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Sex, love, friendship, belonging and place: Is there a role for ‘Gay Community’ in HIV prevention today?

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Abstract

The decade since highly active anti-retroviral therapy (HAART) arrived has been a time of change for gay men in the West. HIV incidence rates have been levelling off—and in some cities, increasing markedly—for the first time since the early years of the pandemic. New sexual subcultures have found expression, including Internet chat rooms, ‘poz-only’ sex parties, ‘barebacking’ and crystal methamphetamine use. These circumstances force a re-evaluation of HIV prevention targeting gay communities. We examine the antecedents of current HIV-prevention dilemmas in findings from a qualitative study of gay men who were personally and professionally engaged in HIV/AIDS in Sydney, Australia, in 1997–1998, immediately after the ‘protease moment’. The men’s lives were characterized by constant and difficult negotiation of gay subjectivities. They did not find a place of uniform belonging in the gay community; rather, ambivalence—toward the gay community and HIV prevention—and fragmentation emerged as themes. Our findings suggest that by the late 1990s, the ethos of safe sex developed in the early HIV/AIDS period was no longer a unifying cultural value. We explore the conditions that led to this shift and the implications for HIV prevention in the 21st century.

Résumé

La décennie qui s’est écoulée depuis l’arrivée des thérapies antirétrovirales puissantes représente une ère de changements pour les hommes gay dans les pays occidentaux. L’incidence du VIH s’est stabilisée à un niveau élevé – et dans certaines villes, elle augmente nettement – pour la première fois depuis les premières années de la pandémie de sida. De nouvelles sous cultures ont trouvé des espaces d’expression, dont les forums de discussion sur Internet, les partouzes « réservées aux séropos », le « barebacking » et l’usage du « Cristal ». Ces circonstances obligent à une réévaluation de la prévention du VIH en direction des communautés gay. Nous examinons les antécédents des dilemmes actuels dans la prévention à partir d’une étude qualitative qui a porté sur des hommes gay, engagés aux plans personnels et professionnels dans la lutte contre le sida à Sydney, en 1997–98, immédiatement après « l’avènement des antiprotéases ». La vie de ces hommes était caractérisée par une négociation constante et difficile des subjectivités gay. Ils ne trouvaient pas d’espace d’appartenance uniforme dans la communauté gay, mais plutôt de l’ambivalence – envers la communauté gay et la prévention du VIH – et une fragmentation qui émergeaient en tant que thèmes. Nos résultats suggèrent que vers la fin des années 90, l’ethos du sexe sans risque développé au cours de la première période de l’épidémie de sida, n’était plus une valeur culturelle unificatrice. Nous explorons les facteurs qui ont amené ce changement et leurs implications pour la prévention du VIH au 21^{ème} siècle.

Resumen

La década desde que se introdujo el tratamiento antirretroviral de alta eficacia ha demostrado ser un momento de cambio para los hombres homosexuales en occidente. Las tasas de incidencia del VIH se han equilibrado y en algunas ciudades han aumentado marcadamente, por primera vez desde los primeros años de la pandemia. Las nuevas subculturas sexuales han encontrado cómo expresarse, por ejemplo a través de las salas chat en Internet, las fiestas sexuales ‘sólo para seropositivos’, ‘penetración anal sin preservativo’ y uso de cristal de metanfetamina. Estas circunstancias nos obligan a reevaluar la prevención del VIH entre las comunidades homosexuales. Aquí analizamos los antecedentes de los actuales dilemas de la prevención del virus del sida en los resultados de un estudio cualitativo de hombres homosexuales que tuvieron una relación personal y profesional con el VIH/sida en Sydney, Australia, en 1997–98, inmediatamente después del ‘momento de la proteasa’. Las vidas de los hombres estaban caracterizadas por una negociación constante y difícil de las subjetividades homosexuales. No hallaban un lugar de pertenencia constante en la comunidad homosexual, sino que más bien surgieron los temas de la ambivalencia hacia la comunidad homosexual y la prevención del VIH, y la fragmentación. Nuestros resultados indican que a finales de los noventa, la ética del sexo seguro desarrollada a principios del periodo del VIH/sida dejó de ser un valor cultural unificado. Aquí analizamos las condiciones que desencadenaron este cambio y las implicaciones que esto tiene para la prevención del VIH en el siglo XXI.

Keywords: *Australia, gay men, HIV prevention, sexual subjectivity, social constructionism*

Introduction

HIV and AIDS have long been configured in the West as a problem intrinsically connected to gay communities. In turn, the lives of gay men have been connected with the science and politics of HIV/AIDS since the detection of HIV infection among gay men in the USA in the early 1980s. Central to this connectedness is the idea of ‘gay community’, manifested in communities of gay men in the West marshalling their members to control the epidemics in their midst. Early in the epidemic, these efforts became a dominant feature of daily life expressed in gay media, arts and culture, and in institution-building in the form of gay community-based AIDS service organizations (ASOs).

