteroromantic:** romantic attraction toward person(s) of a different gender
- **Homoromantic:** romantic attraction towards person(s) of the same gender
- **Panromantic:** romantic attraction towards persons of every gender(s)
- **Polyromantic:** romantic attraction toward multiple, but not all genders
- **Gray-romantic:** individuals who do not often experience romantic attraction
- **Demiromantic:** an individual who does not experience romantic attraction until after a close emotional bond has been formed. People who refer to themselves as demiromantic

may choose to further specify the gender(s) of those they are attracted to (e.g. demi-homoromantic).

In understanding identities and attractions, it is important to remember that orientation and attraction do not necessarily define or predict behavior. This is another important reason why it is important to ask people how they identify, as you cannot assume you know someone's identity based on their behavior. This also means that you cannot assume what types of relationships or behaviors a person will engage in simply by knowing how they identify.

Sexual identities and romantic orientations are not linked and therefore a person could be asexual, aromantic, neither, or both asexual and aromantic.

Many aromantic individuals may still desire relationships and experiences various types of attractions to others.

- One of these types of relationships is referred to as **queerplatonic** relationships (QPRs). Queerplatonic



Relationships (QPRs) are those relationships that are not romantic in nature but they involve very close emotional connections that are often deeper or more intense than what is traditionally considered a friendship. Since there is not adequate language to describe queer-platonic partners, some people refer to these partners as zucchini.

- **Squish** is a term used to identify aromantic crushes; the desire for a non-romantic/platonic relationship with another person.

Source: <https://lgbtq.unc.edu/resources/exploring-identities/asexuality-attraction-and-romantic-orientation/>



Resource Guide

A SHORT GUIDE TO LGBTQ + MILWAUKEE

TAVERNS

Art Bar ♦

Mixed bar with college-age crowd
722 E. Burleigh St.
Milwaukee, WI 53212
(414) 372-7880
<https://www.facebook.com/artbarmke>

DIX Milwaukee ♦

Southern Style Video/Dance Bar
739 S. 1st St.
Milwaukee, WI 53204
(414) 231-9085
<https://dixmke.com>

Fluid Milwaukee ♦

Gay Bar
819 S. 2nd St.
Milwaukee, WI 53204
414-Oh-Fluid/(414) 643-5843
<https://fluidmke.com>

Harbor Room ♦

Levis' & Leather Bar
117 E. Greenfield Ave.
Milwaukee, WI 53204
(414) 672-7988
<https://www.facebook.com/Harbor-Room-117-E-Greenfield-Ave-Milwaukee-WI-151982704821436/>

Hunty's Social Club ♦

Drag Bar inside
Hamburger Marys
734 S. 5th St.
Milwaukee, WI 53204
(414) 488-2555
<https://huntyismke.com>

Kruz ♦

Levis' & Leather Bar
354 E. National Ave.
Milwaukee, WI 53204
(414) 272-5789
<https://www.facebook.com/kruz.kruzbar>

La Cage Niteclub ♦

Gay Dance Club
801 S. 2nd St.
Milwaukee, WI 53204
(414) 383-8330
<https://www.facebook.com/LaCageNiteclub>

This Is It! ♦

Gay Bar with Drag Shows
418 E. Wells St.
Milwaukee, WI 53202
(414) 278-9192
<https://www.thisisitbar.com>

Walker's Pint ♦

Lesbian Bar
818 S. 2nd St.
Milwaukee, WI 53204
(414) 643-7468
<https://walkerspint.com>

Woody's Sports Bar ♦

Gay Sports Bar
1579 S. 2nd St.
Milwaukee, WI 53204
(414) 672-0806
<https://www.facebook.com/woodys.mke>

Zócolo Food Park ♦

Bar with food trucks, gay friendly
636 S. 6th St.
Milwaukee, WI 53204
(414) 433-9747
<https://www.zocalomke.com>

