

Risk Factor Love

Benny Henriksson: Risk Factor Love: Homosexuality, sexual interaction and hiv prevention. Göteborgs universitet. Institutionen för socialt arbete. Skriftserien 1995. Göteborg 1995. Commentary by Professor Jeffrey Weeks, South Bank University, London, on the thesis presented by Benny Henriksson for the award of a doctorate at the University of Göteborg, March 1995.

Presentation

Writing about sexuality, the British sociologist Ken Plummer wrote in the early 1970s, makes you "morally suspect" (Plummer 1975). I myself have probably been suspect for many years now, and so has Benny Henriksson whose doctoral thesis is now before us. Yet, as the thesis demonstrates, and as is increasingly recognized today even by leading "mainstream" social scientists, to understand sexuality is to begin to understand the mysteries of society more widely. And when we are faced by a social and cultural crisis such as the one that encompasses aids, to understand sexuality becomes more than a desirable goal of social science; it becomes a social imperative.

I once wrote that as sexuality goes, so goes society (Weeks 1985), by which I meant, in part, that our attitudes to the erotic are a good index of our wider social attitudes. In particular, a society that is afraid of facing the challenges of sexual diversity, a society that cannot face the fact of different identities, different ways of life, conflicting moral and ethical standards is an inadequate society, however "advanced" or "compassionate" it may be or wish to seem in its general presentation of itself, and in its dominant myths. There is no point in a state attempting to be the caring parent for its citizens if it cannot understand and then respond compassionately to individual differences. In the end the children will be alienated and marginalized, and the idea of society as a family whose members are worthy of equal respect will be poisoned from within. In the age of aids a failure to confront our private hopes and secret longings, our varied desires, our different behaviours and our often conflicting public needs signifies not only a loss of nerve, an inability to deal properly with the present and think clearly about the future; it is also a shameful abandonment of our respect for individual pain, and the responsibility we should all have, one to the other.

Benny Henriksson's thesis is, it seems to me, primarily about responsibility: our responsibility for ourselves and to others; and the responsibility society should show for those in need in a health crisis that may yet only affect a minority but which could still devastate even advanced western societies like Sweden in the way it is threatening many countries in the South of the world, unless we accept our responsibilities, societal and individual. Above all, I would suggest, this thesis, however controversial in theory and method it may seem to some, is an act of responsibility by an engaged scholar, presenting the arguments and facts as he sees them so that we, with him, may attempt to see the sexual world of pleasure and danger, risk and trust, in a new and more caring and compassionate way, a way that offers hope not fear not only to people with hiv and aids but to all of us living in our current age of uncertainty.

Benny Henriksson's thesis is entitled "Risk Factor Love": Homosexuality, Sexual Interaction and Hiv Prevention". It consists of two parts. The first considers the theoretical and methodological issues necessary for thinking about risk in relation to hiv/aids and sexuality, offering both a survey of the debates as they have taken place in Sweden, and a wider conceptualisation of the global debate on aids and the history and sociology of sexuality. The second part consists of four articles which draw on wider sociological investigation conducted by Benny Henriksson and his colleagues:

(1) A study of sexual negotiations between men who have sex with men in what Henriksson calls "erotic oases", or what more legalistically are called in Britain PSE's, or Public Sex Environments. This is based, somewhat controversially in Sweden I understand, on participant observation in private video clubs.

(2) A study of these erotic oases in the lives of four generations of gay men. This investigation is based on life history interviews with a number of homosexually identified men, supported by more targeted interviews and the evidence from the participant observation study.

(3) A study of homosexual's men's families, both families of origin and what have been called "chosen families", that is the network of "significant others", lovers and friends (and often cats and dogs) that constitute what I have called elsewhere "the sphere of the intimate" (Weeks 1995). This study is again based on the life history interviews.

(4) Finally, the title essay, "Risk Factor Love: The symbolic meanings of Sexuality and Hiv Prevention". This paper, based on the three methods used for the wider research project, looks at the significance particular forms of

sexual activity, including "risky sex" has in the lives of homosexual men still confronted by the prejudices of even the most liberal societies and searching for love and intimacy in ways which relate to their histories and experiences.