Now, ten years after the introduction of highly active anti-retroviral therapies (HAART), the pronounced success in HIV prevention experienced in many gay communities in the West seems to be unravelling. In various countries, behavioural monitoring has shown a steady increase in unprotected anal intercourse, particularly with casual partners (Van de Ven *et al.* 2000, Chen *et al.* 2003, Elford *et al.* 2004). Several studies demonstrate subsequent increases in HIV incidence, which had been falling steadily until the mid-1990s (Dukers *et al.* 2002, Hall *et al.* 2003, Macdonald *et al.* 2004, Lampinen *et al.* 2005). Concern about these increases has led researchers to investigate likely contributing factors, from safe sex ‘fatigue’ and increased use of recreational drugs such as ‘crystal’ methamphetamine, GHB and ecstasy to optimism about the effectiveness of HIV treatments (Van de Ven *et al.* 2000, Wolitski *et al.* 2001, Elford *et al.* 2002).

In the public health literature of the late 1990s and early 2000s, there is a sense that the terrain is shifting; that the risk calculus assumed to animate safe sex behaviour has changed amidst new medical and cultural realities (Hurley 2003, Kippax and Race 2003). Indeed, the dissolution of ‘safe sex culture’ has been postulated, exemplified by new assertions about sexual freedoms and irresponsibility in activities such as ‘barebacking’¹, the sexual potential of the Internet (Carballo-Diequez *et al.* 2006, Davis *et al.* 2006), sero-sorting (Elford 2006, Mao *et al.* 2006), confusion about ‘undetectable’ viral load due to medication (Rosengarten *et al.* 2000) and, in some cities, a rise in ‘bareback’ or ‘poz-only’ (i.e. for HIV-seropositive men only) sex parties (Clatts *et al.* 2005). Often, in this research and in

the public debates surrounding them, gay community ASOs have been accused of failure, of their own fatigue, and have been asked to re-group to tackle rising infections and increasing unprotected sex. Indeed, a new kind of moral panic about gay culture has emerged, mostly from inside these very communities, because, for the first time since the pandemic began, gay men were talking publicly and affirmatively about sex without condoms.

These arguments about unravelling sexual safety mostly employ a social understanding of how sexuality works. However, the dominant paradigm of public health research in HIV/AIDS—epidemiological analyses of risk behaviours—does not usually address the socially constructed nature of sex practices and sexual identities (Parker and Aggleton 2007). Epidemiologists, policy-makers and gay community-based institutions have largely taken for granted notions such as gay community, ignoring the complex and improvisational nature of gay men's social relations and sexual subjectivities. Understanding the conflicts and inconsistencies in gay men's interactions with each other and with their community institutions requires a paradigm shift—a shift not only in epidemiological renderings of risk, but even in more social perspectives on gay men's health.

In thinking about the current prevention crisis, it is important to consider the ongoing and enduring contribution of the construct of gay community and its problems. We therefore returned to data first collected in Australia in 1997–1998 that had already suggested another way to understand how gay community—as a construct and as a culture—might be implicated in these shifts in the pandemic. Entitled 'Gay Men's Culture "Post-AIDS" and Constructs of Community in Health Promotion', the study examined HIV-prevention programmes, particularly the meanings of gay community deployed therein. The study then assessed whether a shift in the symbolic meaning of gay community was taking place and if, in practice, a fragmentation and multiplication of gay men's responses to HIV/AIDS was occurring as earlier evidence suggested (Dowsett 1996a). The study also identified some of the ways that the meanings, practices and institutions of gay life were adjusting to the extraordinary, ongoing challenges of HIV/AIDS—a process we believe continues in the contemporary shaping of the pandemic in the new millennium.

Background

In Australia, the public health response to HIV/AIDS was uncommonly swift and successful. Initial grassroots responses among gay men were followed quickly by innovative institutional planning and a coordinated national strategy (e.g. Commonwealth of Australia 1989, 1996, 2005). Australia's epidemic never spread substantially beyond gay men and, therefore, has been even more indelibly linked to ideas of 'gayness' than in other places. When the first case of AIDS was reported in Australia in 1982, Sydney was home to the largest and most visible gay community in the country. In the 1970s era of gay liberation, gay and lesbian activists had been successful at reducing some of the barriers excluding them from civil society. They soon mobilized those same resources and skills to create and implement a grassroots response to the early epidemic, creating a 'safe sex culture' (Dowsett 1990)—not simply by a significant shift in sex practices but through a community-wide and shared set of values and understandings. The growing epidemic compelled gay men to demand direct political participation as a community. Subsequently, the emerging national HIV/AIDS strategy also mandated that the gay community play a central role in HIV prevention and care, thereby incorporating specific conceptualizations of community into institutional practice (Reynolds 2002, Sendziuk 2003). Similar responses were developed elsewhere (see Altman 1994, Rofes 1996, Watney 2000).

