

## **XVII International AIDS Conference Is Religion a Barrier to HIV Prevention? August 4, 2008**

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**PURNIMA MANE, Ph.D.:** Good morning everybody and apologies for being late. As all of you are probably discovering, it is not so easy to find places here, and I guess by tomorrow we will be experts. Let me introduce my co-chair, Ruben del Prado, who I have had the pleasure of working with when I worked in UNAIDS. He is currently UNAIDS country coordinator for Guyana and Suriname. So, let me pass over to Ruben to introduce us to this session and to introduce the speakers.

**RUBEN DEL PRADO:** This is going to be a very interesting speaking so I will limit my introductions to something we just all heard in the plenary session, and that was we should not accept. And there is a question, is religion a barrier to HIV prevention. So, I am very, very interested in hearing from the speakers on this distinguished panel that I will introduce right before they speak, to see what the answer is to this very important question.

What we do know in the field is that when you ask questions when it comes to obstacles and challenges and opportunities, faith-based organizations are always mentioned; mentioned as a challenge, mentioned as an obstacle, and also mentioned as great opportunities. So this will be, indeed, a very, very interesting session, and I wonder what the answers are.

First of all, I would like to introduce to you the first speaker on the panel, Gabriella Rodriguez Ramirez [misspelled?]. Gabriella is a graduate of the National Autonomous University of Mexico where she obtained a Bachelor's degree in psychology. She also completed post-graduate courses in education at this same university, and received her Master's degree in social anthropology. She completed a post doctoral course in qualitative research at the University of California at San Francisco, and a fellow at a population leadership program at the University of Seattle in the United States of America. Gabriella's work focuses on education planning at the National Population Council. She is the sub director at the Mexican Foundation for Family Planning, and a consultant for the International Planned Parenthood Federation. Her primary research focuses on the study of sexuality among young people. She has authored 11 books and some 30 articles published by educational and academic institutions.

Since 1999 she is writing a column about sexual politics for La Jornada, a newspaper in Mexico City. It is a great pleasure to have Gabriella give her presentation to answer the question, is religion a barrier to HIV prevention. Gabriella? [Applause].

**GABRIELLA RODRIGUEZ, M.D.:** Thank you. Good morning for everybody. I really appreciate the opportunity to speak here in that particularly controversial issue that is religion and prevention. I title my paper, "A Shadowy Inference of

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Catholicism" in the prevention of HIV. Okay. So, that is the contents I am going to deal with, sexuality and religion to social constructions, Catholic sexual regulations. Then I am going to speak about the secularization of sex, particularly in Mexico. Political regression, this is an international issue. And the citizens to the rescue, so that is our current challenge.

Sexuality and religion are not such different concepts. Both are ideas and practices constructed by societies that are direct expressions of the contour that originated the symbols that play an essential role in social relations. They treat notions that are indispensable to human beings, so scientists cannot exist without science, without art, or philosophy, but no society has ever existed without sexuality and religion. The western concept of sexuality as analyzed by the critical approach of the historian Michael Foucault is a knowledge that shapes the way that we think about and understand the body. A group of meanings given to certain practices, rules and roles, in part traditional in part new, change the ways in which individuals give meaning and value to their conduct, their [inaudible], their pleasures, their feelings, sensations, to their dreams.

In the other hand, religion, according to their claim, is a system of sacred beliefs and practices in a community called a church. The sacred is that which is perfected and isolated like prohibitions, profane things are those to which

such prohibitions are appealed. It is the same with languages. Religion as gained by having been born in a definite society. It cultivates the social coercion, facilitates trust and transmitted from one generation to the next. It is expressed above all by its rituals, in the rules that describe how a person must behave in the presence of sacred objects. The sacred is the society that itself is represented to its members symbolically.

We can see that they are similar concepts, but also different. While sexuality controls the body, religious regulates the sacred. The body particularly in its sexual relations, is considered one of the forces of nature, one of the mechanisms of the transmission of life that cannot be understood. That has led many cultures to conclude that sexuality itself is sacred.

Catholic sexual regulations. In Catholicism, historical developments, the body came to be viewed as a sacred object and central to its religious regulations. When begin as a taboo toward the body and sexuality [inaudible] and dangerous and untouchable has developed in Catholicism into impurity. Throughout its more than 2,000 years of history, the Catholic church has reinterpreted and renovated its principles. In recent times, sexual regulations have taken on a high priority in the Vatican agenda. I am going to enumerate some of the prohibitions included in the Catholic church compendium of the Catholicism published in March 2005.

The sixth commandment, you shall not commit adultery; as followers of Christ, the model of all chastity, all the published Baptists are calling to live chastity in keeping with their particular states of life. Some profess virginity or concentrated celibacy which enables them to give themselves to God along with an individual undivided heart and in remarkable manner others—others either they are married, living on a conjugal chastity of an unmarried practice—chastity incontinence. By insisting on the sins of chastity, the Catholicism confuses free sex with minors abuse and have reinforced sexophobic and homophobic attitudes.

I am going to make more quickly. This is why it is so important to promote also the use of condoms because in our culture, the abstinence is part of the roads of Catholicism that was promoted and that is proved that is not as effective as prevention. Let me speak now about the secularization of sex in Mexico.

While the Catholic church supports regulations contrary to effective and HIV/AIDS, practices many Catholics especially in the new generation have most modern ideas. They have passed from a moral technology to a morality based on reason. Geoffrey Wigs [misspelled?] speaks of a process of the secularization of sex. The development of an ever increasing distance between sexual life and religious values has been occurring even between believes. Various studies conform, the regional secularization of our society as indicated by the

following table. As you can see, minority of Mexicans young people is Catholic. Almost a half are practitioners, [inaudible] not practitioners, but the new generation is believed in the region of Guadalupe. Lady of Guadalupe is like a goddess in this country, and they believe in sin, 78-percent. And to the question of this survey made in 2005, religion do not influence their sexuality for 75.2-percent. More than the half of young people use condoms, not every time, but they used at least once, and church is the information source just for one percent of young people.

So while it is doubtful that religion has advocated its central place in the social life, particularly because this fact that half of adolescents have sex and use condoms, today, the goals are different.

To lead me down to the next topic, our times are also characterized by political polarizations. Conservatism has advanced in the world and religion has made a comeback in the political sphere. The sexual health agenda is at present, squarely at the center of the partisan divisions. Citizens are disillusionated with the state institutions. Politicians and political parties have fallen into disrepute. One result is that political elects look for legitimization by religious movements. It is astonishing to witness, in the beginning of the 21<sup>st</sup> century, the political leadership trying to overcome the fragility of institutions by the repoliticizing of the bible, and reinforcing traditional family partners.

