

AIDS, Mass Observation, and the Fate of the Permissive Turn

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THE MASS OBSERVATION project (MO) was initiated in Great Britain in 1937 by anthropologist Tom Harrisson, poet Charles Madge, and filmmaker Humphrey Jennings as an independent radical social research experiment. It aimed to garner accounts of the daily lives, thoughts, and feelings of “ordinary” people. A self-selecting panel of Mass Observers (MOers) were asked to comment on questions and themes set out in regular “directives” (as MO called them) on, for example, the abdication of Edward VIII, conditions in wartime, Christmas, food, homelessness, and much more. MO ran in this first phase until the early 1950s, leaving an archive now held at the Keep archive center (a collaboration between the University of Sussex and the East Sussex Council). It was relaunched in 1981, the year of the first known AIDS-related death in Britain. It has since been supported by the University of Sussex and funded additionally through a patchwork of grants and donations, including, in the period I am looking at here, a major award from the Nuffield Foundation (1986–90). As with the early cohort of MOers, the new 1980s group typically tacked back and forth, comparing the 1950s, 1960s, and 1970s to their present and what already felt to many like a new era. Several mentioned AIDS in passing in response to earlier directives, but it was not until May 1987 that the panel of 1,333 people were asked directly for their views. Of those asked, 637 responded (449 women and 188 men) with 1,386 largely handwritten pages in which they tried to make sense of the escalating crisis, in part by trying to track what had changed socially, culturally, and morally. The 1960s emerge repeatedly in these accounts as MOers mulled over what they saw as the consequences and fate of the putative permissive turn of that decade.

In this piece I survey this extraordinary collection of responses to AIDS and explore the attachments to, refusals of, and moves beyond that sixties moment. “More than a few of you have written in on this topic already,” the directive of May 1987 began in MO’s usual chatty tone. “May I ask you now to direct your attention to the campaign in the press, on television and

through public meetings. If you have attended any of the latter it would be very useful if you would report on attendance, questions asked, comments heard afterwards etc. There are, in addition and inevitably, rumours and, no less inevitably 'jokes' which should be recorded. Have you noticed changes of any sort in your local circle which could be related to knowledge or fears about AIDS? Has your own behaviour been affected at all in any way?"¹ MOers responded more and less directly to these themes and questions and also expounded on others. They suggest the impact of escalating and sensational press coverage. They also reflect (and reflect on) the tenor of the public health campaigns of 1986 and 1987 and the direction of health policy on AIDS and HIV in the UK.² But what emerges especially powerfully, and what I focus on here, is the way these responses to the AIDS crisis expose an uneasy moral compromise on homosexuality—a compromise that was now further troubled. The 1967 Sexual Offences Act had partially decriminalized sex between men over twenty-one in private (a space newly and narrowly defined in the act). In this legislation and the surrounding debate, homosexuality was deemed loosely tolerable if it could be kept out of sight. Lord Arran famously asked homosexuals to show their gratitude by "comporting themselves quietly and with dignity."³ Arran, a strong proponent of the measure, was signaling as clearly as the act itself the limits of permissiveness and the conditions of acceptability. Many moved against such conditions and the wider social and cultural positioning of gay men and lesbians vocally and visibly in the 1970s. In the Thatcherite 1980s, however, and in the context of AIDS, the stakes were higher. Of necessity because of the health crisis and as a result of a related and growing pride and protest movement, gay men and lesbians were now "trespassing" more fully on public attention, public space, and the public purse and were widely reported to be doing so by sections of the newspaper press that had such men and women and such apparent breaches firmly in their sights.

In what follows I look at the ways in which nominally heterosexual MOers responded to and negotiated this repositioning and the moral fracture it seemed to represent. I explore four shades of opinion on the crisis that emerge in the testimonies and consider what they might tell us about the mythologized generational divide between those growing up before and then during and after the supposedly revolutionary 1960s. First, though,

I am hugely grateful to Alison Oram, Julia Laite, Claire Langhammer, Jessica Scantlebury, Jeffrey Weeks, and the anonymous reviewers for their comments on this article.

¹ Mass Observation Project (hereafter MO) spring 1987 directive, "The Campaign Against AIDS." I am very grateful to Jessica Scantlebury for helping me to navigate the MO archive and to the trustees of the Mass Observation Archive, University of Sussex, for permission to quote from it.

² For an overview, see Virginia Berridge, *AIDS in the UK: The Making of a Policy, 1981-1994* (Oxford: Oxford University Press, 1996).

³ Jeffrey Weeks, *Sex, Politics and Society: The Regulations of Sexuality since 1800*, 3rd ed. (Harlow: Longman, 2012), 274.

some further background: on permissiveness and that moral compromise; on the 1980s and the immediate contexts in which MOers were writing; and on the provenance of MO itself.

MORAL COMPROMISE

The moral compromise on homosexuality was articulated clearly in the recommendations made to Parliament in 1957 by the Committee on Homosexual Offences and Prostitution, more commonly remembered as the Wolfenden Report (after committee chair Sir John Wolfenden). It took ten years for those recommendations to pass into law as part of the Sexual Offences Act. The new measure applied only in England and Wales; it was extended to Scotland in 1980, to Northern Ireland in 1982 (after the intervention of the European Court of Human Rights), and to the Channel Islands in 1983. This tardiness and unevenness is telling; MPs and successive governments were uncertain of the wider appetite for such changes and certainly felt no urgency to meet the demands of those campaigning in the 1960s for homosexual law reform or, later, for gay rights.

The provisions as they were slowly rolled out across the UK reflected and to an extent enshrined what Jeffrey Weeks describes as the growing “privatisation of decision making” and the move—albeit gradual and reluctant—“towards a legal acceptance of moral pluralism.”⁴ The act and its extensions were nevertheless a gesture of bestowed tolerance rather than a recognition of rights and equalities—those watchwords of later debates and campaigns. There was within the new law “no attempt to . . . positively assert the values of different sexual lifestyles.”⁵ Private acts might be nominally acceptable but a visible presence or acknowledged (as opposed to tacit and discreet) integration in the public realm would compromise or fracture an imagined community of shared family values, which were loudly rearticulated in the post–World War II years of national reconstruction.⁶

Partial decriminalization took place in the context of a marked relaxation and change in tone in music, the arts, and youth counterculture in the second half of the 1960s.⁷ The end of national military service and rationing, a numerical bulge of those in their teens and early twenties (resulting from the first postwar baby boom), medical and technological advance, and a

⁴ *Ibid.*, 273.

⁵ Jeffrey Weeks, “AIDS and the Regulation of Sexuality,” in *AIDS and Contemporary History*, ed. Virginia Berridge and Philip Strong (Cambridge: Cambridge University Press, 1993), 22.

⁶ Chris Waters and Matt Houlbrook, “The Heart in Exile: Detachment and Desire in 1950s London,” *History Workshop Journal* 62 (Autumn 2006): 142–63; Matt Cook, “Warm Homes in a Cold Climate,” in *Queer 1950s: Rethinking Sexuality in the Postwar Years*, ed. Heike Bauer and Matthew Cook (New York: Palgrave Macmillan, 2012).

⁷ See Matt Cook, “Sexual Revolution(s) in Britain” and other essays in *Sexual Revolutions*, ed. Gert Hekma and Alain Gianni (Basingstoke: Palgrave Macmillan, 2014).

reformist Labour government were key factors in the apparent shift from the buttoned-up self-restraint that was used to characterize (sweepingly and somewhat erroneously) the immediate postwar period.⁸ The introduction of the contraceptive pill in 1961 further separated sex from reproduction in many people's minds and was associated with a growing literature on sexual pleasure for its own sake.⁹ Greater spending power and a shift toward a consumer-driven economy fueled the rise of individualism. And then there were the landmark pieces of "permissive" legislation: the abolition of the death penalty (1965), the partial decriminalization of homosexuality (1967), the legalization of abortion in carefully defined circumstances (1967), and the reform of divorce law (1969).

These years were nevertheless far from revolutionary. Attitudinal and behavioral changes were deeply contested, far from ubiquitous, and laden with ongoing constraints.¹⁰ The pill was initially only available to married women, and by 1970 no more than 9 percent of single women were taking it. Considerable stigma was still attached to cohabitation, divorce, single motherhood, and even sex before marriage. Though there was much talk of attitudinal and behavioral change in the press and broader literature, these things were equivocal, to say the least, and were modulated by where people lived, their age and generation, their access to money, and many other factors.¹¹ The radical legislation of the second half of the decade, meanwhile, looks rather grudging in retrospect. The Sexual Offences Act was underpinned by recommendations from the Wolfenden committee formulated a decade earlier, well before the supposed sexual revolution. As Brian Lewis shows in *Wolfenden's Witnesses* (2015), even reformers at this stage tended to imagine little more than the equivocal toleration of this unfortunate group of men. The three middle-class homosexual witnesses were, meanwhile, wary or condemnatory of those of their (usually working-class) fellows who lacked discretion and outward respectability.¹² In this testimony, the committee's report, the surrounding debate, and then the 1967 legislation, we get a sense of the limits of what was imaginable in terms of the accommodation of homosexuals in "modern" society.

⁸ On this argument see Frank Mort, *Capital Affairs: London and the Making of the Permissive Society* (New Haven, CT: Yale University Press, 2010), esp. 1–25, 197–222; Lesley Hall, *Sex, Gender and Social Change in Britain since 1880* (Basingstoke: Macmillan, 2000), 132–48.

⁹ See Hera Cook, *The Long Sexual Revolution: English Women, Sex, and Contraception, 1800–1975* (Oxford: Oxford University Press, 2004); Jeffrey Weeks, *The World We Have Won: The Remaking of Erotic and Intimate Life* (London: Routledge, 2007); Cook, "Sexual Revolution(s)."

¹⁰ Nick Tiratsoo, ed., *From Blitz to Blair: A New History of Britain since 1939* (London: Weidenfeld & Nicolson, 1997), 132, 149; Stuart Hall, *Policing the Crisis: Mugging, the State, and Law and Order* (London: Pan Macmillan, 1978), 147.

¹¹ See Cook, "Sexual Revolution(s)" for more on this.

¹² Brian Lewis, *Wolfenden's Witnesses: Homosexuality in Postwar Britain* (Basingstoke: Palgrave Macmillan, 2016), esp. chaps. 4 and 5.

Though the act neatly defined the terms of acceptable sexual behavior, it was in practice rather difficult to contain homosexuality. Relatively few men had access to the secure private space needed for sex under the new law. Others preferred to have sex with more than one person and in other spaces (as did many “normal” couples). Men in the Gay Liberation Front (GLF) and longer-standing Campaign for Homosexual Equality (CHE) challenged the terms of the law and a continuing felt marginalization. Their detractors, meanwhile, saw these protests as exceeding the bounds graciously accorded to the homosexual minority. Responding to the antics of some GLF squatters in Brixton, south London, pub landlady Mrs. Auld insisted that she did not mind “what they did inside their own walls” (in that hallowed private sphere) but felt they should be more discreet in public. She told a local paper that these were “exhibitionists, not true homosexuals.”¹³ In its comment piece on the group, the *South London Press* observed that “it is very doubtful whether the quieter breed of homosexuals—who form the majority—would welcome this gay intrusion into their privacy.”¹⁴ The boundaries of acceptability were reinscribed in such comments, marking the acceptable (respectable and discreet) homosexual from the new and unpalatable gay “breed,” who of course gained a heightened profile through such coverage.

