Published in final edited form as:

Cult Health Sex. 2011 June ; 13(6): 657–668. doi:10.1080/13691058.2011.565519.

Divine targets: youth at the centre of Catholic and Pentecostal responses to HIV and AIDS in Brazil

Miguel Muñoz-Laboy^a, Laura Murray^a, Natalie Wittlin^a, and Richard Parker^{a,b}

^aDepartment of Sociomedical Sciences, Mailman School of Public Health, Columbia University, New York, USA

^bAssociação Brasileira Interdisciplinar de AIDS, Rio de Janeiro, Brazil

Abstract

This study explored the focus on youth in Catholic and Evangelical Pentecostal discussions about and responses to HIV and AIDS in Brazil. Key informant, oral history, and in-depth interviews revealed a disconnect between young people's views of themselves as leaders in their religious institutions' responses to HIV and other social problems and adult religious leaders' views of youth as vulnerable and in need of being saved. Religious leaders presented young people as institutional commodities, emphasizing their symbolic value as signs of the health and future of their churches. We explore the unofficial exchange between religious institutions and young people, who benefited from the leadership opportunities and communities provided by their churches and youth groups. We discuss the political economy of youth in religious institutions' responses to HIV and AIDS within the context of Brazil's high levels of religious mobility as well as the broader, global commodification of spirituality and religion.

Keywords

Brazil; HIV/AIDS; policy; religion; youth; ethnography

The transition to adulthood is one of the most critical stages of human development, marked by social, psychological and biological changes that present youth with a number of choices (Fischhoff, Nightingale, and Iannotta 2001). Currently, youth around the world are entering the labour force years later than they were in prior decades; this shift has resulted in delays in marriage and childbearing, as well as longer periods of exposure to sexual risk-taking (such as having sex with multiple partners and using alcohol and drugs before and during sex) (Fischhoff, Nightingale, and Iannotta 2001).

Increased HIV infection rates among youth globally (Futerman, Chabon, and Hoffman 2000; Monasch and Mahy 2006; Marshall et al. 2009; Spiegel and Futerman 2009) have brought attention to the need for interventions that address the structural and contextual factors that make youth particularly vulnerable to infection (Marshall 2008; Harrison et al. 2010). While the connection between religion and HIV protective behaviours, treatment patterns and interventions has recently become a focus of research on adults (Pargament et al. 2004; Agadjanian and Sen 2007; Francis and Liverpool 2009; Maman et al. 2009), it has yet to become a focus of research on youth.

AIDS in Brazil is an adult epidemic. Since the beginning of the epidemic, youth ages 13 to 19 have represented an average of 2% of all AIDS cases in Brazil (UNAIDS/WHO Working Group on Global HIV/AIDS and STI Surveillance 2008). Adults (25 years of age and older) have represented an average of 84%, and young adults (ages 20 to 24) have represented an average of 9% (UNAIDS/WHO Working Group on Global HIV/AIDS and STI Surveillance 2008). HIV is more prevalent among young women than young men, but overall, teenagers continue to represent a minority of cases (UNAIDS/WHO Working Group on Global HIV/AIDS and STI Surveillance 2008). Our research suggests, however, that teenagers are a major focus of religious discussions about and responses to HIV and AIDS in Brazil.

Brazil has long been recognized for its religiosity and religious diversity. Brazil is nominally the world's largest Catholic country, and it is also home to one of the largest syncretic religious traditions anywhere in the world, with its myriad of loosely related Afro-Brazilian religious traditions (Candomblé, Umbanda, Xangô, etc.). Many Brazilians actively participate in Afro-Brazilian religious traditions while maintaining – and incorporating these traditions into – their Catholic identities. In recent years, one of the most intense Evangelical Protestant movements anywhere in the world has also emerged in Brazil. As a result, Brazilians have access to an enormously rich set of religious institutions and vocabularies. Mariz and Machado (1998) observe that while religious plurality has existed in Brazil for some time, it was not until the 1960s (and even more strongly in the 80s and 90s) that a 'religious market' emerged at the institutional level. Prior to the 60s, they assert, pluralism did not threaten the country's Catholic identity. As Evangelical institutions gained prominence, however, they demanded the exclusive affiliation of their members.

Initial governmental strategies for developing programs and policies to respond to the AIDS epidemic in Brazil were hampered by the widespread stigma associated with HIV and AIDS. Key Catholic and Evangelical Pentecostal (i.e., 'Pentecostal') figures contributed to the climate of prejudice and discrimination early on by linking HIV to immorality and, at times, divine judgment and the punishment of sin. Many Afro-Brazilian religious leaders also initially also distanced themselves from HIV. By the mid-1990s, however, alliances among diverse groups of AIDS activists, academics, health officials, and religious communities had developed.

