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## **A time for dogma, a time for the Bible, a time for condoms: Building a Catholic theology of prevention in the face of public health policies at Casa Fonte Colombo in Porto Alegre, Brazil**

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### **Abstract**

The Casa Fonte Colombo (CFC) is a religious organisation that assists people living with HIV/AIDS (PLWHA). The funding for its activities comes from public sources such as the Brazilian National STD/AIDS Program as well as the Catholic Church. Capuchin (Franciscan) priests run the CFC, and it has an extensive group of volunteers made up mostly of women. Between 2006 and 2009, we observed daily life at the Casa Fonte Colombo and interviewed priests, volunteers, employees, service providers, and clients. We also attended meetings, group sessions, and celebrations. Everyday actions carried out by the CFC reveal the efforts to resolve the tension between the position of the Catholic Church and the Brazilian state in the politics of AIDS. These efforts affirm that the Casa Fonte Colombo presents itself as a space where the position of the Catholic Church, as much as the politics of public health, are re-worked, giving way to a progressive act of Catholic prevention and assistance for AIDS, that we call “theology of prevention.”

### **Keywords**

AIDS; Brazilian Catholic Church; public health policies; faith-based organisations; theology of prevention

### **Introduction**

#### **Thinking about prevention of AIDS in theological terms**

The sometimes-tumultuous relationship between the Catholic Church and the Brazilian National STD/AIDS Program<sup>1</sup> is well known amongst Brazilians. There has been an abundance of media coverage over the years. These include public declarations, official statements, opinion pieces, television debates, and interviews detailing papal pronouncements. Officially, the rhetoric used by the Church justifies their opposition based on insufficient effectiveness (“condoms do not block the virus”). Other times they use

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<sup>1</sup>The Brazilian National STD/AIDS Program has had a number of different names over the course of its history, representing different positions in the institutional and organisational structure of the Ministry of Health. For the sake of simplicity, we will refer to it throughout as the Brazilian national STD/AIDS Program. For more information about the Program, including its current designation, see the Departamento de DST, AIDS e Hepatites Virais website at [www.aids.gov.br](http://www.aids.gov.br).

arguments that question the moral order (“using condoms goes against the moral teachings of the church”). Periodically there is a mixture of both motives as evident in the same statement:

In addition to condoms not being 100% effective, condoning their use would invite behaviour that is incompatible with human dignity...The use of condoms ends up stimulating, even if it we don't intend it to, unrestrained sexual practices...Condoms offer a false sense of security and they don't preserve the fundamental” (Silberstein 2008: p. 57).

Critiques of the Brazilian Catholic Church's position in relation to the use of condoms as a factor in the prevention of HIV often invoke the phrase, “The Catholic Church is out of date.” This is a common belief so often repeated in one of its numerous variants including: the Church says one thing, but followers do another; times change but the Church does not; and the Church equates condom use with promiscuous sex. It is worth pointing out that sometimes the discussion is more concentrated on the sensitive subjects associated with AIDS, such as male homosexuality, prostitution, and drug use. On the other hand, the Brazilian government can take pride in the Brazilian National STD/AIDS Program. Public health responses are highly regarded in international forums, particularly in the realm of treatment access. The participation of civil society, especially NGOs, from the very beginning of the Brazilian response to AIDS (Galvão 2000), established a collective public health. The ideologically progressive involvement of human rights-based framings of the right to HIV prevention were developed in the AIDS movement (Parker 2000, Parker and Aggleton 2003).

The Brazilian National STD/AIDS Program and the various state and municipal AIDS programmes have specialised in promoting condom use as synonymous with HIV prevention, which is evident in the AIDS education and prevention materials of the government. The Brazilian National STD/AIDS Program and the public representatives of the Brazilian Catholic church have had a complex relationship for decades about condom use.

