



# Recommendations: Churchwide Strategy on HIV and AIDS

## Background

The Evangelical Lutheran Church in America, like its predecessor church bodies, has a long history of work related to HIV and AIDS. Presiding Bishop Mark S. Hanson and several representatives from this church participated in the International AIDS Conference and ecumenical pre-conference event in July 2006. Following the conference, Presiding Bishop Hanson encouraged consideration by the Church Council and the 2007 Churchwide Assembly of a request to develop a comprehensive churchwide strategy on HIV and AIDS.

A planning group was organized, which includes representatives from the Church in Society unit, the Global Mission unit, the Communication Services unit, and the Office of the Presiding Bishop. In November 2006, a larger group was convened involving members of an existing interunit staff working group on HIV and AIDS, missionaries, advocacy staff, and others. Prior to the meeting, staff conducted an inventory of existing work, policies, and funds that support AIDS ministries in this church. The meeting consisted of an asset-mapping process designed to lead to the development of a comprehensive strategy on AIDS ministries in this church.

More than 65 million people have been infected with the HIV virus, of whom 25 million have died of AIDS since the late 1980s.<sup>1</sup> Some 2.9 million people died last year from AIDS and the number of people worldwide living with HIV and AIDS increased to 39.5 million. The AIDS epidemic is a human tragedy of massive proportion, affecting individuals and families of all races, religions, economic status, and social position on all continents.

In a rare, unanimous, international consensus, the 189 nations signing the Declaration of Commitment at the 2001 United Nations General Assembly on HIV and AIDS described AIDS as one of the greatest development crises in human history and committed themselves to act nationally and internationally to stop the epidemic.

The United Nations 2006 High-Level Review Meeting on HIV and AIDS reaffirmed the 2001 General Assembly Declaration, acknowledged the failures of the past five years, and committed governments at a national level to develop national level targets to move toward universal access to comprehensive prevention programs, treatment, care, and support by 2010.

The United Nations 2006 High-Level Review Meeting on HIV and AIDS also committed governments to undertake "comprehensive reviews in 2008 and 2011, within the annual reviews of the General Assembly, of the progress achieved in realizing the [2001] Declaration of Commitment on HIV and AIDS . . . ."

<sup>1</sup>Statistics are from the UN AIDS Report on the Global AIDS Epidemic (2006).

The 2005 G8 Summit at Gleneagles Hotel in Perthshire, Scotland, made a commitment to the goal of achieving universal access to treatment by 2010.

"Stop AIDS. Keep the Promise" (2005-2010) is the theme of the World AIDS Campaign, with the goal of ensuring that governments and organizations, including religious organizations and leaders, keep the promises they have made to respond to AIDS effectively.

The HIV and AIDS crisis has had a disproportionate impact on Sub-Saharan Africa, as evidenced by the following facts:

- 2.1 million—70 percent of AIDS-related deaths worldwide—occurred in Sub-Saharan Africa;
- nine percent of children under 15 in the region—over 12 million children—have lost one or more parent to AIDS;
- the highest HIV incidence rates in the world are found in southern Africa, with one-fifth to one-third of adult populations in some countries being HIV-positive.

Significant advances have been achieved both in knowledge about HIV and AIDS and in medical options for treatment since the virus was identified in the late 1980s.

Some countries have been able to reduce the incidence rate within their populations through intentional and coordinated efforts involving governments, international organizations, churches, businesses, medical institutions, and non-governmental organizations.

The economic poverty of individuals, communities, and countries has a significant impact on the spread of HIV and often limits access to life-saving and life-prolonging drugs, nutrition, and therapies.<sup>2</sup>

The spread of HIV has led to the even greater economic impoverishment of already poor communities, especially on the African continent. The AIDS epidemic is poised to expand dramatically in other parts of the world (e.g., parts of Asia and the Caribbean) unless intentional action is taken quickly.

Although progress has been made in reducing the stigmatization related to HIV and AIDS, fear and prejudice continue to cause pain and exclusion for those living with the virus and their circle of family and friends.

The ELCA, in partnership with ecumenical, interfaith, and secular partners, has responded to the realities of HIV and AIDS within communities and throughout this country. This church has a long history of ministry with both companion churches and ecumenical, interfaith, and community-based partners in Africa and other countries, and has been deeply engaged with them in ministries to and with persons living with HIV and AIDS.

Many of the ELCA's companion churches in Africa have requested that the ELCA increase its efforts and "go the second mile" to walk with them as they respond to the AIDS crisis and

<sup>2</sup>According to the UN AIDS analysis, less than a quarter of the 4.6 million people in Sub-Saharan Africa who need anti-retroviral therapy receive it.

as they seek justice for those affected by this disease. The ELCA affirmed “Stand with Africa: A Campaign of Hope” in 2001, and in 2004 made this campaign an ongoing emphasis within the ELCA World Hunger Appeal in order to have the resources better to assist companion churches and agencies engaged in HIV and AIDS ministries in Africa, while continuing to assist companions from other continents through ongoing ELCA ministries and World Hunger support.

