



NALGAP *Reporter*

NATIONAL ASSOCIATION OF LESBIAN AND GAY ADDICTION PROFESSIONALS

SERVING THE LESBIAN, GAY, BISEXUAL, AND TRANSGENDER COMMUNITIES SINCE 1979

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NALGAP NATIONAL GOES REGIONAL!

In the fall of 2005, NALGAP will be well represented at two important regional conferences. From September 29th through October 2nd, NALGAP members Cheryl Reese, Emily McNally, Dana Finnegan, and Joe Amico will present workshops at the Cape Cod Symposium on Addictive Disorders in Hyannis, Massachusetts. They will also hold a meeting for those NALGAP members (or members-to-be) in the area who would like to get together.

Then, Joe Amico of Alternatives, Inc. of Los Angeles and Joe Neisen, CEO of New Leaf Services for Our Community in San Francisco will present at the California Association of Alcoholism & Drug Abuse (CAADAC) 24th Annual Conference in Sacramento, California from October 6-9. Their banner headline reads-- CAADAC Congratulates NALGAP for 25 Years of Serving the GLBT Community And Welcomes you to Sacramento for NALGAP's First Western Regional Conference.

These conferences are exciting steps toward the realization of NALGAP's dream of being a national organization with strong regional representation and activity. There was a time, early in NALGAP's history, when we had regional chapters in New Jersey, the Midwest, California, and New York. Over the years, these chapters faded from view although NALGAP national remained strong and vital.

Now, in our 25th year, NALGAP is beginning to revive the dream of regional representation.

CAPE COD & CAADAC CONFERENCES

The Eighteenth Cape Cod Symposium on Addictive Disorders: "Hot Topics & Controversial Approaches: Challenging a New Generation" will occur on September 29, 30 & October 1, 2, 2005 at Four Points by Sheraton Hyannis Resort, Hyannis, Cape Cod, MA

The Symposium will offer over fifty workshops to be conducted by a faculty composed of nationally and internationally known presenters as well as those less known who have their own unique contributions to make. As in the past a special reduced weekend registration will be available for the non-clinician. Register prior to August 29, 2005 to be eligible for the substantial Early Bird Discount!

For more information: visit ccsad.committee/18th/

CAADAC's 25th Anniversary Conference, Celebrating Professional Diversity, will be held October 6-9, 2005 at the Marriott Rancho Cordova in Sacramento, CA. At this conference, CAADAC will sponsor NALGAP's first Western regional conference. In addition, Dr. Claudia Black will speak at the Fellows Pre-Conference and a wide variety of presentations-- Diverse Populations; Personal & Professional; Medical Aspects; & Support & Family Systems--have been planned. CAADAC is pleased to have Joe Amico, NALGAP President; and Joe Neisen of New Leaf Services presenting workshops during the conference. For more information. see: www.caadac.org or call Danalee Lavelle at (916) 368-9429

NALGAP CORNER

Submitted by: Joe Amico, President, NALGAP
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NALGAP provides information, training, networking, advocacy, and support for addiction professionals, individuals in recovery, and others concerned about LGBT health. The NALGAP board and members will be busy this summer and fall assisting other counselors to understand the special needs of LGBT clients. If you need some CEU's, want to learn more about LGBT issues, or just want to connect with NALGAP members, here are some of the places you can hear NALGAP members speak:

Joe Amico will present the Frank Boudewyns Memorial Lecture at the 2nd UK/European Symposium on Addictive Disorders, May 19-21, 2005 in London (<http://www.ukesad.org/>)

On June 18th, Joe Amico will present on "The Quadruple Diagnosis in Gay Men: Depression, Substance Abuse, Sexual Compulsivity and HIV" at the 11th Annual Lesbian and Gay Psychotherapy Assoc. Conference in West Hollywood, CA.

Cheryl Reese is on the faculty of the Rutgers Institute of Alcohol and Drug Studies, July 10-15 at Rutgers University, Piscataway, NJ.

Edwin Hackney will conduct a one-day workshop, "Treating LGBT Clients," at the Kentucky Summer School of Alcohol & Other Drug Studies on July 20th at Northern Kentucky University.

Ralph Rynes is doing a one-day workshop, "HIV: The Alcohol and Other Drug Connection" for South Carolina's 301 commissions, July 22nd.

