

**POWER
IN THE
PULPS**

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Having a Heart for Health

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Power in the Pews: Having A Heart for Health

Message from Director of Faith-Based Initiatives, Tennessee Department of Health:

Dear Faith Leaders:

Welcome to this healthy living partnership with the Tennessee Department of Health, Faith-Based Initiative. We join your efforts to get, stay, and remain healthy.

The Faith-Based Initiative offers this DVD, *Power in the Pews: Having A Heart for Health*, to your congregation either to encourage you in an existing health ministry—possibly offer new ideas you can implement. Or, if you are interested in beginning a health ministry we want to give you a step-by-step method, C.U.R.E., to guide you. We provide you this DVD at no charge to give you another tool to bring life and health more abundantly to your members.

This is an important ministry for your congregation. I know you are already very busy and engaged in various ministries serving and leading the people of God. You may think that adding one more activity or one more responsibility may be too much. I suggest that by adding a health ministry or expanding what you already do to educate your congregation on health will allow you to have a more vibrant congregation with more people able to serve better. The time spent in educating your congregation on healthy practices will yield results that will last generations.

Thank you for joining with us.

Please take a moment to complete the Survey on the last page.

Yours in health and wholeness,
Rev. Hilda R. Davis-Carroll, Ph.D.

Beloved, I pray that all may go well with you and that you may be in good health, just as it is with your soul. 3 John 2. NRSV



Why A Faith Initiative?

- ✚ [Executive Order 13199](#) created the White House Office of Faith-Based & Community Initiatives on January 29, 2001. The Executive Order highlighted the importance of working with the faith community to expand the reach of the government.

In summary, the Executive Order helped to:

Realign Federal policy and programs to better use, empower, and collaborate with grassroots and nonprofit groups.

Reinforce and support programs that work and increase their scale.

Adopt a new attitude to honor and not restrict faith-based and community initiatives.

- From www.whitehouse.gov/news/reports/faithbased.html

- ✚ The Tennessee Department of Health (TDOH), under the leadership of Commissioner Kenneth S. Robinson, M.D., began the Faith-Based Health Initiative (FBHI) on June 1, 2004. The goals of FBHI are to:

- reduce health disparities in the state of Tennessee through the collaborative efforts of FBHI and the [Better Health: It's About Time!](#) initiative;
- identify opportunities, document participation, and sustain relationships between public health and faith communities for active collaborations; and
- connect TDOH resources with faith communities to promote healthy practices.

TDOH values partnerships with the faith community because they can provide sustained social support in implementing and maintaining healthy behaviors, can communicate healthy messages to congregation members as well as hard-to-reach family members, and have expertise in mobilizing volunteers.



Why A Partnership between Public Health and the Faith Community?

- ✚ The mission of public health combined with the ministry of the faith community aligns the strengths of both for a successful relationship to improve the lives of the community.

The Mission of Public Health

Improve the health and ultimately the well-being of underserved populations that will:

- Empower them to make informed decisions and adopt behaviors that protect and enhance their health.
- Enhance services to underserved populations.
- Engage community to initiate and strengthen partnerships

The Ministry of the Faith Community

Minister to whole person to promote communal well-being that will:

- Provide a sense of meaning, purpose, and agency by understanding the emotional and spiritual dynamics associated with illness.
- Provide support, compassion, advocacy, and assistance for marginalized persons.
- Provide education on health-affirming practices to improve communal/world health.



The Faith Community and Healing

Healing and Scripture

- Percent of “healing narrative” in Gospels
 - Matthew: 40% Mark: 40%
 - Luke: 35% John: 33%
- “*Sozo*” –refers to the healing of the whole person. Twenty cases of “*sozo*” are translated as healing and wholeness.
- “Healing of the body is never purely physical, and the salvation of the soul is never purely spiritual for both are combined in the total deliverance of the whole human being. . .” from The Bible and Healing by John Wilkinson. Eerdmans, 1998.
- Trinity shows importance of Body, Mind, and Spirit. God (mind), Jesus (body), and Holy Spirit (spirit).
- “I am the Lord who heals you.” Our health is part of God’s plan for our lives.
- Old Testament has 213 health rules
- Hebrew name for physician is *ropeh*—meaning “to restore.”
- In the Apocryphal “Ecclesiasticus”— “Give doctors the honour they deserve, for the Lord gave them their work to do. . .” 38:1 (The Apocryphal are books which are included in some version of the canonical Bible, but which have been excluded at one time or another, for textual or doctrinal issues.)