Benny Henriksson uses three well-tried and familiar qualitative research methods in order to understand the motives for both risky and safer sexual activity: life history interviews, more directed informant interviews, and participant observation. Each has a history, and they have all been used to explore a variety of social phenomena, from work to gangland life, from racism to political progressivism, from class to individual actions (see Plummer 1995 for a discussion of such approaches). Qualitative methods such as these also have a by now respectable history for exploring sexual behaviour. For if sexuality is subject to greater socio-cultural moulding than almost any other phenomena, as Gagnon and Simon (1973) argue, then it is only by entering the appropriate sociocultural world, and hearing what its inhabitants have to say, that we can begin to understand it.

That can involve taking risks. There is the risk, on the one hand, of not really understanding the world you are entering, of finding it so strange and different that you misunderstand the signs, misinterpret the language. An antidote to that is for you to use the "natives" themselves to describe the world, or to be a native who balances a given sympathy with a degree of self-effacement so that the actors speak for themselves. This is essentially the strategy that Benny Henriksson uses. For the interviews he is the sympathetic interviewer. For the participant observation study he is director or manager of researchers who immerse themselves in the sexual world of casual encounters. He is then the analyst for the resulting data, who can blend empirical evidence with theoretical insight and personal understanding, and adjust the theory as necessary.

But that carries another risk: of opening up delicate and threatened cultures to sensationalist exposure, of distortion of your findings, of criticism of the means you have employed to gain the necessary information being used to hide the unpalatable conclusions. Sex research, as I said is worthwhile if you can throw light on the wider risks facing us in contemporary society. Benny Henriksson, I would argue, has taken worthwhile risks that individuals face, and the risks that society as a whole confronts by not understanding the real context in which health promotion and hiv prevention must take place.

Let me now turn to the main arguments of Benny Henriksson's thesis. The starting point is his belief that official hiv prevention policies, in Sweden but also elsewhere in the western world, are generally based on outdated beliefs about sexuality and risk behaviour, and ignore the context in which men have sex with men. This leads to a prevention policy that concentrates on

marlistic injunctions to cut down on the number of sexual partners, testing for hiv, passing laws on infectious diseases and clamping down on public sex environments, at the same time as health promotion information is directed at the population at large rather than those who are actually most at risk. The result is two fold: the sexual health information directed at the population as a whole is too generalized to affect individual behaviour; while the opportunity to promote safer sex advice to those in the gay community who are currently most at risk is avoided. So, for example, sauna clubs where gay men met and interacted, and had the opportunity to negotiate safer sex, are closed down, while video clubs, which have developed as their unofficial replacements, and where sex does take place, are prevented by the law from promoting safer sex because this would identify them as sexualized spaces. The policy is, in the end, counterproductive. The state response does not actually prevent unsafe sex, and it makes impossible the task of promoting safer sex activities in places which are important both for sexual activity and the affirmation of a sense of identity and social belonging. In other words, by emphasising the risk to the general population and effectively "degaying" the epidemic, Sweden, like many other western societies, has succeeded in making it more difficult to reach the gay population except in a negative way, that is by stigmatising without understanding the ways in which the avoidance of risk is negotiated in the gay community itself.

This position is counterposed by Henriksson to the approach adopted, indeed pioneered, by the gay community itself, safer-sex strategies which explore the possibilities of risk-reduction within the context of the community's own awareness of common sexual practices. Such strategies, Henriksson argues, have as their origin the gay community's resistance against homophobia and sexual prohibition, and a self-knowledge of gay culture, which provide a solid grounding for effective prevention. The principal idea behind safer sex is that it is not the person's lifestyle or the number of partners that is crucial for transmission, but whether or not sexual techniques used are *safer* (p. 10). In other words, it is not so much what you do, but how you do it that matters. I have argued elsewhere (Weeks 1995) that western cultures have been dominated by a morality of acts: what is right or wrong is measured by the type of act. What we see in the descriptions offered by Henriksson's thesis is an alternative value system emerging, what I have called an ethics of relationships. It is not the act in itself that should concern us, but the context and conditions in which it takes place, the relationships in which it is embodied, and the meanings we give to it.

