Sexual behaviour, secrecy and the HIV and AIDS pandemic

A correspondence between Klaus Nürnberger and Gerald West

Dear Gerald,

Your paper at the recent Joint Conference in Stellenbosch (24-06-09), other sessions on HIV and AIDS, as well as Philippe Denis’ excellent paper on “The Church’s impact on HIV prevention and mitigation in South Africa” (134 JTSA No 134, pages 66ff), triggered a train of thought that I long to share with you. This little treatise is meant to be a reflection on the discussion in general rather than a reaction to your paper – which I do not have in front of me anyway. I just need somebody who is sufficiently informed and theologically profound to comprehend and evaluate my thoughts on the matter.

Bad behaviour

You began with a remarkable scene in Isipingo on TV featuring a drug and sex orgy. What a striking introduction, I thought. I was rather startled when you immediately switched from ‘bad behaviour’ to ‘bad theology’. I realise that you used this pithy switch to focus the attention of your audience on the actual topic and agenda of your paper. And I agree that in some sense bad theology should be a primary concern for professional theologians. Yet this shift had a rather different effect on me. It conjured up in my mind the spectre of a problematic mood that seems to have become somewhat typical, even for current activist thought. I may be completely wrong on this score, but let me voice my concern anyway.

There is not the slightest question that rigorous sexual discipline – and related lifestyle changes – would get the pandemic under control within a reasonable period of time. Simple logic and East African experiences strongly point in this direction. Everybody knows that there are transmissions through needles but these are not in the majority. Everybody knows that spouses of promiscuous partners can become innocent victims and that an increasing number of infants are already born with the infection. But these are downstream consequences that would soon dry up to a trickle if the flow of the river were stopped at its source.

There are also numerous social and psychological complications such as the patriarchal family, female dependency, the migrant labour system, poverty-induced prostitution and so on. These are important issues that need to be attacked head on and in their own right. But their impact on the spread of the disease would vanish if the stark reality of sexual indiscipline could be tackled.

Yet if you dare to mention sexual discipline in certain circles the response is likely to be in the direction of ‘prudishness’, ‘judgmentalism’, ‘moralising’, etc. You sense a silent shaking of heads: is this old guy living on the moon? The perception seems to gain ground that the ABC strategy has failed. It is not always asked whether it has ever been propagated and followed with the rigour demanded of radical measures, such as the mobilisation of the nation for war.

What would happen if the state president, the cabinet, all state institutions, private enterprise, unions, sports bodies, schools, churches and NGOs would speak with one voice and acted with resolve on the matter – insisting that a behaviour that seriously threatens the survival of a vast section of the population, the well-being of the nation and the future of coming generations is unacceptable and will not be tolerated?

One has to ask why this is not the case. My provisional answer is, crudely speaking, that there is strange dialectic between sexual secretiveness – you cannot discuss matters of a
sexual nature – and overt sexual freedom. The latter has become a holy cow in popular post-modern culture. It is part of the unlimited autonomy and unrestrained hedonism of the individual that we have come to consider non-negotiable. The immediate and exorbitant fulfilment of desire has become top priority. You think you have a right to live your life as you please regardless of the consequences. It is the same syndrome that has led to the super-indebtedness of our population, the importance of taking your kids to school in a four by four, the current financial crisis and the inability to tackle the ecological meltdown with any degree of seriousness.

We must constantly remind ourselves that this is a new development. Until quite recently all cultures the world over – including Africa and the West – surrounded sexual behaviour with strict rules, sanctions and taboos. They were not always wholesome. Some were thoroughly counterproductive, life obstructing, discriminatory, even atrocious. But they were motivated by a sense of awe and sanctity. Sexuality was the most fundamental ingredient to collective survival, public health, generational continuation and social cohesion. Its abuse posed a danger to the well-being of all individual, communal and societal relationships.