The Catholic Church worked closely with the Brazilian National AIDS Program (NAP) (Transferetti 2005; García et al. 2009), which emphasized solidarity and structural understandings of HIV and which has been internationally recognized for its effective response to the epidemic (Berkman et al. 2005; Nunn 2009). In the early 1970s, prior to the onset of the AIDS epidemic, the Catholic Church established its Youth Pastoral (Pastoral da Juventude Nacional and Ministério da Saúde Program Nacional de Prevenção DST/AIDS 2006). The Youth Pastoral is a national network that currently reaches 360,000 of the 47 million youth between the ages of 15 and 29 in Brazil (Pastoral da Juventude Nacional and Ministério da Saúde Program Nacional de Prevenção DST/AIDS 2006). The Youth Pastoral was developed to promote leadership, autonomy, and solidarity among young people and to help them overcome difficult situations. Its collaboration with the NAP was formalized in 2005 through the project 'Young People Want to Live', which incorporated HIV and STD prevention activities into the Pastoral's work and began to train young leaders to become peer educators within their own communities.

Over the past decade, the conditions of extreme income inequality and poverty that have enabled the spread of HIV in Brazil have also facilitated the spread of Pentecostalism (Chesnut 1997, 2003). This simultaneous and parallel spread of religion and the AIDS epidemic has contributed to the merging of evangelizing and prevention messages in Brazil.

The following analysis of qualitative interviews, conducted as part of an ethnographic study from 2005 through 2009, explores the prioritization of youth in Catholic and Pentecostal institutional responses to HIV in Brazil within the context of Brazil's high levels of religious mobility as well as the broader commodification of spirituality and religion.

Methods

The analysis presented here is based on data from a five-year ethnographic study of Catholic, Evangelical, Umbanda, and Candomblé responses to HIV and AIDS in Brazil. Data was collected at four field sites in São Paulo, Rio de Janeiro, Porto Alegre, and Recife. These cities were selected based on their large concentrations of HIV/AIDS cases when the study began in 2005. In this paper, we focus on data collected through qualitative interviews and observations.

We began our institutional ethnography by mapping religious institutions that have received funding from the government or the private sector to provide HIV and AIDS services. After mapping this initial group of institutions, we identified other key religious institutions in the same and neighboring communities. Through our mapping of institutions at each research site, we identified local religious leaders for qualitative interviews. We first identified a group of 30 key informants – 15 religious leaders, 10 lay leaders, and five local government officials involved with HIV/AIDS programming with faith-based NGOs. These key informants helped us gain access to local networks of individuals involved in religious institutional responses to HIV and AIDS. The second wave of interview participants was recruited through referrals from this initial wave of key informants. With this second wave, we conducted oral history interviews and in-depth interviews. Key informants also participated in the second wave of interviews. Oral history interviews focused on religious leaders' memories of how their religious institutions had responded to HIV and AIDS since the beginning of the epidemic. Oral history respondents were each interviewed two or three times. In-depth interviews focused on present institutional efforts to address the epidemic and were conducted with religious and lay leaders, youth and adult members of religious traditions, and former and current NAP government officials. Qualitative interviews (key informant, oral history, and in-depth) were conducted with a total of 199 people (official leaders and parishioners) from all three religious traditions. Of the 199 religious participants, approximately 30% were in Rio de Janeiro, 18% in Recife, 23% in Porto Alegre, and 30% in São Paulo. Males were overrepresented in the samples in Rio de Janeiro and Recife (with male-to-female ratios of 1.25 and 1.56, respectively). Women and men were almost equally represented in the samples in São Paulo and Porto Alegre (with male-female ratios of 1.03 and 0.89, respectively). Thirty-six percent of the total sample consisted of youth ages 18 to 24. The age distribution for women (excluding pastors and priestesses) in the sample was: 41% ages 18 through 24, 29% ages 25 through 40, and 30% ages 41 and above. The age distribution for men (excluding pastors and priests) in the sample was: 32% ages 18 through 24, 31% ages 25 through 40, and 37% ages 41 and above. Religious leaders in the study (priests, pastors, reverends, etc.) were overwhelmingly male (95%). All female religious leaders were priestesses from the Afro-Brazilian traditions. The age distribution for religious leaders was: 29% below age 40, 24% ages 40 through 49, and 47% ages 50 through 71.

