

A network of the Presbyterian Health, Education & Welfare Association (PHEWA)

World AIDS Day Packet 2013

Resources for incorporating HIV and AIDS emphasis in your worship, year-round

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PRESBYTERIAN AIDS NETWORK

Dear PAN Members and Friends,

Once again we honor World AIDS Day (WAD) and the theme this year is Shared Responsibility: Strengthening results for an AIDS-free generation. The global community has embarked on an historic quest to lay the foundation for an eventual end to the AIDS epidemic. The effort is not merely visionary; it is entirely feasible. Especially, since a large 2011 study showed that antiretrovirals (ARVs) cut transmission by 96% among discordant couples.¹ This proved without a doubt that drugs can greatly reduce the amount of virus carried, making folks less likely to infect or contract the deadly AIDS disease.

Only about one-quarter of one percent of the U.S. Federal budget is dedicated to advancing global health through programs that fight diseases like HIV and AIDS. That small sliver of the budget works out to an average annual U.S. taxpayer contribution of \$14.14 to government supported global health programming.² Currently, there are 9 million people receiving ARV therapy worldwide, and the global goal is 15 million by 2015.³ More people affected by HIV today can go to work, attend school, and lead relatively healthy lives thanks to global partnerships with the Global Fund, PEPFAR, UNAIDS, and private foundations. It is exciting to know that the pace of progress has quickened and in the past 2 years, new infection rates have fallen by 50% in more than 25 countries (13 in sub-Saharan Africa).⁴

However, the United States does not evidence such progress. There are nearly 50,000 new infections each year and only 1/3 of the nearly 1.2 million people with HIV in the US have been prescribed with antiretroviral treatment. In addition, HIV care is suffering as a result of sequestration. In the last year domestic HIV and AIDS programs have been cut by nearly 380 million dollars.⁵ The result is staff reductions, limited educational programming and HIV testing. A few organizations have had to close down completely. These outcomes may certainly lead to increased infections, higher health care costs, and even deaths. At a time when we have a national HIV and AIDS strategy grounded in science, it is tragic to reverse progress.



¹ <u>http://www.who.int/hiv/topics/strategic_use_arv/en/.</u>

² <u>www.amfAR.org</u>

³ <u>www.AIDS.gov</u>

⁴ www.AIDS.gov

⁵ www.theaidsinstitute.org

Our goal of an AIDS-free generation in the U.S. is a dream far from reality. We urge Congress and our President to reverse cuts and adequately fund critical public health programs.

Our work is not done and the vision of an AIDS-free generation is still elusive. People continue to face discrimination, stigma, and injustice. Women and girls especially continue to be at a much higher risk because of gender inequality and sexual violence. There is still a 30% gap between resources needed and those available to achieve 2015 goals.⁶

We would encourage you to look at the HIV Crimination in your community. One source is the SERO Project <u>http://seroproject.com/</u>. The Center for HIV Law and Policy released the <u>H.R.1843</u>, <u>REPEAL HIV Discrimination Outreach Toolkit</u>. This toolkit provides advocates with resources that can be used in outreach efforts to your state's members of Congress. Advocates can use this toolkit as a guide for letter writing campaigns, calling your Representative's state and Washington D.C. offices, or meeting with your Representative or the Representative's legislative staff.

We earnestly encourage your membership and involvement with Presbyterian AIDS Network (PAN) now:

http://www.phewacommunity.org/images/PHEWA_membership_fillable_form.pdf Through faith we are called to transform public policies. In collaboration with others may we work toward the vision where ALL people can benefit from equitable and sustainable access to HIV prevention, treatment, care, and support.

Sincerely,

Ann Jones and George Kerr,

Co-moderators for the Presbyterian AIDS Network (PAN),

A ministry network of the Presbyterian Health, Education & Welfare Association (PHEWA)





PRESBYTERIAN AIDS NETWORK

A network of the Presbyterian Health, Education & Welfare Association (PHEWA)

Engaging World AIDS Day on the First Sunday of Advent: Help for Preachers

by the Rev. Emily Rose Proctor

Recently, a new commentary was published called, *Preaching God's Transforming Justice: A Lectionary Commentary* (Westminster John Knox, 2013). In addition to reflecting on the weekly Revised Common Lectionary (RCL) texts through the lens of justice, it provides readings and commentary for an additional 22 special "Holy Days for Justice," including World AIDS Day. If you are planning a special service outside of Sunday morning or are willing to depart from lectionary readings and Advent themes, then you may want to consider these texts. Regardless of your commitment to the lectionary, Chris Glaser's commentaries on Jeremiah 17:14-18, Psalm 6, James 4:11-12, and Luke 16:19-31 draw our attention to the ways common biblical themes of lament, justice, and judgment can help preachers address the HIV and AIDS pandemic in both pastoral and prophetic ways.

While I am grateful to this new lectionary resource that draws our attention to World AIDS Day, my hope is that pastors will consider engaging World AIDS Day in the regular Sunday morning worship service, using existing lectionary texts and advent themes. The coming of Christ into our world in human form and our anticipation of His return could not be more relevant to the current crisis facing the world in the form of HIV and AIDS. The fact that December 1, World AIDS Day, falls precisely on the First Sunday of Advent this year, provides us with a unique opportunity to bear witness to that truth. Between 2011-2015, the World Health Organization (WHO) is promoting a World AIDS Day theme of "Getting to zero: zero new HIV infections. Zero discrimination. Zero AIDS-related deaths."⁷ The United States government is lifting up this theme: "Shared Responsibility: Strengthening Results for an AIDS-Free Generation."⁸ What do these World AIDS Day themes have to do with the themes of Advent? A lot.