Today all this has gone. Although licentiousness is as old as human civilisation and the emancipatory thrust of modernity has been in operation since the Enlightenment, the final breakthrough of the sexual revolution only happened in the second part of the last century. Those who try to restore a sense of responsibility, depth and wholeness in sexual relationships are being undermined – even by those whose prime duty, one would have thought, was healthy socialisation, spiritual formation and the generation of public responsibility. Scenes such as the one you depicted no longer elicit repugnance. They raise the adrenaline for consumers and profits for producers and that is all that counts. Our children are exposed daily to scenes that generate totally distorted role models in their minds.

Many activists get wobbly needs when it comes to call a spade a spade. Most churches do not dare to speak up. My own church produced, in my own estimation, one of the theologically most profound statements and potentially most efficient programmes yet to have appeared on the pandemic – and then failed to publish, propagate and act on it. You may remember that I published a paper on this case. (2002 Theology of AIDS: A Lutheran/Moravian case study. Scriptura vol 81/2002 No 3, 422-436.)

A subtle shift seems to have taken place from solidarity with the victim to solidarity with the perpetrator. Or is it plain lack of courage? One has to ask what the roots of such a shift might be and whether this is a desirable phenomenon. That brings me to your main topic, bad theology.

**Bad theology**

I agree with you on what you said about “bad theology”. However, I want to add a few riders. As you know much better than I do, the theology of retribution is part of the Biblical tradition. To call it bad theology will not remove it from the texts. But it has had a curious trajectory in biblical times. At the end this approach was overcome, at least in principle. It is the a-historical reading of the Bible that prevents most Christians from discerning this trajectory and its outcome. What is in the Bible is taken to be the eternally valid word of God, rather than a process of increasing discernment and transformation.

At the risk of (again) imposing a preconceived pattern on the texts, let me say how I see it. The theory of retribution was a consequence of the Deuteronomic proclamation: keep the law and you will be blessed; transgress the law and you will be cursed (Dt 28 or 30). In the sense that acts indeed have consequences, this is not yet bad theology. In extreme situations one must shout prophetic warnings from the roof tops. It only became bad theology when the
Deuteronomic juxtaposition led to the conclusion that all suffering must be divine punishment for bad behaviour.

In a long and very painful history, many suffering Jews discovered that this cannot be so: lawless oppressors flourished, law-abiding victims perished. Where was the justice of Yahweh? The book of Job, aspects of which you analysed, mainly deals with three solutions. The first part (Job 1–2) says that suffering is a test of the sincerity and robustness of faith. The second part is a passionate refusal by the innocent (not the perpetrator!) to accept the Deuteronomy-induced theory of retribution (Job 3–37). The last part (Job 38ff) says that God, the Creator of the cosmos, is far too great to fit into a neat legal framework.

There are many other attempts to find a solution: resurrection from the dead to face judgment; the coming restoration of the Israelite kingdom and the humiliation of pagan nations; apocalyptic. Apocalyptic gives up on transformation. Current reality is beyond repair and must be replaced by a new creation. It had an immense impact on early Christianity. But the most remarkable and practically workable solution is offered by Paul’s transformation of both the legal and the apocalyptic models by redefining the relation between law and grace.

As you may recall I have re-conceptualised the classical formulation ‘justification by grace rather than moral achievement’ as God’s suffering, transforming acceptance of the unacceptable. The parable of the prodigal son is the prototypical expression of this version. Three aspects of this formulation need to be highlighted: (a) what is unacceptable remains unacceptable; it is never condoned; (b) acceptance of the unacceptable implies suffering for the accepting partner and (c) this suffering is meant to be a means of transformation.

So the basic criteria of acceptability remain in force. But the suffering caused by unacceptable existence and behaviour shifts to the accepting party. This painful fact gives it an urgency that can motivate both partners to overcome it. Nowhere in the OT or the NT is licentious behaviour condoned. Ethical criteria become more differentiated and flexible where redeeming love has become the meta-ethical norm, but the basic rationale of the ‘law’ is retained, namely the enhancement rather than the obstruction of life in its fullness. It is the classical relationship between law and grace that we need to rediscover if we want to offer guidance in the current moral confusion.

