Published in final edited form as:

Cult Relig. 2011 ; 12(4): 355–372. doi:10.1080/14755610.2011.633271.

The Catholic Church, moral doctrine, and HIV prevention in Recife, Brazil: Negotiating the contradictions between religious belief and the realities of everyday life

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Abstract

Religious beliefs have had a key role in shaping local responses to HIV and AIDS. As the world's largest Catholic country, Brazil is no exception. Yet little research has been conducted to document how the religious doctrine is enacted in practice among its lay leaders and followers. In this article, we present ethnographic research from Recife, Brazil, conducted to understand the way in which religious doctrines are interpreted on a local level. Contextualized within the sociology of contemporary Brazilian Catholicism, we draw on interviews with clergy members, lay leaders and parishioners in order to discuss how the Catholic Church's vision of sexuality translates into the everyday lives of its followers by. We explore the disjuncture between the Catholic ideals of fidelity and delaying sex until marriage with the everyday reality of the Church's followers, highlighting the role that gender plays in defining sexual roles and expectations. We conclude posing questions for future research and HIV prevention strategies considering the formal institutional response of the Brazilian Catholic Church to AIDS on one hand, and the social and cultural contexts in which Catholics live their daily lives on the other.

Keywords

Religion; HIV/AIDS; Sexuality; Catholic Church; Brazil

Religion has had a major influence in shaping the ways in which individuals, communities, and societies have responded to AIDS. Over the course of more than two decades, religious beliefs have mediated attitudes and policies related to the epidemic, and religious organizations have been central to the response to HIV and AIDS in countries around the world. Yet despite this profoundly complex, and often contradictory impact, there has been relatively limited research literature published on the social and political role of religious institutions in responding to the epidemic. The research that does exist tends to focus heavily on the role of belief and spirituality in coping with HIV infection and bereavement (Coleman 2004; Woods 1999) or on the role of religious values in shaping AIDS education programs (Benton 2008; Edelheit 2004; Remle and Koenig 2001).

The research presented in this article forms part of a large multi-site ethnographic study designed to document the ways in which the Roman Catholic, Evangelical Protestant and

Afro-Brazilian religious traditions have contributed to the broader social response to HIV and AIDS in Brazil¹. Field research was conducted in São Paulo, Rio de Janeiro, Recife, Brasília, and Porto Alegre. Here we present ethnographic data from our field site in Recife, the capital of the State of Pernambuco in the Northeast of Brazil, where we explored the social and cultural factors that influence how the complex doctrinal tensions around sexuality and HIV in the Catholic Church affect the everyday lives of followers.

Brazil is especially well known for its National AIDS Program, widely recognized as one of the leading AIDS prevention and control programs in the world and its treatment access policy has been a model for other developing countries in Latin America, Asia and Africa (Berkman *et al.* 2005; Ministry of Health of Brazil: National Coordination for STD and AIDS 2000; Okie 2006; Rosenberg 2001). The interaction between civil society and the state – between non-governmental organizations and actors, on the one hand, and governmental programs and policies, on the other – has been identified as a key element in building the Brazilian response to the epidemic as a model for other developing countries (Berkman *et al.* 2005; Leher 2003; Parker 2008; Teixeira 2003; WHO 2004).

In few countries has the complex impact of religion and religious organizations in relation to AIDS been more powerful than in Brazil (Galvão 1997; Parker 2003). Leaders and institutions from diverse denominations have been central to the Brazilian response to AIDS, and their opinions disseminated through the mass media have greatly affected popular perception and understanding of the epidemic (Garcia *et al.* 2009). The religious lobby at various levels of state government has influenced the design of HIV policies and programs, and religious organizations have been among the most important civil society institutions shaping AIDS-related policies and programs (Galvão 1997; Parker 2003). Examples of religious organization actions include creating hospices for people living with HIV and providing important local level responses at the intersection between drug abuse and HIV.

While the earliest responses of Catholic Church officials to AIDS were characterized by an extreme moral conservatism that contributed to an initial climate of stigma and discrimination, by the late 1980s, the Church's traditional concern with care and support in the face of human suffering had begun to incorporate questions related to AIDS and people with AIDS into a range of concrete actions. Examples include the development of hospices and home care programs aimed at providing support for individuals suffering the effects of HIV and AIDS and providing key financial support for clinics serving marginalized populations such as female and transgender prostitutes (Galvão 1997; Parker 2003). Catholic leaders provided a response that the government was initially unable to give, drawing attention to the need for treatment and care policies.

