

4th International Conference on the
Biopsychosocial Aspects of HIV Infection

AIDS Impact

International Implications
of Post-AIDS Cultures Among
Gay Men in the United States

Keynote Address at Opening Plenary

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I. Welcome

- o DRY BONES BREATHE: GAY MEN CREATING POST-AIDS IDENTITIES AND CULTURES
- o My talk includes some slides and will last about 45 minutes / time for discussion
- o My research for this book focused on gay-identified men in the United States: hence there are significant challenges in presenting my work before an international conference

In fact, when invited to present this at the opening session of AIDS Impact, I felt conflicted:

Of what possible use could my research on contemporary U.S. gay-identified men be, with the HIV challenges faced today throughout the world?

In the past 15 years, I have sat through too many presentations at international conferences where U.S. gay men--including myself--extrapolate from our narrow cohort group to the rest of the world, and fail to acknowledge the profound ways in which nationality, culture, economics, and identity shape the course and the meaning of HIV/AIDS.

Hence I spent some time thinking about ways in which my research and my recent book might inform our broader international efforts this week. I believe this opening talk on U.S. gay men's changing relationship to HIV/AIDS might be useful to you in three primary ways:

(1) Gay men in the United States have played--and continue to play--a primary role in the shaping of how AIDS is understood throughout the world. This is due to the convergence of a range of factors, including the early 1980s identification of AIDS as a "gay disease," the robust ways gay and lesbian communities have mobilized to fight AIDS, and the continuing, even burgeoning, U.S. domination of resources, treatment prioritization, and media-driven understandings of AIDS. If, as I argue, the U.S. plays a major role in shaping the ways in which the world's power-bases see AIDS, and if gay men are central voices fashioning the US AIDS response, it might be useful for an international gathering to grapple with changes currently occurring within this narrow population which has a critical influence on all our efforts.

(2) The shifts currently underway within U.S. gay male communities may have something to tell us about the vital role context plays in prevention work with any population. As much as my book captures a dramatic transformation in one population's relationship to HIV/AIDS, its broader message is about the situated nature of all health promotion work. Ongoing changes in space, place, time, and social, economic, and cultural contexts may mean that what was an effective prevention strategy in 1989 might be ineffective--even harmful--in 1999.

(3) As much as my education and work have occurred in the United States, my thinking and my research have been most heavily informed by non-U.S. social scientists and educational theorists, and I feel a debt of gratitude to scholars and activists whose intellectual work is not trapped in the narrow paradigms and tight disciplinary niches which constrain much of U.S. AIDS research. Discovering the rich,

interdisciplinary work of Australians, including Gary Dowsett, Michael Ross, and Robert Connell, transformed the nature of my inquiry. Immersing myself in the work of Brazilian educational theorist Paulo Freire and Salvadoran social psychologist Ignacio Martin-Baro expanded my thinking about possible strategic interventions. And developing working relations with researchers studying gay men in England, the Netherlands, Germany, and France provided me with the support I needed to rethink some of my assumptions and reanalyze my data. **International conferences can help all of us to think outside the box, reconsider our foundational assumptions, and reimagine what is possible.**

II. Let me give you some background on DRY BONES BREATHE...

- o Motivation for the book...RTT: Regenerating Gay Men's Sexuality and Culture in the Ongoing Epidemic...
- o Qualitative research focused on one-on-one and focus group interviews, participant observation, action research, and critical readings of cultural texts.
- o Book explores U.S. gay men's shifting relationship to HIV/AIDS and social and cultural transformations occurring in gay male communities.

III. Primary Finding: My research suggests that **the collectivity we know as "the gay community" in the United States has moved past the "crisis stage" of AIDS mobilization.**

Let me explain how I understand this:

- o 1985: The Rock Hudson Moment: 3 key tenets of gay men's communal understanding of AIDS:
 - o swift and ugly death
 - o voluminous loss
 - o sexual wasteland
 - o In U.S. gay communities, we called this crisis
 - o Recall the images of PWA during this era: frail, face covered with lesions, weak, in wheelchair...
 - o Recall the images of gay men during this era: funneling into volunteer caregiving organizations, Mother Theresa's, heroic response [contrast with 1970s images]
 - o Think of the Rock Hudson Moment as the process we used in setting the table for a dinner of fine dining...
 - o International implications:
- o 1996: The Protease Moment /Vancouver International AIDS Conference changed everything...
 - o The news out of Vancouver

- o I argue in Dry Bones, that PI's have simply accentuated and brought to the surface cultural changes which had been occurring since early 1990s and already punctured the understanding of AIDS gay men had forged in 1985:
 - (1) Other treatments
 - (2) Long-term non-progressors
 - (3) Scaling the epidemic hump / falloff's in deaths
 - (4) The passage of time...young gay men dominating discourse with markedly different understandings of HIV

