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# *Brian J. Solem*

*writing samples*

# NEWS

## Are we all in this together?

May 28, 2020

“We’re all in this together.” It’s a phrase that has been embraced by companies, friends over phone or video, and even organizations like AIDS Foundation Chicago (AFC) amid the new coronavirus (COVID-19) epidemic. It’s meant to spark the feeling that, even in these difficult times, we are all here for each other, supporting each other, as individuals and governments and families and organizations.

But the recent murders of [George Floyd](https://www.nytimes.com/2020/05/27/us/george-floyd-minneapolis-death.html) (<https://www.nytimes.com/2020/05/27/us/george-floyd-minneapolis-death.html>), [Breonna Taylor](https://www.washingtonpost.com/nation/2020/05/11/family-seeks-answers-fatal-police-shooting-louisville-woman-her-apartment/) (<https://www.washingtonpost.com/nation/2020/05/11/family-seeks-answers-fatal-police-shooting-louisville-woman-her-apartment/>), [Nina Pop](https://www.advocate.com/crime/2020/5/06/trans-woman-nina-pop-stabbed-death-missouri) (<https://www.advocate.com/crime/2020/5/06/trans-woman-nina-pop-stabbed-death-missouri>), [Sean Reed](https://www.nytimes.com/2020/05/07/us/sean-reed-indianapolis-shooting.html) (<https://www.nytimes.com/2020/05/07/us/sean-reed-indianapolis-shooting.html>), and [Ahmaud Arbery](https://www.nytimes.com/article/ahmaud-arbery-shooting-georgia.html) (<https://www.nytimes.com/article/ahmaud-arbery-shooting-georgia.html>), by police officers and white supremacists remind us of the difficult truth under that candy coating: America isn’t built for togetherness, especially for Black Americans. America is a place built to keep whiteness at the top level of a hateful hierarchy, even in the midst of a national health crisis like COVID-19.

AFC can’t stand for this America anymore. To be in this together, we must do everything we can to toss a wrecking ball into the systems that preserve this racist hierarchy. We fight for racial justice and true equity across systems that were designed to keep us apart, not together.

We know the news this week isn’t the last time we will learn about a police officer murdering an unarmed Black man. The news this month won’t be the last time we hear that several white men killed a Black man and were protected from the justice they deserved for months. But we do know that action must be taken to do everything we can to stop the horrific crimes we have allowed to happen in our country.

**Please call the governor of Minnesota, Tim Walz, today to demand that justice be brought to the police officer who killed George Floyd. Together, our voices can continue to reverberate against the walls of our racist systems until they shatter under our pressure.**

*Office of Gov. Tim Walz: 800-657-3717*

*Email Gov. Tim Walz here (<https://mn.gov/governor/contact/>).*

### Recommended Articles

# NEWS

## Brick by brick, Stonewall paved the way for an effective response to AIDS

June 25, 2019

*This page is archived and may not contain current information or working links.*

*By Brian Solem*

Some say it started with a brick — a brick hurled at New York City Police Department officers by a trans woman of color (perhaps [Marsha P. Johnson](#)



(<https://www.usatoday.com/story/news/investigations/2019/03/27/black-history-marsha-johnson-and-stonewall-riots/2353538002/>), perhaps someone else). The brick (or high heel or shot glass or heavy bag or other projectile — [reports vary](#) (<https://www.nytimes.com/video/us/100000006322550/stonewall-lgbt-pride-anniversary.html?smid=pl-share>)) was a response to a violent, Saturday-night raid of the Stonewall Inn, a popular gay space in New York City in June 1969. That brick crashed not just through a wall of glass, or a wall of police officers, but through a wall that previous LGBTQ pioneers had worked very hard to overcome.

The Stonewall riots between police and an intersectional collective of queer Black and Latinx folks, transgender and gender-nonconforming people, and other members of the LGBTQ spectrum lasted on and off for days. The result: many arrests, hospitalizations and irreparable damage to the Stonewall Inn itself.

