

# CONSCIENCE

A Newsjournal of Prochoice Catholic Opinion

Vol. XXII, No. 3

Autumn 2001



## A BODY WEAKENED

*The Church and AIDS*

Catholics, Conscience and Condoms | ANTHONY PADOVANO

The Lesser Evil | PATRICIA MILLER

"A Disease, Not a Sin" | BALWANT SINGH

Stop the Vatican's Anti-Gay Crusade | PETER TATCHELL

Also: Faith-Based Groups Speak Out on AIDS • Catholics for the Right to Decide in Mexico  
Rosemary Radford Ruether on Sr. Joan Chittister at WOW • Anti-Abortion Terrorism Examined  
Index to Vol. XXI

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# CONSCIENCE

A Newsjournal of Prochoice

## Catholic Opinion

*Conscience* is published quarterly by Catholics for a Free Choice (CFFC). CFFC shapes and advances sexual and reproductive ethics that are based on justice, reflect a commitment to women's well-being, and respect and affirm the moral capacity of women and men to make sound and responsible decisions about their lives. Through discourse, education, and advocacy, CFFC works in the United States and internationally to infuse these values into public policy, community life, feminist analysis, and Catholic social thinking and teaching.

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## Editor's Note

*If you want peace, work for justice.* The words of Corita, the Catholic artist and former Immaculate Heart sister, are on our lips and in our minds. The terrible loss of life in New York, Washington and Pennsylvania is deeply engrained in our hearts. Hatred, fear of the other, among the inexcusable reasons cited for this tragedy, have changed the way we see our world...the world. We pray for those who lost their lives and those who lost loved ones.

We at CFFC are peace- and justice-seeking people. We deeply value the lives and dignity of all people. We are pro-life. We agree with our president that we must bring to justice the people and the organizations that are responsible for these acts of terror. We are deeply concerned by and do not agree with his corollary statement that failing that, we will "bring justice to our enemies." The first statement implies due process and justice seeking. The second statement smacks of revenge and bellicosity. Even of arrogance. This we must reject.

We join others in the Catholic community in putting forward a vision of a more comprehensive strategy designed to end terrorism. In addition to bringing the terrorists to justice, we must become world citizens in the best sense of the words. We must learn to use the United Nations and the international courts to solve disputes among nations; we must find ways to more equitably distribute the world's goods; we must respect human and civil rights here and in the rest of the world. We must come to see differences in religion, in values and in ways of living as enriching the world, not challenging what is good in the values we have chosen. We must become more tolerant, more merciful, more compassionate and more loving. For this we pray.

In this issue of *Conscience*, we examine the Catholic church's response to the AIDS epidemic, with the hope that it too can become more merciful and more compassionate. Anthony Padovano and Patricia Miller examine the church's refusal to change its policy toward condoms and the ramifications of this failure. Balwant Singh looks at how religious health organizations are fighting AIDS, while Peter Tatchell calls the Vatican to accountability in its persecution of gays. Finally, Rosemary Radford Ruether examines Sister Joan Chittister's decision to defy the Vatican's ban on discussing women's ordination.

—FK

## Correction:

In "Voices of Reason: Prochoice Catholics in Congress" (*Conscience*, Summer 2001, p. 20), the following members of Congress were mistakenly given incorrect party identifications. The correct party identifications are listed below. We apologize for any confusion.

Senator Christopher Dodd (D-CT)

Representative Michael Castle (R-DE)

Representative Mark Foley (R-FL)

Representative Henry Hyde (R-IL)

Representative James Langevin (D-RI)

Representative Gene Taylor (D-MS)

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**Vol. XXII, No. 3 Autumn 2001**

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*Cover art: Irish AIDS patient Jerome  
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© Ed Kashi/Corbis Images

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# AIDS Index

**Total number of AIDS deaths since the beginning of the epidemic: 18.8 million**

**Total number of women killed by AIDS since beginning of the epidemic: 7.7 million**

**Total number of children killed by AIDS since the beginning of the epidemic: 3.8 million**

**Total number of AIDS orphans since the beginning of the AIDS epidemic: 13.2 million**

**There are 16 countries in which more than one-tenth of the adult population aged 15-49 is infected with HIV.**

**In seven countries, all in the southern part of Africa, at least one adult in five is living with the virus.**

**In Botswana, 35.8% of adults are infected with HIV—the highest AIDS infection rate in the world.**

**In South Africa, 19.9% of adults are infected with HIV. South Africa has the largest number of people living with HIV/AIDS in the world.**

**Number of people newly infected with HIV in 1999: 5.4 million**

**Number of women newly infected in 1999: 2.3 million**

**Number of people living with HIV/AIDS in 1999: 34.4 million**

**Number of women living with HIV/AIDS in 1999: 15.7 million**

**Number of AIDS deaths in 1999: 2.8 million**

**Number of women who died from AIDS in 1999: 1.2 million**

**In 1998, 200,000 Africans died in war, but more than 2 million died of AIDS.**

**In four African countries where the adult HIV prevalence rate is over 10%, a fifth or more of girls in their late teens know too little about the virus to protect themselves.**

**In three African countries—Zambia, Kenya and Zimbabwe—the likelihood of a 15-year-old dying before the end of her reproductive years quadrupled from approximately 11% in the early 1980s to over 40% by 1997.**

**In countries where just under 10% of the adult population is infected with HIV, almost 80% of all deaths in adults aged 25-45 are associated with AIDS.**

**In the first 10 months of 1998, Zambia lost 1,300 teachers to AIDS—the equivalent of around two-thirds of all new teachers trained annually.**

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*Source: Report on the Global HIV/AIDS Epidemic, June 2000, UNAIDS.*



# Catholics, Conscience and Condoms

## A Catholic Response to Alleviating the AIDS Pandemic for the Special Session of the General Assembly on HIV/AIDS

*Anthony T. Padovano*

Catholics overwhelmingly support the use of condoms to prevent AIDS infection. Depending on the specific study, the percentages reach virtual unanimity. Yet Catholic official teaching remains divided. There are three questions at the heart of this issue.

### HOW DO WE PROMOTE MATURE SEXUALITY?

All religious communities endorse mature sexuality. It is at the core of the Global Ethic promulgated by the Parliament of World Religions. Sexual development and maturity are the means by which life is transmitted and nurtured. Indeed self-respect and human rights are intimately connected with the way sexuality is defined, expressed and made responsible. Religious leaders around the world

*Anthony T. Padovano is a Catholic theologian and a member of Catholic Voices, an international forum on population and development.*

agree that sexual maturity cannot be achieved only by making sex safe, by preventing disease, by improving the technology of contraception. Maturity requires attitudes of respect, responsibility and rights, which transcend the concrete conditions of sexual behavior. Indeed, it might be argued that unless these prior attitudes are in place, even safe sex may be an assault on the dignity of others.

Catholic church leaders tend to support the distribution of prophylactics when there is an educational program that underlines church teaching on responsible sexuality. Thus, Monsignor Jacques Suaudeau of the Vatican's

Pontifical Council for the Family writes in *L'Osservatore Romano*, the official Vatican newspaper, that "the use of prophylactics" in some circumstances, "is actually a lesser evil but it cannot be proposed as a model of humanization and development" (April 19, 2000).

The French Bishops Council declared in 1996 that the use of condoms "can be understood in the case of people for whom sexual activity is an ingrained part of their lifestyle and for whom [that activity] represents a serious risk; but it has to be firmly added that such a method does not promote mature sexuality." The German Bishops Conference issued a document in 1993

which affirmed that “human conscience constitutes the decisive authority in personal ethics.” They add that “consideration must be given to the high number of abortions among single mothers and the spread of suffering even if the underlying behavior cannot be condoned in many cases.”

Ranking church leaders, in individual statements, support the use of contraceptives in the context of responsible sexuality and prevention of AIDS. The Cardinal Archbishop of Paris, Jean-Marie Lustiger, declared in 1989 that love and chastity were essential values in sexual maturity but that if a person is “HIV positive” and “cannot live in chastity” that such a person “should use the means that have been proposed” to prevent infection of others.

Bishop Eugenio Rixen of Goias, Brazil, adds that the principle of the lesser of two evils makes the “use of condoms less serious, morally speaking, than getting infected or infecting other people with the AIDS virus” (June 2000).

Most people would be astonished to hear that ninety percent of the theologians on the papal birth control commission, at the conclusion of the Second Vatican Council, maintained that artificial birth control is not intrinsically evil and that official teaching against contraception could be changed.

## HOW DO WE SAVE LIVES?

The Catholic tradition is more resilient than many realize when issues of human life and dignity are compelling. For most of its history, the church condemned cremation severely as a violation of the dignity of the human body and an attack on the central Catholic doctrine of the resurrection of the body. It felt so strongly on this issue that a Catholic funeral service was forbidden to all who would choose cremation. Even in those centuries, however, cremation was not only allowed but also considered a moral duty in times of plague when infection and the lives of others were at issue.

***We have reached a point  
with contraception and  
AIDS where the intent is  
no longer the prevention  
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prevention of death.***

Catholic doctrine forbidding usury or the taking of interest on money continued through its history. Usury is condemned in the Bible and it was affirmed by centuries of Catholic teaching. Yet, when it was clear that the new economic order of the modern period depended on usury for the financial health of the human family, the imputation of interest on money loaned was not only deemed permissible for the world at large but became the norm for the Vatican banking system itself.

Catholic teaching on a just war theory prevailed without significant challenge from the time of Augustine in the fifth century until the twentieth century. Just war theory maintains that there are legitimate and even moral reasons for engaging in war provided that war is a last resort, that proportionate and not excessive means are used and that non-combatants are protected. The advent of nuclear weapons has changed Catholic thinking in this area. Nuclear war is seen as unjust because proportionality and the indiscriminate killing of innocent people, even of the planet, have changed the moral equation. The protection of life, perhaps of all life, has led Catholic leaders to conclude that the very possession of nuclear weapons is morally questionable. The United States Catholic Bishops wrote in their 1983 pastoral letter “The Challenge of Peace,” that there must be a “completely fresh appraisal of war” and that it was irresponsible “simply to repeat what we have said

before.” Nuclear war was deemed immoral; the possession of nuclear weapons was considered tentatively moral only as an interim measure to minimize the threat of a nuclear holocaust and as a step “on the way toward progressive disarmament.”

The consistent thinking of the Catholic church has affirmed the lesser of two evils. This approach reasons that the ambiguity of choices sometimes makes it necessary to prefer one evil in order to prevent a greater evil. Thus, a pregnant woman may choose the removal of a cancerous uterus even if it entails the death of the fetus because the intention is the preservation of her life. It accepts the “evil” of the termination of prenatal life as a lesser evil, not intended directly.

A terminally ill patient may choose to forego all surgery and life support systems and permit death long before its biological inevitability as the lesser of evils. The “evil” of choosing one’s own death is seen as the lesser of evils when the alternative is prolonged, painful, and pointless continuation of life, achieved only through extraordinary methods.

The AIDS crisis claims more human lives than plague or nuclear weapons took in their history. The crisis has the potential to destabilize world financial systems, with consequent malnourishment and the death of millions not infected with AIDS. The economic crisis is as severe as the usury crisis of former centuries. Yet contraception is not condemned in the Bible; usury was explicitly forbidden there. If a biblical prohibition can be set aside when conditions change substantially, a non-biblical prohibition can even more readily be reversed when the consequences of human lives and the lesser evil are weighed in the balance.

The Catholic church cannot and will not promote a “culture of death” if the lives of tens of millions of people can be saved through the moral choices open to the Catholic tradition. We have reached a point with contraception and AIDS where the intent is no longer the prevention of pregnancy but the prevention of death. Contraception in the

context we are considering is not aimed at controlling population but at avoiding a holocaust.

### HOW DO WE LIVE IN A WORLD THAT IS LESS THAN IDEAL?

The Catholic church is convinced that an action that is intrinsically evil, corrupt to its very roots, cannot be utilized as a moral means even in a lesser of two evils approach. Thus, one may not kill innocent civilians to win a war even over an evil system such as Nazism. One may not control population growth with infanticide or forced abortion. One may not order the rape of women in order to demoralize the enemy and hasten the end of a war. Contraception, therefore, can only be universally prohibited if it is deemed intrinsically evil.

The encyclical letter of Pope Paul VI, *Humanae Vitae* (1968), prohibited all means of artificial contraception. The pope, however, made it clear that this teaching was not infallible. He could not have done this unless there was doubt about the intrinsic evil of contraception. Indeed, the papal commission on birth control could not have been summoned, previous to the encyclical, unless there was doubt about the intrinsic evil of contraception.

The vast majority of Catholics and of priests see no intrinsic evil in contraception. Indeed, immediately after the publication of *Humanae Vitae*, the official Catholic pastoral letters of national bishops conferences in Belgium, Canada, France, Germany, the Netherlands, and the United States made it clear that these were instances when the conscience of a Catholic prevails against the papal prohibition. It was argued that a responsible use of sexuality might require that a couple, even though respecting the pope's teaching, might conclude that the need to limit births and the need to preserve the sexual life of a marriage might prompt a couple, in conscience to

***Catholicism can find in its resources  
and in its commitment to life the resiliency  
to allow and recommend condom use to  
prevent a sexual plague more catastrophic  
than the bubonic death that almost  
destroyed European civilization.***

choose contraception as the lesser of the evils.

Catholic theologians went further and considered instances where contraception was not the lesser of two evils but a value in its own right, provided that it fostered sexual maturity and responsibility.

The instances and examples we have cited happened long before there was an AIDS crisis, even before AIDS existed. In the light of the magnitude of death before us, in the context of entire nations of orphan children and indeed of cultures whose young people are substantially absent, a new approach is

imperative. Catholicism can find in its resources and in its commitment to life the resiliency to allow and recommend condom use to prevent a sexual plague more catastrophic than the bubonic death that almost destroyed European civilization.

The world does not always allow us to live in it in an ideal environment and according to our preferred wishes. It does demand of us, however, that we do live in the world and that we do so responsibly and generously.

To stop AIDS is a life decision, a responsible choice, a generous action. When all efforts to promote mature sexuality are in place, we must also factor in the reality that all people are not mature. The realism of the Catholic tradition knows this and provides for this in other instances. Condoms to prevent AIDS can be a step on the way of teaching sexual maturity and responsibility. In the light of this, there is sufficient evidence that Catholics at large and leaders in increasing numbers affirm life over death and the protection of the innocent from the plague of AIDS. ©

## When Silence is not Golden...

On March 16, the National Catholic Reporter broke a story that appalled Catholics and non-Catholics alike. Journalists uncovered shocking official reports written by senior members of women's religious orders asserting sexual abuse and rape of nuns by priests is a serious problem around the world. The sexual exploitation of nuns by priests has resulted in pregnancies; some nuns have been dismissed from their communities; others have been forced to have abortions.

The Vatican's response to such injustice has so far been a deafening silence.

Join us in changing that. Join the campaign that is not afraid to break the silence.

**TELL THE VATICAN TO STAND UP FOR WOMEN.**

**A Call To Accountability:  
End Sexual Violence Against Catholic Sisters  
[www.calltoaccountability.org](http://www.calltoaccountability.org)**

# The Lesser Evil: The Catholic Church and the AIDS Epidemic

Patricia Miller

Photo by Mike Hutchings © Reuters 2001



© Roger Ressmeyer/CORBIS

“When priests preach against using contraception, they are committing a serious mistake which is costing human lives.” With this distinctly undiplomatic language, Peter Piot, head of the Joint United Nations Programme on HIV/AIDS (UNAIDS), voiced the international

community’s continuing distress over the Catholic church’s policy on condoms. “We do not ask the church to promote contraception, but merely to stop banning its use,” Piot told the *Frankfurter Rundschau* newspaper following the United Nations’ conference on AIDS this past summer.<sup>1</sup> The three-day special UN session stressed the

Patricia Miller is editor of *Conscience* and director of writing and research at *Catholics for a Free Choice*.

need for nations to begin to talk plainly about AIDS in response to a catastrophic pandemic that has taken approximately 20 million lives in less than 20 years. The final conference document specifically noted the need for countries to expand access to condoms within five years.

Apparently the Catholic church was not listening to the unprecedented statement that many took as a sign that the world was finally ready to deal with the AIDS epidemic in a serious

way. Archbishop Javier Lozano, who headed the Vatican delegation to the meeting, called for a prevention strategy revolving around “matrimonial fidelity” and “chastity and abstinence,” while excluding “campaigns associated with models of behavior which destroy life and promote the spread of the evil in question”—a clear reference to the safe sex and condom education campaigns that the meeting delegates had affirmed as essential to halting AIDS.<sup>2</sup>



***“When people for whatever reason choose not to follow the values we promote as church—within and outside of our community—then the bottom line is the real possibility that a person could transmit a death-dealing virus to another through a sexual encounter.”***

***—Bishop Kevin Dowling of Rustenberg, South Africa***

Lozano's statement foreshadowed a remarkable series of events that occurred later in the summer in southern Africa that illustrated both the deep discontent within the Catholic church hierarchy over condom policy and the intractability of the policy. How this struggle is ultimately resolved may be key to finally controlling AIDS on the African continent and to the future credibility of the Catholic church.