Gail Milgram, Director of the Rutgers School of Alcohol and Drug Studies, has invited Phil McCabe to present a 6-hour mini-course on LGBT substance abuse issues over 4 days, August 1-4, from 3:45 P.M. to 5:15 P.M. each day.

Nancy Kennedy and Rodger L. Beatty will present a repeating 90 minute workshop at the Wisconsin State Drug and Alcohol Prevention Conference on August 11th in Wisconsin Falls. Its title is, "Where Are We Headed? It's Enough to Drive You to Drink: LGBT Substance Abuse Prevention." This workshop will examine a 50 year history on the role and use of alcohol and tobacco in the lesbian and gay community.

Cheryl Reese, Joe Neisen, and Joe Amico will speak at a plenary of the Gay and Lesbian Medical Association in Montreal, Quebec, September 20-22nd.

Emily McNally, Dana Finnegan, Cheryl Reese and Joe Amico will present at the Cape Cod Symposium on Addictive Disorders, Hyannis, MA, September 29th through October 2nd.

Joe Neisen of New Leaf Services for Our Community in San Francisco and Joe Amico of Alternatives, Inc., Los Angeles will present at CAADAC's 24th Annual Conference, October 6-9, Sacramento, CA.

In the late fall, from November 30th-December 1st, SECAD will once again host the annual NALGAP "Conference Within a Conference in Atlanta.

For more information on these offerings and NALGAP resources, visit our website at www.nalgap.org

NALGAP Members: If you do any LGBT-specific presentation, PLEASE let us know.

REPORT ON THE 3RD ANNUAL PROVIDENCE (R.I.) SUMMIT ON ADDICTION.

By: Phil McCabe, NALGAP Vice-President, who represented NALGAP at the Summit.

Leaders in the addiction field gathered in Providence, R.I., again this year to refine ideas around a national

campaign to change attitudes and actions about drug and alcohol addiction.

On May 10th and 11th, 65 advocates and experts from across the country representing 49 groups brainstormed ideas for getting the general public, healthcare providers and political leaders and policymakers to view addiction as one of the nation's most pressing health priorities. Some of the groups represented included NCADD, The Johnson Institute, NAADAC, Join Together, NAATP, Hazelden, APHA, SAMHSA, CSAT, AA, Alanon, National Council on Problem Gambling, ICRC, Carron Foundation, ASAM, Physicians and Lawyers for Nat'l Drug Policy, ONDCP and several treatment provider research associations and university groups.

Although participants did not agree on all points during the 2005 Summit, many of them acknowledged a sense of dedication established at the two earlier summits, to come together as a national force.

Collectively the power of the summit was monumental. Many individuals associations and groups such as NALGAP have worked for many years to help eradicate the stigma associated with alcoholism and drug dependency. The goal of the summit has been to unify a very diversified field around a common goal to create a Public Campaign to elevate addiction.

Some successful public health campaigns were reviewed by several presenters. Lessons learned in HIV/AIDS, Breast Cancer awareness and other public health programs helped to clarify the process of creating a national effort. Ginna Marston, EVP. Director of Program Development, Partnership for a Drug Free America, discussed the research basis for key themes and messages. She showed some very moving new Public Service Announcements that her group will be releasing. Strategy also includes partnership, funding and developing a realistic time line as reviewed by Hampton Shaddock, of Burson-Marsteller an award winning PR firm.

NALGAP's presence among other national leaders was indicative of the progress we have made. "I believe it's important that NALGAP continues to expand our national presence with other leaders in the field," affirms Phil McCabe. "And we will continue to carry our message."

NALGAP's twenty five plus years of advocacy for LGBT individuals give us positions equal to those of other national leaders. Our association will continue to advocate about addiction and related problems and provide support for those engaged in the health professions, individuals in recovery, and others concerned about the health of gender and sexual minorities.