A Vision of Peace: An AIDS-Free Generation - Isaiah 2:1-5 and Psalm 122

Both Old Testament texts focus on the future, imagining a world where the peace and prosperity (shalom) is the norm and not the exception. When addressing HIV and AIDS, it is important to lift up a positive vision of what the church and the world would be like if we took full responsibility for preventing and treating HIV and AIDS. WHO describes the vision as "Zero New HIV Infections, Zero Discrimination, Zero AIDS-Related Deaths." The U.S. Department of Health and Human Services envisions

⁸ http://www.aids.gov/news-and-events/awareness-days/world-aids-day/



⁷ http://www.who.int/campaigns/aids-day/2013/event/en/

"An AIDS-Free Generation." The spread of HIV is exacerbated by both poverty and violence, and serves as a reminder that health, peace, and prosperity are intricately connected in the Hebrew concept of shalom. Isaiah 2:3 invites us to reflect on the role of education in reaching our goal of peace and prosperity, and education plays a similarly key role in HIV and AIDS prevention and treatment efforts. Psalm 122 invites us to pray for our vision of peace. Prayer can also be a crucial tool in the fight against HIV and AIDS. Not only does prayer invite God's healing and intervention, it can also function to make us more aware and attentive to the issue and the people it affects most, and hopefully, also more open to ways that we can participate in making the vision of a healthy, peaceful, and prosperous people a reality. This vision is not just for our sake but also "for the sake of my relatives and friends," as the ways that HIV impacts our communities and our world affects us all. "According to a national survey by the Kaiser Family Foundation, more than 60 percent—three in five—of Black Americans know someone living with HIV and AIDS or who has died from the disease; for most, it's a family member or close friend."9

Wake Up to a Shared Responsibility – Matthew 24:36-44 and Romans 13:11-14

The Matthew text compares the coming of the Lord to a thief in the night, but HIV is just as stealthy. An immune system crippled by HIV is much like a house that's been broken into. So is a community where HIV infection rates are on the rise. There are many zip codes in the United States whose HIV rates rival those of hard hit countries in Sub-Saharan Africa. What is it that your congregation and community can do to "get ready" to protect yourselves and each other from HIV? Can you offer testing? Can you form Care Teams to support those already infected? Are you educating both your young people AND your seniors about HIV and other STDs? Are you doing anything to reduce stigma through your preaching, your prayers? Is not protecting one another and ourselves from HIV—working for justice, treating one another with compassion, making wise choices—isn't this also preparing for the coming kingdom?

In Romans 13:11, Paul says, "you know what time it is, how now is the moment for you to wake from sleep. For salvation is nearer to us now than when we became believers." What a perfect message for World AIDS Day. How can we "sleep" through the deaths of 25 million people from AIDS since 1981?¹⁰ How can we sleep when every nine-and-a-half minutes, another person in the U.S.A. is infected with HIV, and, while one in five are unaware of their infection?¹¹ Or, when only 25% of

¹¹ <u>http://www.aids.gov/hiv-aids-basics/hiv-aids-101/statistics/</u>, last revised 06/06/2012, accessed on 11/2/2013.



⁹ "Exit Strategy: Ending the AIDS Epidemic in Black America. The State of AIDS in Black America 2012," Black AIDS Institute, February 2012, p. 14, <u>http://www.blackaids.org/images/media/12_exit.pdf</u>, accessed on 10/31/2013.

¹⁰ <u>http://www.aids.gov/hiv-aids-basics/hiv-aids-101/global-statistics/</u>, last revised 06/06/2012, accessed on 11/2/2013.

HIV+ persons in the U.S.A. are successfully keeping their virus under control?¹² What are the statistics most likely to wake up your congregation? What are the rates of HIV in your community? How is HIV affecting your global mission partners? In order to achieve the vision of peace and prosperity lifted up in the Old Testament, we ALL have to wake up to our shared responsibility for one another.

The good news is that salvation is near at hand. We have the means to end the spread of HIV through a combination of treatment and prevention, even without the recent indications that a cure might be around the bend. Worldwide, new HIV infections have fallen by 33% since 2001; they have fallen by 52% among children.¹³ AIDS-related deaths have fallen by 30% since the peak in 2005.¹⁴ In 2012, around 9.7 million people living with HIV had access to antiretroviral therapy in low- and middle-income countries.¹⁵ Partnerships like the ones facilitated by Hope Springs in Baltimore (see Erin Donovan's article in this packet) give us hope that when we do wake up to our shared responsibility for one another, lives can be transformed. Visit the Hope Springs web pages at http://hopesprings.org/.

The Romans pericope ends with a call to put on the armor of light and to abstain from what HIV educators and advocates might call "high risk behavior." This, too, is part of HIV prevention—part of waking up to our shared responsibility, though it is important to balance calls for personal responsibility with calls for addressing the more systemic and justice-related risk factors such as poverty, mass incarceration, stigma, and gender inequality.¹⁶

The Presbyterian AIDS Network (PAN) A network of the Presbyterian Health, Education & Welfare Association (PHEWA) Compassion, Peace and Justice Ministry, Presbyterian Mission Agency Presbyterian Church (U.S.A.) <u>http://www.pcusa.org/phewa/pan</u> and <u>http://www.phewacommunity.org/</u>



¹² "Today's HIV Epidemic," Center for Disease Control, June 2013, p. 2,

http://www.cdc.gov/nchhstp/newsroom/docs/HIVFactSheets/TodaysEpidemic-508.pdf.

¹³ <u>http://www.unaids.org/en/resources/campaigns/globalreport2013/factsheet/</u>

¹⁴ Ibid.

¹⁵ Ibid.

¹⁶ "Today's HIV Epidemic," p. 3.

PRESBYTERIAN AIDS NETWORK

A network of the Presbyterian Health, Education & Welfare Association (PHEWA)

Litany for World AIDS Day

by the Rev. Scott Hill, First Presbyterian Church of Columbus, Indiana *Edited for publication by Emily Rose Proctor*

Leader: God of Wholeness and Healing, you created this world to be a place of shalom: **People: Where individuals and communities find and foster health, well-being, justice and peace.**

Leader: In Christ, you have taken on our condition,

People: Entering our suffering, our brokenness, and our loss, to heal and transform. Leader: As the Body of Christ, we are one with Christians near and far,

People: Weeping with those who weep, rejoicing with those who rejoice.

Leader: On this World AIDS Day, we raise our voices in thanksgiving and intercession

People: For the healing of bodies, relationships, and the social fabric.

Leader: For those with HIV and AIDS,

People: O Healer, bring comfort and strength.

Leader: For spouses and partners, children, parents, and others who bear this burden with them,

People: O Healer, bring comfort and strength.

Leader: For those orphaned or grieving,

People: O Healer, bring comfort and strength.

Leader: For entire communities and nations reeling from the HIV pandemic,

People: O Healer, lead the way to new life.

Leader: For grandmothers, uncles, neighbors, and other givers of care,

People: We give you thanks. Refresh and uphold them, God!