By the 1990s, more progressive sectors of the Church had moved beyond an emphasis on solidarity to implicitly or explicitly support a range of education and prevention activities, eventually articulating a national response to the epidemic through the formal structures of the Catholic Church (Transferetti 2005). Although the more conservative sectors of the Catholic leadership in Brazil have never fully accepted many of the most important public health strategies aimed at AIDS prevention, they have generally adopted a tone that is more conciliatory than confrontational, and have increasingly committed themselves to providing an important range of services for those affected by the epidemic (Parker 2003). This is distinct from many other Latin America countries, where policies and actions of

¹These three traditions do not exhaust the religious field in Brazil, where Judaism is an important part of the religious landscape, and where both Islam and a number of variants on Eastern or Oriental religions have made inroads in some sectors of the population. However, these other traditions are significantly smaller in terms of numbers in Brazil and appear to have had a much smaller impact on AIDS-related programs or policies.

governmental prevention and control programs frequently collide with key elements of religious belief and doctrine (CDD 2004; Smallman 2007).

There has been surprisingly little investment in empirical research about the role that organized religion and religious beliefs have played in shaping the epidemic, particularly at the local level. In this article, by drawing on ethnographic research, we discuss how the Catholic Church's vision of sexuality translates into the everyday lives of its followers. First, we include a brief discussion of the sociology of contemporary Brazilian Catholicism, followed the methodology used to collect our research data. We then turn to the ways in which clergy members from different parishes in Recife have positioned themselves with regard to the HIV epidemic. Our focus then shifts to the lay leaders (baptized Church members who lead Church activities) and followers in a parish in the outskirts of Recife and a discussion of the social construction of sexuality in the Catholic context. We explore the disjuncture between the Catholic ideals of fidelity and delaying sex until marriage with the everyday reality of the Church's followers, highlighting the role that gender plays in defining sexual roles and expectations. Finally, we conclude posing questions for future research and HIV prevention strategies considering the formal institutional response of the Catholic Church to HIV and AIDS in Brazil, on the one hand, with the often different responses that Catholics have had in everyday life, on the other hand.

Background: Catholics in Brazil

Nominally the world's largest Catholic country, long recognized in the literature for its religiosity, and for its religious diversity, Brazil is also the home to one of the largest syncretic religious traditions anywhere in the world. The country has a myriad of looselyrelated Afro-Brazilian religious traditions (Candomblé, Umbanda, Xangô, etc.), and, in recent years, has given rise to one of the most intense Evangelical Protestant movements found anywhere in the world. As a result, Brazilians have access to an enormously rich set of religious institutions and vocabularies that intersect in very different ways with civil society as a whole (Bastide 1959; Burdick 1993; Chesnut 1997).

Mariz and Machado (1998: 24) observe that although religious plurality in Brazil has existed for some time, it was only in the 1960s (and more strongly in the 80s and 90s) that a 'religious market' emerged at the institutional level. They argue that prior to this time, pluralism did not threaten Catholic identity and religious groups did not feel boxed into exclusivity. The request for exclusive affiliations, especially 7 from the Protestant churches, provoked a wave of religious intolerance (Mariz and Machado 1998: 26). This also spurred an increase in what Souza (2007: 157) terms 'believers without religion', or people who express beliefs made available to them through their various trajectories and interests (Machado 1997). This has resulted in the emergence of a dialectic between secular and non-secular, and institutional and non-institutional, forces that have been related to the de-traditionalization and deregulation of the religious field both in Brazil and various other parts of the world (Beckford 1989; Berger 2001; Heelas 1996; Hervieu-Léger 1997).

Considering the internal dynamics of Catholicism, it is worth emphasizing that despite the appearance of having a unified identity, it has always been a polyphonic and polysemous religion marked by internal debates (Mariz and Machado 1998; Machado 1997) and struggles for power (Reese 1996). In her analysis of the 'new Brazilian Catholicism', Mariz (2006: 53) calls attention to the intensification of diversity within the Church as an outcome of the increasing autonomy of individual and collective practices and discourses. Mariz also notes the expansion of the role of lay leaders in movements both within and outside the Church, suggesting that, "[t]he current world seems to have a wider selection of elements

that, at the same time that they revive Catholicism, diversify it, creating groups with relative autonomy in relation to the Vatican”(Mariz 2006: 58)².

Mariz highlights two factors that contributed to reviving the Catholic Church in Brazil: the idea of a ‘cognitive bargain’ with the modern cosmovision and the intervention of non-religious and non-Catholic institutions in the Catholic world. In the larger context described above where there is a tendency for individual autonomy and collective discourses within the Church to expand, Mariz and Machado (1998) argue that the Bible takes on an increasingly important role in controlling collective processes and resisting de-institutionalization. As they state:

The Bible... could be considered as an institution in its ideal concept. It establishes frontiers that separate those that really follow it with those who do not accept it or only accept it as one of many sources of truth (Mariz and Machado 1998: 27).³

In the context of AIDS and the Church’s positions surrounding sexuality, the emic category talked about is flesh, which in Paul’s Apostles is considered as especially dangerous to the divine work (Galatians 5:17). ‘Good’ sexual practices are recognized only as those between men and women linked by marital sacrament and for reproduction (1 Corinthians 7). Prostitution, adultery, men who ‘sleep’ together, and sexual practices that delay or are exclusively focused on pleasure are considered sinful behaviours that defy the orientation in Paul’s Apostle (Aries 1987: 50–53). Close followers of the Bible do their best to comply with religious doctrine when faced with temptation in order to reach salvation by resisting sin (Rios *et al.* 2008: 675).