The topics covered in qualitative interviews were: 1) Religious belief systems as they relate to HIV and AIDS; 2) Organizational structure and the internal organization of ecclesiastical power; and 3) Level of connectedness to HIV and AIDS policy debates. Both youth and adults were asked how health risks were identified and negotiated within the context of their religious traditions, as well as how they interpreted the policies and actions of their religious organizations in responding to HIV and AIDS in their communities.

Data management and analysis

All interviews were audiotaped and were transcribed, coded, and analyzed in Portuguese, along with ethnographic fieldnotes from observations. To organize our analysis, we followed the extended case study method (Burawoy et. al. 1991). Youth emerged as a recurrent theme within the institutional discourses during what Burawoy terms the ‘third moment’ of analysis, which focuses on the relationship between local social processes and broad political and economic forces. The first and second authors triangulated data from interviews across all sites to uncover this theme, and reliability was confirmed by consistency of themes across sites. Preliminary findings and supporting narrative evidence were then presented to the research team, which identified contradicting cases and generated alternative ideas. The analysis presented below is based on the consensus developed during research team meetings.

Results

Youth were often at the centre of religious institutions’ HIV and AIDS-related discussions. Religious leaders emphasized the symbolic value of youth in attracting followers and their churches’ role in protecting and saving them from moral decay. The extreme vulnerability of youth in the adult religious leader discourses contrasted with the youth’s perceptions of themselves as strong protagonists, capable of changing their communities. We explore both the apparent disconnect between religious adult and youth discourses and the political economy of youth in the adult leaders’ narratives. We conclude that youth are often positioned as institutional commodities and discuss factors underlying their commodification.

Youth as protagonists

The religious youth we interviewed were vivid observers of their social environments and often considered highlighting social issues to adult religious leaders to be part of their religious duty. In the following quotation, Jossias, a Pentecostal youth, describes HIV in religious communities:

Two years ago there was a census about people with AIDS in the Baptist and other well-organized churches, in their communities. Among the 65% of people who had AIDS, 49% were Evangelicals. Do you understand? This worry was big. The churches became committed to this [AIDS] as if it was an obligatory labour for each church...It is an alarming topic and worry. Instead of the Evangelicals distancing themselves from this type of situation, it [the Evangelical church] is one of the ones that is getting most into the dilemma [AIDS], as they say. (*Jossias, Pentecostal youth*)

Jossias explained that because the majority of HIV-positive people in organized churches are in Evangelical churches, it is the responsibility of Evangelical churches to take action. He said that ‘making this case to religious leaders in [his] congregation’ has been one of his goals as a youth leader.

The young Pentecostals in our study were committed to practicing the central mission of the Evangelical tradition, also known as ‘the great commission’ of Christianity, as set forth by the Bible:

Go into all the world and preach the gospel to every creature. He who believes and is baptized will be saved; but he who does not believe will be condemned. And these signs will follow those who believe: In My name they will cast out demons; they will speak with new tongues; they will take up serpents; and if they drink

anything deadly, it will by no means hurt them; *they will lay hands on the sick, and they will recover.* (Mark 16: 15–18, *New King James Bible*; emphasis added)

Another young Pentecostal leader, Sandra, described her experiences with practicing this mission:

I am very criticized...I am from the Church...and I have my particular relationships with those who do witchcraft, with drug addicts, with prostitutes...We have to always try and reach them, to be able to evangelise them, show them what is good and what isn't. (*Sandra, Pentecostal youth*)

The youth we interviewed discussed associating with people who others avoid, such as drug addicts and prostitutes, with the goal of attracting them to their churches. They expressed their belief in a clear line between good and bad and shared this view with others to help them cross the divide.

Based on our observations, youth across religious traditions brought attention to social issues such as poverty, drug trafficking, drug addiction and treatment, street violence, unintended pregnancy, and AIDS treatment in their religious activities. In interviews, they reported that they often followed up with community organizing to address the issues that they had put on the table. They rarely waited for the adult leadership to process their concerns before taking action. Youth actions included organizing meetings to discuss HIV and AIDS-related issues and conducting workshops on HIV and AIDS.