BUSINESS

C 3 Designs ♦

Custom Jewelry designer in South
Milwaukee, Wisconsin
2110 10th Ave.
South Milwaukee, WI 53172
(414) 764-3892
<http://c3designs.rocks/>

Oun Kine Grindz ♦

Hawaiian Cafe, caterer and store
7215 W. North Ave.
Wauwatosa, WI 53213
(414) 778-0727
<http://www.okgrindz.com>

Kilwins Milwaukee

LGBTQ-owned candy and ice cream
shop in Bayshore Mall
5756 N. Bayshore Dr., Q101
Glendale, WI 53217
(414) 967-4803
<https://www.kilwins.com/stores/kilwins-milwaukee-bayshore>

Outwards Books

Gifts & Coffee ♦
LGBTQ+ books, movies and gifts
2710 N. Murray Ave. #3645,
Milwaukee, WI 53211
(414) 963-9089
<https://outwardsbooks.com>

Purple Door Ice Cream ♦

LGBTQ-owned ice cream parlor with
unique flavors and treats
205 S. 2nd St.
Milwaukee, WI 53204
(414) 988-2521
<https://www.purpledooricecream.com>

com

Todo Postres LLC. ♦

Gay-owned and operated bakery
and dessert shop. Specializes in
unique cakes for quinceañeras,
weddings and pride events.
958 W. Oklahoma Ave.
Milwaukee, WI 53215
(414) 988-2149
<https://www.facebook.com/ToDoPostresOfficial/>

HEALTH

Sixteenth Street Community Health Centers

Community health center provides
discounted or free health programs
2906 S. 20th St.
Milwaukee, WI 53215
(414) 672-1353
<https://sschc.org>

BESTD Clinic

Free STI testing Clinic
1240 E. Brady St.
Milwaukee, WI 53202
(414) 272-2144
<https://www.bestd.org>

Community Health Systems, Inc. ♦

A federally qualified Health Center
that operates a medical, dental, and
behavioral health clinic in Beloit,
Wisconsin
74 Eclipse Center,
Beloit, WI 53511
tel: (608) 361-0311
www.chsofwi.org

Compassionate Clinical Services

Provides private therapy and
counseling services by Ryan Larkey,
LCSW, SAC
985 W. Oklahoma Ave.
Milwaukee, WI 53204
Planned Parenthood
(414) 839-1821
<https://www.compassionateclinicalservices.com>

Vivent Health (formally ARCW)

HIV/AIDS health center that pro-
vides medical, dental, counseling
and social service help
820 N. Plankinton Ave.
Milwaukee, WI 53203
(414) 273-1991
<https://viventhealth.org>

ADVOCACY

Cream City Foundation

Not-for-profit that funds LGBTQ+
outreach organizations
PO Box 511099
Milwaukee, WI 53202
(414) 225-0244
<https://creamcityfoundation.org>

Diverse & Resilient ♦

LGBTQ+ health and advocacy
group
2439 N. Holton St.
Milwaukee, WI 53212
(414) 390-0444
<https://www.diverseandresilient.org>

LGBT Center of SE Wisconsin

Community center with many
programs for LGBTQ+ groups
1456 Junction Ave.
Racine, WI 53403
(262) 664-4100
<https://www.lgbtsewi.org>

Milwaukee LGBT Community Center ♦

Community center with many
programs for LGBTQ+ groups
315 W. Court St.
Milwaukee, WI 53212
(414) 271-2656
<https://www.mkelgbt.org>

Wisconsin LGBT Chamber of Commerce

Networking and resources for
LGBTQ+ business
5027 W. North Ave.
Milwaukee, WI 53208
(414) 678-9275
<https://wislgbtchamber.com>

OTHERS

Central Library ♦

The main branch of The Milwaukee
County Library system has books,
movies, periodicals available for
lending.
814 W. Wisconsin Ave.,
Milwaukee, WI 53233
(414) 286-3000