We also know the Catholic Church is by no means monolithic, and there is some room for negotiation at the grassroots (Murray et al. 2011). There is a growing collaboration among the government and religious groups partly as a result of the accomplishments of the Brazilian National STD/AIDS Program (Seffner and Bermúdez 2006), which provides important capital in the negotiations with religious groups (Berkman et al. 2005, Garcia and Parker 2011, Seffner et al. 2009, Muñoz-Laboy et al. 2011, Murray et al. 2011).

In writing about the relationship between the Brazilian Catholic Church and the Brazilian government in seeking to respond to AIDS, the Catholic theologian, Father José Antonio Trasferetti (2005) presents the idea of a “theology of prevention,” but does not go into a detailed account of what this concept means in terms of this interception between the principles and pragmatic actions of the Church and Brazilian state. The principles and ideologies of the Church have been used to advocate for a *life of plenty* and AIDS care, especially for children and women, showing a great deal of empathy for people living with HIV and AIDS (PLWHA). On this level the convergence of the Church and the Brazilian state has had some difficulties vis-à-vis condom use, as aforementioned. There is also a pragmatic element of this “theology of prevention.” Although evangelising is part of the prevention response of the Church, the service orientation of the effort takes predominance in many cases. That is, the activities are not saturated by or preoccupied with the transmission of Church teachings in many cases. The active incorporation of public health principles into prevention approach has transformed the relationship among churches and

health providers. In a sense, the state agencies as seen as partners and not adversaries in the case of the “theology of prevention.”

This paper has two objectives. The first is to present the findings from a historical ethnography that describes the relationship between the Brazilian state and the Catholic Church in terms of AIDS prevention. To assess the Catholic position, we used as a case study the Casa Fonte Colombo, based in Porto Alegre, and the STD/AIDS Pastoral, a Catholic national organisation whose headquarters are also located in the same city. The second objective is to unpack the concept of “a theology of prevention,” which will help us to better understand the nature of the processes at work in the interface and collaboration between the State and the Catholic Church for HIV prevention. This article highlights the actions of the Casa Fonte Colombo and the key figures at the STD/AIDS Pastoral that have become characteristic of and played a fundamental role in the development of a “theology of prevention” (Trasferetti 2005). Studying the production of a theology of prevention, through the analysis of these two Catholic institutions presents a fruitful strategy to analyse this complex cooperation, which demonstrates positive examples and can garner momentum for future initiatives. The paths that the Brazilian Catholic Church followed in responding to HIV and AIDS are important to examine, especially considering the fact that it participates in various continental networks together with the Brazilian STD/AIDS Pastoral, and it often has a coordinating role that can exert considerable influence on other Catholic religious institutions throughout Latin America.

## Methods and context

### The research project in Porto Alegre

This study is part of a long-term multisite research project conducted by the Brazilian Interdisciplinary AIDS Association (ABIA) in partnership with the Center for Gender, Sexuality, and Health at the Mailman School of Public Health at Columbia University in New York. After five years of conducting interviews and ethnography within religious environments in Porto Alegre, we identified the role of the Catholic response to AIDS in Rio Grande do Sul as a principal focus for further investigation, concentrating on two institutions, the Casa Fonte Colombo and the STD/AIDS Pastoral, whose national secretariat is lodged in the former organisation and run by the Capuchin Friars (Seffner et al. 2009). We used a combination of methodologies, which included archival research, media monitoring, participant observation, key informant and life history interviews, and case studies, with the objective of documenting how much importance is attributed to the different religions in relation to the AIDS issue. The Casa Fonte Colombo is seen as emblematic of the negotiations between the State and the Church in regards to AIDS in Brazil.

