The Executive Council has recommended this resolution be sent to a committee of the General Synod.

CALLING FOR COMPREHENSIVE HIV PREVENTION IN CHURCH AND COMMUNITY

A Prudential Resolution

APPROVED

Submitted by: Wider Church Ministries

Background Statement:

Summary

HIV stands for human immunodeficiency virus. HIV is a virus that infects cells of the human immune system and destroys or impairs their function. HIV is transmitted through:
• Unprotected penetrative sex with someone who is infected;
• Sharing unsterilized injection equipment (e.g. needles) that has previously been used by someone who is infected,
• From a mother who is infected to her baby; this can occur during pregnancy, at birth and through breastfeeding; and
• Injection or transfusion of contaminated blood or blood products, donations of semen (artificial insemination), skin grafts or organ transplants taken from someone who is infected.

Infection with HIV results in the progressive deterioration of the immune system, leading to immune deficiency, which may include the development of AIDS, acquired immune deficiency syndrome.

Although there have been unprecedented achievements in medical science, treatment and care, the HIV pandemic is still very much in a dynamic phase and is on the rise. As trends in HIV infections, research, treatment and care have continued to evolve, HIV has proven to be one of the most daunting microbes the world has ever faced.

Efforts to stop HIV and AIDS and provide treatment and care to all who are living with and affected by HIV continue to be outpaced by the incidence of new HIV infections. For every 2 people who go on treatment there are 5 new infections (UNAIDS 2008). Even by doubling the number of people receiving treatment we will continue to lose ground. To turn the tide on this pandemic, we must continue to rapidly increase our capacities to reach universal access to treatment and care and, at the same time, we must radically reduce the number of new infections. Thus, best practice comprehensive HIV prevention must be an integral part of the response in all settings of the church and community.

Biblical, Theological and Ethical Rational

“Where the Church is involved in healing ministries in the name of Jesus Christ, it is engaged in the work of reconciliation and liberation.” (UCC Mission Statement on Health and Human Service, (15th General Synod, 1985)

As Christians, we are called to follow the teaching and ministry of Jesus Christ. The gospel narratives are full of stories about the life and ministry of Jesus and the many ways Jesus reached out with compassion and healing to those who were sick and marginalized. Jesus sent his disciples out to heal the sick (Luke 9:1-2).

Jesus also encouraged people of faith to be ready and alert, saying, “But know this: if the owner of the house had known at what hour the thief was coming, he would not have let his house be broken into.” Luke 12:39. In terms of HIV, we know how it breaks into the body and robs the immune system of its
capacity to respond to disease but too many people, young and old, are not effectively prepared with the information and tools they need to prevent infection.

Our Christian tradition speaks of the already and not yet character of our faith in a way that brings hope in the midst of difficulty. We know that we all are God's beloved children, worthy of love, dignity and respect, but that we have not yet fully realized God's realm in our midst. Even when we find ourselves in the pit of life, as the Psalmist laments, we know that the pit is not the place God intends us to be (Psalm 40:2). Our resurrection faith inspires us to trust the power of God to make a way out of no way.

Also from our biblical tradition, the apostle Paul challenged the early Christian communities to keep their eyes on the prize, run the race with perseverance and pursue their vision for mission and ministry until it was attained.

The HIV and AIDS pandemic is one of the most serious health crises the world has ever faced. UNAIDS estimates there are 33 million people living with HIV worldwide and 5 million people die each year from AIDS (June 2008). The U.S. Center for Disease Control (CDC) issued a new report in August 2008 revealing that for the past several years the annual number of new infections in the U.S. has been underreported by 40%. The CDC estimated that there are 56,300 new HIV infections in the U.S. per year, more than 1 million people living with HIV (about 0.5% of the total U.S. population) and 250,000 of them are not aware they are HIV positive.

The international HIV and AIDS response organizations have called for the scaling up of prevention efforts. In 2001 the United Nations committed to stopping HIV and AIDS (Declaration of commitment on HIV/AIDS, June 2001) and strengthened their resolve in their political statement in June 2006. The latter statement called for “ambitious national targets, to be developed by countries by end 2006, as the world moves toward universal access to comprehensive prevention programmes, treatment, care and support by 2010.” The World Health Organizations, along with several other UN agencies are working to realize these goals. The U.S. CDC and the U.S. National Institute of Health also are engaged in scaling up prevention efforts. UNAIDS has called for stronger participation from faith organizations in prevention work (http://www.unaids.org/en/Partnerships/Civil+society/religionAndAids.asp).