## **THE HIERARCHY AND CONDOMS**

Despite the Vatican's complete refusal to consider a change in policy regarding condoms for HIV/AIDS prevention, bishops' conferences around the world have suggested that condom use may be acceptable in some circumstances to prevent AIDS. In 1989, the French Bishops Council was one of the first to side against the Vatican on the subject, saying of AIDS, "The whole population and especially the young should be informed of the risks. Prophylactic measures exist." In 1996, the French bishops said that condom use "can be understood in the case of people for whom sexual activity is an ingrained part of their lifestyle and for whom [that activity] represents a serious risk."<sup>3</sup> In 1993, the German bishops conference noted: "In the final analysis, human conscience constitutes the decisive authority in personal ethics... consideration must be given... to the

spread of AIDS. It is a moral duty to prevent such suffering, even if the underlying behavior cannot be condoned in many cases... The church... has to respect responsible decision-making by couples."<sup>4</sup>

Given the discontent with the Vatican's AIDS policy previously expressed by bishops in countries only marginally affected by the disease, many church watchers felt that the exploding AIDS epidemic in Africa might propel the church hierarchy on that continent to act decisively on the question of condoms. The stage was set in July prior to the semi-annual meeting of the bishops of southern Africa, when several prominent bishops spoke out in favor of condom use to control the spread of HIV/AIDS. Bishop Reginald Cawcutt of Cape Town, South Africa, caused a storm of controversy when he said that condoms could be used to prevent AIDS. He later backtracked a little to say "ideally" the best way to stop AIDS was "through stopping sex," but added that there is "a big difference between the ideal and the reality." He said, "Abstain until you are in a stable relationship, preferably marriage, whether it be gay or straight, or whatever." Noting that condoms often fail due to misuse, he added that those at risk of contracting AIDS should learn to use condoms correctly.<sup>5</sup>

Shortly before the meeting of the bishops from the southern part of Africa was set to begin, Bishop Kevin Dowling of Rustenberg, South Africa, raised expectations even higher when he formally announced that the bishops would consider a change in condom policy, noting that people with AIDS had a responsibility not to

transmit death. He said, "When people for whatever reason choose not to follow the values we promote as church—within and outside of our community—then the bottom line is the real possibility that a person could transmit a death-dealing virus to another through a sexual encounter. Such people, who are living with the virus, must be invited and challenged to take responsibility for their actions and their effect on others. They should use a condom in order to prevent the transmission of potential death to another."<sup>6</sup>

Dowling, who coordinates the South African bishops' AIDS Office, also noted, "My personal stance on this issue comes out of much reflection, not to say anguish over the enormity of the suffering of people in the AIDS pandemic."<sup>7</sup> He added in an interview with the *Sunday Times* in South Africa, "Every week I am with people dying in their huts and shacks, mothers and emaciated babies. I am with them all the time."<sup>8</sup>

Dowling's view was seconded by Bishop Cawcutt, who said bishops felt "we have to be able to say something." He added, "We need the wisdom of Solomon. And we know—we're really, really aware—that the world is waiting for us. So is the Vatican."<sup>9</sup>

Dowling's views were contained in a draft pastoral statement that was considered by the Southern African Catholic Bishops Conference (SACBC) at its annual policy meeting in late July. At least one retired archbishop from the region, Denis Hurley of Durban, was reported to have backed Dowling's stand, at least for married couples in which one partner was infected with HIV.<sup>10</sup> And Gunther

*Opposite page, left: UNAIDS Director Peter Piot addresses journalists in Cape Town, South Africa, June 5, 2001.*

*Opposite page, right: "Condoms Prevent AIDS" Road Sign, Banjul, Gambia.*

# Do Condoms Prevent AIDS?

Important Roman Catholic leaders such as the late Cardinal John O'Connor and Bishop James McHugh, who was a special advisor to the Holy See Mission at the United Nations, have frequently claimed that condoms are not effective in preventing AIDS. In addition, anti-family planning organizations such as the American Life League and Human Life International have aggressively questioned the efficacy of condoms. They argue that condoms should not be promoted as a way to fight AIDS because the virus that causes AIDS is small enough to pass through latex condoms, or that condoms have an unacceptably high "failure rate" (the frequency which condoms break or slip off), or that condoms are not reliable because they don't prevent all sexually transmitted diseases.

Such claims that condoms should not play an important role in halting the spread of HIV are unfounded, according to the US Centers for Disease Control and Prevention (CDC) and leading AIDS researchers. Condom opponents have seized on the fact that condoms are not 100% perfect in preventing AIDS to further their arguments that abstinence and sex within marriage are the only ways to prevent AIDS.

Condoms, like most contraceptives, are not 100% foolproof. Most condom failure is due to human factors such as the failure to use condoms consistently or incorrect use of the prophylactic.<sup>1</sup> Many of these problems can be corrected through safe sex education, which opponents of condoms also oppose. Poorly manufactured condoms, which are sometimes found in the developing world, or those stored at excessive heats for long periods of time, can also fail. Non-latex condoms, such as those made of sheepskin, are not adequate protection against AIDS because HIV can pass through the larger pores of these condoms.

Claims that latex condoms allow HIV to pass through are unfounded. The pores of latex condoms are too small to allow HIV to pass through. Condoms have been shown to be effective barriers not only to HIV, the virus that causes AIDS, but also to herpes simplex, CMV, hepatitis B, chlamydia and gonorrhea.<sup>2</sup>

While condoms are not foolproof, they are highly effective in preventing HIV infection. According to the CDC, studies examining sexually active people at high risk for contracting HIV have found that "even with repeated sexual contact, 98-100 percent of those people who used latex condoms correctly and consistently did not become infected."<sup>3</sup> The CDC recently issued prevention guidelines for state health departments that state "correct and consis-

tent use of latex condoms can reduce the risk of sexually transmitted infections."<sup>4</sup> On August 16, 2001, the United Nations Joint Programme on HIV/AIDS and the World Health Organization issued a statement that said that condoms were "the best defense" in preventing sexually transmitted diseases, including HIV/AIDS.<sup>5</sup>

In the US, some conservative political forces have hijacked the condom issue to advance their own political agenda—namely, the idea that sexual abstinence before marriage and sex within marriage are the only forms of sexual expression that should be sanctioned by society. The debate became public this summer when the US National Institutes of Health released a long-awaited report on the effectiveness of condoms. While confirming that condoms are effective in preventing HIV and gonorrhea, the report said that there is less evidence available that condoms effectively protect against other non-fatal STDs such as human papillomavirus, chlamydia, syphilis, and genital herpes.<sup>6</sup> Despite the report's affirmation of the effectiveness of condoms in preventing AIDS, conservatives immediately seized on the report to charge that public health officials had been falsely proclaiming the effectiveness of condoms and safe sex programs.

Two small, conservative physicians' organizations, the Catholic Medical Association and the Physicians Consortium, and former Rep. Tom Coburn (R-OK), who requested the report when he was in Congress, called on CDC head Dr. Jeffrey Koplan to resign. They charged the CDC with promoting public health campaigns that "withhold from the American people the truth of condom ineffectiveness," a charge that outraged public health experts and advocates, who fear the negative publicity could damage years of headway made in safe sex education.<sup>7</sup> Coburn, a physician, worked hard in his last few years in Congress to promote abstinence-only sexuality education by exploiting fears that condoms may not be completely effective in preventing human papillomavirus, which has been implicated in the development of a small number of some kinds of cervical cancer, mainly because the virus may spread to areas not covered by a condom.<sup>8</sup>

An analysis of the NIH report by Willard Cates, president of Family Health International, notes that the report did not say that condoms do not work against STDs other than HIV, only that there is less data because these diseases have not been as extensively studied. Furthermore, "HIV is less easily transmitted and gonorrhea is more easily transmitted

*(continued on page 42)*

Simmermacher, editor of the *Southern Cross*, a South African Catholic paper that voiced approval of the draft statement in an editorial, said, "Most bishops and senior priests I have talked to who work on the ground on the AIDS issue seem to support what Bishop Dowling has said, completely or in part. How much support there is within the hierarchy is another matter."<sup>11</sup>

Even Cardinal Wilfrid Napier, president of the SABC, which includes bishops from South Africa, Botswana and Swaziland, acknowledged that the bishops would consider a change in policy, saying the policy change would "have to be weighed up against the backdrop of not only the church's traditional teaching, but also current scientific evidence about the quality, effectiveness and actual usability of condoms in situations which pose the greatest risk of infection."<sup>12</sup>

In the end, however, after five days of closed-door debate, expectations were dashed when the SACBC rejected the draft statement and reaffirmed the church's total ban on condoms for any use, specifically condemning the use of condoms to prevent HIV/AIDS transmission in an ironically titled "Message of Hope." "The Bishops regard the widespread and indiscriminate promotion of condoms as an immoral and misguided weapon in our battle against HIV/AIDS," read the SACBC statement. The bishops went on to say that "condoms may even be one of the main reasons for the spread of HIV/AIDS."<sup>13</sup>

The bishops did say that the only circumstance in which condoms could possibly be used were by a married couple in which one partner was HIV positive. Even then, Cardinal Napier said, condoms could only be used if the couple abstained from sex when the woman was ovulating.<sup>14</sup>

The bishops' statement on AIDS immediately drew criticism. Mark Heywood of the Treatment Action Campaign, South Africa's leading AIDS activist group, said, "It's a very unfortunate position for them to adopt and make so public. Condom use is the major way we have in blocking new

HIV infections."<sup>15</sup> A group of 14 nuns calling themselves Sisters for Justice were joined by 62 supporters in issuing a statement entitled "Continuing the Conversation." The statement said that the bishops' message on AIDS was not directed to women in "abusive, oppressive or desperate relationships or circumstances and who are very much at risk of being infected by HIV." They added, "It is entirely within the context of the AIDS pandemic in our country that the use of a condom to prevent infection of one's sexual partner could be seen to be permissible."<sup>16</sup>

Jesuit priest Jon Fuller, a doctor with the Clinical AIDS Program in Boston, questioned the logic of the bishops'

gle largest population of people who have HIV/AIDS.<sup>18</sup> South Africa's adult infection rate is a staggering 20%, while in neighboring Botswana it is the highest in the world—37%, or nearly four out of 10 people between the ages of 15 to 49.<sup>19</sup> And in a chilling preview of what can happen if AIDS is left to spread unchecked in Africa, HIV infection rates of nearly 50% have been recorded in some parts of Botswana and South Africa.<sup>20</sup>

AIDS is literally reshaping the demographics of Africa. In Zimbabwe, average life expectancy is expected to be nearly halved by AIDS by the year 2010—from 61 years to 39 years.<sup>21</sup> As a result of the AIDS pandemic, South

***Despite the Catholic church's ban condoms, Catholic church-related organizations are providing some 25% of the AIDS care worldwide—making it the largest institution in the world providing direct AIDS care.***

statement, saying, "The bishops recognize the legitimate use of condoms in marriage—but if they say condoms are not effective, then why recommend them? Why is it OK to use them to protect married couples, but not other lives—the lives of sex workers and their partners, or the people who choose not to be abstinent or in marriage?"<sup>17</sup>

## **AIDS IN AFRICA**

Africa is widely considered the epicenter of the AIDS epidemic, and the impact of the disease there has been devastating. More than 25 million people in sub-Saharan Africa are infected with HIV out of the total 34.3 million people infected worldwide, giving sub-Saharan Africa approximately three-quarters of the world's HIV/AIDS cases. This number includes 4.5 million South Africans, which makes South Africa the country with the sin-

Africa's total labor force is expected to decrease 21% by 2015.<sup>22</sup> According to UNICEF, there is a disproportionately high rate of HIV infection among teachers in sub-Saharan Africa. In Kenya alone, 1,500 teachers died of AIDS in 1999.<sup>23</sup>

Of the 34.3 million people living with HIV/AIDS worldwide, 15.7 million are women and 1.3 million are children. According to the World Health Organization, half of all those with HIV/AIDS in sub-Saharan Africa are women, and 25% of those with HIV/AIDS in South and Southeast Asia are women.<sup>24</sup> Women accounted for 2.3 million of the 5.4 million new infections in 1999, while children accounted for 620,000. An estimated 13.2 million children have been orphaned by the AIDS epidemic.<sup>25</sup> According to the United Nations, approximately 10% of children in sub-Saharan Africa are parentless as a result of AIDS.<sup>26</sup>

# Pros and Cons:

## Pro-Church Policy

*"The truth is not in condoms or clean needles. These are lies, lies perpetrated often for political reasons on the part of public officials...by some health care professionals who believe they have nothing else to offer persons with AIDS...lies told by often well-meaning counselors."*

—Cardinal John O'Connor, accusing health care professionals of dishonesty in promoting condoms  
[*"Pope Condemns Bias Against Victims of AIDS,"*  
*Washington Post*, November 16, 1989].

*"Every condom sold sends the buyer to acquire the AIDS virus."*

—Fr. Gerald Magera Iga, in a campaign urging condom sellers in Uganda to burn up their stocks  
[Comtex newswire, January 25, 1999].

*"Parents must reject the promotion of so-called 'safe sex' or 'safer sex,' a dangerous and immoral policy based on the deluded theory that the condom can provide adequate protection against AIDS."*

—Cardinal Alfonso Lopez Trujillo and Bishop Elio Sgreccia of the Pontifical Council for the Family  
[*"The Truth and Meaning of Human Sexuality,"*  
*Origins*, February 1, 1996].

*"Using a condom to protect oneself against HIV amounts to playing Russian roulette."*

—Fr. Jacques Suaudeau, of the Vatican Council for the Family, in the Catholic journal *Medicina e Morale*  
[*Our Sunday Visitor*, November 2, 1997].

*"Use of this product is harmful to health."*

—Condom warning label suggested by Mexico City Archbishop Norberto Rivera Carrera  
[*La Jornada* (Mexico), August 29, 1997].

*"[W]idespread and indiscriminate promotion of condoms [is] an immoral and misguided weapon in our battle against HIV-AIDS. ...[C]ondoms may even be one of the main reasons for the spread of HIV-AIDS."*

—From the text of a statement issued by the bishops of Southern Africa following their semiannual meeting, where they considered a change in their official condoms policy in response to the HIV / AIDS pandemic  
[Karen DeYoung, *"AIDS challenges religious leaders,"*  
*Washington Post*, August 13, 2001].

## Con-Church Policy

*"When priests preach against using contraception, they are committing a serious mistake which is costing human lives. We do not ask the church to promote contraception, but merely to stop banning its use."*

—UNAIDS Director Peter Piot, shortly after the recent United Nations' AIDS meeting  
[*"Church's stand against contraception costs lives,"*  
*Agence France Presse*, June 29, 2001].

*"Death control is the issue, not birth control. The African bishops should speak this truth not to save the soul of Catholicism, nor to redeem a generation of lost Catholics—although they would—but simply to save the lives of the people with whom they have been entrusted by God."*

—Novelist and former Catholic priest James Carroll  
[*"Dismantling the Church's Structure of Death,"*  
*Boston Globe*, July 24, 2001].



# The Catholic Church and AIDS

***"I challenge the Vatican to redefine its attitude to condoms. The current Roman Catholic theology is one that favors death rather than life."***

—Gunnar Staalseth, a member of the Nobel Peace Prize committee and a bishop in Norway's Lutheran church, following a meeting with Kofi Annan, secretary general of the United Nations [Reuters, "Nobel committee member criticizes pope over AIDS," August 21, 2001].

***"The Catholic church...opposes contraception but most Catholics in the world use it, so the Catholic church is stuck and wrong on these questions. But lots and lots of Catholics ignore the Catholic church's teaching, including lots of good priests and nuns who are in favor of condoms being made available."***

—Clare Short, the UK's minister for international development, speaking about the church being a "burden" in the effort against AIDS in Africa [Sue McGregor, "HIV/AIDS-Claire Short interview," BBC News, July 17, 2000].

***"The current Roman Catholic theology is one that favors death rather than life. [The Vatican's] 'better-dead-than-condomed' position has not been blessed by any of the world's religions or by common sense. It is flat-earth embarrassing."***

—Theologian Daniel C. Maguire on the Vatican's opposition to the use of condoms in HIV/AIDS prevention programs ["Vaticanology," Religious Consultation Report, November 2000].

***"The 'changeless doctrine' keeps coming back in many absurd ways. For instance, the danger of AIDS cannot be averted by using condoms... even by a married couple when one has AIDS. ...The condom is more evil than death by AIDS."***

—Gary Wills [Papal Sin: Structures of Deceit, Doubleday, New York, 2000].

***"If a husband violates his marital vows and sleeps with other women, he must make sure that he does not transmit the virus to his wife, else he would be violating the principle of justice. This is where the principle of 'lesser evil' comes in."***

—American Jesuit theologian Fr. James Keenan, addressing a media forum in the Philippines ["Catholic theologian endorses condom use to prevent transmission of HIV," *The Advocate*, August 10, 2001].

***"Many competent doctors state that a viable condom is today the sole means of prevention. In this respect, it is necessary. The condom is thus understandable for cases in which a person who already engages in sexual activity needs to avoid a serious risk, just as we insist that this is not a substitute for an adult sexual education."***

—AIDS statement from the French Conference of Catholic Bishops ["French Catholic Bishops Stray from Teaching on Condoms," *Catholic World Report*, February 12, 1996].

***"The use of a condom can be seen not as a means to prevent the 'transmission of life' leading to pregnancy, but rather as a means to prevent the 'transmission of death' to another."***

—Bishop Kevin Dowling of Rustenburg, South Africa, on the need to change the church's policy on condoms in the face of the AIDS epidemic ["Condoms for Catholics?" *Newsweek*, July 20, 2001].

