



STATEWIDE HIV/AIDS CHURCH  
OUTREACH ADVISORY BOARD

As clergy representing the ecumenical church community across the state, the Statewide HIV/AIDS Church Advisory Board has come together to address the soaring rate of HIV infection within the African American community. We are here because African Americans continue to be disproportionately infected with HIV and AIDS. As reported in the 2001 CDC HIV/AIDS Surveillance, African American and Hispanic women together represent less than one-fourth of all U.S. women, yet they account for more than three fourths (78 percent) of AIDS cases reported to date among women in the United States. Furthermore, in 2001, more African American men were reported with AIDS than any other racial/ethnic group.

The African American Church has had a historic role and interest in the well being of the African American community. The high incidence of HIV/AIDS among African Americans is a health crisis of epidemic proportions that threatens our future. We have joined with the California Department of Health Services, Office of AIDS in support of the state's outreach efforts to educate communities about the threat of HIV/AIDS and to mobilize communities to get tested.

Early detection and treatment have proven to be effective tools in reducing the spread of HIV/AIDS. We call upon all members

of the clergy to join us in an ongoing, sustained effort to provide HIV education and counseling. We will still preach and teach abstinence as the best option, however, the present crisis compels us to broaden our compassion and prevention messages to include persons who are or have been sexually active.

A concerted, persistent effort in some form to incorporate awareness and control of this pandemic is vital. We must reach beyond the pulpit into the pews and into the hearts of our congregants and communities. We have to treat HIV/AIDS as a disease and show the same compassion we would for any illness.

We urge you, our fellow clergy, to join with us to stop the spread of this devastating disease through the strength we possess in our common bond as people of faith.

Reverend Dr. Clyde W. Oden, Jr.  
*Pastor, Bryant Temple African Methodist Episcopal Church  
Los Angeles*

Working Committee Chairman  
*Statewide HIV/AIDS Church Outreach Advisory Board*



**Whereas**, we, the leaders of the faith community, recognize that the Black church is perhaps the oldest and most beloved institution in the African American community. The church has historically been a spiritual anchor of the African American community and the primary resource for the survival and progress of its people.

**Whereas**, we, the leaders of the faith community, recognize the history and strength of the church in the African American community in bringing about individual and social change.

**Whereas**, we, the leaders of the faith community, recognize the urgent need to address the devastating impact HIV and AIDS is having on the African American community.

**We** do hereby resolve that we will implement a church mentor program to help churches develop an AIDS ministry or integrate HIV/AIDS education into their existing outreach program.

**We** do hereby resolve that we will provide HIV/AIDS training from a spiritual, medical, public health and ecumenical point of view to our existing church counselors.

**We** do hereby resolve that we will provide churches with HIV/AIDS educational resources and contacts that will focus on HIV/AIDS from a spiritual, medical, public health and ecumenical point of view.

**We** do hereby resolve that we will inform those in our faith community about the importance of getting tested and refer them to private and confidential facilities that offer HIV testing.

**We** do hereby resolve to genuinely pursue and maintain the Faith Community Covenant as a living document and testimony to the mission to which we are called as keepers of the faith.

**We** do further resolve, that to heighten the awareness of HIV/AIDS and develop sensitivity to the issue, we will dedicate a minimum of four Sunday services a year to HIV/AIDS. To help congregations retain the message of the sermon, church-sensitive prevention materials will be handed out following every HIV/AIDS service and HIV/AIDS materials will be available at our church on an ongoing basis.

Pastor J. Alfred Smith, Sr.  
Allen Temple Baptist Church

Pastor W. James Smith  
Calvary Baptist Church

Bishop Ernestine Cleveland Reems  
Center of Hope Community Church

Pastor Parnell M. Lovelace, Jr.  
Center of Praise Ministries

Bishop E. Lynn Brown  
Christian Methodist Episcopal Church

Reverend Yvette Flunder  
City of Refuge

Reverend M. Andrew Robinson-Gaither  
Faith United Methodist Church

Bishop Kenneth C. Ulmer  
Faithful Central Bible Church

Bishop Sherwood Carthen  
Harvest Church

Reverend Norman S. Johnson, Sr.  
First New Christian Fellowship  
Missionary Baptist Church

Reverend Clyde W. Oden, Jr.  
Holy Trinity African Methodist  
Episcopal Church

Reverend Ron Gibson  
Life Church of God in Christ

Reverend Charles Singleton  
Loveland Church

Bishop George McKinney  
St. Stephens Church of God in Christ

Reverend Alfreda Lanoix  
Unity Fellowship Church

Bishop Charles E. Blake  
West Angeles Church of God in Christ

Now I beseech you, brethren, by the name of our Lord Jesus Christ, that ye all speak the same thing, and that there be no divisions among you; but that ye be perfectly joined together in the same mind and in the same judgement. (Corinthians 1:10)

## INTRODUCTION TO THE PASTOR'S GUIDEBOOK



AIDS IS A LEADING KILLER OF AFRICAN AMERICANS AGES 25-44

**H**IV/AIDS has had a devastating impact on the African American community. AIDS is a leading cause of death in the U.S. for African American men and women ages 25 - 44. According to the Center for Disease Control and Prevention (CDC), in the 33 states where HIV cases were reported in 2001, 50 percent of HIV diagnoses were among African Americans. It is estimated that half of new HIV infections occur in teens and young adults under 25, and numerous studies suggest that African American young people represent the majority of infections. These alarming statistics are a result of HIV/AIDS information, services and resources not effectively reaching the African American community.

To address the HIV/AIDS pandemic, African American church leaders throughout California came together to develop a first-ever alliance with the California Department of Health Services, Office of AIDS to launch the HIV/AIDS Black Church Outreach Program. The Statewide HIV/AIDS Church Outreach Advisory Board, a coalition of African American pastors and bishops, convened in Los Angeles on April 21, 1999. At this meeting, the coalition of churches made a commitment to work together with the State Office of AIDS to address specific needs of their churches and develop materials to support the churches' efforts to address HIV/AIDS prevention in a way that is sensitive to church values.

