



**Rev. Dr. Calvin O. Butts, III
Talking Points**

**Summit of High Level Religious Leaders on the Response to HIV
NBLCA'S Leadership Mobilization Model**

March 21 - 23, 2010

- In 1920, the noted American bacteriologist and public health expert, Charles-Edward Amory Winslow, a founder of Yale University's School of Public Health, defined public health as "the science and art of preventing disease, prolonging life, and promoting health through the **organized** efforts and **informed** choices of society, organizations—public and private—communities and individuals."
- Specific public health tenets for crisis community intervention requires the following:
 1. Build a base of community ownership;
 2. Use local experience for seeking solutions and facilitating decision making;
 3. Understand the history, systems and operational techniques of the target population;
 4. Know what has worked in the past and what has not;
 5. Establish an organization and advocacy structure that allows flexibility for multiple cohesive programs;
 6. Develop planning based on sound theory and epidemiological data, and
 7. Insure necessary resources for the development and

maintenance of the initiative.

- Using these public health principles as our guide, the NBLCA developed a Leadership Mobilization Model to improve access to and utilization of HIV/AIDS prevention services for African-American populations at risk for HIV infection or living with HIV/AIDS
- The National Black Leadership Commission on AIDS has utilized its Leadership Mobilization Model for more than two decades, changing methods to insure that the model conforms to the cultural norms of the targeted community-at-large. The basic components of the model meets the standards for leadership intervention as adapted from our nation's civil rights movement and based on the African concept of the "Council of Elders."
- The NBLCA Leadership Mobilization Model, always headed by Black clergy, develops local leadership infrastructures to work in **collaboration** with---community-based organizations, faith leaders, elected officials, business professionals, people living with HIV/AIDS, health departments, and other key community stakeholders. This collaboration builds a base for community ownership of a multi-faceted action plan to fight HIV/AIDS.
- In 1995, I played a lead role in replicating this model in cities across the United States whose Black communities were disproportionately infected with HIV.
- Today, the NBLCA has affiliate chapters in ten cities across the nation.

NBLCA's Leadership Mobilization Model replication process is outlined as follows:

STEP 1 - Coordination

NBLCA develops an in-depth statistical analysis on leading public health indicators, including HIV and AIDS, that are user-friendly, up-to-date, and demonstrate the status and trends of the various public health concerns of communities of African

descent in each targeted city.

A survey is developed that captures the current knowledge base of indigenous African American community stakeholders about the needed services related HIV/AIDS and other public health issues. For life threatening diseases such as AIDS, tuberculosis and cancers, current infection rates are included as well as comparative data that breaks down the population into cohorts by gender, age, race and ethnicity.

STEP 2 – Mobilization and Structure

NBLCA identifies a core group of five to seven indigenous Black clergy leaders in each targeted city who are validated by their history of service and leadership by the community itself.

NBLCA reaches out to all segments of the community to identify these core clergy leaders. Methods of outreach include referrals from NBLCA's Board of Directors through meetings with local Black elected officials, organization executives and professionals in the fields of academia, medicine, business and the media. These consultations take place with NBLCA staff and individuals with a tradition and history of community service.

STEP 3 – Technical Assistance and Affiliate Development

NBLCA works with the local Steering Committee in each city to educate them about BLCA's goals and to help them to identify major public health concerns, particularly as they relate to HIV and AIDS, and to help develop and execute strategies to successfully expand the leadership of the affiliate.

NBLCA assists each Steering Committee to identify no less than 30 additional indigenous community leaders that possess expertise and a community success record in the fields corresponding to NBLCA's five programmatic committee areas: **Ecumenical, Medical, Legislative and Public Policy, Media and Public Affairs, and Fund Development.** The reciprocal partnership between the clergy and

elected officials, a partnership that has long facilitated the historical political and social programs of many Black elected and appointed officials and their communities' expressed needs, is called on to again further the development of this community effort in every crisis intervention in HIV/AIDS and public health. Equally important is the development and implementation of local action plans for each committee developed to enhance policy and legislative issues that lead to a change in the way public health is conducted or responded to on behalf of communities of African descent. The participation of local Black elected and appointed officials and other leaders is also solicited to facilitate the development of the clergy-led affiliate during this step in the process.

STEP 4 – Affiliate Services & Local Community Development

The opening strategic planning session will be an instrument to (1) alert the community of the initiation, mission, purpose and proposed activities of the NBLCA affiliate, and (2) focus public and media attention on the HIV/AIDS and other public health-related needs of the community, and (3) to initiate the local affiliate committee structure.

The format of the public meetings have two components: presentations by the local leadership in conjunction with those by (1) NBLCA board members on NBLCA's goals in working with the community's leadership, (2) NBLCA's President and CEO, and (3) members of NBLCA's board who have been identified by the local clergy as assets to their community development and can enhance local leadership among specific populations. Participants are assigned to one of the five programmatic committees that are reflective of NBLCA's five program areas and are charged with carrying out the functions of each local affiliate.

Each local affiliate committee is asked to select an interim chair and to discuss the development of a committee-specific action plan that addresses the community's HIV/AIDS and public health-related needs and outlines an implementation strategy. Each affiliate includes individuals living with HIV or AIDS who help guide the

affiliate's development.

NBLCA assists the steering committees in the planning and development of the opening strategic planning session of the local NBLCA affiliate. As this is a key event in galvanizing public awareness and support, NBLCA helps to develop an invitation list with local community leaders, generates letters of invitation as well as arranges for the facility for the session, speakers and the implementation of the primary plans of action through the initial work of the five programmatic committees.

NBLCA also develops, prepares and disseminates all materials for the affiliate's opening and ongoing activities. These materials include:

- **Current data and trends of HIV/AIDS and other major epidemics of disease in the local community;**
- **Risk and reduction factors;**
- **Local church/community resources and leaders;**
- **Comprehensive service needs for all levels of the targeted population – especially at-risk population groups (women, youth, MSM);**
- **Fund development needs, and**
- **The history and role of the National Black Leadership Commission on AIDS.**

STEP 5 – Action Plans

NBLCA's staff facilitates the development of action plans, resources and technical assistance to be enacted and exchanged among the different committees of the local affiliates.

The national organization serves as an administrative structure that oversees the analysis, coordination, development, implementation and evaluation of each affiliate's action plans. The organization addresses the technical assistance needs of existing and new affiliates and service providers in New York City.