Contemporary debates on the theology of gender and sexuality in Catholicism illustrate that the diverse and polyphonic nature of the Church extend beyond the Church’s institutional structures into legal and political discussions related to reproductive and sexual rights (Radford Ruther 1993; Kissling 1994; CDD 2004).⁴ In this article, we contribute to these debates through presentation of multiple voices within contemporary Brazilian Catholicism and explore the manner in which the Church addresses sexuality and AIDS when confronted with the everyday realities of its followers.

Research Path

The ethnographic research presented here was conducted between 2005 and 2007 in the metropolitan region of Recife, Brazil. Recife is the fastest-growing urban area in northeastern Brazil, with a population of roughly 3,750,000. The city’s dominant religion is Roman Catholicism, yet it is also a regional centre of leadership for the Catholic, Evangelical, and Afro-Brazilian (Candomblé and, in particular, Xangô) religions. The city has also become an increasingly important regional center in relation to AIDS and was the site of the Fifth National Brazilian Congress for Prevention of STD/AIDS in September of 2004.

We encountered more difficulties recruiting Catholic study participants than the Evangelical pastors and Afro-Brazilian spiritual leaders interviewed as part of the larger study. We attributed many of our initial difficulties to the local politics of the Catholic Church in

²Original quote in Portuguese: “O mundo atual parece dispor de um leque mais amplo de elementos que, ao mesmo tempo que reavivam o catolicismo, o diversificam, criando grupos com relativa autonomia em relação ao Vaticano.”

³Original quote in Portuguese: “A Bíblia (...) pode ser considerada como uma instituição em seu conceito ideal...que cria fronteiras que separam os que realmente a seguem dos que não a aceitam ou somente a aceitam como uma entre outras fontes de verdade.”

⁴For more information on contemporary debates on the theology of sexuality, see Robinson (nd; 2008). Also see documents available at Catholics for Choice at <http://www.catholicsforchoice.org> and the Brazilian Catholics for Choice at: <http://catolicasonline.org.br/>.

Recife. The Archbishop at the time our research was conducted, Dom Frei José Cardoso Sobrinho, was known for being extremely conservative and less concerned with continuing the social activism that characterized the leadership of the previous Archbishop. Don José's stance is perhaps best demonstrated by a written statement he made in July 2006, in which he criticized those Catholics who support condom use as a 'lesser evil' when faced with the greater evil of death.⁵ In his article, he stated that the justifications for the 'lesser evil' argument permits (and supports) 'fornication and sexual aberration' (sic), that if accepted, would 'be the greatest moral decadence in society' (sic) (Cardoso Sobrinho 2006: 1).

Dom José's views are illustrative of the reasons why our research team initially had difficulties interviewing priests and integrating ourselves into the Catholic community in Recife. With an ultra conservative leader heading the Archdiocese, the clergy members' reticence in agreeing to be recorded regarding a controversial issue is easily understood. It also illuminates a possible motive for the absence of institutions and projects focused on AIDS explicitly sponsored by the Church in the area.

Although the difficulties faced did not preclude our interviewing clergy members, we decided to interview and observe lay leaders given their importance in contemporary Catholicism (Mariz 2006: 58). We conducted participant observation and interviews in Nova Guanabara, a strong Catholic community that also boasts a religious diversity that is typical of many popular neighbourhoods in Recife with *terreiros* (Afro-Brazilian Spiritual Centers), Spiritism⁶ centers, Evangelical churches of various denominations, and the Catholic Church. The church where we conducted our research played an active part in the history of the Nova Guanabara community. Lay leaders and community members often told the story of how the church's first priest intervened in defense of the community when police attempted to tear down all the shacks in the area's first informal settlement. The church continues to hold a central role in community life and sponsors diverse activities in accordance with the Catholic religious calendar. We observed three events during our fieldwork that stood out in relation to the Church's daily involvement in the community: the elaborate processions of the Virgin Mary in the month of May, Holy Week in April, and a monthly "pilgrimage" of the Virgin Mary in people's houses.⁷

In Nova Guanabara, we conducted interviews with 12 lay leaders. In addition, we also interviewed five clerics (four priests and a friar) and one nun who all conduct religious services in other regions of Recife. In-depth interviews were conducted with all informants, and some also participated in a key informant - and/or life history interview (bringing the total number of interviews to 31). Participant observation was conducted through the research team's involvement in church events, meetings, and religious cultural events in the community. The study was approved by the Brazilian Research Ethics Commission (CONEP) and the Institutional Review Board of Columbia University Medical Center. All names have been changed to protect confidentiality of those interviewed as part of the study.

Between the Cross and HIV

The theme of tension between the Catholic doctrine and the everyday reality of its followers ran throughout the interviews and was felt most strongly around questions of sexual practices outside of marriage and condom use. The clerics in particular expressed difficulty

⁵He refers to the more liberal wings of the Church that, in the reading of the same mandates, argue that when faced with the worst evil, the possibility of death, the lesser evil of condom use is preferable.

