



## **Sexuality, AIDS and religion: transnational dynamics in Africa**

**School of Anthropology, University of Oxford, 28-30 September 2011**

**Convenors:** Nadine Beckmann (Oxford), Catrine Christiansen (Copenhagen), Alessandro Gusman (Riga). Hosted by the Fertility and Reproduction Studies Group (FRSG) and the International Research Network on Religion and AIDS in Africa

### **Confirmed speakers include:**

Brooke Grundfest Schoepf (Harvard)

Suzette Heald (LSE)

Robert Thornton (University of the Witwatersrand)

Rijk van Dijk (University of Leiden)

Hansjörg Dilger (Free University of Berlin)

Reverend Ijeoma Ajibade (Mayor's Office, Greater London Authority)

### **Introduction**

During the last twenty-five years, AIDS has profoundly impacted the African continent, not only at the epidemiological level, but also in the social, political and economic realm. Not least, it has changed the way people look at sexuality. In this process, HIV prevention campaigns located sex at the centre of the AIDS pandemic, and early risk group categorisations, combined with the voices of religious leaders and local networks of rumour and gossip, lent the pandemic strong moral connotations at global as well as at local levels. Hence, popular understandings of the disease and risk of infection frequently refer to an interpretative grid that draws on a religious moral framework, and in many parts of Africa (and the world at large) AIDS is represented as "God's punishment" for social corruption and moral decay. This is particularly true in the increasingly popular Pentecostal churches, but a similar approach can also be found among mainstream Christians and in various Muslim discourses.

Religious institutions, such as churches and mosques, and faith-based development organisations, such as World Vision, have been active in promoting sexual education and HIV prevention programs and are at the forefront of providing care for the sick. However, these organisations have been criticised for increasing the stigmatisation of people living with the disease and for promoting ineffective ways of prevention, for example through over-emphasising abstinence and faithfulness while condemning condom use.

While scholars have pointed to the important roles religion plays in the moralisation of sexuality throughout the African continent, the roles of transnational relations in shaping local discourses on HIV/AIDS seem less clear. Most religious institutions and faith-based organisations work together with partners in as well as outside the continent, but although these relations are known to be crucial for the flows of ideas and resources in relation to HIV/AIDS, there is very limited knowledge on the transnational dynamics of views on sexuality in relation to HIV/AIDS and religion in Africa.

Against this background, the International Network on Religion and AIDS in Africa and the Fertility and Reproduction Studies Group propose a conference to examine the ways in which transnational relations influence the interrelations between religion, sexuality and AIDS in Africa. We invite both scholars and practitioners to contribute to these debates.

Please email abstracts (max. 500 words) to Catrine Christiansen: [cac@teol.ku.dk](mailto:cac@teol.ku.dk), Nadine Beckmann: [nadine.beckmann@anthro.ox.ac.uk](mailto:nadine.beckmann@anthro.ox.ac.uk), or Alessandro Gusman: [gusman@lu.lv](mailto:gusman@lu.lv) by **1st July**. The organisers will inform about the abstracts selected for the conference by **15th July**. The deadline for conference papers (5,000-7,000 words) is **1st September 2011**. Participants who will not present papers are invited to register by **1st September**. Conference registration is £25 (£15 for students), payable in cash or cheque upon arrival. This fee includes lunches and coffee/tea.

The conference will focus especially on the following issues:

### **Politics of HIV prevention: social decay and the moralisation of sex**

Religious discourses and faith-based programs have framed HIV infection as a moral issue, aiming to direct people's actions into socially acceptable forms of behaviour. At the same time, the HIV/AIDS field has become a public arena for imposing religious discourses which strongly condemn sexual relations before or outside marriage on a broader public debate. A reference to "moral decline" is often used to stigmatise "immoral behaviours", as for example in the recent campaign against homosexuality in Uganda. But how exactly do such discourses flow between the global North and South, and within the African continent, and who are the actors involved?

The AIDS pandemic has opened up new questions around the role of religion in directing sexual choices and behaviour in countries with high HIV prevalence. How and to what extent are these discourses and teachings put into practice by people in their everyday lives? The use of condoms is often discouraged, if not condemned, by religious leaders and groups; what are the effects of such condemnation? Is the moralisation of AIDS creating a new image of who is "a good religious individual"? How and to what extent do flows of ideas and money from the global to the local level influence such moralising attitudes and the politics of HIV prevention in Africa? Finally, how does the emergence of independent churches that actively promote and incorporate views of sexuality which are opposed to dominant religious paradigms influence the dynamics of the moralisation of sex in Africa?

### **The control of sexuality: religion, power, intergenerational conflict**

Young people and women are often considered responsible for moral and social decay. This opens reflections on the field of moral and sexual control: when the control of sexuality is shifted from local communities and traditional authorities to religious congregations, power relations are re-structured and authority may be questioned. These challenges go beyond choices regarding sex partners; they raise questions about gender and generational relations and about the location and formation of authority.

International organisations and programs are giving more and more attention to young people, who are seen both as a resource in terms of activism and as a risk to society. This opens the field to more reflection on the role of national and international AIDS politics to define a new image of youth in Africa. Finally, it is necessary to stress the gendered nature of this process, with men and women often exposed to different kinds of messages and actions.