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APRIL 9

Cultural Plant Walk with Angela Kingsawan

APRIL 10

Birding with Chuck Stebelton

Discovering the Urban Forest

APRIL 16

Dog Day

Practices of Presence
with Daniel Burkholder

Lynden by Night

FREE SOCIAL DISTANCE WALKING

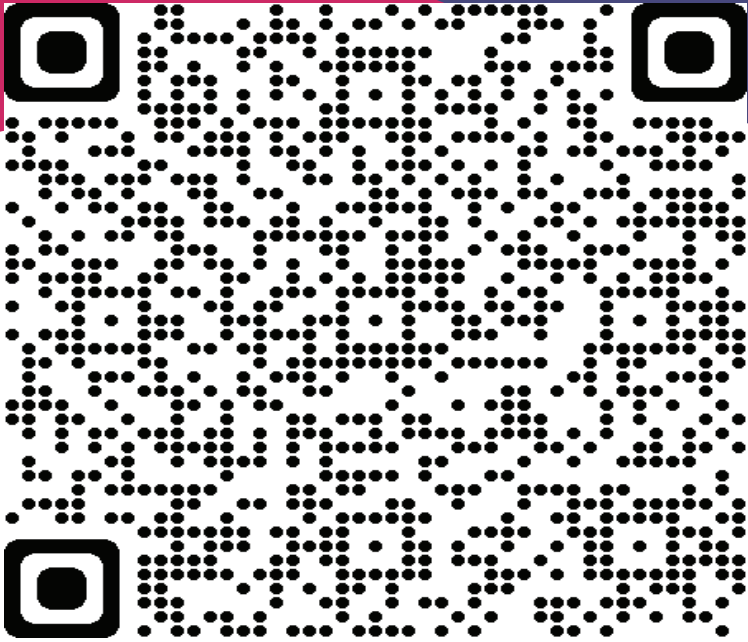
FREE Testing Pruebas GRATIS

Come visit us for our services:

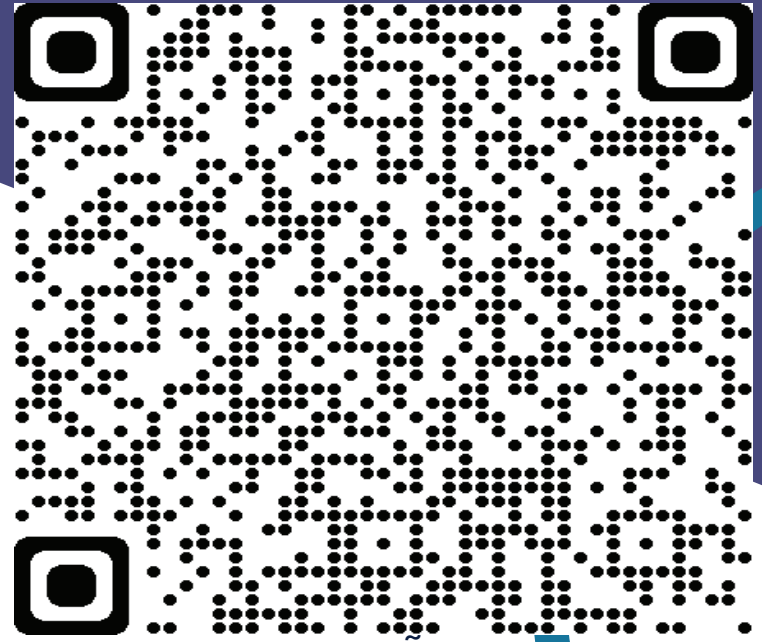
- Condoms and Safe Sex Kits - PrEP -
- Syringe Exchange - Narcan -

Ven a visitarnos por nuestros servicios:

- Condones y kits de sexo seguro - PrEP -
- Cambio de Jeringas - Narcan -



ENGLISH



ESPAÑOL

Scan the QR code to set a time to meet with us!
¡Escanee el código QR para hacer su cita con
nosotros!