ANNOUNCEMENTS

THE AMERICAN CANCER SOCIETY PUBLISHES 3 BROCHURES ABOUT LGBT TOBACCO-RELATED HEALTH CONCERNS

The American Cancer Society (ACS) has published three new full color, fact-based educational brochures about tobacco-related health concerns among lesbian, gay, bisexual, and transgender people. Small quantities are free on request; cost recovery prices for large quantity orders are shown following each title:

Item #2025 Tobacco and the LGBT Community
\$.06 per copy in quantity

Item #2039 Cancer Facts for Gay and Bisexual Men
\$.0764 per copy in quantity

Item #2041 Cancer Facts for Lesbians & Bisexual Women
\$.0788 per copy in quantity

To request brochures, contact your nearest ACS office. Call 1-800-ACS-2345 or visit www.cancer.org to locate the ACS office serving your area.

Please note: ACS does not maintain publications that are not actively utilized so you are encouraged to place orders for these landmark brochures and to urge your constituents to do so as well.

2005 BLACK GAY RESEARCH SUMMIT (AUGUST 3-5, 2005)

"UNTYING TONGUES: BLACK GAY MEN IN RESEARCH, SERVICE AND SCHOLARSHIP"

Background

The Black Gay Research Group (BGRG) is a network of Black gay men of diverse personal and professional backgrounds whose mission is to create, promote, implement, and maintain a research agenda for the self-actualization of gay men of African descent. In this, our second (national) gathering on the future agenda of research for, to and about Black gay and same gender loving men, we are seeking individuals who have produced cutting edge and innovative information around the issues of Black gay males to serve as presenters and facilitators at our upcoming summit. In particular, we are seeking people who have an interest in presenting information regarding work and/or research conducted by, for and on behalf of Black gay males.

Why a Black Gay Research Summit?

One of the major initiatives of the Black Gay Research Group is to begin to fill a void with regard to the absence of other research and program interventions about Black MSM. Our intent is to broaden our scope of research to include an array of issues that impact the lives of Black MSM that are not HIV specific. The 2005 Summit will provide a forum for participants to learn and exchange information about research and work being conducted by and about Black Gay men; create linkages and collaborations among Black gay agencies and programs; and provide a platform for government agencies and community based organizations to discuss resource barriers.

The Summit will be organized around the following tracks:

- * Empirical Research: qualitative or quantitative studies either completed or have emerging data
- * Literary Works: use of fiction & nonfiction accounts of BGM experiences in various formats, e.g., film, novels
- * Organizations & Community Works: community based interventions with potential replication in other community settings
- * Cultural Studies: cultural studies methodologies as they relate to BGM
- * Education: educating self & others: past, present, future.

Access the Web site at: www.blackgayresearch.org for additional abstract details and regularly updated conference information including registration. For additional information contact: Howard Lee by phone: 718-230-0770 ext. 226; fax: 718-230-7582; or e-mail: howard@pocc.org

UPDATED DIRECTORY OF DRUG, ALCOHOL ABUSE TREATMENT PROGRAMS AVAILABLE

Forwarded by: George Marcelle

The Substance Abuse and Mental Health Services Administration's (SAMHSA) updated guide to finding local substance abuse treatment programs is now available. The National Directory of Drug and Alcohol Abuse Treatment Programs 2005 provides information on thousands of alcohol and drug treatment programs located in all 50 states, the District of Columbia, Puerto Rico and four U.S. territories.

The directory includes public and private facilities that are licensed, certified, or otherwise approved by substance abuse agencies in each of the states. It provides a nationwide inventory of substance abuse and alcoholism treatment programs and facilities in a state-by-state format for quick-reference by health care providers, social workers, managed care organizations, and the general public. This latest SAMHSA directory provides a listing of more than 11,000 community substance abuse treatment programs.

The directory is designed to quickly provide the reader with important information on levels of care and types of facilities, including those with programs for adolescents, persons with co-occurring substance abuse and mental disorders, individuals living with HIV/AIDS, and pregnant women. It also identifies both long and short-term residential treatment facilities and facilities that provide residential beds for clients' children.

The updated directory complements SAMHSA's internet-based Substance Abuse Treatment Facility Locator. This service, which is updated continuously, provides road maps to the nearest treatment facilities, as well as addresses, phone numbers and information on services available. For information, see website:

<http://findtreatment.samhsa.gov>

To obtain a free copy of the National Directory of Drug and Alcohol Abuse Treatment Programs 2005, contact SAMHSA's Clearinghouse or call (800) 729-6686.