From 1985, almost all HIV prevention among gay men was produced and delivered by gay community-based ASOs funded through the national HIV/AIDS strategy (Couch *et al.* 1999). However, by the early 1990s, Australian HIV educators were among the first to challenge the core messages of HIV prevention. They recognized that for many gay men condom use in every sexual encounter—the cornerstone of safe sex culture—was not a practical long-term adaptation. At the XI International Conference on AIDS in Vancouver in 1996—at which the successes of HAART were first noted—Australian educators reported on a prevention campaign based on the concept of ‘negotiated safety’, a term coined by social researchers to describe the practice of unprotected anal intercourse between concordant HIV-seronegative partners in regular relationships (Kippax *et al.* 1993). This controversial approach acknowledged the nuance and complexity of sexual communication and the adaptations that living in an epidemic were imposing on gay men’s sexual and social relations. That Australian approach led to considerable international discussion about HIV prevention then. In turning to a later body of social research from Australia in this paper, we re-visit quandaries being pondered quite early on to seek possible antecedents to the prevention crisis we see today. We believe that Australian experience might again have implications for current prevention dilemmas elsewhere.

Theoretical framework

The present study used four key problematics to frame the analysis: (1) the concept of ‘sexual subjectivity’; (2) the idea of ‘doing gay’; (3) the socially constructive nature of sex practices; and (4) the notion of ‘post-AIDS’.

Sexual subjectivity. We use ‘sexual subjectivity’ to describe the processes of understanding oneself within a specific culture and history (e.g. as ‘gay’), shared in common with like others to bind experiences and understandings into a sexual culture—a form of sociality in which the sexual is foundational. Powerful social forces work at producing this sexual subject, and individual subjectified persons must also work to make continuing sense of themselves as sexual beings. Commonly, this agency to make sense of, claim and express one’s sexuality has been captured by the psychological construct of ‘sexual identity’, a construct that has become the rhetorical cornerstone binding gay communities. Yet, identity categories themselves have been criticized as insufficient for capturing the dynamics of gay sociality (Weeks 1995, Dowsett 1996b). In academic and popular usage, sexual identity is often deployed in ways that ignore the social nature of meaning-making and the cultural contexts in which identities function. Sexual subjectivity moves beyond the process of identity formation to incorporate the evolving values, changing systems of meaning and ongoing social relations in which sexual behaviours and their dynamic contexts are embedded.

Doing gay. Gay men are ‘doing gay’, that is, constructing mutual understandings of gayness, through their social, professional and domestic practices (Dowsett and McInnes 1996). Sexuality requires a certain kind of reflexivity, an ongoing self-scrutiny and appraisal of circumstance, as gay men find value in the pursuit of forbidden, illegal or ‘sinful’ pleasures (Sedgwick 1993, Plummer 1995, Weeks 2000). Even after ‘coming-out’, doing gay is an ongoing, life-long process of positioning oneself in relation to ideas of gayness, for example, in shared understandings through sexual and social life, e.g. in the gay press, art,

performance and in the institutional practices of HIV/AIDS programmes. Following Butler (1990), doing gay is 'performative'.

The socially constructive nature of sex practices. We noted earlier that Parker and Aggleton (2007) observe that HIV/AIDS research usually neglects cultural and political dimensions in the shaping of gay men's sexualities. The centrality of desire, intimacy and pleasure in gay men's social relations and the development of gay communities have been similarly ignored. This study set out to explore the ways in which sex practices and other forms of sexual expression are building blocks of larger patterns of social relations. We assert that sex is socially constructive, as well as being socially constructed, i.e. situated within the demands of structural relations (Connell and Dowsett 1993).

Post-AIDS. The term 'post-AIDS' describes a dynamic of fragmentation and multiplication in gay communities' responses to their ongoing epidemics. It suggests not an end to the pandemic, but a phase of its development in which cultural responses and pedagogic interventions formed in the 1980s were beginning to lose salience. 'Post-AIDS' is used here to capture the diversification of gay men's strategies for understanding and living their lives in relation to HIV/AIDS. 'Post-AIDS' describes the multiple standpoints from which gay men experience and understand HIV/AIDS and how these are evolving over the course of the pandemic. Although the development in treatments following the introduction of HAART is one of many factors shaping 'post-AIDS' cultural responses, particularly for HIV-positive people, the term is not intended to describe a 'post-crisis' era of the HIV pandemic. While 'post-AIDS' was originally devised to describe the Australian experience (Dowsett 1996a), the concept was subsequently explored in the USA by the late Eric Rofes (1998).