In November 2002, in an attempt to influence the Catholic legislature to Democrat states, Joseph Ratzinger dictated a much prohibiting theme to formulate laws that transgress the principles of national ethics. The directive demanded that they respect the right of the human embryo, [inaudible], and promote family. It defined family as monogamous matrimony between persons of the opposite sex, protected in their unity and stability when confronting modern peoples' laws. According to Ratzinger, the family cannot be compared judicially to other sons of cohabitation, nor can these others form receive legal recognition.

Over the last years, polarization in my country is extreme. While the local government in Mexico City approved legal unions among homosexuals and free access to abortion, in the other hand the federal government, represented from conservative party, has sought to initiate legalizations based on the natural ethics of the Vatican. Thus far, those initiatives have not advanced, but they reduced the TB preventative HIV campaigns in a very significant way. They seek to impale inclusion of the ABC campaigns in the programs of the health and education sectors. They have attempted to limit freedom of worship with legal initiatives and prohibit the discussions, the deep discussion of condoms in the classroom.

I have to add that this week, the further leaders changed their discourse only this week as an opportunistic

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politicians. I have to say this with a heart very strong, okay? They reduce in the way they speak more clearly this weeks, more progressive this weeks. They do not move the budget of the prevention. So, in this moment the government devoted 150 million pesos, 150,000 dollars for a year in prevention. And they devoted, comparative, this is a poor country, 3,000 million pesos, 3 million dollars, in a campaign to promote some initiatives of the president to privatize the oil. So this is the comparative figure.

I have to finish, I know. To increase the preventative practices of HIV, it will be necessary to strengthen citizenships freedom of conscience and secular state. Many times, the only way that human beings can liberate ourselves from repressive [inaudible] forces, is to oppose them collectively. In the political sphere, secular state embraces at least three essential concepts, separation, neutrality, and equality. As for separation, the model state should not interfere in religious questions. [Inaudible] must learn to separate the religious beliefs from the public functions. Neutrality implies that public institutions avoid any attributes of religious lead, as the state has no conscience, it cannot think, nor can it poses any religion. As for equality, the state should guarantee the citizens rights to freedom of conscience and assure an equitable treatment regardless of church or faith.

Civil organizations need to become visible political actors, so we can grow from the secular agenda. Or even from the religious agenda as the new campaign from the Catholics for Choice in Mexico that are using this wonderful lemma, love your neighbors and yourself, use a condom. Yes. [Applause].

When language appears, it becomes necessary to invent a symbol for the universe. This is stated by Levy Strauss, and we need a symbol for the human body. That forms part of that universe. Man organizing meaning and establishes relations using the only raw materials at his disposal, nature and the body. Sexual symbols have a history with complex routes. The body realizes that the social order and the society are within the individuals, therefore we must recognize that religious traditions have been engrained and are one of the foundations of our contemporary sexual values. Thank you very much.

**RUBEN DEL PRADO:** Thank you, Gabriella. [Applause]. Thank you, Gabriella, and most welcome to the people who have just entered the session. Could volunteers maybe come to the front, and we may need more than two volunteers, so if the volunteers could come to the front with the question cards. If you would like to jot down questions, please raise your hands and the volunteers will issue the question cards to you. Please make sure that you continue to have the question cards sent to us, and the last question card will be received before the last speaker. So, if the volunteers could please make

themselves known and please take the question cards. Keep the questions short please.

The next presenter from the panel in this session is Ashok Row Kavi. A journalist for 18 years, Ashok has been a gay rights activist for close to two decades, now as the out of closet homosexual in India. Ashok has worked in over eight of India's biggest newspaper publishing houses, and has seen the tumult and tyranny of India's messy politics. He still remains the executive editor of India's first gay and Lesbian news magazine, *Bombay Dost*, which has suspended publication because of a lack of funds. Ashok studied to be a textile engineer, but left that field to become a monk of the Ramakrishna order where he did comparative religion and came out as a gay man.

Though he saw his first Muslim lover through thick and sin, he remains a devout Hindu, devoted to goddess Renuka Devi, whose cult of holy temple prostitution is his special field of study. He is a chair of India's oldest community based organization of homosexuals, the Hamsa for Trust [misspelled?], and the senior planning associate for the National AIDS Control Program. He is a member of the prime minister's council on AIDS, and as a convener of the India Network for Sexual Minorities, and program officer for scaling up targeted interventions among men who have sex with men and transgendered, appointed by UNAIDS in New Delhi. Ashok Row Kavi?

**ASHOK ROW KAVI:** Thank you, Ruben. Thank you very much. Before I start this presentation-[applause]. Let me start with a small personal story. A long, long time ago when I was a monk, I was really worried about my homosexuality. So I started discussing it with my abbot, Daswana Halshananda [misspelled?], and a wonderful old man, a nuclear physicist. And Halshananda said what do I do about my being a homosexual? The venerable monk looked at me with a twinkle in his eye and said, "Well, none of us in this monastery are supposed to be having sex anyway. So why does being a homosexual worry you? You make it sound as if you are a mass murderer or something." So I replied, well, the world outside does not like us, so what do we do? And he said, "Just look at your hands, and you will see that all the fingers are not the same size or alike. Our mother has made us all different and equal. And yet, we are all fingers of her mighty hand, and with that hand she cooks special dishes for each of her children because she loves them all so much."

So, I am going to show you this next slide about this great mother of mine called Mother Kali, and she is really very fearsome. I am showing you her nice side, and she is a bit shy, that is why she has got her tongue out. And that is how Mother Kali has made me a homosexual and a special person too.

Now, slide two, I need to tell you all a few facts about Hinduism. I understand that a lot of you here are not Hindus, so just the basics, because it is a very complex

religion. Out of the six systems of Hindu philosophy, five are atheistic, and yet it is supposed to be a religion. So, I would like to tell you about the facts that Hinduism and sexuality are integral to each other. In fact, there is a branch of Hinduism where sex is religion. Though many of my sects think that is a little obsessive, tantra is a legitimate part of Hinduism, and without it there is no salvation, no Moksha, and that brings me to the next slide.

How is salvation—you see this is a pictorial depiction of sex Kama, the god of love, or Eros actually, you will see his regal is a parrot, but here it is shown as several women altogether. We shall go to the next slide, what is Moksha. Moksha is all salvation is based on a tripod, like what you have for your camera. And this tripod has three legs and the three legs are Artha, Kama, and Dharma. Without these three legs on which to stand on, Moksha, salvation, cannot be reached. This is very clear. Those who opt out of it must do their own funerals. All Hindu monks, before they take to the monasticism, must do their own funerals in cremation grounds and take new life as people outside their families, outside the communities, sometimes outside the world. They cannot go into houses where marital relations or sex is taking place. So, we must know what Moksha is, and it is based on a tripod. Let us see what the three legs are.

Artha, for example, is meaningful work. A human being is nothing without his work. We stand on what we work for, and

it is socially sustaining work that makes you accumulate land and materials. Without our work we are nothing.