Leader: For churches and clinics, schools and other institutions providing education or care,

People: We pray for the compassion and all the fruits of your Spirit needed

for them to be communities of acceptance and love.

Leader: For those seeking new drugs and treatments,

People: We pray for insight, imagination and persistence.

Leader: For advocates and activists,

People: We ask for courage and creativity to challenge the powers and motivate the masses.

Leader: For those who make policy decisions that affect those living with HIV or at risk for infection,

People: We ask for wisdom, compassion and a sense of your justice.

All: In this world, God, that belongs to you and that is destined for wholeness, we pray with confident hope for a world committed to health, for the day of no more HIV infections, and for shalom for all!



The Presbyterian Church (U.S.A.) Responds to HIV and AIDS

What Can One Church Do About HIV and AIDS?

1. Pray for people living with HIV and AIDS often in your worship service. In 2012 about 35.3 million people worldwide were living with HIV, and millions more are affected. Remember them in your prayers.

2. Wear a red ribbon on World AIDS Day or any day! Buy red ribbon and use sewing pins to make simple ribbons, or buy ribbons from AIDS organizations. Have a basket of red ribbons to share on AIDS Awareness Sunday. Any Sunday can be AIDS Awareness Sunday!

3. Make a simple poster for a church bulletin board with a few statistics about HIV and AIDS globally, nationally, and locally. (See <u>www.unaids.org</u> for current figures.)

4. Host a speaker or panel to talk about AIDS or show a video addressing AIDS in Sunday School, Youth Group, or a Wednesday Night program (You can find "The Changing Face of AIDS" on the PAN website).

5. Build an HIV/AIDS component into local, national and global mission activities. By doing so, your congregation might better understand people you seek to serve (e.g. those who are hungry, in prison, or homeless).

6. Have an alternative Christmas Gift Fair and include a booth from organizations that sell items to raise funds for individuals and families who are affected by HIV and AIDS.

7. Contact local non-profit agencies working with those affected by HIV and AIDS and ask them how your congregation can support their work.

8. Become an AIDS advocate and help ensure the U.S. Government keeps its promise of funds to fight HIV and AIDS, here and around the world.

9. Hold a Service of Remembrance & Hope for people who have died from AIDS-related illnesses, people infected and affected by AIDS, and those working in the struggle against AIDS. Bring in a panel of the AIDS Memorial Quilt to display: http://www.aidsquilt.org/.

10. Join PAN, the Presbyterian AIDS Network, network of the Presbyterian Health, Education & Welfare Association (PHEWA). <u>http://www.pcusa.org/phewa/pan</u> and <u>http://www.phewacommunity.org/</u>. Help PAN keep the HIV and AIDS pandemic in front of the PC(USA). Like us on Facebook at <u>https://www.facebook.com/groups/PresbyterianAIDSNetwork/</u>.



The Presbyterian Church (USA) Responds to HIV and AIDS Around the World



Join the Presbyterian AIDS Network (PAN), a network of the Presbyterian Health, Education & Welfare Association (PHEWA) <u>http://www.pcusa.org/phewa/pan</u> <u>http://www.phewacommunity.org/</u>



The Global Pandemic: HIV/AIDS Affects Us ALL Source: UNAIDS

Sub-Saharan Africa: There has been a decline in new HIV infections and AIDS-related deaths, but this region remains the most heavily affected, with an estimate 25 million living with HIV in 2012, 3 million of which are children.

Asia & the Pacific: About 5 million people were HIV+ in 2011, with mixed progress in reducing HIV infections and AIDS-related deaths.

Eastern Europe and Central Asia: The number of people living with HIV has increased by 44% since 2001 to 1.4 million. New HIV infections and AIDS-related deaths have also increased. Injecting drug use and sexual transmission remain key drivers of the epidemic. Only 25% of those eligible receive treatment.

The Caribbean: HIV prevalence among adults is about 1.0%, which is higher than in all other regions outside sub-Saharan Africa, though there has been a 42% decline in new HIV infections since 2001, and a 50% decline in AIDS-related deaths from 2005-2001.

Latin America: Largely due to the availability of antiretroviral therapy, the epidemic has changed little in recent years with an estimated 83,000 new infections in 2011, and 1.4 million living with HIV.

North America, Western and Central Europe: The total number of people living with HIV in North America and Western and Central Europe grew from an estimated 1.1 million in 2001 to 2.16 million in 2012. Wide availability of antiretroviral therapy has helped keep AIDS deaths low.

The Middle East and North Africa: Compared to 2001 statistics, this region is experiencing increasing HIV prevalence (260,000 living with HIV in 2012), new HIV infections (35,000 in 2012), and AIDS-related deaths (17,000 in 2012), along with low coverage of HIV treatment, while punitive laws and practices hamper effective HIV responses.

<u>Global Funding for HIV/AIDS</u>: Currently at \$18.9 billion, it has increased each year since 2001; the estimated annual need by 2015 is \$22-24 billion.

Prayer from the Presbyterian Church of Central Africa (Malawi)	
God of all compassion, Comfort your sons and daughters who live with HIV. Spread over us all your blanket of Mercy, Love and Peace. Open our eyes to your presence reflected in their faces. Open our ears to your truth echoing in their hearts. Give us strength to weep with the grieving, walk with the lonely,and stand with the depressed. May our love mirror your love for those who live in fear, Who live under stress and who suffer rejection. God of life, help us to build a world in which no one dies alone and everyone lives accepted, wanted and loved. Amen.	



The Presbyterian Church (USA) Responds to HIV and AIDS



We are called to love. God does not punish with sickness or disease but is present together with us as the source of our strength, courage and hope.

We are called to offer compassionate care. We must assure that all who are affected by the HIV/AIDS pandemic will have access to compassionate, nonjudgmental care, respect, support and assistance.

We are called to witness and do justice. We are committed to transform public attitudes and policies, supporting the enforcement of all local and federal laws to protect the civil liberties of all persons with AIDS and other disabilities.

We promote prevention. Within the context of our faith, we encourage accurate and comprehensive information for the public regarding HIV transmission and means of prevention.

We acknowledge that we are a global community. While AIDS is devastating to the United States, it is much greater in magnitude in other parts of the world community. We recognize our responsibility to encourage AIDS education and prevention policies, especially in the global religious programs we support.