If many individuals and public commentators accommodated and/or celebrated a perceived increase in pluralism in the late 1960s and 1970s, there was a sense for others that things had gone too far and that the permissive legislation had opened the floodgates to licentious behavior. Mary Whitehouse established the National Viewers and Listeners Association in 1965, and the campaigns it orchestrated throughout the 1970s and 1980s against representations of sex (particularly homo-sex) on TV, on the stage, and in print epitomized that reaction. The onus was (apparently) on saving the coming generation from “a lack of proper order,” from the legacy of permissiveness, from liberal and leftist professionals (including broadcasters), and especially from homosexuals, who seemed to embody each of these things.¹⁵ Some politicians, journalists, and MOers saw a clear need to reestablish the limits on permissiveness—a term that seems to have variously meant liberal attitudes in general, the growth in discussion about and representation of such attitudes, a lack of moral compass, and promiscuity.

AIDS AND THE 1980s

The battle lines were thus already drawn by the time people began dying of AIDS-related conditions in the UK in the early 1980s. By the end of

¹³ “No Money for Male Homosexual Centre,” *Streatham News*, November 7, 1975.

¹⁴ “Comment,” *South London Press*, September 14, 1975.

¹⁵ Philip Gatter, *Identity and Sexuality: AIDS in Britain in the 1990s* (London: Cassell, 1999), 13; Weeks, *Sex, Politics and Society*, 379.

1987, the year the MO directive on AIDS was released, 610 people had died of AIDS-related illnesses in the UK. Over half of that number died in that year alone, signaling a marked escalation of the crisis and prompting fears that the “gay plague” might be about to transmute into a heterosexual epidemic.¹⁶ With rising mortality rates and a growing number of HIV diagnoses following the introduction of the first test in 1985, public awareness about the existence and potential spread of the virus grew, and along with it uncertainty and anxiety. The early response to the crisis had been driven by community groups and mobilization “from below,” but from 1986 the government began to engage more decisively.¹⁷ In that year Secretary of State for Health and Social Security Norman Fowler set up a cross-departmental unit to coordinate government attempts at “crisis management.”¹⁸ Beginning in November, £20 million were spent on a major public health campaign. This campaign, together with parallel health service and local authority initiatives that further professionalized the response to AIDS, were underpinned by a broad ethos of voluntarism (as opposed to the impelled disclosure, travel restrictions, and quarantining that characterized aspects of the response to HIV and AIDS in, for example, Sweden, Cuba, and the United States).¹⁹ Despite significant cabinet opposition and prime ministerial reticence, Fowler pushed through a campaign involving TV and billboard advertisements and a leaflet delivered to every household in the country.²⁰ The campaign erred toward practical advice rather than direct moral messages, even if the now-infamous imagery of the campaign, with looming icebergs and tombstones, suggested encroachment and creeping threat.²¹ The all-channel “AIDS week” TV scheduling in February 1987 took a similar tack and was criticized for precisely that reason by Mary Whitehouse and some MOers.

This practicality in the public health campaign was in tension with burgeoning and punishing rhetoric on morality from some parts of the media and other sections of the government as it attempted to build support in advance of the May 1987 general election. Thatcher promised a return to “traditional” “Victorian” values and opposition to the so-called loony Left and its much-touted and somewhat exaggerated support for gays and lesbians. In February of that year Conservative Member of Parliament (MP) Edwina Currie said that “good Christian people . . . will not get AIDS,”

¹⁶ Weeks, “AIDS and the Regulation of Sexuality,” 30.

¹⁷ Berridge, *AIDS in the UK*, 6–7.

¹⁸ Ibid., 7; Weeks, *Sex, Politics and Society*, 381.

¹⁹ For voluntarism, see Berridge and Strong, *AIDS and Contemporary History*, 2; for disclosure, travel restrictions, and quarantining, see Steve Connor and Sharon Kingman, *The Search for the Virus* (Harmondsworth: Penguin, 1989), 6–11.

²⁰ For cabinet and government memos and discussion on the campaign, see the National Archive, Cabinet Office series JA 235/28–58.

²¹ John Tulloch and Deborah Lupton, *Television AIDS and Risk* (St. Leonards, NSW: Allen and Unwin, 1997), 34.

while her parliamentary colleague Rhodes Boyson proclaimed that “the current fashion for the flaunting and propagating of homosexuality and lesbianism is both anti-family and anti-life.”²² A gay MOer who volunteered for the Gay Monitoring Project reported in May 1987 that he had seen “a larger crop of directly gay bashing reports” in the press in the first four months of that year than he had previously—“from a handful to about 30 per month.”²³ This included a rising tide of accounts of the “shameful” and “irresponsible” behavior of people with AIDS and much headline-grabbing outrage from assorted self-appointed moral guardians.²⁴ Most immediately for MOers receiving the May 1987 MO directive was “the shame” of Conservative MP Harvey Proctor, who was prosecuted that month for gross indecency with (then) underage male prostitutes (age seventeen to twenty-one) in his London flat. Trenchant ideas about the predatory abusive homosexual were replayed, providing further ammunition in the drive for legislation aimed at protecting the young. In her 1987 speech to the Conservative Party conference, Margaret Thatcher famously derided schools for supposedly teaching children that they had an “inalienable right to be gay” instead of teaching them “traditional moral values.”²⁵ The Education Reform Act of 1986 ruled that sex education should pay “due regard to moral considerations and the value of family life” and empowered parents to withdraw their children from sex education classes.²⁶ The measure potentially prevented AIDS prevention advice from reaching children at the very same time that the government health education drive was seeking to spread knowledge on how to remain HIV negative. Both the Education Reform Act and 1987 proposals to ban the “promotion” of homosexuality by local government (in schools and local libraries, for example) rang with fears about premature sexual knowledge reaching children from outside the family home. The latter became law via Section 28 of the Local Government Act in 1988. Both measures related to ongoing debate and anxiety about the relationship between private lives and families, on the one hand, and the public sphere and the role of the state, on the other.²⁷ It was partly on this basis that Thatcher and other members of the government initially

²² “Mrs Currie Dishes Out AIDS Advice,” *Yorkshire Post*, February 13, 1987; “Boys in AIDS Scare Shut Away,” *Daily Express*, March 17, 1987.

²³ Mass Observation Archive (hereafter MOA), The Keep Record Office, Brighton, spring 1987: AIDS campaign (hereafter AIDS), Mass Observer (hereafter MOer) B1106.

²⁴ For contemporary accounts of press coverage, see Simon Watney, *Policing Desire: Pornography, AIDS and the Media* (London: Comedia, 1986); Horst Stipp and Dennis Kerr, “Determinants of Public Opinion about AIDS,” *Public Opinion Quarterly* 53, no. 1 (March 20, 1989): 98–106.

²⁵ Margaret Thatcher’s conference speech, October 9, 1987, Margaret Thatcher Foundation Archive, CCOPR/664187, <http://www.margaretthatcher.org/document/106941>.

²⁶ Paul Johnson and Robert Vanderbeck, *Law, Religion and Homosexuality* (New York: Routledge, 2014), 176.

²⁷ Weeks, *Sex, Politics and Society*, 377; Hall, *Sex*, 193.

opposed the AIDS leaflet drop.²⁸ This legislation and the growing use in the 1980s of “conspiracy to corrupt public morals” measures against editors, authors, and even bookshop owners were underpinned by the same rationale of containment evident in the 1967 act. Lawmakers and enforcers were attempting to reimpose limits on permissiveness in order to protect the public and especially children from gays and lesbians and the propaganda they were supposedly spreading in schools, libraries, and bookshops. Here again we see the limited tolerance—rather than the normalization—of difference and perceived deviance.²⁹

And tolerance by the later 1980s was limited indeed. The British Social Attitudes survey of 1987 found that 74 percent of their sample of approximately 1,700 people thought homosexual relations were always or mostly wrong, compared to 69 percent in 1986 and 62 percent in 1983.³⁰ To a growing counterculture, a burgeoning gay scene, the demands of gay activists, and some councilors wanting action on equality was added a health crisis whose dimensions and potential path were only just becoming apparent.³¹ Gay men were now more insistently present, and their detractors were finding them more insistently demanding and threatening than they had before. They were becoming less and less marginal to daily lives, thoughts, and feelings in ways that did not fit easily with prevailing notions that tolerance was contingent on privacy, discretion, and a certain invisibility. Many conservatives felt that gay men in particular had flouted the moral compromise and that this was part of what had led the country into its current crisis. Those limits to permissiveness, repeatedly emphasized since 1967, seemed more comprehensively breached by the time MOers were responding to the directive in 1987.

The fresh visibility certainly bred contempt, and yet the concerns of gay men were increasingly folded into council policy, into health and housing services, and particularly into the social circles of a younger generation. Gay men and their allies formed powerful communities of care and protest. In ways that were hard to resist or counter, they had become a much more tangible part of the social and cultural fabric. There was, as we have seen, a reactionary attachment to the way Wolfenden and the ensuing lawmakers positioned homosexuals, but this positioning was in many ways unsustain-

²⁸ N. L. Wicks, principal private secretary to Margaret Thatcher, to Tony Laurance, Department of Health and Social Security, March 6, 1986, National Archives, PREM-19-1983. For more on this, see Matt Cook, “Archive[s] of Feeling”: The AIDS Crisis in Britain, c.1987,” *History Workshop Journal* (forthcoming, 2017).

²⁹ Hall, *Policing the Crisis*, 166; Weeks, *Sex, Politics and Society*, 288.

³⁰ Roger Jowell, Sharon Witherspoon, and Lindsay Brook, eds., *British Social Attitudes: The 5th Report* (Aldershot: Gower, 1988), 36.

³¹ On the developing language of rights, see Davina Cooper, “Off the Banner and onto the Agenda: The Emergence of a New Municipal Lesbian and Gay Politics, 1979–1986,” *Critical Social Policy* 36 (1992): 20–39.

able in this new context.³² Gay men were beginning to gain some wider cultural purchase as a consequence of the disaster of AIDS, as Dennis Altman argues powerfully.³³

The cultural fracture was clear, but the government, as we have seen, was sending out mixed messages: on the one hand, taking the moral high ground in its rhetoric and action on the protection of children from the influence of homosexuals, and on the other, seeking to pursue a relatively nonjudgmental line in its health advice and policy on HIV and AIDS. This reflects what Weeks identifies as a broader inherent contradiction “between [the conservative government’s] economic liberalism, setting the individual free to pursue his or her ends wherever possible, and its moral conservatism, attempting to restore authority in a world that was becoming irreducibly pluralistic.”³⁴ The tensions between these positions are evident among MOers as they grappled with the crisis and this shifting political ground, especially in terms of the social and cultural positioning of homosexuality. Where did the much-touted norm lie now?³⁵ And how were individual MOers to place themselves in relation to conservative, permissive, or perverted others?