But in the days and weeks after Stonewall, the underground movements for gay liberation that had been simmering suddenly boiled over, taking greater action and growing their numbers. The work of the [Mattachine Society](#) (<https://www.chicagoreader.com/Bleader/archives/2018/06/22/what-i-learned-about-gay-pride-from-the-mattachine-society>), which had been advocating for LGBTQ inclusion for at least two decades before Stonewall, now had a radically visible counterpart in the fight. In the 50 years since that violent and unifying night in the East Village outside of Stonewall, the LGBTQ movement in New York City and

beyond has made giant strides in securing equity for this community. The bombastic tactics used at Stonewall and subsequent protests, actions and rallies became the right recipe for success in advancing LGBTQ rights.

Twenty years later, a new and terrible struggle came to light that affected mostly gay and bisexual men: AIDS. During the AIDS crisis of the 80s and 90s, a governmental and societal silence and shunning prevented immediate systemic action to research treatment for HIV and provide real, comprehensive support for the people who were dying from the virus. But on March 24, 1987, the HIV/AIDS movement had its own Stonewall: the AIDS Coalition to Unleash Power (ACT UP) stormed Wall Street and demanded that the U.S. federal government take the AIDS epidemic seriously and advance research and treatment for the virus ([see clips from this protest and subsequent actions of ACT UP here](#) (<https://vimeo.com/90722188>)). Like Stonewall, the protest relied on a tenacious, militant energy, which successfully turned the attention of the nation to a vital movement.

Stonewall's legacy pumps through the veins of the work of ACT UP and other movements that built a path toward acceptance, support and liberation for people living with HIV and AIDS. "Stonewall gave LGBTQ people a sense of the tremendous power they have as a collective and how focused anger can be used as a tool for change," reflected Kim Hunt, executive director of Chicago-based [Pride Action Tank](#) (<https://prideactiontank.org/>). (a project of the AIDS Foundation of Chicago). "Stonewall let people know that institutions could be toppled, at least for a moment. The act of physical rebellion, camp, performance as activism, speaking truth to power were all incorporated in the direct-action strategies of ACT UP."

"Because the LGBTQ movement was stronger after Stonewall, that really helped fuel a strong response to the HIV/AIDS crisis," observed Tracy Baim, a longtime Chicago journalist and founder of Windy City Times, the city's primary beacon of information for the LGBTQ community. Baim was an active documenter and participant in the HIV/AIDS movement of the 80s and 90s and now is publisher of the [Chicago Reader](#) (<https://www.chicagoreader.com/>). "Stonewall was an important predecessor and created a larger pool of activists, and a greater general understanding of LGBTQ people when it came time to respond to the crisis of HIV/AIDS. It provided foot soldiers in activism, and caregivers in the hospitals. We had a larger and stronger movement in place to be able to respond to this horror within, and to fight the ignorance and neglect from the outside."

Director of [Building Healthy Online Communities](#) (<https://www.bhocpartners.org/>). Dan Wohlfeiler was also at the front lines of the response to the AIDS crisis in the 90s. He ran programs at the [STOP AIDS Project](#) ([https://en.wikipedia.org/wiki/Stop\\_AIDS\\_Project](https://en.wikipedia.org/wiki/Stop_AIDS_Project)), in San Francisco from 1990 to 1998 (the project merged with the San Francisco AIDS Foundation in 2011). Looking back, he notes that Stonewall ushered in a new approach to resistance: bold radicalism, rather than the more restrained approach of groups like the Mattachine Society.

“The Stonewall riots really marked the beginning of a new era of open confrontation and radicalism in the fight for gay rights. In the eighties and nineties, we continued to see both kinds of organizing to fight HIV: Some in the HIV movement took a much more individual-focused, more client-based approach, and some mobilized and took on quite radical approaches to address some of the larger forces — a non-responsive government, poverty, racism, homophobia — that drive the epidemic.”