We deplore the sins of intolerance and bigotry. AIDS affects people of any gender, sexual orientation, socioeconomic status, race, ethnicity, or age group. Yet stereotypes and discrimination keep many from receiving testing, support and treatment.

We challenge our society. Because economic disparity and poverty are major contributing factors in the AIDS pandemic and barriers to prevention and treatment, we call upon all sectors of society to seek ways of eliminating poverty in a commitment to a future hope and security.

We are committed to action. We, as the Presbyterian Church (U.S.A.), individually and in our communities, will seek to respond to the needs around us.

Adapted from statement of the 206th General Assembly (1994)





A network of the Presbyterian Health, Education & Welfare Association (PHEWA)

What Would *Jonah* Do? An HIV and AIDS Advocacy Sermon

A Sermon by Emily Rose Proctor, originally preached on the 1st Sunday in Advent, World AIDS Day, December 2, 2012, at Brown Memorial Park Avenue Presbyterian Church, Baltimore, MD

Sermon Text: Jonah 1-4

Last year, during the Children's moment, I held up a red ribbon to the kids and asked them if they knew what it was. One of them remarked that it looked like a fish. Well, what do you know? If you turn it sideways, it does!

Little did I know that a year later on the first Sunday after World AIDS Day, the lectionary text would be Jonah and the Big Fish. If you ever needed proof that God has a sense of humor, Jonah is it.

Jonah, you see, is like the anti-prophet. When the Lord tells him to go to Nineveh, he boards a ship and sails in the opposite direction. When there's trouble on the ship, the sailors pray to their gods, while Jonah sleeps. When Jonah finally does go to Nineveh, he preaches the shortest sermon ever recorded—only 5 Hebrew words! And he doesn't mention God once! Nothing about God's mercy, nothing about repentance, nothing about hope—there's no good news in Jonah's sermon, only impending doom and destruction.

And when, miracle of miracles, his terrible preaching actually results in the transformation of the people, he gets mad and throws a temper tantrum.

So I knew I was in trouble when I started identifying with Jonah.

First, it was his reaction to the call. Now, I know I'm not the only one in here who has heard the call of God and wanted to run in the opposite direction. For me it happens every World AIDS Day.

Most weeks and months I can get away with convincing myself that I have other more important or pressing things to do. Things that are named in my job description. Things I will be held accountable for. People who are right in front of me, worshipping in these pews.



I didn't mean to become an AIDS activist, if you can really call me that at all. I kind of stumbled onto it right out of college, more out of curiosity and an inability to speak a language other than English, than any particular passion or knowledge about AIDS.

But after a year in South Africa, exploring the Church's response to AIDS, I had learned too much and had met too many HIV infected and affected people to pretend ignorance.

So now as December 1st approaches, I can't help but hear that awful call of the Lord. That feeling that at least on this day, I have a responsibility to say something about AIDS in the Church, to the Church.

I'll be honest. The further I get from immersion in full-time HIV work and relationships, the harder it gets to bring this message to the church. Part of me wants to run like Jonah in the opposite direction, to close this particular chapter in my life and move on.

Maybe some of you know what that's like—there are probably days when you're not sure you want to go again to North Avenue or City Hall or Annapolis, when you get tired of sending out e-mails that few people respond to, times when you feel discouraged when others don't seem to share your vision or when those with more power or money or cultural appeal prove more persuasive.

Even those of us still giddy from the recent victory for marriage equality in Maryland can remember all too vividly the frustrations of previous attempts for justice, and know that we still have a long way to go in the church.

If part of me wants to throw off the mantel of AIDS activism completely—and believe me, I have seriously thought about it several times over the last three years—the other part of me wants to let Nineveh have it—the ugly reality of all these horrifying statistics and nothing more:

- that 34 million people are living with HIV worldwide,
- that every nine and a half minutes another American is newly infected,¹⁷
- that one in five people in the U.S.A. still don't know their status,
- that there are almost seven million people worldwide who qualify for antiretroviral treatment and aren't getting it,¹⁸
- and of those that are, less than half of them are successfully adhering to their treatment regimen.¹⁹

¹⁹ Courtney McQueen, "Early Treatment Adherence Decreased risk of Treatment Failure in HIV/AIDS Positive Adults," <u>http://www.aidsbeacon.com/news/2012/01/09/early-treatment-adherence-decreases-risk-of-treatment-failure-in-hiv-aids-positive-adults/</u>.



¹⁷ National HIV/AIDS Strategy: Executive Summary, <u>http://aids.gov/federal-resources/national-hiv-aids-strategy/overview/releasing-the-strategy/executive-summary.html</u>, last update 6/6/2012. ¹⁸UNAIDS World AIDS Day Report 2012,

http://www.unaids.org/en/media/unaids/contentassets/documents/epidemiology/2012/gr2012/JC2 434 WorldAIDSday results en.pdf.

It's all too easy to sound like Jonah, all gloom and doom and finger wagging. You should have seen the first draft of the litany of confession! Thankfully, Andrew helped catch it—the not-so-attractive spirit of Jonah alive and well inside of me.

Of course, the crazy thing about this story is that people hear Jonah's poor excuse for proclamation, and lean into hope anyway. The whole city—no, even the King, the whole Assyrian Empire!—gets on board, names what has been happening around them, and commits to change.

Now, however, you have been involved in advocacy work, you can probably join me in raising an eyebrow at this scenario.

This kind of massive cultural shift from top to bottom doesn't happen overnight. It takes decades of hard work by lots and lots of people working in coalitions, putting themselves on the line, telling their stories, again and again and again!

But I think the effect of the surprising mass-repentance of the Ninevites is that it shocks all of us would-be prophets out of any cynicism, out of any self-pity, and out of any lowball assumptions we might be making about our potential impact, our hearers' response, and most importantly, what God is capable of.

Because, really, God is the main actor in this story, not Jonah.

God is the one doing all the heavy lifting: speaking a word, stirring up the wind, appointing prophets and big fish and bushes and worms, and finally, having compassion, not only on the Ninevites, but also on Jonah.

See, that's what we prophets, we activists, we people of faith sometimes forget—that God's mercy, God's compassion is not just good news for those of us who don't know God; it's also for those of us who do. It is for us when we slide into self-righteousness, self-pity, judgment, cynicism, and down-right petulance. It is also for those who have not yet heard what we have heard or seen what we have seen, and for those who have been called to be prophets for other causes and to other people. It is for all of us.