Through companion synod relationships, knowledge among ELCA members—both of the impact of HIV and AIDS on the ministries of companion churches and of the possibilities for effective common action—has grown over the last decade.

The Evangelical Lutheran Church in America understands that this church is called to respond through its ministries to the 1.4 million people living with HIV on this continent and to address the global crisis, both as a member of the Lutheran World Federation and as a part of the wider ecumenical community.

Twenty-five years into the AIDS epidemic, the United Nations has called on the nations of the world to transform the global response to AIDS “from an episodic, crisis management approach to a thoughtful, long-term response that emphasizes the use of evidence-based strategies and recognizes the need for long-term commitment.”

## Recommendation for Assembly Action

1. To commit the Evangelical Lutheran Church in America to a deeper engagement in addressing the AIDS pandemic through the development of a churchwide strategy for action in the coming decade, which will:

- a. build on the experience and commitments of the past and the strength of ELCA congregations, synods, churchwide structures, institutions, and agencies;
- b. utilize the best thinking of ELCA experts, practitioners, congregational leaders, related institutions and agencies, and people living with HIV and AIDS, as well as ecumenical and global companions, in the development of this strategy;
- c. express the ELCA’s commitment to work in cooperation with the Lutheran World Federation and in tandem with ecumenical partners both in this country and throughout the world;
- d. express the ELCA’s commitment to engage proactively with others of good will in civil society and in government as they respond to the AIDS crisis; and
- e. continue to move from crisis management to a more integrated, effective, and sustainable long-term response to the AIDS pandemic;

2. To express the solidarity of the ELCA with all people who are living with HIV and AIDS and with their families, both in this country and throughout the world:

- a. recognizing and giving thanks for the gifts, skills, and experience that people living with HIV and AIDS bring to addressing the pandemic and committing this church to work closely with them in its response;
  - b. rejecting categorically the stigma and discrimination that are at times associated with HIV and AIDS;
  - c. working to ensure universal access both to compassionate care and to effective treatment and prevention;
  - d. engaging in education to prevent the further spread of HIV and AIDS; and
  - e. providing a welcome in all aspects of church and congregational life to people living with or affected by HIV and AIDS;
3. To encourage ELCA members, congregations, agencies and institutions, synods, and the churchwide organization, at the same time this strategy is being developed, to:
- a. continue and extend their ministries among and with people living with HIV and AIDS;
  - b. pray for people directly affected by HIV and AIDS and for churches, communities, and governments that they may have both the will and the wisdom to act boldly and effectively to address this crisis;
  - c. intensify their support for the second-mile “Stand with Africa” campaign as well as the broader World Hunger Appeal, which enable this church to assist companions throughout the world as they respond to the AIDS crisis; and
  - d. advocate with the U.S. government, urging it to:
    - (1) demonstrate global leadership to achieve agreed-upon international goals, including universal access to treatment, care, and prevention by 2010;
    - (2) contribute its proportionate share to fund fully The Global Fund to Fight AIDS, Tuberculosis, and Malaria; and
    - (3) abolish the extraordinary requirements that make it difficult and painful for people living with HIV to receive a visa to enter the United States for any purpose, and prohibit discrimination against people living with HIV and AIDS;
4. To convey the deep appreciation of this church:
- a. to all those who provide care and support for those living with HIV and AIDS and those who seek a cure for this disease, in particular those members of this church who live out their Christian vocation as nurses, doctors, health researchers, and care providers;
  - b. to ELCA pastors and congregations actively engaged in ministry with people living with HIV and AIDS as they support, counsel, and advocate with them for just and compassionate action in the church and in the wider society;

- c. to all those who have provided financial support to HIV and AIDS research and care, both in this country and throughout the world;
  - d. to all those ELCA members whose financial gifts have enabled the ELCA to walk with companion churches in their response to the AIDS crisis, in particular through their “second-mile” giving to the World Hunger Appeal’s “Stand with Africa” campaign and companion synod action;
  - e. to Lutheran social ministry organizations, hospitals, health facilities, and voluntary organizations, including the Lutheran AIDS Network (LANET), that provide assistance to people living with HIV and AIDS as well as leadership in church and society on this issue;
  - f. to the Lutheran World Federation, Lutheran World Relief, Lutheran Immigration and Refugee Service, ecumenical agencies (both domestic and global), and others with which the ELCA partners to provide care, address the impact of HIV and AIDS in communities, prevent the further spread of the disease, and advocate with governments to step up their action in addressing this pandemic; and
  - g. to companion churches in other countries, with which the ELCA is privileged to walk in ministry, as they respond to often overwhelming human need resulting from the spread of HIV; and
5. To request that the Church in Society and Global Mission program units take the lead in developing this strategy, which will be brought to the Church Council for adoption in 2008 and reported to the 2009 Churchwide Assembly.

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