SEX IN PUBLIC: THE CHALLENGE OF HIV/AIDS TO CANADIAN THEOLOGIES

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Voices

We the body of Christ in this moment of history, have AIDS. We have a loving, tender, merciful, and compassionate God who walks with us on our journey. Amen.¹

We must be prophets of a sex positive truth.²

In the years ahead we will, no doubt, learn a great deal more about AIDS and how to control it. We will also learn a great deal about the nature of our society [and churches] from the manner in which we address the disease. AIDS will be the standard by which we measure not only our medical and scientific skill but also our capacity for justice and compassion.³

This 23-year-old woman overcame her shame and guilt when she started to speak to secondary school students about her life as a carrier of HIV. After many sessions, she is proud to say that through her contacts with young people, she has regained self-esteem and love of life.⁴

The Starting Point: The AIDS Pandemic and the Question of Justice/Love

Everywhere people realise that sexuality and family life are in crisis; few however associate their personal troubles or private pain with social injustice. In this paper I aim to discuss the pandemic of HIV/AIDS in the context of public discourses, including ecclesial discourses, that relate to

¹ Ron Russell-Coons, cited in Russell, 1990: 44.
² Larry J. Uhrig cited in Ellison 1996: 1
³ Allan Brandt cited in Ellwood 2002:12.
justice and which constitute and destabilise it simultaneously. First, HIV/AIDS makes sex public in ways hitherto unknown and highly resisted. For example, familiar religious patterns of meaning commonly associated with AIDS moralise in ways that blame those with the illness. Given such social interpretation, I think conventional moral discourse, in its liberal and conservative and sometimes progressive circles obscure the HIV/AIDS crisis, portraying it as a matter of private bodies in illicit acts and then misidentifies the source of the problem as sexuality itself. Instead, as Marvin Ellison states,

we need an alternative discourse that understands the political, as well as the personal, dimensions of the crisis.... the [broader] crisis in [which HIV/AIDS must be positioned] is properly located in the eroticising of dominant/subordinate social relations and in the distortion of love by racism, sexism and other injustices. Sexuality and the quality of personal life are dialectically related to the wider social order. All aspects of human life, including eroticism, are shaped by power relations, specifically gender inequities, race supremacy, class and cultural elitism. A constructive public discourse of HIV/AIDS must keep this personal-structural connection in focus.  

The starting point for moral inquiry about HIV/AIDS as with any moral concern should be the defining fact of our publics: We live in a world broken and alienated by multiple forms of oppression, as well as amazing resources for life. The starting point for moral inquiry about HIV/AIDS as with any moral concern should be the defining fact of our publics: We live in a world broken and alienated by multiple forms of oppression, as well as amazing resources for life. Structural injustices shape – and malform – our self-understanding, including our self-awareness as sexual persons. Injustice distorts the humanly good desire for initiate connection and remoulds it as a debased need for possession and control. I shall argue, that we need moral discourse that can confront the depth of this cultural crisis of community, sexuality and political economy, and also appreciate how justice, as communally secured respect and regard for persons and their environments, is constitutive of good loving. There is a message of hope that rightly belongs to religious and public discourses: Our loving well requires that we pursue justice in all social relations, including those

closest to our skin. "Doing justice, in liberation perspective, is a remarkable pathway for deepening love."

A final word on terms: Sexuality includes genital sex but I use it to refer more broadly to our embodied capacity for intimate, respectful connection. It is about erotic desire seeking physical, emotional, and spiritual embrace of others, the world, and God, the sacred source of life. Justice means to be in right relation; justice refers to the ongoing never-ending journeys to remake community by strengthening relationship. Justice-making attends to how people's well-being is enhanced or diminished by prevailing patterns of social power and disempowerment. A commitment to justice involves discovering what harms people and creation and seeking to find alternatives. Dehumanization and loss of conditions to create full life are evil. Various populations are being systematically devastated by HIV/AIDS due to a convergence of complex factors. For example, Musa W. Dube writes:

Its incurability and its link to sexual transmission breeds fear among the infected and the affected, and this leads to social stigma, which is the isolation and discrimination of the infected and their families. HIV/AIDS produces poverty, so the sick cannot work, relatives have to stay home to nurse the sick, and more money is needed for endless medical services. AIDS kills millions. AIDS leaves behind many powerless and poor widows and orphans, who are often at the mercy of property grabbing relatives. It attacks the poor and powerless, and those who have no economic power to say no to sex or to negotiate for safer sex. Its link with sexuality has caused silence, shame and denial in the church and society in general...because too many women are too poor to opt out of abusive and violent marriages, or to disengage from sex work (many impoverished women have to choose between death by starvation or HIV/AIDS), the [traditional Christian values] of abstinence and faithfulness [within marriage] are ineffective.