And so, I don't have to stand up here and try to guilt us all into leading the fight in Baltimore against HIV and AIDS. And, believe me, we could. We have the money, we have the location, we have the relationships with other churches, with health institutions, with schools. We have expertise in medicine, public health, education, law, counseling, and social work. We have a local nonprofit, Hope Springs, whose sole goal is to work with churches, especially in our zip code, to provide education and training and connect volunteers with the most needed services in ways that match our individual gifts.

But here's the thing that God's surprising compassion for Nineveh helped me realize: most of us are already engaged in the fight against HIV and AIDS.



Did you know that one of the leading predictors of whether someone will contract HIV is their level of education? So when you work to make our schools better, you are protecting our children from HIV.

War is a huge accelerator of the spread of HIV. So if you are working for peace, you are helping stem the spread of HIV.

If you are advocating for fairer wages, for living wages, for a social safety net, for wider access to health care, then you are fighting HIV.

If you are helping couples work through marital issues or keeping your own marriage healthy, you are making it harder for HIV to spread.

If you are teaching your children the values of justice, honesty, respect, open mindedness, and compassion, then you are fighting HIV.

If you speak out against sexism or homophobia or racism or any kind of –ism, then you are making it harder for HIV to thrive.

If you are advocating for people with disabilities, then you are helping many with HIV.

Did you know that they tried to do a study on the correlation between domestic violence and HIV in women, and THEY COULDN'T FIND ENOUGH HIV+ WOMEN WHO HAD NOT EXPERIENCED DOMESTIC VIOLENCE to have a control group. Almost every HIV+ woman they contacted about the study had experienced some form of domestic violence in their lifetime. If you are working to prevent domestic violence or can help a friend get out of an abusive relationship, you are a partner in the fight against HIV and AIDS.

If you break the silence about your own pain or mistakes or vulnerability in this community of faith, you make it a safe space for someone who is HIV+ to share his or her story. And I have heard you do it again and again.

Now, if some of you come up to me after the service or any other time and say, Pastor Emily, we want to do something—form a Care Team, get more education ourselves, offer education to parents at Eutaw Marshburn, train peer educators at Pedestal Gardens, help with testing once a month at Payne Memorial—or just explore the options, I promise not to do like Jonah and get upset. I would be thrilled, and I know God could use us to do amazing things.

But if you don't come to me, I'm not going to be upset either, because I know you. I know how many of you are passionate advocates for all kinds of people in all kinds of circumstances. I know the hearts you have for justice, for peace, for equality, and for love. I know what kind of work this church does in the city and in the world. It doesn't matter what particular issue of justice God has laid upon your heart or mine—they are all connected.



And see, we have an advantage over Jonah because we have heard the good news that we need not go it alone. We have each other to help us listen for God's call when it comes, to support one another in the work each of us has been called to and to which we as a community have been called.

And we have a savior, Jesus Christ, who modeled that compassion that Jonah was in such desperate need of. We have a savior, Emmanuel, who, even as we speak, is prepared to go with us to whatever place God's startling compassion might lead.



PRESBYTERIAN AIDS NETWORK

A network of the Presbyterian Health, Education & Welfare Association (PHEWA)

Anticipating Hope

by John McDonald, a student at Columbia Theological Seminary

This sermon was first published on Sunday, Dec. 2, 2012 at http://aseminarianslifeandbeyond.blogspot.com

Scripture: Luke 21:25-36, Jeremiah 33:14-16

There are 34 million people living with HIV and AIDS; 2.6 million people are infected every year worldwide; 1.8 million people die from AIDS-related causes every year; 7,000 people are newly infected PER DAY globally. In Georgia, according to the Georgia Department of Public Health, 41,986 people were living with HIV and AIDS, with 66% of them living in the Atlanta Metropolitan Area. And in 2010, the total number for newly infected persons was 2037. With all of these statistics, fighting to defeat HIV and AIDS seems impossible. There is so much despair, so much desperation, so much uncertainty.

In today's scripture, we join Jeremiah as the Israelites were on their way into the Babylonian exile or already in exile. "The days are surely coming...." That's what our scripture says today. Now, I'll be honest, when I first read the lectionary readings for this week, I was a bit puzzled as to why these were the readings for THIS Sunday, the first Sunday of Advent. Things were not promising; they were not safe, they were not secure, there was no hope in sight. There was only despair and anguish, pain and sadness, tears and mourning. Where is Advent in this? In the face of this despair and terrifying language, where is our hope?

For the past three days, I have been attending an HIV and AIDS conference, here in Atlanta. During the conference, I was fortunate to hear stories from people living with HIV and AIDS. Most of them have come to a sense of peace and acceptance and have turned their despair into a source of strength. However, I also heard of newly infected people learning their status, whose feelings of despair were overwhelming.

I have a friend at home who found out during the summer that he is HIV+. I met with him for lunch one day and we talked about it. There was a real sense of terror in his eyes, mixed with sadness, anger, guilt, and shame. There was a sense that he felt isolated, alone, forgotten, and untouchable. He told me that he felt most isolated by the church; a place where he should feel supported and uplifted. The isolation reinforced his feelings of shame, making him feel that he



had done something wrong, which he hadn't. However, the feelings of shame, guilt, and isolation remained. As we sat there, he cried and told me how he didn't know what would happen next. Before we left, I touched his hand and gave him a hug, if only to show him that he wasn't alone.

How many times have we been faced with seemingly insurmountable odds, with feelings of despair and grief, sorrow and pain too much for us to bear, confusion and uncertainty about what lies ahead of us? When have we cried out to God asking why, or mourned, or wept, or have been in utter despair? Our texts remind us of one thing...out of our human despair, a divine hope is born. This hope is hope in an alternative storyline for our lives; it is a hope filled with longing.

This is the hope that we need to live into. The Luke passage tells us to be alert, to raise our heads and stand up. The signs that Jesus talks about in Luke are not just something that shows the POSSIBLITY of what is to come, but speaks of the coming REALITY. Even in the midst of the hibernation and grayness of winter, there is a sense of hope.

Jeremiah uses the image of a righteous branch that springs up for David in his prophecy. There is hope here. Hope that brings with it a rebirth, not just of the royal Davidic line, but also hope that brings with it a rebirth of the people of Israel. In anticipating this hope, the Israelite people are called to reimagine their situation and trust in God's provision.