Between 2006 and 2009, we observed daily life in the Casa Fonte Colombo, and conversed and interviewed 18 individuals, who included Capuchin Friars, volunteers, service providers and clients. We also attended meetings, group sessions, and moments of celebration.<sup>2</sup> The extended ethnographic observation at the Casa Fonte Colombo, as well as the study and discussion with researchers from other sites of the larger comparative research project (Recife, São Paulo, Rio de Janeiro, and Brasília) allowed for a complex analysis of many subjects in relation to AIDS and various religious organisations. Among these subjects are the questions of: a) the relationship between the state and religious institutions in the practice of public politics; b) cure (in the specific case of Casa Fonte Colombo, the pretence of a “cure” for AIDS does not make up part of its mission, although it does exist in

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<sup>2</sup>The study was approved by the National Ethics Council of Brazil (CONEP 12352), and it uses clear terms of consent in all information-gathering processes.

innumerable other situations that involve religious action in the universe of AIDS); c) the boundaries between treatment and evangelising; and d) the very definition of what disease is and how a person gets sick. In this text, we trace the history of Casa Fonte Colombo and its connections with the creation of the STD/AIDS Pastoral and analyse the Casa Fonte Colombo as a space for negotiating meanings about HIV prevention, and articulating the Catholic Church's doctrine and the existing Brazilian public health guidelines on HIV prevention, all of which produce a new discourse, especially, in the area of prevention.

We assessed the manner in which the responses of the Casa Fonte Colombo were integrated with the local communities, the broader civil society, specific populations (such as youth), and state agencies (for example AIDS programmes at the municipal, state, and federal levels) to impact the broader response to AIDS.

## Results

### Casa Fonte Colombo: History and operations

The interaction between the directors of the Brazilian AIDS Program and the principle doctrines of the Catholic Church that occurs in the Casa Fonte Colombo and the STD/AIDS Pastoral does not represent the standard relationship between the State and the Church in Brazil. From the stories of the organisers of the Casa Fonte Colombo we gathered that the decision to work with PLWHA was not simple, much less a mere chance, but rather “a long process of discussion and maturation” between the Capuchins and the Catholic Church. The founders retell the trajectory that led to the founding of the Casa that was inspired by Saint Francis of Assisi, who dedicated his life to caring for the sick. This process began in the end of the decade of the 1990s, when the epidemic had already been present in the country for more than 10 years. The first diagnosed cases appeared in 1983, the same year that the State Health Secretariats in São Paulo and Rio de Janeiro began providing the initial government response to the epidemic. The response from civil society began to surge less than two years later with the creation of organisations such as GAPA-SP (the Support Group for AIDS Prevention-São Paulo) and ABIA (the Brazilian Interdisciplinary AIDS Association), the first two nongovernmental AIDS organisations in Brazil (Galvão 2000).

The Casa Fonte Colombo<sup>3</sup> is a service organisation for people living with HIV/AIDS (PLWHA) founded by Capuchin Friars in Rio Grande do Sul, who directly coordinate the diverse services offered to the clients. The Casa Fonte Colombo is detached from other AIDS NGOs in the city of Porto Alegre, yet it is a national reference in the field of civil society. Importantly, the national secretariat of the STD/AIDS Pastoral of the Catholic Church is also located in Porto Alegre, which confers a rather significant dimension of influence connecting it to the National Conference of the Bishops of Brazil (CNBB, the National Conference of Bishops of Brazil).

The Capuchin Friars are part of the Franciscan movement, seeking to personify the charisma of Saint Francis of Assisi by opting for a simple life and taking care of the sick. Saint Francis of Assisi inspired many religious movements, and ways of life, which are not all recognised officially by the Vatican. The Capuchin Reform was recognised by the papacy in 1619 acknowledging the Friars who wanted to live the Holy Gospel of San Francisco: “to live in poverty, obedience, and chastity.”<sup>4</sup> Life outside of the monasteries is permitted for

<sup>3</sup>The identification of the Casa Fonte Colombo results from an agreement between the researcher and the management of the institution. The final version of this text was read by the Friars who gave their informed consent in their personal names and in the name of the institution and they approved the description of their institution as accurate. The informants are not identified in the text to preserve their anonymity. More information about the Casa Fonte Colombo can be found at <http://www.capuchinhosrs.org.br/fontecolombo>

<sup>4</sup><http://www.capuchinhosrs.org.br/>—site of the Order of Capuchin Friars of Rio Grande do Sul.