Stonewall contributed vital lessons learned to an American playbook for effectively protesting for human rights, which movements for equity, visibility and inclusion continue to contribute to today. It also created an emotional model for coming out publicly with very personal, very stigmatized news. Author and activist [John-Manuel Andriote](http://www.jmandriote.com/) (<http://www.jmandriote.com/>), noted, “The first gay men to go public about having AIDS acted from a place of gay pride and power that came after Stonewall . . . They likened ‘coming out’ about having HIV/AIDS to their experience of coming out as gay.”

Stonewall was one of many movements that inspired an effective response to HIV and AIDS in those early days; in addition to the civil rights movement for Black liberation, Tracy observed, “the women’s health movement of the 1970s also helped lead to a strong response on both a caregiver and a political level. Women were fighting back for control of their bodies, and women in the LGBTQ movement of the 1980s used that experience to help respond to HIV/AIDS. Men learned from their sisters, and all new activists learned from their predecessors to ‘fight back’ and ‘silence = death.’”

Reflecting on 50 years of advancement in LGBTQ rights since Stonewall, and almost 40 years of advancement in supporting people living with HIV and AIDS since the height of the epidemic, a multi-pronged approach to resistance and liberation can achieve the best outcome. Unfortunately, this is still an aspiration, not the rule. Kim observed, “When I think of Stonewall, I also think of the messiness that the LGBTQ community, writ large, still struggles with. With all those trans and nonbinary folks and street youth [who led the Stonewall riots], many of whom were people of color, prominently displayed in popular photos of the Stonewall riot, I think about how the most marginalized and targeted in our communities often have to push the more privileged within LGBTQ communities to act more visibly, show their anger and imagine bigger.”

## **Recommended Articles**

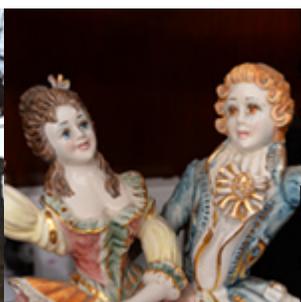
# NEWS

## A home for Nancy means more than a door and floor

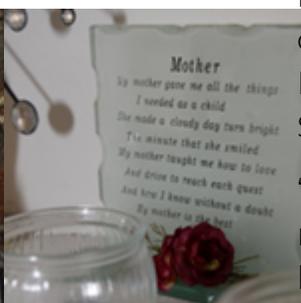
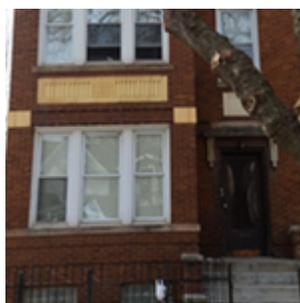
March 26, 2015

*This page is archived and may not contain current information or working links.*

“Home” has meant many things to Nancy. It has been a space for argument, for rejection, for abuse — and when she hasn’t had a home, Nancy’s life has been even worse. But today, Nancy has a home, and it has served as the foundation for her many life goals.

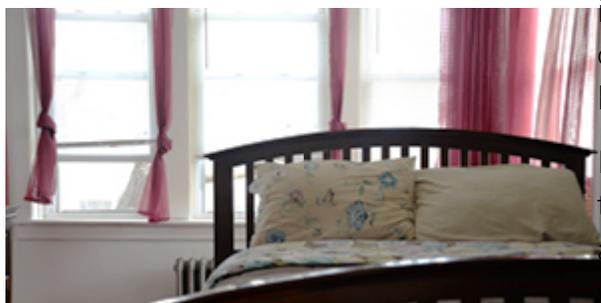


Nancy grew up at Grand and Damen on Chicago’s Near West Side; she left her childhood home after difficult times with her father and lived with her soon-to-be-husband, with whom she raised six children.

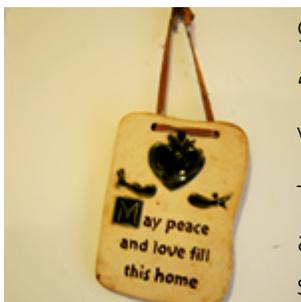


Over the years, she separated from her husband and was living on the streets. Her children were taken away from her by the Illinois Department of Children and Family Services. She was using drugs.

