Epilogue: Bug Chasers and Criminals

Events disrupt the operative systems of ideas, beliefs, values, roles, and institutional practices of a given society. In so doing, events change the way in which social actors think about the meaning and importance they assign to modes of action and the rules that govern interaction, groups and their discourses, symbols, and rituals. In the event, the meanings carried by cultural objects are embodied in historic consequences (real or perceived) the event has for particular actors.

— Stephen Ellingson

Large-scale or unpredictable events can rupture social convention and change people’s attitudes towards the world. Everyday modes of being—the habits, customs and patterns of thought that frame our everyday existence—are rarely questioned unless something happens to disrupt them or expose their arbitrariness. Pierre Bourdieu described as ‘doxa’ the framework of knowledge through which we think. Doxa is not a reference to the conscious ideas that we have or the particular arguments and thoughts that fill our conversation, but the underlying assumptions that inform and structure our ways of thinking. That which is in the realm of doxa is knowledge so taken for granted and ubiquitous that it is virtually invisible. Public debate usually sits within the framework of ‘what is known’ about the way the world is, even when there is argument or dissent within that framework. According to Bourdieu, social knowledge does not move from the realm of doxa into conscious awareness and discussion as a consequence of the thoughts or ideas of individuals. Rather, the potential for new or previously unspoken knowledge to enter ‘discursive consciousness’ is created through a change in social conditions. Bourdieu sees a materially based dialectic between social conditions and knowledge. The assumptions that underlie the way we think are questioned only when something forces those assumptions to be made visible.

In this text, I have explored the impact of HIV/AIDS on various aspects of Australian society. While for most Australians HIV/AIDS probably sat only on the periphery of their everyday world, for those close to it the virus produced massive social and emotional upheaval. It was perhaps the most significant event ever to affect communities of gay men, not only because it threatened lives but

also because ideas about the nature and morality of homosexuality were pushed so starkly into the public spotlight. While this might not have exposed on any grand scale the ‘doxic framework’ into which knowledge about homosexuality is formed, HIV interrupted ‘everyday’ social patterns long enough to create opportunities for gay men to influence public knowledge of, and attitudes towards, homosexuality in a way that they had never previously been able.

By the 1990s, those in the AIDS movement had developed confidence in their own capacity as ‘AIDS experts’. They had also achieved a certain level of credibility and legitimacy within the AIDS sector of the medical fraternity. Activists were formally recognised and funded by the Federal and State governments and had an established media presence on HIV/AIDS matters. Their alternative, community-based model of disease prevention had also gained recognition and acceptance by public health and medical officials as well as government. As such, the AIDS movement was in a position to challenge the notion that medical knowledge was the only form of legitimate knowledge about HIV/AIDS and, indeed, about the way in which clinical trials are conducted.  

Author and activist Robert Ariss argues that the development of working relationships between doctors and activists was not necessarily an example of ‘relationship building’ between these two groups. Rather, he sees the development of doctor–activist partnerships as simply serving the function of rescuing ‘science from the threat of non-compliance’. The threat of non-compliance was, however, an important challenge to medical dominance. Even if the ultimate priority of doctors and scientists was to maintain the scientific integrity of their research, the AIDS movement did force the medical system as a whole to change its processes. Indeed, Ariss concedes that ‘AIDS activism has transformed the practices of clinical science from one that prioritises the demands of science itself, to one that is more responsive to the needs of human beings’.  

This was a significant achievement for the AIDS movement. Medical knowledge has a cultural authority rarely challenged. The autonomy and status of the medical profession are ingrained in the modern social order, and the capacity or credibility of doctors is rarely questioned. The process by which the AIDS movement successfully challenged this authority and shifted many of the long-established boundaries separating lay-people from the medical profession represents an important story in the history of the Australian medical system. It

6 Ibid., p. 200.
also demonstrates that the development of alternative forms of expertise (in this case, a form of expertise based on personal experience and ‘felt knowledge’) has radical potential for social movements.

The power to determine the way in which the social world is perceived—to make one’s ‘truth’ accepted as universal and natural—is to a large extent what is at stake in political struggle. At issue for all social movements is how to achieve wide-scale acceptance for their political position and for their social and cultural values and ideas. To this end, all social movements engage in ‘identity politics’ of a sort. A high-profile scientist, for instance, is often more likely to gain media airplay for an argument about the dangers of global warming than an environmental activist. Social-movement actors will use their ‘expert’ supporters and public intellectuals strategically. But for the AIDS movement, the public presence of gay men themselves, rather than ‘experts’ representing them, was central to achieving the shift in public attitudes towards gay men and lesbians that it did—even if many of these gay men and lesbians were also doctors or medical experts in their own right. What had been absent from previous public discussion about homosexuality was any sort of high-profile, regular presence of gay people talking about homosexuality. Through AIDS activism, ‘gay identity’ achieved greater legitimacy and visibility in the public realm. In this sense, as well as influencing the direction of HIV/AIDS policy, a large part of the impact of the AIDS movement could be described as cultural—an influence directed more towards civil society than the state, one that challenged cultural codes and conventions. The cultural impact of the AIDS movement was witnessed in such things as the increasing acknowledgment of gay youth in mainstream health and welfare services and education as well as in the increasing acceptance of ‘lay-people’ within the medical establishment. The paradox of HIV/AIDS for gay men was that such a terrible tragedy contributed to significant social and political gains for the gay community.