⁶Spiritism is a religion of increasing popularity in Brazil that has its roots in Christianity and a strong philosophical, scientific and moral base. Its focus on the relationship between humans and spiritual beings is one of its most defining characteristics.

⁷What the followers refer to as a 'pilgrimage' involves the circulation of an image of the Virgin Mary to approximately 240 households per month.

justifying Church doctrine when they considered that HIV was spreading among the Church's followers. Their predicament is illustrative of a common Brazilian allegory of being caught between a cross (the Vatican's guidelines) and a sword (everyday reality).

Our results are organized along a number of themes, each of which highlights the tensions surrounding the AIDS debate both in the clerical and lay community in Nova Guanabara. The first section on 'The Double standard of care and prevention', explores the tensions that arise among the clerics when the AIDS debate shifts from taking care of those who live with HIV to prevention. The second section entitled, 'Marriage until death do us part?: Religious morality and community life', explores the importance of the Church and its doctrines where the ethnographic fieldwork was conducted in the Nova Guanabara community. We compare the Catholic notion of marriage with the conjugal practices in everyday life, focusing on the social construction of infidelity and the imbalances of power between men and women that ultimately contribute to increasing women's vulnerability to sexually transmitted infections (STIs) and HIV.

The double standard of care and prevention

Contrary to our initial expectations, Catholic leaders in Recife have been quite active in confronting the HIV epidemic. The local Church's early response to AIDS in Recife was characterized primarily by a concern for the care and support of people living with HIV. This involvement appeared to be linked to a longer tradition of the Catholic Church on issues of health and social services.

Interviews with religious leaders of other denominations confirmed that Catholics have consistently fulfilled an important role in caring for people with HIV. Catholics were referred to as being involved in the establishment of one of the most important Christian-based AIDS NGOs in Recife.⁸ When asked to speak about AIDS, Catholic leaders overwhelmingly focused on the importance of caring for the sick as opposed to how the person contracted the virus (although this was mentioned by all participants). The tone was generally of mercy for the human "sinful" condition. Father Paulo accentuated the importance of helping those in need in his account below:

So the Church finds itself faced with AIDS. [With] the reality of the person that needs treatment, of the person that needs affection, of the person that needs to be included and not excluded. (...) So, the person was infected, and we don't meddle with how it happened. (...) The Church places itself before an infected person that needs to be seen with mercy, with the same care that God wants us to have for any person. (Father Paulo – March, 2007)⁹

The Church's positive attitude towards those affected by HIV is viewed as an important contribution to confronting the epidemic by those inside and outside the Church, yet the same cannot be said with regard to prevention. The clerics tended to have a harder time expressing their opinions with regards to condom use. When asked to speak about prevention, they positioned the condom in direct opposition to abstinence and fidelity. Since condemning condom use contributes to placing people at risk of HIV infection, those interviewed were faced with a dilemma of positioning themselves on questions that involve life and death. Their difficulty in evaluating the Church's posture with regards to condom

⁸Based on a perspective of compassion and mercy, the NGO began as an institution that provides basic care and shelter to people living with HIV.

⁹Original quote in Portuguese: "Então a Igreja, ela se encontra diante da AIDS. Na realidade da pessoa que necessita de tratamento, da pessoa que necessita de carinho, da pessoa que necessita ser acolhida e não excluída. (...) Então, é a pessoa que foi infectada; e a gente não entra aí no mérito de o que foi que aconteceu. (...) A igreja se coloca diante de uma pessoa infectada, que necessita ser vista a partir da misericórdia, a partir daquele cuidado que Deus quer que nós tenhamos para qualquer pessoa."

use can be observed in the following priest's response to a question regarding the issues AIDS raised for Catholicism:

The Catholic Church became more and more reserved, it already sinned a lot over time; and today it is very reserved. What the Church has to do is take people in, you know? To take in the person that is sick. A condemnation of this group of people [people with AIDS] doesn't exist. (...) It [Catholic Church] condemns these unnatural sex acts... (Father Silvio – June, 2007)¹⁰

Father Silvio contextualizes the question of prevention within the central role that the concepts of mercy and charity play in the Church's response to AIDS. In referencing the past sins of the Church alongside the Church's prerogative of taking in those in need of care, he draws attention to something that is not completely resolved (at least to him), in terms of the Church's treatment of people with AIDS. While he affirms the posture of the Church regarding HIV prevention as related to the Bible's moral position on sexuality, he does not miss the opportunity to refer to it as paradoxical:

The greatest obstacle that the Church still has is condom use. It is a paradox to say something like that, right? The government, the Ministry of Health, sees it as preservation, you know? The use of condoms preserves health, avoids contamination. (...) So the Church sees this moral, Christian aspect, as I already said, you know? That it [the Church] has a vision, as archaic as it might appear, it is the Bible's vision, that is the use of sex within matrimony. And for what? For procreation, to generate children (laughs). (Father Silvio – June 2007)¹¹

The paradox is related to the Church's role in preparing people for another world by fomenting moral strength to be chaste and/or faithful in their marriages while recognizing that this perspective may place many followers at the risk of death. This fact leads many clergy members to complicate their understanding and camouflage their action.