Let me share a picture that I have used to differentiate law and grace in HIV and AIDS discussions. Little Susi is intrigued by what happens in the kettle on the stove. Mom prohibits, threatens, even punishes – and she does all this to protect the child from harm. But when Mom looks away, Susi pulls the boiling water all over her face. Should Mom now give her a good hiding on top of her excruciating pain? No mother would do that. She would be a monster.

Before this point in the story her strictness, her ‘judgmentalism’ and her threatened punishment had a sound purpose. But after this point, anger, indignation and judgment do nothing at all to solve the problem. On the contrary, they only exacerbate the misery. The mother will now do all in her power to comfort, soothe, and heal. She may even have to help overcome the stigma attached to a disfigured face. In short, the mercy and compassion with which we treat people who suffer from the disease – due to whatever reason – does not in any way diminish the urgency of preventing infections to happen in the first place.

This distinction also throws light on the concept of “moralising”. Moralising I take to be an insistence on the observation of certain predefined and usually outdated rules of behaviour as criteria of acceptance into a community, without asking why such rules should be taken to be normative in the first place. Moralising treats the acting subject as a minor who simply has to obey certain rules, whether they make sense or not. This is starkly different from pointing out the irresponsibility of a behaviour which demonstrably threatens or harms the acting self, others, community, society and nature. To call that “moralising” is naïve at best and mischievous at worst.
Bad public response

With all the love and mercy typical of a mother, the rule must stand: kids should not be allowed to play with boiling kettles because irreparable harm can be done to the children concerned. It is this rule that we have lost. AIDS is a massive killer disease. It undermines individual happiness, marital relationships, families, communities, business enterprises and the national economy. Just imagine the proportions of this catastrophe! If 30 – 40% of the population are HIV infected and much of the rest affected, this is a national emergency of massive proportions, much greater than the average full scale war. In fact, AIDS is about to kill more people than World War II has done worldwide, with the highest concentration of casualties here in South Africa.

Yet it is not being treated as a national emergency. One would expect the entire population to be highly alert, to find the causes and neutralise them as soon as possible and as far as possible. In fact, the population is remarkable and inexplicably relaxed about the matter. Political parties, the private sector, the trade unions, the churches, the sport clubs, the schools treat it as a problem amongst others, if at all. Clearly they have other priorities. A blanket of denial is spread over virtually the entire public arena. Activist groups even had to push for antiretrovirals against a lot of political resistance.

In my view denial is rooted partially in the unwillingness to touch the holy cow of unmitigated hedonism mentioned above. Another part may be rooted in the growth of blatant callousness, a callousness that also manifests itself in hideous crimes, for instance, killing another person just to gain a cell phone or a lady’s purse, or to sell body parts to diviners.

The cultural phenomenon – sexual freedom as a holy cow – has entrenched itself in law. The human rights culture has legitimated the right to pursue one’s self-interest and one’s pleasure at the expense of others. What you do with your body is nobody’s business. You are free to do with your money, your body, your family, your sexuality what you please, irrespective of the consequences for yourself, for others, for the nation and for the environment.

Part of that is the right to privacy. The sexual behaviour of political leaders belongs to their private lives. The fact that they are powerful role models is not taken into account. Nobody chides you for an exorbitant, wasteful and unhealthy life style. In the same way, nobody is disturbed when you abuse of your sexuality to satisfy momentary desires. It is only when a teenager falls pregnant – or when she becomes HIV positive – that eyebrows are raised.

The law protects this right. In spite of the fact that it progressively wipes out the most productive part of our population it is not a notifiable disease. Nobody is forced to test or disclose his/her status. Those who know (like doctors and nurses) are not allowed, by law, to warn even the victims.

Just think of it! By any sensible definition this is not just culpable homicide, it is premeditated murder! And those who do not warn potential victims of a potential act of murder become implicated in the act. Surely according to any serious ethical system personal freedom hits its limits when it threatens the survival, health and well-being of others, the community and the society as a whole. Yet the law not only tolerates but protects it.