A recent study by the World Bank and the UN said that in the African nations of Kenya, Zambia, Benin and Cameroon, HIV infection “is exploding among very young women. In the hardest-hit areas, some 15% to 23% of girls between the ages of 15 and 19 are HIV positive, versus only 4% of boys.”<sup>27</sup> The World Health Organization linked rising HIV infection rates in women and girls to their “lack of control in their sexual health relationships and, hence, over many aspects of their health.”<sup>28</sup>

## THE CHURCH’S RESPONSE TO AIDS

One of the most startling ironies of AIDS in Africa is that despite the Catholic church’s ban on the key element of comprehensive HIV/AIDS prevention strategies, the Catholic church is a major provider of AIDS care and services on the continent and in other parts of the world. Approximately 12% of all AIDS care worldwide is provided by Catholic church organizations, while 13% is provided by Catholic nongovernmental organizations, meaning that Catholic church-

The church’s programs include caring for orphans of the AIDS epidemic and working to place them in foster homes and helping to support foster families, education and “prevention” programs for primary and secondary school students, home care and counseling programs for people who are HIV positive, in-patient units for terminally ill patients who have no one to care for them, and a program to provide drugs to reduce the incidence of mother-to-child transmission.<sup>32</sup>

These programs are very much in keeping with the church’s anti-AIDS strategy, which is heavy on abstinence messages and treatment for those who are already ill. In his message to the recent UN special session in HIV/AIDS, Pope John Paul II named access to drugs to prevent mother-to-child transmission and general access to anti-retroviral drugs for AIDS patients as two of the most pressing issues facing developing countries, especially Africa.<sup>33</sup> But while the church calls on developed nations to devote more resources to drug access, it deplores the most effective method of halting the

their exclusion, John White, an Irish priest who is HIV positive and was attending the conference as a delegate from AIDS Link, held up a sign reading “The Church Has AIDS.” White was ejected from the meeting and put in a Vatican police cell until it was determined he was a priest. White’s protest did not succeed in forcing the church to listen to those with AIDS. Archbishop Fiorenzo Angelini said the meeting was “for AIDS sufferers, not of them.”<sup>34</sup>

Despite the rising toll of AIDS since 1989, the Vatican has consistently opposed safe sex education at UN meetings. The Vatican delegations to all of the major humanitarian meetings of the 1990s—the International Conference on Population and Development (ICPD), the Fourth World Conference on Women (FWCW), and the five-year follow up meeting to the ICPD—unequivocally condemned the use of condoms to prevent the spread of HIV/AIDS. The delegation to the FWCW stated: “The Holy See in no way endorses contraception or the use of condoms, either as a family planning measure or in HIV/AIDS prevention programs.”<sup>35</sup>

At the recent UN meeting on AIDS, where the final conference declaration called for countries to increase access to condoms by 2005, the Holy See delegation reiterated its complete ban on condoms to prevent HIV: “The Holy See wishes to emphasize that, with regard to the use of condoms as a means of preventing HIV infection it has in no way changed its moral position.”<sup>36</sup>

At the Vatican’s conference on AIDS last year, Father Felice Ruffini, under-secretary to the Pontifical Council for Health Care Workers, also noted that it is not acceptable for married couples to use condoms to prevent infection if one partner is HIV positive, noting only that “it’s tough to be able to maintain matrimonial chastity in this case.”<sup>37</sup>

In addition to insisting that there is no room within Catholic theology to allow the compassionate use of condoms, officials of the Catholic church have repeatedly tried to cast doubt on the effectiveness of condoms in fighting AIDS. In Kenya, even as the government belatedly declared that the

***In protest of AIDS patients’ exclusion, John White, an Irish priest who is HIV positive and was attending the Vatican conference as a delegate from AIDS Link, held up a sign reading “The Church Has AIDS.”***

related organizations are providing some 25% of the AIDS care worldwide—making it the largest institution in the world providing direct AIDS care.<sup>29,30</sup> The SACBC’s AIDS Office supports 85 projects and programs in Namibia, Botswana, Swaziland, Lesotho and South Africa, making it one of the largest anti-HIV/AIDS programs in southern Africa and active in many of the countries with the world’s highest rate of HIV infection.<sup>31</sup>

spread of HIV: condom education, use and distribution.

The Vatican’s unwillingness to confront the reality of AIDS was apparent when it held its first conference on AIDS in 1989. At that point, the threat of the disease had become apparent to all in the international community. The Vatican meeting began on a contentious note when AIDS patients who were invited to the meeting were prevented from speaking. In protest of

AIDS epidemic was reaching crisis levels, Catholic Bishop John Njue propagated false scientific information by claiming that condoms are to blame for the spread of AIDS.<sup>38</sup> Shortly after AIDS was declared a national emergency in the country and the government officially embraced the use of condoms to curb the epidemic—over the loud objections of the Catholic church—a member of the Kenyan Parliament called the church “the greatest impediment in the fight against HIV/AIDS.”<sup>39</sup> The impact of the church is so great that Paul Delay, who heads USAID’s AIDS programs, said the agency has asked the Catholic church not to say anything about condoms “if you can’t say anything nice,” particularly in regard to casting doubts on the effectiveness of condoms.<sup>40</sup>

In 1997, a doctor who is a member of the Vatican Council for the Family said that using condoms will not prevent HIV infection. Father Jacques Suaudeau wrote in the journal *Medicina e Morale*, “Using a condom to protect yourself against HIV amounts to playing Russian roulette.”<sup>41</sup> A report from the National Institutes of Health in the United States recently confirmed the predominant medical opinion that “consistent and correct condom use prevents...HIV infection.”<sup>42</sup> Despite medical opinion confirming the use of condoms to prevent HIV, it seems as if the church’s anti-condom propaganda may be winning converts. A recent survey conducted by the Kenyan Media Institute found that 54% of Kenyans do not believe that condoms are effective in preventing HIV and that “condoms encourage immorality, which exposes people to the risk of contracting the virus.”<sup>43</sup>

In Africa and around the world, the hierarchy of the Catholic church has worked actively to suppress condom use, education and distribution. In 1996, the local Roman Catholic church in Tegucigalpa, Honduras, prevented the distribution of one million condoms by health and election officials at polling stations during a primary election. Honduras has the highest incidence of AIDS in Central America.<sup>44</sup> That same

year, in Nairobi, Kenya, Cardinal Maurice Otunga, Kenya’s leading Roman Catholic church official, burned boxes of condoms and safe sex literature.<sup>45</sup> After Brazil launched an innovative AIDS prevention program that stressed the need for the use of condoms to prevent the spread of AIDS, Brazilian Roman Catholic officials criticized the

UN AIDS conference that sexual education is key to fighting AIDS. When Kenya did develop a comprehensive sexual education curriculum, it was shelved because of vocal opposition from the Catholic church.<sup>49</sup> The New York Catholic Conference fought to block a condom-distribution and education program for New York City pub-

***In addition to insisting that there is no room within Catholic theology to allow the compassionate use of condoms, officials of the Catholic church have repeatedly tried to cast doubt on the effectiveness of condoms in fighting AIDS.***

program for not stressing abstinence. Cardinal Eugenio Sales of Rio de Janeiro said the campaign would stimulate sexual activity, thereby spreading AIDS.<sup>46</sup> Just this year in Zambia, health officials withdrew a hard-hitting anti-AIDS campaign that urged safe sex and condom use after the church complained that it promoted promiscuity.<sup>47</sup>

On the issue of safe sex education, particularly for teenagers and young adults, the church has been even more aggressive, only recognizing the need for sexuality education within the limits of monogamous, heterosexual marriage, impeding the development of much-needed programs that address contraception in any context, including condoms to prevent AIDS. In 1996, the Vatican issued new sexual education guidelines, “The Truth and Meaning of Human Sexuality: Guidelines for Education within the Family,” which attacks school-based sexual education and says parents should have the primary role in teaching their children about sexuality. It calls on parents to refute teachings about “safe sex” and condemns contraception.<sup>48</sup>

The Catholic church has persistently opposed efforts to develop a comprehensive sexual education curriculum for schools in Kenya, despite the declarations of international bodies like the

lic school students because it did not give primacy to their message that abstinence is the only way for young adults to protect themselves from AIDS, even as AIDS rates for youth increased dramatically.<sup>50</sup> The Peruvian Bishops’ Conference condemned a sexual education program developed for that country’s schools, saying that the “program is centered only in providing biological information and is disconnected from any moral value or sense of responsibility.”<sup>51</sup>

## **CATHOLIC SUPPORT FOR CONDOM USE**

While the church strives to present a monolithic view on condom use, cracks are appearing in the facade. In an article entitled “Tolerant Signals” published in *America* magazine last September, two Jesuit priests, Jon Fuller and James Keenan, detected in a recent article in the Vatican paper *L’Osservatore Romano* “important signals” of a liberalization in the Vatican’s AIDS policy. They wrote that it confirmed their suspicion that “while individual bishops and archbishops have occasionally repudiated local H.I.V. prevention programs that include the distribution of prophylac-

*(continued on page 41)*

# Increased Partnership Between Faith Based Organizations, Governments, and Inter-Governmental Organizations

## Statement by Faith Based Organizations facilitated by the World Council of Churches for the UN Special General Assembly on HIV/AIDS June 25—27, 2001

HIV/AIDS has been correctly described as the greatest threat to human well-being and public health in modern times. Millions of people have already died from this disease and millions more are directly or indirectly affected by this global pandemic. The faith based organizations (FBOs) presenting this statement wish to express their appreciation and respect to the United Nations for organizing this timely and most important Special General Assembly. They are committing themselves to support all efforts already undertaken by local communities, governments, non-governmental and inter-governmental organizations to alleviate the human suffering caused by this pandemic and to prevent its further spread.

We are acutely aware of the complex nature of the infection and its root causes that have fuelled this pandemic, such as global socio-economic inequalities, marginalization of vulnerable people, poverty and gender issues. It has become increasingly apparent that the prevalence of HIV/AIDS rises in association with poverty and then indeed causes poverty. Women often bear a triple burden as a result of HIV/AIDS:

- a. they are particularly vulnerable to HIV infection due to biological and social factors including their lack of rights in regard to self-determination in sexual relationships
- b. if HIV positive, women often face a greater degree of discrimination when trying to access treatment, looking after children etc.
- c. they are the traditional caregivers to the sick and the orphans. Indeed poverty and gender are inextricably linked.

Women and girls are disproportionately represented among the poor. Men carry a special responsibility to change these factors.

We are joining the many other actors in the global fight against this devastating pandemic and offer their specific resources and strengths. At the same time we acknowledge that we have not always responded appropriately to the challenges posed by HIV/AIDS. We regret deeply instances where FBOs have contributed to stigma, fear and misinformation. However, it is also fair to say that FBOs often have played a positive role in the global fight against HIV/AIDS. Countries such as Senegal, Uganda, and Thailand which have involved religious leaders early on in the planning and implementation of national AIDS strategies, have seen dramatic changes in the course of the epidemic. For example, religious communities in Uganda, working hand in hand with AIDS service organizations and the government, have championed peer education; counseling and home care programs. A church leader has led the National AIDS Commission in Uganda since 1995. In Uganda, Zambia and Tanzania,

prevention efforts have resulted in changed sexual behavior including delayed sexual activity among adolescents, and a reduction in the number of sexual partners. These factors have been part of the message of many FBOs. In Thailand Buddhist and Christian groups have introduced home based care services and greatly contributed to the destigmatization of the disease.

Right from the beginning of the HIV/AIDS crisis, local communities have been at the very forefront of caring for those affected by HIV/AIDS. Faith-based organizations are rooted in local structures and are therefore in an excellent position to mobilize communities to respond to the HIV/AIDS crisis. In many cases, religious organizations and people of faith have been among the first to respond to the basic needs of people affected by the disease, and indeed pioneered much of the community based work. And yet these faith-based organizations are often overlooked. More often than not, the capacity of FBOs has not been maximized because they have not received adequate levels of training or resources to address the impact of the disease.

We have learned that prevention works provided there is openness and dialogue. Many HIV prevention strategies such as promoting temporary abstinence leading e.g. to delayed sexual activity in young people, voluntary testing and counseling, mutual faithfulness in sexual relationships, and the use of condoms are contributing to the reduction of the risk of HIV transmission. These methods should be promoted jointly and consistently by governments and civil society including FBOs.

### Resources that FBOs can offer in the fight against HIV/AIDS

**REACH**—Faith-based organizations (FBOs) are present in communities all over the world. They have deep historical roots and are closely linked to the cultural and social environment of the people and have effective channels of communication that can be utilized.

**EXPERIENCE/CAPACITY**—In many countries, faith-based organizations have been seeking to serve the needs of people affected by HIV/AIDS since the beginning of the pandemic. They have developed pioneering innovative approaches such as home based care both for people living with HIV/AIDS and programs for affected children. In many countries particularly in Africa, they provide a significant proportion of health and educational services. These institutions can and should be utilized in any extended programs on care and treatment.



**SPIRITUAL MANDATE**—FBOs are in a unique position to address the spiritual needs of people affected by the disease. They provide a holistic ministry for those infected and affected by HIV/AIDS including the physical, spiritual, and emotional well being of the individual and the community.

**SUSTAINABILITY**—It is not just the scale of the AIDS pandemic that presents a fundamental challenge to the world, but also its duration. Long-term commitments are necessary to control this disease. Faith-based organizations have proven their sustainability through continuous presence in human communities for centuries. They have withstood conflict, natural disaster, political oppression and plagues. Members of religious organizations have demonstrated commitment to respond to human need based on the moral teachings of their faith, and they do this voluntarily and over long periods of time. As HIV/AIDS continues to create a “caring deficit”—eroding the capacity of communities to care for those affected—faith-based organizations are appropriately positioned to sustain the ability to address the impact of the disease.

## **Recommendations For Future Collaboration**

We are asking governments to consider:

- Extensive support to FBOs (access to information, training and financial resources) in order that we may fulfil our role effectively.
- The importance of community involvement in prevention efforts to be acknowledged and promoted including community based health care as the basis for effective care and treatment.
- The continuation of all efforts for debt relief of highly indebted countries to make sure that a significant proportion of the released funds are used for the fight against HIV/AIDS.
- Governments of OECD countries should reintensify their efforts to meet the 0.7 % of GNP target for ODA. HIV/AIDS can only be controlled if serious efforts to overcome global economic inequalities will be undertaken.
- To ensure access to life saving drugs for the treatment of HIV/AIDS and its opportunistic infections including antiretroviral drugs. This should include the reduction of prices of patented drugs and the generic production in highly affected countries where appropriate.

We are asking UNAIDS and other UN organizations to consider:

- To involve FBOs in the planning, implementation and monitoring of HIV/AIDS programs at local, national and international levels.
- To call on religious leaders wherever possible to make use of their moral and spiritual influence in all communities to decrease the vulnerability and increase the capacity of people for responding to HIV/AIDS and to contribute to the highest level of care and support that is attainable.

We are asking the leaders of Faith Based Organizations to consider:

- That FBOs facilitate the development of programs that would eliminate all traditional and cultural inequalities that exacerbate the vulnerability of women and children.
- That resources and efforts be utilized to ensure that all people living with or affected by HIV/AIDS are receiving the highest possible level of care, respect, love and solidarity.

- That leaders and members at all levels are conscientized and trained about HIV/AIDS prevention and care.
- Strong advocacy efforts for fair and equal access to care and treatment according to need and not depending on economic affluence, ethnic background or gender.

The international community can take this opportunity offered by UNGASS to build on the unique resources offered by faith-based institutions given their local community presence, influence, spirit of volunteerism and genuine compassion facilitated by their spiritual mandate. Governments alone will not be able to launch the broad-based approach that is required to address this problem decisively. This Special Session on HIV/AIDS should lead to a broad coalition between governments, UN organizations, civil society, and NGOs including faith-based organizations. Given this joint cooperation and the necessary resources we can make a tremendous difference to the fight against AIDS in terms of prevention, care and treatment.

The faith-based organizations represented at this Special General Assembly on HIV/AIDS realize that they cannot claim to speak for all world religions and religious organizations. But we wish to express our sincere commitment to continue to work within our own communities for the dignity and rights of people living with HIV/AIDS, for an attitude of care and solidarity that rejects all forms of stigma and discrimination, for an open atmosphere of dialogue in which the sensitive root causes of HIV/AIDS can be addressed and for a strong advocacy to mobilize all the necessary resources for an effective global response to the pandemic.

## **This statement has been endorsed and supported by:**

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Institute for Islamic Studies  
International Christian AIDS Network  
International Council of Jewish Women (UK)  
National Coalition of American Nuns  
Presbyterian Church USA -  
International Health Ministries Office  
Religion Counts  
World Conference on Religion and Peace  
World Council of Churches  
World Vision International

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# “A Disease, Not a Sin”

## Religious Health Organizations in Africa Face AIDS

*Balwant Singh*



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Photo by George Mullis. © Reuters 2001

“I hope that all of you gathered here, and those you represent, want to break the silence barrier, that you are going to be ready—responsibly, urgently and in an engaging way—to speak and teach people about sex, about reproductive health,” Anglican Archbishop Emeritus Desmond Tutu told religious health organizations at the

13th International AIDS Conference, held in South Africa in July 2000. Addressing a symposium entitled *Religious Health Organizations Break the Silence on HIV/AIDS*, Tutu said that on HIV/AIDS and other sexual health issues, religious communities have often allowed their doctrines and moral

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and ethical positions to obscure the needs of those affected and at risk. Tutu urged religious health organizations to break what he termed a “conspiracy of silence” by rising to the challenge posed by Africa’s AIDS epidemic—creating alliances, overcoming constraints and actively engaging in sexual and reproductive health initiatives.

The symposium itself was part of just such an effort: It was organized by the African Regional Forum of Religious Health Organizations in Reproductive Health, an interfaith partnership of reli-

gious health organizations from eight African nations that shares information, expertise and resources and conducts advocacy regarding challenging issues such as HIV prevention and maternal morality. The forum, which was launched in September of 1999 by International Family Health, is working to “achieve accessible, sustainable, integrated, holistic, quality reproductive health care in Africa” that is “God-centered, respecting of human dignity, technically sound and sustainable.” The member organizations provide a variety

of services that include care and counseling for people living with HIV/AIDS, HIV prevention counseling, treatment for complications of incomplete abortion, and post-treatment family planning counseling and referral.

Among its members are the Anglican Church of Tanzania; the Bahá'í Community of South Africa; Catholic Health Services of Namibia; the Christian Health Association of Kenya; the Christian Hospital Association of Nigeria; the Christian Relief and Development Association of Ethiopia; the Churches Medical Association of Zambia; the Evangelical Church of West Africa; Islamic Medical Association, South Africa; the Federation of Muslim Women's Associations of Nigeria; Tanzania Episcopal Conference—CARITAS; the Uganda Protestant Medical Bureau; the Uganda Catholic Medical Bureau; and the World Conference on Religion and Peace, South Africa.