Methods

This study emerged from a concern that gay community—a concept constantly evoked throughout institutional HIV-prevention discourse in Australia (and elsewhere)—had not been adequately defined or operationalized as a living, complex, social entity. A second concern was to observe the ways in which HIV educators mobilized notions of gayness and gay community and how they understood their work in relation to actual gay communities. Finally, the study set out to explore the social patterns of gay men's lives as far more complex and wide-ranging than a simplistic notion of gay community could contain. The study encompassed several qualitative methods of data collection across three geographically distinct sites and took a comparative form of critical ethnography (Foley and Valenzuela 2005). For reasons of length, this paper is limited to the sub-set of the data gathered through one of these methods (in-depth, semi-structured interviews, described below) in one site (inner Sydney). Thus, the discussion of the study's methods here is limited to that which is relevant to the analysis we are presenting. A detailed discussion of the study's full methodology has been published in Dowsett *et al.* (2001).

Theoretical sampling procedures (Strauss and Corbin 1990) were used to construct a sample from three clusters of gay men, which we termed 'frames', drawing on the idea that these men's lives and experiences were partially bounded, or framed, by both distinct and common social forces. The idea for these frames emerged from earlier research (Dowsett 1996b, 1997) and they were designed to draw on the experience and expertise of particular

categories of gay men. Frame one consisted of HIV/AIDS 'educators' with professional experience in ASOs serving gay men. Frame two included 'performers' who enacted and represented constructions of gay community in their work and included entertainers, journalists and activists. Frame three was composed of 'gay men' from the community at large, whose experiences of gay community were in many ways shaped by the activities of those in the first two frames. Although not mutually exclusive, each frame brought a particular perspective to the inquiry.

Participants were recruited through ASOs and gay media. Those in the third frame were primarily recruited by 'snowballing' from these sources and via Internet advertising. Of the study's 72 in-depth, semi-structured interviews, 24 were conducted with the inner Sydney sample (20 individual and four group interviews). Of these 20 individual interviewees, eleven were with educators, five with performers and four with gay men. Of the four group interviews conducted in inner Sydney, two consisted of educators and one each of performers and gay men, with 23 participants in all. While some topics were explored with all three frames, others were specifically tailored to the frame in question. Interview guides for the group interviews were designed with each frame in mind, based on the pre-existing social or institutional relations binding the participants. The audio-recorded interviews were conducted by study staff in ASO offices and some participants' homes. These recordings were later transcribed and verified and formed the basis for analysis with other material collected by the study.

The study's participants were purposefully recruited in relation to these frames and the study's fields of inquiry and, as is not unusual in critical ethnography, were not selected according to a sampling frame based on sociodemographic characteristics. That said, the participants comprise a broad spectrum of men living and working in inner Sydney. Of the twenty men who participated in the individual interviews, seven were in their twenties, eight in their thirties, three in their forties and one in his fifties. All twenty resided in the Sydney metropolitan area. In terms of occupation, the sample was weighted toward public sector and community service professionals, a natural outcome of the study's goals and recruitment strategies. Five participants worked as front-line staff at ASOs; another five were ASO supervisors; four worked in the community or mainstream media; two in the performing arts; three in non-AIDS-related professions; and one owned a small business. Five were HIV-positive, thirteen were HIV-negative and two did not reveal their status. The sample was split by relationship status: twelve participants were in regular relationships; eight were single. Less-detailed information was obtained from the group interview participants. Two groups consisted of ASO staff of various ages, several of whom were HIV-positive. In the third group, all the participants were HIV-positive, while their ages and occupations varied. Finally, all the participants in the fourth group were ASO volunteers of various ages and occupations, all of whom were HIV-negative. In summary, all study participants had connections to HIV/AIDS as a gay community issue, either through their paid or volunteer work, their HIV status and/or other gay community associations, sufficient to provide diversity and depth of experience within our three sampling frames.

For this paper, we conducted a thematic analysis of the individual and group interview transcripts from the inner Sydney sub-sample of 43 participants in total.² We prepared case summaries for each transcript that identified and developed themes and then integrated the themes further upon completion of subsequent summaries. The analysis developed through an iterative process in which data were continuously reviewed and processed in relation to our theoretical framework. This reflexive process allowed us to develop the themes through

our own collaborative reading of the material, rather than by indexing the text itself with coding software.

How does gay community operate?

The findings are presented here in three main themes: the first concerns gay men's ambivalence toward gay community; the second focuses on social and professional relations within the gay community's response to HIV/AIDS; and the third explores gayness as work—doing gay. The notion of 'post-AIDS', with its analysis of fragmentation and multiplicity, lies behind these three themes as an underlying dynamic.