MASS OBSERVATION

In the 1980s the Mass Observation project typically sent panelists three directives a year. Each had two or three “parts” relating to different topics. Accompanying the AIDS directive (part 2) in May 1987, for example, was another entitled “Waste, Thrift and Consumerism” (part 1). There is no paper trail indicating why these themes were selected and presented together, but the juxtaposition may have been suggestive to those receiving the mailing, given that AIDS was commonly seen to be the result of moral laxity and excessive sexual consumption. For many of the MOers who responded to the directive, AIDS represented a defiance of what Thatcher had called “the old virtues of discipline and self restraint.”³⁶ Her government’s championing of the conditions for a consumer society tugged at a broader reticence and anxiety about consumerism and the Americanization of culture at the time.³⁷ It is tempting to conjecture that a fresh conservative and reactionary focus on sexual consumerism and the need for self-restraint was a useful

³² Hall, *Sex*, 165–75.

³³ Dennis Altman, “Legitimation through Disaster,” in *AIDS: The Burdens of History*, ed. Elizabeth Fee and Daniel M. Fox (Oakland: University of California Press, 1988), 301–14.

³⁴ Weeks, *Sex, Politics and Society*, 377.

³⁵ On the contingency of normativity, see especially Robyn Wiegman and Elizabeth Wilson, “Antinormativity’s Queer Conventions,” *Differences* 26, no. 1 (2015): 1–25.

³⁶ Margaret Thatcher’s speech to Conservative Central Council conference, May 22, 1982, Margaret Thatcher Foundation Archive, www.margaretthatcher.org/document/104905.

³⁷ This anxiety was captured early on in the period in Richard Hoggart, *The Uses of Literacy. Aspects of Working-Class Life* (1957; London: Penguin, 2009).

or welcome diversion from these other tensions. It perhaps addressed that enduring anxiety through sex while giving the market free rein.

Both parts of the May 1987 directive generated roughly the same number of responses (637 to part 2 as opposed to 699 to part 1), with around three female respondents to every male. This was fairly typical of MO surveys at this time. I worked in detail with a third of these testimonies, preserving the same gender and age ratios. As others have also found, the data are awkward and eclectic.³⁸ While some MOers followed the directives fairly systematically, others addressed them only partially, and some not at all. Unlike opinion polls or surveys that ask direct questions and demand direct answers, MO sought discursive responses guided by general themes and loose questions. These responses allow us to see something of the complex texture of thought, opinion, and feeling (rather as an oral history interview might). The material certainly does not lend itself to number crunching.³⁹ My attempts to find statistical patterns in the number of MOers who were sympathetic or unsympathetic to gay men and to people with AIDS failed to capture the fact that people are contradictory and uncertain. Some with authoritarian tendencies might equivocate as they considered the views of people around them; others were ostensibly sympathetic to gay men but also used casual antigay rhetoric or shared their amusement at homophobic AIDS jokes. Many reported the views of others and avoided saying what they thought altogether. In an attempt to capture something of this range and complexity, I placed respondents into four loose groupings, which I will discuss in turn in the next section. The divisions between them are not firm and should be taken as only the broadest indicators, not least because determining the “truth” of what MOers thought is a very slippery enterprise indeed. Truths were inevitably modulated by the contexts in which they were articulated and the manner in which they were elicited. People held (and hold) apparently contradictory views, condemning, for example, “those gays” (viewed as a totality) but commanding gay family members or neighbors, who were thus individuated and viewed through the additional prism of family or community.⁴⁰

The Mass Observation panel, finally, cannot be taken as “typical” or “representative.”⁴¹ MOers were self-selecting and demographically skewed

³⁸ Emma Casey, Fiona Courage, and Nick Hubble, “Special Section Introduction: Mass Observation as Method,” *Sociological Research Online* 19, no. 3 (2014): 22; A. Pollen, “Research Methodology in Mass Observation Past and Present: ‘Scientifically, About as Valuable as a Chimpanzee’s Tea Party at the Zoo?’,” *History Workshop Journal* 75, no. 1 (April 2013): 220.

³⁹ Pollen, “Research Methodology,” 224.

⁴⁰ For an exploration of some of these issues, see Dorothy Sheridan, Brian Street, and Bloomie David, *Writing Ourselves: Mass Observation and Literacy Practices* (Cresskill, NJ: Hampton, 2000).

⁴¹ Ian Gazely and Claire Langhamer, “The Meanings of Happiness in Mass Observations Bolton,” *History Workshop Journal* 75 (Spring 2013): 177; Pollen, “Research Methodology,” 215.

in terms of age (in my sample of 169, 25 percent were under forty years of age; 38 percent were between forty and sixty; and 37 percent were over sixty), gender (3:1, female:male), class (difficult to assess from the brief details of occupation but mostly middle), and geographic location (of my sample 45 percent were from the South East, including London; 17 percent from the Midlands; 14 percent from northern England; 9 percent from southwest England; and around 5 percent each from Wales, Scotland, and East Anglia).⁴² These people also had the time to sit and write—often at length—on the issues under investigation. Some felt a sense of social and historical responsibility in filing their reports, and they positioned themselves in particular ways socially, culturally, and in relation to the people immediately around them—as more thoughtful and observant than their fellows, for example.⁴³ Yet if MOer responses are not a means of taking a reliable cultural temperature, they are indicative of prevailing languages and concerns, and they make evident some of the parameters within which individuals were thinking (and, as I suggest in a companion piece to this article, feeling).⁴⁴ The responses also allow us to witness men and women constituting themselves for themselves, for the MO project, and in relation to people immediately around them and others (like gay men and politicians) who were at a distance.

I have suggested already that the discursive and often expansive responses of MOers can complicate the simple answers frequently demanded by opinion polls or surveys. For this reason the MOer responses are useful in allowing us to “intervene” in the simplifications of cultural memory.⁴⁵ In MOers’ responses to the 1987 directive, we can see uneven and disparate negotiations of norms in flux. They are frequently contradictory and ambivalent, and if some were certainly hard-line and had clear views on the permissive 1960s and what followed, the spread of feeling and opinion within and across the testimonies suggests something altogether more complicated.⁴⁶ We witness an urgent desire by many MOers to issue a corrective to what they saw happening—to note their dismay at the antigay rhetoric in the press or the presumption that everyone was illiberal. There was only limited consensus between MOers. It becomes clear, in Ken Plummer’s words, that “dominant or hegemonic cultures . . . are never all there is—and ironically

⁴² Pollen, “Research Methodology,” 230.

⁴³ Some Mass Observers refer directly and obliquely to this sense of responsibility. See, for example, MOA, AIDS, MOer D153.

⁴⁴ Cook, “Archive[s] of Feeling.”

⁴⁵ Sarah Brophy, *Witnessing AIDS: Writing, Testimony and the Work of Mourning* (Toronto: University of Toronto Press, 2004), 15; Watney, *Policing Desire*, 86.

⁴⁶ This relates to debate about the concept of “moral panic” and its utility. For recent interventions, see Kenneth Thompson, *Moral Panics* (London: Routledge, 2013), introduction and chap. 5; Julia Laite, “Justifiable Sensationalism,” *Media History* 20, no. 2 (April 3, 2014): 126–45.

they may not even be that dominant.”⁴⁷ If most MOers saw themselves as “normal” or “ordinary,” it is evident that there was not a shared sense between them of what these things might mean in terms of attitudes toward AIDS and homosexuality. There are, however, some commonalities. The testimonies highlight shared mythologies associated with the sexual revolution and its legacies. For good or ill, this cohort of MOers saw the 1960s both as a time of radical change and as a lodestone.⁴⁸ While some expressed a desire to return to the period before the sixties and before the growth of a troubling moral relativism, others were attracted to the sixties themselves and a seemingly more restrained conception of permissiveness to the models subsequently put forward by women’s and gay liberation. Nostalgia for one time or another infuses the testimonies.

What is shared between MOers comes into sharper focus when we read their testimonies alongside those of gay men responding to a directive entitled “Gay Men and Health” issued in 1986 by the parallel National Lesbian and Gay Survey (NLGS), a project initiated by a gay MOer and structured in a similar way to MO (that is, with regular directives sent out to a panel of potential respondents).⁴⁹ Whatever the differences between MOers (and they are legion), there is a further difference and distance between the views and ideas circulating among these largely “heterosexual,” “normal,” or “married” men and women (to cite their most commonly used terms) and those articulated by the eighty-six gay men responding to the NLGS. The latter challenge some supposedly “commonsense” views espoused by MOers, chiefly in relation to promiscuity, respectability, and discretion. Those who responded to the NLGS form a tighter collective of shared opinion than the MOers, not least in their broadly shared belief in the disdain their straight counterparts bore them. These testimonies are thus a useful additional reference point for my analysis of MOers’ responses. Within and between the NLGS and MO we can discern the repositioning of gay men in the conflicted contexts of the mid- to late 1980s and so also a fragmentation of the Wolfenden accord. And yet I argue that some of the terms of acceptance etched out in the late 1950s and 1960s proved tenacious and are indeed still detectible in the more recent accommodation of lesbian and gay lives in the UK. Especially when read alongside NLGS

⁴⁷ Ken Plummer, “Generational Sexualities, Subterranean Traditions, and the Hauntings of the Sexual World: Some Preliminary Remarks,” *Symbolic Interaction* 33, no. 2 (2010): 163–90.

⁴⁸ For a range of European perspectives, see Hekma and Gianni, *Sexual Revolutions*.

⁴⁹ Although the directive entitled “Gay Men and Health” was issued in 1986, responses were spread over the ensuing years because new members were invited to respond retrospectively. This was one difference between MO and the NLGS: new MOers were not invited to respond to earlier directives in the way NLGS panelists were. On the NLGS, see the foreword and introduction of National Lesbian and Gay Survey, *Proust, Cole Porter, Michelangelo, Marc Almond and Me: Writings by Gay Men on Their Lives and Lifestyles from the Archives of the National Lesbian and Gay Survey* (London: Routledge, 1993), iv–xi.

and other survey and polling data, MO leads us into a complex history of division, fragmentation, change, and continuity.

SHADES OF OPINION

MO respondents included the shocked and horrified, the angry and incensed, the worried, frightened, and even terrified, the upset and empathetic. I have discussed this wide emotional repertoire and the way it affected MOers' everyday lives elsewhere.⁵⁰ Suffice it to say here that one of the effects of this emotional discourse was to further minoritize gay men and to place them at a greater distance from these "normal" men and women.⁵¹ The jokes, anecdotes, and media reportage discussed by MOers did something similar. Whether they were reactionary or liberal in their views, MOers consistently reinscribed the axiomatic divide between "them" and "us" in the testimonies.