To assist with the development of the *Pastor's Guidebook*, the state partnered with LOOK UP & LIVE! – The Urban Church Task Force on HIV/AIDS, a multi-denominational collaborative ministry that provided guidance and support to churches in the Los Angeles area on ministry-based HIV/AIDS programs. Additionally, Statewide HIV/AIDS Church Outreach Advisory Board Members reviewed all materials in the Guidebook.

The guidebook titled, *Healing Begins Here: A Pastor's Guidebook for HIV/AIDS Ministry through the Church*, is a step-by-step resource designed specifically for pastors/bishops with accurate information about HIV/AIDS, its pervasiveness in African American communi-

ties and its prevention. The *Pastor's Guidebook* was created so that church leaders can address HIV/AIDS prevention in a Christian context and heighten the awareness of HIV/AIDS within their congregations. The objectives of the *Pastor's Guidebook* are to:

- Provide clergy with accurate clinical and statistical information on HIV/AIDS and its effect on the lives of African Americans
- Assist clergy in developing sermons on issues and concerns related to HIV/AIDS
- Help clergy incorporate HIV/AIDS education and prevention strategies into their existing ministries
- Assist clergy in raising awareness and initiating dialogue about the disease throughout their congregations and the African American community
- Help clergy mobilize their congregations to work toward stopping the spread of HIV/AIDS within the African American community

A key component of the *Pastor's Guidebook* is the "Sermon Notes for Clergy." These sermons and notes were submitted by pastors who have already delivered sermons on HIV/AIDS. These sermons are designed to stimulate thought and assist pastors as they develop sermons to address their congregations about HIV/AIDS issues, including compassion and prevention strategies. The *Pastor's Guidebook* also contains current information about HIV, a glossary of terms associated with HIV/AIDS, suggestions for integrating HIV/AIDS programs into existing ministries and a list of educational materials that can be distributed to church members.

The role of the church in the African American community has always been that of a compassionate caregiver. As more African Americans are infected with and affected by HIV/AIDS at alarming rates and the death toll continues to rise, the church is called upon to take part in preventing the spread of the disease. The *Pastor's Guidebook* is designed to support church leaders in this noble task.

**I CAN DO ALL THINGS THROUGH CHRIST WHICH STRENGTHENS ME. PHIL. 4:13**

YEA A MAN OF KNOWLEDGE INCREASETH STRENGTH (PROVERB 24:5)



California  
Department of  
Health Services

YEA A MAN OF KNOWLEDGE INCREASETH STRENGTH (PROVERB 24:5)

Since the beginning of the AIDS epidemic, many ethnic communities have been disproportionately impacted by HIV/AIDS. The African American community has been particularly affected, calling for increasingly progressive prevention efforts within this community. The following statistics illustrate how HIV/AIDS continues to affect African Americans:

- Nationwide, approximately 1 in 50 African American men and 1 in 160 African American women are believed to be infected with HIV.
- In 2001, African Americans accounted for 23 percent of new AIDS cases reported in California while representing only 6.7 percent of the population.
- The AIDS case rate nationwide is almost ten times higher for African Americans than among whites.

In response to this growing pandemic, AIDS service organizations and public agencies are hoping to reach the African American community with prevention messages through the involvement of the church. In turn, many churches are having to address HIV/AIDS issues within their congregations, and understand that they must get involved with prevention efforts to help stem the spread of this devastating disease.

The Department of Health Services, Office of AIDS, has partnered with African American church leaders in California to develop HIV/AIDS prevention materials that are sensitive to the church environment. The Pastor's Guidebook is designed to provide guidance and suggestions to pastors and bishops on how to incorporate HIV/AIDS prevention and compassion programs into their ministries. In this Guidebook you will find:

- Sermon notes focusing on HIV/AIDS along with sample sermons.

AIDS IS A LEADING KILLER OF AFRICAN AMERICANS AGES 25-44

- Covenant agreement signed by African American church leaders, expressing their commitment to addressing HIV/AIDS within a Christian context.
- A list of the organizations that helped create this Pastor's Guidebook.
- A description of the effect that HIV/AIDS is having on African Americans and why the church needs to be involved in prevention efforts.
- Common myths associated with HIV/AIDS along with facts to dispel them.
- An "HIV 101" section to provide basic information about HIV/AIDS.
- Suggestions for how churches can start an HIV/AIDS ministry.
- Testimonials from African Americans living with HIV or AIDS.
- A list of HIV/AIDS prevention materials available.
- A glossary of HIV/AIDS-related terms.
- Resource list of HIV/AIDS referrals.

We hope you find this information helpful in addressing HIV/AIDS within your ministry. As a religious and community leader, it is vital that your congregations and surrounding communities are mobilized to become educated and involved with HIV/AIDS prevention efforts.

If you have any questions about the Pastor's Guidebook, please contact Alyssa Shepherd-Moore at BaumanCurry & Co., partners of the California AIDS Prevention Campaign at (323) 525-0559.

Michael Montgomery  
Chief, Office of AIDS

Vanessa Baird, M.P.P.A.,  
Chief, California Department of Health Services, Office of Multicultural Health  
Former Assistant Chief, Office of AIDS



STATEWIDE HIV/AIDS CHURCH  
OUTREACH ADVISORY BOARD

AIDS IS A LEADING KILLER OF AFRICAN AMERICANS AGES 25-44

**Statewide HIV/AIDS Church Outreach Advisory Board**

The Statewide HIV/AIDS Church Outreach Advisory Board, a volunteer committee, has worked in partnership with the California Department of Health Services, Office of AIDS to develop and distribute the innovative *Healing Begins Here* guidebook and educational companion materials. Since the Board's inception in 1999 – launched with the participation of more than 75 African American church leaders – outreach and training have been conducted throughout the state, especially with some of the Black community's most conservative churches.