The use of condoms, the Church is against this, right?! But the Church will always have a position that appears to be more conservative. But what is this about? The Church deals with the ideal, right?! (...) I agree with the ecclesiastical norms, since they refer to evangelical ethical values; now, certainly I am willing and would also like the Church to open itself more and more to a dialogue and reality. (Brother Gabriel – July 2007)¹²

Brother Gabriel notes that the Church's ideal may be unrealistic, yet he is careful not to diminish its importance and the values it represents with regards to marriage and fidelity. He frames his positive viewpoint towards condoms as a way to protect others from infection given the large gap between reality and the ideal. He suggests that the Church's primary goal should be to protect the health of its followers. The Friar is clear regarding the constraints of the doctrine, yet he is careful not to undermine the ideals of the Catholic Church by explicitly stating that he agrees with the ecclesiastical norms.

¹⁰Original quote in Portuguese: "A Igreja Católica ela ficou mais, mais reservada, já pecou muito ao longo dos tempos; e hoje é muito reservada. O que a Igreja, ela tem que acolher, né?_ A pessoa que está doente. Uma condenação a esse grupo de pessoas, não existe. (...) Ela condena esses sexos desregrados."

¹¹Original quote in Portuguese: "O grande obstáculo que a Igreja mantém é o uso do preservativo. É até um paradoxo dizer uma coisa dessa, né? O governo, como o Ministério da Saúde, vê como uma preservação, né? O uso de preservativo, eh, preserva a saúde, evita a contaminação (...) Então a Igreja vê, que esse aspecto, como eu já falei, moral cristã, não é? Que ela tem uma visão, por mais arcaica que possa parecer, mas é a visão da Bíblia, que é o uso do sexo dentro do matrimônio. E para quê? Para a procriação, gerar filhos (risos)."

¹²Original quote in Portuguese: "O uso de preservativos, a Igreja se contrapõe, né?! (...) Mas a igreja vai ter sempre uma posição que parece ser mais conservadora. Mas do que se trata? Ela lida com o ideal, né?! (...) Eu estou de acordo com as normas eclesiais, já que elas se referem à princípios éticos evangélicos; agora, certamente que estou disposto e gostaria também que a própria Igreja se abrisse sempre mais para o diálogo e para a realidade."

Brother Gabriel was not alone in his pronouncements regarding the importance of the Church revising its discourse with regards to condom use. In the context of her work with youth from impoverished communities, Sister Juliana's justification for supporting condom use among community members followed a similar logic:

You see how the Church absolutely refuses to approve condoms in any way, shape or form, right? But I particularly think it is something that you have to use (...) Even using it, there are already people infected, imagine if you don't use it. (...) So I particularly think that people have to use it. (Sister Juliana – March 2007)¹³

Protection of the community was the primary justification for supporting condom use. Among the clerics, this point of view was most commonly expressed by those who had more contact with community members and perhaps found it more difficult to endorse a doctrine that they knew was unrealistic and could potentially have fatal consequences. In an attempt to better understand the day-to-day life Brother Gabriel and Sister Juliana mention, in the next sections, we draw on data from interviews with lay leaders and participant observation to explore how the doctrine translates into everyday life in Nova Guanabara.

Marriage until death do us part?: Religious morality and community life

In Nova Guanabara, the Catholic vision of matrimony can best be summarized in the expressions 'until death do us part' and 'what God unites, man does not separate'. In the Catholic doctrine, marriage is not dissolvable. However the conjugal practices present in the community do not mirror this doctrine, with clear implications for HIV risk among Catholic followers in the community.

Lay leaders consider monogamy, fidelity, and being married in church to be values so fundamental to Catholicism that not adhering to them results in restricted participation in parish activities. Participation in group activities and ceremonial rites is dependent on marital status and the recognition of the legitimacy of the marriage. If a couple separates, either party can participate in Church celebrations, yet both the man and the woman are prohibited from receiving one of the most important Catholic sacraments, communion. As Mariana, coordinator of the Apostolate of Prayer (a prayer group), stated: 'only women married in church enter my apostolate of prayer course (...) Women married only through civil ceremonies cannot [participate] according to the Church's statute (...) and only married women or widows can take communion' (April 2007).¹⁴ She continued that one of her friends was prohibited from participating in the group because her husband refuses to marry in church, subtly adding that he also has 'another [woman]'.