Around 15 percent of my sample clearly stated that the blame for AIDS lay with permissiveness (a term several use), homosexuals, and drug users. They were sympathetic only to innocent victims (hemophiliacs and children) and insisted that the only way out of the crisis was through a "return" to moral strictures and (less often) more authoritarian modes of control. "If you have it you deserve it," proclaimed a fifty-nine-year-old retired chocolate factory worker from the Midlands.⁵² A forty-year-old housewife from Derby branded AIDS a form of "self-inflicted cancer" contracted in ways and by people who were as "disgusting" to her as they were "horrifying" to a retired seventy-five-year-old woman from the East Midlands.⁵³ A seventy-six-year-old resented prayers offered up by his vicar for a cure: "As AIDS was basically the result of indulging in unnatural practices, it might have been better to pray for a cure to some of the many other diseases afflicting mankind and which are caught however moral one is."⁵⁴ Christian faith and principles frequently underpinned the clear moral framework articulated by this first loose grouping. This led to some hand wringing among those in the church who had worked empathetically with people with AIDS.⁵⁵ In his book on these tensions, Rev. James Woodward described what he experienced as the "tyranny of certainty" in the response of a group of Christians in Manchester to a public lecture by a PWA (a new label for a "person with AIDS"). This man had "shared his story with power, courage

⁵⁰ Cook, "Archive[s] of Feeling."

⁵¹ I follow Eve Kosofsky Sedgwick's use of minoritize here—that is, carrying the idea of the constitution of a minority identity and community. See *Epistemology of the Closet* (London: Harvester Wheatsheaf, 1991).

⁵² MOA, AIDS, MOer A733.

⁵³ MOA, AIDS, MOers B78, A22.

⁵⁴ MOA, AIDS, MOer F212.

⁵⁵ See James Woodward, introduction to *Embracing the Chaos: Theological Responses to AIDS*, ed. James Woodward (Abingdon: SPCK, 1990), 1–8.

and humour. The group of 12 fixed their attention on him and listened with care." Yet after he left, the group agreed: "It was his fault; individuals must live with the consequences of their actions."⁵⁶

Most of those in this first group of MOers were older. Around 25 percent of the over sixties in my sample specifically blamed homosexuals, as opposed to 15 percent of under sixties (remembering that the MO directive did not specifically ask them about this). Older men tended to be the most specifically condemnatory: 45 percent of men as opposed to 15 percent of women in the over-sixty age bracket pointed the finger at homosexuals; women tended to blame permissiveness or immorality more generally. Among the under sixties, the gender divide was narrower: 20 percent of men and 15 percent of women made antihomosexual statements. Women also reported more homophobia and extreme views on the part of husbands and male acquaintances. "Males find homosexuals repulsive and think they should be shot or put quietly to sleep," wrote one.⁵⁷ There were entrenched presumptions about supposedly conservative male attitudes and behavior across the testimonies, although my rough figures here suggest that male and female views were beginning to converge in younger age groups.⁵⁸ A handful of MOers in this group specifically located (or report friends locating) the 1967 partial legalization of homosexuality as the root of the current crisis. Four individuals in my sample mentioned this—all men over sixty. This was in line with the sentiments of Conservative MP Geoffrey Dickens, writing in the *Sunday Times* just after the release of the MO directive: "Unfortunately, when you make something legal, it then starts to carry approval, which was never intended" (and Lord Arran's comments cited earlier suggest that Dickens was right: approval was not the aim of the act).⁵⁹

Some of these MOers advocated firm action against queer miscreants. Several suggested compulsory testing and registration of HIV status; others wanted exclusion from state-funded health care. Such responses were tinged with critique of the nanny state, which, in an echo of contemporary Conservative Party rhetoric, must surely have its limits. A retired nurse from north Wales felt "little sympathy for homosexuals and drug users": "It seems a pity that money should be spent on them where there are more

⁵⁶ James Woodward, "Christian Missioners Meet a Person Living with AIDS," in the newsletter *AIDS Update: Time for Support* (1994), FFLAG (Friends and Family of Lesbians and Gays) archive, City of Manchester Library, 55260 G/FFLAG box 3.

⁵⁷ MOA, AIDS, MOer B663. Beatrix Campbell found a similar gender divide between responses of miners and their wives to their supporters during the 1985 strike. See *The Cutting Edge: Women and the Pit Strike* (London: Lawrence and Wishart, 1986), 278–79.

⁵⁸ See also Lindsay Brook, "The Public Responses to AIDS," in Jowell, Witherspoon, and Brook, *British Social Attitude Survey*; L. A. Nisbet and D. V. McQueen, "Anti-permissive Attitudes to Lifestyles Associated with AIDS," *Social Science and Medicine* 36, no. 7 (1993): 893–901.

⁵⁹ Geoffrey Dickens, *Sunday Times Magazine*, June 21, 1987.

deserving cases.”⁶⁰ While “heamophiliacs etc.” should be given help, this respondent felt that gays and drug addicts should “rely on voluntary help; the gay community should be well able to look after their own.”⁶¹ Our East Midlander reached a similar conclusion (though via a different route): “If people wish to play Russian roulette with their lives, that is their freedom and privilege but others should not be made to pay. . . . The AIDS sufferers (it may sound callous but I HAVE to say this) in the main sound such a selfish lot: they ‘want’ . . . they ‘want’ . . . they ‘want’ (hospices, vaccines, more funds, less prejudice)—in essence they live selfishly and yet don’t want to GIVE ANYTHING do they?”⁶² The “satanic” “attitudes and practices” of these people rendered them beyond sympathy and help. They had separated themselves from “public” morality and should therefore not have recourse to public funds. “My sympathy goes to people who are ill through no fault of their own and suffering also at the hands of this awful government who are running down the NHS and services,” she went on. This woman tacitly connected the selfishness of AIDS sufferers who “don’t want to give anything” and the government, which she saw pulling away from public service. On both counts, this woman, who was a Labour Party supporter, observed a retreat from a sense of social responsibility and identified something of the social atomization and individualism Anthony Giddens associate with this period.⁶³ For some MOers, this retreat into individualism contrasted with the imagined community of shared values and collective purpose that they saw prevailing in the immediate postwar years. This was something they felt had been compromised in the permissive 1960s. For others, the contained pluralism of that decade combined permissiveness with a measure of restraint. That had now apparently been lost.

These various sentiments resonate with contemporaneous opinion surveys that found that people with AIDS in the UK were frequently derided for both their low moral worth and their dependency.⁶⁴ Analysts of the British Social Attitudes Survey (BSAS) reported in 1987 that respondents called for money to be channeled from treatment to research in order to prevent the feared heterosexual epidemic in the UK.⁶⁵ There is here a reanimation of a nineteenth-century language of the deserving and undeserving, which was also a significant part of Thatcher’s reclamation of so-called (and heavily mythologized) Victorian values. Indeed, her government’s more strident and apparently “commonsense” moral line and attack on left-wing local authorities in the runup to the 1987 general election led a handful of MOers down a similar path. One complained that left-wing local councils were

⁶⁰ MOA, AIDS, MOer B663.

⁶¹ MOA, AIDS, MOer E1293.

⁶² MOA, AIDS, MOer A22.

⁶³ Anthony Giddens, *Modernity and Self-Identity: Self and Society in the Late Modern Age* (Cambridge: Polity Press, 1991), esp. 35–70, 109–44.

⁶⁴ Nisbet and McQueen, “Anti-permissive Attitudes,” 898.

⁶⁵ Brook, “The Public Response to AIDS.”

“swamping our schools with ‘Gay is beautiful’ literature”: “‘It’s alright to be homosexual,’ they cry, while on the other hand we are told homosexuals are the cause.”⁶⁶ There is a strong sense within this first hard-line group of MOers of “the permissive threshold” being reached and breached by gay men and the left-wing local administrations that backed them.⁶⁷

The second related and larger group within my sample includes some of these views and elements of this rhetoric. In answer to direct questions from pollsters, they might well have simplified their responses in line with the hard-line opinion of my first group. In discursive responses for MO, however, they often communicate a broader sympathy for “victims” (sometimes couched in terms of Christian compassion) and more ambivalence and uncertainty. These MOers sometimes reported the disgust of others (husbands, friends) rather than their own—though this can be read as a displacement of their own discomforting feelings (especially when they do not counter or condemn the sentiments of those others or when they suggest in other ways that they might be in partial agreement). A thirty-seven-year-old housewife from the West Midlands was dismissive of ideas that AIDS was a punishment on homosexuals (voiced by people she knows) yet suggested that “the tremendous time and money gone into research for a relatively few people could have been better used.” In an example of the frequent self-reflection among MOers, she adds: “Of course I would think differently if I knew someone afflicted.”⁶⁸ A forty-six-year-old teacher “deplore[s] any hounding of AIDS victims and especially their families but . . . to be honest, now and then, the thought crosses my mind that it is like some biblical judgement of God for the sexual revolution.”⁶⁹ What runs through several of these testimonies is the idea that as a separate group homosexuals (homogenized and divested of individuality) were tolerable, acceptable even.⁷⁰ However, this was often accompanied by the view that because they were cultural and moral outsiders they should not be accorded the same rights and value as “normal” individuals.

More broadly, the first hard-line group and this second group agreed that there was a need for a more moral public discourse. Although there was a general appreciation of the need for information, and there was even a generally positive response to the AIDS storyline on the popular BBC soap opera *Eastenders* and the week of cross-channel programming about AIDS earlier in 1987, many MOers in the first group also criticized that coverage for not taking a more overtly moral tone. People needed to be exhorted to “pull their moral socks up” and, according to one MOer, “on the woman’s part much greater use of the word ‘no’” (in just one

⁶⁶ MOA, AIDS, MOer D1559.

⁶⁷ Hall, *Policing the Crisis*, 226, 239.

⁶⁸ MOA, AIDS, MOer B1891.

⁶⁹ MOA, AIDS, MOer B1887.

⁷⁰ Steph Lawler, *Identity: Sociological Perspectives* (Cambridge: Polity Press, 2008), 183.

of many examples of the enduring sexual double standard). These views rehearsed by MOers echoed those of 66 percent of BSAS interviewees who felt “official warnings about AIDS should say that some sexual practices are morally wrong.”⁷¹

The MOers in these first two groups frequently reference the sentiment that the morally upright (themselves included) were becoming an ignored minority in the face of permissive and liberal social currents and what several refer to as “political correctness.” Their response to what Jane Franklin has called the new “risk society” (of which AIDS was a symptom) revolved in part around a nostalgia for the supposed certainties of earlier times, when “a kind of common sense morality” was cemented by family, community, neighborhood, and church.⁷²

The values of these first two groups gained wide and often headline expression in the voluminous newspaper coverage of the crisis from roughly 1985 onward. Gay respondents to the National Lesbian and Gay Survey (NLGS) and the two gay MOers in my MO sample recorded their fearful or outraged reactions to this coverage and frequently mentioned the prejudice they had experienced or anticipated. A sixty-one-year-old NLGS correspondent wrote that AIDS “has resulted in more queer bashing and anti-gay prejudice.”⁷³ AIDS, for a twenty-three-year-old in Edinburgh, had “reinforced [his] awareness of the intolerance and incompetence of government and [the] contempt of the majority of straight people.”⁷⁴ Yet even explicit homophobia did not invariably translate into a lack of sympathy for people with HIV or AIDS. Thus, although the results of the BSAS suggest hardening attitudes toward gay men during this period, some respondents expressed tentative support for the rights of PWAs: 57 percent agreed that employers should “definitely or probably” not have the right to dismiss PWAs, against 38 percent who thought they “definitely or probably” should. Meanwhile, 67 percent of those interviewed agreed that medical staff should “definitely or probably” not be allowed to refuse treatment to PWAs.⁷⁵ Though the number in favor of the withdrawal of such rights is still alarming, what Lindsay Brook calls the “trend towards discrimination” in the first half of the 1980s was not sustained into the latter part of the decade. The arguments for equality and rights being made by the Left were perhaps beginning to gain some traction in spite of a rising sense of moral disapproval.⁷⁶

A liberal pulse was palpable, and this was also true in the MO cohort I examined. There were significant levels of support or sympathy for PWAs

⁷¹ Brook, “The Public Responses to AIDS,” 82.