- o Furthermore, my own research during 1995-1997 suggested that at least five groups of gay men in the United States did not subscribe to the "crisis" construct as defined in the mid-1980s.
 - (1) Young gay men
 - (2) Gay men of color
 - (3) Rural gay men
 - (4) Long-term HIV negative men
 - (5) HIV-positive men

- o Primary populations still subscribing to crisis understandings:
 - o those working in HIV organizations
 - o some men with HIV

- o To my subjects, the three tenets of the Rock Hudson Moment no longer hold on anything other than a rhetorical level:
 - o Not a swift and ugly death
 - o Loss is mitigated
 - o Sexual cultures have come alive again

- o I believe gay men as a collectivity in the U.S. have passed beyond the crisis stage of HIV/AIDS and are currently trying to define and carve out the meaning of the new stage we have entered.
 - o Crisis / Cure paradox

IV. Hence, the Protease Moment for gay men may be characterized as a period of

- o great uncertainty and debate as we negotiate new communal understandings of HIV/AIDS--> slides will take you through some of this

- o powerful shifts in gay communities and some startling emergent subcultures

- o changing relationships to sex and sex practices.

Turn on Slides (20 slides)

- o What I aim to show you in this short set of slides:
- o Key texts focused on post-Vancouver debates about the meaning of AIDS / post-AIDS controversy

Stop Slides

- o The dynamic process occurring now and over these past three years to renegotiate what AIDS means to U.S. gay men.
 - o Even within that narrow population, differences in race, economic class, language, and generation create differential understandings and meanings.
 - o The very narrow focus of the discussion and the inability of most men to make central an analysis of privilege and world position, to base their efforts to fight AIDS on anything outside of themselves and their social network, and to see a global pandemic as something distinct from what may be occurring within the nearest affluent gay ghetto.
- V. I want to highlight for you ways in which the transformation of gay men's relationship to AIDS is embodied in specific cultural changes and accompanying community debates.

(1) Circuit Parties

- o Describe circuit parties / contrast with raves

Start Slides and talk through them

Stop Slides and highlight:

- o What do circuit parties say about gay men's understandings of HIV/AIDS?
 - > How can you party during an epidemic?
 - > Re-sexualization of the chastened gay community
 - > Generational tensions flare

(2) Barebacking

- o Describe barebacking and distinguish from unprotected anal sex

Start Slides and talk through them

Stop Slides and highlight:

- o What do barebacking and barebacking debates say about gay men's understandings of HIV/AIDS?

- > Shifting beyond the absolutism of the crisis years and challenging the previous status quo of prevention; gay men's independence from our own institutions.
- > Re-sexualization of the chastened gay community

(3) Sex Panic!

- o Describe genesis of Sex Panic and sexual civil wars among gay men focused on sex cultures, promiscuity, sexual freedom.

Start Slides and talk through them

Stop Slides and highlight:

- o What do the Sex Panic! debates say about gay men's understandings of HIV/AIDS?
- > No unified consensus regarding gay male sexual cultures: previously negotiated truces are off.
- > Some maintain a crisis understanding and some do not.
- > Re-sexualization of the chastened gay community

VI. International Implications or Lessons We Might Learn from Current Shifts Among U.S. Gay Men

1. Prevention work must be rooted in the current context and must meet populations--all populations--where they are at, not where we want them to be.

How should our health promotion work with gay men shift in a post-AIDS era?

Is the best approach fear-based, corral gay men back into the bomb shelters of the 1980s? Do nothing? Keep doing the work we've been doing?

I argue in DBB that we need a new generation of prevention work which is suitable for a post-crisis period. Effective public health responses to catastrophe, or an emergent crisis are different from responses to a sustained, longer-term challenge to health.

I call for two key shifts:

- o Embed HIV prevention in a stronger effort focused more broadly on gay men's health
- o Our HIV prevention work should intensify where research tells us the needs are greatest: not circuit boys, not self-styled barebackers, but young gay men of color. As much as it is important to understand and follow the discourse, following the data on new infections seems critical.
- o Shift to authentic harm reduction approaches rather than absolutist techniques.

2. An effort must be launched that, while respecting authentic shifts occurring among U.S. gay men's experience of HIV/AIDS, places these shifts within a global pandemic context. It is possible to allow middle-class, gay-identified U.S. gay men to carve out

a middle-ground, an alternative to either crisis or cure, while still marshaling their energies and resources to combat AIDS globally. They might understand that while their community might have entered a "post-crisis" stage of epidemic response, other U.S. communities, and certainly those parts of the world with the largest number of infected people and the smallest amount of financial resources, might be entering or remaining in a crisis stage.

For those of you interested in additional involvement in this shift out of the narrow crisis-based prevention approach of the 1980s, keep an eye out for a special summit at the end of July: a group of health providers, activists, academics, and physicians are meeting in Colorado to launch a multi-issue, multicultural gay men's health movement.