The forum has also developed close working links with the Christian Social Services Commission of Tanzania, Christian Medical Federation of South Africa and Namibia Catholic Bishops Commission, and collaborates with international faith-based development agencies such as Christian Aid and CAFOD in the UK, Catholics for a Free Choice and the Religious Coalition for Reproductive Choice in the USA, and multilateral organizations such as the World Council of Churches.

The creation of the forum is especially important in sub-Saharan Africa, where religious health organizations are major health care providers, especially in rural areas not reached by government health services. In some countries, hospitals and clinics run by religious organizations provide up to half of the health services received by the population. Their infrastructure

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*Opposite page, left: Physician Thomas J. Smith examines a man with AIDS at a Seattle hospital in June 1987.*

*Opposite page, right: A nun sits among children with AIDS at Nyumbani children's home 13 kilometres outside of Nairobi, Kenya, June 12, 2001.*

***"I belong to the Catholic church—and I am proud of that—  
but never have I heard that a Catholic priest has died of  
AIDS, although everybody knows it happens."***

***—Sister Dr. Raphaela Haendler, director of health at***

***Catholic Health Services in Namibia***

and extensive reach makes these organizations uniquely placed to initiate dialogue, drive policy change, and educate and mobilize their leadership and their communities.

The priorities of the forum are:

- To develop links among the forum members, including a website and publication of a regular newsletter *Forum Review*.
- To provide training and technical support to enable religious health organizations to establish comprehensive sexual and reproductive health programs, including databases of human resources, funding sources, and training information.
- To promoting inter-faith collaboration and dialogue with religious leaders on sensitive and controversial issues.
- To promote sound ethical practices and disseminate experience, best practices and lessons learned through publications and participation in appropriate inter-faith working groups.
- To develop tools for advocacy, training and sensitization of religious health organizations, religious leaders and secular organizations.
- To conduct research to assess how religious organizations have responded to international protocols such as those developed by the International Conference on Population and Development and to seek community views about the role and current response of religious health organizations to reproductive and sexual health needs.

The forum is currently organizing various activities around the 12th International Conference on AIDS and STDs in Africa to be held in Burkina Faso in December 2001, including a satellite symposium focusing on the role of religious health organizations in their communities. Other planned activities of the forum include national, regional and pan-African workshops; research to document the responses of religious health organizations to relevant international protocols in reproductive health and to develop recommendations for action; and leadership development and exchanges.

### **CHALLENGES FOR RELIGIOUS REPRODUCTIVE HEALTH ORGANIZATIONS IN AFRICA**

The organizations comprising the forum have identified several major challenges to their mission: encouraging religious institutions to face up to the reality of HIV/AIDS; changing attitudes about tackling controversial issues within faith-based organizations, and changing the perceptions of other organizations about religious health organizations.

While most faith-based organizations tend to be strong advocates for the care and welfare of the underprivileged and marginalized in society, these same organizations have often been silent about the issues surrounding HIV and AIDS, even as their congregations dwindle and their leaders attend one funeral after another. At the Durban Symposium, Sister Dr. Raphaela Haendler, director of health at Catholic Health Services in Namibia,

***While most faith-based organizations tend to be strong advocates for the care and welfare of the underprivileged and marginalized in society, these same organizations have often been silent about the issues surrounding HIV and AIDS, even as their congregations dwindle and their leaders attend one funeral after another.***

said, "I belong to the Catholic church—and I am proud of that—but never have I heard that a Catholic priest has died of AIDS, although everybody knows it happens. This is covered by silence.... and so we increase the stigma around HIV/AIDS."

The Durban Symposium also identified a number of other controversial issues—failure to acknowledge sex outside of marriage and the need for safe sex practices, greater empowerment of young people, violence against women, sexism and homophobia—that obstruct the constructive involvement of religious health organizations in sexual and reproductive health.

For example, in a letter to the forum's newsletter, Sheila Kibuka, director of Hope Africa, a Christian NGO in Kenya, described her concern about the position of the church with regard to condoms: "I am concerned that the church is very vocal against the use of condoms but offers very little as an alternative method of prevention based on Christian principles. I can testify that most of our Christian youth do not practice abstinence. I do not advocate use of condoms by our children, but I have a different way of looking at it: Suppose today we got an AIDS vaccine, which is a preventive measure—would not our Christian children be in line to receive it? Would we look at a vaccine as a way of promoting promiscuity as we look at the condom?"

A particularly challenging issue in Africa is the reality that the moral lead-

ership and influence of religious institutions are often used to maintain the status quo rather than to assist a process of positive change. For example, Reverend Gideon Byamugisha of the Anglican Church in Uganda noted during the recent AIDS symposium that lawful, religiously sanctioned sex within marriage is not always safe, especially for women. "Safer sex should not replace morality, but neither should morality replace safer sex," said Byamugisha.

Another major challenge is ignorance. Participants in the Durban Symposium noted that in many places faith-based groups are unaware of what is going on in their communities and of those in their congregations who have HIV. For example, sexual activity among young people is often far greater than they imagine, and "legal" sex within marriage, which is considered the only moral alternative, is not always safe because young virgin girls often marry older infected men. Dr. (Rev.) Dan Kaseje, a moderator at the Durban Symposium, wrote in the forum's newsletter: "Within the religious organizations and communities, the silence barrier around the disease has arisen mainly because of the tension between governing doctrines and the realities of everyday life. . . .because the disease is linked to death and to sexuality—a 'no-go' sensitive area for many faiths."

Religious hierarchies and leaders need to find a way to reconcile their reli-

gions' moral and ethical frameworks with the reproductive and sexual health needs of the people they serve. Those involved in the forum feel that they cannot afford to be silent any longer and must break the silence on HIV/AIDS. To do this, they need leaders who are committed to justice, equity and access to affordable health care for all people regardless of faith, ethnicity or disease.

Addressing such internal challenges will also help religious health organizations in the forum work with secular colleagues. Among secular and government health groups working on sexual and reproductive health, there is a widely held perception that religious health organizations are "unsuitable" partners because the moral and ethical values informing their work are viewed as being in conflict with the work of their secular counterparts. This has resulted in a lack of involvement in mainstream reproductive and sexual health programs by religious health organizations—an exclusion that the forum aims to rectify.

## **WHAT CAN RELIGIOUS ORGANIZATIONS DO?**

Despite these challenges, religious leaders and organizations can make a significant contribution to HIV prevention and to promoting compassion, care and support for people living with HIV/AIDS and their families. As participants in Durban pointed out, religious institutions have a captive audience at least once a week and this opportunity should not be wasted. Religious organizations also have closer links to the community than many other organizations. They play an important role in caring for people who are sick, training and educating health workers and community members, and reducing the stigma and discrimination against people infected with or affected by HIV/AIDS.

For example, Rev. Byamugisha notes that support from his religious hierarchy has enabled him to be open about his status as an HIV-positive clergyman and to continue to work for the church. In turn, Byamugisha's actions have helped the Anglican church in Uganda



acknowledge young people's sexuality, and, as a result, the church has been able to implement effective community programs to reduce rates of HIV infection and to tackle the stigma and discrimination associated with AIDS in Africa.

With their extensive networks, religious health organizations have the capacity to provide reproductive and sexual health care to many of Africa's poor and underserved communities. They also have credibility at the community level—in part because of the quality of care they provide and in part because of their values and commitment to serving the poor—and are therefore uniquely placed to educate their communities.

For example, the Federation of Muslim Women's Associations of Nigeria (FOMWAN), a federation of over 150 Muslim associations from across Nigeria, is strategically placed to reach out to an estimated 20 million Nigerian women, most of whom are unemployed, indigent and reside predominantly in rural areas. Its member associations implement health and other projects that promote the spiritual and physical welfare of the communities they serve. Similarly, ECWA, one of the largest non-governmental organizations in Nigeria, reaches over four million people. It reaches the underserved populations of Nigeria, especially children and women with limited access to quality reproductive health services. ECWA serves all Nigerians irrespective of religion, ethnicity or class.

Forum members can also work with community and religious leaders, and health professionals and policymakers from religious institutions, to improve access to reproductive and sexual health services. Catholic AIDS Action, the national program of the Catholic church in Namibia, offers care to Catholics and non-Catholics through 15 hospitals and health care institutions and 31 affiliated schools and hostels. The focus is on recruitment and training of home-based family care volunteers—mostly church-going women—who visit the sick, provide practical support, and care for orphans.

The program also emphasizes the importance of making people with HIV/AIDS feel welcome by the Catholic church. At the launch of Catholic AIDS Action in August 1998, the Archbishop of Windhoek stated, "AIDS is a disease, not a sin." Sister Raphaela Haendler, director of health at Catholic Health Services in Namibia, said, "Only afterwards did I realize how important this statement from a church leader was to many believers."

In September 1999, Catholic AIDS Action organized a "Conference of Hope" in Windhoek, which included a healing service and a cloth of remembrance for those who had died. Many HIV-positive people who participated

felt that it was the first time at a gathering in Namibia where they were accepted and could openly talk about their feelings, worries and fears.

As Archbishop Tutu concluded at the Durban Symposium, religious organizations have the capacity to do a tremendous amount, especially if they come together: "We are going to have to teach people about 'safer sex'.... we are going to have to speak about condoms and seek to make it possible for people to have access to reproductive health," said Tutu, adding, "We have a captive audience at least once a week and we are in touch in a way that few organizations are.... we can make a difference for so many people who rely on us, and God relies on us!" **C**

## The Global Reproductive and Sexual Health Situation

Worldwide up to 150 million women who want to limit or space their pregnancies lack access to effective contraception, and an estimated 75 million unwanted pregnancies occur each year. One woman dies every minute from complications of pregnancy, childbirth and unsafe abortion, and a woman in Africa is 500 times more likely to die from obstructed labor, hemorrhage or postpartum infection than a woman in the USA or Europe.

An estimated 20 million unsafe abortions are performed worldwide each year—95% in developing countries—and unsafe abortion is responsible for one in eight maternal deaths. In many African countries, teenage mothers account for a disproportionate share of maternal death and illness. A third of hospital patients receiving treatment for abortion-related complications are adolescents.

In Nigeria, for example, 20,000 women die every year from complications of unsafe abortion. As Dr.

Ola-Golden, medical director of St. Gerard's Catholic Hospital, explains: "Poverty leads many young women into sexual relationships. When they fall pregnant they often resort to unqualified quacks for terminations. Most end up having septic or incomplete abortions causing severe bleeding and anemia. Many die because they are too scared to come for treatment or leave it until it is too late."

Over 36 million people worldwide are living with HIV/AIDS, three-quarters of them in sub-Saharan Africa. Every day 15,000 people are newly infected with HIV; 60% of new HIV infections are among young people aged 15-24 years, mostly in African countries. Globally, each year, there are an estimated 333 million new cases of sexually transmitted infections. Women are five times more likely to be infected than men, and sexually transmitted infections increase the risk of complications in pregnancy, infertility, and cervical cancer.

## FAITH-BASED RESOURCES ON HIV/AIDS

### International Resources

#### HIV/AIDS Ministries Network

Health and Welfare Ministries, General Board of Global Ministries, The United Methodist Church  
Room 330,  
475 Riverside Drive  
New York, NY 10115  
USA  
Telephone: 212 870 3871  
Fax: +1 212 870 3624  
TDD: +1 212 870 3709  
E-mail: hwmin@gbgm umc.org  
Web: <http://gbgm umc.org/health>

#### The Global AIDS Interfaith Alliance (GAIA)

The Presidio of San Francisco  
PO Box 29110  
San Francisco, CA  
USA

Telephone: +1 415 461 7196  
Fax: +1 415 461 9681  
E-mail: [info@thegaia.org](mailto:info@thegaia.org)  
Web: [www.thegaia.org](http://www.thegaia.org)

### African Resources

#### Churches Medical Association of Zambia

P.O. Box 34511  
Lusaka, Zambia  
Telephone: +260 1 237328/  
Fax: +260 1 223297  
Contact Person: Dr. Simon Mphuka  
E-mail: [mphuka@zamnet.zn](mailto:mphuka@zamnet.zn)

#### Lutheran Development Service

Mantsholo Ka-Scheze  
Mbabane, Swaziland  
Telephone: 363638/  
+268 6045260  
Fax: +268 404 3870  
Contact Person: Mamane Sukate  
E-mail: [eds@zealnet.co.sz](mailto:eds@zealnet.co.sz)

#### Muslim Relief Association of Ghana (URAC)

P.O. Box 274  
Mamprobi Accra  
Ghana  
Telephone: +233 21 24 8068  
Contact person: Wahab Adam or Alhaji S.A. Wahab  
E-mail: [murag@africaonline.com.gh](mailto:murag@africaonline.com.gh)

#### Christian Health Association of Nigeria (CHAN)

P.O. Box 29133  
Ibadan, Oyo, Nigeria  
Telephone: +234 02 31 04 483  
Contact person: Vincent Ohighor

#### Christian Health Association of Lesotho (CHAL)

P.O. Box 1632  
Maseru 140 LESOTHO  
Telephone: +266 312500

Fax: +266 310314  
Contact Person: Lois Furg; V.M. Khadi  
E-mail: [chal@lesoff.co.za](mailto:chal@lesoff.co.za)

#### Islamic Medical Association of South Africa—Durban

P.O. Box 48786  
Qualbert 4078  
Durban, South Africa  
Telephone: +27 031 2072250  
Fax: +27 031 2072260  
Email: [iimakzn@eastcoast.co.za](mailto:iimakzn@eastcoast.co.za)

### US-Based Resources

#### AIDS National Interfaith Network (Domestic US)

1400 I Street, NW,  
Suite 1220  
Washington, D.C. 20005  
Telephone: +1 202-842-0010  
Fax: +1 202-842-3323  
Contact Person: Rev. Ken South;  
Scott Harrison

E-mail: [anin@charitiesusa.com](mailto:anin@charitiesusa.com)

#### Council of Religious AIDS Networks

P.O. Box 4188  
East Lansing, MI 48826-4188  
USA  
Contact Person: Dr. Jon A. Lacey  
E-mail: [AIDSfaith.com](mailto:AIDSfaith.com)  
URL: [www.aidsfaith.com](http://www.aidsfaith.com)

### Online Resource

<http://www.thebody.com/religion.html>

*This site offers extracts from Jewish, Christian, Buddhist and interfaith publications offering ways help people with the disease and current news on local, national, and global conferences concerning HIV/AIDS from an interfaith perspective.*

## ASK THE QUESTIONS.

**If I get raped, will my local hospital give me emergency contraception? Can I be a practicing Catholic and still support legal abortion? How do Catholics in other countries feel about contraception? Will I be excommunicated if I have an abortion? Do Catholic women have abortions? How do Catholics feel about abortion? Is papal teaching on abortion infallible? Are there Catholic theologians or clergy that dissent from the Vatican's position on contraception and abortion? Can I be a good Catholic without obeying the church hierarchy's teaching on birth control? How do Catholic members of Congress vote on choice issues? Do Catholics support US aid programs for international family planning? Is it appropriate for my bishop to tell me how to vote? Should the Vatican hold more power at the United Nations than other world religions? Will my health plan cover tubal ligations or birth control? If my community hospital merges with a Catholic institution, will I still be able to receive family planning services? Can my employer keep me from getting access to contraception? Is it legal for my pharmacist to refuse to fill my birth control prescription? How can I make my voice heard as a**

**FIND THE ANSWERS!**  
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# The Plight of Women and the Girl-child in Africa in the Age of HIV/AIDS

*Anne Nasimiyyu-Wasike*

In many traditional African societies women were assigned inferior status. In Kenya and in the whole developed and developing world, women are still experiencing many forms of discrimination in the cultural, legal, political, economic, religious and social spheres. Now with the advent of HIV/AIDS, women are bearing the brunt of this pandemic. According to Nation AIDS and the STD Control Program, 22% of young girls between 15-19 years old attending ante-natal clinics in Kenya are HIV positive while only 6% of young boys in the same age group are HIV positive. Thus there are more infections in teenage girls than in boys of the same age.

Women who are infected with HIV are looked upon as loose women whose sexual promiscuity has been justly punished, though it has been established that more than 50% of women contract HIV/AIDS from their husbands or their only boyfriends. Traditionally, married women are unable to question their husbands' extra-marital affairs. In some cultures men are encouraged to have premarital sex and multiple partners even in marriage, whereas women must remain


virgins until, and be faithful in, marriage. This has made marriage one of the main risk factors for women in sub-Saharan Africa with regard to HIV/AIDS.

In case of infection, the male partners often reject their female partners, even their wives. (On the contrary, the female partners almost invariably accept the role of caretakers of a male partner with AIDS.) Often these women have no way of earning a living. Single mothers both in urban and rural areas may be forced in sexual alliances in order to maintain their families.

Women must fight against the lopsided cultural, legal, economic, and social confinements that render them vulnerable and at risk. The traditional social-cultural impediments which give women no rights over their reproduction must seriously be challenged. Women and young girls are challenged to participate in the survival of their communities and clans. Our communities have to face the truth of HIV/AIDS and change some of traditional cultural practices and beliefs for the sake of saving lives.

■ The vulnerability of women to AIDS must be addressed because it is part of the general problem of victimiza-

tion of women and discrimination against women in Kenya and in the world at large. Women have to be given education to dispel ignorance and be able to make informed choices about their lives and concerning their sexuality.

- Objective study must be given to all cultural practices that expose women to HIV/AIDS infection, for example levirate marriages, widow inheritance, polygamy, and female circumcision. Some of these practices should be banned outright.
- Educate men and boys on the sexual exploitation of women and their own self-respect and protection against HIV infection.
- Empower women economically by strengthening their training and job opportunities and establishing savings and credit programs for both rural and urban slum dwellers.
- Provide health services for women in rural and urban settings. These services should be geared towards women's needs, including STD and HIV/AIDS prevention, health education and counseling. 