Our analysis suggests that religious youth mobilization around social issues is related to the level of organization of a religious institution. In churches where youth were recognized not only as recipients of religious messages but also as central to 'the future of the church' (as expressed by one of the adult Pentecostal pastors we interviewed), we observed organized youth ministries. Such ministries facilitated youth mobilization by offering opportunities and spaces for active youth participation in institutional dialogues. Laurinha, a Pentecostal youth leader, explained how the ministries are divided in her church:

The work with young people are separate classes, let's say, of separate ministries... There is the leadership of young people, of the adolescents that are the youngest between twelve and sixteen years old, and seventeen to twenty six, a class of adults who are from twenty eight and higher to the infant that are from zero [newborn] to eleven...It is well organized. (*Laurinha, Pentecostal youth*)

Traditionally, Roman Catholic and Evangelical churches in Brazil have had a limited number of ministries. Over the past two decades, however, they have created new ministries in response to the changing demands of their communities. These increasingly flexible organizational structures have been better able to capture the voices and address the needs of youth populations. The high level of institutional organizing around youth that Laurinha described was a feature of approximately one third of the Evangelical and more than three quarters of the Roman Catholic churches included in our study.

Youth as vulnerable

Youth were often viewed by adult leaders as vulnerable and in need of being saved. The adults we interviewed suggested that young people are vulnerable due to their 'weaknesses in character', immaturity, and false sense of invulnerability. Youth were considered likely to succumb to the 'weaknesses of the flesh'. Controlling youth sexuality – and, specifically, preventing youth from engaging in premarital sex – was a priority for Catholic and Pentecostal leaders. Afro-Brazilian religious leaders were less concerned about premarital sex than they were about early sexual initiation and sexual coercion. Also within Afro-Brazilian traditions, more institutional emphasis was placed on young adults than on youth.

A possible explanation for this is that for many years, bringing minors into the spaces where Afro-Brazilian religious ceremonies took place was legally prohibited due to the widespread fear that children would be negatively influenced by what was seen as 'black magic'. In some interviews, Afro-Brazilian religious leaders mentioned becoming somewhat more focused on attracting youth, who they were concerned would be recruited into Evangelical churches at early ages. In general, however, youth were not as great of a concern within these traditions as they were within the Catholic and Pentecostal traditions.

Youth as institutional commodities

By 'saving' youth, religious leaders were able to directly satisfy their ideological goals while simultaneously bringing financial benefits to their churches. We identified three factors underlying the commodification of youth in HIV- and AIDS-related discussions: 1) The loss of fellowship during the teenage years; 2) The impact of youth membership on churches' financial and labour structures; and 3) The symbolic value of youth for the social standing of churches within their communities.

Loss of fellowship during the teenage years—Religious leaders' focus on youth should be positioned within the context of Brazil's high levels of religious mobility. In recent years, one of the largest changes in Brazil's religious demography has been a shift from Catholicism to Evangelical Pentecostalism (Almeida and Montero 2001), which has grown most rapidly among poor and marginalised communities (Brito, Castilho, and Szwarcwald 2001). In a recent study on religious mobility conducted by the Center for Religious Statistics and Social Concern (CERIS), 23% of interviewees reported that they had changed religions over the past twenty years (Castilhos 2008). Also, according to a recent study of adolescents in Belo Horizonte, Brazil, approximately 25% of youth ages 15 to 19 who were raised Catholic have abandoned this religious affiliation (Miranda-Ribeiro et. al. 2009). These factors, combined with the fact that the country's Catholic population growth is slower than its national population growth (Castilhos 2008), have contributed to the development of a complex religious market in which minimizing attrition is critical to sustaining religious institutions. Organizational investment in youth and youth issues has therefore become a prime strategy for decreasing youth attrition.

According to a 2007 National Brazilian Opinion Poll (IBOPE) study that conducted 1,989 interviews with Catholics between the ages of 18 and 29 in 315 municipalities, 78% of 18–24 year olds do not believe that young people should wait until they are married to have sex, and 96% of 18–24 year olds agree that condoms should be used to avoid pregnancy and STDs (IBOPE/CDC-BR. 2007). The adult religious leaders we interviewed were aware that youth are likely to feel alienated in, and thus abandon, socially inflexible spaces. To attract young people and protect against the loss of membership over time, Catholic and Pentecostal churches have attempted to create environments of acceptance, understanding, and openness. In the case of the hierarchical Catholic Church, such changes have tended to occur on the local, rather than the national, level and in informal settings, rather than from the pulpit.

Financial and labour structures—Interviews with Pentecostal pastors pointed to the interconnectedness of financial and ideological concerns – particularly concerns about youth vulnerability. The quotation below exemplifies the way in which youth who had 'sinned' were accepted into Pentecostal churches:

We have a lot of pregnant youth, and we want to support these youth so that they are included in professional courses, with their children in daycare. Today, I was talking to a friend that we are starting something called 'Adopt a child'. People donate money to cover the day meals of a child so that this child can stay and the

mother will not pay anything; this person will adopt [financially support] this child. Once a month, or every 15 days, she [the person donating] will be able to visit to make sure the money is being used correctly. (*Luis, Pentecostal pastor*)

The ‘Adopt a child’ program is one example of how Pentecostal churches have brought the intimate (the household and the family) and the religious together in response to issues such as unemployment, poverty, and teenage pregnancy.