Slide two, Kama for example, I have purposely taken one of the most erotic carvings from the temples at Kajirow [misspelled?], which are near the holy city of Benares. These were a group of temples that escaped the Muslim invaders and remained and were unearthed sometime in the 17<sup>th</sup> century. They were hidden for nearly 800 years. Now, the interesting part about Kama is that Kama means pleasure, and it is without reproduction attached to it. Kama is sensual pleasure, it has nothing to do with reproduction. It flows from desire of the sense, and there is a phrase from Kajirow, yes, it is not just heterosexual sex that is depicted on these temples. There is homosexual sex. There is group sex. There is masturbation depicted. There is sex with animals. And the interesting part is when I was looking at these sculptures, I also saw, you know when two men were having sex there was a lady standing next to them with a Gucci bag. It was, you can imagine, that too is a sensual pleasure, remember, expensive no doubt.

The third of course is Dharma. The word comes from the sand script root Dh [misspelled?] which means to hold onto. What is Dharma? Dharma is not about religion. It is about ethics, and that is what life is all about. Dharma is rooted in all social existence. Without righteous or ethical ways of life, you cannot survive. Dharma means you must not do things do people that you would not like to be done to you. For

example, you should not be bombing Iraq, because you do not like Iraqis bombing you. [Applause].

Now, Hindu culture was traditionally has celebrated sexual openness. It came under great pressure during the Mughal and the British raj, where sexuality was oppressed or repressed. You may be shocked to know, but in a land where Hindus are a majority, and the capital of that country is Delhi, you will not find a single standing temple that is there that was constructed before the 18<sup>th</sup> century. They have all been demolished by invaders. So, whatever the new temples are, they look like bad British pastries. They are really terrible.

So, the transgender and homosexuals had to go underground. The British not only criminalized them, they saw to it that there were strict laws against transgender in India. For the first time in India's 4,000 years of history, homosexuality was criminalized in the 19<sup>th</sup> century, and the laws that came on the statutes were laws from the ecclesial law, the St. James's Bible. They were Christian laws. They still stand, unfortunately. This made for a huge mountain of hypocrisy.

Independent India, unfortunately, internalized much of this homophobia. The whole political class is a class that is just brown, internally they are all British. Many of them even say our queen, and they do not mean Elizabeth, they mean Victoria. We inherited many of Britain's missionary values, codified what kind of sex and between whom it was permissible,

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in law. For example, there were laws which said that you could wear a blouse, but you could not wear a sari. A man could wear a skirt, but not a blouse. I mean, I do not understand these laws, but only the British can come up with them, and we still have them. They are called City Civic Laws, which means that the police can anticipate that you will commit nuisance if you sit on a park bench. He thinks you might kiss another man, so he anticipates and he hauls you into jail under the public nuisance act. I never heard of telepathy, but there it is.

This made for an environment, and it still is, of sexual hypocrisy and repression, but there is no homophobia that I see in India like what you have in Europe or America. Against this backdrop though, of a sexophobia of the Indian political class, HIV made its entry in 1986 and when AIDS was first detected, HIV was first detected, it was met with intolerance considered a foreigners disease, and appeal was made to the country to return to its pristine values. Of course, nobody knew what they were, but there you are.

But, before I proceed, I am going to purposely put two statements in contradiction to each other to show what is the attitude to sexuality, and I have taken the father of the Catholic church, Augustine, from *The City of God*. The attitude to sex, he says, is lust really, is suspect because "it obstructs in the exercise of the free will." That has always been an obsession of the Catholic church. Whereas, if you look at the founder of our sect, he has a very interesting attitude

to sex. He says, "Sex is like that over-powering aunt. You must live with her, but you must show her due respect and yet show her, her place." I think that is very interesting. It is very important to know that.

Now, India has been experiencing over 20 years of the HIV epidemic. We have the largest number of HIV positive people, after South Africa. And today we are witnessing the emergence of an epidemic among MSM and transgender and IV drug users. But, for the first time, UNAIDS tried to bring all the Hindu leaders together on one platform in June this year, and you would be surprised that it was right across the spectrum, because Hinduism does not have an organized church. We had right-wing religious leaders, we had left-wing religious leaders, we had moderate leaders, and for the first time, getting them together, I think it was a miraculous act of UNAIDS. And there you are.

Starting from seating arrangements, religious leaders everywhere can be very child-like. They did not want to sit on different kinds of chairs. You had to get them the same kinds of chairs, all that sort of thing. And if you look at this picture, you will see that three of the most radical Hindu leaders are there. One is of course, right in the middle, Suami Alglindish [misspelled?], who has taken up the cause of the Untouchables and unorganized labor in the villages. And then you have on his right, you have Ravi Shenker [misspelled?], he is the new wave religious leader. He has

even been going to Palestine to try and sort of get the Israelis and Palestinians together. And there of course on Alglindish's left, Alglindish's right really, you have a religious leader who I do not like at all because he thinks cows are more important than human beings. So, the point is, for the first time, they were altogether in one platform, and they came out, you would be surprised.

The declaration that came out does not have any stigmatization of sex or sexual minorities or sex workers or IV drug users. And this is the first part of the declaration. "We recognize today, the need to incorporate HIV information in appropriate ways in our discourses, our rituals, our festivals, our religious education, and the training of future leaders of our faith." In the largest Hindu gather, it is actually the largest religious gathering in the world called the Kumbh Mela. There is something like 12 million people have a sacred bath. I do not know why you have a sacred bath only there, but even then, they have it at the junction of the Ganges and the Yamuna. And for the first time, at the Kumbh Mela, HIV information was incorporated in discourses within the great fair, which had never happened before. Of course it is not the government of India which did it, it was UNAIDS. Yes, it is nearly through.

The second declaration was, "We pledge to work towards overcoming HIV in an inclusive manner, and for this purpose, mobilize the human, spiritual, institutional, and financial

resources that our communities possess." And the next one, "We resolve to utilize our places of worship, our educational, and health facilities, and our view of women and youth programs to provide the full range of prevention, treatment, care, and support services, in coordination with the government."

So, who, in summing up this small presentation, who exactly is a barrier? Not the religion. It looks more like the government. It is not pumping enough money, especially into the marginalized groups. There is still an obsession with women and sex work. There is still a feeling that men having sex with men are not a serious group who should be intervened with, transgender are still marginalized. And IV drug use is spreading very rapidly because the old habits of opium taking have been marginalized. Otherwise, taking opium and narcotics was a part of your religious duty. During Shimratree [misspelled?] you were asked to give your children narcotics so that they along with you felt good and high, but now it is not true.

Towards the end, I would just like to thank you all for listening to this. I want to leave you with this picture of this handsome god old Hanuman. And I am very fond of him because he is the main god in the Rumania [misspelled?] , who according to me is my favorite god, because when he carries the message of rama to his abducted wives Cita [misspelled?] and Lanka [misspelled?]. And Cita says how come you came and my husband could not come? How could you fly across the ocean?