*Anne Nasimiyyu-Wasike is a professor at Kenyatta University in Nairobi, Kenya.*

*This article is condensed from a speech given at the 45th Session of the UN Commission on the Status of Women, March 6, 2001.*

# Stop the Vatican's Anti-Gay Crusade

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*Peter Tatchell*

The pope's ceaseless advocacy of discrimination against homosexuals makes him the world's most prominent and persistent opponent of lesbian and gay human rights. Without shame or remorse, the Catholic church preaches a gospel of homophobia rarely seen in the modern world. The Vatican does not advocate the killing of queers, but its doctrine of prejudice and discrimination

encourages the guilt that causes some homosexuals to commit suicide and legitimates the intolerance that motivates anti-gay violence. Pope John Paul II gives succour and comfort to homophobes everywhere.

The most recent example of the Vatican's war against queers is its attack on the legalisation of same-sex marriage by the Dutch parliament. "The Catholic church contests these revolutionary innovations, which in the name of freedom, seek to legitimise a union regarded by the universal consciousness as going against nature," said the official Vatican newspaper, *L'Osservatore Romano*. "The family in its

natural and Christian model is undergoing a serious affront and is losing its role as the base of society," the paper added. It went on to denounce as "arrogant egalitarianism" the legislation granting lesbian and gay partners the "same legal rights and benefits as normal couples."

Indeed, Pope John Paul II has, himself, personally criticised the new Dutch law, insisting that no relationship other than marriage between a man and a woman should be legally recognised. "The Catholic church is deeply attached to the view that marriage is a fundamental human reality and the basic unit of society," he declared.

The Vatican is the ideological inheritor of centuries of homophobia, readily endorsing such persecutions as bans on gays in the military, the sacking of

gay teachers and youth workers, the denial of gay sex education and safer sex advice, the criminalization of consenting gay relationships and prohibitions on the fostering and adoption of children by same-sex couples.

The pope's outburst against homosexual marriage in the Netherlands is merely the latest in a long line of Catholic attacks on lesbian and gay civil rights. We are one of the last minorities that the Vatican still regards as fair game for its venomous intolerance.

After centuries of collusion with anti-Semitism, in 1998 the papacy finally felt obliged to offer an apology to Jewish people; apologizing especially for those Catholics who collaborated with, or failed to resist, the Third Reich. However, the pope pointedly refused to condemn the failure of lead-

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*Peter Tatchell is a London-based gay and human rights campaigner. For more information about his campaigns, visit [www.petertatchell.net](http://www.petertatchell.net)*



ing clerics, including his predecessor, Pope Pius XII, to speak out against Nazism. Nor was there any acknowledgement that the Catholic church backed the wartime Jew-murdering regime in Croatia, or that after the war church officials in Rome helped Nazi war criminals escape to South America. In short, the Vatican's so-called apology white-washed Catholic connivance with fascism and anti-Semitism.

If the pope cannot give an unequivocal apology for church anti-Semitism, the likelihood of an apology for homophobia is less than zero. Unrepentant and heartless as ever, the Vatican shows not a shred of sorrow for its past and present persecution of lesbians and gay men. In medieval times, "abominable sodomites" were burnt at the stake on the orders of Papal Inquisitors. As recently as the nineteenth century, homosexuals were still being executed in many western countries (including Britain)—with the full blessing of the Catholic church. This persecution isn't over yet. The Vatican is still crucifying queers.

The Catholic Catechism condemns homosexual acts as a "grave depravity," "seriously debased," "intrinsically disordered" and "contrary to natural law." In 1992, the Vatican officially rejected the concept of lesbian and gay "human rights," asserting that there is "no right" to homosexuality. This was spelt out in a proclamation entitled "Some Considerations Concerning The Catholic Response To Legislative Proposals On The Non-Discrimination Of Homosexual Persons." It argued that the civil liberties of lesbians and gay men can be "legitimately limited." While condemning "unjust" discrimination, the Catholic leadership declared that some forms of anti-gay discrimination are "not unjust" and may even be "obligatory." This just and obligatory discrimination against homosexuals should be exercised, it said, in "the consignment of children to adoption or foster care, in employment of teachers or coaches, and in military recruitment."

Most shocking of all, the Vatican declaration claimed that when lesbian and gay people press for civil rights

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children by same-sex couples.***

"neither the church nor society should be surprised when...irrational and violent reactions increase." This implies that by asking for human rights, homosexuals encourage homophobic prejudice and violence. In other words, we bring hatred upon ourselves and are responsible for our own suffering. The Catholic church is, it seems, blaming the victims of homophobia, not the perpetrators.

Four years later, in 1996, the Vatican newspaper, *L'Osservatore Romano*, explicitly urged Catholics to vote against political candidates who back equal rights for lesbians and gay men, describing homosexual equality as a "deviant trend."

Many grassroots Catholics thankfully reject this bigotry disguised as theology. They no longer blindly follow the Vatican's edicts. But millions of other Catholics around the world—both voters and legislators—are influenced by these Papal-sanctioned instructions to support homophobic discrimination.

Throughout the late 1990s, a series of proposals by the European Parliament to remedy legal discrimination against homosexuals were savagely condemned by the pope as an "attack on the family." The Catholic hierarchy also tried, in 2000, to pressure the European Union to drop its Charter of Fundamental Rights. Describing the document as "godless," the Vatican claimed its acceptance would cause "moral and social harm"

by paving the way for same-sex unions and gay parenting. Cardinal Joseph Ratzinger, head of the Congregation for the Doctrine of the Faith (which used to be known by its old name, The Inquisition) declared that by opening the door to legal rights for homosexuals the charter had "departed from the beaten track followed by the moral history of humanity."

The moral and ideological message is unequivocal: queers are immoral deviants, they threaten the welfare of society, and they are not entitled to equal human rights. Just like every other ideology of persecution, it is incompatible with democracy and human rights. **G**

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# We are Women, We are Catholic, and We are in the Struggle

## Catholics for the Right to Decide in Mexico

With 2,000 kilometers of territory and a population of 98,000,000—almost 90% of whom are Catholic—Mexico is the scene of an ongoing struggle between modernity and poverty. The general belief is that religious diversity is a sign of the times. Mexico was the first Latin American country to establish the constitutional separation of church

and state—even though the people revere the Virgin of Guadalupe, the symbol that unites even the poorest of Mexicans.

The Mexican Constitution states, “Men and women are equal before the law. This equality will protect the organization and development of the family. Each individual has the right to determine the number and the spacing of his/her children in a free, responsible, and informed manner.” This guarantee was amplified when Mexico adopted the final conference report from the International Conference on Population and Development held in Cairo in 1994 as its

official policy on reproductive health.

However, the lives of Mexican women—particularly those who are mothers—are characterized by exclusion, neglect and discrimination. Large numbers of women suffer from an inconsistent health care policy: more than 4,000 women die every year from uterine cancer and death during childbirth is still a grave problem. Teenage pregnancies account for 10% of the almost 2,000,000 births each year. The practice of firing women who become pregnant is so common that legislation to prohibit the practice has been proposed. And, despite the government’s education efforts, the majority of

Mexican women are not aware of their sexual and reproductive rights.

Abortion is still illegal in Mexico, despite the fact that 70% of Mexican women believe that it is possible to disagree with the church on this matter and still be a good Christian. Figures from the National Population Council show that 90% of the women who choose abortion regard themselves as Catholics and Christians.

As a result, abortion—a simple procedure if performed using modern techniques—is transformed into one of the leading causes of maternal injury and death. It is officially recognized that 800,000 clandestine abortions are

performed every year, and that this practice results in the hospitalization and incapacitation of millions of women, especially the poorest. Induced abortion results in more than 1,500 deaths annually, making it the fourth leading cause of maternal death.

This situation is further complicated by the ambiguous role that religion, particularly Catholicism, plays in Mexico, a society both secular and profoundly religious, liberal and simultaneously conservative. The constitutionally imposed separation of church and state imposed in 1917 underwent basic changes just nine years ago, when church-state relations of a new type were established. The ministers, missionaries, and nuns of the various churches are now recognized as de facto citizens, but the assets of the churches are administered and their actions overseen by the minister of the interior or the secretariat of government. This new situation has led to unending negotiations and surly discussions. The Catholic church, excluded for decades, is working to regain public influence to affect the gains made by women, specifically in the defense of sexual and reproductive rights.

### **A MILESTONE IN THE ONGOING DEBATE**

Within this context, the intervention of Catholics for the Right to Decide/Mexico has been a milestone. The discourse and actions of this group have provided a renewed focus on both the old and new demands for sexual and reproductive rights.

***The Catholic church, excluded for decades, is working to regain public influence to affect the gains made by women, specifically in the defense of sexual and reproductive rights.***

CDD/Mexico began working in Mexico in 1987 and was established as a civic association in 1994. CDD/Mexico is part of an international network of groups working toward similar goals: Catholics for a Free Choice, founded in the United States in 1973; Catholics for the Right to Decide in Latin America, established in Uruguay in 1987; Catholics for the Right to Decide in Brazil, established in 1993; Catholics for the Right to Decide in Bolivia, established in 1998, and CDDs in Buenos Aires and Chile.

Today, CDD works democratically and jointly for a woman's right to control her own body and for the full enjoyment of her sexuality without discrimination based on class, race, ethnicity, creed, age or sexual preference. CDD is an autonomous movement committed to the search for social justice and a change in the cultural and religious patterns prevailing in our society. Its efforts are focused on achieving equity in gender relations, both in society and within the church.

In direct contrast to the Catholic church's position on sexuality, Catholics for the Right to Decide seeks to eliminate the concept that sex is a sin and to

dispel the myth that the only and inevitable destiny of woman is motherhood. CDD wants to lead society toward recognition of women's right to free and voluntary motherhood, with a view to reducing the incidence of abortion and maternal mortality.

### **WHERE THERE IS DOUBT, THERE IS FREEDOM**

CDD/Mexico is distressed by the contradictions in the church. On abortion, the church's contemporary position seems to ignore the wide range of opinions that have emerged in moral theology throughout the history of Catholicism. Saint Thomas Aquinas (1127-1174), for example, believed in "delayed homanization" (the soul's entry into the body after conception), and declared that abortion in the early stage of pregnancy is not murder because homanization occurs 40 days after conception in males and 80 days afterward in females. Saint Augustine (354-430) was certain that ensoulment does not occur until some time after conception, and as a result he maintained: "According to the law, the act of abortion is not deemed to be homicide, because one cannot say that there is a living soul in a body that lacks sensation, since the flesh has not yet been formed and thus has no capacity to feel." The majority of the theologians of that era shared these views.

Furthermore, while the church advocates mercy and compassion as essential human values, it remains blind to threat of a lethal pandemic on the rise among Mexican women: AIDS. Since the Constitution was amended to end the separation of church and state, the Catholic hierarchy in Mexico has

***Seventy percent of Mexican women believe that it is possible to disagree with the church on abortion and still be a good Christian, and official figures show that 90% of the women who choose abortion regard themselves as Catholics and Christians.***

# CDD/Mexico's Mission and Goals

- To promote reflection on the relationship between men and women, sexuality, and reproduction from an ethical point of view, based on justice.
- To reaffirm the moral capacity of men and women to make serious and responsible decisions in their lives, promoting their empowerment and autonomy.
- To make a commitment to women's dignity, quality of life, sexual and reproductive health.
- To work for the equality of men and women in the Catholic church and in society as matters of democracy, social justice and human rights.
- To incorporate these values in Catholic thinking and teaching, in feminist analysis, in community life and in public policy through public dialogue, education and research.
- To promote sexual and reproductive rights and eliminate Catholic taboos pertaining to them.
- To recognize the value of the human body and pleasure.
- To improve the conditions of life and the sexual and reproductive health of women.
- To link our work with that of other movements committed to the building of a democratic society with social justice.
- To create the necessary conditions for ethical-religious contemplation of the issues pertaining to sexuality, human reproduction, religion, and human rights through public discussion in both society and the churches.
- To encourage a more profound debate on the voluntary interruption of pregnancy and expansion of the ethical, medical, and legal aspects of the discussion.
- To lead society toward recognition of the right of women to free and voluntary motherhood, with a view to lowering the incidence of abortion and maternal mortality.
- To fight for the decriminalization and legalization of abortion.
- To raise the awareness and ensure the inclusion of civic groups working for sexual and reproductive health, education, and human rights, as well as the media and legislators, with regard to the need for a change in the cultural patterns prevailing in our society.

## Contact Information

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Mexico City, D.F.,  
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been waging a conservative campaign to prohibit the use of condoms to prevent HIV/AIDS and pregnancy. This campaign, which has slowly gained ground, defines its opponents as "enemies," and works systematically and publicly against the government's reproductive health policies.

For many Catholics, including those who are politicians, the church's position that abortion is never morally justifiable has ceased to be acceptable. Faced with the difficult decision of terminating a pregnancy, many women follow the dictates of their consciences and choose this course as a valid moral decision. Most Catholics do not believe the church should impose a theological agenda that incorporates conservative values and dismisses the individual moral capacity to make decisions. Almost all other religions have come to understand that family planning and contraception are major elements in the exercise of responsible parenthood. Therefore, one basic goal of CDD/Mexico's work is to prevent the conservative church hierarchy, with its extreme positions on contraceptives, sterilization, and abortion, from continuing to influence educational content.

The work of CDD/Mexico will enable all women facing serious problems in their intimate lives and in their sexual practices to find a new kind of freedom. It is necessary that both men and women in the Mexican population recognize the value of pleasure and eliminate the guilt associated with sexual relations unrelated to reproduction. In this way, both men and women can enjoy pleasurable, responsible, and healthy sexual lives, limiting and avoiding sexually transmitted diseases, unwanted pregnancies, and abortions. The time is at hand to campaign for the rights of Catholic men and women to have satisfactory sexual lives that do not have procreation as their goal and to experience this without being excluded from the church. As Pope John Paul II has said, "One who does not obey the dictates of his [sic] conscience cannot take responsibility for his actions." 



# Resisting the Silence

## Reflections on Joan Chittister's Decision to Speak

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*Rosemary Radford Ruether*

*Ed. Note: In 1995, Pope John Paul II issued the encyclical Ordinatio Sacerdotalis, which prohibited even the discussion of women's ordination. On June 30, 2001, Benedictine Sister Joan Chittister spoke at the first international conference of women's ordination groups, in direct defiance of a Vatican order. In consultation with her community, Chittister's superior, Sister Christine Vladimiroff, also disobeyed the Vatican by refusing to impose on Chittister an official injunction barring her from presenting at or attending the conference. All but one of the 128 active nuns in the community signed a letter from Vladimiroff explaining her decision not to prohibit Chittister from attending the conference, and 35 nuns also requested that any punishment given to Chittister also be meted out to them.*

In reading this summer's reports about Sister Joan Chittister's decision to speak at the Women's Ordination Worldwide conference in Dublin after having been forbidden to do so by the Vatican, I was struck by the long, agonizing struggle that she went through to make this decision. It was almost as

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if she and the prioress of her order, Sister Christine Vladimiroff, who declined to give Chittister the Vatican's silencing order, had to vindicate the seriousness of their decision. They told us of the long process of discernment they went through, how they discussed and prayed over the decision together. They surely wanted to present a different model of how decisions are made in community, in contrast to the top-down orders of the Vatican. Perhaps they also were resisting the assumptions of male church leaders that women's decisions are made frivolously, impulsively, by showing the depths of their process of prayerful consultation, seeking the guidance of the Holy Spirit and the collective wisdom of the group. All this is understandable. Much is at stake personally

and as members of their community; their identities, their livelihoods, their standing in the church.

One fears, however, that the Vatican leaders care not a whit for the prayerfulness of their decision. It must have been evident immediately that the Vatican order was so outrageous that it called for some form of resistance. The only question was how to do so most effectively. In my view, the Vatican has no right to "agonize" us for one minute. By what prerogative does this leadership class assume they can tell women and men that they may not discuss the issue of women's ordination? Is our capacity for ordination not something which women can discuss? Are the underlying assumptions that women's humanity lacks the capacity to image God, to represent Christ, to be priest of the church, not something that women can debate? Are these assumptions that maleness is apt for such representation of God and femaleness is not beyond inquiry and questioning?

Perhaps the real issue behind the Vatican's command is the very untenability of the arguments that exclude women from ordination. These arguments assume an obsolete anthropology of women's lack of full humanity, their status as an incomplete human, as a "misbegotten man," in Thomas Aquinas' language derived from Aristotle's mistaken theory of biolog-

ical reproduction. One has only to discuss these theories to reveal their absurdity, their lack of credibility. Perhaps it is just this lack of credibility, the inability to make a convincing argument, that lies behind the silencing. For to discuss the rationale of the exclusion of women from ordination is itself to reveal its dubiousness to people who are accustomed to seeing women achieve the highest levels of education and leadership today.

Therefore the Vatican ducks critical examination by forbidding public debate. But in doing so it also shifts the issue. Instead of discussion of ordination itself, of the nature of priesthood and of women, and their compatibility, the issue becomes authority and obedience. The finality of authority judges what is thinkable, rather than reasonable thought judging what is authoritative. The Vatican claims to represent God, Christ, as ultimate truth and power in one. Its commands supercede thought. But thereby the Vatican actually puts itself in deeper jeopardy. To

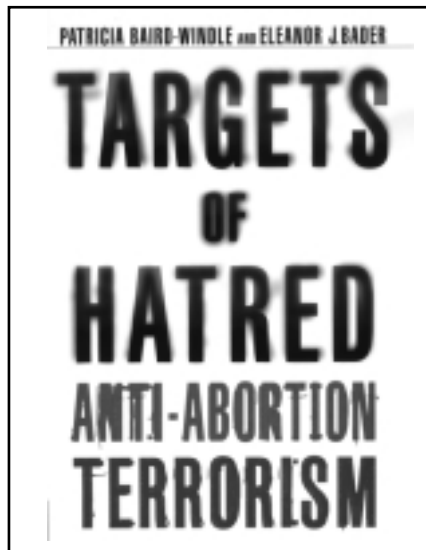
***The Vatican backs up its orders with formidable threats. . . . The arrogance of such presumptions is breathtaking. The very exaggeration of the threats throw the claims of ultimate power into doubt.***

question its orders is now to question its very claims to represent God and the church.