As in many social communities, there is a distance between ideals and actual practice of everyday life. In spite of strong obedience to Catholic principles, parishioners face conjugal realities such as marital separations, re-marriages, and extramarital affairs that do not conform to their ideals. During our ethnographic work, we observed a variety of conjugal arrangements and sexual partnerships in the neighbourhoods. In addition to the couples married in the church and married legally, those only legally married, and those who were *amigados* (people who lived together, yet had not passed through any sort of civil ceremony); other arrangements included one woman with two husbands (cohabitating or not); lovers (men and women); living alone or with a child who routinely received visits from partners (that may contribute to household expenses); and, men and women married or

¹³Original quote in Portuguese: "Você está vendo que a Igreja não aprova camisinha de maneira alguma, né? Mas, eu, particularmente, eu acho que é uma coisa que tem que usar. (...) Já usando, já tem bastante pessoas contaminadas, imagine se não usar. (...) Então, eu particularmente, eu acho que as pessoas têm que usar."

¹⁴Original quote in Portuguese: "no meu curso apostolado da oração só entra mulheres casadas na Igreja. [...] mulheres só casadas no civil não podem pelo estatuto da Igreja [...] e só pode comungar, ou casada na Igreja ou viúvas".

living together with unfaithful partners (whether they are conscious or not of the infidelity). These practices among Church followers and lay leaders pushed the Catholic Church to re-examine its positions on condom use and sexuality.

Infidelity was not uncommon and facts related to the extramarital affairs were publicized through the neighbourhood gossip network in which neighbours, relatives, and colleagues commented on others' infidelity. Neighbourhood gossip channels led Margarida, a fifty-six year old Catholic woman, to discover that her husband was having an affair with a neighbour. Margarida was married in church and had long suffered from her husband's infidelity, alcoholism, rape, sexual abuse, and harassment of their daughters. Margarida presented herself as a woman who had to 'put up with' her husband's '*safadezas*' (inappropriate sexual behaviour) for the sake of her children, thereby reinforcing the children's importance in sustaining the family (i.e. conjugality). Despite years of various forms of abuse and infidelity, Margarida only separated from her husband when she felt that his behaviour began to threaten the well-being of her daughters. Yet despite her conception of herself as a good Catholic and good mother, Margarida was not allowed participate in any of the church activities, including receiving communion, due to her status as separated.

Margarida's story highlights the imbalances of power between men and women present in the Nova Guanabara community. One male lay leader for example confided in members of our research team that he had been unfaithful to his wife on a variety of occasions, yet the secrecy around the topic allowed him to maintain his leadership position in the church.¹⁵ The level of abuse that Margarida suffered and the neighbourhood gossip networks, made it impossible for Margarida to keep her situation from the Church. The idea that the wife was obliged to maintain sexual relations with her husband predominated the collective social mentality in this community (as well as in other parts of the Northeastern region of Brazil), and is one of the reasons why Margarida stayed for so long with her abusive husband.¹⁶ Thus, the intersection of unequal gender relations with the parish's vision that condom use should not be part of married life ultimately make women like Margarida more vulnerable to HIV, with the approval and blessing of the Church.

Margarida's situation provokes various questions with regards to the Church's stance against condom use. If the Church does not permit couples to use condoms, how should Margarida act in accordance with Catholic marital principles? Should she maintain a sexual relationship with her unfaithful husband without a condom? Or simply refuse? And refuse how, considering that she reported that at least on one occasion he forced her to have sex with him?¹⁷ It is important to ask up to what point being faithful to the Church mandates is an effective form of HIV prevention in a context where many women and men live with unfaithful spouses (many times without knowing). In an attempt to answer these questions, we turn to Brother Gabriel's perspectives on the issues the Church must deal with when confronting the realities of its followers:

¹⁵After speculating a fair amount about this subject, we asked one of the lay leaders directly if he had ever betrayed his wife. He admitted, without too much difficulty, that he had betrayed her several times, justifying his actions as part of 'being a man'. In fact, some of these '*pulinhos*' (literally little jumps), a term used by the informant to indicate betrayal, occurred with women who also took part in church groups.

¹⁶Gender inequality permeates many aspects of life and religious traditions in Brazil and may be one of the reasons why Margarida did not seek out other religious outlets after being barred from many Church activities. While we did not focus on this in our research, we recommend that future research explore the ways in which constructions of gender and sexuality within religious traditions influence the decisions of followers to convert to other religions.

¹⁷It is worth calling attention to the fact that although Catholicism allows for the use of condoms when one of the partners is HIV positive, this information was not shared by those interviewed in Nova Guanabara. At the same time, although there is a debate about the possibility of divorce and remarrying among Catholic theologians (Robinson nd), in Brazil, there is still a position in the Church that impedes both.