⁷² Jane Franklin, ed., *The Politics of Risk Society* (Cambridge: Polity Press, 1998), 2.

⁷³ National Lesbian and Gay Survey (hereafter NLGS), The Keep Record Office, Brighton, Respondent 382, box 4.

⁷⁴ NLGS, Respondent 396, box 3.

⁷⁵ Brook, “The Public Response to AIDS,” 80.

⁷⁶ *Ibid.*, 74.

(regardless of how they had contracted the virus) among the second and then especially the third loose group I identified. This third group of MOers (around 30 percent of the responses) tended to avoid direct judgments. A few were bored by a situation that had little direct impact on them or their social circle.⁷⁷ Theirs was a kind of shoulder-shrugging indifference that can (Weeks suggests) be a vehicle for change and an indicator too of a live-and-let-live moral relativism.⁷⁸ Equally significant was the high proportion of MOers in this group who were actively keeping themselves informed, watching TV programs about the crisis, and discussing the issues with their children. “Our children must be confronted with the facts,” wrote a library assistant from Wales, adding that she had given her son a “pep talk” before he went to university.⁷⁹ Another “dutifully” read the *Don’t Die of Ignorance* public health leaflet and the *New Scientist* and made a point of watching AIDS-themed programs with her family (whether her “duty” was to MO or to herself, to her friends, or to society at large is unclear).⁸⁰

Most of these MOers seem to take the crisis seriously, and yet they wanted to circumvent the “sensationalism” of the press and the “fear and repulsion” that other people expressed.⁸¹ A sixty-five-year-old retired local government worker from the East Midlands gave a carefully considered report on what had happened locally, including the establishment of a Body Positive group in her local city. By following the coverage in the press and on TV, she wrote that “we now know how the local authorities are dealing with the question and what their own problems are, how at least one nurse and one health advisor feel and how the gay community are tackling not only the stigma attached to them but the question of help to sufferers from AIDS whether or not they are homosexual.”⁸² A couple of MOers in this group were actively volunteering to support PWAs, including a retired counselor in Torquay in the South West.

Several in this group were highly critical of the antigay prejudice associated with the response to the epidemic. If for several MOers from the first two groups there was an anxiety about visiting London, for some of this third group it was a haven.⁸³ A forty-one-year-old “househusband” from the West Midlands observed that “in London my friends are far more informed, have a far more balanced attitude to it and it has become a fact of life to be lived through.”⁸⁴ These correspondents meanwhile tended to paint a bleak picture of much of the rest of the country. If some of those in groups one and two saw themselves as an embattled moral minority, the MOers in my

⁷⁷ See, for example, MOA, AIDS, MOer B1724.

⁷⁸ Weeks, *The World We Have Won*, 161–66.

⁷⁹ MOA, AIDS, MOer B1752.

⁸⁰ MOA, AIDS, MOer B1724.

⁸¹ MOA, AIDS, MOers B1885, B1752.

⁸² MOA, AIDS, MOer B1858.

⁸³ Cook, “London, AIDS and the 1980s,” 52, 53–55.

⁸⁴ MOA, AIDS, MOer C1957.

third group felt that the reactionary tone was more dominant. One spoke of the “neanderthal” public debate in East Anglia, where, she wrote with some emotional force, the *Eastern Daily Press* is “the reactionary bastion of reactionary bastards who live in this county.”⁸⁵

There is a clear attempt among this third group to be reasonable, accepting, and pragmatic. This kind of response gave some writing for NLGS grounds for hope. Several described how they valued the nonjudgmental health care and STI testing they had received in London and Brighton (as opposed to the disdain one had been subjected to at a West Midlands clinic).⁸⁶ Many also talked about straight friends who had lent support. This seems to have fed a broader faith in Britishness on the part of at least four of the NLGS respondents. A thirty-year-old researcher was concerned about “reactionary activities” but had faith in “good old fashioned [British] common sense and a sense of fair play.”⁸⁷ A man from Cumbria felt comforted by what he saw as the moral relativism of his compatriots: “The British do not have the same zest for moral righteousness as the Americans.”⁸⁸ The authoritarian proposals for segregation and compulsory testing were unlikely, another NLGS correspondent felt; they would be “political suicide in [Britain], even as unpopular as we are.”⁸⁹ Threading through MOer responses too was a sense that a British way of dealing fairly with the crisis would prevail. One of the MOers (whom I in fact placed in my second group) said she felt positively about the British response when compared to the coercive measures of the Cuban government. She and some others evinced both dismay at the AIDS crisis and those most affected by it and also a certain acceptance of, if not pride in, the lack of coercion in British health policy on AIDS. The need to respond to all citizens’ health needs (regardless of moral failings) connects with the ethos of the welfare state established in the aftermath of World War II.

The humanitarian stance of my third group found even more resonance among the respondents of a final small grouping of MOers who saw the crisis in broader terms and often from a feminist and more explicitly left-wing perspective. They departed more comprehensively from the sixties moral settlement, and they used rhetoric and argument that we tend to associate with the 1970s and 1980s. A handful of these respondents were critical of the government and the public health response, suggesting the need for more compulsory testing and highlighting the contradictions between the ethos of voluntarism and the routine (and to one “humiliating”) testing of pregnant women; why, one asked, had they been singled out? Apparent resonances with the punitive measures against women in the Contagious

⁸⁵ MOA, AIDS, MOer B1124.

⁸⁶ NLGS, Respondent 114, box 1.

⁸⁷ NLGS, Respondent 168, box 1.

⁸⁸ NLGS, Respondent 184, box 1.

⁸⁹ NLGS, Respondent 263, box 2.

Diseases Acts of the 1860s were highlighted by two correspondents in the group (possibly drawing on a new wave of feminist history writing in the 1970s and 1980s).⁹⁰ A fifty-four-year-old teacher from the South East wanted broader intervention and testing (beyond pregnant women) in the interests of collective public health and derided “the authorities” for being “so coy and civil libertarian about AIDS.”⁹¹ She was sympathetic to her gay friend and was positive about sexual freedom in general, but she questioned the allocation of funding—not because AIDS “victims” were undeserving, but because of the parallel cuts to maternity grants. The response to AIDS, she wrote, “clearly illustrates women’s abject situation in power structures of patriarchy.”⁹² There were less politically emboldened echoes of this response across my MOer sample. Several from my other three groups felt women were especially vulnerable and that sexual freedom had done them a particular disservice in unleashing the promiscuous “young bucks” who were more driven by the desire for sexual conquest than by an ethos of sexual safety or restraint.⁹³ This fourth group was more overtly politically engaged than the other three, but if they were permissive in their views, they were not necessarily laissez-faire in terms of the action that they felt should be taken.

RELATIVE AND GENERATIONAL VALUES

In his work on sex, sexuality, and generational change, Ken Plummer investigates the complexity of generational coexistence, the diversity of thought and feeling within one generation, and the hauntings of the past. “At any moment of thinking about the sexual,” he writes, “we will usually find at least five generations helping to shape that moment. And these are just the living generations—to this there will also be added the legions of dead generations, whose ghosts may still be heard speaking past sexual

⁹⁰ MOA, AIDS, MOers A1530, C602. For feminist history writing in the 1970s and 1980s, including historical discussion of the Contagious Diseases Act, see Sheila Jeffreys, *The Sexuality Debates* (London: Routledge & Kegan Paul, 1987); Kathleen Barry, *Female Sexual Slavery* (Englewood Cliffs, NJ: Prentice-Hall, 1979); Judith R. Walkowitz, *Prostitution and Victorian Society: Women, Class and the State* (Cambridge: Cambridge University Press, 1980).

⁹¹ MOA, AIDS, MOer A1292.

⁹² MOA, AIDS, MOer A1292.

⁹³ See, for example, MOA, AIDS, MOer A22. This was underscored in a survey conducted in March 1987 by the Independent Broadcasting Authority on young people’s attitudes. Four percent of sixteen- to twenty-year-old men thought sleeping with more than one partner was morally wrong, compared to 40 percent of women of the same age (and 23 percent of men and women over twenty). J. M. Wober, “Youth and TV: Some Patterns of Behavior, Appreciation and Attitudes—Particularly Concerning AIDS” (report for IBA by Mori, March 1987), 24, held at Independent Broadcasting Authority Archive, Bournemouth University, RK/8/505.

stories.”⁹⁴ This is already clear in the testimonies I have discussed, though it is tempting to think of these conjunctions of age and generation in the 1980s prompting an unraveling rather than a “shap[ing] of ideas of the sexual” at this time. Ideas circulating in the 1950s, 1960s, and 1970s are unevenly present in the shades of opinion I have outlined among MOers writing in 1987. Longer histories and imagined pasts are woven in too: of the Contagious Diseases Acts, of those Victorian Values beloved of Thatcher, of supposedly more cohesive times marked by shared values. These opinions and ideas were not expressed in consistent ways within each generational cohort. Older MOers were not universally more “traditional” or “conservative,” and younger MOers are present in my first hard-line group. Other factors, including class, ethnicity, gender, and religion, among others, were surely highly significant in modulating responses. And yet age and generation do seem to make a particular difference, since memory and opinion form through “shared critical life events” that take place on international, national, and local levels. We need to frame MOers’ experiences within the larger contexts of their experiences of war and cold war, the sense of common purpose evoked in the founding of the National Health Service in 1948, and the hype around the swinging sixties. The experience of living through these historical developments will have differed enormously for the different generations, but the headlines (literal and metaphorical) and mythologies associated with them also shaped how people of particular ages related to those periods and moments. The tendency to assume that a generation gap widened in the 1960s thus colors the ways in which that period is remembered and also how relationships across that putative divide are and were lived and understood (then and since). This assumption of or belief in a particularly wide generation gap can make it so, intensifying a difference that often in any case exists between parents and children. The ways in which MOers place themselves against preceding or successive generations may thus exaggerate or simplify difference, yet it is also suggestive of the ways in which MOers conceived of themselves generationally, as part of an age cohort.

Very broadly speaking, those who were in their teens and twenties in the 1960s were more likely to tolerate (albeit often with some discomfort) nonnormative sexual and relationship choices. As Claire Langhamer has demonstrated, members of this generation tended to believe in “love at first sight” and in the idea that “self fulfilment triumph[ed] over self-restraint.”⁹⁵ This perhaps explains a greater acceptance of those who were experiencing or pursuing these things with people of their own sex. This generational attitude is borne out in polling and in MOers’ testimony. The BSAS of 1987 suggested that disapproval of homosexuality was highest in the over sixty-five

⁹⁴ Plummer, “Generational Sexualities,” 173.