In this season of Advent, we are called to anticipate something new. We are called to wait on, anticipate, trust, and imagine a new alternative future that God is planning for us. We are called to long for God's alternative future. This hope is not an uncertain hope. This is a hope that will come. Remember what God said to Jeremiah, "The days are SURELY coming...." This is not a chance call, this is a certain call. Even with the Israelite community on the brink of destruction, Jeremiah calls out for the people to long and hope for God's alternative version. The days are surely coming when famines will cease. The days are surely coming when sexism, racism, homophobia, transphobia, hunger, poverty, and violence will be no more. The days are surely coming when HIV and AIDS will be no more.

We are called to exercise the practice of anticipating hope this season. Instead of celebrating the mystery of the birth of Christ now, let us wait for and anticipate something new. Let us anticipate hope for peace, for joy, for a cure. In these days that will surely come, we long for these things which we anticipate. As we long for these things, we also find our longing in this table. A commentator stated that the communion table "is not just a table of longing, it is THE table of longing for all with deep longings, people who pray with Jeremiah for the days that are surely coming."



At the beginning of this Advent season, let us all come longingly to the table of Christ. Knowing that no one is barred; black, white, gay, straight, male, female, rich, poor, HIV-, HIV+. We are all one body in Christ and of Christ. Let us be open to God's alternative future. Let us welcome one another as full members of Christ's body, re-membering, bringing the parts of the body together again. Let it be so. Amen and amen.





HopeSprings HopeSprings Children's Ministry Lesson by Erin Hasslinger, edited for general use by Emily Rose Proctor

Thank you for your interest in bringing a word of hope to your Children's Ministry! HopeSprings, along with our church partners and hundreds of volunteers, aims to restore hope and healing through the eradication of HIV and AIDS and the stigma that follows. Our organization, based in Baltimore, MD, trains and educates churches and communities in order to build human resource capacity (through volunteers) to raise awareness of HIV and AIDS and to better equip those God has called to serve in the epidemic in our own backyard. Stigma is the number one barrier that deters people from getting tested, knowing their status, and connecting with others to get the support they need to live a long and healthy life, as HIV is no longer a death sentence! The more opportunities we can create to speak truth to our friends, family, and neighbors regarding people living with HIV/AIDS (and any individual living with a life-long disease) the more we move away from living in fear and the better we are able to love those created in God's image.

In our efforts to keep the dialogue going within church communities HopeSprings has developed and outlined a dynamic curriculum that can be tailored to fit your schedule and needs of the children and families within your church congregation. What has worked well in other church ministries is to lead with the following bible story and prayer time, discussion questions, worship time and then move into the planned activities. The lesson's goals are outlined below.

Bible Story – Mark 1:40-42 Jesus Cleanses a Leper

Memory Verse – Psalm 118:17 "I will not die, but live, and will proclaim what the Lord has done."

Lesson Goals -

- Understand that Jesus loved even those no one else did
- Recognize the faith of the leper
- Learn that Jesus is the ultimate restorer of our lives

Opener – Have you ever been sick and your parents didn't let you hang out with your friends? Or have you been to a hospital and were not allowed to visit someone because you might catch their sickness? Today we will learn about a man whose sickness made his life pretty miserable and lonely. Yet this man reached out to Jesus and his life was transformed.

Bible Story – Jesus Heals a Man with Leprosy

⁴⁰A leper came to him begging him, and kneeling he said to him, "If you choose, you can make me clean." ⁴¹Moved with pity, Jesus stretched out his hand and touched him, and said to him, "I do choose. Be made clean!" ⁴²Immediately the leprosy left him, and he was made clean.

As Jesus was going from town to town sharing the Word of God, more people began to hear about the things that Jesus was doing. People would walk great distances to be able to see Jesus. One day Jesus was in a small town. A man came right up to Jesus and fell to the ground on his knees. Why do you think he did that? (wait for responses) The man had an illness, a disease, called leprosy. This is a horrible skin disease, and people who have this disease are called lepres.

The people that were not sick would make the lepers stay far away from them. They were afraid of getting leprosy, too. The man who came to Jesus was very brave. He could have gotten in trouble for getting too close to healthy people. He really believed that Jesus could help him.

The man said to Jesus, "If you are willing, you can make me clean." In that time, someone who was "clean" was ok to be around, to touch, and to include in religious activities. Jesus looked at the man as he was on the ground, like someone who was begging or maybe praying. Jesus knew how much he had suffered as a result of his illness and the way society had treated him. As Jesus gently placed His hand upon the man, he said, ""I am willing. Be clean!" The man probably was surprised that Jesus touched him since no one else would. It may have been a long time since he had been touched by anyone. Jesus really cared for this man. The man suddenly realized that his leprosy was gone, and his skin looked normal. He was so excited, and he told everyone about what had happened to him!

The man in today's story had a lot of faith in Jesus. He believed that Jesus had the power to change his life for the better. He even risked getting in trouble by going to Jesus when he was sick and considered "unclean" by his friend, family and community. We can have incredible faith in Jesus too and also show love to those who may be sick with disease, like Jesus did. Jesus had compassion for everyone, even those who were different from Him.

Prayer Time – Thank God for loving us and sending Jesus to show us how to love and care for others. Pray that we will love others as He loves others who are sick and in need of our love, support and encouragement. Pray that we would be able to show the others how much Jesus really loves ALL OF US. Pray that we would have the courage to turn to God for help when we are sick or lonely.

Life Application –

- What was this disease known as leprosy? People with leprosy, called lepers, were forced to live alone, outside of the city walls, away from friends and family. They were not allowed to live with those who were healthy, which may have made them sad or lonely. People living with HIV can also feel sad and lonely if people are scared of catching HIV and avoid them or treat them as if they are bad people that deserve to be sick.
- How did Jesus treat the man with this disease? Jesus was moved with compassion and wanted to help the leper, so he stretched out His hand and did the unthinkable, and touched the leper. Those who were watching would have been truly shocked and horrified by this! Under the law, a person became ceremonially unclean when he touched a leper. Also, there was of course the danger of contracting the disease. Lepers would normally never approach a healthy person because of the reactions and rejections from them. Jesus did not show any rejection or disgust for the leper.
- What did notice about the Leper in this story? The leper had faith that Jesus could make him clean and an acceptable part of society again. We too can ask God for a fresh start and to help us live joyful and meaningful lives in community. Do you remember what the man said to Jesus? He said, "If you are willing, you can make me clean." The man truly believed that God can make any of us "clean" again, no matter what our situation.
- What did you learn from Jesus in this story? We can follow Jesus' example and reach out to even those whom society avoids or treats badly. Others may distance themselves from people who are sick or different then they are, but Jesus shows us that God's love is for ALL PEOPLE. Also when we feel "unclean" or rejected by society or by other people, Jesus can make us clean by the power of his love.