In making this point, in no way do I wish to suggest that the AIDS movement was miraculously able to eradicate homophobia or inequality based on sexuality from Australian culture. Violence is a lingering threat in the background, and unfortunately occasionally the foreground, of the lives of all gay men and women. Homophobic attitudes underlie much of Australian culture, with ‘poofyer jokes’ and derogatory references to gay men a commonplace part of the Australian vernacular. That being said, the situation for gay men and lesbians in Australia today has changed dramatically from the time when any public

8 Melucci and Avritzer, 2000, p. 509.
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discussion about gay people occurred in the context of how to punish or cure the ‘affliction’ of misdirected sexuality. But the story of the Australian AIDS movement and homosexual liberation is not one that, as yet, has an end.

Bug Chasers and Criminals

Every so often, the relationship between gay men and HIV/AIDS finds its way back into the media. While media hysteria in Australia around these issues has never again reached the fever pitch of the 1980s, there still tends to be an undercurrent of blame and mistrust of gay men.

In 2007, the Australian media picked up on the idea of ‘gift giving’ and ‘bug chasing’—terms used to refer to HIV-positive men who deliberately seek to give others HIV through unprotected sex and HIV-negative men who have sex with positive men in the hope of catching HIV. The extent to which either gift giving or bug chasing are common enough to be credited as a ‘phenomenon’ is a subject of debate among HIV organisations, health educators and academics, with most concluding that if this does occur it involves only a minority of individuals.9 The idea of a subculture of HIV ‘conversion’ parties, however, translated well into sensationalist media articles that implied some sort of sordid undercurrent had recently been uncovered among the Australian gay community.10

The Herald Sun’s Brendan Roberts, for example, reported:

What appeared to be a run-of-the-mill investigation turned out to be a much wider probe that took police on an eye opening journey through the seedy underbelly of Melbourne’s gay community. It opened up a perverse world of high-risk sex where [the] human immunodeficiency virus, HIV, was often an accepted risk, sometimes worn by carriers... as a badge of honour. Exposed was a bizarre culture inhabited by ‘bug chasers’—healthy men actively seeking to be infected with HIV—and ‘breeders’ who infected them at depraved ‘conversion parties’. One veteran detective said he had no idea of the bounds the investigation would reach...’I’d describe it as surprisingly shocking’.11

In *The Age*, Julia Medew and Karen Kissane reported that:

A Melbourne man who fantasised about catching HIV before he contracted the virus has spoken out about a gay subculture in which infection is seen as desirable. The young professional, who does not want to be named, told *The Age* a combination of complacency about the virus and the wish to have unprotected sex with an HIV-positive man he loved led him to become infected...He is the first to speak publicly about taking part in a behaviour known in the gay community as ‘bug chasing’.12

A lot of the media attention on ‘bug chasing’ was linked with the high-profile Victorian trial of a man alleged to have deliberately infected others with HIV. The Michael Neal case went before the courts over a two-month period in 2008, following a committal hearing in April 2007. Neal faced 106 criminal charges including intentionally spreading a deadly disease, attempting to intentionally spread a deadly disease, rape and possession of child pornography.13 In their opening address to the jury, the prosecution spoke of how Neal used the promise of drugs to lure men to ‘conversion parties’.14 Throughout the trial, witnesses were called to describe their involvement in these parties. Media reporting of the trial focused heavily on these witness statements, presenting the experiences of this handful of men as evidence of this supposed new gay subculture in Australia:15

A witness told the court Mr Neal hosted a ‘conversion’ party at which a 15 year old boy was injected with crystal methamphetamine and then ‘bred’ (infected with HIV) by about 15 HIV-positive men who had sex with him.16

The court also heard there was a ‘bug chaser’ movement in Melbourne’s gay community who wanted to contract the disease and ‘breed’ it.17

Though gay community advocates weren’t aware that the subculture had arrived here [in Australia], a steady stream of witnesses in the Neal case told the court they were familiar with terms such as ‘gift giving’ and ‘breeding’ (passing on HIV).18

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13 Robinson, Natasha 2007c, ‘HIV Policies Flawed as Officials Miss a Bare Reality’, *The Australian*, 21 April, p. 2.
17 Medew, Julia 2007, ‘Court Hears of Psychiatrist’s Plea’, *The Age*, 23 March, p. 3.
18 Robinson, 2007c, p. 2.
Irrespective of whether Neal was guilty or innocent of the charges against him, the case became an occasion for a resurgence of media headlines depicting gay men and people with HIV/AIDS as untrustworthy and dangerous. Through the construct of a courtroom trial, with its requisite victims and perpetrator, the once-familiar discourse of ‘innocents’ versus ‘blameworthy’ deviants was shown to be lurking not too far beneath the surface of contemporary media attitudes toward HIV/AIDS.