So Hanuman tells her, look, you are just married to him, I love Ram. So you see this is one god's love for another god. And you would be surprised to know, Hanuman was on the pendant of Mao Tse Tsung's star. And surprise surprise, he is now being worn as a pendant by Barack Obama. That does not say anything about their sexuality though, I assure you.

Now, not but not the least, I want to tell you that the declaration of the human Hindu religious leaders was on June 1<sup>st</sup> and 2<sup>nd</sup>. June 1<sup>st</sup> was my birthday, so what a lovely birthday present it was. Thank you all for listening to me.

[Applause].

**RUBEN DEL PRADO:** Thank you very much, Ashok. And I am not apologizing on his behalf, I have known him too long. For those of you who have not heard the message before, there is an opportunity to write down your questions. So could we please have the volunteers in front of the room, not in the back, so the volunteers can see who would like to have the question cards. And please start giving the question cards to us so we can maybe combine a few questions so we do not – because we will not be able to answer all the questions of course. And Richard is already standing up, so guys, could you please start giving us the question cards.

Richard, who is standing there, is currently a research fellow for the Society and Governance in Melanesia, a program at Australia National University. He is an anthropologist with extensive field and consultancy experience in Papa New Guinea.

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His publicans on AIDS include an edited publication with Leslie Butt [misspelled?], *Making Sense of AIDS: Culture, Sexuality, and Power in Melanesia*. A chapter in that book, moral reform and miraculous cures, question healing and AIDS into Ireland, Papa New Guinea, and a paper, *Aids and the Apocalypticism: Interpretations of the Epidemic in Papa New Guinea in Culture, Health, and Sexuality*. [Applause].

**RICHARD EVES, Ph.D.:** Thank you. I want just to put a plug in for the book. I have got some discount vouchers of 20-percent discount which I will leave on the side of the podium if you would like to take one. It has got several essays on Papa New Guinea, including several on Christianity.

Unfortunately, I have a red light flashing here that says I have got three minutes here and I have not even started yet.

**RUBEN DEL PRADO:** Could you please readjust the red light?

**RICHARD EVES, Ph.D.:** It is difficult to do justice to the question of religion and HIV prevention in Papa New Guinea. Not only is the country extraordinarily culturally diverse with an estimated 850 languages in a population of 5.5 million, but also even though 97-percent of the population profess to be Christian, religious beliefs and practices vary greatly.

Christianity has been a dominant feature of the cultural landscape for many years, over a century in some places. It is a vital aspect of the framework with which most

Papa New Guineans make sense of the world and has a pervasive influence in daily life. There is a Christian church in every community in Papa New Guinea, often several. Churches are uniquely placed to make a valuable contribution to HIV prevention, often being the center of community life, and exerting considerable influence over their congregations. Church leaders generally command a far greater degree of respect than the government, and the churches have been significant catalysts for change in local communities.

Many of the churches responded quickly to the challenges thrown up by the AIDS epidemic. Ever since the first reported case of HIV infection in 1987, the mainstream churches in particular have played a key part in the national and community response. Indeed, when the government was in denial, or its response was ineffective, it was these churches which took up the challenge, taking the lead on the issue and tackling it when it was largely ignored by government.

Building on their long history of providing healthcare in Papa New Guinea, many churches have been at the forefront of providing VCT, home-based care, and support for orphans. The Catholic church especially has led the way, establishing care centers and VCT in many parts of the country. The Catholics and Anglicans have also been especially instrumental in combating stigma and discrimination that surrounds infection with HIV.

In general, the same cannot be said of the newer born again Evangelical charismatic and Pentecostal churches, which often take a far more unsympathetic view of AIDS. Many of these churches can rightly be called fundamentalists, as they have the defining characteristics of fundamentalism including reading the bible into dualistic terms as a dire struggle between God and Satan, good and evil, Christian and non-believer. The last decade or so has seen spectacular growth in these churches which are making substantial inroads into the traditionally large congregations as the mainstream churches.

Despite efforts of the National AIDS Council, recourse to moral rather than a medical framework when speaking of AIDS as common. Consistent with what I was saying that the language of sin and morality is perhaps the most pervasive of all in public discourse on AIDS. Though many in the mainstream churches are trying to promote a more caring and compassionate response, sin based understandings of AIDS often cut across denominational divides. [Applause] Many Christians zealously take the view that HIV infection is God's punishment for immorality, though this is especially pronounced in the increasingly popular born again churches.

In the areas of Papua New Guinea which I know best, most of the born again churches associate AIDS as it is usually called, overwhelmingly with sexuality, and especially with sexual promiscuity. Although they usually realize the epidemiological reality of HIV is transmitted by sexual

intercourse, they believe that God determines who is infected, and as an act of punishment for sin. Discussion of AIDS is this constituted within what Gil Seedel [misspelled?] calls a "medical moral discourse in that it coalesces the epidemiological reality of HIV transmission into a moral framework."

The Bible sets out two main ways of understanding the causes of illness and misfortune. One is the idea that these are God's punishment for moral transgression. And the other is that he sends them to test the person's commitment to Christianity. Many Papa New Guinea churches subscribe overwhelmingly to the first view, seeing AIDS as a curse or plague unleashed by an angry God to punish the sinful. One Pentecostal church minister when asked about AIDS, answered on these lines by reading a section from Deuteronomy, which gives a long list of plagues and pestilence, starvation, slavery, disease, death, befalling those who do not heed God's commandments. It is the slide up at the moment.

Some born again churches conceptualize AIDS within an apocalyptic narrative, seeing it as a sign of the end times. The catastrophic period before Jesus comes to snatch up his followers prior to the end of the world. Provided by a pessimistic fatalism, this apocalyptic narrative predicts the end times will be marked by natural disasters, as well as widespread social, economic, and moral chaos. In a self-fulfilling logic, the AIDS epidemic confirms the truth of the

prophecies and provides compelling evidence that the end of the world is imminent. An Assemblies of God pastor saw it in these terms when he commented in these terms. Quote, "I will talk clearly that I think that AIDS is a curse of God and a mark that God will come again. It is part of the end times. It is a warning from God telling people they cannot disregard his commands."

Some Christian even predict worse scourges if these initial warnings are not heeded. For example, another pastor suggested that other more powerful diseases are yet to arrive. He saw AIDS as the first of seven disease described as the wrath of God, a reference to the seven plagues mentioned in the Book of Revelation. This is the quotation on the screen at the moment.

For these Christians, the imminence of the end of the world emphasizes the critical importance of being morally virtuous and becoming born again Christian. AIDS is a warning to Christians to embrace moral reform and asks non-believers to convert without delay. Christians must be in perpetual readiness, always free of sin, a state achieved by being born again and following the moral prescription of the church.