The United Church of Christ has been part of this struggle. From the local church to the General Synod, from World AIDS Day observances to comprehensive HIV and AIDS outreach programs, there have been and continue to be important and significant responses from a variety of settings of the UCC. However, the scale of these responses has not yet reached a level equal to the need, particularly with comprehensive HIV prevention and also in terms of reaching vulnerable groups and higher risk populations.

The CDC reported that HIV prevalence among men and women in the African American/Black community is a disproportionate 2%, which is 4 times the national prevalence. Women account for 25% of all people living with HIV in the U.S. The prevalence of HIV among African American/Black women is 18 times that of white women. In fact, the total number of infections in the African American/Black community exceeds those in 7 of the 15 countries receiving funds from PEPFAR (the President's Emergency Plan For AIDS Relief). Infections among gay, bisexual and other men who have sex with men (MSM) in all racial groups has continued to rise in the U.S. since the early 90's. There are disproportionate infection rates among young (age 13-25), African American/Black and Latino MSM in comparison with other age and racial/ethnic groups.

There is an already and not yet character to our response to HIV and AIDS.

• We already know how to prevent the spread of HIV, but we have not yet taken the action required to do it;
• We already know that the African American community is seeing HIV infection rates disproportionate to their population in the US but this country does not yet have a comprehensive national plan for addressing the epidemic;

• We already know that women and girls in many parts of the world, including some places in the U.S., are vulnerable to gender based violence, creating significant risks for infection, but we have not yet effectively addressed the predatory sexual practices of some men nor some of the cultural dynamics that create a distorted and unhealthy masculinity which fails to respect and empower women and girls to have control over their own bodies;

• We already know that stigma and discrimination creates an environment that fuels this disease but we have not yet broken the silence in many places, including many church communities, providing people with vital, age appropriate, comprehensive information to protect themselves and others against infection;

• Moreover, we already know that treatment and care are an important aspect of effective HIV prevention and we know how to effectively treat persons living with HIV, improving both the quality and length of life, but we have not yet accessed our full capacity for universal treatment and care.

Most importantly, the truth is we already have the capacity to realize the vision of stopping AIDS, making good on that promise. The question is whether we share this vision and will we do what it takes to achieve it. The message of our faith is clear when it comes to compassion and care, and for being ready and alert. Preventing disease is as important as caring for the sick. This resolution is calling the church and community to task, to take seriously our role and responsibility to access our capacity for best practice comprehensive HIV prevention. There is no question whether we, as people of faith, have an important role to play. The question is whether we will fulfill it.

Expected Outcomes

This resolution builds on previous actions of the General Synod calling for health and wholeness, care and compassion in response to the HIV and AIDS pandemic. The ultimate goal of this resolution is to stop the spread of HIV by scaling-up best practice comprehensive HIV prevention in church and community. This resolution calls church and community to new and increased levels of attention and commitment to achieving this goal.

By pointing to opportunities for collaboration with the United Church of Christ HIV and AIDS Network (UCAN, Inc.) and lifting up resources that already exist, the resolution provides guidance for working in deliberate and strategic ways to reduce HIV infection, engaging and strengthening the existing capacities of church and community to:

• Assess and increase their HIV and AIDS competencies, including the development of tools to assist with this assessment;

• Develop and implement plans of action in all settings of the church and community which includes the integration of comprehensive HIV prevention strategies in existing health related programs and activities, and the initiation of new and innovative strategies, particularly with vulnerable groups and higher risk populations. UCAN, Inc. is already prepared to provide technical assistance to all settings of the church in this regard;

• Build and share models of best practice using the internet (ucc.org), UCC Resources and other technologies and communication vehicles;

• Create new partnerships with and among churches and the community for collaboration, increased effectiveness and accountability. Some efforts will need to bring together various settings with capacities for reaching vulnerable groups and higher risk populations; and,

• Advocate for and support the development and implementation of a national HIV and AIDS plan that includes a significant increase in programs and funding for comprehensive HIV prevention in the United States.
Whereas,

Our Christian faith calls upon the disciples of Jesus Christ to follow Jesus’ teachings and the examples of Jesus’ ministry; and,

Jesus reached out with compassion and healing to those who were sick and marginalized, and called people of faith to be ready and alert, for example:

• Matthew 14:14. When he went ashore, he saw a great crowd; and he had compassion for them and cured their sick.