Because, look: on one hand I understand that the Church has the truth of faith, but I have contact with people, for example, couples that are not faithful, and that a woman can be contaminated by her husband's infidelity, and then what?! The use of condoms, how does it end up? It is a fact that we are always faced with realities that challenge us, that question us and that place us in front of reality. (Brother Gabriel – March 2007)¹⁸

Unfortunately, not all of the lay leaders interviewed agreed with Brother Gabriel's opinion. For some, fidelity was an effective way to prevent HIV and they expressed being upset by the idea that married people use condoms. Consider for example the opinion of Patrícia, the Coordinator of the 'Couples' Meeting with Christ'¹⁹, regarding doctors who offer condoms to married couples:

If you are married for 22 years, why will you use a condom? (...) the doctors sometimes look at their other clients, those who do things wrongly, always betraying their spouse (...) They want to hand them (condoms) out for everyone to use. This means that you don't hold it together! (...) He is her only one, and she is his only one? You have to trust, right? (...) You have that person; you don't need to use it. (Patrícia – March, 2007)²⁰

For Patrícia, trust and fidelity constitute the most effective methods to prevent AIDS and other sexually transmittable diseases. Fidelity was conceptualized by some of the lay leaders as the foundation upon which other Christian family values such as monogamy and marriage are built. Many argued that infidelity destroys the family structure and saw extramarital affairs as a way of declaring the family's end.

In contrast, other participants (sometimes even the same ones when they were asked directly to reflect on other angles of the questions being asked of them), considered condom use as important for AIDS prevention after having seen the gravity of the epidemic and recognizing sex outside of marriage as a reality within their community. Adriana for example shared how she educates her daughters about sex. On the one hand, she incorporated the Catholic perspective of abstinence and postponing sexual initiation until marriage, and on the other, of condom use as a strategy to be used if (and/or when) desire is stronger than the doctrine. Lay leaders such as Adriana and Maurício, the Coordinator of the Rosary of Men²¹, understood the Church's position with regards to condom use as ideal, yet ultimately unrealistic. As Maurício stated:

What the Church says is that it is prohibited. It prohibits our Catholic followers to use condoms. I think that this is a little wrong, because AIDS is out there, and the Church doesn't work on prevention. The Church gives advice, we follow it. But we know the risk that, at this point, is really there. (...) In this point, I think that the Church errs. (Maurício – March 2007)²²

¹⁸Original quote in Portuguese: "Porque, veja: por um lado eu compreendo o que a Igreja tem a verdade da fé, mas eu estou em contato com pessoas, por exemplo, casais que não são fieis, e que a mulher pode se contaminar pela infidelidade do esposo, e aí?! O uso do preservativo como é que fica? De fato nós estamos sempre diante de realidades que nos interpelam, que nos questionam e que nos colocam diante de realidade."

¹⁹The 'Couples' Meeting with Christ' is one of the mechanisms through which the Church transmits its key tenants of a successful marriage (see Machado 1996). The group is considered a service of the Catholic Church and its advice has been offered since 1970. In the Nova Guanabara community, weekly activities include prayer and discussions on topics related to married life and raising children in the Catholic faith. Group leaders emphasized that monogamy and fidelity were among the most important values reinforced through the meetings.

²⁰Original quote in Portuguese: "Se você é casada a vinte e dois anos, pra que você vai usar camisinha? [...] os médicos, as vezes, olha pelo lado dos outros clientes, que fazem as coisas erradas, de outra maneira, que vive traindo, [...] eles querem passar pra todo mundo usar. Quer dizer que você não garante! [...] ele é o único seu, e que ele é a única dele? Você tem que ter confiança, né? [...] Você tem aquela pessoa, não precisa usar."

²¹The Rosary of Men has approximately 800 groups in the Northeast with a total of nearly 100,000 men who recite the rosary weekly. In the Nova Guanabara parish, approximately 60 to 65 men recited the rosaries every Monday.

Maurício's role at the Rosary of Men is to attract men who are distanced from the Church to form part of a group of men who recite the rosary together once a week. He is therefore in frequent contact with community members and realistic about the likely consequences should the Church continue to prohibit followers to use condoms. While neither Maurício nor Adriana's disagreement with the Church has led them to question their faith or religious leadership, they shared a common perception that the Church had neglected to address HIV prevention (unless related to abstinence).

Contextualizing the Findings

In this paper, we have drawn on ethnographic data to explore how the Catholic Church's moral doctrine with regards to sexuality influences its response to HIV and AIDS in Recife, Brazil. By focusing on how those we interviewed interpret the moral and religious discourses surrounding conjugality and fidelity, we have shown that the Church's justification for a prohibitive stance on condom use is not consistent with the everyday reality of its followers. The divergence of viewpoints between the church-goers, lay leaders, and clerics suggests that many issues remain unresolved in terms of the Church's prerogatives, with possible negative repercussions in the sexual health of the Church followers.

A recent study conducted by NGO *Católicas pelo Direito de Decidir* (the Brazilian affiliate of Catholics For Choice) and IBOPE (the Brazilian Institute of Public Opinion and Statistics) (IBOPE/CDC-BR 2007), between November 2006 and January 2007, echoes in numbers much of what we heard in informal conversations and interviews in Nova Guanabara. Conducted with young people between 18 and 29 in the five geographic regions of Brazil, the study focused on their opinions of the Catholic Church's positions with regard to sexuality and reproduction. Similar to our findings, the study shows that the viewpoints of the Church do not always translate into the actions of its followers.