“I had no money, no nothing,” said Nancy, now in her kitchen, with springtime sun beaming through the window. “I was eating in churches and sleeping in parks and covering myself with boxes. It was pretty hard.”



Nancy was arrested and sent to prison for three years after defending herself physically against her ex-husband. She was diagnosed with HIV in 2000 after arriving at prison and getting an HIV test.



“That killed me. It attacked me even worse with my anxiety,” remembered Nancy.

The case manager she was connected with after emerging from prison in 2003 suggested she connect with the Housing, Health and Independent Living (HHIL)

Program, which serves single people living with HIV and pregnant, HIV-positive expectant mothers. She has been with the program since 2003.

“I know a lot of people who are homeless, and they do need programs like this.”

The HHIL program has turned Nancy’s life around. Now that she is a woman running her household, Nancy feels empowered. “It feels great, not only that I am taking care of my home, but I am paying my rent — something I couldn’t do since years back. This program has made me very responsible.”

She’s not the only one feeling empowered: 76% of households in the HHIL Program are led by women.

“This is the best thing that has happened in my life — besides being married and having kids!”

Nancy has lived in her two-bedroom home in Garfield Park for only a few months; she has moved every three years since she started in the program. But already, she is experiencing challenges with her apartment: there are rats and cockroaches and bedbugs; she is allergic to the carpet in her front room.

She also lives with the challenges that come from being HIV-positive, and she doesn’t feel comfortable telling her family about her status.

“I wanted to tell my family about it but I can’t, because it’s just me. But when I’m ready I will let them know, said Nancy. “They don’t know what I have because I don’t want them to judge me — they looked at their dad [after he died of AIDS-related complications] totally differently after they found out.”

Nancy has already lost her kids once, back in her darkest days; she doesn’t want to risk losing them again. Nancy’s family is her greatest source of joy; being with her nine grandchildren has especially helped her overcome her depression and feel whole again.

“Christmastime and Mother’s Day, those are special days when they all come over.” Her grandson runs into the kitchen from time to time, checking in on his grandmother, telling her he’s going to the park with his mom.

Nancy is very goal-oriented; already, she has achieved her greatest goal — getting her kids back from the state. Now, she’s focused on spending time with her four-year-old grandson; seeing her youngest daughter, who lives with autism; and getting her GED alongside one of her other daughters.

With her housing and medical needs secured, Nancy feels able to take on each new goal, one step at a time.