• Mark 1:40-42. A leper came to him begging him, and kneeling he said to him, "If you choose, you can make me clean." Moved with pity, Jesus stretched out his hand and touched him, and said to him, "I do choose. Be made clean!" Immediately the leprosy left him, and he was made clean.

• Luke 12:39. But know this: if the owner of the house had known at what hour the thief was coming, he would not have let his house be broken into.

• Matthew 25:1-13. Keep awake therefore, for you know neither the day nor the hour.

and,

There are an estimated 33 million people living with HIV worldwide and that for every 5 new HIV infections there are only 2 people who receive medical treatment (UNAIDS, June 2008), demonstrating that the world is losing the fight against HIV and AIDS. Treatment alone cannot stop the HIV and AIDS pandemic; and,

The United States Center for Disease Control (CDC) released new data revealing that HIV infections in the US are 40% higher than previously thought and reporting estimates that there are more than 1 million persons living with HIV in the U.S. and 20% of them do not know they are HIV positive (August 3, 2008); and,

The global health community, including UNAIDS, the World Health Organization, the U.S. CDC, and the U.S. National Institute for Health, has called for increased best practice, comprehensive HIV prevention efforts, especially with vulnerable groups and high risk populations; and,

The CDC has encouraged everyone to know their HIV status; and,

The international HIV and AIDS community has recognized the important role of faith communities like the United Church of Christ in HIV prevention and care, and the untapped capacity that exists in such communities for effective response; and,

The Fourteenth General Synod of the United Church of Christ adopted the Resolution on Acquired Immune Deficiency Syndrome (AIDS) and declared its “compassionate concern and support for all persons with AIDS, their lovers, spouses, families and friends” and the Sixteenth General Synod of the United Church of Christ adopted the pronouncement “Health and Wholeness in the Midst of a Pandemic” and called the United Church of Christ to leadership in response to AIDS.

Therefore let it be resolved that the Twenty-Seventh General Synod of the United Church of Christ:

Declares its compassionate concern about the growing human immunodeficiency virus (HIV) epidemic in the United States and throughout the world, and its support for all those living with and affected by HIV; and,

Reaffirms the Pronouncement on Health and Wholeness in the Midst of a Pandemic adopted by the Sixteenth General Synod, the Resolution on Acquired Immune Deficiency Syndrome (AIDS) adopted
Affirms current efforts to, and calls on all clergy and lay persons in all settings of the United Church of Christ to:

- become knowledgeable about HIV and AIDS,
- understand how HIV is transmitted and how it is prevented,
- work to prevent its transmission,
- reduce stigma and discrimination, and
- help the whole church to increase its HIV competency; and,

Strongly urges all clergy and lay persons in the United Church of Christ to know their HIV status; and,

Calls on local churches and other settings of the church to develop and implement best practice comprehensive HIV prevention education, programs and strategies for church and community, with particular attention to vulnerable groups and at risk populations; and,

Calls on the United Church of Christ HIV and AIDS Network (UCAN, Inc.) to work collaboratively within and beyond the United Church of Christ to provide technical assistance, training, education, and resources to help all settings of the church develop and implement comprehensive HIV prevention strategies and programs for church and community, and encourage the use of existing resources such as Affirming Persons, Saving Lives and the comprehensive sexuality education curriculum, Our Whole Lives; and,

Calls on local, state and federal governments to work together to develop and implement a national HIV and AIDS strategy that includes increased funding for best practice comprehensive HIV prevention programs; and,

Calls on Wider Church Ministries to report on the progress of the implementation of this resolution to the next three General Synods.

FUNDING

The funding for the implementation of this resolution will be made in accordance with the overall mandates of the affected agencies and the funds available.

IMPLEMENTATION

In collaboration with Wider Church Ministries, UCAN, Inc. is responsible for developing the strategy and program designed to implement this resolution.