Ambivalence toward gay community. One of the most immediate findings to emerge was the multiplicity of meanings attributed to gay community. Study participants used strong descriptive words to characterize gay community, reflecting mixed emotions. Randy (educator) called inner Sydney's gay community 'diverse', 'confusing' and 'powerful'; Jon (performer) said it is 'dynamic', 'funny', 'bitchy', 'alienating' and 'empowering'; Stephen (performer) described it as 'great, good, awful, horrendous, fantastic, joyful, depressing, sad—all of those things. It's life'.³ While often appearing contradictory, such descriptions reveal the complex and multiple ways of living a gay life in late-1990s Sydney.

Many participants stressed the actual gay community was a geographic space, a gay neighbourhood. Referring to the main street running through Darlinghurst,⁴ Randy said, 'You walk up and down Oxford Street and if you're a queen you can spot all the queens'. Bart (educator) emphasized the social and political use of public space, defining community as:

A lot of gay people living in an area where they can clap together, so they can get together and have political clout, and where they can have gay bars and where they can have saunas [bathhouses] and where they can have social events and they can get together and fight for rights, that sort of thing.

Bart was joined by several other participants who identified the 'gay ghetto' with feelings of pride and free expression. Instead of 'place', others stressed the necessity to identify with a social group. Jamie (educator) said:

You can live right in the middle of Darlinghurst and feel completely unrelated to the gay community at all. I think the gay community, like most communities, is more of a sense of belonging than an actual thing.

Each of these perspectives highlights an act of interpretation, suggesting that community itself is a collective process of constructing meanings, not all of which are shared.

Several participants registered ambivalence towards a changing community participation through the life course. This narrative often took the form of remembering the resolution of one's coming-out experiences as a young man. After years of struggle with his sexual identity, Ian (performer) recalled feeling relief during his first visit to Darlinghurst: 'It was like... This is where I belong. This is, you know, it's like home'. Similarly, Jon (performer) remembered his first Mardi Gras as emotional fulfilment:

I felt this amazing tingle down the back of my spine, a feeling that at last everything was okay... For me, gay community is about trying to recapture that experience or maintain that feeling, foster that.

Others shared Jon's drive to 'recapture' that first feeling of acceptance, but found it difficult to do so. Although Alex (educator) found Sydney's gay community 'exciting and different' at first, he reported growing bitterness and a feeling of exclusion. Many participants contrasted the 'gay scene' to the 'gay community' with conflicted feelings. For example, Larry (gay man) noted that many find the scene 'heartless' and 'cold'.

The participants also reported negotiating the stigma and discrimination that are still deeply embedded in Australian society, but did so in relation to gay cultural understandings and expectations. Rick (educator), an Indigenous Australian, reported racial stigma that shaped his feelings of exclusion from gay culture at certain times. Alex, the son of immigrants, also reported feeling distanced from gay culture because people perceived him as a 'dirty wog'.⁵ Unlike Rick and Alex's narratives of marginalization, other participants reported active disengagement from gay community. Geoffrey (gay man) positioned himself 'on the fringes', choosing the particular forms of gay culture he liked (e.g. reading 'gay novels' but not attending drag shows). Andrew (performer) belonged to multiple peer groups, some of which he identified with the community while others were outside it, which meant that, when sailing or mountaineering, the gay aspects of his life were largely irrelevant. Like Andrew, Marco (educator) worked in the HIV-prevention field but preferred dance parties in which being gay was merely one point of reference: 'I just don't like the normal gay crowd'. Clearly, for some men, being gay was not sufficient to guarantee 'membership' of gay community.

Throughout these narratives, the participants describe living gay lives as a creative and enduring struggle to belong, in which compromises are made between sexual interests, lifestyle preferences, career trajectories, personal backgrounds and histories, and imperatives of Australian culture. For these men, sexual subjectivity is not coterminous with gay community; indeed, both individually and in sum, their responses to gay community are characterized by a distinct sense of ambivalence.

Social and professional relations within the gay community's response to HIV/AIDS. Contested relations within gay community also operated in the professional lives of those participants working in the field of HIV/AIDS. Here, constructs of gayness and gay community are mediated by institutional responses to the epidemic, as well as personal imperatives. Harry (educator) observed the compulsion to belong as a motivation for community involvement. He said, 'They're getting place: in other words, "my place in the gay community". It's a need they've got, to have an identity or be a player'. Andrew called this the 'dedication to fight the good fight, if you like'. Simon and David (performers) were among those who remarked that becoming HIV-positive altered their careers: both were influenced to work more closely with gay community and HIV causes. Others described where they worked as institutions in which gay men's knowledge was valued. One group interview participant referred to 'using gay' as a legitimate professional practice; others preferred to think of gayness as 'performance' rather than 'skill'.