As in many other places, Papa New Guinea's main interventions to stem the epidemic have been based on the ABC model of prevention. Much has been reported elsewhere, although a few churches see condoms as vital to arresting the spread of HIV, most churches oppose their use. Opposition has

widespread valence here across the religious spectrum, and the promotion of condoms by the National AIDS Council has met with strident criticism.

A number of Catholic bishops have been particularly vocal in their opposition, including the bishop of the Vanim, who produced a booklet outlining the Catholic critique which states, I will not read the quote.

Most churches subscribe overwhelmingly to the A and the B of the ABC. And if C is mentioned, it is taken to mean Christianity or Christian values. One of the prevailing views met with, is that far from HIV, condoms have actually led to the proliferation. Rather than opposition being based on cultural grounds, condoms being a foreign import as in some places, the arguments are moral and medical. The moral argument is that condoms promote purity by allowing people to have sex outside of marriage without the negative consequences that might ensue. There is a widespread perception that the distribution of condoms has sex outside marriage. Far from sexuality, and confining it to marriages, condoms are viewed as unleashing it, and as a consequence, spreading HIV.

One Christian cited by Holly Wodly [misspelled?] said you cannot have A, B, and C together. The A and the B are like a rope tied around a person which holds them to being a good Christian, fearful of AIDS. The C however, has the opposite effect in that it unties the rope and the person becomes loose

and can do anything they like, with nothing holding them to being good.

Rather than being seen as a protective measure that can be used when a person strays from marital fidelity, condoms are seen as allowing complete sexual freedom. In such circumstances, Christians feel there is no longer anything to fence us in. Since AIDS is the vehicle through which God forces people to be good Christians, condoms enable people to thwart God's will and escape due punishment. This view embodies the presumption, quote, "That the disease itself must be used to discourage risky behaviors." and I am quoting here from Allen Brandt [misspelled?]. This kind of reasoning sees some Christians suggest that condoms are instruments devised by the devil, so that sinners could cheat the divine scours of justice. For this reason, some Pentecostals have even preached that those who use condoms will go to hell.

The medical argument against condoms articulated by many Christians is that the membrane is permeable and ineffective in preventing HIV infection. Condoms are sometimes described as being 50-50, meaning that they are only partly reliable, working only half the time. This argument has been put forward by the bishop of Vanimo in a pastoral letter, but it also has been widely embraced by members of other churches and constitutes a popular view in Papa New Guinea. For example, in a survey on condom use, Charles Wald [misspelled?] found that many respondents expressed their concerns that

condoms were not 100-percent effective, with more than 30-percent believing that even when they were used properly, they would not prevent the transmission of HIV.

These arguments against condoms have been highly influential. Given the widespread acceptance of Christianity in Papua New Guinea, many people see the moral debates that surround HIV prevention as bound up with a question of how the Christian nation can be maintained in a world increasingly dominated by secular agendas that promote moral failure. Even in cases when the more established churches have softened their approach to accept prevention methods previously condemned, this is not necessarily the case with their followers. The virtual universality of Christianity, and the fact that many health facilities are church run or staffed by people who strongly identify as Christian, means that it is difficult to promote the use of, and even to distribute condoms.

In some provinces, virtually all the healthcare is through church facilities, and this has posed serious problems for this aspect of HIV prevention. Many church run facilities refuse to stock condoms or to display prevention posters that promote their use. Even when a health facility has condoms available, regardless of whether it is government or church run, health workers have been known to speak out against them and to refuse to distribute them. Refusal is sometimes absolute, but sometimes it is requests from young unmarried men that are refused because staff believe that they will engage in

sex outside of marriage. Thus, even when a church is relatively progressive on the issue, some people see it as their duty to uphold their conservative understanding of Christian values.

This intermixing of the medical and the moral has some of its basis in traditional notions, since illness were often understood as the consequence of transgression, but Christianity has undoubtedly reinforced this connection greatly. In the contemporary context of HIV prevention, the high degree of religiosity on the part of the government health workers, not only influences the health messages conveyed, but also access to health resources such as condoms.

There are however, many cases of Christians defying the orthodoxies and policies of their churches. Catholic nuns distribution condoms. Catholic run health facilities displaying AIDS prevention posters advocating condoms. condoms found in care centers operated by the Catholic church. Pentecostals learning about condoms and condom use. Bishops promoting the use of condoms in established relationships in which one of the partners is known to be HIV positive. Unfortunately, these examples remain the exception rather the rule. As I have described, the relationship between religion and HIV prevention is complex, which means that any generalization is open to refutation. However, considering the enormous damage by the moral condemnation of condoms and the

widespread misinterpretation of their efficacy, I must say that religion there is a barrier to prevention. Thank you.

**RUBEN DEL PRADO:** Thank you very much. [Applause].  
Thank you, Richard. Thank you very much for your questions. This is your final opportunity to send the questions up to the front. Dennis, believe it or not, but we may need you up here to respond to some of the questions, so if you do not mind? Maybe you could take the last seat. There are some questions about the set up of the panel.

I am now handing over this part of the meeting to my co-chair, Purnima Mane, who will take us through the questions. For those of you who go to the microphone to speak, please keep it very, very short, and make it questions. Purnima, the floor is yours.

**PURNIMA MANE, Ph.D.:** Thank you very much, and it is obviously going to be a challenge for us to make sure that all your questions are answered and I am not going to even claim that we will be able to do that, but we have a sense, up to now, at least for the first two speakers of where the questions are going, so we might combine a few of these questions and ask the panelists to reply. I am afraid that those who are standing up in line are going to get an opportunity only after we are done with the questions that have already come in, because we asked for questions to be sent on card. So I am apologizing in advance if you do not get a chance to ask your question.

First, let me turn to Gabriella, and a lot of her questions are actually in Spanish, which I unfortunately do not know. So she is going to have to tell us what the questions are and combine all of them into one answer because I am going to have to give a little time to each speaker. We have half an hour, which is not a whole lot of time, so we have to make sure that we give due justice to all of them. Thank you. Gabriella, please go ahead. If you could read all three.

**GABRIELLE RODRIGUEZ, M.D.:** Yes, I have three questions. One said that if Catholic religion is not the unique religion in Mexico. Of course agree. So this Maria asked me to speak about the others. Yes, I say that 84.5-percent of Mexicans are Catholics. There is another almost five percent of Christians that is not particularly different groups like Catholics, as Fuko [misspelled?] analyze in western. And there are another invisible people like me, three percent are atheists. So of course it is not an only religion, so Catholicism is a big majority. But even, as I tried to explain, Catholics are a plurality society that have very, very different values, not necessarily agree with the regulations of the Vatican.

The other question is that if institutionally, religion could be a barrier. There are, throughout the world, churches, priests, and pastors, who devoted their lives to fight against AIDS, discrimination, and stigma, and are contradicting

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positively and advocating towards justice, so all is not negative.