Connie Fife, a Canadian aboriginal Cree poet, issues a call to live with love and thus take seriously "the moment in our ribcages."

These are dangerous times
to live without love
to exist without beauty in our eyes.
These are times of hard loving,

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7 Dube 2002: 535-6; 541.
the calling forward of regard
untangling of uncertainty
the time of light, star people and beginnings,
the moment in our ribcages.8

Whose ribcages in this uncertain era? Listen to the Canadian epidemiologist, Margaret Millson: “From my perspective, the needs for education and pastoral care are important across the whole spectrum of HIV/AIDS, including of course all the classic problems of homophobia, racism, sexism, etc. A group which even “good” people are uncomfortable with and have trouble advocating for is drug users, because of all the moral overlay and social stigma attached to a group with so few internal supports and resources. Imagine being a female Aboriginal injection drug user/prostitute in a Canadian city in the winter!”9 With HIV/AIDS, the churches are confronted with three basic anxiety-ridden realities: death, sexuality and otherness.10

Death: The epidemiological picture

First, death. Wayne Ellwood describes in the New Internationalist June 2002 the terrible consequences of this disease first discovered 20 years ago in 1981 – more than 22 Million dead from AIDS-related illnesses; 36 Million infected, 25 Million in sub-Saharan Africa. AIDS is eroding economic progress and fracturing social stability across sub-Saharan Africa and will do so in other parts of the world unless urgent action is taken.11 He asks the most fundamental of questions: “what’s driving the epidemic? Why is it that HIV infection rates vary so dramatically from one part of the globe to another or within certain populations in a country? Just as the bubonic plague thrived in the crowded, pestilential European cities which provided breeding grounds for the rats which spread the disease, so too AIDS spreads along the fault lines of poverty, gender and class inequality.”12 While the ABC’s of AIDS prevention (abstain, be faithful to one partner and use a condom) are crucial, they do not change the wider structural configurations that overly determine the terrain of diseased bodies.

8 Fife 2001: 12.
9 Millson 2002.
11 Elwood 2002: 10
12 Elwood 2002: 9-12.
In North America, it is therefore no accident that marginalised people and the poor are the ones most deeply affected by the disease – HIV/AIDS has a rising infection rate among minority populations in North America while it declines in white populations; in Canada, aboriginal peoples’ infection rates have jumped 90% from 1996 to 1999. First Nations people are 2.8% of the Canadian population but made up nearly 9% of all new HIV infections.13

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AIDS is spread along gendered and economic patterns of unequal power: gender and poverty are inextricably combined. 70% of the world’s poor are women, and poor women are most susceptible to HIV. Violence against women and sexual assaults are cornerstones of the HIV epidemic. UN special AIDS envoy Stephen Lewis recently said: “Until there is a much greater degree of gender equality, women will always constitute the greatest number of new infections. You cannot have millions of women effectively sexually subjugated, forced into sex which is risky without condoms, without the capacity to say no, without the right to negotiate sexual relationships. Unequal power relations mean poor women can be more easily abused or coerced into dangerous sexual encounters.”14 Also, women without property or skills are forced to sell sex for money to feed themselves and their children. The statistics in Canada bear this out – intravenous drug use and heterosexual contact account for the high and increasing rate of infection among young, Aboriginal and especially poor female Canadians. These bodies are calling out for love and regard, provoking a kairos moment in our ribcages. What has shaped Christian response, not just to these stigmatized groups, but to all human bodies in need of redemption?

Sex and Christian Tradition

Second, if we are to interpret the phrase “the redemption of our bodies” (Rom 8:22-24a), contextually we will read “the body” within the operation of power relations which affect the bodies and subjectivities of individuals and communities. At the very least, Christian theologians and ethicists must acknowledge the sex-negativity and fear of bodies and sexuality in Christian history. We Christians know very little about our own history with respect to human sexuality, especially its seamier side. The power of