At the time of these interviews, HIV educators in Australia were re-evaluating their work in reaction to the realization that safe sex messages were losing salience among many gay men. One group interview participant experienced this as a tension between 'community values', perceived as shifting, and the core prevention messages, which remained constant. Another said: 'There's clearly some big shift in gay men's sexual behaviour. We don't understand what's going on...The emphasis [is] on...the need to reconnect with gay men, the responses that they're operating and the stories they're telling'. Alan (educator) led efforts to redefine the mission and practices of his large ASO, confiding: 'There is a sense of

dislocation and disengagement and disconnectedness now'. These accounts implied the nature of the educator/constituent relationship had shifted. One group interview participant argued that:

If you got a group of gay men and said, 'What do you want out of community?' and they said, 'Sex, love, friendship, belonging and place', and then said, 'What don't you get out of community?' 'Sex, love, friendship, belonging and place'. HIV wouldn't get mentioned and we need to deal with those issues and put HIV in our community dealing with those issues.

A major shift operating at the time of the study was the transformation of ASOs from grassroots activist to bureaucratic institutions. Some participants observed this process as a shift in the ownership and types of knowledge that were granted legitimacy. One group interview participant recalled the focus on identity in his early career:

When I first got involved in education [in the mid-1980s], who I was was absolutely integral to what we understood. And having people, having a highly motivated community around you [meant that] then your understandings and what you yourself brought to that were continually challenged.

During the 1990s, however, community attachment took on different meanings in professional settings that had become more sophisticated and bureaucratized. For example, another group interview participant observed that the understandings that formed the basis of his agency's programming were: 'one level removed...They come from other people, like researchers or educators. They don't come from the constituency'. Lay people's experience was no longer privileged in what is, in retrospect, an inevitable consequence of bureaucratization. The same participant continued: 'I think we are having a discussion now in the gay community about unsafe sex, whereas a few years ago there may not have been any space to do that. So, in fact, it may not be an increase in unsafe sex but an increase in talking about unsafe sex'. As ASOs became more sophisticated, the separation of 'researchers or educators' from the 'constituency' confused participants who characterized the early gay community response as a unified effort. One group interview participant warned, however, of false nostalgia, noting that HIV education may have never functioned clearly and consistently in relation to shared understandings of gay community: 'I think a lot of that mess has always been there and I don't think we've ignored it'.

Contemporaneous with bureaucratization was an embracing of biomedical treatment successes, which was highlighted in the participants' perceived loss of purpose at ASOs. Alan believed that reliance on medical expertise weakened the role of education as a cultural intervention: 'The medicalization of AIDS which is happening in the, in the political sector um, is spilling over into the educators too. They are beginning to see the solution of all of AIDS problems as the pills'. While the availability and delivery of medical treatment were testament to the gay community's political success in ensuring access to services in Australia, this had the unintended effect of alienating many from the fight against AIDS as a community project. The interpersonal commitment that had earlier galvanized the community's sense of common purpose in the early days has been replaced by institutional chains of command in public and community-based health bureaucracies (see Kippax and Race 2003). This sense of disconnectedness from the fight against AIDS was found in each sampling frame, not just among educators. While Stephen (gay man) recalled: 'I mean AIDS is a horrific thing but it certainly did a lot to bring the gay community together', Barry (gay man) lamented: 'We just don't think about it much any

more. It's like having your leg cut off, ten years later you don't worry about not having a leg'.

Some educator participants were uniquely positioned in relation to this disconnectedness both as professionals and as gay men; they also registered the ambivalence they saw in their own and others' lives toward the issue of sexual safety. One group interview participant reported a pattern he observed among his peers: 'If you're constantly bombarded by safe sex messages, you tend to think that therefore people must know about them. Therefore, do I really have to tell this guy I'm about to pick up [that] I only want to have sex with a condom?' Other participants spoke explicitly of breaking their safe sex rules. Alan was unique among educator participants in his combination of expertise in management and in reflexive sexual adventuring. He observed:

The actual gestures of the body and the dick towards penetration without a condom are happening earlier in the sex act and happening um, more frequently with different partners. Um, and the gestures for protection are kind of accepted, but, um, come after the gesture for non-protection. If you let the gesture for non-protection go, then you'll, then you'll fuck without a condom—and I have at various times.

Here, Alan challenges the pedagogic imperative of safe sex culture. In noting a change in his own behaviour, he offers a sense of sex practices as interpretive and constructive of new cultural forms. He also exemplifies more of the contingency and evolving struggle in doing gay—in this instance, in the act of sex itself.

Doing gay...but which gay? Throughout the many ways these men are 'doing gay', continuity and the need to belong sit uncomfortably with exclusion and resistance. The gay community is a setting that men are coming into as they are coming out of the closet. For many men, the hope of finding a new home in the gay community is dashed, leaving them to see the community as, in Larry's words, 'a lover who has rejected them'. Some participants expressed their ambivalence toward gay community in ways that were consistent with the knowledge and experience of their evolving sexual interests. While recognizing that there have always been sexual sub-cultures within gay communities, several men noticed that sex practices in particular were diversifying, leading to new sub-cultures and a lack of cohesiveness. Alan believed that the greater visibility of gayness and gay culture generally in the 1990s led to 'a more exploratory approach to their sex and to relating', expressed in sex parties.