Healing was also a part of Jesus' teaching and preaching ministry. John Wilkinson discusses this connection, “The healing activity of Jesus had a very intimate connection with its context in his teaching and preaching. They were concerned with 'the good news of the kingdom,' and so was healing. When Jesus and his disciples healed, the kingdom 'came near' to the sick people they healed. . . . These acts of healing and deliverance were signs of the breaking into the human situation of the kingdom of



God, . . . They were not indications of the glorious manifestations of the kingdom, . . . , but of its healing and saving power now visible in the present.”

Become A Watchman

So you, mortal, I have made a sentinel [watchman] for the house of Israel; whenever you hear a word from my mouth, you shall give them warning from me.

Ezekiel 33:7 NRSV

“Ezekiel 33:1-7 powerfully explains the role of the watchman. If as watchmen, we see each other suffering and dying from disease and poor health, [is it] not our duty to alert and educate one another? Could this be done to prevent the [disease] from occurring and spreading?

Each of us must first hear the watchman, and follow his [or her] warning that we improve our diets, lifestyles and behaviors. But each of us must also *become* the watchman by doing what we can to help others. If our brothers and sisters succeed in finding and keeping their good health, we succeed; if they fail, we fail. The burden of ill health rests upon each of us. We *are* our brother’s [and sister’s] keepers!” (emphasis in text)

From A Minute for Your Health: The ABC’s for Improved Health and Longevity. Edited for the Association of Black Cardiologists by Stephanie H. Kong, M.D. 1-800-753-9222

[Starting or enhancing a health ministry is hearing the word of God calling us to be a watchman for our people. Your health ministry is answering God’s call to be a helper to your brothers and sisters.](#)



Research on Faith and Health

“Faith is the cornerstone of good health.”
Margaret Davis, Friendship Baptist Church
from DVD, “Power in the Pews: Having a Heart for Health”

There has been much research to show the connection between faith beliefs and health outcomes. Some of the following research has made the connection:

- ✚ The importance of spirituality as a way of improving quality of life in cancer has increased. Reed found that seriously ill patients who rely on religious beliefs or report a greater spiritual well-being report higher quality of life.² A patient’s spirituality has been shown to be a partner in the healing process.²³⁴

- ✚ Religious beliefs have been shown to positively influence health behaviors. African American women who attend church have higher survival rates, benefit more from religious coping, lower blood pressure, lower rates of heart disease and a better overall quality of life.¹

- ✚ A relationship with God, through prayer, has been connected to improved health outcomes in double-blind studies. Also, participation in organized religion has been reported to be associated with improved health outcomes including lower blood pressure, faster healing from cardiac surgery, and improved quality of life in cancer patients. These effects have been reported to be positively correlated to participation in a religious community.



Your Health Ministry

A health ministry is a recognized team of people who sponsor regular educational events and screenings. The health team may also provide opportunities for the congregation to have their health concerns answered through surveys, holding regular health team meetings that are open to the congregation, or a Suggestion Box displayed in a prominent place in a common area.

Whether you have a formal health ministry or not, your congregation may already have activities that encourage a healthy lifestyle. You may:

- ✚ Host an annual health fair
- ✚ Educate your congregation on health through speakers
- ✚ Include health messages in your bulletin
- ✚ Have a Nurse's Guild
- ✚ Provide blood pressure checks regularly
- ✚ Provide transportation to the doctor for your elderly members.
- ✚ Have literature posted in a common area on a health issue.

Using this DVD and Leader's Guide will give you the guidelines for establishing a formal health ministry to build upon your existing health activities that has the potential to improve the health outcomes for your members and save lives.



Health Facts For Congregations

- More than 61 percent of Tennesseans are either overweight or obese, ranking Tennessee 48th in the nation for obesity.
- There is strong scientific consensus that obesity significantly increases the risk of serious chronic diseases like diabetes, heart disease, and some cancers.
- Overweight among children and teenagers has risen dramatically in recent years, contributing to the development of type II diabetes and risk factors for heart disease.
- Obesity-related deaths do not adequately represent deaths related to poor nutrition and physical inactivity. For example, people with a normal weight can die of heart disease caused, at least in part, by poor diet and/or lack of physical activity.
- For Tennessee women, cardiovascular disease (CVD) ranked first among all disease categories in 2004 hospital discharges.
- Among Tennessee residents that experienced heart attacks in 2004 and were admitted to a hospital, thirty-one percent of women died within a year after the heart attack compared to twenty-three percent of men.
- In 2004, CVD claimed the lives of 9,832 Tennessee women.
- Nearly thirty-five percent of all female resident deaths occur from CVD which includes "diseases of the heart" and stroke.
- Stroke is a leading cause of serious, long-term disability; an estimated 15 to 30 percent of stroke survivors are permanently disabled.
- CVD is a particularly important problem among African-American women. In 2004, their age-adjusted mortality rate was almost a third higher than that for white women. (336.8 deaths per 100,000 for black women vs. 256.0 for white women).
- Cancer (all forms combined) accounted for 5,873 deaths in Tennessee women.
- Eating better diets and being more active are important in helping reduce chronic diseases and the high medical costs of treating them.