## **Recommended Articles**

# NEWS

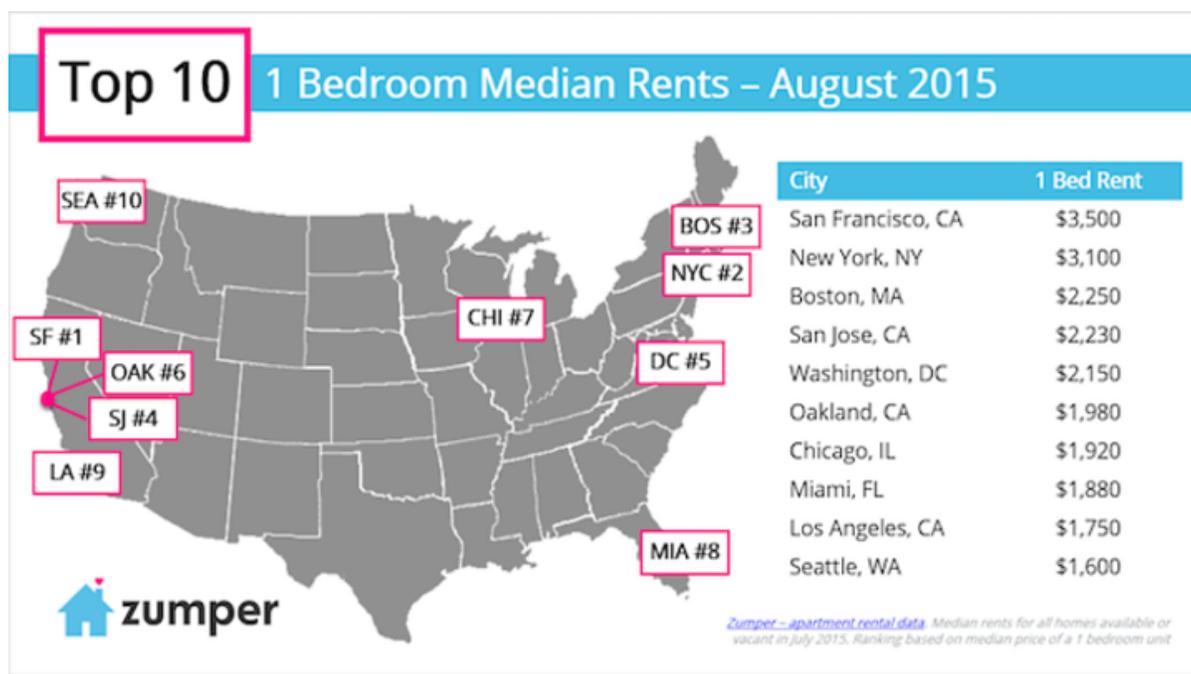
## Hey, America: your high rents are hurting people's health

January 17, 2018

*This page is archived and may not contain current information or working links.*

*By Brian Solem*

Housing and health are inseparably linked. You're more likely to be in consistently good health if your housing costs (rent or mortgage plus utilities, groceries and other household needs) take up a limited slice (30% by most estimates ([https://www.huffingtonpost.com/entry/rent-income-golden-rule\\_us\\_5706d315e4b0a506064eb434](https://www.huffingtonpost.com/entry/rent-income-golden-rule_us_5706d315e4b0a506064eb434))) of your overall budget. If you are barely making ends meet, your health might show it, and you become more susceptible to unstable housing or homelessness.



([https://www.huffingtonpost.com/entry/rent-income-golden-rule\\_us\\_5706d315e4b0a506064eb434](https://www.huffingtonpost.com/entry/rent-income-golden-rule_us_5706d315e4b0a506064eb434)).

Overall health is impacted by more than just your ability to receive health care," said Jessie Beebe, Director of Behavioral Health for the AIDS Foundation of Chicago. "It's all about the social determinants of health: environmental factors like a person's living conditions, community, income, transportation options, education and more."

A person's economic situation can determine their physical and mental health — regardless of their race or ethnicity. A 2012 study in the *International Journal of Health Services* found that health disparities between people of different races were eclipsed by the disparities existing between high- and low-income groups within each racial/ethnic group (<http://journals.sagepub.com/doi/10.2190/HS.42.4.c>). According to a Federal Reserve report on the economic wellbeing of U.S. households in 2016 (<https://www.federalreserve.gov/publications/2017-economic-well-being-of-us-households-in-2016-economic-preparedness.htm>), 36% of respondents earning \$40,000 or less went without some form of medical treatment. Only 23% of people with incomes between \$40,000 and \$100,000 and 9% of people making over \$100,000 said the same thing. Housing isn't the only reason someone might not get that cough or rash checked out, or refill their HIV meds before they run out, but it can have an impact.

But what does income have to do with housing? Housing is the most fixed item in a person's personal budget, which means it tends to get prioritized over all other recurring expenses that a person has to cover. Your rent and utility costs don't typically change too much from month to month — but they do seem to be rising for most Americans, to the point that you need to make \$21.21 per hour to rent a two-bedroom apartment ([https://www.citylab.com/equity/2017/06/rent-is-affordable-to-low-wage-workers-in-exactly-12-us-counties/529782/?utm\\_source=maplab&silverid=%25%25RECIPIENT\\_ID%25%25](https://www.citylab.com/equity/2017/06/rent-is-affordable-to-low-wage-workers-in-exactly-12-us-counties/529782/?utm_source=maplab&silverid=%25%25RECIPIENT_ID%25%25)), (on average — this is much higher in big cities!). If your rent is significantly higher than you can "afford," you're not living with a cushion for health expenses.