SAMHSA RELEASES "KNOW YOUR RIGHTS" BROCHURE

[All-Inclusive Guide Informs Those in Recovery from Alcohol or Drug Problems About Legal Rights and Overcoming Discrimination]

The Substance Abuse and Mental Health Services Administration (SAMHSA) has introduced a new brochure for people in substance use disorders treatment and recovery, their allies, advocates, and employers. "Are You in Recovery from Alcohol or Drug Problems? Know Your Rights" provides information about federal laws that protect against discrimination in employment and job training, housing, health care, education, and government services and programs.

Written in partnership with the Legal Action Center, "Know Your Rights" brings a wealth of

information about federal laws to people in recovery. The brochure is.

Sponsored and produced by SAMHSA's Center for Substance Abuse Treatment, this one-of-a-kind resource, which is available in both English and Spanish, helps people identify discrimination, addresses federal laws and protections, and provides useful resources.

To obtain the brochure, or for more information, call (800) 729-6686 or on the web at

www.ncadi.samhsa.gov.

FIRST NATIONAL CONFERENCE ON METHAMPHETAMINE, HIV AND HEPATITIS

Submitted by: Michael Shernoff, LCSW
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The conference is scheduled for August 19-20, 2005 in Salt Lake City, Utah. Michael Shernoff reports that, "The Plenary agenda has just been posted and the conference looks awesome. The breakout sessions will be equally exciting. Check out the details at: <http://www.harmredux.org/>"

SIECUS LAUNCHES COMMUNITY ACTION KIT

Submitted by: Phil McCabe

SIECUS has been advocating for sound policies and programs relating to sexuality education for over 40 years. We understand that this is not always an easy task. This new resource can help!

The Community Action Kit is designed to serve as a tool for all advocates whether they are students, parents, teachers, school administrators, health professionals, youth-serving professionals, policymakers, or concerned community members. It provides advocates with the tools they need to become knowledgeable about sexuality education, build support in their state or community, work to implement sound poli-

cies, and institute or defend an effective comprehensive sexuality education program.

Web visitors can download the entire kit free of charge or just print the pieces they need. Visit www.communityactionkit.org

THE FOURTH NATIONAL GAY MEN'S HEALTH SUMMIT SET FOR OCTOBER 19-23, 2005 IN SALT LAKE CITY

Forwarded by: George Marcelle

The National Gay Men's Health Summit is a grass-roots movement that relies on the shared work gay men are doing all over the country. The Summit is an opportunity to meet and discuss challenges and successes with our peers.

The summit will include speakers, panels, workshops, pre-summit institutes and organizing meetings. It will also include interactive exercises, experiential education activities, yoga and other forms of self-care, and creative festivities.

The summit will cover the broadest possible spectrum of gay men's health. We are currently soliciting and encouraging presentations on such diverse topics as: health promotion for gay men of color, crystal methamphetamine use, prostate cancer, heart disease, HIV, aging, self-care, creating sustainable community organizations, fitness, obesity, changes in gay cultures in response to the increasing centrality of cyberspace, and special health issues facing leathermen, bears, sex workers, and club kids.

[For more information and a workshop proposal form, visit: www.ngmhs2005.com]

PRESIDENT'S LETTER

Despite the fact that air travel has increased the ability for people to zip back and forth across the country and the world, addiction professionals find it more difficult to get to national confer-

ences these days. Agencies are not providing the kind of funds for Continuing Education and travel that once was a staple in our field. Individuals find that salaries don't keep up with increased costs and are not able to take the time off from work without pay to attend such conferences.

NALGAP is a small national organization and we believe it is important for us to stay in touch with each other. One way to stay in touch has been this newsletter. However, nothing seems to replace that one to one contact and support when we can gather together at a conference, attend sessions together, ask each other questions, hear wonderful and challenging presentations and then socialize before heading home.

The Board of Directors has struggled with making our conference available to as many members of NALGAP as possible along with a host organization that will assist us in putting on a quality conference. Last year's conference with SECAD offered an incredible opportunity for presentations. Because we were in a new area, we had new and old members attend who had never attended a NALGAP conference before.

The Board then struggled with location versus ability to put on great conferences. How can we maximize the number of NALGAP members who can access a conference and our ability to attract new members? We think we've come up with a winning combination for 2005.