While both Pentecostal and Catholic adult religious leaders alluded to the financial implications of losing members as they transitioned from childhood to adulthood, these concerns were more pervasive in the Pentecostal narratives. Within the Pentecostal and Catholic traditions, working adult members donate a portion of their income to their religious institutions. When members stay through their transitions to adulthood, the institutions continue to profit; when members leave, the institutions suffer. Pentecostal churches tend to depend upon small, consistent donations from many members and are therefore more financially vulnerable than Catholic churches, which tend to depend upon fewer large donations from a small number of wealthy individuals. Additionally, because the Catholic Church in Brazil owns both schools and large amounts of property, it has a more reliable stream of revenue than Pentecostal churches and is thus less financially dependent upon its fellowship. Both of these denominations also benefited from the unpaid labour of youth and young adults – particularly those in their late teens and early twenties.

Symbolic value of youth—For Catholic and Pentecostal leaders, the youth ‘life of the church’ held much symbolic value. Having an institution full of young people increased the likelihood that other young people would join it. Throughout our interviews, youth presence was also reported to make adult members feel more enthusiastic about their institutions and their community work. High youth representation was viewed as a sign of modernity, progress, and a social atmosphere.

Also throughout the interviews, pastors and priests discussed the importance of accepting sinners and not turning anyone away from church. Acceptance into their churches was seen as a way of immediately increasing their number of followers, addressing the social suffering perceived to be ravaging their urban, poor communities, and, in the long run, promoting an image of their churches as attractive and prosperous spaces for potential followers. Fernando, a Pentecostal pastor, explained:

I have to combat this [social suffering], because if I combat it, I am going to avoid that tomorrow many children – as I see today – are abandoned in the streets, without a father, without a mother, without principles, not knowing what citizenship is, what their rights and duties are. And in thinking about the church, I don’t want to have a church tomorrow, or today, with people with difficulties. Imagine a church where I put up on the wall that Jesus Christ saves, liberates, cures, and is prosperous in a church full of people on welfare, sick, and without health care? I have to show a community with people employed, contributing to their country and their state, and with that, bring benefits to the church. (*Fernando, Pentecostal pastor*)

This quotation illustrates the importance of the church in the community. As Andrew Chesnut (1997, 2003) noted in his work on Brazil, the Pentecostal community markets itself as a place where suffering is cured and thereby attracts people who are looking for both acceptance and cleansing. The pastor quoted above explained that the church should be seen as a site of health, purification, and strength. Much like commercial districts and previously ‘sinful businesses’, such as porn theatres, that have been taken over by Pentecostal churches (Chesnut 2003), the youth body has become a site for purification.

In lamenting the current state of youth as abandoned and ignorant of their rights, the above pastor recognized the symbolic power of turning youth into productive citizens, referring to the ‘benefits’ that result from demonstrating his church’s ability to produce and sustain such citizens. His recognition of the potential benefits of successfully investing in youth points to the connected symbolic and financial implications of the commodification of youth.

Youth have become a particularly valuable symbol of church success within the context of the crack cocaine epidemic, as well as other social crises – aggressive recruitment by drug gangs and cartels, high levels of unemployment, and violence in *favelas* and other poor communities across the country. In response to concerns about drugs and violence, Catholic and Pentecostal leaders have disseminated messages such as ‘Living as a good Catholic is to avoid violence’ and ‘Gangs are not the solution; God’s path is the way’ (Fieldnotes from April 2007). They have also provided youth with alternatives to joining gangs, such as becoming involved with youth groups and attending church-based leadership and employment skills workshops. In our interviews, adult leaders related anti-violence messaging to a posture of *acolhimento* (flexible understanding):

We will embrace these youths, give them sustainability. We are going to help them to have a structure where they can survive, so that they can have a life with dignity.... If I love them, I have to give them orientation. I have to say to them, ‘You made a mistake, but come here, we are going to make things better so they can flow’. (*Paulo, Catholic priest*)

Leaders have taken similar positions in relation to out-of-wedlock pregnancy:

Everyone makes mistakes. Everyone has problems. The church has to love this person [a young, unemployed, pregnant woman in his congregation]. We commit errors but she [the church] has to love this person and be able to bring her to its chest. Here in the church we have the ministry of the family with couples. This ministry takes care of young, pregnant and new, unmarried mothers. It gives them support in terms of love, food, clothing, baby shower... It all happens, as if it is nothing, as if it is not a big deal. Life is full of problems. If the church doesn’t help, it’s difficult. (*Marcos, Pentecostal pastor*)

Despite the tension that arose in interviews between youth’s views of themselves as leaders and adults’ views of them as potential victims, our analysis indicates that, at times, these disparate understandings of youth have acted in concert, rather than opposition. With Pentecostal churches in particular, the institutions and the youth involved in them have developed mutually beneficial relationships. Pentecostal churches have targeted urban youth and provided them with support, opportunities for leadership, and a sense of identity. These young Pentecostal leaders have, in turn, advanced the symbolic, financial, and ideological goals of their churches.

Discussion

In our study, Catholic and Pentecostal leaders often presented youth as malleable victims of moral decay – vulnerable to harmful societal influences but capable of change through religious salvation. They leveraged the symbolic power of youth to project positive images of the health and future of their institutions. Researchers in other contexts have similarly documented religious leaders’ commitment to saving youth (Eriksson et al. 2010) and addressing the HIV epidemic (Ansari and Gaestel 2010). They have also explored how moral ideologies may hinder HIV prevention efforts (Ansari and Gaestel 2010) and how framing HIV as the result of immoral behaviour may further increase youth vulnerability to HIV (Smith 2004). As has been documented in other countries, our research revealed adult

religious leaders' ambivalence about what HIV prevention should entail and whose responsibility it should be (e.g., Eriksson et. al. 2010; Ward 2005).

Our research revealed more active recruitment of youth by Pentecostal and Catholic leaders than by Afro-Brazilian religious leaders. Within Afro-Brazilian traditions, young adult/adult membership was a greater concern than youth membership. Bringing minors into spaces where Afro-Brazilian religious ceremonies take place used to be prohibited in Brazil, as there was a fear within mainstream society that children would be negatively influenced by what was seen as 'black magic'. Even today, while young people are not prohibited from entering, many Afro-Brazilian temples have rules that only those over eighteen years of age can be formally initiated into them. Perhaps the strongest differences between Pentecostal and Catholic and Afro-Brazilian traditions, however, emerged in the interviews during discussions about sexuality. In contrast with the moral discourse surrounding sexuality or religious consequences of sexual behaviour in the Pentecostal and Catholic interviews, Afro-Brazilian narratives focused on the importance of taking responsibility for potential physical consequences of sex, such as pregnancy and sickness. Further research is needed in Brazil on the effects of Catholic and Pentecostal leaders' moral discourses surrounding youth sexuality on youth who are not actively involved in religious institutions.

Youth in our study were also viewed as 'institutional commodities' with high symbolic value for churches – as signs of the health and future of the institutions. Religious institutions' responses to HIV and AIDS should be explored in the context of the increasing commodification of religions and beliefs. Jean and John Comaroff have pointed out in their work on 'new' religions in global neoliberal economies (2001) that parishioners are increasingly being treated like customers. The fluidity of religious affiliation in Brazil (Almeida and Montero 2001), within the context of the neoliberal climate, has facilitated the transformation of beliefs into commodities to be consumed by followers who choose their religion according to their immediate needs and often in hopes of overcoming problems, such as alcoholism or illness (Chesnut 2003). Interestingly, despite the large body of work on the effects of globalization on youth (Lloyd 2001; Maira and Soep 2005) and on youth as market targets (Quart 2003; Mayo and Nairn 2009), as well as the coverage of Pentecostal youth by the popular press (Barrionuevo, 2009), in the social science literature on the commodification of religion and spirituality, youth have largely been ignored. Past literature has explored how religions themselves have been commodified and advertised in ways that appeal to a changing society (i.e., consumer body). Our analysis complements these past explorations by suggesting that this commodification of beliefs has involved a commodification of believers – and specifically, of youth – as a way of sustaining religious institutions. Further research is needed on the short- and long-terms impact of the commodification of youth on young Brazilians' rights, sense of belonging, and vulnerability to HIV.