Other participants felt that the gay communities were actually splitting into smaller scenes and groups, and the sense of loss was unsettling. George (educator) observed a growing lack of cohesiveness:

People are now forming smaller communities, smaller groups within the wider community and often when that happens, you get a breakdown in support, understanding, tolerance.

He mentioned 'leather queens', 'drag queens' and 'older men' as groups that often did not mix, resulting in marginalization. These groups were not new additions to inner Sydney's gay cultural milieu, yet George thought the bonds between them were eroding. Other participants noted their discontent with, and cynicism toward, safe sex as a community ethic. Harry (educator) observed: 'I think that's, kind of, a new kind of adult delinquency that we're going through, you know, "Yeah, I have unsafe sex, so what are you going to do about it?"' Note the hint of rebellion.

This loss of salience of HIV-prevention messages is best understood in relation to uncertainty about gay community participation generally. The participants often spoke of gay community in the negative: that which I am not and do not do. Even those whose social and professional lives were situated in the geographic and cultural centre of gay Sydney tended to position themselves at the margin of gay community. Yet, gay community was invoked continually and therefore emerged as a robust epistemological construct. Whether by 'learning the rules' or rejecting a 'scene', the men in this study engaged in a constant negotiation of sexual subjectivities in which the 'idea' of gay community remained a potent force.

The term 'post-AIDS' was originally coined by the second author in 1995 to provoke discussion about this fragmentation of gay men's responses to AIDS and to the development of multiple standpoints from which to understand the epidemic. There has also been a parallel development of new sexual sub-cultures. Maffesoli (1996) uses the term 'tribes' to describe contemporary sociality in which 'micro-groups' based on emotive bonds are increasingly formed and practised. Among the members of a tribe, rituals are central to the performance of social meaning: 'At the same time as the aspiration, the future, and the ideal no longer serve as a glue to hold society together, the ritual, by reinforcing the feeling of belonging, can play this role and thus allow groups to exist' (Maffesoli 1996: 140). For gay men, the rituals of collective expression build historically from their social relations and sex practices—a field encompassing such diverse elements as S/M sex clubs, political activism, 'bears night' at the pub and techno dance parties, etc.—and take new and unexpected forms. The Internet has also emerged as a major tool for constructing new sex practices and social relations among gay men; it facilitates new 'tribal' patterns. The study's findings suggest that in 'post-AIDS' Sydney, the logic of organizing socially into tribes, particularly, but not only, based on particular sexual interests, may supersede the late 20th century mobilization of gay community. We would argue that this transformation is not specific to inner Sydney's gay community, but may be found elsewhere, not just in Australia.

Conclusion

The structural forces and personal experiences of HIV/AIDS pose specific challenges, demanding a reinterpretation of bodily sensations, personal relationships and ways of knowing and doing gay. The study's fortuitous location at a turning point in gay history allows us to see these challenges shifting in relation to understandings of gay community halfway between the 'protease moment' and growing concerns about increased HIV incidence in established gay communities in the first years of the new century. The study participants' perception that collective purpose has given way to uncertainty and fragmentation is especially striking among those who worked in HIV prevention. Andrew's 'dedication to fight the good fight' remained salient, as did the need for 'getting place', Harry's term for the need to belong that fuels community participation. Yet, while the motivation to pursue these careers remained clear, the connection between HIV-prevention practices and gay community values was becoming less certain. Alan noted the 'disconnection and disengagement' between his ASO and the broader community; another professional educator said simply: 'We don't know what's going on'.

The time in which the study's interviews were taking place coincided with internal debates in many ASOs about changing priorities and constituencies. These bureaucratized

organizations and the behavioural models dominating HIV prevention in the late 1990s lacked the passions, creativity and urgency of the early epidemic. Beyond that observation, however, we find that the confusion that was palpable during this redefinition of ASO priorities and constituencies reveals longer-term patterns of dissonance in the response to the epidemic. The lack of harmony here is between two different but increasingly blurred ways of thinking about the epidemic: the bureaucratic and the personal. It may be that it is not the logic of the safe sex culture that began to falter after the protease moment, but the salience of that logic as an enduring and unifying cultural value. The participants' ambivalence toward safe sex and toward gay community are inseparable, suggesting the inter-related, mutual fragility of the two concepts.