The important point of this for hiv prevention is that individuals should integrate into their sexual repertoire both the use of protectives - condoms chief amongst them - and the exploration of sexual possibilities which may offend conventional susceptibilities, but which are essentially safe. The

assumption is that we *can* learn, adapt or reinvent our sexual practices: they are not given eternally by nature, they are shaped in particular cultures. And a culture can learn new ways of doing things, if its workings are understood. There is plentiful evidence from the recent history of the gay community that this lesson has been largely understood. Safer-sex has become the norm, even if, as Henriksson shows, there are specific contexts in which the norm can be bent because of the influence of even stronger imperatives. And the best educators are those who understand the culture, who are part of it. Community development and community mobilization are the most effective ways of promoting safer sex.

Benny Henriksson seeks to demonstrate this by contrasting two sets of gay sexual experiences, that of casual, anonymous sex in semi-public spaces; and sex in the context of loving relationships. Conventional wisdom would suggest that the first is high risk activity: "promiscuity", to use a loaded word, as public health guidance has told us, leads to hiv infection. Monogamy, on the other hand keeps us safe; it is not risky at all. Unfortunately, the data presented by Benny Henriksson completely contradict that easy assumption.

He argues that homosexual and bisexual men take larger risks in their stable relationships than they do when they have casual sexual relations at various erotic oases. Risks *are* taken in the latter, of course, while many ongoing relationships are governed by rules of safer sex. Henriksson is not offering an endorsement of casual sex as such, nor is he attacking the importance of stable relationships. Rather the point is to underline that official policies designed to clamp down on erotic oases ignore the fact that these can be, and have been as a result of gay community activities, sites for safer sex education. Making them illegal actually increases the risk of unsafe activity, because owners are thereby prevented from offering safer sex advice. On the other hand, simply asserting the desirability of stable relationships without understanding or addressing the complex and often contradictory elements that go to make up intimate life, can lead to tragedy.

For Henriksson's data suggest that when men have sex with men at erotic oases they most often practice safer sex. Anal intercourse, in particular, is avoided. As a result, Henriksson argues, men who participate in semi-public sexual activities have developed "an impressive competence in negotiating safer sex in these contexts" (p. 15). On the other hand, negotiating safer sex becomes more complicated in the context of intimate relationships. For some gay men, subject to stigma, often compelled by prejudice to leave their communities and families of origin, the search for loving relationships becomes an all encompassing goal. For some men who have found such a relationship, Henriksson argues, anal sex has a particular symbolic meaning, especially if it is unprotected:

In fact, for some of the men interviewed, unprotected anal intercourse has an almost existential meaning. For them, the cessation of the use of condoms with a love partner symbolises that there is a commitment in the relationship that is "for real". The men express how the giving and receiving of semen often symbolises trust and love. In this context of intimacy the use of condoms connotes everything that is the opposite of these feelings (p. 15).

This is an important antidote to social scientific accounts which have studied "relapse" from safer sex. It is not so much a wilful forgetting of the need for safer sex that we can witness; rather a subsuming of that need in an ideology of love and faithfulness. Yet as we know, committed partners have pasts, and potential futures, outside that commitment. Monogamy in the present is no protection against an individual history, nor against the hiv virus.

The thesis is, I want to suggest, a powerful argument by Benny Henriksson that in confronting the threat of hiv, we need to understand human behaviour and motivations in their complexity, rather than surrender to simple notions of human nature and need. To do this we need a sense of theory and history, an awareness of individual subjectivity and of social complexity. But above all we need to hear and listen to the voices in the street: what people themselves, in all their diversity and particularity, think they are doing, and why. That is what I believe Benny Henriksson is seeking to do in this thesis - and why, though it may well make him "suspect" - it is necessary research.