Friars, and they have organised fraternities “dividing their time between missions, work, and prayer.” The Friars arrived in Brazil in conjunction with Italian colonisation, and their presence in Rio Grande do Sul follows the map of this colonisation, having later expanded to the coastal zones of the state. In this context the Casa Fonte Colombo is considered a fraternity, and the principal activity of the Friars is to care for the sick outside of hospitals. To be a fraternity means, according to the observations we made in our fieldwork, to have a relationship of humility to other companions that they refer to as a brotherhood.

In retelling the history of this work, the Friars stress the growing needs related to sickness due to HIV, which was already present within the Catholic Church, and evidenced through concrete cases of HIV-positive priests. Perceiving this need, the first task was to set up a half-way home that offered refuge and boarding to PLWHA, caring for those who had to travel to the capital of the Rio Grande do Sul to undergo medical tests and receive treatment. However, the rollout of medical treatments for HIV in the mid-1990s made it possible for most PLWHA to have access to care in their own regions, and the necessity to travel to the capital diminished. Improved availability of antiretroviral medications promoted an important alteration in the mortality rate so that people were able to live with HIV, long term. As a result the Friars modified their project, and in 1999 founded the Casa Fonte Colombo calling it the *Centro de Promoção da Pessoa Soropositiva* (Centre for Promotion of Seropositive People) (see Seffner et al. 2009).

The Casa is located close to a region of commercial sex work in the city, between a commercial zone and an industrial zone. The building when seen from outside does not have any identification, and could easily pass as a business building. Upon entering the door, visitors encounter an organised space, much like a clinic. After taking a second glance, one would perceive the Catholic symbols, crucifixes/crosses and paintings with religious images, most often of Saint Francis, that are similar to the ones found in many public hospitals in Brazil. The activities offered by the Casa are welcoming and provide assistance for PLWHA, including medical and psychological treatment, spiritual guidance from the Friars, massage therapy, Reiki healing energy sessions, food supplements, clothing donation, professional offices, bathrooms, informative lectures, and referrals to obtain other free services. In general people arrive wanting to know more about the disease and the possibilities of living with HIV.

It is noticeable that the Casa attends to very poor individuals, confirming that the Casa Fonte Colombo often deals with the demand of the most vulnerable populations. The Casa serves as the national secretariat for the STD/AIDS Pastoral of the Catholic Church, the most important religious branch in Brazil that provides assistance to respond to the epidemic. Another factor that distinguishes the Casa Fonte Colombo from other AIDS NGOs is its vocation for international cooperation. The Casa participates in and coordinates diverse international networks (in Latin American and also with institutions from other parts of the developing world) that bring together religious initiatives for AIDS. The Casa Fonte Colombo was also the institution chosen by the Brazilian National STD/AIDS Program to facilitate the technical cooperation with East Timor, which is related to, among other motives, the presence of Capuchin Friars in that country.

Each client can stay one afternoon in the Casa because of space limitations. On this afternoon the person chooses from the activities that are made available by the volunteers and the Friars in which they would like to participate.<sup>5</sup> The Friars coordinate daily life at the

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<sup>5</sup>The group of volunteers at the Casa Fonte Colombo is mostly made up of women, who stay for years as volunteers. Some of them have worked there regularly since the House opened. This characteristic of stability in the ensemble of volunteers is a difference of the Casa Fonte Colombo in relation to other AIDS NGOs of Porto Alegre, where the circulation/turnover of volunteers is much greater.

House creating a schedule that is delineated by each activity: clothes are distributed at the beginning of the day followed by visits and the daily workshop and at 4:30 everyone gathers in the “space of conviviality” to pray and go to the dining hall together. The volunteer Friars, usually students from the Franciscan School of Theology, provide services such as Reiki or massage therapy, while others give haircuts or theatrical workshops. The volunteers of the Casa have a variety of specialisations that include doctors, nurses, hairdressers, social workers, psychologists, and professors—every job is important.