There is a hope. That is what for me is very important to put this wonderful campaign of Catholics for a Choice in the subway now in Mexico, that is a fighting from the religious groups definitely suggests. But of course my speech is important to recognize that the regulation, the official regulation of Catholicism, in this continent of Latin America with 88-percent of Catholics, it has a shadowy influence in the prevention, not necessarily in other fronts of HIV.

And there is another women that asked me about in Mexico does the Catholic church is attending HIV people who live with HIV. But they prohibited condom and pushed the abstinence until marriage campaigns. That is the reality, okay. So I do not speak about the importance assistance of HIV victims from the different religions, I speak only about Catholics in Mexico and concentrate in the preventative campaigns. Okay.

**PURNIMA MANE, Ph.D.:** Thank you very much. Gabriella, you have two more questions, but I am wondering whether they could also be taken by Richard, and then I am going to first I give the floor to Dennis. Let me explain on one question that has been asked by several people as to why we did not have anybody speaking from the Islamic faith here. We actually had two presentations that were planned, and unfortunately, one of them, I am not quite sure what happened, Dennis can explain.

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But the other one, Modibo's absence is due to visa problems, and therefore we did not have a speaker on Islam. But I passed on the questions that are more or less about the structure of the session to Dennis, who organized this session.

**DENNIS ALTMAN:** Thank you, Purnima. My name is Dennis Altman [misspelled?]. I did not actually by myself organize this session. This session was organized by the Scientific Program Committee, and can I make a couple of things very clear. It was our view that at AIDS conferences, there had been many occasions where people have spoken as members of religions, and often have spoken in their capacity as religious leaders. This session was quite deliberately intended to raise critical questions. Nobody was invited to speak on this panel because of their religious beliefs or because of their role in any religious organization. I have to admit that until I heard Ashok speak, I did not know that Ashok would speak as a Hindu. Ashok was invited, as all the speakers were invited, because they have a considerable knowledge of the social implications of religion, which was something we felt strongly had not been sufficiently dealt with in the conferences. There are many other places in this conference where religious leaders have an opportunity to speak, but that was not the intent of this session.

On the specific problem, and it is I recognize, I am deeply sorry that we do not have an expert on Islam sitting on this platform. As Purnima said, right from the beginning we

actually did have somebody speaking. That person, about three or four weeks ago had to withdraw. He was replaced by a speaker who actually had a presentation all prepared. And I think last week, because of a combination of problems with visas and travel, he is somebody coming from Mali, he was not able to come to Mexico. And in two days, as I hope you all understand, it just was not possible for us to find a replacement.

So, I understand very strongly why people have asked the questions they have. Can I please ask for you to understand, the purpose of this session is to encourage debate, dialogue, and questioning of one of the most significant social and cultural phenomena in this epidemic, namely the role of organized religion. It was not set up for people to speak from a religious basis, rather it was set up for people to speak as observers of religion, much as we have other sessions where we observe other parts of the response to the epidemic.

**PURNIMA MANE:** Thank you, Dennis. I am going to take a set of questions for Ashok, and I would beg Ashok not to try and answer every single one of them, but look at them as a whole and respond. There was a question about within which framework UNAIDS specifically approached the Hindu religious leaders. Was it in the context of human rights or was a different kind of approach taken?

There was a question on in what ways did British colonialism affect the Hijra phenomenon in India, which I think

we may not be able to get to, but perhaps you might like to talk to Ashok after the session because we could be here forever.

The other one was about MSM and tell us more what you want the government to do for MSM and what are your main challenges. What opportunities do you think exist in the interreligious dialogue between all religions in India? And the fact that the religious leaders made very promising statements, but what is going to happen now? Is there any evidence that this will be implemented?

There is a rather personal question for you Ashok, that I think again, you may have to take up later, which is why you quit the life of a monk when you really had the wisdom which was provided by your superior. Could you not have gone back and found religious freedom. The barrier seems to be within you. So, I think maybe a personal conversation is a better idea than having it here.

Finally, how does a sin based view of HIV influence people's willingness to start treatment. There are, in fact, one or two people who have asked why some faith leaders actually encourage people to stop treatment because it does not seem to make any sense.

And finally, why, with religions like Hinduism, Islam, and Christianity, not recognizing homosexuality, have you managed to mobilize any progress of faith leaders in India? I think he did talk about this so I do not expect him to get into

the details of this question. Ashok, if you can take a few of these, we would appreciate it, because there are lots of questions still waiting.

**ASHOK ROW KAVI:** I think I need to first of all take up what Dennis said. I do not really think I am talking from the Hindu point of view. There is a famous saying of a religious leader called Vivican [misspelled?] and there was supposed to be a reformist monk, and he said the best Hindus are the best human beings, are people who grow out of their religions. It is good to be born in a religion, but it is not a good idea to die in the same religion. So it is very important to know that I think all of us outgrow, just like a coconut tree as it grows up it drops all these dead branches and then it grows tall and then you get the coconuts. So you see, similarly, human beings have to grow and mature and they need not be the same human beings who were born in a particular religion.

Some of the questions that have come up, very interesting, and I want to face them head on. One is gender equations within Hinduism. They are about as bad or as good in other religions. There were two women religious leaders at this meeting in Delhi, and they made a very strong point that women's issues are not being addressed. But I would like to tell you that on a general level, India has been one country that has been very liberal, for example, for abortion in India you do not need to ever tell the father's name. The mother has a right not to inform the father or the hospital where she is

having MTP, which means medical termination of pregnancy. She is having the abortion in her own right because she owns her body. And I think that is a very progressive view of the Indian Family Planning Program, and no Hindu religious leaders yet stood up to it.

So, I also want to say that there have been meetings of Christian and Muslim leaders in India and they have all been extremely progressive. However the concept of sin as defined in the Judaic texts and all, that has been difficult to get over. The church has always maintained that they hate the sin and not the sinner. So, we go by that, and I think all religions are behaving very well. Of course they are hiding a lot under their skirt. For example, Hinduism has always had this tradition of holy prostitution. That has been suppressed. There is also the business of adolescent sexuality which is not being addressed by religious leaders, who insist that sex should only be after marriage. That should is also being tackled by female religious leaders, very interestingly.

In many other ways, the homophobia that you see in India is not the same that you see in other countries. Qualitatively, it is different. The real issue in India or Hinduism is that you are taking charge of your own sexuality, and it does not belong to you. It belongs to the community. And that seems to be the main issue. The issue is not whether you are a homosexual, but that you are making a decision about

your sexuality. It is an interesting thing that one needs to debate.

There are a lot of other things I would like to say. Personally, if you want to meet me, I am available for some time. You could talk to me. I am afraid I cannot do justice to everything here, but I do understand that there are a lot of critiques of Hinduism, the caste system, the way it is created, the law caste, the way it is treated women. The way it is treated, for example, the institution of holy prostitution and I do not wish to ever run away from those issues. Those issues have to be faced head on. So please do not think that this was a cover up and an apologetic piece for the religion. Thank you very much.