That being said, the issue of bug chasing came and went from the media quite quickly and was in fact diverted by a political scandal linked to the Neal case that resulted in the Chief Health Officer at the time being sacked. The Victorian Department of Human Services allegedly mishandled several confidential files relating to HIV-positive individuals, allowing them to be handed to police investigating the Neal case. Further, there were allegations that the Chief Health Officer had not responded to advice from the Victorian HIV Case Advisory Panel to detain Neal several months before his arrest. As a result, some of Neal’s alleged ‘victims’ were threatening to file a law suit against the Health Department. This all occurred in the context of the first reported increases in new cases of HIV in Australia in more than a decade. Victoria, where Neal was a resident, had experienced greater increases than other States and Territories. In fact, in March 2006, two months before Neal was arrested, the Victorian Health Minister, Bronwyn Pike, had announced that Victoria was to host a summit of health officials to discuss the issue of rising HIV notifications in the eastern states of Australia.

The focus on the departmental handling of the Neal case and HIV in general had a tinge of the punitive, legalistic approach to HIV prevention seen in the 1980s. Conservative commentators ran with the idea that civil libertarianism was clearly a threat to public health, arguing the Government needed to do more to contain ‘HIV Spreaders’.

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19 Neal was sentenced to 18 years’ imprisonment in January 2009.
22 Hurley and Croy (2009) identified 118 articles relating to the Neal case between May 2006 and January 2009. Just more than half of these were about the Neal story and the court case, about 40 per cent were about the political fallout from the case and seven articles were on the national HIV response and gay sex cultures.
27 Pike, Bronwyn 2006a, National Summit to Discuss Increase in HIV Notifications, Media release, Government of Victoria, Melbourne.
28 Ackerman, Piers 2007, ‘Deadly Game of Privacy Protection’, The Age, 12 April, p. 21.
The reporting did not, however, have the same ‘bite’ that it would have had in the 1980s. While the salacious details of the Neal case were clearly irresistible fodder for journalists, there were few suggestions that the Neal case represented a threat to the community at large. This is perhaps reflective of the changing public perception of HIV in Australia—from a disease affecting ‘us’ to a disease affecting the developing world; from an unknown, deadly disease to a manageable chronic condition.\(^\text{30}\)

It is most likely also indicative of the ongoing work of HIV-prevention agencies that governments and journalists take a measured and largely sensible approach to HIV/AIDS in Australia. Although the media did not seem particularly interested in the question of whether there was any actual evidence, or lack thereof, of practices such as bug chasing in Australia or the extent to which safer sex is practised by most HIV-positive individuals, gay and lesbian community advocates and HIV organisations did have a presence in media reporting on the Neal case. There was an effort made by some journalists to link the story to broader discussion about the adequacy of current funding for HIV prevention in Victoria. This had successful outcomes.\(^\text{31}\) National public health governance systems are being reviewed with respect to the best way to manage individuals known to be intentionally risking the health of others with regards to infectious diseases. More money has also been allocated to HIV prevention in Victoria.

**Conclusion**

There is a large and varied collection of publications on the topic of Australia’s response to HIV/AIDS, much of it written by researchers and activists who began their analysis *in situ* in the 1980s. Australia’s response to HIV/AIDS was so unique and successful that there will always be more that can be learned from this particular part of Australia’s history. This history can teach policy makers a lot about the importance of collaboration with communities; it can teach sociologists about the way in which communities exert power; it can teach historians of the present why the rate of HIV in Australia has not exploded the way it has in some other countries. For the lesbian and gay community in Australia (as with many other Western countries), the emergence of HIV/AIDS marked a political, social and legal turning point. The tragedy and threat of HIV/AIDS galvanised communities like nothing had previously. The ramifications of this are still evident in the way in which HIV is managed today—with the continued involvement of affected communities, albeit with more professionalised

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30 This is not to suggest that HIV should be considered a manageable chronic condition or that it is a disease affecting only developing countries. Rather, I am referring to anecdotal evidence that HIV is often seen in this context by many members of the Australian public.

community organisations at the helm. The impact of a galvanised community is also evident in the increasing cultural visibility and acceptance of gay men and lesbians in Australia. It might be that this would have occurred regardless of HIV/AIDS. But that will never be known. Either way, the fight against HIV/AIDS clearly brought resources and attention to the Australian lesbian and gay community—not really a ‘silver lining’ to the devastation of HIV/AIDS, but certainly an unparalleled achievement for community action.