⁹⁵ Claire Langhamer, *The English in Love: The Intimate Story of an Emotional Revolution* (Oxford: Oxford University Press, 2013), 3–4, 32, 60.

age group (those who had been at least forty-seven in 1965), standing at 92 percent in 1987, up ten points from 1983. Eighty-nine percent of fifty-five to sixty-four-year-olds (those who were at least thirty-three years of age in 1965) polled in 1987 disapproved—an increase of 19 percent from 1983. This disapproval diminished among those who were in their childhood, teens, and twenties in 1965, standing at 80 percent among forty-five- to fifty-four-year-olds, 68 percent for thirty-five- to forty-four-year-olds, and 61 percent in the twenty-five-to-thirty-four bracket. Yet there had been a significant hardening of attitudes in these younger groups since 1983, when the percentages had been around 17 percent lower for each cohort. They had perhaps initially protested the attitudes of their parents but were now recalibrating their ideas in the context of the epidemic. One MOer in the twenty-five to thirty-four age group wrote that “most people I know, even if celibate or monogamous themselves, generally accepted the mores of the permissive society.” “Now,” he added, “there is rather more hesitation.”⁹⁶ Those who had been born from the mid-1960s onward were, meanwhile, the most liberal in 1987 and the most unaffected by the shifting public profile and positioning of gay men in the 1980s. In the eighteen to twenty-four category, 59 percent disapproved in 1983, compared to 60 percent in 1987—barely any increase at all.⁹⁷ If we observe some considerable flux in the older age groups across the 1980s, there is a notable consistency among younger respondents. Such observations need to be treated with caution, of course; after all, a majority in all the age groups still disapproved of homosexuality. It would be easy to overestimate generational change.⁹⁸ Yet it seems clear that there was a tendency for children of the 1960s to have absorbed the relativism and some sense of pragmatism that underpinned debate and legislation in that decade and that their parents may have initially supported (even if they adjusted their thinking in the 1980s).

Older MOers frequently observed this generational shift in ideas via their own children, and they tended to defer to them or to be “less antagonistic to the[ir] apparently more liberal arrangements” than their parents had been with them.⁹⁹ Although the government seemed to be looking toward greater social control via the family, older MOers often seemed unable to assert their views to family members or exert moral authority over their children and grandchildren. A fifty-eight-year-old housewife (who would have been thirty-six in 1965) reported the difference between her views and those of her daughters. When she discussed AIDS with them they had said they would want boyfriends to use condoms. “I had wanted to

⁹⁶ MOA, AIDS, MOer C1663.

⁹⁷ Brook, “The Public Responses to AIDS,” 73.

⁹⁸ Petra Nordqvist and Carol Smart, “Troubling the Family: Coming Out as Lesbian and Gay,” *Families, Relationships and Societies* 3, no. 1 (2014): 109.

⁹⁹ Langhamer, *The English in Love*, 210.

advocate chastity," she wrote, "but thought I had better keep quiet."¹⁰⁰ Others expressed similar embarrassment about taking a less permissive or traditionalist stance, suggesting that social mores were sufficiently conflicted to make owning such views uncomfortable, especially in direct discussion with younger and more permissive family members or friends. This contrasts with some older MOers' accounts of their own courtships in the 1940s and 1950s, which were offered in response to a directive about courtship and dating issued by the MO project in 2001.¹⁰¹ A Scottish pensioner described being "kept on a tight rein" by her mother—a woman who clearly felt no compunction to defer to her daughter's desire for greater freedom.¹⁰²

A sixty-two-year-old retired secretary highlighted the divergence between her views about homosexuality and those of her daughter and son-in-law: "[They] take a different view from us. Being associated with the catering trade where there are many homosexuals, they do have two acquaintances who are suffering from the disease. They visit them and have meals with them and are rather ashamed of other of their friends who have dropped them because of their illness."¹⁰³ There is a certain accommodation of different views here, even perhaps a sneaking admiration of the loyalty her daughter and son-in-law had shown. Meanwhile, our Scottish pensioner good-naturedly observed a discursive shift in her response to the MO directive about the AIDS crisis: "It came as a bit of a shock to a golden oldie like me to hear such free talk about intercourse on the air and TV and to see condoms demonstrated." (This respondent was among several MOers who commented on the prominence of this "new" word; one noted that "[condom] was mentioned five times on the six o'clock news" and another that it had become her "most hated word.")¹⁰⁴ But this "golden oldie" also delighted in surprising her grandsons by inverting generational expectation. "They were a bit taken aback after the programme when I told them I had several homosexual friends," she noted, adding, "That was another word I didn't know until I was 21!"¹⁰⁵ This woman had a clear sense of change, especially in terms of her own knowledge. This was not accompanied by overt moral judgment, however. By placing themselves in relation to the opinions and lifestyles of younger children and grandchildren—and often by deferring to them—these older MOers suggest uneven change rather than retrenchment. There is in this a kind of reverse acculturation as parents partially acknowledge and accommodate (rather than dismiss) views espoused by their children or

¹⁰⁰ MOA, AIDS, MOer B44.

¹⁰¹ MOA, "Courtship and Dating" directive (2001), MOer D1967.

¹⁰² *Ibid.*

¹⁰³ MOA, AIDS, MOer B1156.

¹⁰⁴ MOA, AIDS, MOers D1697, B1721, B50.

¹⁰⁵ MOA, AIDS, MOer D1697.

grandchildren.¹⁰⁶ Very generally speaking, it was those without children or with older children who were less compromising in their views.¹⁰⁷

Younger MOers described the generational shift from the other direction and often in relation to their own direct experiences. One forty-seven-year-old housewife from the West Midlands (who would have been twenty-five in 1965) noted the attitude of her mother-in-law, who felt “people have brought it on themselves.” “[She and her generation] seem to think that homosexuals didn’t exist in their day which of course they did; prostitution was very much in evidence too.”¹⁰⁸ A fifty-two-year-old woman (thirty-one in 1965) said that her parents “tend to agree with James Anderton,” the Manchester police chief who in December 1986 said that homosexuals, prostitutes, and drug users were “swirling in a cesspit of their own making.” “There is no doubt,” she went on, “that a lot of people feel that, appalling as this plague is, it will have the benefit of killing off a lot of drug addicts and homosexuals. . . . There is also a feeling that it may signal the start of a more moral code of behavior through fear if nothing else.”¹⁰⁹ This woman reported but also distanced herself from these views. There is indeed a tendency among MOers to see themselves as more liberal than those around them, more tolerant than the “general public” or the older generation (who nevertheless confound these expectations of conservatism in their responses to MO).¹¹⁰

Across MOer responses, there was sometimes sympathy for young men and women who, as one respondent put it, had “the spectre of this terrible disease looming over them.”¹¹¹ The BSAS similarly elicited considerable cross-generational agreement with the statement that “AIDS is a tragedy for young people because it surrounds their sex lives with fear.”¹¹² There were no MOers under twenty-five in my sample, but another study of “AIDS cognition” among young people (sixteen and over) conducted between 1988 and 1990 in Dundee and Kirkaldy in Scotland revealed marked pragmatism among late teenagers. They had been brought up in a region with a particularly high rate of HIV transmission, mostly through intravenous drug use. The interviews and questionnaires gathered as part of the project (now held in the Wellcome Trust Library in London) display openness and sympathy, which study participants measured against the

¹⁰⁶ On theories of acculturation, see J. W. Berry, “Acculturation: Living Successfully in Two Cultures,” *International Journal of Intercultural Relations: The Official Publication of the Society for Intercultural Education, Training and Research* 29, no. 6 (2005): 697–712.

¹⁰⁷ This chimes with Lawler’s observations on kinship and attitudinal change (*Identity*, 45–68).

¹⁰⁸ MOA, AIDS, MOer C1832.

¹⁰⁹ MOA, AIDS, MOer F1644.

¹¹⁰ This echoes Green’s research in which she found that people tended to assume others were more hard-line than they were.

¹¹¹ MOA, AIDS, MOer 1215.

¹¹² Brook, “Public Responses to AIDS,” 83.

views of their parents. Several referred to their parents' different hopes or views (in relation to sex before marriage, for example) but noted the older generation's broad acceptance of their children's different mores.

There was among participants in the study a notable empathy for PWAs. One sixteen-year-old knew several people who "have AIDS" through injecting, and she felt "sorry for them": "You don't want to see anyone you know in that situation, you've just got to accept it." "I don't think that you should reject them," she added.¹¹³ A twenty-five-year-old man found his "reactionary" ideas shifting after he made gay friends: "I know my views changed a lot then in that I felt [that] for them [AIDS] was a very serious issue and therefore I should take more notice of it."¹¹⁴ A nineteen-year-old university student noted that "last year on holiday we met these guys from Edinburgh and that was you know when AIDS [was] you know and it was like really funny 'cause we were joking 'oh I'm not like going through to Edinburgh,' . . . but I mean now we would never think like that."¹¹⁵ These participants suggest the impact of knowledge and familiarity in refashioning views. While some MOers describe distancing themselves from gay "acquaintances,"¹¹⁶ this seems not to have been the case for this younger cohort. A sixteen-year-old in the Scottish study knew gay men "through her sports centre and through my laddie [boyfriend]." "I've got nothing against them at all," she said.¹¹⁷ This girl and her "laddie" were not necessarily typical, but they are suggestive of a generational trend borne out in MO, BSAS, and other public opinion work. These young people modeled the relativism of their parents and were also often more open still in their views. If antigay feeling remained strong in all age groups, among those just beginning their sexual lives and just entering into romantic relationships there was more pragmatism—a pragmatism that was in loose accord with television (as opposed to tabloid newspaper) treatment and coverage of the AIDS crisis.

GOING TOO FAR

A twenty-seven-year-old MOer noted that she would change her behavior if she were single, "although only to the extent of using a condom, not complete abstinence."¹¹⁸ She, other MOers in her age group, and the young adults in the Scottish study were not invested in marriage as the sole context for sex. Yet almost all MOers adhered to the couple norm, and most of the young people in the Scottish study were generally opposed

¹¹³ Wellcome Library, AIDS Relevant Cognitions in Dundee and Kirkaldy, GC/252/B1, transcript 071.

¹¹⁴ AIDS Relevant Cognitions, transcript 016.

¹¹⁵ AIDS Relevant Cognitions, transcript 002.

¹¹⁶ See, for example, MO B787; and Cook, "AIDS, Emotion and Everyday Life."

¹¹⁷ AIDS Relevant Cognitions, transcript 017.