Critique

What I have tried to do so far is to outline as fairly as I can the arguments of Benny Henriksson's thesis. There are, I believe, three types of questions we can ask of it: (a) concerning theory, particularly in relationship to intimacy; (b) relating to methods, and particularly what are the appropriate methods for exploring intimate life; and (c) relating to the policy implications of this study. I shall pursue each in turn.

(a) Theorising the sphere of the intimate

We have tended to assume until recently that the intimate sphere refers specifically to marriage and the family. This is the domain of many of the things that matter most to us: care, love and sexuality especially. Yet recent historical work has demonstrated that for several hundred years now in most western countries alternative foci for intimacy have developed: in urban, often anonymous spaces, where homosexuals have met and forged friendship networks and embryonic communities; and in often secretive but no less committed erotic relationships and passionate friendships amongst men and amongst women. As aids has cut a swathe through the gay community, new forms of care and compassion have emerged from these networks and

communities (see essays in Plummer 1992, and discussion in Weeks 1995).

Similarly, recent sociological studies have charted what Anthony Giddens (1992) has called the "transformation of intimacy". With the breakdown of traditional structures of family and community life as a result of revolutionary social change and the globalisation of experience, there is a new emphasis on choice of lifestyles, and on the importance of intimacy in cementing a sense of self and identity, and in providing the location for individual meaning and commitment: the forum where trust can be negotiated as a barrier to the world of uncertainty we live in, and where risk, which all of us face, can be minimised. Some have suggested that this new elevation of the importance of intimacy can be paralleled in both heterosexual and homosexual ways of life, whatever the apparent differences (see Bech 1992).

Benny Henriksson's research findings on the emergence of "chosen families" amongst lesbians and gay men offers a good example of the changes that are taking place. Friendships and caring and loving relationships are being constructed as part of the reshaping of intimate life. And yet, as Henriksson argues, some of these intimate relationships, between committed couples, based on trust, carry high risks. This raises several types of questions we can ask of Henriksson's findings:

- (i) What evidence he has for the negotiation of trust and risk in gay family type relationships. For example, is the evidence of risky sexual behaviour in intimate relations the exception or the norm? What evidence is there for negotiation of safer practices in on-going relationships?
- (ii) What are the value systems about intimacy shared by the subjects of the research? As an example, what evidence is there for an awareness that care for the self involves care for the other, and that trust involves a sense of responsibility for self and other?
- (iii) Why does unprotected anal intercourse carry the symbolic meaning it does for many gay men? If sexual behaviour is to a large extent scripted, why is it so difficult to rewrite the script slightly when the result of not doing so could be infection and death?
- (iv) Is it possible to balance emotional faithfulness and commitment with sexual infidelity?
- (v) Finally, if the urge to find love is so locked into the emotional structure of some gay men, and if that love apparently requires risky sex, how can we minimise risk?

The fact is that trust, risk, commitment and love are locked together for all of us in the late modern world. Studies of heterosexual interaction amongst

young people in Britain in the context of hiv shows that knowledge of risk does not prevent risky activities happening in the context of sexual attraction, the search for self esteem and identity, and in particular the continuing imbalances of power between men and women. Young girls, it seems, frequently subordinate their perception of risk, whether of pregnancy or disease, to their constant need to balance autonomy with the wish for dependency and acceptance in a relationship with a man (Holland et al 1994). So there is nothing extraordinary or peculiar to homosexuality about Benny Henriksson's findings. On the other hand, difficult questions are raised about the relationship between intimate life and public policy, or how to balance the right to privacy with the right to protection. All we can say with certainty is that you cannot begin to develop a coherent social policy by ignoring the new primacy of the intimate sphere.

