The Joint Commission on AIDS

A. MEMBERSHIP
The Rt. Rev. Douglas E. Theuner, Concord, New Hampshire, Chair
The Rev. Canon Nan Arrington Peete, Atlanta, Georgia, Vice Chair
Mr. William R. Riggs, Washington, D.C., Secretary
Mr. Kesley Edmo, Jr., Albuquerque, New Mexico, Executive Council Liaison
Dr. Deborah Harmon Hines, Worcester, Massachusetts
The Rev. Ledlie Laughlin, Jr., New York, New York
Mr. Tom Tull, San Francisco, California
The Rev. Maria Aris-Paul, New York, New York, Adjunct Member
The Rev. Wayland Melton, Cincinnati, Ohio, Adjunct Member
The Rev. Randolph L. Frew, Episcopal Church Center Liaison

Representatives of the commission at General Convention
The Rt. Rev. Douglas E. Theuner, House of Bishops, is authorized by the commission to receive non-substantive amendments to the report.
Mr. Kesley Edmo, Jr., House of Deputies, is authorized by the commission to receive non-substantive amendments to the report.

B. SUMMARY OF THE COMMISSION'S WORK
In its 1988 Blue Book Report the Standing Commission on Health and Human Affairs stated: "The best service we can offer to the Church is to provide a description of the AIDS epidemic to date and to issue a solemn warning about predictions of the future." It also stated: "It is abundantly clear that far more lies ahead of this Church in the AIDS epidemic than there is behind us." That remains true in 1991. Building upon the above, the Joint Commission on AIDS wants to state in the 1991 Blue Book Report that, while predictions of the future remain grim, there is much for which we can give thanks concerning this Church's response to the HIV/AIDS pandemic. Prevention education and effective caregiving are working and are bringing new hope and life where there had been primarily despair and death. Clear and effective evangelism to the most marginalized of both society and the Church is intrinsic to the Church's outreach in this area.

It would be superfluous to rehearse statistics and projections here. It is hoped that the enormity of the pandemic is within the consciousness of most who will read this report, although the universality of its intrusiveness may not be. That, however, will come soon, as people increasingly realize through personal experience that no group is immune from the ravages of the HIV/AIDS pandemic. We need to look closely at the effectiveness of the Church's response and how that response can become even more viable. We also need to examine how this disease and our response to it are affecting the Church: threatening it, testing it, challenging it, transforming it. This report is about HIV/AIDS, but, more importantly, it is about the fact that "our Church has HIV/AIDS."
I. 1988-1991 How has the Episcopal Church Responded to HIV/AIDS?

a. Joint Commission on AIDS

The 69th General Convention established a Joint Commission on AIDS charged with two specific responsibilities: "to focus the Church's attention on the theological, ethical, and pastoral issues of AIDS, and to develop recommendations and strategies to increase AIDS awareness throughout the Church." In January 1989, at its first meeting, the Joint Commission on AIDS added two items to its agenda that were felt to be inex-tricably implied in its charge: "to facilitate communication with and among the several organizations, institutions and programs engaged in AIDS ministries within and related to the Episcopal Church, and to advocate to the Church and the world with and for those who are affected by AIDS."

Having thus defined its purpose, the Joint Commission on AIDS adopted the following guiding concepts for implementing its purpose:

1. Enable and support direct service to persons affected by AIDS.
2. Be sensitive to global and local concerns.
3. Look through and beyond the Church.
4. Know and make known our conviction that Our Church Has AIDS.

After establishing its agenda the Joint Commission on AIDS addressed its next most obvious concern: its composition. The General Convention set the membership at one bishop, two presbyters or deacons, and three lay persons. The composition was not large enough to include all of the principal constituencies most seriously impacted by HIV/AIDS. Members felt strongly that representation was needed from all of those sections of the population increasingly affected by HIV/AIDS. Upon petition by the Joint Commission on AIDS the Presiding Bishop and President of the House of Deputies appointed adjunct members from the African American male and Hispanic communities, as well as appointing Kesley Edmo, Jr., a Native American, as Executive Council liaison.