This array of services permits the Friars to affirm that the Casa Fonte Colombo has the legitimacy of “those that act” in the world of AIDS. The Casa Fonte Colombo participates in numerous events the realm of AIDS care, as well as in the form of debates, congresses, journeys, public hearings, media programmes, working groups with the directors of AIDS programmes, among other forums. The Friars indicated that the relationship between the Casa Fonte Colombo and other AIDS NGOs was initially marked by distrust. Representatives from the Catholic Church, sometimes an adversary of AIDS NGOs, sat down next to those from Casa Fonte Colombo at forums, as partners in arms, which for many was not licit or even acceptable. The perseverance of the Friars in the execution of service work for AIDS, and their continued participation in events began to reduce resistance. According to the evaluation offered by the Friars, there is a difference in language, but not in intention, among the religious discourse and the discourse of other AIDS NGOs. The problem did not seem to be related so much to the form of communication. It had more to do with the Friars being representatives in these “spaces of AIDS” as well as in the Catholic Church.

The Casa Fonte Colombo today finds itself established, as much from a material point of view as from a relational standpoint, with other AIDS NGOs in the city of Porto Alegre and in Brazil. They can claim the same solidarity with governmental agencies commissioned in the public politics of AIDS, especially the Brazilian National STD/AIDS Program and the Centre for International Technical Cooperation of the Ministry of Health, the bureaucratic body that coordinates the cooperation of Brazil with other countries in the area of AIDS. As the secretariat of the national STD/AIDS Pastoral, the Casa Fonte Colombo coordinates AIDS-related activities throughout the country, in parishes, communities, hospitals, other pastorals, precincts, schools and other environments within the Catholic Church. It is interesting also to point out that the Casa Fonte Colombo is effectively a house, where a community of friars resides in the back section on the second floor (the front is occupied by the STD/AIDS Pastoral and dedicated to providing services to clients). No less than five friars reside and work, study, cook their meals, wash their clothes, occupy themselves with other domestic chores, organise celebrations of faith, and sometimes also receive brothers from other communities as guests.

The category that best defines the Casa Fonte Colombo is a welcoming refuge of acceptance. While living at the house or during repeated visits, the client is always enveloped in an atmosphere of acceptance from employees, friars, and other clients in modes that are both individual (one-on-one consultations with a psychologist, nurse, physician, etc.) and collective (at meals, workshops, or conversations in the courtyard). Because of this, the clients attend the institution regularly, forming new groups of friendship and cohabitation that help them face the situation of living with AIDS. The friars also mobilise the clients to participate in events promoted by the AIDS social movement. For instance, World AIDS day on December 1, prayer vigils, protests in favour of the Sistema Único de Saúde (the national public healthcare system), and meetings such as the Brazilian AIDS Prevention Congress and the National AIDS NGO meeting. In this way, the Casa Fonte Colombo also contributes to shaping some of the upcoming leaders in the fight against AIDS, similar to the way other NGOs do.

## The negotiation of meanings and the construction of agreements between public health policy and Catholic Church doctrine: A theology of prevention

The relationship between the Catholic Church and the directors of the Brazilian AIDS public health programme have been characterised, in the case of the Casa Fonte Colombo and the STD/AIDS Pastoral, by an intense negotiation of meanings. This negotiation of meanings and the search for consensus takes place between two doctrines that advocate for PLWHA very differently, but which can nonetheless seek to collaborate. This is the process that we describe as the production of a theology of prevention.