¹¹⁸ MOA, AIDS, MOer D1527.

to “sleeping around,” suggesting that those who did were moral outliers. This signals the limitations of purported sexual change since the 1960s and emphasizes a retreat from 1970s debates over the validity of monogamy. Only one MOer from my sample—a thirty-six-year-old teacher—challenged the presumption that having fewer partners was the “obvious” answer to the AIDS crisis, stressing instead the significance of protected or safer sex. Perhaps significantly, her ex-husband had come out as gay, and she had a circle of gay friends who very likely espoused more tolerance of promiscuity.¹¹⁹ Judith Wilson Ross notes that “promiscuity, in the context of the nation’s sexual nervousness, very probably means having more sexual partners than [whoever was using the word “promiscuity”] currently had, that is an inappropriate or morally reprehensible number.”¹²⁰ According to most MOers, that number would be more than one. The apparent consensus on this issue is critical to our understanding of the shifting attitudes toward gay men and the clash of values produced by the AIDS crisis. If MOers felt decidedly mixed in terms of their acceptance or toleration of homosexuality, there was more consensus in their views on multipartner sex. MOers and others found themselves juggling with two associations of permissiveness: acceptance of homosexual relationships, divorcees, cohabitation, and single parenthood, on the one hand, and acceptance of promiscuity and visible difference, on the other. If they could often manage the former, the latter was more of a challenge. When gay men were accommodated or accepted it was usually because they toed a respectable line of coupledom and/or discretion and privacy. The liberation movements of the early 1970s had shaken but not shattered this idea.¹²¹ Writing in the *Times* in December 1987, Bernard Levin condemned the “galloping frenzy of hate” against homosexuals but noted that a minority “abused the new freedom that the [1967 Sexual Offences] Act offered by flaunting themselves in an extravagant *outré* homosexual mode of behavior.”¹²² This was a clear statement about the type of homosexual who could be tolerated and those gay radical outliers who could not, and it was a sentiment echoed by many MOers, most vividly by a forty-seven-year-old Yorkshire woman who had some homosexuals living next door:

They look very respectable—it is quite a humdrum marriage—and they are nicely spoken and decent to me. Usually they cause smiles—a bit covert—or hilarity from the kids. . . . So far as I know they have

¹¹⁹ MOA, AIDS, MOer B1855.

¹²⁰ Judith Wilson Ross, “Ethics and the Language of AIDS,” in *The Meaning of AIDS: Implications for Medical Science, Clinical Practice and Public Health Policy*, ed. Eric Juengst and Barbra Koenig (New York: Praeger, 1989), 33.

¹²¹ Matt Cook, “‘Gay Times’: Identity, Locality, Memory, and the Brixton Squats in 1970’s London,” *Twentieth Century British History*, November 13, 2011, 84–109.

¹²² Bernard Levin, “Bring On the Gaystapo: The Way We Live Now,” *Times*, December 28, 1987.

not been harassed, but occasionally, you see visitors to the house (workmen, gardeners etc) bare their teeth and make derisive noises. Generally they are left in peace. Other visitors also come to the house at weekends, arriving very quietly after dark and leaving quietly very late. These are mostly male. However, I don't inquire what they are about; they could be the local debating society for all I know. Clearly there is still the need to be discreet and make no rumpus.¹²³

From the outside these men living in the 1980s fit relatively well within the Wolfenden arrangement and the “type” of homosexual tacitly legitimized in 1950s and 1960s reformist literature, film, and sociology.¹²⁴ They were outwardly respectable: “quiet,” “decent” to our MOer, and “humdrum.” The value of ordinariness is notable. It was the exotic and the wildly divergent who were troubling to MOers and others.¹²⁵ Though this MOer speculated about her neighbors’ late-night male visitors, they came quietly under cloak of darkness and to a private home. The two men were “well-spoken” (read: middle class) in contrast to their (male, working-class) employees, who seem unable to speak at all but instead animalistically “bare their teeth” and “make derisive noises.” She meanwhile kept to her side of the Wolfenden bargain: she “doesn’t inquire”—even though she clearly watched them closely. She could be sympathetic toward these men, but she still marked them out as different from her and her family by reporting how others reacted to them and by betraying her own fascination. Toleration for Lord Arran in Parliament in 1967, for Mrs. Auld (the Brixton pub landlady) in 1974 (both discussed at the beginning of this article), and for Bernard Levin and this MOer in 1987 depended on the discretion of those involved.

Toleration on these terms became more difficult in the context of AIDS crisis, however. This was not only because of increasing visibility and trespass onto the public realm, which I discussed earlier, but also because of revelations about the sex lives of some gay men. A fifty-five-year-old Marks and Spencer sales assistant from the South East “changed her attitudes to gays” after reading the diary of a man who was dying of AIDS and who reported that he had been “treated for gonorrhoea 40 times and syphilis 5 times.” “Previously,” she wrote, “I found them pleasant, clean, non-aggressive people whom I quite liked. [Thereafter] I could not help feeling GAY plague was appropriate enough” (original capitalization).¹²⁶ Homosexual men are characterized en masse here—and in different terms before and after the onset of the AIDS crisis. A retired teacher from the West Midlands felt that the “flood of anti-homosexual feeling” was “intensified by the realisation of the promiscuity of homosexuals.”¹²⁷ The passive, privatized, in some sense

¹²³ MOA, AIDS, MOer C101.

¹²⁴ Waters and Houlbrook, “The Heart in Exile.”

¹²⁵ Cook, “‘Gay Times,’” 84–109.

¹²⁶ MOA, AIDS, MOers F1373, D7.

¹²⁷ MOA, AIDS, MOer B668.

feminized homosexual was transformed into a threatening active, public, and promiscuous agent in such accounts.

Those who were supportive of their gay friends were, meanwhile, keen to emphasize their “stable” and “long-lasting” partnerships.¹²⁸ The sixteen-year-old girl from the Scottish study defended her gay friends on the basis that they did not “swap around partners. . . . I know three of them and they’re all going steady with somebody,” she said.¹²⁹ The script for the contribution of gay musicians Jimmy Somerville and Richard Coles (together the Communards) to a program on AIDS in February 1987 was tellingly altered before broadcast on the advice of the Independent Broadcasting Authority (IBA). Jimmy had initially intended to say: “If you have casual sex you must protect yourself against AIDS by using a condom.” His revised advice, as broadcast, was: “Avoid casual sex and protect yourself against AIDS by using a condom.”¹³⁰ In his *Times* piece, Levin highlighted the challenge promiscuity posed while seeking to minimize the scale of this departure from the model of homosexuality he found tolerable. “One of the most extraordinary facts to come to light when AIDS began to spread,” he wrote, “was the level of promiscuity reached by a small minority of homosexuals who, in an ordinary lifetime, might have sexual relations with more than a thousand partners.” These (he seemed to suggest) were the same gays causing “resentment” because of the “aggressive tone [they] adopted . . . campaigning for their ‘rights,’ abetted by hard-left local councils promoting ‘positive discrimination,’ in the most crass and bullying manner.” Levin’s scare quotes are significant: that there were “rights” to be had was clearly in question for him.¹³¹ In one of the earliest UK books on AIDS, Scottish journalist Graham Hancock made a plea of tolerance for gay men—but similarly criticized “die-hard gays” who were apparently using “their erect penises as weapons of war.”¹³² There was here and with Levin a conflation of (abnormal) sex and (aggressive) radicalism. Monogamy and privacy might, meanwhile, signal a quieter and more acceptable acquiescence to the status quo and a “responsible” reaction to the epidemic. Deborah Gould argues that the restrained gay activism she identifies with the early to mid-1980s was in part related to gay men’s felt need to fit in with such ideas about tolerance or acceptability in order to gain the care and support they were desperately beginning to need.¹³³ In the later part of the decade and in the

¹²⁸ See, for example, MOA, AIDS, MOer F1560.

¹²⁹ AIDS Relevant Cognitions, transcript 017.

¹³⁰ Somerville and Coles, script version 2, appended to letter from Clare Mulholland to W. H. Jamieson, January 19, 1987, folder 5061: AIDS TV coverage, IBA archive.

¹³¹ Levin, “Bring On the Gaystapo.”

¹³² Graham Hancock and Enver Carim, *AIDS: The Deadly Epidemic* (London: Gollancz, 1986), 46.

¹³³ Deborah B. Gould, “The Shame of Gay Pride in Early AIDS Activism,” in *Gay Shame*, ed. David M. Halperin and Valerie Traub (Chicago: University of Chicago Press, 2010), 221–56.

early 1990s gay and queer direct-action groups like Outrage and ACT UP departed from those ideas.

There is a long history of promiscuous sex between men (both “queer” and “normal”) for fun, pleasure, and cash.¹³⁴ As Matt Houlbrook has shown, the post–World War II reification of the sexual binary began to close off such possibilities for ostensibly “normal” men, directing them toward monogamous heterosexual relationships underpinned by ideas of love, fidelity, and the nuclear family.¹³⁵ A much higher proportion of men married in the postwar period than in previous decades.¹³⁶ Meanwhile, men who did not identify as “normal” and did not marry (as well, of course, as some who did) often sustained a sexually expansive lifestyle in a subculture that did not prize sexual fidelity and did not view promiscuity especially negatively. Later, with Gay Liberation, the rejection of monogamy and pair bonding formed an explicit part of sexual politics. Alan Sinfield suggests that the result was a conviviality among many gay men. He wrote that they “seemed to have learnt a few tricks that straights had yet to develop. [They] had organised genial ways of meeting for casual sex. . . . They knew how to see other men without falling out with their partners; how to go to bed with friends; how to remain on close terms with former lovers; how to handle age and class differences.”¹³⁷ Given this recent rearticulation of the pleasures, possibilities, and politics of multipartner sex by Gay Liberationists and others, there was, unsurprisingly, much less judgment of promiscuity among NLGS correspondents than MOers. “The number of partners is irrelevant to AIDS, it is what you do, not how many with, how often etc. I shouted this at my mother when she said she was glad of AIDS because it had reduced promiscuity, proving it was wrong!” wrote a twenty-two-year-old Brighton librarian to NLGS. Another twenty-two-year-old correspondent claimed that promiscuity was “a weapon to beat down established morality”—a comment resonant with the observations of Levin and Hancock (though from the opposite perspective).¹³⁸ Where there was an engagement with monogamy among NLGS respondents it tended to be on pragmatic rather than moral grounds. With the advent of AIDS and the “collapse of the gay movement,” wrote one, “people no longer felt that support and so tended to regress to pair bonding or very small groups of friends.” The emphasis

¹³⁴ For detailed studies of this phenomenon, see Helen Smith, *Masculinity, Class and Same-Sex Desire in Industrial England, 1895–1957* (London: Palgrave Macmillan, 2015); Matt Houlbrook, *Queer London: Perils and Pleasures in the Sexual Metropolis, 1918–1957* (Chicago: University of Chicago Press, 2005).

¹³⁵ Houlbrook, *Queer London*, 195–220.

¹³⁶ Katherine Holden, *The Shadow of Marriage: Singleness in England, 1914–60* (Manchester: Manchester University Press, 2010), 27.

¹³⁷ I am extremely grateful to Lynne Segal for alerting me to this reference. Alan Sinfield, “Thom Gunn and the Largest Gathering of the Decade,” *London Review of Books*, February 13, 1992.