This year we will have two regional conferences in addition to our Annual Conference at SECAD. SECAD has been more than gracious by inviting us back for 2005 and our Chair, Michael Ralke, is busy working on exciting presentations for that gathering. In addition, we've decided to accept the Cape Cod Symposium's standing invitation to participate in their conference by holding a North East Regional Conference during their September gathering. We received a request to present at the California Annual Conference for Alcohol and Drug Abuse Counselors in October. We accepted and will hold a Western Regional NALGAP gathering during that Conference!

So, you have THREE opportunities to gather with other NALGAP members to hear about NALGAP's

work, get CEU's, and meet others in your area. Please make plans now to attend one of these three great events. If you are not able to get to one of these conferences, please write and tell us where you'd like us to plan a 2006 gathering.

Joe Amico,
President

AMA AND GLMA ANNOUNCE COMMITMENT TO INCLUDE LGBT ISSUES IN HEALTH DISPARITIES EFFORT

WASHINGTON -- Officials of the American Medical Association (AMA) emerged from a March meeting with the Gay and Lesbian Medical Association (GLMA) with a commitment to fully include the health concerns of gay, lesbian, bisexual, and transgender Americans in the AMA's work to eliminate health disparities.

AMA leadership said it will seek to expand the scope and focus of the Commission to End Health Care Disparities launched earlier this year. The Commission has focused primarily on addressing disparities based on race and ethnicity. GLMA asked the AMA to help expand the scope of the Commission to include disparities experienced by GLBT people.

In 2004, the AMA House of delegates approved an advisory committee to address GLBT concerns.

"We are grateful for the AMA's willingness to fully engage in a discussion about GLBT health issues and look forward to continued cooperation to accomplish our mutual goal of a healthier America" said GLMA Executive Director Joel Ginsberg.

CDC TO STUDY MEN WHO HAVE SEX WITH MEN 'ON THE DOWN LOW'

*Forwarded (courtesy of Bryan Elrod) by:
George Marcelle*

SAN FRANCISCO - The federal Centers for Disease Control & Prevention is in the midst of studies to examine how men who have sex with men but consider themselves heterosexual may be spreading HIV among black women, the *San Francisco Chronicle* reported. Because of the secret sexual habits of these men, who often are black men who have sex with other men "on the down low" and maintain publicly that they are heterosexual, the rate at which they may spread HIV to female sexual partners is difficult to measure, but five CDC studies will examine how many white, black, Asian and Hispanic men are on the down low and other characteristics of this group. Health officials have found that most black women with HIV said they were infected via heterosexual contact, but it is unclear how their male partners were infected, according to the newspaper.

<http://washblade.com/2005/5-13/news/healthnews/>

Note: Each issue of the Newsletter will present excerpts from writings by NALGAP members.

"Healing from 'Spiritual Abuse': Assisting Gay and Lesbian Clients"

By Joseph M. Amico, M.Div., CAS, CSAC in *Addiction Professional*, September, 2003, pp. 18-20.

I entered the addictions field as a chaplain in an adolescent substance abuse unit. Working there prepared me for my later work with gay, lesbian, bisexual and transgender (GLBT) clients. I formed an understanding of what I call "spiritual abuse." Spiritual abuse occurs when a person's spirit, or ways a person practices spirituality, has been attacked. Many of my early substance abusers refused to go to 12- Step meetings because of the "God" talk. They would argue that they had such terrible memories of Sunday School, church, or other religious activities that there was no way they would subject themselves to that kind of negativity again.

I quickly learned that we needed to distinguish between religion and spirituality. . . . I emphasize that if

they are able to see the difference between the two, they are more able to work a program of spirituality.

Those who have such negative feelings about religion may have to go about the process of healing from spiritual abuse in order to work a 12-Step program. To ignore spiritual abuse is the same as ignoring sexual, physical or emotional abuse as a part of the healing process. Most of us who are experienced in this field recognize that unless we work on the whole self, including physical, sexual and emotional, a person cannot stay sober. I believe we need to add “spiritual” to that list. A person with a damaged soul cannot be a healthy whole person. I began applying the principles of what we know about sexual and physical abuse to spiritual abuse. First of all, we have to name it: spiritual abuse. I invite clients who have had negative experiences with their religion of origin to consider what happened as spiritual abuse. Next, name the abuser: the name of the denomination, the local church, clergy person, parents, whoever it was for them.