The Church Advisory Board members have reviewed all HIV prevention information and materials associated with *Healing Begins Here* to help ensure the messages are sensitive to the church environment. In this way, board members hope the materials will be useful to their fellow clergy.

Following is the list of past and present Statewide HIV/AIDS Church Outreach Advisory Board members:

**Southern California**

\*Reverend Dr. Clyde W. Oden, Jr.  
**Bryant Temple A.M.E. Church**  
2525 W. Vernon Boulevard  
Los Angeles, CA 90008  
(323) 293-6201

\*Reverend W. James Smith  
**Calvary Baptist Church**  
719 Cesar Chavez Parkway  
San Diego, CA 92113  
(619) 233-6487

\*Bishop Kenneth C. Ulmer  
**Faithful Central Bible Church**  
333 Florence Avenue  
Inglewood, CA 90301  
(310) 330-8000

\*Reverend M. Andrew Robinson-Gaither  
**Faith United Methodist Church**  
1713 W. 108th Street  
Los Angeles, CA 90047  
(323) 754-8453

Reverend Cecil L. Murray  
**First A.M.E. Church of Los Angeles**  
2270 S. Harvard Boulevard  
Los Angeles, CA 90018  
(323) 730-9180

\*Reverend Norman S. Johnson, Sr.  
**First New Christian Fellowship  
Missionary Baptist Church**  
1555 W. 108th Street  
Los Angeles, CA 90047  
(323) 756-2541

YEA A MAN OF KNOWLEDGE INCREASETH STRENGTH (PROVERB 24:5)

\*Reverend Ron M. Gibson  
**Life Church of God in Christ**  
3349 Rubidoux Boulevard  
Riverside, CA 92405  
(909) 684-5433

Bishop Henry M. Williamson, Sr.  
Presiding Prelate  
**Ninth District Christian Methodist  
Episcopal Church**  
CA/AZ/NM/AK/HI/OK/OR  
3844 W. Slauson Avenue, Suite 1  
Los Angeles, CA 90043  
(323) 294-3830

\*Bishop George McKinney  
**St. Stephens Church of  
God in Christ**  
5825 Imperial Avenue  
San Diego, CA 92114  
(619) 262-2671

**Northern California**

\*Reverend J. Alfred Smith, Sr.  
**Allen Temple Baptist Church**  
8501 International Boulevard  
Oakland, CA 94621  
(510) 544-8910

\*Bishop Ernestine Cleveland Reems  
**Center of Hope Community Church**  
8411 MacArthur Boulevard  
Oakland, CA 94605  
(510) 568-5261

\*Bishop Parnell M. Lovelace, Jr.  
**Center of Praise Ministries  
International**  
1228 23rd Street (church location)  
Sacramento, CA 95816  
10455 Investment Circle (offices)  
Rancho Cordova, CA 95670  
(916) 361-7729

**Former Members**

\*Bishop E. Lynn Brown  
**Formerly of the CME 9th District**  
Los Angeles, CA

\*Reverend Charles Singleton  
**Loveland Church**  
Rialto, CA

\*Reverend Raymond Turner  
**Inland Empire Concerned African  
American Churches**  
Temple Missionary Baptist Church  
1583 West Union Street  
San Bernardino, CA 92411  
(909) 888-2038

Archbishop Carl Bean, D. M.  
Founder/Presiding Prelate  
**Unity Fellowship of Christ Church**  
5148 W. Jefferson Boulevard  
Los Angeles, CA 90016  
(323) 938-8322

\*Bishop Charles E. Blake, Sr.  
**West Angeles Church of God in Christ**  
3045 Crenshaw Boulevard  
Los Angeles, CA 90016  
(323) 733-8300

\*Bishop Yvette Flunder  
**City of Refuge United Church of Christ**  
1025 Howard Street  
San Francisco, CA 94103  
(415) 861-1060

Reverends Ellington and Tecoy Porter  
**Genesis Missionary Baptist Church**  
2801 Meadowview Road  
Sacramento, CA 95832  
(916) 422-8772

Reverend Paul L. Binion II  
**Westside Church of God**  
1422 W. California Avenue  
Fresno, CA 93706  
(559) 237-1444

*\*charter advisory board members*

\*Bishop Sherwood Carthen  
**Harvest Church**  
Sacramento, CA

\*Reverend Alfreda Lanoix  
**Unity Fellowship of Christ Church**  
Los Angeles, CA



In Memory Of  
Minister Damon Eskridge  
West Angeles Church of God in Christ

### Urban Church Task Force on HIV/AIDS

In February 1998, several ministry leaders in Los Angeles met to establish effective strategies to minister to those infected with and affected by HIV/AIDS in urban communities. The result of that meeting was the development of LOOK UP & LIVE! The Urban Church Task Force on HIV/AIDS, which was founded by Minister Damon L. Eskridge of West Angeles Church of God in Christ. Minister Eskridge passed into Glory on February 12, 2000 because of illnesses caused by infections due to HIV. The LOOK UP & LIVE! Steering Committee played an important role in developing *Healing Begins Here*, providing invaluable HIV/AIDS information and direction in a church-sensitive manner. At the close of their contract (June 30, 2002) with Los Angeles County, LOOK UP & LIVE! developed a resource guide of church-approved HIV/AIDS facilities for the county.

Though funding for LOOK UP & LIVE! through Los Angeles County ceased, the spirit that gave birth to the coalition remained. Recognizing the need to carry on the work of the church in HIV/AIDS awareness and prevention, many of the same steering committee members met once again to develop the URBAN CHURCH TASK FORCE ON HIV/AIDS (UCTF). In an effort to fully embrace the idea of coalition building the committee meets once a month at different church locations to discuss strategies that effectively create HIV/AIDS awareness.

