

Never Turning Back

By Paul van Reyk

'I did the Ankali training and I looked after somebody for a little while after Bob died, but then my flatmate got sick and so I had to look after him as well and then he passed away too. I remember going to two funerals in one week and then the next week another funeral and then another funeral.'

Kenneth Bryan, Bobby Goldsmith's partner.ⁱ

For the first twelve years of the epidemic, HIV/AIDS was a mass trauma event for the gay community in Australia. It was a prolonged period of psychological and social disruption threatening the coping capacity of the communities and threatening their very survival.ⁱⁱ Yet survive they did, in a text book example of what is now called community resilience – the capacity of communities to recover from setbacks, adapt well to change, and keep going in the face of adversity.

Four 'adaptive capacities' are identified as enabling community resilience: economic development, social capital, information and communication, and community competence.ⁱⁱⁱ The response of the gay community across Australia to HIV/AIDS demonstrates all these adaptive capacities. This article focuses on social capital: social support (perceived and received), social embeddedness, attachment to place, a sense of community, organisational linkages and cooperation, citizen

participation and leadership roles.^{iv} I want to look at how the social capital built over the preceding decade in the gay community and the religious social capital embedded in the Sisters of Charity (the Catholic order of nuns that established and administered St Vincent's Hospital) were mobilised to confront and overcome fear and hopelessness, conquer adversity, and strengthen community.

Social capital in the Sydney gay community pre-AIDS

In July 1983, 10 months after the first case of AIDS in Australia was diagnosed, the Gay Counselling Service (GCS), the Metropolitan Community Church (MCC), Acceptance, and the Gay Disabled Club formed the AIDS Support Group in Sydney to provide practical support to people with AIDS.^v This rapid response was possible because of the social capital the organisations had already established in the local gay communities.

GCS began in 1973 as Phone-A-Friend, an outreach telephone service to those coming out or dealing with issues of sexuality. Beginning with about a dozen volunteers who had little more than their own personal experience as training for the job, the organisation soon attracted gay and lesbian professionals with experience in health,

psychology, counselling, and community service organisations.^{vi}

MCC in Australia was established in 1974, six years after its founding in the US. Acceptance was established in 1971 by Garry Pye as an affiliate to Dignity, a gay and lesbian Catholic congregation founded in the US in 1969. Both MCC and Acceptance were formed to provide opportunities for gays, lesbians, bisexuals and transgender individuals who want to celebrate and practice their faith in the face of the homophobia and discrimination of the Christian churches. MCC also operated an 'op-shop' to which people could donate second-hand goods for those in need.

Religious social capital: The Sisters of Charity

Both MCC and Acceptance are also arguably examples of religious social capital: *social connection and support through a religious community* sharing norms and values and bridging trust.^{vii} The other significant bank of social capital that would be engaged in meeting the challenges of the epidemic in Sydney was the Sisters of Charity, an Irish order of Catholic nuns. The fourth vow of the order is: *Service to the poor, actively engaging in advocacy, action and prayer for people in need, and linking and networking with others in our quest for justice, peace, and integrity of creation.* Six nuns arrived in Sydney on

31 December 1838 to provide religious instruction and care for the sick and poor. In 1857, the order opened St Vincent's Hospital – first at Potts Point and then on the present site in Darlinghurst so they were geographically at the epicentre of the epidemic.

Mobilising social capital during AIDS

'A nurse came once a day for about an hour, from St Vincent's I think it was, and that was it, really. There was nothing else. There were no other people to do that kind of thing. People were very much afraid of AIDS back then. Even when Bob died, the funeral directors wouldn't touch him. We had to put him into the body bag, and me and another friend carried him down the stairs.'

Kenneth Bryan.

In 1982, Professor Ron Penny, Director of St Vincent's Centre for Immunology, diagnosed the first AIDS case in Australia. Later that year he attended a conference sponsored by the US Public Health Service to discuss the emerging AIDS epidemic. He returned convinced that the hospital was ideally positioned both geographically and philosophically to take up the challenge of health care for people with AIDS. The Board, headed by Charles Curran, and the Director of Nursing, Sister Clare Nolan, immediately agreed. "The ethos of the hospital" says Curran, "as such that there was really no questioning that I was aware of that this was something we should do".^{viii} 'I think key to it was that our attitude was non-judgemental, of loving the person,' says Nolan.^{ix}

But while there was acceptance at senior levels, it did not always lead to acceptance further down the care hierarchy. Terry Goulden, Director of GCS at the time, had been appointed as a counsellor for people with HIV/AIDS at St Vincent's at the request of Professor Penny: '[The atmosphere] was mostly homophobic. We'd have to have meetings about that... [the nuns] were terrified that everyone was having sex. No one was having sex; they were sick as dogs.'^x In August 1984, *The Star* reported that the weekend before, members of St Vincent's kitchen staff had 'failed to deliver meals' to AIDS

patients on Ward 7, which was the dedicated HIV ward at the time [later shifted to ward 17]. In response, the Director of Medical Services, Dr Jennifer Alexander, was quick to assure the community that this would not occur again and that liaison between the hospital and GCS and MCC would be increased. It led to formalising weekly ward meetings between Goulden and Jim Dykes, Pastor of MCC, who had also been appointed as a counsellor and pastoral care worker. She also said that a number of nurses had already indicated they wanted to work on the ward, many of whom were gay men and lesbians.^{xi}

St Vincent's staff's homophobia was not an isolated instance. Through 1983 and 1984 Australian newspapers ran stories about doctors, hospital staff, and other allied professions 'dreading contact' with people with HIV/AIDS. It was in the face of this that the gay community engaged its social capital in community resilience.