The Vatican backs up its orders with formidable threats. It claims it may

expel us from our religious communities of many decades, cut us off from communion with God, deny us the sacraments. Really? Does it really believe that it can cut us off from our friends and from friendship with God? The arrogance of such presumptions is breathtaking. The very exaggeration of the threats throws the claims of ultimate power into doubt. Such claims excite disgust, contempt. One is even a bit embarrassed by the rant that seeks to conceal, but only displays, the nakedness of the king.

Surely we can do better than this as church, as those who seek to be the People of God. The key sign of being church is commitment to conversion to that sort of relationship by which we treat each other with respect as fellow human beings, made in the image of God and called to community with each other in God's grace. The Vatican discredits its claim to represent Christ when it behaves in a way that suggests that it has little understanding of what it means to enter that process. **C**



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## TARGETS OF HATRED

### *Anti-Abortion Terrorism*

Patricia Baird-Windle and  
Eleanor J. Bader

"[A] piercing wake-up call and useful reference for any women's rights activist or civil libertarian."  
—*Publishers Weekly*

"For the first time, there is a chronology of anti-abortion violence. The book also provides in great detail and for the first time a Who's Who and What's What in the anti-abortion movement...but its most important contribution...is the voices of doctors, clinic workers, technicians, clinic owners and their families bearing witness to their day-to-day heroism."  
—*Women's Review of Books*

*Targets of Hatred* charts the development of the anti-abortion movement in North America, examining the roles played by the Catholic Church, Fundamentalist Protestants, and Republican and Democratic parties. The voices of more than 190 providers in the United States and Canada—clinic owners, doctors, nurses, technicians, and their families—give readers an in-depth look at what it means to work in a field in which arson, bombings, harassment, and killing are routine. Filled with dramatic, eye-witness accounts of anti-abortion terrorism, the book demonstrates law enforcement's failure to stem the violence and is a call to arms for concerned individuals.

## Book Reviews

# The Roots of Violence

TARGETS OF HATRED:  
ANTI-ABORTION TERRORISM

Patricia Baird-Windle and  
Eleanor J. Bader  
(Palgrave, 2001. 416 pp.)

by Marilyn Wilson

*Targets of Hatred: Anti-Abortion Terrorism* is a detailed chronicle of anti-abortion violence beginning before *Roe vs. Wade* to the present. In it, authors Patricia Baird-Windle and Eleanor J. Bader have chosen to tell the story of this violence and its victims in a personalized fashion because, until now, these stories have been lost in the discussion of abortion politics. The authors' goal in writing this book is to rectify this oversight, and they have more than succeeded in achieving this goal.

*Targets of Hatred* is an encyclopedic account of assaults on abortion providers and how this violence has historically been handled by law enforcement authorities. The book is organized in five-year increments and uses short, vignette-like entries to illustrate the pattern of developing violence and its geographic spread. It attempts to show a clear trajectory "that moves from vandalism and harassment to torment and torture." It goes beyond a mere listing of violent events and provides a detailed account of the struggle for abortion rights in the United States and Canada from events leading to the legalization of abortion to the current status of abortion care. The stories of attacks on clinics and personnel are incredibly moving, as they are told in the first person by those who have suf-

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fered personally at the hands of anti-abortion zealots. At times it reads like a suspenseful mystery, leaving the reader wondering what the next onslaught will bring.

*Targets of Hatred* does an excellent job of delving into the roots of anti-abortion terrorism. The book is predicated on the belief that religious extremism is the basis of anti-abortion violence. Consequently, it is impressive in its timeliness, as the entire world struggles with religious fanaticism and the terrorism perpetrated by those who claim that "God's will must be done." In the aftermath of the terrorist attacks on the US on September 11th, one cannot help but be struck by the clear parallel between all religious-based terrorism, be it international or domestic.

The authors note that to religious fanatics, liberty and freedom are fright-

ening, and that the power of these fanatics, which stems from their religious beliefs, is all-encompassing. These religious extremists are anti-democracy, anti-freedom and anti-human rights, especially the right to reproductive choice. They are determined to bring about their form of morals through violence and are obsessed by a sense of martyrdom that stems from a deep religious fervor.

Other similarities can be drawn between anti-abortion and other religious-based terrorism. Both come from movements that are well organized and financed. In both cases, there are manuals and training camps to teach activists how to target victims and execute crimes against them, and extremists who resort to violence are sheltered by fellow believers. In another similarity, laws have proven inadequate not only to apprehend and convict these criminals, but also to prevent further acts of violence.

However, *Targets of Hatred* also demonstrates that the similarities between domestic and international terrorism stop when we look at society's reaction to it. Police, politicians and courts have been notoriously slow to react to cases of antiabortion violence, but swift in the case of an international attack. One is left to question if things will change in the wake of September 11th. The book leaves us with the hope that those in positions to take action against terrorism from abroad will now take steps to protect and defend the courageous people who continue to defend a woman's right to reproductive choice.

Another strong underlying theme of this book is its analysis of abortion rights in the context of social change in the 60s and the feminist movement of the late 60s and the 70s. The authors point out that since *Roe vs. Wade*, pro-

choice organizations have continued to lobby against abortion restrictions, but have been virtually silent on the issue of violence against abortion providers. This information, although a digression from the recounting of attacks on abortion services, does offer some understanding of why anti-abortion violence has continued for over 25 years.

For those monitoring the anti-choice movement as it erodes access to abortion care and moves into new areas of influence such as new reproductive technologies and stem cell research, *Targets of Hatred* is an essential read. Beyond those working in the abortion field, it presents a body of knowledge that is both relevant and important to an understanding of religious extremism, whether domestic or international. It is therefore an

important book to all who are concerned with the roots of terrorism and the need to counter it in any form.

In some ways, *Targets of Hatred* is not an easy read because details of anti-abortion attacks had to be carefully researched and explained to avoid litigation. The describing of events in chronological order is at times a bit disjointed and confusing to the reader. Presenting the material in this way does, however, serve to demonstrate the extent to which anti-abortion violence has traumatized those who work to defend reproductive choice. In the words of the authors, this is because year after year these people “find themselves returning to court to fight meritless lawsuits and getting injunctions enforced and lawbreakers arrested ... mired in holding their ground they

feel frustrated and betrayed.”

Reading this book as a Canadian, it became obvious that terrorism knows no borders. Those who provide abortion care and the women they serve are equally vulnerable to attack, regardless of their citizenship. We now know that the religious extremism of the Christian Right is spreading across North America, as evidenced by Stockwell Day’s bid for prime minister in Canada’s recent election. As the authors of *Targets of Hatred* note, “cultural denial has made anti-abortion lawlessness one of the least understood subjects of the late 20th and 21st centuries—it is high time to correct the record.” This book corrects the record admirably and calls for an end to the ongoing attacks on abortion providers and the women they serve. **C**

# Facets of American Catholicism

## AMERICAN CATHOLICS: GENDER, GENERATION AND COMMITMENT

William V. D’Antonio,  
James D. Davidson, Dean R. Hoge  
and Katherine Meyer  
(AltaMira Press, 2001. 192 pp.)

by Sheila Briggs

Readers of the *National Catholic Reporter* and *Conscience* will already be familiar with the 1999 survey of American Catholics conducted by these authors, and with much of their interpretation of this data. That survey was the third in a series in which the previous ones were carried out in 1987 and 1993. In *American Catholics: Gender, Generation and Commitment*, the authors put that longitudinal study of American Catholics in the late twentieth

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eth century into an even broader historical context, looking at how a century of enormous changes both within the Roman Catholic church and American society have shaped contemporary Catholicism—and what challenges must be met if the church is to remain a vital force in its members’ lives.

D’Antonio, Davidson, Hoge and Meyer identify three factors that shape individual Catholics’ attitudes towards their church and their faith: their gender, the generation to which they belong and their level of commitment to the institutional church. Of these three variables, gender causes the least variation in what Catholics believe and do. Yet even here, there are some substantial differences between women and men. Women participate more in the sacraments and religious devotions, but this higher level of commitment does not translate into greater docility. Women are more likely than men to place the locus of moral authority within the individual conscience instead of the church leadership, most notably in sexual and reproductive issues.

Catholics who attend mass regularly rank being Catholic as one of the most important aspects of their lives and say they would never leave the church tend to conform more to the official teachings of the church. Their numbers are dwindling fast, however,



especially among the younger generation. The ominous conclusion is that over time, the church hierarchy may achieve a more obedient but also much smaller flock.

Generation seems to be the key to understanding the evolution of American Catholicism. Younger Catholics give less weight to the teaching authority of the church and are less committed to its institutions. However, generation is generally and in this particular study especially difficult to demarcate as a set of common experiences shared by people born within a certain period. The authors divide Catholics into three generations: pre-Vatican II (those born before 1941), Vatican II (born between 1941 and 1960) and post-Vatican II (born after 1960). The oldest generation has the longest span but correspondingly the greatest variation in experience. Its oldest members were adults during the Great Depression and its youngest members not even born during this era! Ironically, it was members of this pre-Vatican II generation that were the makers and supporters of the Vatican II era reforms. Only a minority of the Vatican II generation were adults at the time of the council, but many had a pre-Vatican II childhood. The authors justify their divisions by pointing out that this generation grew into adulthood during the implementation of Vatican II-era reforms that distinctively and decisively shaped their Catholicism.

The post-Vatican II generation may too have some distinctive common experiences, but one should beware of stressing their homogeneity. First of all, this group comprises both those who had pre-Vatican II and Vatican II parents. If one stresses the generational differences between these two groups of parents, then this must have had some impact on the religious upbringing of their children, the beliefs and practices that they encouraged or discouraged. The accelerating rate of change in the US meant that Americans born between 1961 and 1981 had fewer experiences in common while they grew to adulthood than those born

***Younger Catholics are not becoming more conservative; on the contrary, between 1987 and 1999 they became more liberal across a range of issues.***

between 1910 and 1930. The later age cohorts are frequently distinguished as Generation X and Generation Y, because growing up with the influence of the World Wide Web and the drastic changes in social interactions it symbolizes transformed structures of identity and community—presumably also those within the Catholic church.

Furthermore, the data presented in this study on the post-Vatican II generation are ambiguous because the authors sampled different age cohorts in 1987, 1993 and 1999. All three surveys polled Catholics over 18, but in 1987 “over 18” meant those born between 1961 and 1969, in 1993 it meant those born between 1961 and 1975 and in 1999 it meant those born between 1961 and 1981. So when D’Antonio et al note shifts in attitudes of the post-Vatican II generation between surveys, it is unclear to what extent these can be attributed to members of the older age cohort(s) changing their minds or to the younger cohort(s) diverging from the views of the older post-Vatican II generation.

Many will read this book precisely because they are searching for answers to the graying of progressive church movements, such as Call to Action, which emerged out of the era and spirit of Vatican II. Younger Catholics are not becoming more conservative; on the contrary, between 1987 and 1999 they became more liberal across a range of issues. They are the generation

who most look to their consciences rather than the church hierarchy for guidance on sexual and reproductive issues. Their support for more democratic decision-making at the parish, diocesan and Vatican levels has grown.

Interestingly, in these two areas, moral authority and church governance, there is a growing convergence between all three generations. This is especially the case with church governance, where the pre-Vatican II generation—originally the least democratically minded of the three—so changed their minds that they outstripped the post-Vatican II generation in their support for a more democratic institution. Even though the pre-Vatican II generation remained the most conservative on the locus of moral authority, it was the generation that between 1987 and 1999 made the greatest shift towards individual conscience as moral arbiter.

On the church’s social teaching, the younger generation are more willing to disassociate being a good Catholic from donating time and money to the poor, as well as being more willing to countenance further welfare cutbacks. On the other hand, they are the generation who most wants more money for the health care of poor children and least favors a stricter enforcement of the death penalty.

The absence of the younger generation from progressive church movements seems to result from their lower level of commitment to the church. The authors are concerned that younger Catholics do not avail themselves of the opportunities offered to them for participating and taking on leadership roles at the local, regional and national levels. However, I often see a type of tokenism towards young people in the church in the progressive movements as well as in the official institution. We in the older generations wish to recruit them for our agendas, forms of community and organizational practices, rather than have these modified by their participation. We cannot expect Vatican II to have the same centrality in defining the identities of younger

*(continued on page 43)*

# A Celebration Tainted

*Kris Santos*

It was a soft summer day. Sunday 10:30 Mass was about to begin. A happy, celebratory Mass, as there was going to be a group baptism. Three babies, three sets of beaming parents and godparents, and other family members crowded into the front pews on one side of the church.

Our deacon was in charge of baptisms for this day. Prior to Mass, he spoke a few words to the participants. “Welcome, on this wonderful morning. It’s a beautiful day. A happy occasion. We have much to be happy about and to celebrate. You are here. Your babies are here, alive and well. You did not get abortions.”

He spoke on about new life in faith, and so forth. But my mind was left in the dust of his comment about abortion, trying to see through the sudden pall of hard accusation that had shrouded this soft, joyous occasion—trying to figure out what had happened, and why in the world I was feeling stunned, outraged, horrified by his words.

Yes, they were fairly young-looking parents; perhaps they could have chosen abortion (as, of course, could parents of any age). But I had the feeling the deacon was not speaking individually to these couples as a counselor who knew them or their pregnancy decision-making process—especially since he didn’t know the names of the parents or the babies and had to keep asking them throughout the ceremony.

*Kris Santos, of Patterson, CA, is a first-time contributor to Conscience.*

***I routinely stand up  
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It is my form of  
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judgments interfere  
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of the Mass.***

He was just making a general statement, a matter-of-fact comment about babies.

It seemed to me to be kind of a cruel, insensitive judgment. Not to mention sad—to look at beautiful, sparkling babies on a blessed holy occasion and see them simply, coldly, calculatingly, as “not abortions.” I like to see babies as life and love and hope and pure promise.

But still, I can’t exactly put my finger on why the deacon’s comment was so offensive to me. I routinely stand up and leave church when someone

speaks against abortion. It is my form of silent protest when politics and self-righteous judgments interfere with the sacred ritual of the Mass. A recent instance of this was when a man (and why so often a man?) rose to speak at the end of Mass about the sin of abortion—and this, when one of the readings for the day had been from John, chapter 8, about the adulteress and Jesus telling the people: “Let the man among you who has no sin be the first to cast a stone at her.” Given the reading, I thought it a slick trick of irony that this righteous man was going to speak against abortion. I wanted to shout: “But can you really and rightfully cast the first stone?” Instead, I stood up and silently slipped out of church, with my husband beside me. We seemed to be the only two who drifted away, however.

While the baptism comment stopped me, left me cold, I didn’t get up and walk out. I was simply, quietly stunned and wondering: why am I feeling this is so wrong? Was it that the politics of abortion was even forced into this—the most beautiful and innocent of sacraments?

I am still wondering. What is wrong with this picture? The deacon’s statement? And I wonder too: Must joy always be associated with absence of guilt? Must babies forever be associated with abortion?

To abort or not to abort? Is that the only question these days? How about: To live and to give and to love ... as we choose? **C**

# In the News

## Portuguese Abortion Trial Opens Amid Protests

In a move that has outraged women's rights groups and liberal members of Parliament, the Portuguese government is trying 17 women who are accused of procuring illegal abortions. If convicted, the women could face up to three years in prison. Opponents of the prosecutions say they expose the country's abortion law as "immoral" because it encourages back-alley abortions. Abortion is legal only in the first 12 weeks of pregnancy in Portugal, and only then in cases of rape, threat to the life or health of the woman, or serious fetal defect. Abortions can only be performed in government-run clinics. An estimated 40,000 illegal abortions occur in the country every year, although the government claims the number is closer to 500.

## Shadow Synod Participants Demand Resignation of Vatican Official

At the closing press conference of the Synod of the People of God, held in Rome on October 8, representatives of the Shadow Synod called on the Synod of Bishops to urge the pope to dismiss Vatican spokesperson Joaquin Navarro-Valls for justifying the use of military force in response to the terrorist attacks of September 11. In a move that was widely viewed as a Vatican endorsement of American military action, Navarro-Valls told the press in late September that the pope "would understand" a leader's decision to use force to protect his country. At their press conference, Catholic peace groups and reformers condemned Navarro-Valls' remarks, saying, "This message is directly contrary to the gospel of Jesus Christ, the social teaching of our church and the statements of

Pope John Paul II himself." The pope appealed for peace during his trip to Kazakhstan, which coincided with Navarro-Valls' remarks.

In addition to calling for Navarro-Valls' dismissal, the People's Synod proposed 24 directives in its official statement, including a call to denounce oppressive globalization; opening the priesthood to all baptized Catholics regardless of gender, marital status or sexual orientation; and reconsidering official church teachings on artificial contraception, divorce and homosexuality. The Synod of the People of God, held in Rome from October 4-7, was convened by more than 300 Catholic reform groups from around the world because the laity are excluded from the official Synod of Bishops that was held in Rome throughout October.

## Irish Anti-Abortion Referendum Finalized

The Irish government has proposed a constitutional amendment that would tighten the narrow circumstances under which abortion is allowed as the result of the controversial 1992 "X Case." That Supreme Court decision allows abortion when the life of the woman is at risk, including risk from suicide. The new referendum would allow abortion only if a woman's life is at risk, but remove suicide risk as a reason for an allowable termination. Abortion is a criminal offense for both the woman and her doctor in Ireland.

The referendum, which will be subject to a popular vote in the spring of 2002, preserves the right of women to obtain information on abortion and to travel abroad to obtain abortions in countries where the procedure is legal. It would also legalize emergency contraception. The Irish Family Planning Association estimates that 6,000 Irish women travel to Britain per year for abortions.