Acknowledgments

This article is based on data collected from the research study 'Religious Responses to HIV/AIDS in Brazil', sponsored by the U.S. Eunice Kennedy Shriver National Institute of Child Health and Human Development (grant number 1 R01 HD050118; Principal Investigator, Richard G. Parker). This national study was conducted in four sites, at the following institutions and by their respective coordinators: Rio de Janeiro (Associação Brasileira Interdisciplinar de AIDS/ABIA—Veriano Terto, Jr.); São Paulo (Universidade de São Paulo/USP—Vera Paiva); Porto Alegre (Universidade Federal do Rio Grande do Sul/UFRGS—Fernando Seffner); and Recife (Universidade Federal de Pernambuco/UFPE—Luís Felipe Rios).

References

- Agadjanian V, Sen S. Promises and challenges of faith-based AIDS care and support in Mozambique. *American Journal of Public Health*. 2007; 97:362–366. [PubMed: 17138912]

- Almeida R, Montero P. Transito religioso no Brasil [Religious movement in Brazil]. São Paulo em Perspectiva [São Paulo in Perspective]. 2001; 15(no. 3):92–101.
- Ansari DA, Gaestel A. Senegalese religious leaders' perceptions of HIV/AIDS and implications for challenging stigma and discrimination. *Culture, Health & Sexuality*. 2010; 12:633–648.
- Barrionuevo, Alexi. Fight nights and reggae pack Brazilian churches. *New York Times*. 2009 September 14. <http://www.nytimes.com/2009/09/15/world/americas/15evangelicals.html>.
- Berkman A, Garcia J, Muñoz-Laboy M, Paiva V, Parker R. A critical analysis of the Brazilian response to HIV/AIDS: Lessons learned for controlling and mitigating the epidemic in developing countries. *American Journal of Public Health*. 2005; 95:1162–1172. [PubMed: 15933232]
- Brito, AMd; Castilho, EAd; Szwarcwald, CL. AIDS e infeccao pelo HIV no Brasil: Uma epidemia multifacetada [AIDS and HIV infection in Brazil: A multifaceted epidemic]. *Revista da Sociedade Brasileira de Medicina Tropical [Journal of the Brazilian Society of Tropical Medicine]*. 2001; 34:207–217.
- Burawoy, Michael; Burton, Alice; Ferguson, Ann Arnett; Fox, Kathryn J.; Gamson, Joshua; Gartrell, Nadine; Hurst, Leslie; Kurzman, Charles; Salzinger, Leslie; Schiffman, Josepha; Ui, Shiori. *Ethnography unbound: Power and resistance in the modern metropolis*. Berkeley: University of California Press; 1991.
- Castilhos, W. [accessed January 26, 2011] Brazil's new religious landscape. *Sexuality Policy Watch Report*. Translated by Tori Holmes. 2008. <http://www.awid.org/eng/Issues-and-Analysis/Library/Brazil-s-new-religious-landscape>
- Chesnut, Andrew. *Born again in Brazil: The Pentecostal boom and the pathogens of poverty*. Piscataway, NJ: Rutgers University Press; 1997.
- Chesnut, Andrew. *Competitive spirits: Latin America's new religious economy*. New York: Oxford University Press; 2003.
- Comaroff, Jean L.; Comaroff, John, editors. *Millennial capitalism and the culture of neoliberalism*. Raleigh, NC: Duke University Press; 2001.
- Downie, Andrew. Nine-year-old's abortion outrages Brazil's Catholic Church. *Time*. 2009 March 6. <http://www.time.com/time/world/article/0,8599,1883598,00.html>.
- Eriksson E, Lindmark G, Axemo P, Haddad B, Ahlberg BM. Ambivalence, silence and gender differences in church leaders' HIV-prevention messages to young people in KwaZulu-Natal, South Africa. *Culture, Health & Sexuality*. 2010; 12:103–114.
- Fischhoff, B.; Nightingale, E.; Iannotta, J., editors. *Adolescent risk and vulnerability: Concepts and measurements*. Washington, DC: National Academy Press; 2001. http://www.nap.edu/openbook.php?record_id=10209&page=R1.
- Francis SA, Liverpool. J. A review of faith-based HIV prevention programs. *Journal of Religion and Health*. 2009; 48:6–15. [PubMed: 19229620]
- Futerman D, Chabon B, Hoffman ND. HIV and AIDS in adolescents. *Pediatric Clinics of North America*. 2000; 47:171–188. [PubMed: 10697647]
- García J, Muñoz-Laboy M, Almeida Vd, Parker R. Local impacts of religious discourses on rights to express same-sex sexual desires in periurban Rio de Janeiro. *Sexuality Research and Social Policy*. 2009; 6(no. 3(Special Issue)):44–60. [PubMed: 20161503]
- Harrison A, Newell ML, Imrie J, Hoddinott. G. HIV prevention for South African youth: Which interventions work? A systematic review of current evidence. *BMC Public Health*. 2010; 10:102. [PubMed: 20187957]
- IBOPE/CDC-BR. Pesquisa de opinião pública sobre temas ligados ao comportamento das pessoas e a posição da igreja católica [A public opinion survey on issues related to people's behavior and the position of the Catholic Church]. 2007. http://www.ibope.com.br/opiniao_publica/downloads/opp008_cdd_mai07.pdf.
- Lloyd, C., editor. *Growing up global*. Washington, DC: National Academies Press; 2001.
- Maira, S.; Soep, E., editors. *Youthscape: The popular, the national, the global*. Philadelphia: University of Pennsylvania Press; 2005.
- Maman S, Cathcart R, Burkhardt G, Omba S, Behets F. The role of religion in HIV-positive women's disclosure experiences and coping strategies in Kinshasa, Democratic Republic of Congo. *Social Science & Medicine*. 2009; 68:965–970. [PubMed: 19136188]