To further its stated purpose the Joint Commission on AIDS determined that its meetings would be held in different regions, always with prayer and time for theological reflection and always with visitations to local programs through which the Church and the society were responding to HIV/AIDS. The Joint Commission on AIDS has held six full meetings in five cities from coast to coast: Atlanta, Cincinnati, New York, San Francisco and Washington, D.C. Two of these meetings have been in conjunction with conferences of the National Episcopal AIDS Coalition (NEAC), two with the Union of Black Episcopalians AIDS Task Force (UBEAT), and one with the NEAC Board of Directors. Local HIV/AIDS workers have felt supported and affirmed by the presence of the Joint Commission on AIDS through on site visits and consultations.

In order to fulfill the mandate of the resolution of the 69th General Convention which established the Joint Commission on AIDS "to develop recommendations and strategies to increase awareness throughout the Church of the AIDS crisis," the Joint Commission monitored the HIV/AIDS legislation passed by that Convention and believes implementation of all of those resolutions to have been appropriately initiated with ongoing programmatic implementation being carried out by appropriate agencies and groups in the Church.

The initiative taken by the Joint Commission on AIDS in bringing HIV/AIDS to the attention of the Anglican Consultative Council in Wales in the summer of 1990 has been widely acknowledged as having been of great importance to the Anglican Communion and to the international religious community. Efforts must continue to bring such
b. HIV/AIDS Ministries Office

In 1986 an AIDS Consultant was hired at the Episcopal Church Center in New York City to provide HIV/AIDS services for the Episcopal Church. Since 1988 the consultant has been the Reverend Randolph Lloyd Frew, who has assisted the Presiding Bishop in preparing materials for the National Day of Prayer, served as liaison to the Joint Commission on AIDS, provided support and leadership, when requested by NEAC and other agencies of the Episcopal Church; he has been conducting workshops and seminars and preaching, teaching and providing information and resources to individuals, dioceses and institutions throughout the Church. Father Frew, Interim Convenor of the Interunit Working Group on AIDS at the Episcopal Church Center, has served as a member of the planning committees for the 1989 and 1991 NEAC national AIDS conferences. In early 1990 the Interunit Working Group on AIDS assisted the Joint Commission on AIDS in holding a gathering of representatives of all groups in the Episcopal Church identified as being involved in the Church's response to HIV/AIDS. AIDS has been one of the "Ten Program Priorities" of the Episcopal Church for this triennium.

c. "You(th) Ministry in the Age of AIDS"

The 69th General Convention mandated the preparation and distribution of educational materials concerning the definition, transmission and prevention of HIV/AIDS. You(th) Ministry in the Age of AIDS is a four-part resource developed by the Youth Ministries Office of the Episcopal Church Center in cooperation with the Office of AIDS Ministries. Edited by the Reverend Canon V. Gene Robinson, this resource offers sound, practical information and advice from a Christian perspective, and it has been mailed to every congregation and diocesan office and HIV/AIDS commission in the Episcopal Church. Many provinces, dioceses and congregations have availed themselves of the training offered for the implementation of this curriculum and have used it successfully.

d. National Day of Prayer

Since 1986 the National Day of Prayer has offered one of the strongest statements of the commitment of the Episcopal Church and its Presiding Bishop to leadership in the religious community's response to the HIV/AIDS pandemic. The 69th General Convention established the second Sunday of October to be observed each year as the National Day of Prayer, although the date may be changed in local areas for specific reasons. This observance has provided ecumenical and interfaith opportunities for mutual witness and efforts toward greater awareness and increased response.

e. AIDS National Interfaith Network

The AIDS National Interfaith Network (ANIN) began in the fall of 1988 and has been joined by the Joint Commission on AIDS and several other national and diocesan Episcopal AIDS organizations. The chair of the Joint Commission on AIDS served on the honorary host committee of a major conference in Atlanta in 1989 at which the Presiding Bishop delivered a keynote address.
f. Local Response to HIV/AIDS

One of the things for which the Church can offer profound thanks in the midst of the HIV/AIDS pandemic is the compassionate response offered by countless individuals: lay and ordained; straight, gay or lesbian; young and old; of all colors and races; those who are HIV seropositive and those who are not; congregations and dioceses; commissions and committees.