13 Statistics taken from Health Canada Website.
14 Ellwood 2002: 12.
sexuality in Christian tradition has mostly been dealt with by denial and repression; the key message in Protestant and Roman Catholic churches is this: sex is evil. In the churches sexuality is normally seen as a competing foreign power with spirituality. It has identified spirituality with disembodiment. For example, first Paul and then Augustine, Luther and Calvin depict a dualism of spirit over body, mind over flesh, male over female. This accounts in part for the marginalization of women’s experience since females in this reading cannot be bearers of God. Basically there has been an ethic of asceticism then a developing tradition around procreative sex which affirms chastity as a vocation and obligatory marriage for sex. In all Christian traditions the overwhelming justification of sex has been a provisionally affirmative one: namely, within marriage for progeny or procreation. All else is taboo, i.e., ruled out by definition. Traditionally the norm of sexual right relations has been monogamous heterosexual marriage; hence sex outside marriage was wrong. This Christian tradition presumes we are not sexual or good except in the marriage state. This procreative functionalism is still the normative meaning of sex in Christianity. This legacy continues not just in Christian silence but in active suppression of sex eros as dirty and eros as suspect; much Christian doctrine and practice condemns sexual literacy, diversity and practices such as condom use as immoral.

Given the dubious heritage from the Christian tradition, we have never had a proper sexual ethic or an incarnational ethics rooted in embodied, contextual relations. It was not internal theological innovation that brought changes in sexual awareness or norms. Constructive change as there has been has come painfully and reluctantly, through the interventions of historical justice movements of Persons Living With HIV/AIDS (PLWHA’s), women, Black and postcolonial liberation, people of colour and those who self-declare as gay, bisexual, lesbian, transgendered, queer (GBLTQ). They have taught us that hope emerges whenever we eroticise patterns of sexual justice and mutuality rather than those of violence. For example, women around the world are struggling to put sexuality and reproductive rights as justice agendas as they daily struggle to free themselves from exploitative institutions that can include marriage when these effectively deny women’s moral agency and status as fully human. While I believe it is an accident of history, historically this pandemic marks on specific bodies the ways particular people are being crucified and longing for life before death. If Christ is a person living with AIDS, how are the churches to name themselves and act in the face of the HIV/AIDS pandemic? A religious ethic will attend to virtues, values, obligations and
visions of awakening; compassionate social and intimate relations; its ecclesiology will embrace a mission of awakening.\(^{15}\)

**Otherness**

Third, in facing the AIDS pandemic, some Christian communities are in the process of examining their own positions in the mirror-image of “others” in this case, PLWHA’s.\(^{16}\) Can there be an “untangling of uncertainty” that the AIDS epidemic pejoratively epitomizes—e.g., AIDS as a harbinger of ruin because of the poisoned fruits of “loose sex” with the fitting punishment of stigmatization, poverty, discrimination and death. Are religions awakening to other notions of what God has to do with the human evil of AIDS? Is God threatening punishment or promising resurrection? The UNAIDS notes: “It is always easier to blame others for the spread of HIV, but progress against the epidemic is only possible when communities own the problem of AIDS themselves.”\(^{17}\) Do churches own the problem for themselves? Does God prefer the company of those who are in a nice neighbourhood where people behave politely to the company of those whom society marginalises because they do not measure up to the conventions of comfort, style and family life? Theologies of discrimination and abuse are aimed not only at gay men who contract AIDS, but also children, injecting substance users, haemophiliacs, heterosexual women, male and female prostitutes, and those who received tainted blood by transfusions. In short, anyone who breaks familiar codes of prosperity and ease.

Yet as Andre Guignon asserts, our confession is our response to those with AIDS: “Our teaching concerning the good news of a God who loves “no matter what” will be credible to the extent that we are witnesses. In our reaction to AIDS lies indeed an authentic confession of faith.”\(^{18}\) When the “us/them” dichotomy is transgressed, there is a calling forth of mutual regard and commitment to human dignity. “We are the body of Christ. If part of us has AIDS, we all have AIDS.”\(^{19}\) The irony of AIDS is that it literally embodies the call for regard of others and the diseased consequences of our dis-ordered social relations. The pandemic is part of a

\(^{15}\) See Maluleke 2002: 550-557.

\(^{16}\) On the now classic claim of contextual justice-seeking theologies is solidarity with the victim-survivors in historical projects of transformation, see, Rieger 1999: 140, 141.

\(^{17}\) Ellwood 2002: 11 [*Emphasis added*].

\(^{18}\) Guignon 1989: 293.