(b) A question of methods

A qualitative, ethnographic study such as Benny Henriksson's is, I have suggested, a necessary complement to the theoretical assumptions underlying the research. If you want to find out what is going on in a largely unknown and marginalised culture, then you have to go "down there on a visit", in Christopher Isherwood's phrase, to find out. And if you are concerned to understand the symbolic meanings of a culture then you have to enter and empathise with the symbolic universe as it exists. That, I have suggested, can itself be risky. Two questions commonly come up about research such as this: about validity, and about bias.

- (i) You can never get a statistical cross section of a partly invisible constituency, and survey methods are always likely to prove inadequate. But how can you be sure that you have a good cross section of experiences? How can Benny Henriksson know, for instance, that all erotic oases have a leaning to safer sex, when only a small number have been investigated? And how common is unsafe sex in intimate relationships, when the numbers interviewed are so small?
- (ii) Are you not likely, researchers like Henriksson are often asked, to be biased when you, as a "native", are investigating your own kind? Is there not a danger of bending the evidence to suit your own polemical case? Above all, in this particular study, where participant observation of sexual negotiations included sexual negotiation and involvement on the part of the observers themselves, are not the results likely to be distorted? Should not research methods be both moral and legal?

There are response to such criticisms, and in my view perfectly valid ones. In the first place, who is better placed to understand a world, and communicate

its structure, who is better placed to others, than someone who empathises with it, and already has an awareness of its emotional and sexual contours? But secondly, this has to be accompanied not by a notional neutrality but by reflexivity: a willingness to see yourself as an actor in the situation, and an ability to question yourself and your data as a necessary stage in its analysis; and to be honest about the processes involved. This, I believe, Benny Henriksson does and is.

(c) Implications for policy

Benny Henriksson is not a neutral social scientist studying an area for its own sake. The investigations he has undertaken and the thesis he has produced have a purpose: to inform public and community practice. This is a perfectly valid task for a social scientist to take on, and in the context of aids an absolutely necessary one. One of the tragic ironies of the aids epidemic is that it has made it possible, indeed essential, for public agencies to fund research into sexuality. They should not be shocked by what is then revealed to them. On the contrary, they should take it seriously, for research saves lives. So what are the implications of Benny Henriksson's research for policy? Two questions seem to be central:

(i) What is the role of community development and community mobilization in spreading the message of safer sex in the communities most at risk? How, for example, can couples be encouraged to adopt safer sex, when they do not feel immediately at risk? How can safer sex be sustained as the epidemic is normalized as just one of the risks we face in everyday life?

(ii) What role has the wider society, represented by the caring welfare state, in encouraging toleration of difference, and respect for unorthodox ways of life?

The aids epidemic has forced the liberal societies of the west to explore their liberalism to the limits, and have often found them wanting. A justified attempt to protect the population has led to illiberal measures in a number of countries. Contrawise, conservative governments like Britain's have found themselves funding projects such as needle exchanges for drug users or sexually explicit advertising for gay men which go against their moral conservatism. Aids has made strange bedfellows. But if the epidemic is to be contained we all, individuals, communities and governments, have to face the truth of the epidemic. Not the least of the merits of Benny Henriksson's thesis is that he faces the truth unflinchingly.

Conclusion

Benny Henriksson's thesis is in the best traditions of the recent theorisation

of, and research into, the sociology of sexuality. He combines a sophisticated awareness of recent theoretical advances with a skilled use of a variety of qualitative research methods to produce a convincing picture of a community at risk. His findings correspond broadly with the findings of similar research in countries like Britain, the Netherlands and the USA. It can thus be said to be on the cutting edge of contemporary social scientific research on sexuality.

The thesis is well argued, and clearly presented, and the conclusion drawn from the research are justified by the data presented. It is not the final word on the subject, nor could it be. Our theoretical knowledge grows, circumstances change, and so do policies, sometimes as a result of research like this. I hope many others will take risks, become "suspect", by undertaking sex research in a variety of different ways. Benny Henriksson's work is an excellent example of one particular form of research into sexuality. It adds to our knowledge and contributes to our understanding. And without more knowledge and more understanding we have no way of combating the risks facing us, and no way of continuing the struggle against hiv and aids.

Jeffrey Weeks