**PURNIMA MANE, Ph.D.:** Thanks, Ashok. [Applause].

There are a whole range of questions, and again I cannot read them all out together, but if anybody on the panel would like to take them. They are questions really about what do we do about the practices and the preachings of different religious groups as they are interpreted in different parts of the world, and the reality that young people, the epidemic is particularly growing among young people. I see in the questions really, an almost desperate appeal, what do we do?

For example, you cannot really answer them, but I just would like to seek the reactions of the panelists. Does not refusal to teach condom use to young Catholics in the Caribbean in fact promote HIV infection and unwanted pregnancy? How can

religious institutions and leaders who have so much influence in the lives of young people take action on the realities of the lives of young people? How can we make prevention efforts in religion driven societies youth accessible and youth friendly, because of the rates of infection?

So, I am just going to turn to the panelists, and if any one of them would like to take up this challenge which we are all working on in a sense, I would appeal to them. And then there is one, I just am alerting you, there is one very interesting question on how can each of us, as workers either in the church or in any other religion change the old dogmas to work with on HIV, and particularly in the context of people with HIV? That is a question that has come up, two or three people have asked that.

Again, a very broad topic that perhaps we will not be able to do justice to, but I am just putting it out there as something that is on your minds as members of the audience. So can I turn to any of you who would like to take this? Young people and—

**GABRIELLA RODRIGUEZ, M.D.:** I think I will say something. That is a very interesting question, to focus on the new generation and prevention, because in fact, prevention means that we have to focus on young people. We are trying to change the culture. If we want the people to change their behavior to a real preventive activities, it is a big change of the culture. So young people should be the target, young

people is the biggest group in Latin America, but even if they do not, if you are thinking prevention.

So, that is for me the most important question that if this vision of taboo, because this is the original taboo of the primitive societies, is becoming in a regular religion that is really a barrier for particularly for the strong TV campaigns promoting condoms and every time, not only some days. It is very important. So, for the governments that is very important that point from my point of view, and for the governments, religion is not a point of the governments. Church, leaders of the church have the right to said what they mean as sinful or whatever, but not the politicians. So, the main is to reinforce secular state, separate religion and state, to separate [inaudible] and beliefs of the functionaries from their role as politicians.

So this is for me, the most important issue. Otherwise, what we are living now in Mexico really means the strong campaigns we have focus on adolescents in the '90s. So we do not have any money in the campaigns in the televisions in the last 10 years, and we really have problems now. We cannot advance in the last 10 years, we are even going back. I am going back with the young people and so on. Even we have bands, 30 years a lot, and in the '90s we have bands from 600 young people using condoms to more than 50. But now it is stable because of this recuperation of religion in the politics. This is my point, not the religion, but the

politicians that are taking religion values as base of the political, and the campaigns of HIV.

**PURNIMA MANE, Ph.D.:** Thank you, Gabriella. Yes, Richard?

**RICHARD EVES, Ph.D.:** Yeah. I think I will just add a few points in there.

**PURNIMA MANE, Ph.D.:** Richard, you will have to speak louder because we are competing with that room.

**RICHARD EVES, Ph.D.:** True, yes. Quite a competition from next door. I guess in the context of Papa Guinea, I think one of the main strategies for getting young people to use condoms is more of a face to face trading of dialogue with them. There has been too much reliance on social marketing and posters and advertising on the television, the radio. I think really you need to get among young people and talk about these issues. And I think once you have talked to them they will understand that some of the arguments that are put against condoms are not correct and that they are quite efficacious in preventing HIV.

I guess it is a difficult question, the whole question about working with the churches in a country that is predominantly a Christian country, you really have to work with them and it is a sort of baffling one. I do not think I have got any answers on that, but you are, I think, the whole, we really just need to engage in dialogue. And some churches are eventually coming around, and a lot of people, even ones in the

more born again Pentecostal churches actually preach ethics based on the New Testament. So there are sort of basis on which one can created a dialogue about looking after other people in there. [Applause].

**PUERNIMA MANE, Ph.D.:** I want to take the last lot of questions and then if we have time, I will definitely open up the floor for the two people who are waiting. I hope there are not anymore, because we will not get to them. There is one whole set of questions related to PEPFAR, and I do not know if the panelists have experience with that. The questions are on how do you deal with money when it comes to a specific policy that encourages abstinence only programs? What effects do PEPFAR's program have had, particularly in sub-Saharan Africa where the religious right has a strong influence and these programs have been accepted wholesale? I am just reading out the question, not making my comments, so let me just turn to the panel. If anybody would like to comment on the influence of any funding, these are specific to PEPFAR, but any funding that has a particular slant on any one given approach?

**RICHARD EVES, Ph.D.:** Well, in the Papa New Guinea context, as far as I know, there has only been two organizations that have received PEPFAR funding. One of those is Stop AIDS which is an Anglican organization, and it is actually quite progressive on the whole issue of condom use. I guess for me, the issue is the sort of moral arguments that are put forward with PEPFAR are actually much more broader based in

Papa New Guinea than perhaps they are in other contexts. You are even confronted with people within the National AIDS Council speaking out against the use of condoms, so it is quite a pervasive attitude there.

**DENNIS ALTMAN:** Could I just make a general comment, which is I think there are a number of sessions, I think, at the conference, where there will be specific discussion of PEPFAR. I guess the general comment I want to make is that there is a bit of a tendency now to blame the United States for everything that goes wrong in the world of HIV prevention. The reality is that in many countries, the greatest obstacles are not because of external funders, but because of a combination—and I think Ashok was pointing to this—of internal, political, and religious pressures.

And I think that what we need to do, and this really goes back to why I am sitting on this platform today, what I really urge all of us to do is to overcome our own particular histories, biases, prejudices, and think what will be most effective in helping stop the transmission of HIV, and what is preventing us doing that is most effective? And if we can all agree on asking that question, then maybe we can have a sensible dialogue. But I just want to make clear, I do not think the answer consists in either attacking the Catholic church or the United States, or on the other hand, attacking secularists or international gay and lesbian movements. We have to get beyond that sort of discussion to one where we

actually focus on how do we deal with the realities of human sexuality, and how do we find the best ways of ensuring that people have sex without risking the transmission of something that will kill them.

**ASHOK ROW KAVI:** I would just like to mention that there is a cyber list called AIDS Community in India, where there is a huge argument going on about sex education and adolescent sexuality. And it is amazing what sort of dialogue is happening, because the governments wants to push through sex education, but state governments are not allowing it because each state in India has its own. So we cannot essentially blame PEPFAR. I mean Americans are far from my mind. The point is we have enough issues at home, and they are not essentially religious. There is a great deal of sociology involved. There is a great deal of the fact that there are massive changes happening in the social structure, transition, migration, and the emergence of adolescent sexuality as something that is seen in the media through. I think it is much more complex than religion being the main obstacle to condom use and adolescent sexuality and sex education.