\(^{19}\) See Russell 1990: 159.
social storm that has capacity to redefine values, practices and relationships. For example, women's diverse experience of trivialization and subjugation, as "the other," is reproduced by theologies which maintain the binaries of white/black, male/female, mind/body, subject/object, active/passive, public/private, sex/gender, culture/nature, rational/emotional, rational/prejudiced, Christian/pagan, civilized/savage, and so forth. Those who are inscribed on the underside of the dualistic hierarchies, especially those who are "queer," i.e. outsiders to the norms represented in the privileged aspects of the binaries, experience a deep epistemological rupture with the dominant exclusionary modes of knowing and valuation, and generate in response contextual theologies of the body to respond to those living with AIDS. Whatever our subject position, we are faced with rigorous theological work of taking time to reflect, probe and dare to make new kinds of theological connections that can take seriously the challenge of HIV/AIDS.

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Case Study of United Church of Canada's Response to HIV/AIDS

The United Church of Canada has been shaped by public discourses of racism, sexism and homophobia; for this history it must repent; there are also traces of openness to sexual diversity and justice around gender, racial and sexual orientation. Toward a Christian Understanding of Sexual Orientations, Lifestyles and Ministry, 1988 culminated in the significant statement by the 32nd General Council in 1988, Ministry, Membership and Human Sexuality which affirmed that "all persons, regardless of sexual orientation, who profess Jesus Christ and obedience to Him, are welcome to be or become full members of the Church" and "All members of the Church are eligible to be considered for ordered ministry." The Thirty-Seventh General Council in 2002 renounced its 1960 statement that homosexuality is a sin and encouraged ecclesial courts, congregations, and members to learn ways to offer healing for the damage caused by the historic stance of our denomination on homosexuality. It also stated that

United Church of Canada statements on sexual justice include In God's Image...Male and Female, 1980; Faith and Sexuality, 1981; Gift, Dilemma and Promise, 1984. There are also ongoing struggles for gender and racial justice which include a textual tradition of ecclesial response too large to document here. See, for example, United Church of Canada 2003.
lesbian, gay, bisexual and transgendered as well as heterosexual orientations are gifts from God, part of the marvellous diversity of creation.” Well, at least in theory!

The United Church has actively participated in the World Council of Churches and Canadian ecumenical work on AIDS. Back in 1986 the Division of Mission in Canada made “A Statement on AIDS” outlining the social context, giving theological and public policy affirmations, and calling on the church “to be an active expression of God’s love in the midst of human tragedies related to AIDS” within an ethic of personal and social responsibility and pastoral care that repudiates all notions that AIDS is God’s punishment for homosexuals. On 1 December 2002, World Aids Day, the United Church launched a campaign with global partners in Africa called Beads of Hope. This programme’s motif is “The World Has HIV/AIDS.” How will this serve as a “space of radical openness” or a sign of awakening to new life? The programme identifies three roles: to foster awareness and understanding; to participate in public discussions and advocate for changes in the conditions that foster the spread of HIV/AIDS; and to provide material support through an emergency financial appeal to raise one million dollars. With accountability to those with HIV/AIDS, attention to AIDS as a political, economic, social and medical issue aims to “call forth regard” against the stigma of the disease that is associated with “sinful people” which has and continues to lead to deeply problematic social and ecclesial practices. Theo-ethical criteria will include:

i. Does this practice or proclamation name what is going on, e.g., is the gendered, raced, political economic spread of HIV/AIDS being acknowledged?

ii. Does it help us know how God relies on us and lives under our own and others’ skins?

iii. Does it increase spaces of radical openness, beauty, and the capacity to love?

iv. Does it counter the hatred and condemnation of those with HIV or AIDS?

v. Does it empower us and others to act with erotic justice?
Conclusions: Challenges to Hope

As white liberal Protestantism struggles to cope with its disestablishment and postmodern pluralisms, the temptation is to seek stability and certainty by either retreating into privileged, self-righteous circles where salvation is identified as a purely spiritual experience unrelated to social context or by (re)institutionalizing unjust relations that discriminate against HIV positive people. What we can learn from and with AIDS activism is the hope of redemption. It is sparked when churches embrace some cataclysmic shifts, shifts required to "call forth mutual regard" and to seek justice/love across racial, class, gender, ecological and sexual lines.\(^2\)

i. Shift from "individual risk" to "social vulnerability." This notion is the key to understanding how HIV/AIDS spreads. While not ignoring requirements of individual safe-sex practices, the determining factors which foster its spread are social inequality and injustice, prejudice and discrimination, oppression, exploitation and violence. This clear naming of the HIV/AIDS issue untangles the uncertainties of what drives the pandemic. It helps comprehend the consequences of the sexual stigma and discrimination so often faced by gay men, intravenous drug users or sex workers; the gender power relations and gender oppression so often faced by women; and the social and economic marginalization of the poor. HIV/AIDS is as much a social and therefore simultaneously a theo-ethical problem for Christian communities as it is a medical one.