The Episcopal Church, initially called to HIV/AIDS ministry by its gay sons and lesbian daughters, has responded across boundaries of sexual orientation and behavior, prejudices and ideologies, to serve and be served in the light of the gospel imperative to “seek and serve Christ in all persons.”

There is no way a report like this can begin to list all of the individuals and ministries responding to this challenge in Christ’s Name. We can only say, “Thanks be to God.”

The Joint Commission on AIDS has met with individuals who have lost over forty friends and associates to AIDS. It has encountered Christian communities that have found new energy in responding to the HIV/AIDS pandemic, and in churches which are filled on Sunday morning with people who have come to be part of a response seldom found elsewhere in our world. HIV/AIDS ministry is an extraordinary kind of evangelism: an evangelism that requires apostolic commitment of those who participate in it; an evangelism in which the Gospel shines through the fears and prejudices of a world that has yet to experience what it so desperately needs. HIV/AIDS presents an enormous challenge to the Church to be the compassionate community it claims to be. It is a powerful test of the integrity of the faith community. We give thanks for those who have heard and seen, and for those who will hear and see as the Church continues to rise to this challenge by the grace of God.

II. 1991-1994 How shall the Episcopal Church respond to HIV/AIDS in the forthcoming triennium?

The Episcopal Church is an acknowledged leader in the response of the international faith community to the HIV/AIDS pandemic. It is the opinion of the Joint Commission on AIDS that the following factors have contributed significantly to this:

1. the traditional liberality of the Episcopal Church in taking seriously the Gospel call to honor the integrity of all people by seeking to minister to those most marginalized in the world;
2. the specific, clear and committed leadership of Presiding Bishop Browning;
3. the work of the Joint Commission on AIDS and the high profile it gives to the commitment of the Episcopal Church to HIV/AIDS ministry;
4. effective and creative leadership from the Office of HIV/AIDS Ministries at the Episcopal Church Center;
5. the energy and dedication of national grass roots organizations in the Episcopal Church: specifically NEAC, UBEAT and Integrity, and of individual, parochial and diocesan efforts across the Church. Specific note should be made of the contribution of the Bishop and Diocese of California.

The public’s attention span concerning HIV/AIDS seems to be reaching its limit at just the point in time when experts predict a quantum leap in the epidemic’s proportions, a leap related to the intrusion of the disease into the mainstream community. At
a time when people are beginning to relax about this dread disease, we have reached a point where we must seriously increase our attention to it. The Episcopal Church has led in this and has a moral imperative to continue to do so.

C. FINANCIAL REPORT

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D. RESOLUTIONS OF THE COMMISSION

Resolution #A001
Continuation of the Joint Commission on AIDS

Resolved, the House of _________ concurring, That Canon I.1.2(o) be amended by striking the first sentence of (1) and by substituting the following:

(1) A Joint Commission on HIV/AIDS consisting of 1 Bishop, 2 3 Presbyters or Deacons and 3 5 Lay Persons, with at least one third of the members to be Persons Living With AIDS or persons who have tested HIV positive, and at least one third of the members to be representative of those communities most affected by HIV/AIDS: specifically homosexual, African-American, and Hispanic people.

EXPLANATION

In order to coordinate the efforts of the Episcopal Church Center, diocesan agencies and programs and grass roots responses throughout the Episcopal Church, and to maintain the Episcopal Church's national and international leadership in responding to the HIV/AIDS pandemic, organizational commitment at the level of a General Convention mandated and supported Joint Commission is necessary.

Resolution #A002
Affirmation of Ministries

Resolved, the House of _________ concurring, That this 70th General Convention encourage the Total Ministry Task Force of the Office of Ministry Development, and the Office of Evangelism to identify, affirm, encourage and publicize HIV/AIDS ministries: particularly those initiated and sustained by gay and lesbian people and people of color, as a significant segment of the total ministry and evangelism of this church; and be it further

Resolved, That this General Convention recognize the efforts of Episcopal Life in informing the Church of these ministries.