In view of the scale of the devastation caused by the disease, this sensitivity is completely out of place. Let me mention a parallel. Ebola is perhaps the most deadly virus known. Its effects are immediately apparent. As a result, the patients are placed under immediate and
strictest quarantine. This is tough for the victim, but it is necessary for the survival and well-being of the community. The successes of these measures are dramatic. Ebola has never killed more than a handful of people – a miniscule fraction of the number of people killed by AIDS. Yet HIV and AIDS are not surrounded by comparable safeguards.

**Stigma**

The motive for the prohibition of disclosure is, of course, the control of the consequences of stigma and discrimination. Stigma is an incredible scourge. But you do not eradicate or control stigma by sweeping the stigmatizing factor under the carpet. On the contrary! If the truth were known, stigma could be addressed. In terms of social psychology, stigma is the self-defence mechanism of a cultural formation against what it perceives to be a hidden but life threatening enemy. The task is not to remove this social safeguard, but to demythologise and transform it into redemptive, transformative and re-integrative motivations.

Where the truth is not exposed, stigma cannot be addressed. People don’t want to get tested because they fear the outcome and its physical and social consequences. Fear perpetuates uncertainty. Uncertainty leads to inappropriate responses. Sorcery may be suspected. Relief may be sought with diviners. They come up with all kinds of explanations that shift the blame to where it does not belong. Patients may not be brought to health officials to receive appropriate treatment.

But equally unbearable is the atmosphere of uncertainty and suspicion itself. We have gone through the agony of a gifted and beautiful young woman who stayed with us in Pietermaritzburg. The father of her little daughter had died of AIDS. When she lost weight, panic set in. Yet there was no way out. We last saw her, shrivelled beyond recognition, wheeled out of the way and abandoned in a huge hospital ward. At her funeral there was a leaden silence. No one dare to talk about what happened. There was no release, no conciliation, no communal reintegration.

While stigma leads to secrecy, stigma also thrives on secrecy. Disclosure is the only way to break the spell. The most feared evil in African culture is sorcery. There are two reasons for this: it is deemed life threatening and it operates in secret. HIV is indeed life threatening. And it is also kept secret. In both cases, suspected sorcery and suspected HIV infection, secrecy poisons the social atmosphere with suspicion, stigma and hatred. However ill-advised belief in sorcery may be, the community does everything possible to expose and eradicate what it perceives to be a primary scourge. You cannot defend yourself against an enemy that you do not know. You can also not reintegrate a culprit into the society if the facts are not exposed.

**Discrimination**

The state wants to prevent discrimination. But it should not, and does not need to, do this through prohibition of disclosure. Instead of legislating against disclosure, it should legislate straight against discrimination, as it does in other such cases. The condition of a physically handicapped person, for instance, is there for all to see. The fact that the condition cannot be hidden motivates us to deal with it. The law determines that space must be created for such persons within the normal functions of the society.

Concerning physically handicapped persons, our church saw the light in this regard long before the state did. We quickly got used to our two crippled pastors. One of them became a lecturer and then a dean. He was held in high esteem. The embarrassment soon wears off and the person begins to matter. HIV-positive persons are ‘disadvantaged’ in the same way as people with a disability. But nobody knows, so nobody cares. No good purpose is served with this kind of secrecy. On the contrary, under its protection the virus can spread unhindered.
Instead the emphasis has been placed on the provision of condoms and antiretrovirals. These measures are absolutely indispensable. Yet the question is where the medically appropriate priorities should lie – at the source of the problem or at its consequences. It is like saying that it is OK for reckless drivers to speed through red robots; we just have to provide more ambulances. With notable exceptions that seems to be the attitude of the main line churches. The widespread denial in our situation – not encountered, for instance, in Uganda to the same extent – lies in the unholy marriage between traditionalist patriarchy, taboos, stigmata and fears on the one hand, and the kind of hedonism that has become a way of life in popular postmodernity and even a legally protected right in our modern state.

All this is not directed against what you and your colleagues are trying to do and of which I know far too little. Nor do I presume that you and your colleagues are not aware of all this. Nor can I claim to be working at the coal front. Perhaps my views are way off the point. But every now and then I cannot suppress an appetite for the rebelliousness with which you closed your paper. But mine is not an expression of the rebelliousness of hedonistic licentiousness against sexual norms – in whatever modern garb. It expresses the rebelliousness of the victim of irresponsibility and its fateful consequences against what ought never to have happened and could easily have been avoided – including the disease itself, disruption of relationships, stigma and discrimination.