Most notably in 2003, during the Martin Luther King, Jr. "Kingdom Day" parade in Los Angeles the Statewide HIV/AIDS Church Outreach Advisory Board provided leadership that helped the UCTF solicit churches as part of National Black HIV/AIDS Awareness Day (NBHAAD – observed annually on February 7). The response of churches exceeded the availability of space allotted a marching group. Churches paraded down Martin Luther King, Jr Boulevard carrying placards, banners and wearing t-shirts with the *Healing Begins Here* logo.

Thanks to support from the California Department of Health Services, Office of AIDS (CDHS-OA) and the Statewide HIV/AIDS Church Advisory Board, the UCTF marched as one of four units chanting and rallying

onlookers to repeat, "Stop the spread of HIV in the Black Community. Get educated. Get tested. Get involved." Marchers expressed that the most rewarding part was when people along the parade route recognized signs displaying their church's name and shouted back proudly. UCTF looks forward to continuing strong, coalition building efforts such as these.

Urban Church Task Force on HIV/AIDS Steering Committee Members are:

Janet Curry  
Alyssa Shepherd-Moore  
**BaumanCurry & Co**  
5724 W. Third Street, Suite 512  
Los Angeles, CA 90036  
(323) 525-0559

Robin Denson-Anacker  
**Brookins Community African Methodist Community Church**  
4831 S. Gramercy Place  
Los Angeles, CA 90062  
and

**Kaiser Permanente Educational Theatre Program**  
815 Colorado Boulevard,  
Suite 103  
Los Angeles, CA 90041  
(323) 259-4531

Regina Brandon  
**Cochran Avenue Missionary Baptist Church**  
1304 S. Cochran Avenue  
Los Angeles, CA 90019  
(323) 692-0290

Myla Rahman  
**Congresswoman Juanita Millender McDonald**  
970 W. 190th Street, Suite 900  
Torrance, CA 90502  
(310) 538-1190

Minister Robert Bolden  
**Crenshaw Christian Center**  
7901 S. Vermont Avenue  
Los Angeles, CA 90044  
(323) 758-3777

Pastor Mary Alice Haye  
**Faithful Central Bible Church**  
333 Florence Avenue  
Inglewood, CA 90301  
(310) 330-8000

Peggy Hill  
Sherice Harris  
Sahlu Shirum  
**FAME Health Corporation**  
2241 S. Hobart  
Los Angeles, CA 90018  
(323) 734-7760 x-4023

George and Anna Gant  
**Holman United Methodist Church**  
3320 W. Adams Boulevard  
Los Angeles, CA 90018  
(323) 295-0667

Renee Woodruff  
**Phillips Temple Christian Methodist Episcopal Church**  
971 E. 43rd Street  
Los Angeles, CA 90011  
(323) 233-4783

Sherion Johnson  
**Prototypes**  
5601 W. Slauson Avenue, #200  
Culver City, CA 90230  
(310) 641-7795 Ext. 141

Loretta Ryals  
**SCLC/Martin Luther King Legacy Association**  
4182 S. Western Avenue  
Los Angeles, CA 90062  
(323) 290-4100

Edna Williams  
**St. Brigid Catholic Church**  
1959 W. 65th Place  
Los Angeles, CA 90047  
(323) 758-7633

and  
**LA County 2nd District  
HIV/AIDS Faith Initiative**

Rachel Tate  
**The Salvation Army**  
900 W. James M. Wood Boulevard  
Los Angeles, CA 90015  
(213) 627-7354

Minister Russell Thornhill  
**Unity Fellowship of Christ  
Church**  
5149 W. Jefferson Boulevard  
Los Angeles, CA 90016  
(323) 938-8322

Minister Cheryl Lockhart  
**Vision of Life/Bible Enrichment  
Fellowship Church**  
1240 S. Burnside Avenue  
Inglewood, CA 90019  
(213) 924-3660

Pastor James M. Thomas  
**Living Word Community Church  
of Los Angeles**  
3303 W. Vernon Avenue  
Los Angeles, CA 90008  
(323) 459-7636



BaumanCurry & Co. Public Relations (BC&C) has worked in partnership with the California Department of Health Services, Offices of AIDS (CDHS-OA) on the Statewide *HIV/AIDS Black Church Outreach Program* since 1999. Because of the leadership of Janet Curry (chief executive officer of BC&C) our responsibility, then and now, has been to facilitate HIV/AIDS awareness, prevention and testing information to African American communities through traditional and non-traditional channels of communication.

BC&C's continued objective has been to focus on the disproportionate percentages of HIV/AIDS infection that are affecting African American communities throughout the state. However, AIDS does not discriminate based on race, religion, color, geography or sexual orientation. That is why we believe it is important to build alliances that create an atmosphere for productive, problem-solving dialogue with diverse groups. By talking, participants open the door to leverage resources and to learn more about beneficial programs that can help to combat the common enemy of HIV/AIDS.

For example, key relationships were created in 1999 between CDHS-OA and the Statewide HIV/AIDS Church Outreach Advisory Board (SWAB – see page 10 for an overview). Thanks to SWAB's leadership, we have seen an increase in HIV/AIDS awareness activities among churches.

Following the Pastors' Breakfast in June 2002 – hosted by Bishop Kenneth C. Ulmer and Faithful Central Bible Church – SWAB members demonstrated their willingness to move the board to a higher level of involvement. They voluntarily remained after the breakfast to discuss strategies on how to develop a functioning, working committee that would build upon existing efforts to disseminate HIV/AIDS information throughout the state. As a result of that meeting, World AIDS Day (WAD) 2002 was the most successful HIV/AIDS awareness campaign the board has spearheaded.

CDHS-OA and SWAB pooled their energy and worked to encourage churches to observe WAD on December 1. Throughout the state, seventy (70) Black churches stood in solidarity to deliver sermons, handout quiz cards, provide confidential testing and lead intercessory prayers for people infected with, and affected by HIV/AIDS.