Depending on the severity of the abuse, clients may need assistance in working through the anger and hurt of what happened—before the healing process and rebuilding of a spiritual program can begin. I remind clients of the program cliché, “Take what you can use and leave the rest.” There may be aspects of that religion of origin you can use in your new spirituality, but you don’t have to believe it all.

GLBT clients are especially vulnerable to spiritual abuse. When they hear comments such as “homosexuality is a sin, an abomination; sodomizers are condemned to hell” coming from the pulpit, they experience spiritual abuse. Who someone is at the core of their existence is their spirit. Being gay, lesbian, bisexual or transgender is at the core of someone’s existence. These struggling recovering persons know that sexual orientation is not a choice. If it were, they would have taken the easier way long ago. They have struggled with their identity, and often that

struggle is what has led them to addictive patterns and behaviors.

The shame of not being what their family and religion of origin told them they should be has caused them to hide behind alcohol, drugs, sex, gambling, spending, workaholism, or other compulsive behaviors. We cannot expect persons who have been so brutally wounded in spirit to welcome a 12-Step program based upon spirituality with open arms! We need to recognize the effects of spiritual abuse, help the people we serve name it, and assist them in finding a spirituality that works for them. For some, they will be able to “take what they can use and leave the rest” by going back to their religion of origin. For others, they will need to explore other forms of spirituality and will need our assistance in finding those resources.

For those GLBT clients who desire to stick with their religion of origin, I offer information on local groups that have identified themselves as welcoming of GLBT folks without judgment and in full participation. Many mainline denominations have national programs that local churches may use to identify themselves. Examples are the Open and Affirming Churches (United Church of Christ and Disciples), More Light Churches (Presbyterian), Welcoming and Affirming (American Baptist), Reconciling Congregations (United Methodist), Reconciled in Christ (Lutheran), Supportive (Brethren and Mennonite), Oasis (Episcopal), Affirming (United Church of Canada), Inclusive (Great Britain), and Welcoming Congregations (Unitarian-Universalist).

For those who do not have welcoming churches in their denomination or who just want the experience of going to a predominantly GLBT church, I recommend looking in the GLBT newspapers for the GLBT-identified churches. The largest GLBT denomination is the Universal Fellowship of Metropolitan Community Churches. There also are a growing number of non-denominational GLBT churches.

Sometimes I give my clients the assignment of attending one of these churches just so they have the experience of being in a predominantly gay environment that is not a bar! GLBT clients are apt to tell their

counselors, “But the only place I can meet people like me is at a bar.” When I give them the assignment to go to an MCC or other predominantly GLBT congregation, they often say, “But I’m not religious.” I tell them I want them to go and experience a large group of GLBT people who are there to celebrate who they are (their spirits). They don’t have to sing hymns or pray the prayers. Just sit and take it in.

For those who want alternatives to traditional Judeo-Christian congregations, there are growing options as well. The Radical Fairy Movement in the GLBT community has its roots in paganism. Paganism is a positive spirituality that appeals to those clients who want a program based upon nature. Again, Pagan groups can often be found in the alternative newspapers of a community or through more traditional groups such as the Unitarian-Universalist Fellowships.

Challenge your clients to look in newspapers or online to find a group that matches their needs or expectations for a spiritual program. Ancient Native American spirituality has risen in popularity among some GLBT folks in the last two decades. The attraction is the way most Native American tribes incorporated what we would call GLBT persons into “normal” tribal life. They were often honored for their unique talents and skills..

I have worked with clients who have found serenity in their spiritual quest by turning to Buddhism, Zen, Tao, and The Church of Self Actualization, just to name a few others. I tell them it’s not necessary to be religious to work a program of spirituality, but it certainly doesn’t hurt to have a supportive community to combat the isolation of addiction.

In summary, it is important to recognize that GLBT clients may have experienced spiritual abuse and may need help in identifying such action as abuse in order to find ways to heal and work a spiritual-based program. Even my clients who are not in 12-Step based programs benefit from working through these issues. I always ask during my intake questions, “In what religion

were you brought up?” I then ask, “Are you active in any religion/spirituality now?” Their responses assist in developing treatment plans on these issues. Assisting clients in finding a healthy spirituality is an important component to full recovery.

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