How are these local and global forces driving and influencing intergenerational and gender relations? How do intergenerational tensions regarding "modernity" and the lifestyle enter the discourse about sexuality? How are sexual choices, and the control of sexuality, related to power issues? How are religious organizations actively directing young people away from 'traditional' modes of teaching and regulating sexual orders (e.g. initiation rituals)? And to what extent are young people consciously utilising AIDS and sexuality as a means to question established hierarchies and traditions?

### **Negotiating policies on sexuality within faith-based organisations**

Research has highlighted a distinction between the faith-based organisations that promote 'abstinence only' programmes and those that include the use of condoms. The former are often seen as making HIV prevention part of general religious education, whereas the latter combine rationales of sex education with religious morals. This conference will challenge such depictions of faith-based organisations as static, homogenous wholes by inviting papers that examine internal negotiations over policies on sexuality. How do organisations formulate policies on sexuality; who is involved in the process, and who has the power to make the decisions? Considering the transnational flows of ideas and resources, predominantly from the West, but increasingly also from other parts of the world, such as the Arab countries, to Africa, what are the rooms of manoeuvre for staff in African contexts to reconcile the organisational policy on sexuality with their own views or local circumstances? How do changing practices on the ground – for example Baptist pastors who decide to encourage the use of condoms because they observe that abstinence does not work – feed into policy revision? In other words, what characterises the flows of ideas from the local to the global in terms of altering organisational policy? Do the kinds of negotiations differ between religious organisations, such as churches, and religious development organisations, such as Muslim Aid or Christian Aid?

We encourage discussions about the ways in which policies on sexuality (or possibly reproductive health) are influenced by how organisations work, as well as the ways in which negotiations over policies on sexuality influence the workings of faith-based organisations. Of particular interest are the ways in which HIV/AIDS has changed the reproductive health programs and priorities of faith-based organisations.

### **Sexual networks**

For three decades individual sexual behaviour has been portrayed as the main driver of the pandemic in sub-Saharan Africa, the world's most severely affected region. Recent studies (e.g. Thornton 2008), however, have started to challenge this narrow focus and highlight the importance of analysing the shape of sexual networks to understand the way HIV (and other STDs) spreads throughout a population. An ecological approach to HIV/AIDS, which attempts to straddle the gap between the social and natural sciences, can bring to light the complex interactions and interdependencies between social and biological worlds and broaden our understanding of sex in which the role of 'risk', of individuals, and individual choice has been given too much attention. There are larger social structures—including those of sexual networks, kinship, family and household structure, formal and informal institutions and social networks—that determine overall trends of infection and that respond (or not) to its consequences.

This has far reaching implications for our study of AIDS, and of sexual health more broadly; sexual networks are the primary 'object' that must be understood in the investigations of the spread of STDs in any context. What are the factors that influence the shape of the sexual network in a specific location? How does religious discourse and practice affect attitudes towards and patterns of intimacy, sexual relationships, ideas of love, and reproductive goals and practices? What influence do transnational flows of ideas, values and people have on the ways these concepts and practices may change? Sexual networks are intimately linked to mobility; one may only think of the main 'risk groups' – long-distance truck drivers and prostitutes catering to their needs – identified as vectors of infection in the early days of the African AIDS crisis. Transnational connections add another dimension to the role of mobility and create new links between existing sexual networks. At the same time, HIV intervention programmes designed by global stakeholders and transnational advocacy networks influence and – perhaps to a lesser extent – are influenced by the local shaping of the disease. These processes are accompanied by flows of money to a heretofore unprecedented extent. What role do political, economic and religious considerations at the local, national and global levels play in the shaping of sexual networks?

Finally, how can we apply systems-theoretical approaches to the study of sexual networks and reach at an ecological approach to AIDS and sex that takes into account the social nature of sexual relationships? While sexual ideology and individuals' views on sexuality are usually stated in relatively obvious terms, it is much more difficult to obtain reliable information on sexual practice. If we understand sex as social action involving a small amount of people (most often a couple), which methodologies can help us to gain insights into the ways intimate relationships come about and are lived out? And how do we study the larger structures of sexual networks that arise from the invisible sexual connections between a large number of people?

### **Views from PLHA: negotiating sexual life with the virus**

25 million people in sub-Saharan Africa are living with the disease. How do they negotiate sexual and reproductive life with the virus? Having children is a central part of men's and women's lives, and often the only route to full adult status. How do HIV positive people cope with societal pressures and their own personal desire for offspring? Moreover, in the context of moral panic and condemnation of 'promiscuity' and 'careless' sex, how is sex for pleasure being re-negotiated, and how do attitudes towards sex more broadly change? Religious leaders dither between calls for restrictiveness and control, and more pragmatic, harm-reductionist approaches, while economic decline and crumbling public services force many to engage in transactional forms of sex. At the same time, the notion of 'positive prevention' is being promoted at the global level, despite criticisms of placing an unduly burden onto the shoulders of HIV positive people. Ultimately, who is responsible for curbing the spread of HIV? And how do transnational advocacy networks play a role in the local shaping of the disease?