Because of additional support from Los Angeles County Department of Health Services Office of AIDS Programs and Policy, 51 of those churches were from Los Angeles County. Over six million Californians read about the effort in print, heard it on news radio or saw coverage of influential ministers preaching about HIV/AIDS on the evening news. In addition, over 20,000 parishioners received *Healing Begins Here* quiz cards throughout the state.

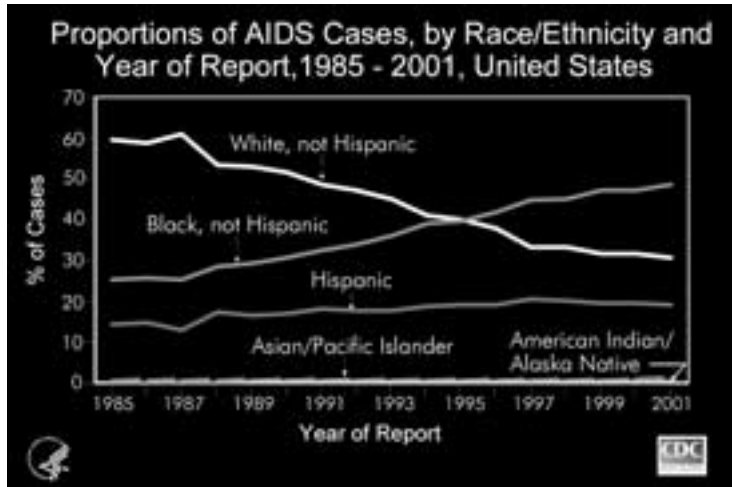
As we strengthen the *HIV/AIDS Black Church Outreach Program* communities in need will receive access to compassionate, caring churches that are equipped to provide guidance. Historically the Black church has been the support system for African American communities. Distribution of the *Healing Begins Here* guidebooks and quiz cards is merely an extension of that support.



Alyssa Shepherd-Moore  
Vice President of Ecumenical Affairs, BaumanCurry & Co.

## FACTS ABOUT HIV/AIDS AMONG AFRICAN AMERICANS

YEA A MAN OF KNOWLEDGE INCREASETH STRENGTH (PROVERB 24:5)

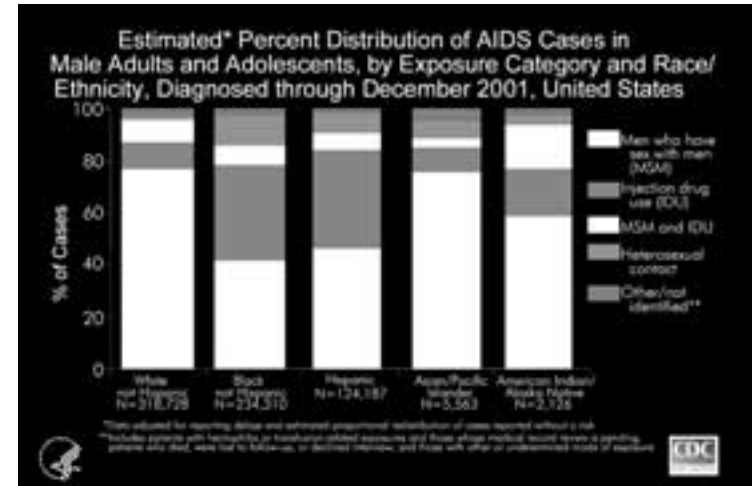


More than twenty years into the AIDS pandemic, the newest “face of AIDS” is more and more often, a black one. According to the CDC in 2001, African Americans accounted for about 21,000, or 50 percent, of the more than 41,000 estimated new AIDS cases diagnosed among adults.

In California, African Americans accounted for over 22 percent of recent AIDS cases (1998-2002) while comprising less than seven percent of the population. Rates of infection are soaring. The African American population is heavily affected and African Americans often wait longer to get tested for HIV. In addition, even fewer are receiving the proper care, medication and education to treat the virus so they will be able to stay healthier longer.

The factors fueling these alarming statistics are complicated. According to many AIDS activists, the disease seems to strike African Americans more often because of challenges in accessing health care, prevention services and treatment. In addition, there are taboos within the black community about discussing safer sex, drug use, and sexual orientation.

AIDS IS A LEADING KILLER OF AFRICAN AMERICANS AGES 25-44



### Men


According to statistics collected through December 2001 by the Centers for Disease Control and Prevention (CDC), the majority of AIDS cases for African Americans occur among men between the ages of 25 and 44. AIDS (HIV disease) is the leading cause of death among African American men ages 35 to 44 and is among the top three causes of death for African American men ages 25 to 54.

For African American men, it is estimated that 41 percent of AIDS cases are attributed to homosexual/bisexual behavior, while 37 percent were attributed to injection drug use. Unfortunately, higher rates of incarceration and injection drug use among African Americans are linked to higher rates of HIV infection, and currently, the AIDS case rate nationwide is almost ten times higher for African Americans than Caucasians.

**AIDS Cases and Rates among Women and Adolescent Girls, by Race/Ethnicity, Reported in 2001, United States**

Race/Ethnicity	Number	%	Rate per 100,000
White, not Hispanic	2,040	18	2.4
Black, not Hispanic	7,023	63	47.8
Hispanic	1,894	17	12.9
Asian/Pacific Islander	69	1	1.5
American Indian/ Alaska Native	42	<1	4.9
Total*	11,082	100	

\*Includes 14 women of unknown race/ethnicity



### Women

CDC's 2001 study revealed that AIDS (HIV Disease) is the leading cause of death among African American women ages 25 to 34 and is among the top three causes of death for African American women ages 35 to 44. Today, a large number of HIV infections among women are a result of injection drug use, either through use of contaminated needles or sex with an injection drug user. In addition, many women become infected because their partners have had sex with other men or women who are infected.

Reducing the toll of the pandemic among women will require efforts to combat substance abuse, in addition to reducing other HIV risk behaviors.