EXPLANATION

The General Convention is requested to recognize the value of HIV/AIDS ministries and encourage their integration with other priorities of the Episcopal Church.
Resolution #A003
Discrimination on the Basis of HIV/AIDS: Church Action and Advocacy
1 Resolved, the House of ___________ concurring, That this 70th General Convention
2 continue to endorse the Executive Council resolution of November 1987 prohibiting
3 discrimination on the basis of AIDS, ARC or HIV infection, recognize those dioceses,
4 congregations, schools and other church-related organizations that have adopted a
5 similar policy, and encourage every remaining diocese, congregation, school and church-
6 related organization to adopt such a policy no later than December 15, 1992, and call
7 on every diocese in this Church to establish an HIV/AIDS task force to advocate for
8 all affected by HIV/AIDS.

EXPLANATION
The General Convention is requested to mandate action taken by the Executive
Council in this matter and continue to encourage church-wide cooperation.

Resolution #A004
HIV/AIDS: Theological Resources and Models for Adult Education
1 Resolved, the House of ___________ concurring, That this 70th General Convention
2 authorize the development of diocesan and congregation-based programs for adults,
3 utilizing theological education and reflection on the HIV/AIDS pandemic: such models
4 of theological reflection to be based upon personal experience, to be sensitive to cultural
5 and sexual diversity, and to incorporate the engagement of scripture, tradition and cur-
6 rent events; and urge the incorporation of such programs and models in all dioceses,
7 congregations and other church-related organizations beginning no later than January,
8 1993; and be it further
9 Resolved, That the sum of $50,000 be appropriated as seed money for the preparation
10 of such models by the Episcopal Church Center staff, or by the Interunit Working
11 Group on AIDS.

EXPLANATION
HIV/AIDS education is as important for adults as it is for young people and must
be sensitive to the nuances of cultural diversity in order to make such education effec-
tive for all members of the Episcopal Church.

Resolution #A005
Multi-cultural HIV/AIDS Educational Resources for Youth
1 Resolved, the House of ___________ concurring, That this 70th General Convention
2 instruct this Church to begin culturally sensitive dialogues with and among youth on
3 the HIV/AIDS pandemic as a new paradigm for Christian social awareness and response,
4 especially as it relates to sexual experimentation and exploration of sexual orienta-
5 tion, and to behaviors associated with drug and alcohol use; and be it further
6 Resolved, That the Interunit Working Group on AIDS be directed to facilitate the
7 preparation of materials in English, Spanish, and in other languages as may be necessary, 
8 beginning no later than January, 1993; and be it further
9 Resolved, That $75,000 be provided for preparation and distribution of these resources
10 among the dioceses, congregations, schools, institutions and other church-related
11 organizations.
EXPLANATION

Young people remain at great risk of both receiving and transmitting the Human Immunodeficiency Virus through experimentation with chemical substances and unsafe sex. The Church must continue to provide guidelines and factual information for all of our youth about this disease, as well as about human behavior and decision-making.

Resolution #A006
HIV/AIDS: Encouragement to National Council of Churches (NCCC), Anglican Consultative Council (ACC), and World Council of Churches (WCC)

Resolved, the House of __________ concurring, That this 70th General Convention encourage the National Council of the Churches of Christ (NCCC), the Anglican Consultative Council (ACC), the World Council of Churches (WCC), and all other ecumenical and international bodies to which the Episcopal Church belongs, to openly address the HIV/AIDS pandemic and the Church's response to it, and to develop and fund nonjudgmental educational and care-giving programs, to witness to national and international agencies, and facilitate the sharing of information and resources and the implementation of a compassionate response to Persons Living With AIDS; and be it further

Resolved, That copies of all resolutions on HIV/AIDS passed by the 70th General Convention be forwarded to the National Council of Churches (NCCC), the Anglican Consultative Council (ACC), and the World Council of Churches (WCC).

EXPLANATION

The Episcopal Church has exercised appreciated leadership nationally and internationally in the Church's response to the HIV/AIDS pandemic and should continue to do so.