In June 1984, Bobby Goldsmith, a well-known Sydney gay athlete, died at home of AIDS where he had been cared for by his partner, and a small group of friends. In May they had organised a fund-raiser at the Midnight Shift, a popular Oxford Street gay club, to buy a video player and television on which to watch opera. They raised \$6,000 – well more than the equipment cost. His then partner, Kenneth Bryan proposed they set up a fund to provide whatever was needed for other people with AIDS. John Galletly, one of the group, approached Terry Goulden for advice. Goulden agreed to have the proposed foundation come in under the umbrella of GCS's status as a charity under NSW law until the organisation should get this for itself. In July 1984, the Bobby Goldsmith Foundation (BGF) was established.^{xii} Meanwhile, others whose partners or friends had died began donating their goods to MCC's op-shop, which MCC would distribute to other people with AIDS. It was only natural that BGF would eventually take on this role.

Goulden and Jim Dykes, MCC pastor at that time, became central to the next stages of community mobilisation. In April 1985, Goulden attended the first international conference on AIDS in New

York, where he heard about a community support and outreach program for people with HIV/AIDS that was being run by the Red Cross. He brought back tapes of their education program." Jim and I sat down and thought this is really practical stuff. Then Jim said to me, "I've got a bible studies class that meets in Marrickville. I think you should go over on Saturday afternoon and talk to them about this." The leader of the class was Peter Macarthy, a nurse who took the tapes away, and the next thing they phoned me and said they were going to set up a practical home support group. That is how Community Support came into being. It was giving them the information at the right time and firing them up to do something about it. As far as I know, the entire group became the nexus of the Community Support Network.

In February 1985, the Albion Street Centre opened for HIV testing, treatment and counselling. Goulden and Dykes worked as voluntary counsellors there. Goulden, by then working at the Mental Health Association, learned of a cancer support group in San Francisco called Shanti Nilaya. When Dykes made a trip there, Goulden asked him to look at what the group was doing. "He brought back all these videos ... we looked at them and my first comment was, 'This is so American!' So we sat down together and nussed out how it could work in Australia." Ankali began in May 1985.

Every hallmark of social capital is evidenced in these stories: the social support provided through BGF, CSN and Ankali; the social embeddedness of the three organisations; the organisational linkages and cooperation between the three and St Vincent's; the participation of the affected community in the response; and the leadership roles played particularly by Goulden and Dykes.

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The Sydney gay community continued to deploy its social capital in the ensuing years, establishing the AIDS Council of NSW (now ACON), People Living with AIDS (now Positive Life), and through ACT UP. It was a pattern replicated in

the other major gay communities throughout Australia. How community resilience was also enabled through economic development, information and communication, and community competence are subjects for future explication.

Paul van Reyk has been an HIV/AIDS activist for over 30 years, was the first Policy Officer with ACON. He has written extensively in *Talkabout* and *HIV Australia*.

I am very grateful to Kenneth Bryan for speaking with me and agreeing that I could quote him and acknowledge his relationship with Bobby Goldsmith.

ⁱⁱ I don't intend here to minimise the impact on other groups in Australia also devastated by HIV/AIDS, but theirs is not my experience and I cannot speak to their experience. I also do not intend here to suggest that the trauma of HIV/AIDS in gay communities is over. Mass trauma events leave a legacy of psychosocial damage that may take years to acknowledge let alone address. For example, those who survived those harrowing first dozen years are yet to begin to deal with our grief and loss.

ⁱⁱⁱ Fran H. Norris, Susan P. Stevens, Betty Pfefferbaum, Karen F. Wyche, and Rose L. Pfefferbaum *Community Resilience as*

a Metaphor, Theory, Set of Capacities, and Strategy for Disaster Readiness, American Journal of Community Psychology (2008) 41:127–150

^{iv} *ibid*

^v 'AIDS Support Group Formed' The Star Vol 5 No 3 August 12 1983 p 17

^{vi} Goulden, T and Hay, B, 'The Changing Identity of a Gay Counselling Service'. Paper presented to the First International Gay and Lesbian Conference, New York, 1984

^{vii} Maselko, Joanna, Hughes, Cayce, and Cheney, Rose *Religious social capital: Its measurement and utility in the study of the social determinants of health*. Social Science and Medicine, 2011 Sep; 73(5): 759–767. Published online 2011 Jul 12.

^{viii} Ward 17

<https://www.youtube.com/watch?v=AqyC-c3j-tc>

^{ix} *Ibid*

^x All quotes from Terry Goulden are from a 2018 interview by Paul van Reyk for which I thank Terry very much.

^{xi} For more on gay and lesbian nurses experiences see Paul van Reyk, *Life During Wartime*.

Nursing on the frontline at Ward 17 South at St Vincent's Hospital. A paper presented to the Australian Homosexual Histories Conference, Melbourne University, 15-16 November 2013.

^{xii} 'The Bobby Goldsmith Foundation Established', The Star, Vol. 6 No. 2 p.7 and Terry Goulden interview with Paul van Reyk