¹³⁸ NLGS, Respondent 220, box 2.

on regression and the sense of disappointment in this response is notable.¹³⁹ AIDS “created more [monogamous] couples,” wrote another NLGS respondent. He recalled that “monogamy and celibacy were really the only two sensible options” in the early 1980s before the virus was identified (in 1985) and transmission routes became clearer.¹⁴⁰ With greater knowledge about the virus and how to avoid it, gay men in the latter half of the decade were able to have sex with multiple partners with more confidence. Research into the sexual behavior of 1,083 gay men in the UK between 1987 and 1995 found that they were not having less sex or fewer partners because of HIV and AIDS. Less than half of those who were in a relationship were monogamous, and more expansive sex lives continued to be important to a sense of identity, community, politics, and pleasure for many gay men.¹⁴¹ British AIDS charities, including the Terrence Higgins Trust, remained sex positive in the safer sex advice they issued throughout this period and beyond. A sharp reduction in the transmission of other sexually transmitted infections suggested that that advice was being widely followed.

The difference between the testimonies from MOers and from NLGS respondents suggests a clash in values in relation to these issues. Most of those contributing to NLGS and many other gay men involved in the new wave of activism in the later 1980s confounded the Wolfenden compact by refusing the limiting and subordinate position accorded to them. Instead, they campaigned for their rights and celebrated their sexual difference publicly—not least in annual Gay Pride marches, which grew across the latter half of the 1980s (from about fifteen thousand people in 1985 to forty thousand in 1988 and two hundred thousand in 1995).¹⁴²

Gay men had access to countercultural traditions, languages, and modes of argument that remained alien to most MOers. Accommodating both promiscuity and sexual safety did not make sense to them. They were shocked that gay men were acting so apparently irresponsibly and confused or outraged by the new drive for visibility, rights, and recognition. Fired by grief and anger, many gay men were confronting the stigma associated with their sexuality and sexual behavior more directly, uncompromisingly, and, Peter Aggleton argues, ultimately more successfully than before.¹⁴³ They were perhaps able to do this and to achieve some success because although some of 1960s ideas about the positioning of homosexuals were tenacious, fractures in public opinion and the presence of gay men on

¹³⁹ NLGS, Respondent 382, box 4.

¹⁴⁰ NLGS, Respondent 367, box 4, respondent 377, box 4.

¹⁴¹ Gary W. Dowsett, *Practicing Desire: Homosexual Sex in the Era of AIDS* (Stanford, CA: Stanford University Press, 1996), 274.

¹⁴² Matt Cook, ed., *A Gay History of Britain: Love and Sex between Men since the Middle Ages* (Oxford: Greenwood World, 2007), 209.

¹⁴³ Richard Parker and Peter Aggleton, “HIV and AIDS-Related Stigma and Discrimination: A Conceptual Framework and Implications for Action,” *Social Science & Medicine* 57, no. 1 (2003): 13–24.

health and council agendas meant there was space for some change and a repositioning of gay men. There is much in the lack of consensus to support Lesley Hall's contention that the antigay backlash of the 1980s masked deeper change.¹⁴⁴

CONCLUSIONS

The Campaign for Homosexual Equality, women's liberation, gay liberation, and a rising counterculture in the late 1960s and 1970s certainly challenged prevailing morality and sexual mores and highlighted the deficiencies of the 1967 Sexual Offences Act and other pieces of supposedly permissive legislation.¹⁴⁵ It was, however, in the context of the AIDS crisis that sexual difference came more vividly and (for some) frighteningly into view and cultural fractures became harder to sideline or ignore. Many found themselves forced to come out simultaneously as gay and as HIV-positive to colleagues, friends, and family as the virus took its toll on them. Many more became less reticent about joining Gay Pride and protest marches as the death toll and homophobic vitriol grew.¹⁴⁶ The fact that the status quo was being more forcefully challenged partially accounts for the ferocity of the reactionary response—a response that continued unabated beyond 1987 (the year of the MO directive) and well into the 1990s. In 1989 there were 2,022 prosecutions for indecency between men in England and Wales—a 50 percent increase over the previous year and the highest level since records began.¹⁴⁷ The AIDS folder of the Lesbian and Gay Newsmedia Archive (LAGNA) abundantly demonstrates how sections of the press plumbed new homophobic depths in the late 1980s and 1990s.¹⁴⁸ Meanwhile, the death toll in the UK rose rapidly—to 12,105 people by 1996, the year when antiretroviral drugs began to transform treatment and prognoses. A few of the MOers who had responded to the AIDS directive remained angry and dismayed long after this watershed year. Although most responses to a directive entitled "Gays in the Family" issued in 2001 were markedly relaxed and accepting, others were certainly not. One seventy-seven-year-old man, who had raged against gay men and local authorities who supported them in response to the AIDS directive in 1987, wrote in 2001: "I consider homosexual males to be perverts and I think it is disgraceful of the government to lower the age of consent for male children to become victims of pederasts." Another respondent (who had not written on the AIDS directive) noted in 2001 that she "could like [gay men] a lot better if they would just shut up. I am sorry they have been born abnormal; so have

¹⁴⁴ Hall, *Sex*.

¹⁴⁵ On this, see especially Hall, *Policing the Crisis*.

¹⁴⁶ Cook, *A Gay History of Britain*, 209.

¹⁴⁷ *Ibid.*, 206.

¹⁴⁸ The LAGNA archive is held at Bishopsgate Institute, London.

epileptics and the mentally deficient but they don't put flags out and make a song and dance.”¹⁴⁹ Again it was gay men’s purported danger to children and their visibility that justified claims that they were particularly offensive.

Opinion on these issues thus remained multivalent and fraught. The new equality measures of the first decade of the 2000s were fiercely opposed by many who passionately believed them to be socially destructive. Nevertheless, we can identify a real shift in opinion on homosexuality in responses from MOers and in the ongoing research conducted by BSAS. Whereas in 1987 74 percent of those contacted by the BSAS agreed that “homosexual relations are always or mostly wrong,” in 2000 the figure was 46 percent. By 2010 it had fallen further, to 30 percent.¹⁵⁰ Attitudes had shifted—albeit unevenly—and this was partly as a result of the disaster of AIDS. The crisis fractured an already uneasy compromise and opened a cultural, social, and political space for dealing with and expressing homosexuality more openly.¹⁵¹

Responses to NLGS and MO directives cannot on their own provide explanations for these changes or their inception. But they enable us to see something of this cultural ferment and to supplement headlines and polling data with the texture of everyday opinion. We can witness individual struggles and sometimes tortured negotiations about a crisis that was, for many, among the most pressing of that decade, as the MOers’ responses to the 1990 “Review of the 1980s” directive indicate. We have tended to tell simplistic stories of these early years of the AIDS crisis—stories that pitch gays against straights and community activists against government. Such accounts have bolstered proud and angry positions and pitched the righteous against the reactionary. There is something to this portrait of the decade. I certainly do not want to diminish the crippling effects of vicious homophobia or the desperate consequences of tardy government action. Mythologies engendered by and running through these accounts retain their power. And yet without a fuller acknowledgment of the confusion of attitudes and opinion, of the contradictions between government rhetoric and health policy, and of the tension between tabloid homophobia and the caution of much television coverage (in the AIDS week programming of February 1987, for example), and without some discussion of the heady mix of generations, histories, mythologized pasts, and feared futures, we end up with little sense of the ways in which powerful norms were fractured and in flux. MO and the NLGS guide us into that muddle and allow us to identify pulses of change, as well as stubborn terms and frames of reference, not least relating to the formation and sustenance of norms of respectability. This all encourages us to think beyond those entrenched positions and become more cognizant of the everyday negotiations of confusing value systems.

¹⁴⁹ “Gays in the Family” directive (2001), B1442, D666.

¹⁵⁰ “Homosexuality,” *British Social Attitudes*, <http://www.bsa.natcen.ac.uk/latest-report/british-social-attitudes-30/personal-relationships/homosexuality.aspx>.

¹⁵¹ See especially Altman, “Legitimation through Disaster.”

Moreover, it reminds us that cultural and attitudinal change is rarely thoroughgoing. Aside from many vocal detractors, individuals may themselves have felt conflicted, aligning themselves with an apparent majority and yet harboring significant doubts and fears. Residues of the past remain as part of the complex layering of opinions, ideas, and feelings. We have seen this in the way MOers folded the values of the 1950s, the 1960s, and even the nineteenth century into their responses to the AIDS crisis. And we see it now in the way gay men are positioned and position themselves in the wake of more recent legislation in the UK equalizing the age of consent, repealing Section 28 of the Local Government Act, and allowing gay marriage and adoption. There is, for example, a quiet attachment for many—gay and straight—to those values of discretion and respectability circulating in debate in the 1950s and 1960s and rearticulated and challenged in the 1980s. A recent survey of one thousand gay men in the UK found that 41 percent were in or had had open relationships.¹⁵² And yet the writer/presenter of a BBC Radio 4 documentary on gay marriage, *For Better or Worse* (May 2016), struggled to find a gay cohabiting or married couple willing to talk about such arrangements.¹⁵³ At around the same time, a celebrity gay couple sought to suppress press revelations about their open arrangement for the sake of their children.¹⁵⁴ However visible and legitimized in other ways, however breached the moral compromise of the 1950s and 1960s, there are traces of past configurations and expectations in the way gay men are expected to behave now. There are, of course, all sorts of reasons why a couple (gay or straight) might want to keep their nonmonogamous sex lives private, but this tendency speaks to the terms on which coupledom and parenthood have been and continue to be culturally legitimized and also to what is expected of those who have been granted a place at the proverbial table and who are now often seen as cultural insiders rather than outsiders.

In the years since the World War II there has been no single clear rupture in values and moralities, no singular moment that recast the relationship between the individual and society. And yet the MOers and those contributing to the NLGS testify to a period of particular tension and moral conflict in the context of the AIDS crisis in the 1980s. They suggest ways in which this opened out a space for some uneven change and a partial refashioning of an earlier uneasy moral settlement. The resistance, retrenchment, and

¹⁵² Nick Duffy, “Nearly Half of Gay Men Have Had an Open Relationship,” *Pink News*, February 3, 2016, <http://www.pinknews.co.uk/2016/02/03/nearly-half-of-gay-men-have-had-an-open-relationship/>. See also (in relation to Australia) Darren Meyer, “Open Relationships Are Now the Most Common Form of Partnership in Gay and Bisexual Men,” *Attitude Magazine*, July 22, 2016, <http://attitude.co.uk/open-relationships-are-now-the-most-common-form-of-partnership-in-gay-and-bi-men/>.

¹⁵³ Discussion with presenter Peter McGrath, April 2016, *For Better or Worse*, May 2, 2016 (20:00), <http://www.bbc.co.uk/news/magazine-36168415>.

¹⁵⁴ “Celebrity Threesome Couple Revealed,” April 19, 2016, <http://www.mirror.co.uk/news/trials/celebrity-couple-gag-named-live-7779082>.

remaking they signal did not begin and end in that decade, of course. Legacies of earlier times played out and were reinfected amidst the imperatives of the new emergency. Shifting behaviors, expectations, experiences, ideas, and ideologies in the 1990s and 2000s then carried echoes of those longer legacies and more recent tragedies. These were more and less audible in different places and at different times, among different groups of people and different generations. They resonated with some individuals more than others. The moral compromise of the sixties, the moral crisis of the eighties continued—and continues—to ring through intimate lives.

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