SOURCES

Tennessee Department of Health, Office of Vital Statistics.

United Health Foundation. *America's Health Rankings, 2005 Edition.*



The C.U.R.E. Model for Building a Health Ministry

Key Idea

You can build a health ministry or enhance an existing health ministry that is designed for the particular needs of your congregation.

Session Goals

1. To describe the CURE model.
2. To provide suggestions on how to build a health ministry.
3. To direct you to resources and tools for your health ministry.

Lesson Outline for Training Health Team Members

To the Leader: You are invited to make changes to this outline to make it work for your own health team. The training session is four hours. You do not have to complete all the activities in one session. Follow the suggestions which will be useful for your health team.

The sections in *italics* are “how-to” suggestions for a particular topic, such as “how-to recruit” health team members.

The ✨ *symbol* is followed by suggestions for congregations which have an existing health ministry.

See Appendix C for a copy of the [Tips for your Health Ministry](#) found in the DVD.

I. *Opening* (20 minutes)

1. Have a member lead the group in prayer, movement, or guided meditation.
2. Allow members to check-in by sharing what they expect to gain from this training. (Limit the amount of time spent sharing. They will have other times during the lesson to speak. Stay focused on the outcomes of the lessons: to describe the CURE model.)

Ask: “Please tell us what you expect to gain from this session.” Or “What health change have you made this week/What health changes would you like to make?” Everyone has two minutes so each person will have an opportunity to speak.

II. *Show the DVD, Part I* (15 minutes)

Complete an activity. Select activities according to how much time you have.

Activities (30 minutes)

1. Allow members to tell of other successful health testimonials from your congregation or a congregation they have known.
2. Invite members to tell how a healthy lifestyle can be useful.
3. Ask: “Why did you decide to become a member of our Health Ministry Team?” List the reasons on an easel pad and include their responses in your closing prayer—thanking them for responding to God’s call for health.
4. Ask: “What points in the DVD connect with your reasons for joining the Health Ministry Team?”



III. **Show the DVD, Part II** (15 minutes)

- ✚ Part II of *Power in the Pews* gives you a step-by-step method for your health ministry. The following activities will guide you through next steps if you are beginning a health ministry.
- ✚ In Appendix C, you will find the Tips for Your Health Ministry from the DVD.. Place a checkmark beside the tips you can use for your ministry.
- ✚ Also, we provide suggestions for expanding your health ministry. (For suggestions on expanding a health ministry, look for this symbol: ✚)

- C = Contact the key people
- U = Understand the needs of your congregation
- R = Build Relationships/Gather Resources
- E = Evaluate your ministry

STEP 1 C = CONTACT THE KEY PEOPLE

- ✚ When you are ready to begin your health ministry you will want to know who else in your congregation has a “heart for health.” The people who agree to work with you will be your health team.
- ✚ **Pray about your new Health Ministry.** Ask for guidance and the key people who will be faithful and committed.
- ✚ Talk with your pastor and ask who has an interest in health or is a health professional. Your health team does not have to have all health professional as its members. You will want to recruit people who are excited about making health changes, who want to know more about living a healthy lifestyle, and are willing to meet once a month to plan activities for your congregation.
 - Find people who are excited about their health.
 - To find health team members: Post a notice on your church bulletin board and in your bulletin or church newsletter that says:
 - Are you interested in improving your health?*
 - Do you want to help others live the abundant life?*
 - Do you have a heart for health?*
 - Contact _____(name)_____to join our Health Ministry Team!*
- Place a notice in your church bulletin explaining what a Health Ministry does, how often the Ministry will meet, and who can be a part of the team:
 - Please join our health ministry team. A Health Ministry Team will:*
 - ✓ *Plan health programs for the congregation*
 - ✓ *Decide on speakers for health topics selected by congregation*
 - ✓ *Place healthy messages in the bulletin*
 - ✓ *Hear what health events the congregation wants and help in planning them (Ex: Health Fair, Men or Women’s Health Workshops, Youth Health)*
 - ✓ *Report the good news of improved health to the congregation*