ii. Shift from "information-persuasion based behaviour intervention" to "collective empowerment and community mobilisation." This praxis aims to nourish the awakening of "oppositional consciousness"\(^2\) and resistance struggles for justice and transformation. Coming together, the socially vulnerable build up a critical perspective to better take action against those forces which are seen to oppress them. This model demands public health approaches to focus on empowering the vulnerable communities to respond to those needs and also to develop

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\(^2\) See Kelly 1998: 210ff. Here he draws on the work of Richard Parker, Professor of Medical Anthropology and Human Sexuality at the State University of Rio de Janeiro.

\(^2\) Sandoval 2000.
programmes of action aimed at confronting the root causes of their social vulnerability.\textsuperscript{23}

iii. Shift from “individual-based behaviour” to “global coalition for social change.” Individual needs of PLWHA’s must not be neglected. Neither should the wider and long-term strategy issues. Since “social vulnerability” is key to this radical shift of approach, the aim will be on commitment to solidarity across differences to enable healing. It depends not on medical need but on where you live and how much you can afford to pay. UN Secretary-General Kofi Annan has established a global AIDS FUND with an initial target of $10 billion. So far the fund has been pledged about $2.5 billion. The Bush administration which came up with $50 billion to fight terrorism after the Sept 11 2001 attacks on USA, has committed a mere $200 million. One intermediate strategy for meeting needs now and in the future is to support legal challenges to drug companies to produce affordable and accessible treatment.

The promise of new life emerges from the transformation of intimate relations which respect and validate different ways of life, different choices, and alternative forms of responsibility and love and toward exploring and sustaining rather than fearing sexual diversity.

Where is hope? Emilie Townes untangles needless uncertainties when she states:

Hope is seen in the refusal to accept vindictive and narrow faith statements about the content of the character of those who have AIDS; it is revealed in the spirit that sparks righteous anger at homophobia, [racism] and sexism, at the blatant disregard for the way intravenous drug use is killing Black men and women; hope is seen in the acknowledgement of the subtle interplay of race, class and gender shapes the spread of AIDS; hope is embodied in the protests against the outrageous and death-dealing fear so many Christians have around HIV/AIDS.\textsuperscript{24}

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\textsuperscript{23} For a Canadian case in an Aboriginal community, see, Miller 2000.
\textsuperscript{24} Townes 2001: 38.
For some Christians, “queerying” theology denaturalizes bodies and identities (that is, renders them not fixed, given, stable, known essences) to constitute relational “spaces of radical openness”25(bell hooks) where they can connect with collective endeavours that nourishes body, mind, and spirit. If theology is a living response to such a liberation that has been experienced and lived, what are we learning from AIDS in Canada, about God as justice/love, “the power of right relation”? Perhaps the rise of “othered” and now queer consciousnesses within Christianity has done more than anything else to raise questions about the interaction between Christian faith and the body. For example, the interventions of AIDS activism interrupts the rhetoric of defiling and corrupting the natural order of things that is projected onto those with AIDS. We would do well to learn from queer theory and praxis. “Queerying” sexuality has pressed for self-conscious dialogue among not only GBLT persons but also about gender and race as oppressive construction propping up a heterosexual patriarchal order. In short, a justice/love hermeneutic encourages us to subvert theologies that blame those with HIV/AIDS and make them into others who are not seen as fit to apply for justice or love or mercy.26

In this paper I have taken the theme of this edition of the Journal of Constructive Theology to interrupt the positioning of HIV/AIDS as readily contained by sexuality understood as a matter of publics normally concerned about regulation and repression. Instead I take courage with those who proceed in a critical, self-reflexive manner about discursive power that constitutes illness, human sexuality, and Christian faith and practices. Until Christians get in touch, literally with their own bodies and social struggles and the others whom we vilify, we will never learn to generate desire – God-bearing relation – to know under our skin that seeking justice, loving mercy and compassion, and walking humbly with God is to embody right-relatedness in all our connections, from most intimate to most public. Let us work together naming our experiences of struggle and survival, to know that what is genuinely of God embraces the goodness of our body-selves, builds respect and dignity as persons in communities, and deepens our capacity to resist evil and celebrate life.

Bibliography