Resolution #A007
HIV/AIDS: “Ten Principles for the Workplace”

Resolved, the House of __________ concurring, That this 70th General Convention adopt the following “Ten Principles for the Workplace” as the standard by which it will function in relationship to people with HIV/AIDS in the workplace:

(1) People with HIV/AIDS are entitled to the same rights and opportunities as people with other serious or life-threatening illnesses;
(2) Employment policies must, at a minimum, comply with federal, state and local laws and regulations;
(3) Employment policies should be based on the scientific and epidemiological evidence that people with HIV/AIDS do not pose a risk of transmission of the virus to coworkers through ordinary workplace contact;
(4) The highest levels of management and union leadership should unequivocally endorse nondiscriminatory employment policies and educational programs about HIV/AIDS;
(5) Employers and unions should communicate their support of these policies to workers in simple, clear and unambiguous terms;
THE BLUE BOOK

Employers should provide employees with sensitive, accurate and up-to-date education about risk reduction in their personal lives; Employers have a duty to protect the confidentiality of employees’ medical information; To prevent work disruption and rejection by coworkers of an employee with HIV/AIDS, employers and unions should undertake education for all employees before such an incident occurs and is needed thereafter; Employers should not require HIV screening as part of general pre-employment or workplace physical examinations; In those special occupational settings where there may be a potential risk of exposure to HIV (for example, health care, where workers may be exposed to blood or blood products), employers should provide specific ongoing education and training, as well as the necessary equipment, to reinforce appropriate infection control procedures and ensure that they are implemented; and be it further

Resolved, That this General Convention ask every diocese, congregation, school and church-related organization to review and discuss these “Ten Principles for the Workplace” and adopt them as the standard for their organization, and to complete their deliberation by December 15, 1992; and be it further

Resolved, That Episcopalians throughout the Church be asked to share these Ten Principles with the management at their workplace and urge their adoption.

EXPLANATION

As we enter the Decade of Evangelism, the Joint Commission on AIDS wants this Church to recognize that the decade will also be an HIV/AIDS decade. Evangelism within that context includes taking our standard for an appropriate and loving response to people with HIV/AIDS beyond our own setting and into the workplace. This resolution asks us to reaffirm our position as Episcopalians by formal adoption of these Ten Principles, to initiate dialogue on the parish level regarding these principles, and to take our position out into a world still fearful about HIV/AIDS. These Ten Principles build upon the non-discrimination policy which the 1988 General Convention passed. We believe that they reflect the intent of those policies and offer practical guidelines for dioceses, parishes and workplace settings everywhere. Written by the Citizens Commission on AIDS for New York City and Northern New Jersey, the Ten Principles have been adopted by over 370 companies, organizations and unions.

Resolution #A008

HIV/AIDS Antidiscrimination: Public Policy

Resolved, the House of ____________, concurring, That this 70th General Convention urge the baptized of this Church to speak publicly in opposition to local, state and national legislation that discriminates against those who are HIV positive, and specifically to oppose laws which inhibit employment, housing, education and accessibility to insurance, and every law which would violate the privacy and civil rights of Persons Living With HIV/AIDS, and be it further
7 Resolved, That this Church encourage, at every level of society, increased access to
8 HIV/AIDS services among marginalized communities, especially communities of gay
9 and lesbian people, people of color, homeless people, drug and alcohol abusers, and
10 those in prison; and be it further

11 Resolved, That the HIV/AIDS Ministry Office of the Episcopal Church Center and
12 the Washington Office of the Episcopal Church, in conjunction with the Interunit Work-
13 ing Group on AIDS and the Public Policy Network, prepare antidiscriminatory infor-
14 mation and resources for publication in *Episcopal Life* and distribution through the
15 dioceses to all households of the Church.

EXPLANATION
The Episcopal Church is recognized as being a force within society for inclusiveness
and compassion, and it needs to be vigilant in opposing all forms of discrimination.

Resolution #A009
HIV/AIDS: Early Intervention and Anonymous Testing

1 Resolved, the House of concurring, That this 70th General Convention
2 affirm and encourage early intervention and anonymous testing, counseling and medical
3 treatment for the Human Immunodeficiency Virus (HIV).

EXPLANATION
Recent medical developments have made early intervention important, and the
testing for seropositivity must be done anonymously rather than “confidentially” in
order to protect the integrity and rights of those tested whether or not they test positively.