Let's spend a few minutes signing and worshiping our loving God!

Worship Songs - "Open the Eyes of My Heart Lord" or Your Song of Choice/Worship Leader

Activities – At church we can serve friends, like Jesus did, that are living with a disease that can make their lives a lot more difficult. Let's show them compassion, love, support and encouragement!!!

- Station 1: CARD MAKING 15 min (for those living with HIV—you will need to connect through a local non-profit or heathcare provider) Let's send our friends some words of encouragement today. Write a message to a friend living with HIV/AIDS. Use the memory verse and any other creative things you can think of to bring a smile to your friends face. We will be delivering these cards to our friends during the week!! ^(C) They will really appreciate your kind words and support!! This will help them feel loved and cared for by God and by us.
 - SUPPLIES:
 - Construction Paper
 - Crayons/Colored Pencils/Markers/Pencils or Pens
 - Cut out hearts with Memory Verse
 - Stickers
 - Glue Sticks
 - Scissors
- Station 2: COOKIE DECORATING 15min (for those living with HIV who have meals provided to them again you will need to research local nonprofits and healthcare providers to find a partner through which to deliver the cookies) Do you love cookies!!?? Well so do our friends living with HIV/AIDS. Some our friends need nutritious meals that are delivered to them to keep them healthy. They also enjoy sweets too. Let's send them some decorated cookies so they have dessert with their meal!! Write your name and a message on the label and we will wrap up a cookie for your friend. We will deliver the cookies to our sick friends next week!! Yummm! I know they will love them!! Jesus often fed those who were hungry; he showed us that this is one way to help people know that they are loved by God and by God's people. Thank you Jesus for showing us how to love our friends who are living with disease.
 - \circ $% \left(SUPPLIES\right) \left(SUPPPLIES\right) \left(SUPPPLIES\right) \left(SUPPPLIES\right) \left(SUPPPLIES\right) \left(SUPPPLIES\right) \left($
 - Premade/purchased cookies*
 - Sandwich Bags One cookie per bag
 - Labels where children can write their names and a message
 - Icing/Sprinkles/Other Cookie Decoration Items
 - Plastic Knife or Spoon for Icing
 - Table Cloth
 - Hand wipes
 - Antibacterial Gel clean hands before decoration
 - Stapler to Attach Labels to Bags

*Premade using the original recipe (included in the email) or purchased from a local bakery or bakery within a grocery store. You will need to have the ingredients list for the cookies and individual bags for the cookie(s).

For additional resources or training within your church, please contact HopeSprings:

HopeSprings 5400 Loch Raven Blvd. Baltimore MD, 21239 410-323-0005 Info@hopesprings.org Facebook.com/HopeSpringsHIV Twitter.com/HopeSpringsHIV or

The Presbyterian AIDS Network <u>http://www.presbyterianmission.org/</u> <u>ministries/phewa/presbyterian-aids-network/</u> Attn: Susan Stack 100 Witherspoon Street Louisville, KY 40202 (800) 728-7228, x5800 susan.stack@pcusa.org

Living Out Our Shared Responsibility: A New Model of Care

Friends—For the first time, we are on the cusp of an **AIDS free generation**. These big words require a shared responsibility. Today, medicine has allowed our HIV positive brothers and sisters to live a long and healthy life. Unfortunately though, less than 40% of our HIV+ brothers and sisters are actually retained in care and only 25% are virally suppressed and adherent to medications. In other words, **3 out of 4 people living with HIV in the United States are not living to their full potential**. Why? What is happening? How can this be?

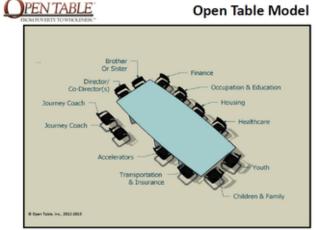
Many of our brothers and sisters who are HIV+ and living in poverty, simply put, lack relationships. So, we are on a mission to make relationships more intentional and to partner with our HIV+ brothers and sisters to move from transaction to transformation by utilizing a model: **The Open Table**.

Because poverty is an indicator of adherence to an HIV medication regimen,

HopeSprings has recently selected Open

Table's nationally recognized poverty transformation model to help those who are HIV+ and in poverty to live into their human potential. In Open Table, 10-12 volunteers from faith communities invest their vocational/life experiences and networks to create and implement life plans for individuals and

families. Alleviating poverty to



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live better with HIV is a groundbreaking approach to addressing the holistic needs of our brothers and sisters who are HIV+.

On Saturday, October 26, we officially launched tables with four churches here in Baltimore (Central Presbyterian Church, Grace Fellowship Church, Church of the Nativity and GraceCity—along with members from Brown Memorial Presbyterian Church and Govans Presbyterian Church) who are a part of this Journey with us as we work with Open Table, The JACQUES Initiative, and the Baltimore City Health Department to launch this movement. During our initial training, the Assistant Commissioner of HIV/AIDS Services for the City of Baltimore Dr. Patrick Chaulk spoke, emphasizing the need for the faith community to respond to this clarion call. **It is not only wanted, it is necessary**. Shared responsibility... partnership with government and the faith community... all working together to GET TO ZERO.

Lastly, I recently spoke with a brother who said, "I am one of the multitudes who must be invisible YET in the midst of illness, rejection, isolation and probably death—out of the darkness—hands reaching out—not family, friends or lovers, but strangers."

A stranger—becoming a friend—making a commitment to build a relationship. THIS, MY FRIENDS, IS THE ROLE OF THE CHURCH.

So what can you do?

1. Pray. Pray for our brothers and sisters who are HIV positive. Pray for our table



members and churches as we launch this new initiative. Pray and ask God if He is calling you to join this movement.

2. Contact us so we can speak with you and your Pastor. Although this is starting in Baltimore, it can be launched in your hometown. Reach out to us now: **tables@hopesprings.org** or call **410-323-0005**.