Weeks (2000) refers to sexual identity as a necessary fiction because it is a cultural construct that enables subjects to form the collective resistance necessary for social movements. He continues:

In the same way, the idea of a sexual community may be a fiction, but it is a necessary fiction: an imagined community, as invented tradition which enables and empowers. It provides the context for the articulation of identity, the vocabulary of values through which ways of life can be developed, the accumulated skills by which new possibilities can be explored and hazards negotiated, and the context for the emergence of social movements and political campaigns which seek to challenge the existing order. (p. 192)

Yet, the gay community, mobilized as a political constituency vis-à-vis the state, and then institutionalized by governmental funding to respond to HIV/AIDS, is ultimately unsatisfying and unsustainable as a basis for a singular and sustained membership for homosexually active men. Weeks may have captured a belief that once also engaged our participants, particularly in relation to HIV education and systems of power; but, as they reflected on their work in our interviews, the educators in our sample questioned whether a genuine connection to their constituents was driving education practices and policies. The educator participant who observed that gay men express their needs in terms of 'sex, love, friendship, belonging and place', also added that, typically, 'HIV wouldn't get mentioned'. This comment begs the question as to whether the actual gay community—disparate, messy, lacking coherence—has ever been adequately addressed in the pedagogic models of HIV prevention. The do-or-die atmosphere of the early epidemic demanded swift collective action using available capital and knowledge; however, the historical contingency in which the safe sex culture developed could not engender enduring success.

This historic location of this study allows us to document the specific uncertainties growing from a turning point in the pandemic, as effective treatments began to arrive. Yet, the participants' narratives bring to light patterns in the complex relationship between gay communities and HIV/AIDS that have existed throughout the pandemic. As the original findings on 'negotiated safety' (reporting on data collected from 1986–1991) show, there have always existed other ways to respond to and bypass safe sex culture as a uniform practice. Similarly, contemporary sero-sorting discussions have their antecedents in community debates about 'poz–poz' sex in the early 1990s (Dowsett 1995), indicating a fracturing in singular community responses to the epidemic was occurring before the protease moment. Our participants reveal the contingency of gay community and the constant work required to situate oneself in relation to it. Thus, the ambivalence we have described here signals not the destruction of gay subjectivities, but a creative moment in their ongoing production.

For a time, gay community represented and functioned as a kind of home for gay men whose lives collided forcefully with the HIV pandemic. Yet, the architecture for that home was inherently flawed, buttressed by crisis and government funding, discursively framed by the urgency of safe sex culture and maintained by the practices of HIV/AIDS educators and community performers, to galvanize men who were doing gay differently to support the uniform cause of HIV prevention. A shorter pandemic may never have required more than this. But the attenuation of the pandemic met the 'post-AIDS' dynamic of a fracturing gay community as men developed diversifying responses and sexual expressions. Tribes may prove to be next in a series of shifting modes of homosexual sociality, which Sedgwick (1993: 56) argues has been characterized historically not by its convincing organizing logic but by its 'radical and irreducible incoherence'. A shifting constellation of tribes is not a new gay community; rather, it illustrates the shifting ground upon which gay men must continue to learn to do gay. Whether 'community' remains a salient feature of emerging gay social formations remains to be seen; indeed, the unifier 'gay' may no longer suffice.

These observations pose broad challenges to social research and HIV-prevention programmes targeting gay men. For example, emerging phenomena such as the 'bareback' websites (Carballo-Diequez *et al.* 2006) may be considered not in violation of community norms but as tribal demonstrations of erotic creativity. In these new arenas, even familiar concepts such as gender performance and ethnicity inform, and are in turn shaped by, new and often surprising erotic pursuits (Dowsett *et al.*, 2008). The Internet also provides opportunities for HIV-prevention work that responds to the creation of new sexual sub-cultures with innovative pedagogy. New HIV-prevention programmes must recognize that there are many ways of locating one's experience in relation to gay community, much of which lies 'outside' of what are traditionally understood to be a community's geographic, social or conceptual boundaries. In order for HIV prevention to regain lost traction, the notion of a singular gay community must give way to the dynamism and creativity of gay men's sociality today. Finally, we draw these conclusions from findings about inner-Sydney's gay community, but we believe these findings raise questions and issues that might well productively occupy the attention of HIV/AIDS community leaders and researchers elsewhere, as they ponder the unravelling of sexual safety and increasing HIV incidence in their own cities and neighbourhoods.

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Notes

1. Defined as intentionally unprotected anal intercourse in circumstances where risk of HIV transmission has not been ruled out (Carballo-Diequez *et al.* 2006).
2. This sample allowed us to observe possible antecedents of current prevention problems not as observable in the other two sites, Adelaide and Western Sydney. A comparative analysis would demand greater time and was not necessary for our purposes.
3. We use pseudonyms throughout this paper to protect participants' identities and the parentheses indicate which sampling frame the participant belonged to.
4. Darlinghurst is the largest of inner Sydney's gay-identified neighbourhoods and home to the community's most important civic and cultural institutions.
5. 'Wog' is a derogatory term for an Australian of non-British, usually Mediterranean, ethnic background.

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