Resolution #A010
Comprehensive Health Care

1 Resolved, the House of concurring, That this 70th General Convention
2 assert the right of all individuals to medically necessary health care, including long-
3 term services; and be it further
4 Resolved, That the Episcopal Church be encouraged at all levels to advocate for legisla-
5 tion for comprehensive medical benefits to include diagnostic tests, primary and ter-
6 tary care for acute and chronic conditions, rehabilitation care, long-term care, men-
7 tal health services, dental care and prescription drugs; special attention should be given
8 to the needs of individuals with limited self-care capabilities; and be it further
9 Resolved, That the Washington Office of the Episcopal Church, the Public Policy Net-
10 work, the Office of Social and Specialized Ministries, and other appropriate agencies
11 at the Episcopal Church Center facilitate the implementation of this resolution at the
12 federal level.

EXPLANATION
It is the recommendation of the Joint Commission on AIDS that the following
principles be the foundation of this Church’s position on Comprehensive Health Care:

1. The health and well-being of individuals is directly related to their ability to
obtain necessary medical care and health-related support services for emergency, chronic
and long-term conditions, and equal access should be guaranteed regardless of race,
racial or employment status and be extended to those who are incarcerated.
2. The integration of long-term care services with comprehensive health coverage is cost effective, protects persons with disabilities from being impoverished, especially by the cost of nursing facility care, and allows maximum independence for those who can remain safely at home.

3. The lack of access to health care results in unnecessary pain and suffering and leads to overuse of expensive emergency facilities.

4. All persons, including children, low income working persons, unemployed, underemployed, uninsured and underinsured persons, and persons with physical or mental disabilities and chronic conditions should have access to health care, including long term care, regardless of their ability to pay.

5. Every person has the right to choose limits of medical care and to decide upon the extent of technological intervention which he or she may desire to preserve or prolong his or her own biological life.

NOTE: This resolution and explanation is offered from the perspective of the Joint Commission on AIDS to complement similar legislation which may be proposed by the Standing Commission on Health.

E. GOALS AND OBJECTIVES FOR THE NEXT TRIENNIAL

Although discouragement borders on despair at the lack of a cure or a means of immunization after a decade of intensive medical research, we must take heart in knowing that the world has known of the existence of this disease for just ten years. Leaders in the field of scientific medical research anticipate a breakthrough in this decade. Until then, however, there is no cure or means of immunization. As long as the world refuses to deal forthrightly and openly with matters of sexuality, the opportunities for lifesaving education will be crippled. As long as those who abuse drugs are more often treated primarily as criminals rather than as seriously ill persons in need of healing, their self-destructive practices will be driven from the light of reason, hope and care. More than most other religious institutions in our culture, the Episcopal Church has demonstrated a willingness to reach out to people on the margins—people who, though they represent many different lifestyles are with all of us equally the children of God and the sisters and brothers of our Lord Jesus Christ. In the forthcoming triennium the Joint Commission on AIDS must continue to do what it has done in the last triennium, following through on the legislation of the 70th General Convention and preparing new initiatives for the 71st. We need to keep up the momentum in the Episcopal Church and in society by focusing attention on HIV/AIDS and coordinating responses in the Church and in the world. We need to advocate for, and continue to bear high profile witness to, sustained ministry rooted in the faith that God reigns and that God’s will for all is healing and wholeness. We must continue to do this with every bit of the energy at our disposal in Christ’s Name and power.

F. PROPOSED BUDGET FOR THE TRIENNIAL

The following figures anticipate two full meetings of the commission in each of the calendar years 1992 and 1993 and one full meeting in 1994. Meetings have been figured with an average attendance of seven people, and a 5% inflation factor has been added each year. Additional expenses (e.g., subcommittee meetings, organizational member-
ship fees for the Episcopal Church in national organizations, consultants, etc.) have been figured at the rate of $2000 per full year.

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G. PROPOSED RESOLUTION FOR BUDGET APPROPRIATION

Resolution #A011

Resolved, the House of __________ concurring, That there be appropriated from the Assessment Budget of General Convention the sum of $41,344 for the triennium for expenses of the Joint Commission on HIV/AIDS