African American and Hispanic women together represent less than one-fourth of all US women, yet they accounted for more than three-fourths (80 percent) of AIDS cases reported among women in the United States in 2001.

### Teens and Young Adults

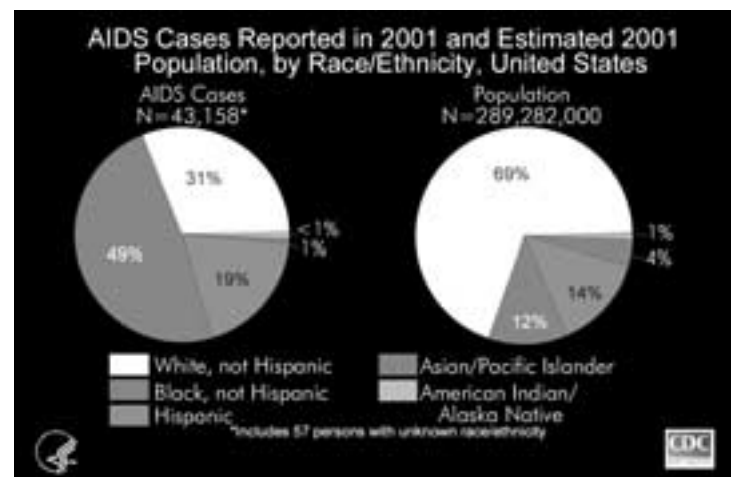
It is estimated that at least half of all new HIV infections in the United States are among people under 25. The majority of these young people were infected through unprotected sex. Of this population, young African Americans are most heavily affected, accounting for 65 percent of all HIV cases reported among 13-24 year olds.

Sexual activities and drug-related risks are primary factors in the spread of HIV/AIDS among young adults. Many young people report using alcohol or drugs when they have sex, and one in 50 high school students report having injected an illegal drug. It is critical to prevent patterns of these risky behaviors at an early age.

### The Role of the Church

Pastors through their churches have excellent opportunities to help prevent the spread of HIV among African Americans. The church has a trusted, time-honored role in the African American community, and many look to churches for information and guidance in their lives. By discussing HIV/AIDS openly, churches have the ability to educate their congregations about this disease and help prevent the spread of HIV/AIDS within African American communities.

There are undeniable societal factors that contribute to skyrocketing HIV infection rates among African Americans. Among many African Americans, there is an underlying distrust of the public health system and a number of myths exist about the disease itself. Many times, African Americans do not have adequate access to resources including health care and educational opportunities. These factors bring the crucial role of churches sharply into focus. Pastors can use their leadership roles to educate congregations about HIV/AIDS and help them understand how to prevent infection, and access available services.



**HIV INFECTION AND AIDS**

In the past, people have had good reason to be afraid of “catching diseases.” Today we have the benefit of science to provide us with the real causes of diseases and how to avoid infection. Despite the fact that HIV/AIDS has been around for more than 20 years, many people still do not understand the severity of the epidemic or know much about the disease – how it is transmitted, detected and treated. Below are myths and the facts about HIV and AIDS.

**MYTH**

A person who has HIV has AIDS.

**REALITY**

Acquired Immunodeficiency Syndrome (AIDS) is caused by a virus called Human Immunodeficiency Virus (HIV). (AIDS is the final and most severe stage of HIV infection.) With advances in AIDS drug therapies, a person may live with HIV for 10 or more years before reaching full-blown AIDS. AIDS is a disease in which the body’s natural immune system breaks down, leaving it unable to fight off infections, cancers and other diseases.

**MYTH**

AIDS is a curable disease.

**REALITY**

There is no known cure or vaccine to prevent HIV infection or AIDS. While a large number of patients with HIV are doing well with the new drug therapies (a reason why it is crucial to get tested early), there are others who are not benefiting. All people on these therapies face a lifetime of adhering to complicated treatments, requiring as many as 20 to 30 pills a day taken at carefully timed intervals.

Also, individuals taking these HIV/AIDS treatment regimens often experience a range of short-term and/or ongoing side effects from the drugs. The simple truth about HIV and AIDS – a truth that is often forgotten – is that HIV infection is preventable.

**MYTH**

HIV is easily transmitted and can be spread through casual contact, such as drinking from the communion cup after an infected person or by playing with infected children in Sunday school.

**REALITY**

HIV infection and AIDS is not transmitted through casual contact. The disease can only be spread through direct exchange of infected bodily fluids such as: blood, semen, vaginal secretions and breast milk. Exchange of these fluids can occur during unprotected sexual activities, sharing of contaminated needles and from an infected mother to her baby during pregnancy, childbirth or nursing. It is **NOT** transmitted by kissing, breathing, hugging, sharing food or drinking glasses or holding hands with an infected person. HIV is not transmitted by mosquitos, other insects or pets.

**MYTH**

Testing positive for HIV is an immediate death sentence.

**REALITY**

Testing positive for HIV is not an immediate death sentence. Many HIV-positive people live healthy, productive lives for 10 or more years before developing full-blown AIDS. Although there is no cure for or vaccine to prevent HIV infection or AIDS, there are new advances in treatment. However, adhering to these complicated treatment

regimens can be difficult, and not everyone is benefiting from them. It is crucial for anyone who put themselves at risk of contracting HIV to get tested as soon as possible. Early detection of HIV infection is a key factor in prolonging the life of an HIV-positive individual. Getting help from experienced HIV service providers can assist the HIV-infected person in making responsible decisions about treatment and taking care of his/her health.

#### MYTH

AIDS is not really a disease that African Americans get – it's mostly a disease of white gay men.

#### REALITY

African Americans who are at-risk for HIV, from all backgrounds and sexual orientations, are becoming infected at record rates, receiving less access to adequate care than whites and dying faster. In fact, in 1997 the CDC revealed that AIDS was the number one cause of death for black men and women ages 25 to 44 in the United States. In 1998, more African Americans were reported with AIDS than any other racial/ethnic group. African American children represented two-thirds (62 percent) of all reported pediatric AIDS cases. A vastly disproportionate number of African American women are now living with HIV/AIDS – African American women account for more than half of all AIDS cases among women.