In the study by IBOPE/CDC-Br (2007), 79% of those interviewed of both sexes disagreed with the survey statement that 'people should only have sexual relations after marriage'. Additionally, 96% of those interviewed agreed (same percentage in Northeast) with 'the use of condoms to avoid pregnancy and sexually transmitted diseases,' and 88% (87% of the people from the Northeast) agreed that 'a person can use birth control methods and continue being a good Catholic'. Furthermore, 62% of those interviewed in Brazil (60% in the Northeast) agree that 'the Catholic Church assumes an out-of-date position by condemning condom use or other birth control methods and sex before marriage' (IBOPE/CDC-BR. 2007).

The survey results indicate that those interviewed in the 2007 IBOPE/CDC-Br study do not agree with the Church's formal opinion regarding abstinence and delaying sex until marriage as the only acceptable form of preventing STDs and avoiding pregnancy. With regards to sexuality, the study reveals that for Catholic youth, the Church's dogmas no longer serve as the only principles 'of and for' orienting behavior (Geertz 1987: 70). However, it is important to also consider dissent from the majority opinions. For example, 38% of Catholic youth do not think that the Church's position is out-of-date and 4% do not agree with the use of condoms for contraception and STI prevention. While the nature of the opinion survey does not allow for extensive analysis of what these questions meant to the

²²Original quote in Portuguese: "O que ela (a Igreja) diz é que é proibido. Que ela proíbi que nossos fiéis católicos usem a camisinha. Eu acho que isso é um pouco errado porque a AIDS está aí, e ela (a Igreja) não trabalha em cima da prevenção. Ela dá o conselho, nos seguimos. Mas a gente sabe o risco que é. Nesse ponto realmente eu não concordo. (...) Nesse ponto eu acho que a Igreja falha."

respondents, we can use the ideas presented by our interlocutors regarding HIV prevention and contraception among Catholics to illuminate the IBOPE/CDC-Br data. Clerics, lay leaders, and followers consistently told us that they agreed with the Church's position (similar to the 38 % of the study), but that when faced with reality in their communities, many of them also saw condom use as a form of prevention. If interviewed as part of the IBOPE/CDC study, Brother Gabriel, Sister Juliana and Adriana, and Maurício would most likely be among the 34% that agreed with the perspective of the Church minus the 4% that did not agree with condom use. While such a position may at first seem incoherent, it is consistent with their observations regarding the sexual behavior of followers, and affirmations that beliefs did not always drive their actions. They tended to argue that when faced with the gravity of the epidemic, both condoms and fidelity or abstinence ought to be acceptable options.

The distance between the moral ideal and practical reality with respect to sexuality in Brazil is not only present in the Catholic community. In understanding sexuality as something that is socially constructed (Gagnon 2004; Parker 2009), religion is just one of the factors alongside the historical, economical, cultural, and political that influence people's sexual identity and agency in the country (Parker 2009). As we saw in our analysis of Margarida, gender expectations are as much shaped by the Catholic Church as they influence how the church's doctrines are interpreted in everyday life. This finding echoes the work of Agadjanian (2005) who found that gender differences were reinforced through women's participation in religious organizations and groups in Mozambique, ultimately also placing women in a more vulnerable position to HIV infection. Agadjanian's findings and ours point to the potential of church groups like the Rosary of Men, Couples' Meeting, and Apostolate of Prayer to construct a more effective response to the epidemic were they to adopt a more realistic, and less punitive and stigmatizing approach towards those that do not conform to the Catholic norms surrounding sexuality.

As discussed in the Introduction to this article, successful collaborations between the Catholic Church and the Brazilian National AIDS Program exist in other settings (Seffner *et al.* 2008). In research conducted as part of the larger research project, we found that the autonomy given to bishops on a local level due to the decentralized nature of the bureaucratic structure of the Church in Brazil allowed for more progressive responses to the HIV epidemic in some cities, such as São Paulo or Porto Alegre. In Recife we found that while the distance facilitated more open views regarding the need for condom use among those closest to the followers, the adherence to Church doctrine in the structuring of official church activities and discourses often reinforced unequal gender hierarchies and increased women's vulnerability to HIV. Thus the question that remains for both public health activists and the Church is how to design and implement health promotion strategies that encompass the highly diverse religious context, the power structures within the Catholic Church that allow local bishops to interpret Church doctrine, the various configurations of families and couples, and, in addition, recognize the scars that gender, race, and class inequalities have left in Brazilian society. The manner in which these structural inequalities converge to increase vulnerability to violence, STIs, and HIV cannot be ignored in favour of a moral ideal that does not correspond to everyday reality.

Acknowledgments

This article is based on data collected from the study Religious Responses to HIV/AIDS in Brazil, a project 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 is 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). Additional information about the project can be obtained via e-mail from religiao@abiids.org.br or at <http://www.abiids.org.br>. The content is solely the responsibility of the authors and does not necessarily represent the official views of the Eunice Kennedy Shriver National Institute of Child Health and Human Development or the National Institutes of Health.

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