Picture Rae — a fictional single mom with two children living in Chicago making just \$10.75 per hour (the Chicago minimum wage) as a personal care aide. She'd have to work almost 80 hours a week to afford the average two-bedroom

apartment in Illinois according to this study.



## Healthy Housing:

Where Higher Rents Are Correlated With Worse Health

Choose State:  
Washington

Median Household Income  
\$14,375 \$155,639

Rent Affordability and Share of Renters Reporting Poor Health



Source: Zillow analysis of data from Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health, 500 Cities Project Data; the U.S. Census Bureau, American Community Survey, 2014; and the Zillow Rent Index (ZRI) by census tract.

(<https://public.tableau.com/profile/zillow.real.estate.research#!/vizhome/HealthyHousing/HealthyHousing>)

**The message from our friends at Zillow is clear: if you can't afford your rent, you're very likely to also have poor health. If housing were more affordable, people could spend more on doctor visits, medicine and healthier food and lifestyle choices. But as long as housing costs continue to rise, people's health will continue to decline. And if the Trump administration deprioritizes the needs of poor Americans (<http://www.newsweek.com/trump-plans-slash-welfare-spending-will-hurt-millions-poor-people-us-771204>) and enact policies that actually increase housing costs (<https://www.forbes.com/sites/samanthasharf/2018/01/09/what-in-the-final-tax-bill-could-impact-your-housing-costs/#4a98eddd2c08>), our health may experience a dramatic decline in 2018.**

What's the solution (besides burning capitalism to the ground and starting all over again)? Cities like New York, Los Angeles and San Francisco are making big moves to end homelessness and unstable housing by creating new homes for people who find themselves suddenly without housing. "Chicago just took a first step in the right direction by allocating \$1.8 million in the calendar year 2018 city budget for a flexible rental subsidy pool (<https://chicago.suntimes.com/chicago-politics/city-to-start-housing-pool-to-improve-services-to-homeless-residents/>), targeted to homeless people with chronic illnesses." Many people living at the edge of their

budget who experience a sudden financial catastrophe like the loss of a job or a health crisis may find themselves without a home. [Veronica, a real/working mom from Chicago who needed emergency housing assistance from AFC](https://www.aidschicago.org/page/inside-story/when-a-caregiver-cares-for-herself-too) (<https://www.aidschicago.org/page/inside-story/when-a-caregiver-cares-for-herself-too>), to save her family from eviction after she and her husband became sick, is one such person.

"When you give a person a stable home, they can think about their health," said Jessie. "They can have stability and safety that they didn't have before, and then have space in their brain to worry about going to the doctor and taking good care of themselves."

A home is reassurance. A home is strength and security. A home is a necessary ingredient in helping a person reach their full potential — in health and in life. Increasing wages, lowering housing costs and maintaining equitable approaches to providing health care for all (like the Affordable Care Act) can make a home possible for everyone.

### ***Next steps:***

What's the real cost of living in your area? [Find out using this Living Wage Calculator.](http://livingwage.mit.edu/) (<http://livingwage.mit.edu/>).

Sign up to take action with [the National Low-Income Housing Coalition](http://nlihc.org/page/sign-receive-nlihc-emails) (<http://nlihc.org/page/sign-receive-nlihc-emails>).

Learn more about social determinants of health through [this interactive infographic.](https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health) (<https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>).

Need a home or help keeping your home? [Learn about housing programs offered by AFC and other organizations.](https://www.aidschicago.org/page/i-need/housing) (<https://www.aidschicago.org/page/i-need/housing>).