- Mariz C, Machado MDD. Mudanças recentes no campo religioso Brasileiro [Recent changes in the Brazilian religious field]. *Antropolítica*. 1998; 5:21–39.
- Mark 16:15–18 (New King James Version). Bible Gateway.
<http://www.biblegateway.com/passage/?search=Mark+16:15-18&version=NKJV>.
- Marshall BD. The contextual determinants of sexually transmissible infections among street-involved youth in North America. *Culture, Health & Sexuality*. 2008; 10:787–799.
- Marshall BD, Kerr T, Shoveller J, Montaner J, Wood E. Structural factors associated with an increased risk of HIV and sexually transmitted infection transmission among street-involved youth. *BMC Public Health*. 2009; 9:7. [PubMed: 19134203]
- Mayo, E.; Nairn, A. *Consumer kids: How big business is grooming our children for profit*. London: Constable; 2009.
- Miranda-Ribeiro P, Longo P, Ferreira de Barros L, Rios-Neto E, Gonçalves E, Potter J. Fecundidade na adolescência e religião em Belo Horizonte [Religion and fertility during adolescence in Belo Horizonte]. *Revista Brasileira de Estudos de População [Brazilian Journal of Population Studies]*. 2009; 26:305–308. Available from http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0102-30982009000200010.
- Monasch R, Mahy M. Young people: the centre of the HIV epidemic. World Health Organization Technical Report Series. 2006; 938:15–41. discussion 317–41. [PubMed: 16921916]
- Nunn, A. *The politics and history of AIDS treatment in Brazil*. New York: Springer; 2009.
- Pargament K, McCarthy S, Shah P, Ano G, Tarakeshwar N, Wachholtz A, Sistrine N, Vasconcelles E, Murray-Swank N, Locher A, Duggan J. Religion and HIV: A review of the literature and clinical implications. *Southern Medical Journal*. 2004; 97:1201–1207. [PubMed: 15646758]
- Pastoral da Juventude Nacional [National Youth Pastoral], and Ministério da Saúde Program Nacional de Prevenção DST/AIDS [Ministry of Health National STD/AIDS Prevention Program]. Projeto de parceria para desenvolvimento de ações de capacitação de direitos humanos e saúde preventiva nos níveis federal, estadual e municipal [Project of the partnership for developing human rights and preventive health training activities at the federal, state, and municipal levels]. 2006 May.
- Quart, Alissa. *Branded: The buying and selling of teenagers*. New York: Basic Books; 2003.
- Smith DJ. Youth, sin and sex in Nigeria: Christianity and HIV/AIDS-related beliefs and behaviour among rural-urban migrants. *Culture, Health, and Sexuality*. 2004; 6:425–437.
- Spiegel HM, Futterman DC. Adolescents and HIV: Prevention and clinical care. *Current HIV/AIDS Reports*. 2009; 6:100–107. [PubMed: 19358781]
- Transferetti, JoséAntonio. CNBB, AIDS e governo: Tarefas para uma teologia da prevenção [CNBB, AIDS and Governance: Tasks for a theology of prevention]. Campinas: Editora Atomo; 2005.
- UNAIDS/WHO Working Group on Global HIV/AIDS and STI Surveillance. Geneva: UNAIDS/WHO; 2008. Epidemiological fact sheet on HIV AIDS: Core data on epidemiology and response. http://apps.who.int/globalatlas/predefinedReports/EFS2008/full/EFS2008_BR.pdf
- Ward EG. Homophobia, hypermasculinity and the US black church. *Culture, Health & Sexuality*. 2005; 7:493–504.