Thanks for the opportunity of sharing my concerns. May God bless your thinking and acting in this thorny terrain!

Kind regards,
Klaus

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Dear Klaus

Thank you for your thoughtful, as ever, reflections. I am sorry for the delay in responding, but Bev and I have been travelling while on our sabbatical leave; but we are now settled here at the Pacific School of Religion in Berkeley.

In a footnote in my paper at the conference in Stellenbosch I confess to the choice of emphasis on ‘bad theology’ rather than ‘bad behaviour’! You are right, the episode in Isidingo cries out for the latter, as well as the former.

My own journey of reflection on HIV has been shaped extensively by the work within Ujamaa, where we have privileged the voice of HIV-positive people. This has provided me with my own frameworks within which to do analysis. Working from within this epistemological frame (and I grant there are others), I have discerned a number of shifts taking place.

Our initial insertion into this work was simply to offer a place – the Ujamaa offices in town – to those who were being told to go home and die by Edendale hospital. As our offices gradually began to become a safe place, more and more HIV-positive people gathered, eventually forming an organised group. And it is within this group that our work has been located ever since, for quite soon they expressed a desire to participate in our Contextual Bible Study work. From within this group I can discern the following slowly shifting frames of analysis.

The first frame was centred around constructing a safe and accepting place. Theologically this was expressed as a yearning to know that although their families, their churches, and the wider society
had rejected them, God had not. They found their refuge in the gospels, in the Jesus who stood with the ‘sinner’ over against the religious orthodoxies and societal attitudes of his day.

The second frame emerged as this group, now organised as Siyaphila (We are alive), began to live long enough to probe more deeply the question, ‘Why me?’ Though their first recourse was to the familiar answer of personal sin, the actual experience of some of the group offered another response as well. This was a recognition of the structural dimensions of their lives, particularly patriarchy. For it is important to state that this group was made up largely of young women. To this day, Siyaphila is a women-led movement. Men have been reluctant to test and those who have tested positive have been reluctant to join this ‘women’s group’. So the doing of theology has been done largely by women, from their social location. It was within this frame that our work turned to Job, and it is out of this frame that my paper was a reflection.

This second frame remains crucial, because so much of the lives of women is controlled by men. So there is not much point speaking about ‘responsibility’ to women who know what is right, do what is right, but still become infected because their male partners refuse to change or even to acknowledge that change is an option. So to narrow your analysis even further, rigorous male sexual discipline would change everything, of this there is no doubt. But the theological work is being done, certainly from our social insertion, with women.

But there is now an emerging third frame, overlapping of course with the earlier two. The third phase is moving rapidly into the direction that you take in your reflections. The women and few men in the Siyaphila groups (now consisting of many groups throughout the region) have begun to take much closer control over their own bodies, asserting themselves within and over against their structural realities and ‘owning’ their own responsibilities within their social locations. While recognising that there are aspects of their lives that the cannot control – and for some women firm rural areas this may mean not being able to say no to sex with their (unfaithful) husbands – there is a growing militancy and sense of responsibility for their bodies and behaviour. This third frame is calling for other theological resources, and a return in some sense to more orthodox ‘moral’ theology, but tempered by the two earlier frames. Prevention is now the focus of much of their weekly discussions, as is a focus on alternative forms of masculinity, and so of our Contextual Bible Study with them.

Cutting across and shaping each of these frames is, of course, the material realities of their lives, including large-scale unemployment, the struggle for a basically nutritious diet and access to ARTs (of more than one regime), etc. That most of those who are members of Siyaphila are living long(er) and reasonably fulfilled lives has much to do with their shifting frames. I am sure their theological journeys are not over!

Thanks for the opportunity to have to reflect more fully on these matters. I appreciate your wisdom and commitment to collaborative reflection.

Regards

Gerald