## **Recommended Articles**

**[The importance of self-care for communities of color](#)**

**[Meet Abdul-Aliy Muhammad: a Black Queer Muslim HIV+](#)**

**[Censual Healing: Why LGBTQ+ folks need to get](#)**

# NEWS

## Fighting for Black liberation in Chicago

December 22, 2015

*This page is archived and may not contain current information or working links.*

*Maxx Boykin on stigma, Laquan McDonald and the end of state and community violence*

A steady fire is burning in Chicago. The flames of racial injustice have licked the edges of one of America's largest and most powerful cities since long before the Great Chicago Fire.

Almost one month ago, that fire was fed by the release of a video — a video showing one more example of police-led brutality against people of color in the city of big shoulders. Chicagoans have taken to the streets to call for resignations, for justice, for change.

Maxx Boykin is stoking those flames of action. He serves as a community organizer with the AIDS Foundation of Chicago (AFC) and Black Youth Project 100 (BYP100), which mobilizes youth to create justice and freedom for all Black people. Boykin leads communities to improve access to health care, end state violence, erase HIV stigma and liberate Black lives in Chicago and across the nation.

“What we’re fighting for is black liberation,” said Boykin. “That is something that has never truly been seen in this country, but something we’ve always been fighting for.”

AFC sat down with Boykin earlier this month to discuss the apparent coverup of the murder of Laquan McDonald and how it relates to the larger intersection of the movement for Black lives and HIV.



## AFC: You're from Stockbridge, Georgia, near Atlanta. What brought you to Chicago?

Boykin: I came up during the Affordable Care Act implementation and worked with Enroll America to do outreach and education. I helped get people signed up and helped keep them signed up. We touched in my region over 400,000 people. The

city of Chicago has a lot of people, and the South Side in particular [which was in Boykin's region] has a lot of uninsured, including in my neighborhood, Washington Park.

## **What inspired you to get into the health insurance arena?**

Health insurance was really important to me because I've seen how it impacted people's lives. My aunt, who had cancer for four years, was not able to get treated — not because she didn't know about the cancer, but because she couldn't pay for the treatment. And to see that happen made it really important to me. I also have seen people stigmatized and die from stigma of being a Black gay or bisexual man or being a person that's living with HIV and not get the help that's out there. People don't know about the treatment options out there — and that's why I thought this work was important.

## **You're also deeply engrained in Chicago's youth empowerment movement.**

Yes — I'm part of Black Youth Project 100. It's a group of activists and organizers throughout the country who are working toward Black liberation. We operate under a Black queer feminist lens, so that the most marginalized people in our community are uplifted. We do direct action to bring awareness of the wrongdoings of those who are in power — not just awareness, but to push those people of power to not just recognize the situation but to move forward on new legislation or hear from those people who are typically silenced.

## **In the wake of what appears to be a high-ranking cover-up of the now-infamous video of Laquan McDonald being shot to death by a Chicago police officer, what is BYP100 doing to fight back?**

We're putting the spotlight on the fact that [the city of Chicago spends 40% of budget on the Chicago Police Department](http://www.cityofchicago.org/content/dam/city/depts/obm/supp_info/2016Budget/2016Budg) ([http://www.cityofchicago.org/content/dam/city/depts/obm/supp\\_info/2016Budget/2016Budg](http://www.cityofchicago.org/content/dam/city/depts/obm/supp_info/2016Budget/2016Budg)) That means 40% of our taxes go toward funding the police, which is the city's largest agency, rather than Black futures. The city has taken away mental health clinics in the city, as well as child care, our school system, after school programs and

more. Those were taken away because of the failure of our state budget and the failure of our city to bulk up funding for those services, and then spend more money on programs like the police.

## **How does that disproportionate police funding affect Black communities?**

Increased police funding can amplify state violence. State violence then perpetuates community violence. For instance, if the state takes away money from a neighborhood or fails to invest in neighborhoods that are Black and communities of color by taking away schools, etc., and then continue to over-police Black lives, they are taking value away. They're taking away resources so people are doing things we consider illegal because they're just trying to survive. They're taking value away from those neighborhoods, because from the outside looking in, people don't see value, so then from the inside looking in people don't see value in the lives of people in their community and are just trying to do things to survive. If you're not doing anything to keep those communities safe, you are perpetuating community violence.