## Priests for Life Leader Pulled From Organization by Cardinal

Father Frank Pavone, the head of Priests for Life, has been ordered by New York Cardinal Edward Egan to leave the organization to take up a parish post. Egan's predecessor, the late Cardinal John O'Connor, had sanctioned Pavone's involvement with the anti-abortion organization for two three-year terms. A spokesperson for the Archdiocese of New York said that Pavone had been informed of the decision some time ago and that the shortage of priests necessitated Pavone's return to parish ministry.

Leadership of the organization has been transferred to Executive Director Anthony DeStefano, but apparently Pavone is fighting to stay on. In a letter to New York State Senator Eric Schneiderman dated October 15, 2001, Pavone wrote, "As far as the Cardinal Egan appointment, I would counsel that you do not have your pro-choice network rejoice prematurely. After all, if in fact I am in a different assignment (which, incidentally, is not yet a settled matter), then I will be free of the restrictions that sometimes accompany such a position of leadership, and more capable of doing various types of pro-life activism....If anyone in pro-choice leadership thinks that I will somehow be less in the spotlight and less effective in stopping abortion, they have another thing [sic] coming."

## Abortion Ship Gets Tremendous Response From Irish Women

In June, Dutch doctor Rebecca Gomperts, the founder of the prochoice activist group Women on Waves, embarked on an ambitious plan to

bring safe abortion to areas of the world where it remains illegal or inaccessible. Gomperts' intent was to bring women aboard a ship outfitted to provide 20 surgical and chemical abortions per day, and sail the ship into international waters—where the ship's medical crew would be subject to more liberal Dutch laws governing abortions—to perform the procedure.

Women on Waves' maiden voyage took them to Ireland, which has some of the most restrictive abortion laws in the European Union. Though anti-choice activists in The Netherlands and Ireland barred Gomperts and the crew of Women on Waves from performing abortions on the grounds of a legal technicality, the response from Irish women was nonetheless overwhelming. Over 200 women contacted the ship to request abortions and abortion-related services, and during her 11 day tour of Dublin and Cork, Gomperts distributed condoms, oral contraceptives, abortion counseling information and roughly 100 "morning-after" pills free of charge. Said Mary Muldowney of Women on Waves, "Even though this is just for a few days, it's showing us that Irish women do need and want this facility."

## **Gramick Leaves Religious Community of 40 Years for Sisters of Loretto**

Sr. Jeannine Gramick has left the School Sisters of Notre Dame, her religious community of 41 years, to join the Sisters of Loretto. Gramick, who co-founded New Ways Ministry to gays and lesbians with Fr. Bob Nugent, last year received a formal silencing order from the Vatican that prohibited her from discussing her work or the Vatican investigation into the New Ways Ministry. Gramick was prohibited from continuing her pastoral work by the Vatican in 1999 after an investigation of nearly two decades concluded that that Gramick and Nugent's work promoted "ambigui-

ties" about the church's doctrine on homosexuality.

Gramick refused to comply with the silencing order, which resulted in the Vatican pressuring the superior general of the School Sisters of Notre Dame to issue an identical silencing order last spring. By joining the Denver-based Sisters of Loretto, who have been supportive of her pursuit of free speech, Gramick will evade the injunction issued against her by the School Sisters of Notre Dame.

## **Mexican Incest Victim, 12, Granted Legal Abortion**

A 12-year old girl who had been raped by her father received a legal abortion in the Mexican state of Sinaloa in July. The girl, Lucila, who has the developmental capacity of an 8-year-old, was 18 weeks pregnant when she had the abortion. Abortion is generally illegal in Mexico, except in instances of rape and danger to the woman's life—and in such cases, the law is so vague that both doctors and state officials commonly avoid the issue for fear of legal reprisals if they perform or authorize abortions (see *Conscience* XXI:2, Summer 2000, for details).

In Lucila's case, the office that prosecuted the rape initially refused to approve a legal abortion, stating that such an authorization was out of its jurisdiction. The state prosecutor for the case stated that if Lucila was able to procure an abortion, the prosecutor's office would determine after the fact whether the abortion had been legal. Several of the doctors approached by the girl's mother refused to perform the procedure without a judicial guarantee that they would not face prosecution, however. After the abortion was performed, the state announced that it would establish an office to handle rape cases.

As has occurred in similar cases, the Catholic hierarchy threatened to excommunicate all those connected with the case if an abortion was performed. Lucila's mother rebuffed the

castigation of some church officials in relation to her decision to procure an abortion for the girl. "I am a Catholic and I am going to stay one, and as far as I can see, in my daughter's case, abortion is not a sin," said the mother. "If it is, let God judge me on that one—nobody else," she said.

## **US Bishops Launch Stealth Anti-abortion Campaign**

In September, the US Conference of Catholic Bishops (USCCB) launched an antiabortion campaign that does not reveal that the USCCB is behind the ads. The initial \$250,000 campaign was to be launched in the Philadelphia region. The USCCB said it wants other dioceses nationwide to use their own funds to pick up the campaign. The "Second Look Project" is a multimedia effort comprised of ads on mass transit, radio spots and a website, all bearing the slogan, "Abortion: Have we gone too far?"

Cory Richards of the Alan Guttmacher Institute said the bishops' project "is really about laying the groundwork for making abortion illegal." He said, "The implication [of the ads] is that you want to change things, change the Supreme Court." CFFC Vice President Jon O'Brien told the *Philadelphia Inquirer*, "The bishops are hardly about hiding their light under a bushel. So it strikes me as incredibly odd that they would choose to hide that they are behind these ads."

## **Colombian Bishops Sue Government For Decriminalizing Some Abortions**

In July, the Colombian Catholic bishops' conference unsuccessfully sued the Colombian government for a new section of the country's penal code that selectively decriminalizes abortion. The new law allows judges to waive punishment for abortion when



it is “performed for extraordinary motives.” Previously, the sentence for abortion could be reduced by three-quarters for both the woman and her doctor if the pregnancy resulted from rape. In a second change, a woman no longer needs to present a certificate proving that she has been raped; her testimony is accepted in good faith.

Colombia’s Constitutional Court upheld the new law. The bishops issued an episcopal letter that threatened doctors, judges and women who are associated with abortion in any way with automatic excommunication. The church also encouraged doctors and judges to exempt themselves from the new law by pleading conscientious objection.

### **Peoria’s Bishop Meyers Tapped to Head Diocese of Newark, NJ**

Bishop John Meyers, formerly of Peoria, IL, was installed in October as the bishop of Newark, NJ. Widely known as a conservative who is not shy about expressing his disdain for Catholics who dissent from Rome’s line, Meyers drew national attention for a 1990 pastoral letter in which he stated that prochoice Catholics should not be permitted to receive communion. He created a policy in Peoria’s Catholic school system that denied employment to divorced and remarried teachers, and those who are cohabiting, homosexual, or who oppose church teachings such as the bans on contraception and women’s ordination. In 1993, Meyers fired a teacher who allowed a student-requested and led debate on women’s ordination in her classroom and prohibited her from further employment in religious education in the diocese. Meyers also prohibited Catholic hospitals in his diocese from distributing emergency contraception to rape victims. During his tenure in Peoria, some 30 priests left the diocese, but the bishop also ordained a large num-

ber of young priests—most from a heavily conservative Pennsylvania seminary.

### **Chilean Government Sidesteps Supreme Court Ban on EC**

Shortly after the Chilean Supreme Court voted to ban one brand of EC, the Chilean Ministry of Health in September approved a second company to manufacture and distribute the emergency contraception pill. The Supreme Court prohibited the sale of the EC pill Postinal in late August after three anti-abortion groups backed by the Catholic church sued the state on the basis that the drug is abortifacient and therefore illegal under Chile’s Constitution. Because the ruling did not specifically ban Postinal’s active ingredient, levonorgestrel, the Ministry of Health approved a different form of EC with the same active ingredient.

However, this strategy may be short-lived, as the Supreme Court ruled Postinal was an abortifacient—and therefore illegal—because it can work by inhibiting implantation of the fertilized egg. By that logic, all forms of EC, as well as oral contraceptives and the IUD—the most commonly used form of birth control in Chile—could potentially become illegal.

### **Former Holy See Advisor Withdraws From Consideration for Refugee Bureau**

The US State Department confirmed in October that John M. Klink, President Bush’s nominee to head the Bureau of Population, Migration, and Refugees, has withdrawn from consideration for the post. Klink has advised the Holy See at several United Nations conferences worldwide, including the International Conference on Population and Development in 1994, where he and the other Vatican delegates

obstructed international consensus by linking the term “family planning” to abortion. (See *Conscience*, Summer 2001, for details). Klink’s nomination, widely viewed as a part of the Bush administration’s ongoing outreach effort to conservative Catholic voters, incited an outcry from refugee advocates.

In the meantime, the US Congress has approved the nominations of two conservative Catholics to diplomatic posts at the UN and the Holy See. In the wake of the September 11 terrorist attacks, John D. Negroponte was confirmed as the US ambassador to the United Nations, a post that had been vacant throughout 2001. Negroponte, who served as the US ambassador to Honduras in the 1980s, was expected to face tough questions related to his human rights record. Critics allege that the career diplomat turned a blind eye to widespread government-sponsored murder in Honduras during his tenure there. The second diplomat, James Nicholson, the former head of the Republican National Committee and a staunch abortion opponent, was confirmed as the US ambassador to the Holy See. In an interview shortly after his confirmation, Nicholson stated that the US and the Vatican “share a lot of common goals and a lot of common concerns.”

### **DiIulio Leaves Office of Faith-Based Initiatives**

John J. DiIulio, the Catholic academic tapped by President George W. Bush to head the Office of Faith-Based and Community Initiatives, announced his resignation from the post on August 17. DiIulio said he had health problems and had not planned to be a long-term adviser to the Bush administration. Bush’s faith-based initiative has run into significant difficulties since it was proposed, and the Bush administration has recently indicated that it is no longer a priority in the wake of the September 11 terrorist attacks. **G**

# CFFC Notebook

## Who Will Hold the Vatican Accountable?

On March 16, 2001, the *National Catholic Reporter* (NCR) revealed to the world startling reports of worldwide sexual exploitation of Catholic nuns by Catholic priests (*Conscience*, Spring 2001). Just one week prior to the publicized accounts, when I was participating in the UN Commission on the Status of Women, I sat stunned as a Catholic nun from Africa informed me that priests in Africa were targeting nuns for safe sex in order to avoid contracting the AIDS virus from prostitutes. She told me that not only were nuns frequently impregnated by priests and then driven from their religious orders, but sisters in Africa were also being infected with HIV and dying. The timing of the NCR piece was uncanny.

Expecting an international outcry over the NCR article, we at CFFC were astonished by the quiet acknowledgment of the reports. A substantial piece appeared in the *New York Times*, but then there was silence. A small item was printed in the *Washington Post*, but then silence. Then the Vatican officially announced that it knew of the cases reported in NCR and was taking care of the problem—and again there was silence.

CFFC immediately began to contact colleagues around the world to share the NCR reports, and the response was incredible. Our sisters, especially those in Africa, were happy and relieved that this news was made public—that perhaps now the Vatican would have to act to end this abuse. Many predicted that this would be “the straw that breaks the camel’s back”—and that the Vatican must be held accountable for not only the deplorable sexual misconduct of its

clergy, but also for its misguided teachings on women, sexuality and contraception to prevent unwanted pregnancies and life-threatening diseases. Of course, opinion in the church, even in the progressive church, is never unanimous. Some religious orders and individuals felt that “quiet diplomacy” was the answer. Making issues like this very public, they believe, is embarrassing to the victims and does not result in a change in church position.

CFFC subsequently gathered a small coalition of Catholic and women’s rights organizations that met periodically to discuss the complexities of the issue and to explore what action could be taken. The coalition included 8th Day Center for Justice, Call to Action/Northern Virginia, Catholics for the Spirit of Vatican II, Catholics Speak Out, Center for Women’s Global Leadership, Equality Now, Faith Matters, Federation of Christian Ministries, Feminist Majority, Planned Parenthood Federation of America, Voters for Choice, Women’s Alliance for Theology, Ethics and Ritual (WATER), Women’s Ordination Conference, as well as individual international colleagues.

The coalition drafted language that eventually became a Call to Accountability. The drafting process took several weeks as we discussed and negotiated language. The text was shared with women in Africa, Latin America and Asia—nuns and other women—to ensure that the needs of all women were addressed in the statement, and more importantly, that such a statement would serve to support women of the Global South. When the text was com-

plete, we immediately received endorsements from fifty women’s rights and religious organizations from around the world. The coalition published the signed statement in the *National Catholic Reporter* (June 29, 2001), and the campaign was ready to be launched.

On July 14, 2001, the Call to Accountability campaign was officially launched with a press conference at the UN Church Center in New York, a march to the Permanent Mission of the Holy See, and a dozen parallel events held throughout the world. Members of the coalition requested a meeting with Archbishop Renato Martino, apostolic nuncio at the Permanent Mission. But he refused to meet with us, and, instead, sent us a message asking that we “pray for the priests” who perpetrated these crimes. His message did not mention the sisters.

The New York press conference included among its speakers Sr. Mary John Mananzan of St. Scholastica’s College in the Philippines, Frances Kissling of CFFC, Paulina Muchina of the Circle of Concerned African Women Theologians, Ellie Smeal of the Feminist Majority and Anthony Padovano of the International Federation of Married Priests. Sr. Maureen Fiedler of the interfaith radio program “Faith Matters” moderated the press conference, and Yvonne Maes, a former nun from Canada, spoke of her experience of being sexually abused by a European priest while working in Southern Africa.

Those attending the press conference were visibly moved by the tragic testimonies and by this unprecedented

uniting of secular and religious women's organizations to end violence against women. From the Church Center, we gathered in Dag Hammarskjöld Plaza across the street from the UN and marched—dressed in white and carrying banners, signs and a coffin draped in the Vatican flag—to the Permanent Mission of the Holy See. Through the locked gates of the Permanent Mission, Mary Hunt of WATER slipped a large envelope filled with signed statements from individuals and organizations and a letter addressed to Pope John Paul II asking him to meet the demands of the Call to Accountability. We still have not received a response from the Holy Father.

That same weekend, parallel events were held in Washington, D.C., St. Louis and San Francisco, as well as in Mexico, Argentina and London. Press releases were issued in the Philippines and Bolivia, and letters were sent to nuncios and cardinals in Brussels, Paris, Lisbon, and Durban. The day before the launching of the campaign, I received an e-mail from the Democratic Republic of the Congo to wish us the best of luck with the news that the Circle of Concerned African Women Theologians in the Congo, along with four other feminist organizations there, would endorse the campaign.

On July 14, individual women and organizations around the world—secular and religious—united to call the Vatican to accountability for the offenses committed by its priests and bishops. And the media was not silent this time: the *New York Times*, the WNBC New York City affiliate Channel 4, the *Chicago Tribune*, and *La Jornada* (Mexico), *El Nuevo Diario* (Nicaragua), and the *Scotsman* reported substantive news stories on the events and the campaign.

Moving forward, we continue to speak on the issue. We continue to urge individuals and organizations to endorse the campaign—to join the coal-

tion of over 300 organizations seeking truth and justice for women who suffer and who have suffered from violence, abuse and exploitation at the hands of Catholic clergy. We know that if the world is silent on this issue, and the Vatican “deals with it” behind closed doors, the violence will continue.

In this time of increasing global conflict and violence, we are ever more committed to eliminating violence against women. We must collectively call the Vatican to accountability to end the violence against nuns. If we don't make the call, who will?

[www.calltoaccountability.org](http://www.calltoaccountability.org)

Serra Sippel

Senior Associate, International Program

## In Brief

**CFFC President Frances Kissling** was the keynote speaker at the annual luncheon of Planned Parenthood of Buffalo, New York, on October 1. Ms. Kissling spoke on the prochoice Catholic position and discussed how Planned Parenthood activists can work with prochoice Catholics to further the reproductive health and rights movement—and to neutralize the influence of the US bishops on public policy. Explaining that the US bishops' lobbying efforts often do not reflect the positions of the laity, Ms. Kissling described such strategies as the New York Catholic Conference's efforts to obtain a broad exemption for church employers from legislation that would mandate contraception coverage.

**Maria Consuelo Mejía, director of Católicas por el Derecho a Decidir in Mexico (CDD-Mexico)**, gave a statement at the closing press conference of the Synod of the People of God (See page 33 for details) on October 7, 2001. Ms. Mejía called for the ordination of women and for greater lay participation of women in the church, stating,

“Discrimination against women has a double effect: It hurts women and impoverishes the church itself.” Her statement also called on the Vatican to repeal its ban on contraception, particularly condoms. The Synod of the People of God, to which over 300 reform Catholic groups around the world contributed, shadowed the Synod of Bishops, which excluded the Catholic laity.

The **Catholics for Contraception** campaign received praise in July from United States Representative Barbara Lee (D-CA) for the campaign's efforts to defeat the “global gag rule.” The gag rule prohibits foreign NGOs that receive US family planning funds from providing counseling or lobbying on abortion, even with their own funds. In May, aware that the US Conference of Catholic Bishops was lobbying to maintain the gag rule, the Catholics for Contraception campaign mobilized its nationwide network of progressive Catholics to contact their representatives and let them know that Catholics support international family planning. In her letter, Rep. Barbara Lee lauded the Catholics for Contraception campaign as “a highly regarded group that has created an admirable balance of holding true to your religious beliefs while advancing progressive issues such as access to lifesaving healthcare, including international family planning and HIV/AIDS services for low-income women in developing nations.”

**Frances Kissling** published an article entitled “The Place for Individual Conscience” in a special supplement to the *Journal of Medical Ethics* entitled *The New Ethics of Abortion* (October 2001). The article examines the abortion decision from a liberationist, feminist, and Catholic point of view. The paper offers solutions to end the ugliness of the abortion debate by suggesting that we would be able to progress further on the issue of abortion if we looked for good in the opposing viewpoint.