#### MYTH

Tests for HIV are not accurate.

#### REALITY

Tests for HIV are extremely accurate. Antibodies to the virus (markers of infection) are usually detectable between two and twelve weeks after exposure. In some cases, it may take up to six months even though symptoms may not become apparent until much later. The California AIDS Hotline (1-800-367-AIDS) provides information on the location of free and anonymous testing sites in communities throughout the state.

#### MYTH

It's not safe to donate blood.

#### REALITY

Donating blood is safe. Blood banks and other blood collection centers use sterile equipment and disposable needles eliminating risk of infection. You cannot get HIV from donating blood.

#### MYTH

You can look at someone and tell if they have AIDS.

#### REALITY

You cannot look at someone and tell if they have HIV or AIDS. The symptoms are not necessarily visible and many people with HIV look and feel healthy. The disease affects people of all walks of life, regardless of gender, age, lifestyle or religious background. HIV is having the greatest impact today on African American women and young adults. The person sitting next to you may have the disease – there is no “scarlet letter” to tell you so.

“And the second is like unto it, Thou shalt love thy neighbour as thyself.” Matthew 22:39

## HIV Prevention and Transmission

**What is HIV?** – HIV stands for Human Immunodeficiency Virus. HIV is the virus that causes AIDS. HIV is a serious illness that attacks the immune system – the body’s ability to fight off infections, cancers and other diseases. You can be infected with HIV and not know it. Years can go by before you have any symptoms, yet you are still able to pass HIV on to others.

**What is AIDS?** – AIDS stands for Acquired Immunodeficiency Syndrome. AIDS is the last and most severe stage of HIV. It can take up to 10 years or more to develop AIDS after being diagnosed with HIV infection.

**How is HIV Spread?** – It’s what you do, not who you are, that puts you at risk for getting HIV. Anyone can get HIV. It is important to note that HIV infection is preventable and is not transmitted through casual contact. The virus is most often spread by an infected person during unprotected sex between two people, or by sharing unclean needles to inject drugs or for tattoos and piercings. An infected mother can also give the virus to her child during pregnancy, childbirth or breast feeding. The disease can only be spread through direct contact with the following infected bodily fluids: blood, semen, vaginal secretions and breast milk. Once you understand how HIV is spread, you can learn to lower your risk of being exposed.

**How HIV is NOT Spread** – Unlike colds or flu viruses, HIV is not spread through the air or through touching or everyday casual contact. At home, at work, or in the community, you don’t have to worry about getting HIV from:

- A food server, eating utensils or food
- Pets or insect bites
- Donating blood
- Using public restrooms, drinking fountains or swimming pools
- An infected person sitting next to you
- Sharing telephones, computers or gym equipment, shaking hands, hugging or kissing

**Consider Getting Tested** – The HIV antibody test is a special blood or oral test that determines if you have HIV. This test does not tell you if you have AIDS. Anyone who thinks he or she might have been exposed to HIV should get tested. The test detects antibodies that your immune system makes to try to fight the virus.

**Why Should You Get Tested and How?** – Having HIV is not a death sentence. Today it is possible for people living with HIV to stay healthy longer and delay the onset of AIDS if they are diagnosed early and receive the most current treatments. This is one reason why it is so important for people at risk of getting HIV to not put off getting tested. Tests for HIV are extremely accurate. The HIV antibody is detectable between two weeks and six months after exposure even though symptoms of HIV might not become apparent until much later. This means you can look and feel perfectly healthy and still be infected. In particular, pregnant women who are at risk for getting HIV should get tested because treatments are now available that can prevent the infection from being passed on to an unborn child. For information about free and private test site locations throughout California call the California AIDS hotline at (800) 367-AIDS.

**Treatments for HIV** – There is no cure or vaccine for HIV or AIDS. People with HIV may have initial flu-like symptoms for a few days and then go for years without any symptoms. Early treatments may help those infected stay healthy longer. In the past few years, effective drug treatments that combat HIV directly, known as “combination therapies” or “cocktails,” have been developed. These therapies can help slow the effect of HIV on the immune system that will allow someone who is HIV-positive to live a healthy, productive life for ten years or more before developing full-blown AIDS. While extremely beneficial for some people, these drugs do not work for everyone and the cost of therapy can average \$20,000 per year. Government programs are available to eligible clients to help pay for the cost of these drugs.

**Put Yourself in Control!** – Help stop the spread of HIV infection and the unnecessary fear of it. Share with others the information about behaviors that lower risk, and reassure them that the virus is not spread by casual contact. If a person chooses to have unprotected sex, he or she may be at risk of getting an STD (sexually transmitted disease) including HIV/AIDS. As pastor, you can inform your congregation to avoid the behaviors that will put them at risk and encourage

them to take heed and act upon the following steps:

- Learn how HIV/AIDS and other STDs are spread
- Learn about risky behaviors for HIV/AIDS, try to avoid them and get tested if you are at risk
- Discuss the risks and how to reduce them with a trained HIV counselor
- Practice safer sex, including using latex condoms correctly
- Communicate with sexual partner(s) about ways to reduce risk
- Be aware of all sexual partners' risk behaviors (i.e. sexual, drug use, etc.)

The only way to eliminate your risk of getting HIV/AIDS and other STD's is to practice abstinence. One way to practice "safer" sex is in the context of a married monogamous relationship (with no other partners outside of that relationship – and both partners knowing for certain that they are not infected with HIV). Also, properly using latex condoms can significantly reduce the risk of contracting HIV/AIDS.

Humbly, your obedient student  
Reverend Elder Alfreda E. Lanoix, Pastor  
Unity Fellowship Church, Los Angeles

Unity Fellowship Church has been in this struggle to stop the spread of HIV/AIDS for over 15 years. Reverend Lanoix contributed to the development of the HIV 101 section.