~I will not die but live and will proclaim what the Lord has done. ~ Psalm 118:17

Thank you for being a part of the proclamation story of what God is doing in the lives of our HIV+ brothers and sisters. Thank you for sharing in the responsibility of welcoming all to Christ's table.

Erin Donovan HopeSprings, Executive Director 5400 Loch Raven Blvd. Baltimore, MD 21239 www.hopesprings.org (410) 323-0005



PRESBYTERIAN AIDS NETWORK

A network of the Presbyterian Health, Education & Welfare Association (PHEWA)

Raising Awareness about HIV/AIDS at Your Seminary or College by the Rev. Emily Rose Proctor

Have you been Inspired by World AIDS Day or a personal experience and wondering how you could raise awareness about HIV and AIDS on your seminary or college campus next year? Here are some ideas, many of them based on what I tried, when a seminary student at Columbia Theological Seminary (CTS) in Decatur, GA.

1) AIDS Walk – there is an annual one in Atlanta, so it wasn't that difficult to get a team together from the seminary. Check your area to see if there are existing walks or other fundraisers for local AIDS-related nonprofits. See: <u>http://www.aidswalk.org/</u>

2) World AIDS Day Service – I always asked the powers-that-be if I could lead the regular worship service on December 1, but if it was already assigned, I found out who was responsible for chapel that week and tried to convince them to work World AIDS Day themes into all or part of the service closest to or on Dec. 1. People were pretty open to this, especially if I was willing to help by writing a prayer, or preaching. You could also do a separate service, a service of remembrance, etc. but I found these to be less well attended. I recommend trying to work HIV and AIDS into existing structures and events.

3) Educational Event – If there is a regular community forum or other avenue for bringing in guest speakers, this is often a relatively easy way to get conversation started. Local HIV and AIDS organizations usually have speakers they will send out, if you don't know anyone personally. Also, we did a panel one year on which we asked current professors to address HIV and AIDS as it related to their field (pastoral care, ethics, Bible, etc.). I thought that was a great event and very popular. It can also be a good way to develop relationships with potential faculty partners. There are also lots of documentaries you could show—just make sure you watch them first, so you know what you're inviting people to! Here is one example, newly released and getting excellent reviews: http://fireintheblood.com/

4) AIDS Memorial Quilt - We tried to get a section of the AIDS Quilt (it is



housed in Atlanta, so this was cheaper for us since we could go pick it up ourselves) to display in Chapel the week of Dec. 1. To get it in time, you have to make the request to The Names Project pretty early in September, and it's easy to let the date slip up on you. Their website is http://www.aidsquilt.org/. It does cost money, but if funding is an issue they may work with you by giving you a reduced rate. Another option (we did this one year) is that if there are people in your community who have lost someone to AIDS-related causes, and never made a guilt panel for them, (the idea below can give you an idea of who those people might be), you can organize a guilt-making workshop. There are instructions on the website for what size to make your square and other guidelines. This was a very healing event at CTS that brought a small but diverse group of people together in a very intimate way. Then, you can dedicate the squares in worship before you send them to Atlanta to be added to the AIDS Memorial Quilt. Later, you can request those specific panels for displays of The Quilt on campus.

5) Break the Silence Campaign – This is a grassroots campaign to solicit people to share their stories about how HIV or AIDS has touched their lives (their own diagnosis, that of a loved one, a mission trip, an encounter in ministry, etc.). I always included a reminder that no confidential information should ever be shared about someone without his or her permission, and that people could also submit stories anonymously. You can put up flyers, make announcements, send emails, etc., but the most effective way is to ask people, personally, if they have a story and then, after they tell you about it, ask them to write it down and e-mail it to you for this collection. The more people you have doing this, the better. I solicited stories from students, professors, and staff. When I did it, it was just me doing the asking and I got about 25 pages worth of material (you'll be surprised how many people have stories). I compiled and edited the stories and printed copies that I made available for people to take on their way into the chapel service on Dec. 1. I also had a resource table set up outside that had lots of HIV and AIDS resources and books for people to peruse. I did this two out of the three years that I coordinated World AIDS Day activities at CTS.

6) Testing – We worked with the local health department (sometimes you can find nonprofits who will do this for free) to provide HIV testing as part of the annual health fair. I have found that testing as part of a health fair is better than HIV testing alone because there is no stigma about going to a health fair. Also, you can do what we did at the General Assembly in 2010 and encourage prominent leaders (professors, the President, Dean, heads of student organizations) to commit ahead of time to getting tested and letting you announce it as a witness to the whole community. You could even do a press release to a local paper or church publication. Here was our press release:



http://www.pcusa.org/news/2010/6/29/presbyterian-leaders-fightstigma-get-tested-hiv/

7) HIV/AIDS policy – I didn't pursue this at Columbia, but fellow PAN leader, Andrew Black did, while he was a student at Louisville Presbyterian Theological Seminary (LPTS). I could put you in touch with Andrew if you want to know more. You'll see the LPTS Policy on HIV/AIDS on page 34 of their Employee Handbook:

http://www.lpts.edu/docs/guides-policies-handbooks/employeehandbook.pdf?sfvrsn=0 Developing an institutional policy could serve to protect students, faculty, and staff, as well as be a vehicle for raising awareness, generally.

8) Institutionalize it – The best way to keep the seminary community engaging in HIV and AIDS prevention and awareness is to find a way to institutionalize it. The Interdenominational Theological Seminary (ITC) integrates HIV into a number of its core and required classes. Dubuque Theological Seminary has a chaplain who has become an HIV advocate and makes sure there is a WAD service there each year. Louisville has a policy. I wasn't able to do this at CTS, which is probably why not much is happening now. So I would say, either identify a couple of professors who are willing to be advocates or make it part of the tradition of one or more student groups. It could be a really good opportunity to bring several groups together--if you can get the African-American student group and the LGBT support group working together on this--what a witness that would be! Also, international students, people passionate about global mission, or urban ministry all make good partners.

Please let us know what you're doing and how we can support your efforts to raise awareness wherever you are! If you wrote a prayer, liturgy, or sermon about HIV, please send it to us so we can consider including it in next year's World AIDS Day resources!

Sincerely,

Emily Rose Proctor emily@lpcjax.org Presbyterian AIDS Network (PAN), a network of the Presbyterian Health, Education and Welfare Association (PHEWA)