Even though the activities of the Casa Fonte Colombo are more closely linked to assisting PLWHA, the observation and accompaniment of their activities that we did in this period from 2006 to 2009 suggests that it is possible to think of the institution as a producer of a new culture of AIDS, in particular of the prevention of AIDS. The actions and writings from the Casa Fonte Colombo produced a multiplicity of meanings about HIV and AIDS, characterised by a pro-positive attitude. The institution addresses issues such as age of sexual initiation, interruption of pregnancy, commercial sex work, conjugal relations between men and women, and the expression of sexual orientation without discrimination. In the Casa Fonte Colombo, using the terminology “the client” or the general expression PLWHA, helps to produce a new theology of prevention through situations that encourage reflection. The dialogue between the Friars or the volunteers and the clients is not saturated with the “transmission of lessons of the Catholic Church,” although this dimension may be present at times and in particular aspects. The dialogue with the clients seems to serve more to reflect on issues that revolve around AIDS and that introduce new elements within Catholic thought—hence creating knowledge and affirmations systematised by the Friars in lectures and interviews that expose prevention theology.

The construction of a space, within the structure of the Catholic Church, where AIDS can be a principle focus that is treated with care, seems to be a common desire of both the Church itself and the Brazilian National STD/AIDS Program. After many years of public disagreements between these two agents, a tension that has been well covered by the press, we argue here in favour of the idea that public health officials as much as ecclesiastic leaders made efforts to concretize this space of understanding and action in relation to AIDS, where the observations of the directors of public policy could coexist with respect for the tradition of Catholic doctrine (see also, Murray et al. 2011). In this way, the Casa Fonte Colombo, which was already active in responding to the epidemic for years, was seen as a political partner that was well suited for the health authorities of the Brazilian National STD/AIDS Program as much as it was for the hierarchy of the Catholic Church. We continue to briefly narrate the principle points of this trajectory that allow us to perceive the role of growing importance that the Casa Fonte Colombo assumes, and in particular the organisation of the Capuchin Friars in the interface between the Brazilian AIDS program (at the national and local levels) and the structure of the Catholic Church.

In a quick summary of the history, the STD/AIDS Pastoral initiated conversations in the second half of 1998 between the Brazilian National STD/AIDS Program of the Ministry of Health and the leadership of the National Conference of the Bishops of Brazil (CNBB). After that, experts from the Brazilian STD/AIDS Program collaborated with the Catholic leaders involved in the fight against AIDS to create a rather proactive role that stimulated the creation of this work and dialogue, initially a commission and later as a full Pastoral. On the part of the AIDS Program, we see the financing of trips and meetings of participants in this initial phase. According to information available on the STD/AIDS Pastoral website:

[...] the Commission organized a meeting for a Solidarity Articulation Workshop, that took place in Brasilia August 1–3, 1999. It was this same commission that

organized the first seminar “AIDS and Challenges for the Church in Brazil”, June 12–15, 2000, in Itaiçá that brought together the Minister of Health José Serra, the Coordinator of national STD/AIDS policy, the Adjunct Coordinator, Raldo Bonifácio Costa Filho, Paulo Teixeira, as well as the president of the Pontifical Council of Health and a representative of the Pope – Javier Barragán, the archbishop emeritus of São Paulo – Cardinal Paulo Evaristo Arns, the representative of CNBB – Dom Eugène Rixen, along with religious figures and leaders of the AIDS movement from all of Brazil, directly or indirectly linked to the Church. <http://www.pastoralids.org.br/index1.php> (accessed on 24 June 2008)

The old commission for STD/AIDS of the Pastoral of Health transformed into the Pastoral of STD/AIDS, and in June of 2000 it set up a nationwide structure with regulations, statutes, and rules of procedures and a secretariat with its own coordination and headquarters. Similar to other pastorals, the STD/AIDS Pastoral began creating regional branches following the administrative regions the Catholic Church uses in Brazil, and establishing a presence in dioceses, parishes, and communities. They offered training courses to qualified agents of the Pastoral organized into coordination teams to go out and take action. The installation in dioceses and parishes is always done in consultation and coordination with the bishop or priest. The national structure of the STD/AIDS Pastoral was then entrusted to the Capuchin Friars at the Casa Fonte Colombo, which were responsible for the National Secretariat of the STD/AIDS Pastoral. This secretariat is the executive head of the Pastoral and the national secretariat is one of the Friars from the Casa Fonte Colombo.