When we take away people's chance for success, then how is the state doing its job? And also in a city where Black people make up a third of the population and people of color make up two-thirds of the population, then the city as a whole is having an issue, because two-thirds of the people are not getting the resources they need.

## **Now that the video has been released, where do we go from here?**

The police must be accountable to the people. They have not been for multiple different reasons. If you look at the death of Laquan McDonald; if you look at the death of Rekia Boyd in 2012, there is a lack of accountability and justice.

Curtailing the powers of the entity that has continually oppressed people is a start. The U.S. Department of Justice and federal government should not have to step in when these problems happen. The city and Cook County should be able to say, "We are not going to let you be a police officer when you do these things; we are not going to let you run rampant against folks, and we will shut down these systems."

Over the last five years, Chicago Police Department officers have killed more people than any other city in the country. (<http://chicago.suntimes.com/news/7/71/821982/chicago-police-fatal-shootings>). The police officers that have killed or done wrong in this city must be dealt with. The majority of complaints against Chicago police officers come from Black people. Only 2% of those actual complaints end up in any type of reprimand against the

accused officers. Clearly, the systems in the police department have to change, and the people in charge of them need to change, because they have failed our communities on a regular basis.

## **One aspect of community violence is stigma, especially against people who are living with or vulnerable to HIV. How do you see stigma in the Black community around HIV and AIDS?**

Stigma killed my uncle, being a Black man who wasn't able to live a free life to be himself. As long as that is also a problem, then you also can fall into very risky behaviors because you're not allowed to be your full self. Stigma was one of the reasons that HIV and AIDS weren't treated earlier, and we've also seen that perpetuated in our own communities where people aren't able to be themselves. What are we doing to have a support group for people who are going through these different things?

And then people aren't getting tested for HIV; they're like, "oh, if I'm getting tested for HIV I must be gay and doing risky things, let me not ever get tested." That's how we have many people who do not know their status. If we continue to stigmatize people around it, people won't be free to deal with those things. AND if we keep criminalizing people with HIV, then people can be like, "well, I'd just rather not know [to avoid prosecution for HIV-related crimes]."

## **What can be done to change that?**

Having more transformative and less stigmatizing sexual education is a good starting point, but also continued sex education. I think you should start sex ed very young but also continue it on through high school and college.

I was talking to one person at a conference, and he said when he came out to his mother, she said, "I don't want you to get HIV and die." As we know, HIV is not a death sentence, but that's not what their parent thought. There's been a lot of changes and new technologies since then, including highly advanced treatments to allow a person living with HIV to live a near-normal lifespan and prevent almost any chance of transmitting the virus.

## Where can an organization like the AIDS Foundation of Chicago and its projects, like Pride Action Tank and HIV Prevention Justice Alliance, play a role in ending state violence?

We are embracing the fact that ending the HIV epidemic is part of greater social justice issues. Our Policy and Advocacy team is developing a health equity framework to find ways in which our work intersects. HIV and AIDS is part of a greater movement for a complete health justice. Health is a social justice issue, and HIV and AIDS as an epidemic has grown in the Black community because of those social and economic determinants of health. If you don't have jobs or hospitals in your neighborhood, it's hard to live a healthy lifestyle. So we're coming together to build paths toward health justice. So we're talking about getting people proper housing and jobs, attacking stigma, making sure that people who are trans have easier access to change their IDs, making sex safer in prisons — these are all things that can lead to better health in communities.

## What can individuals do to support Black liberation?

We need to speak up when we see wrongs in communities. We need to consider how state violence affects everyone, especially young Black queer people. We must hold people's hands to the fire when necessary and let those in power know when things aren't right. We have to make sure that the police are accountable to civilians. We need to build communities where people can speak up when they see wrongdoing.

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