**PURNIMA MANE, Ph.D.:** Okay. What we are going to do is because as panel co-chairs, we have been asked also to make a small statement at the end, and we are going to try and reflect on some of these issues, but I am going to give the floor to the three people who are waiting, and if you can just ask your

questions all three, and then we will see how we can take it in the time left. Thank you for your patience.

**SIFRI MARTINEZ:** My name is Sifri Martinez [misspelled?] from Western Australia. I am a person living with HIV and I just want to make these statements. I demand that faith-based organizations treat HIV as a health challenge and not a moral challenge. First and foremost. [Applause].

Secondly, I demand that the pope declare condoms and promote condoms for the health and the population of everyone. I also demand that the Pope accept and love people with HIV and finally say that this never was, and never will be, a punishment from God.

And lastly, I also want and demand that the pope apologize to gay men for promoting homophobia and for not recognizing the divine love between men. [Applause].

**MALE SPEAKER:** Okay.

**PURNIMA MANE, Ph.D.:** Thank you.

**MALE SPEAKER:** There is a margin of time here and we should all be respectful of that, and that is important for facilitation of these type of scenarios. One of the major issues that was left out of this is that the growing Evangelical movement, and it is a growing worldwide movement, which as a person with AIDS, I am a member of, has made major shifts. And those shifts are now starting to permeate through all of our efforts, and it would be very important for the panel to address how those shifts are becoming more manifest.

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Organizations like Saddleback Ministries, like Crossroads Ministries, have now started to lead that, and I do not hear that. I do hear a lot of the spectacular condemnation. I have thrown more than my share of bricks, literally, at Jerry Falwell, that is not the issue here.

The issue now is how do we start looking at the faith-based communities as being an addition to this fight? As someone living with AIDS, I demand when we start talking about religion that those talking about AIDS and about my life talk about that in an effort to bring about more alliances to save me.

And there is also a member of parliament here who has been waiting very patiently.

**FEMALE SPEAKER:** Thank you. Hi. I am a member of parliament from Pakistan, and because Islam was unfortunately not covered on the panel, I do have a comment to make from our Pakistan experience. We have a parliamentary forum on HIV/AIDS. And as I believe the gentleman's name is Richard, at the end of the panel, he said why are we not looking at how to use different religions or whatever as tools for prevention. And, coming from a country that unfortunately gets a bad rep internationally, I want people over here to know that that is exactly what we did. We are now using religion for prevention because there is so many things in our religion that are open to discussing prevention, that are open to helping people who are suffering, helping people feel included in society, and

these are the avenues that members of parliament themselves have opted to advocate on.

And furthermore, also I think it seems to be mentioned over here in 2005, we did have an international conference on religion and family planning of which HIV/AIDS was a part. And religious leaders from 23 Muslim countries accepted that family planning methods were completely allowable in Islam and encouraged their governments to adopt programs which promoted family planning means and mechanisms, and of course HIV/AIDS prevention was a large part of that. If anyone here has any questions I am happy to answer, and I really hope next time you have someone representing Islam. I understand it was a logistical issue, but it is a large religion and people have a lot of questions about it. Thank you. [Applause].

**PURNIMA MANE, Ph.D.:** Gabriella wants to make a point, and then I would like to wrap up this session, because we are at a point where I think we are coming to some good conclusions. Of course the discussion is not over, it has to continue.

**GABRIELLE RODRIGUEZ, M.D.:** I agree absolutely with that girl that just did that comment. So, what I want to emphasize, the problem in HIV prevention is not religion. It is the use of politicians to manipulate based on religion. That is most important for me to understand. Religion have an obscure and have a light face and have a lot of things. But the use of religion to manipulate the people, that is very,

very strong and is coming stronger and stronger. So that is a very important point. Religion should be a private issue, an internal war of everyone that states, modern states, have to respect and make politicians for everybody never based on religion because based on religion is the ways to offend the other rights of citizens. That is it.

**PURNIMA MANE, Ph.D.:** Thank you, Gabriella. I think it was very clear in this session, and thank you, Dennis, for also emphasizing what the purpose of the session was. That to provide actually a space, and not just this space, but many other spaces as Dennis referred to where you could continue this kind of dialogue.

Yes, I think we need to recognize that religion is a reality and sexuality is a reality, and these are realities that we live with. They change, they evolve, they are different in different cultures, and we have to navigate the path of how some of these create barriers in our struggle to deal with the epidemic. I think that is where we are really focused on a way forward.

Yes, there are times when religious doctrine and spiritual teachings can create barriers. Yes, there are times when positions of some groups tend to create barriers for the main messages that you have in HIV. There are times when groups raise false hopes about preventing HIV infection and curing HIV, but we forget that we have come a long way, and that was emphasized by one of the persons who asked the

questions. Groups have moved a long way from where they were when this epidemic began. Maybe not enough, and I completely understand the impatience of the other person who asked the question about we need to go much further. I think we all recognize that, but we do need to acknowledge that faith based groups have moved ahead, and we need to acknowledge their contribution. We need to also help and disseminate the work they are doing.

For example, the Ecumenical Advocacy Alliance has produced a publication exploring solutions. Nobody talks about that, how to work in the church. They have a document, they talk about faith in action that provides space to discuss about how to navigate within the church, and many other religions are doing that.

I just want to also mention, we have talked about Pakistan, and thank you so much for referring to that example, but as UNFPA [misspelled?] we work with in Liberia with Islamic youth groups. We work in Iran. We work in almost all the Islamic countries as well to support the hands of those who want to create spaces so that messages on fighting this epidemic in the most evidence informed manner can be spread among the people who we want to reach the most.

So, I think the main message for us is different strategies are needed for effective prevention work as well as treatment, care, and impact. We need to know what our resources are within our own context. We need to know who our

allies are, we need to know who we have to work with and sometimes to convince to change their ways in a sense. I do not think any single actor or any single institution can make a difference in HIV alone, and so let us come to a point when we acknowledge that there are times when we will differ, but there is a lot of areas of commonality and there is a lot of movement in this area.

Again, I definitely defer to the comment made by the gentleman who spoke from the front, to say it is just not enough, and people living with HIV are making much stronger demands in order to deal with the epidemic and in order to create an environment of acceptance, love, and compassion, and caring. Ruben, I do not know if you want to say anything?

**RUBEN DEL PRADO:** I think you said it all. Thank you very much for being here. The question has been asked, there are so many answers to this question, but we can all play our part. Thank you very much. [Applause].

**PURNIMA MANE, Ph.D.:** Thank you to our panelists, I forgot to say that. [Applause].

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