"I dedicate Unity's contribution of this *Pastor's Guidebook* to one of the greatest Teachers living in our time, Archbishop Carl Bean, founder and first Pastor of the Unity Fellowship Church."

### What is an HIV Test?

An HIV test is a simple test to see if you are infected with HIV (*Human Immunodeficiency Virus*), the virus that causes AIDS. You may want to be tested if you think you have been exposed to HIV. The test detects antibodies to HIV that your immune system produces if you are infected. A blood or oral test (*OraSure®*) may be used. Below is an explanation of common tests used today.

- **ELISA** (*enzyme-linked immunosorbent assay, or EIA*) is a blood test that detects HIV antibodies. It is common, accurate, reliable and inexpensive. If an initial ELISA result is reactive, (i.e. positive), a second ELISA is done using the same specimen.
- **Western BLOT** (*immunoblot*) or **IFA** (*immunofluorescent assay*) tests are used to confirm a positive ELISA test, also using the same specimen.
- **OraSure®** is the brand name of a test that looks for antibodies to HIV through fluids in the mouth. It is *not* a saliva test. OraSure® absorbs HIV antibodies out of the blood vessels from the cheeks and gum known as the mucous transudate. The OraSure® test is very accurate. OraSure® Western blot tests are used to confirm an initial positive result.

### What Do HIV Test Results Mean?

A *Negative test result* means that no HIV antibodies were detected. This means either:

- You are not infected with HIV at this time.
- Or, it could mean that you were recently infected, but your body has not yet produced enough antibodies to be detected by the test because you are in the “window period.” The window period can be up to six months from the time of infection. This is why people at risk may need to be re-tested at least six months after their last possible exposure.
- A negative result does not mean a person is immune to HIV.

A *Positive test result* means that antibodies to HIV were detected. A positive result means that the specimen was double-checked with at least two additional lab tests (*another ELISA and confirmatory Western blot or IFA test*) to make sure.

It also means that:

- You are infected with HIV.
- You can infect others.

It **does not** mean that:

- You have AIDS. Symptoms of AIDS may not show up for years. (*For more information about the difference between HIV and AIDS, please refer to page Glossary of Terms section.*)
- Your partner is infected – but he or she could be and it is recommended that he or she also be tested.

An **inconclusive** test result means that the presence of antibodies could not be determined. This happens very rarely and may be due to a lab error, differing interpretations of the results or that the test was performed too soon after an infection. Additional HIV counseling and testing is recommended.

### Where Can You Go to Get Tested?

There are a number of ways to get fast, easy and confidential or anonymous HIV testing, including free tests through a public health department. You can also get tested at your local hospital, private physician’s office or healthcare clinic. Using a home test collection kit is another option, and can be purchased from drug stores.

In California, HIV tests are offered at anonymous or confidential test sites:

At an **anonymous** test site you will be given a code number and that is the only way that you will be identified. Your name is not on any record.

At a **confidential** test site you will be given a consent form to read and sign to take the test. Your name is attached to your result. However, no medical records can be released without your permission.

When you are ready to get tested, you can call the **California HIV/AIDS Hotline (1-800-367-AIDS)** for a referral to a test site. You can also call your local public health department, local hospital, private physician's office or healthcare clinic to set up an appointment. Some clinics offer walk-in services.

Ask about whether anonymous or confidential tests are offered. Each test site can be different. If both options are offered at the test site you selected, choose the option that feels most comfortable for you.

Once you have decided to take an HIV test, consider telling someone you trust. Having the support of a loved one, friend or pastor can be very important. It might be helpful to have a friend or loved one go with you to get tested and go back with you to get your results.

### What Happens When You Take an HIV Test?

- **Counseling** – A nurse or HIV counselor will talk to you in private about the test, why you think you may be at risk, and how you can lower your risk. You can ask all kinds of questions and discuss your fears and concerns. It is important to be honest so that you and your counselor will be able to assess your risk for HIV infection and decide if testing is right for you. Your counselor will also explain the benefits of receiving the test and the risks associated with having an HIV test such as discomfort and/or a small bruise when blood is drawn. Also, some people experience stress while waiting for the test results.

- **Testing** – A nurse or trained technician will draw a small amount of blood from your arm with a clean, new needle or use an OraSure® test by placing a special collection pad (*that looks like a skinny toothbrush*) between the lower gum and inner cheek for 2 minutes.

- **Returning for your result** – You will schedule a return visit to receive your test result, usually one to two weeks after your test. **Getting your test result is the most important step in the testing process.** Educate yourself and ask your HIV counselor questions. When you return, a nurse or trained HIV counselor will give you your result in private. If necessary, additional counseling and necessary referrals will be provided for you.

### What Happens After You Learn Your Test Result?

**If your test result is negative, you can take steps to reduce your risk, and prevent getting HIV.**

**If your test result is positive it means you have HIV and that you can infect other people.**

#### It **does not** mean:

- You have AIDS.
- You are a bad person.
- You have received a death sentence.
- You cannot have loving relationships.
- God is punishing you!

#### It **does** mean:

- You can get treatment and medical care.
- You can get support from HIV support groups in your community.
- Your church will shepherd you with the unconditional love of Jesus Christ.
- Your church will do its best to assist you in getting proper treatment and services.
- Nothing can separate you from the love of God!

### The Black Church HIV Testing Campaign.

The Balm In Gilead has organized the Black Church HIV Testing Campaign to assist Black churches in educating and encouraging African Americans to get tested and to get more Black churches involved in addressing HIV/AIDS.

For churches that wish to join the Black Church HIV Testing Campaign, please call for your free resource kit at (888) 225-6243 or log onto [www.balmingilead.org](http://www.balmingilead.org).

The information in this section was provided by the California Department of Health Services, Office of AIDS and the Balm In Gilead, a national not-for-profit organization located in New York City.