In October, Father Richard P. McBrien published an article on [www.the-tidings.com](http://www.the-tidings.com) that used CFFC polling data to predict that the Bush administration's strategy to recruit a base of conservative Catholics is likely to backfire. McBrien was referring to **polling data from a survey conducted by Belden, Russonello and Stewart for CFFC** during the last election, which he noted, "proved to be more accurate than Governor Bush's." In that survey, CFFC found that not only were Catholics evenly split between the Democratic and the Republican candidates, but that Catholic voters' Mass attendance does not correlate with their party affiliation—and overall, Catholics tend to be slightly more liberal than other Americans on social issues.

On October 2, **CFFC Vice President Jon O'Brien** attended the annual meeting of the American Society for Emergency Contraception and presented at the annual meeting of the Consortium for Emergency Contraception. Mr. O'Brien described the chronology of attacks against emergency contraception by the Roman Catholic hierarchy, both in the US and abroad, and laid out strategies for reproductive health activists and women's advocates to counter such attacks. Mr. O'Brien noted that such opposition has increased in proportion to the widespread acceptance and greater availability of emergency contraception in many countries.

In June, **Elfriede Harth**, a longtime leader in the worldwide church reform movement was appointed as **European Representative for Catholics for a Free Choice**. Ms. Harth, who speaks five languages fluently, is originally from Colombia, spent many years living in Germany, and currently resides in France.

**Catholics for Contraception** held the first meeting of its newly formed advisory group in Washington, DC, in late October, marking the beginning of a new phase of activism for the campaign.

The advisory group members—twelve scholars, community activists and policy advocates from the Catholic reform community across the US—will serve as liaisons with policymakers on domestic and international family planning issues. The advisory group planned future Catholics for Contraception activities and developed campaign strategies that will elevate the voices of progressive Catholics in family planning policy debates.

**CFFC Vice President Jon O'Brien** led a two-day media workshop in Mexico City in September with colleagues from CDD. Reproductive rights activists from across Mexico joined the interactive workshop and discussed the best way the prochoice movement can get its message out to the media and how to improve its rapid media response systems to effectively and professionally respond to breaking news. Frances Kissling, CFFC president, joined the workshop for a session that looked at answering tough questions about abortion.

In July, **Jon O'Brien** spoke at Planned Parenthood Federation of America's Political Academy in Washington, DC. He explored the influence of US-based anti-choice activists on American foreign policy and discussed how local Planned Parenthood activists can ensure their voices are heard in debates on issues like the global gag rule and international family planning. And on November 7, Mr. O'Brien spoke at the annual meeting of Planned Parenthood of Delaware on how reproductive health advocates can counter the influence of the US religious right in global family planning policy.

In August, **Joanna Manning of CFFC-Canada** published an article in the *Toronto Globe and Mail* on the human costs of the church's prohibition on condoms in Africa. On October 14, Ms. Manning was also named volunteer of the year by unanimous vote of the Jewish women's organization Hadassah

(Kichener-Waterloo Council). Hadassah works to support schools, daycare, and women's and children's initiatives, primarily in Israel. Marion Mayman, national president of Canadian Hadassah, said that Manning "exemplifies the role of the volunteer."

The Board of Directors of the Religious Coalition for Reproductive Choice voted October 24 to invite **Frances Kissling** to become a board member. The Religious Coalition is an interfaith network works closely with CFFC, as well as with secular reproductive health groups and with public officials on the local, state, and national level to inform the public debate on reproductive issues with prochoice religious values.

**Elfriede Harth, CFFC's European representative, and Serra Sippel, senior associate for international projects**, traveled to Kenya, Zimbabwe and Uganda in September as part of CFFC's Catholic Voices initiative. Catholic Voices seeks to forge partnerships with Catholic women and men around the world who work for women's rights and reproductive health in support of United Nations' positions on these issues. During their trip, Ms. Sippel and Ms. Harth participated in several panel discussions addressing women's reproductive health in the context of maternal mortality and morbidity, post-abortion care and HIV/AIDS, and Catholic women and contemporary social-ethical issues. They met with members of parliament, clergy and representatives from the hierarchy in Uganda; health care providers, and representatives from religious and secular NGOs, including reproductive health groups, development organizations, and human rights groups in the three countries.

**Católicas por el Derecho a Decidir—Latin America**, along with four other religious organizations, held a workshop on HIV/AIDS: "Strategies on HIV/AIDS from an Ecumenical

(Continued on page 43)



# Letters to the Editor

## The Folly of Bush's Catholic Strategy

Patricia Miller's article "Chasing Conservative Catholics" is right on target. Catholics are likely to remain cross-pressured swing voters. It is both appalling and amusing to see how Republican political operatives, White House staffers, and conservative commentators and political scientists have misinterpreted the results of the 2000 presidential election. To claim that an entire election was won (?) by "committed" Catholics who attend church weekly is just absurd nonsense.

For one thing, the definition of commitment used by many political analysts and social researchers is mechanistic, being based solely on one attribute of religiousness, namely church attendance. This leaves out many Latino Catholics, whose religious practice is based more on private devotions, pilgrimages to shrines and acts of charity than on regular church attendance. This is why the "commitment" factor can vary from 20% to 40% of all Catholics, and changes from election to election.

It makes better political sense to look at the voting patterns of all Catholics, rather than an artificial number of those who tell exit pollsters that they attend church every week. It also makes good sense to look at the aggregate vote in heavily Catholic areas, which can be traced historically, rather than to assume that exit polls are infallible.

The real facts are these: In the nation's twelve most heavily Catholic states Al Gore received 136 electoral votes to George W. Bush's 13. Even in the moderately Catholic (20% to 25%) states, Gore won 86-68 in the electoral college vote. Conversely, in the ten states with the smallest percentage of Catholics, Bush beat Gore 86-0.

Bush's staff may pretend that

Catholic swing voters elected him, but a better argument can be made that the 88% Mormon vote for Bush and the near 80% support from evangelical white Protestants were more significant factors. One cannot cite a single state where the "committed Catholic vote" pushed the state into the GOP electoral column. In point of fact, Catholic support for Gore was probably the reason he carried Iowa, Wisconsin, Michigan, Maine, New Mexico and Pennsylvania. It was the Baptist and evangelical vote that swept Bush to victory in once reliably Democratic Tennessee, Missouri, West Virginia, and Arkansas, while the Mormon vote captured Nevada for Bush.

*Albert J. Menendez*

*Associate Director*

*Americans for Religious Liberty*

*Silver Spring, MD*

## Catholics Reflect American Voters at Large

Patricia Miller's article "Chasing Conservative Catholics" highlighted some quantitative data for a rule of thumb I've learned in three campaigns and five years of elected office: If all you know about a voter is that they are Catholic, you know nothing about their politics. George W. Bush and his overpaid political strategists are ignorant of the kinds of on-the-ground intelligence you learn only by knocking on thousands of doors and eating hundreds of cookies at neighborhood events. American Catholics are more likely to have their voting patterns influenced by their boss than by their bishop.

Thirty years of polling Catholics on the abortion issue has given us a clear picture—our opinion distribution exactly mirrors that of the rest of the population. There are conservative Catholics, liberal Catholics and the famous muddled middle. Just like the

rest of America. And that distribution applies to other political issues. Conservative Catholics agree with the church on sexuality issues and disagree with the church on things like the death penalty and economic justice issues. Liberal Catholics disagree with the church on sexuality issues and agree with the church on things like the death penalty and economic justice issues. Conservative Catholics vote Republican, liberal Catholics vote Democrat. The muddled middle does what they do every four years: vote their pocketbooks. Where is this gold mine of untapped conservative voters George W. Bush is hoping to find? Not in the pews on Sunday; they've already picked their sides.

*Rosemary Stasek*

*CFRC Activist*

*and City Councilmember*

*Mountain View, CA*

## Bush and the Bishops: A Frightening Prospect for Women's Health

Tegan Culler's article "The Bishops' Big Break" exposes the Catholic hierarchy's interference with the delivery of safe reproductive health care in the United States and worldwide, the Bush administration's eagerness to woo the Catholic hierarchy despite the costs to women's lives, and the Catholic hierarchy's constant lobbying for its own bottom line.

For example, the administration's insistence on the global gag rule directly contributes to thousands of deaths in the developing world. While the World Health Organization estimates that 80,000 women die annually from unsafe, illegal abortions, this number is a gross under-representation as many deaths go undocumented or are recorded as being the result of other conditions, such as pneumonia.

The Catholic hierarchy's insistence on so-called "conscience clauses" in the US also reveals its lobbying at the expense of all women. Exempting Catholic institutions from providing vitally needed health services or from requiring insurance coverage for contraceptives costs too many women not only dollars, but their lives.

Separation of church and state? What a mockery! The Catholic hierarchy lobbies for and wins billions of government dollars for its social service agencies—and it openly influences government policy to deny women life-saving health services.

*Eleanor Smeal*  
President  
Feminist Majority Foundation  
Arlington, VA

## Telling it Like it Is

Frances Kissling focussed the fertilized egg question exactly (Summer 2001), and the final debate is long overdue.

For example, Denver Archbishop Charles Chaput condemned a *Denver Post* editorial endorsing careful scientific stem cell research to try to save lives (he was supposedly defending "every human being's right to life" as "a person"), but never once addressed the basic question: is there really a "human being" or "person" involved?

A fertilized egg is microscopic, weighs about 1/1500 of an ounce; has no brain; no body and no sex, all of which develop later; and has no soul, which is also infused later, as taught by St. Augustine, St. Jerome and St. Thomas Aquinas, the greatest minds ever produced by Christianity.

Abortion of a fetus is indeed a profound moral question of motherhood choice; but no such question exists regarding fertilized eggs, millions of which are routinely discarded by nature every month all over the world. There are no microscopic, sex-contingent, amorphous "pre-souls" in such cases; and no "human beings" can yet exist.

If you eat an egg in a restaurant, you don't pay for a chicken, because there is no chicken.

Frances Kissling is to be congratulated for her courage and insight in "telling it like it is" and supporting precise, cautious scientific stem cell research in the noble and endless quest to save lives, for the benefit of our nation and all of humanity.

*John Thomasin*  
West New York, NJ

## Conservative Catholic Mayhem at the United Nations Uncovered



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### BAD FAITH AT THE UN: DRAWING BACK THE CURTAIN ON THE CATHOLIC FAMILY AND HUMAN RIGHTS INSTITUTE

*Bad Faith at the UN* examines the history, activities and finances of the Catholic Family and Human Rights Institute (CAFHRI), a conservative, anti-reproductive rights Catholic organization that lobbies the UN. Among the key findings:

- CAFHRI was established by Human Life International (HLI), an anti-abortion organization that was denied UN accreditation.
- CAFHRI has applied for special nongovernmental organization (NGO) status at the UN but its spokespeople and literature routinely disparage and denigrate the UN and its work.
- CAFHRI sought to hide the fact that its primary purpose is to serve as a resource for the Holy See at the UN.

Includes appendices of original court documents.

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## The Lesser Evil

(continued from page 13)

tics (more commonly referred to as condoms), the Roman Curia is more tolerant on the matter."<sup>52</sup> While the Vatican was quick to deny any official change in policy, the salient points in the Fuller/Keenan analysis of the *L'Osservatore Romano* article still stand: the publication of the article in the official paper of the Curia "is a sign that the article represents a broad constituency of curial thinking;" the article endorses a broad view of prevention within a Christian sexual ethic; the article "does not attack the endorsement, promotion, distribution or use of prophylactics;" the article distinguishes between containment and prevention, claiming only that condoms are inadequate for prevention; the article does not categorically deny the effectiveness of condoms and "recognizes the positive function the prophylactics have played in two populations critically affected by the HIV epidemic;" and finally it "recognizes the use of prophylactics as a lesser evil."<sup>53</sup>

Similarly, Bishop Eugenio Rixen of Brasilia, Brazil, created a firestorm in that country when he suggested last year at a meeting of the Brazilian Bishops' Pastoral Health Commission that condom use to prevent HIV infection was a "lesser evil." Although the comment stirred optimism that a relaxing of the church's policy might be in the offing, Rixen was quickly rebuked by São Paulo Archbishop Claudio Hummes.<sup>54</sup>

At a forum sponsored this past summer by the AIDS Society of the Philippines, Jesuit Keenan, a theologian at Weston Jesuit School of Theology in Cambridge, MA, said it is "morally acceptable" for sexual partners to use condoms to prevent HIV infection because of the principle of "less evil." Keenan said, "Condoms for HIV are the same [as] condoms for contraception. Here we can see the principle of double effect. If a husband violates his marital vows and sleeps with

***"I think the real difference is between those in the curia who are genuinely convinced that every use of a condom is intrinsically evil, and those who believe the church needs to repeat this as an ideal but who are quite comfortable with the fact that lots of people will make decisions in conscience that go in a different direction." —John Allen***

other women he must make sure that he does not transmit the virus to his wife, else he would be violating the principle of justice. This is where the principle of lesser evil comes in."<sup>55</sup>


### WHAT THE FUTURE HOLDS

Recalling a visit to nuns on the Ivory Coast who were quietly promoting condom use, UNAIDS' Piot said, "What we are seeing now is that there is a debate going on in the Catholic church. Clearly there are many Roman Catholics who feel uncomfortable with the current official position."<sup>56</sup> Despite this discomfort, official change may be slow to come. John Allen, the *National Catholic Reporter's* Vatican correspondent, says that the furor over the *L'Osservatore Romano* article shows how hard it may be to moderate the Vatican's position. He predicts that beyond the open issue of the AIDS politics of the next pope, whomever is chosen by the pope to lead the Congregation for the Doctrine of the Faith—which has the last word on Vatican orthodoxy—may well play a key role in crafting a more flexible position, if there is to be one. "If he were to rotate someone like [Bishop] Kasper into that spot, for example, I would expect a somewhat more flexible line," Allen said in an interview via email while he was covering the recent bishops' synod in Rome.

"I think the real difference is between those in the curia who are

genuinely convinced that every use of a condom is intrinsically evil, and those who believe the church needs to repeat this as an ideal but who are quite comfortable with the fact that lots of people will make decisions in conscience that go in a different direction. It's the old 'if the pope were here, he would understand' mentality," Allen notes.

John White, the priest who was kicked out of the first Vatican AIDS conference and eventually left the church after disclosing his HIV status, said of the church's response to AIDS: "I feel the church does not have any significant response on this matter. Ten or twelve years ago I would have felt this and it saddens me that this far down the line, little, if anything, has changed. There was a time, when I was still with the church, I would have hoped that change could possibly be effected—from within and thereby have remained within the church and my ministry."

"The core of all the problems around HIV/AIDS is being unable to deal adequately with sexuality," says White, adding, "If AIDS were merely an infectious disease, then there would be little difficulty for the church in dealing with it. But as it entails dealing with alternative lifestyles—particularly homosexuality, sex outside of marriage, drug use, etc.—it becomes something the church cannot possibly deal with until they have first dealt with these core issues." 

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## Do Condoms Prevent AIDS

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## Facets of American Catholicism

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Catholics as it did for older ones, since they do not have it as a personal experience, powerfully shaping their lives. It may be that many organizations with roots in the Vatican II-era are so based in the common experiences of particular age cohorts that they are not viable locations for shaping new Catholic identities and communal structures.

The authors have managed to organize a huge amount of data into a readable account of contemporary American Catholicism. I do not want to make the task of reporting their findings more cumbersome, but I do wish they had pointed the reader to a website where one could have viewed the data broken down into different categories than appear in the book. Unfortunately, one cannot explore within the compass of a small book how the three variables of gender, generation and level of commitment interact with one another. For example, what is the profile of a highly committed, post-Vatican II woman or of a pre-Vatican II man of lower commitment?

The authors also neglect to incorporate race and ethnicity into the central investigation of their book. They give a brief characterization of black, Latino and Asian Catholics in Chapter 2 and report studies of these groups in an appendix. Admittedly, as they explain, it is difficult to get accurate statistics on the size of the Latino population or conduct a reliable telephone poll of this group. Nonetheless, this is a severe restriction of conventional pollster techniques, and one must wonder if one can draw an accurate picture of contemporary Catholicism when one has to ignore the specific cultural traits of such a large group within it. Even before Vatican II there was not a uniform Catholic culture. It makes a great deal of difference whether a pre-Vatican II Catholic was born in Boston, Guatemala or Vietnam. When Asians or Latinos are described as being more

traditional in their practices and beliefs, one has to remember that those traditions are often dissimilar from those of the descendants of European immigrants. Yet despite these two limi-

tations in what data is presented and how, this book provides an essential portrait of American Catholicism at the turn of the third millennium. **C**

## In Brief

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Pastoral Perspective," on October 19-20. Held at the headquarters of the Ecumenical Christian Center in Córdoba, Argentina, the workshop included a discussion around different churches responses to AIDS, as well as medical information and sexuality education. CDD-Argentina has also worked in concert with other local Córdoba organizations to produce an educational play titled, "For the love of life, use contraception." The play has been running since May and will continue through December.

In October, **Católicas pelo Direito de Decidir-Brasil** hosted a four-day, multifaceted analysis supporting the legal-

ization of abortion in Brazil entitled "National Open Dialogue and Workshop Exploring Ethical-Religious Questions for Legal Abortion Providers." The workshop, held in São Paulo, addressed women's sexuality; the medical view of abortion, including how illegal abortion impacts maternal mortality; the Brazilian media's treatment of legal and illegal abortion; and sexual violence against women. Serra Sippel, CFFC's senior associate for international projects, spoke on abortion laws in the US, and Maria José Rosado, Coordinator of CDD-Brasil closed the proceedings with a presentation on abortion and the Catholic church. The workshop was attended by doctors, public health advocates, and representatives from women's and reproductive health groups. **C**

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