Official documents of the STD/AIDS Pastoral recognise that members of the Catholic Church have been involved in the response to the AIDS epidemic since the middle of the 1980s, but that continuity of work with HIV and AIDS required closer levels of cooperation between the Catholic Church and the Ministry of Health. In this way, the STD/AIDS Pastoral positioned itself as a partner of the State in the fight against the epidemic. Following the model of other pastorals in the Catholic Church, the STD/AIDS Pastoral defined its mission in accordance with the Church, evangelising men and women. One goal was to work with people with HIV, as well as prevention and advocacy work among Christians. At a second level, they defined themselves as service providers, and made reference to this commitment in the expression:

... service for the prevention of HIV and assistance to those who are seropositives: the church assumes this service, and without prejudice, welcomes, harbours, and defends the rights of those that are infected with AIDS. We will also do prevention work, through the awareness of evangelical values, presenting mercy and promoting a better life (CNBB 2003: 22).

Emblematic of theology of prevention, the symbol chosen as the official logo of the STD/AIDS Pastoral is composed of a cross and the traditional red ribbon from the fight against AIDS. According to the official documents:

The logo dynamically unites two symbols of solidarity: the cross and the ribbon. The cross represents the solidarity of God with humanity and through it life triumphs over death. The red ribbon is the symbol of the international fight against AIDS. United, these symbols, intend to express the commitment of the church to PLWHA and those that also work to prevent new infections (STD/AIDS Pastoral, 2002)

Another definition that shows up frequently in the official materials we consulted affirms that the work of the STD/AIDS Pastoral can be defined in the following way:

Christians who are capable and committed to the work of prevention and assistance, a Church that is committed to the prevalence of life, according to the



teaching of Jesus ‘I came so that everyone could have life’ (Seffner et al. 2008: p. 166).

## Discussion

Arranging converging interests between public health and the Catholic Church involved finding a common partner for the dialogue about AIDS, while avoiding clashes that create greater friction between the two institutions (Murray et al. 2011). We show that the Casa Fonte Colombo played an important role in the creation of this space of dialogue between the public policy related to AIDS and the doctrine of the Catholic Church. We can conjecture that without the existence of the Capuchin Friars of the Casa Fonte Colombo and their experience, the creation of the STD/AIDS Pastoral would have encountered many difficulties.

The STD/AIDS Pastoral accomplished, in the wake of what was already done by the Casa Fonte Colombo, the work of creating spaces within the Catholic Church that were more sensitive and progressive regarding AIDS, as well as addressing other subjects including homosexuality, transgender persons, the age of sexual initiation, drug use, a variety of types of conjugal relations between men and women, different family living arrangements, and particularly the use of condoms as an effective mode to prevent HIV infection. The elaboration of a prevention theology designates a perceptible difference between “offering” condoms to the clients of Casa Fonte Colombo and making them “available” and integrating information about how to prevent HIV and other recommendations where principles and values of Catholicism also enter into play.

Prevention is seen as action that seeks to develop (or revive) in the individual a dimension of humanity and of care, and in this way the use of condoms does not hold the same space that it occupies in the educational materials of the governmental AIDS programmes. But condoms are not missing all together, in so much as they are made available. The Catholic Church does not permit the centrality of condoms, in contrast to campaigns run by public health institutions and AIDS NGOs in Brazil. Instead condoms are always seen in association with other strategies and possibilities. They are not condemned, but they also are not positioned as the only option for prevention. Condoms exist alongside other discourses about prevention. Over several years of observation, upon arriving at the Casa Fonte Colombo, we encountered a bowl full of condoms, many different brands from all different countries, in a central location in the lounge. This functioned a little bit as decoration, but, more importantly, it was a point of availability of condoms for those who wanted them.

This manner of conceptualising the condom, which is not the “official approach” of the Church, is useful in serving populations that commonly attend the Casa Fonte Colombo (such as through events that it promoted) for transgender people, young gay men, commercial sex workers, and drug users. At the meetings that we attended, there were agents of the of the STD/AIDS Pastoral who were gay but who had found a way to work linked to the Catholic Church, while still manifesting their sexual orientation. In this way, many Catholics view the STD/AIDS Pastoral empathetically by having a more progressive stance, and they perceive the work of the Capuchin Friars as planting the seeds of change. In an articulate and intelligent manner, the STD/AIDS Pastoral has accomplished a growth within the structure of the Catholic Church, utilising two well-defined strategies. The first of these is to approach priests from the most progressive parishes and offer to begin an AIDS programme in their region. The second is to try and contact other Pastorals of the CNBB, such as the Pastoral for the Incarcerated, the Afro-Brazilian Pastoral, the Pastoral for Immigrants, the Pastoral of Land, the University Pastoral, the Pastoral for the Homeless, etc. In this second case, the strategy to establish AIDS as an intersectional topic in the work of

other organised pastorals greatly amplifies the radius of action of the STD/AIDS Pastoral and at the same time allows them to establish contact with sympathisers of Liberation Theology or of a more progressive Catholicism.

Another source of growth for the STD/AIDS Pastoral, also modelled after the experience from the Casa Fonte Colombo, stems from ecumenical dialogues with other religious denominations. It is worth pointing out that, since their beginning, they have hosted some volunteers that are Lutheran and Spiritist. After collaborating in this explicit way they made an effort to include other religious groups, as in the case of planning for the vigil for those who have died of AIDS. The existence of groups that work with AIDS from other religious groups, as well as the annual AIDS-related events, facilitates an interdenominational collaboration around AIDS. In this way, today the STD/AIDS Pastoral is a very ecumenical organisation, welcoming to its team individuals that are Lutheran, Anglican, Spiritist, or from various Afro-Brazilian religions, among others. The STD/AIDS Pastoral, and in particular the Casa Fonte Colombo, participate today in the leadership of Latin American and global networks that fight against AIDS that are composed by a diverse matrix of religious congregations. The Casa Fonte Colombo receives delegations from other countries in South America, and frequently runs courses and trainings in other countries and continents, which explains in part why they were chosen by the Brazilian AIDS programme to coordinate Brazil's international cooperation with East Timor.

The case study carried out with the Casa Fonte Colombo and the STD/AIDS Pastoral demonstrates that HIV and AIDS, aside from creating a source of tension between the State and the Catholic Church, also made possible the emergence of a common ground for dialogue and understanding. These institutions, both the older Casa Fonte Colombo and the newer STD/AIDS Pastoral, are concrete manifestations of this understanding. Today both these institutions maintain projects with some funding from the Brazilian National STD/AIDS Program. Through publications and a range of strategic projects, they execute programmes of action that compliment public health policy, in the same way that many secular AIDS NGOs do. At the same time, the fight against AIDS produced an articulation of sectors within the structure of the Church that have more progressive positions on topics like homosexuality, conjugal relations, prostitution, and harm reduction for drug users. Only those that rely solely on what the relatively superficial caricatures sometimes produced by the mass media would think that the State and the Catholic Church have positions that are dramatically in contrast regarding AIDS.

This case study demonstrates that reality is much more complex regarding moments of collaboration and tension with different actors in both fields. It also emphasises the extent to which such processes are historically constructed over time. From a time early in the epidemic when only a few progressive sectors of the Catholic Church clandestinely distributed "hidden" condoms, we have been able to witness the emergence of a new time when a theology of prevention is actively promoted in conjunction with principles of Catholic doctrine and orientations of public health policy from the Brazilian National STD/AIDS Program. Understanding how such processes of change are gradually constructed over time, through careful dialogue and hard work on the front lines of the fight against HIV and AIDS, can offer key insights into the ways in which we might build more effective responses to the epidemic in the future.

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