- Take the idea of your Health Ministry to the congregation through:
 - ✓ church bulletin
 - ✓ newsletter
 - ✓ bulletin boards
 - ✓ presentations to groups and committees in the church
 - ✓ sermons given by the pastor that discuss the connection between spirituality and health (Get sermon ideas from the Tennessee Department of Health's website: www2.state.tn.us/health/faith)
 - ✓ worship announcements from members of the Health Ministry Team

- Give each member of your Health Ministry Team a copy of the Healthy Congregations Covenant (Appendix B) to read and sign. This is a reminder of the connection between healthy practices and faith beliefs.
- Arrange a four hour, "Power in the Pews" training for your Health Ministry Team.
- After training your Health Ministry Team introduce them to the congregation during worship in a brief ceremony:
 - ✓ *Thank the Health Ministry Team for agreeing to serve in this important ministry.*
 - ✓ *Let the congregation know the Health Ministry Team is available to hear their health concerns and suggestions for programs.*
 - ✓ *Hand out certificates to the Health Ministry Team. The certificates should read: __ (name of Team member) _____ has **1**) signed a Covenant, **2**) completed the "Power in the Pews" training, and **3**) agreed to complete one health event for the congregation in the next 90 days.*
 - ✓ *Host a fellowship after worship service for the congregation to meet the Health Ministry Team. Be sure your refreshments are healthy. This is an opportunity to be a role model for healthy eating.*

- ✳ **If you already have a health ministry.**
 - Decide if there are new people you can bring into the Health Team.
 - Who is missing that will allow you to reach more of the congregation?
 - Do you have a youth or a child representative on the Health Team?
 - Is there a health team member who is familiar with mental health or is living with a mental disability?
 - Have you included the members who are living with a physical disability or living with a chronic illness who may give direction on how better to serve the members with different disabilities?
 - Has someone in the congregation lost a loved one to suicide, HIV/AIDS or violence? Is their perspective represented on the health team?
 - Expand your definition of a "health ministry" to include more of the lifestyle issues faced by your congregation.



Step 2 U = Understand the needs of your congregation.


 Once you have gotten your health team together, you will want to know what activities, speakers, or programs are of interest to your congregation. In order to know what the congregation wants you have to ask them. Appendix A is a sample Congregational Survey. You can change this survey to make it shorter or to make it more specific to your congregation.

- Pray for the health needs of your congregation.
- Revise the Congregational Health Ministry Survey (Appendix A) for your congregation. Decide how long it needs to be. The length of the Survey will determine when you ask the congregation to complete the Survey (during Worship or after Sunday service, Wednesday Bible Study, or after a mid-week meeting).
- Ask for volunteers to read the Surveys and prepare a brief report for the congregation.
- Use the most frequently requested health items as a guide for developing programs and activities for your Health Ministry calendar.


 **If you already have a health ministry.**


- Revise the Congregational Health Survey with information you have learned from your Health Ministry. Ask the congregation what they would like to see added to the Health Ministry.
- Develop 6 to 8 week classes based upon the information gathered from the Surveys. Create a fun name for your health classes. Ex: "Fit for Life"

Step 3 R = Relationships/Resources

 Now that your Health Ministry has 1) selected the Health Ministry Team and 2) determined the needs and concerns of your congregation, Step 3 is creating the programs that will improve the health of all of your members while helping them develop health practices that will last a lifetime.

 Building the relationship with the members of your congregation is ongoing.

 You are building relationships between the Health Ministry Team and the congregation. The congregation should believe the Health Ministry Team is there for them and cares about their health.

 Also you are developing a relationship with community resources who can teach classes, provide brochures and educational materials, and possibly provide funding for your programs through a partnership relationship.

- **To build strong relationships between the congregation and the Health Ministry Team keep confidential material private. Ask permission before sharing any health data.**

POWER IN THE PEW

- Visit the Tennessee Department of Health, Faith-Based Initiative, website to find community educators who will come to your congregation and speak on topics from diabetes to HIV/AIDS and cardiovascular disease to exercise programs
 - Post a schedule of Health Events with input from the congregation.
 - Publish a Health Updates newsletter.
 - Offer a challenge to the congregation. Identify one activity to work on during the week. (trying new vegetable, fruit, whole grain; increasing exercise actions)
- ✧ **If you already have a health ministry.**
- You can increase the numbers you reach through your health ministry by forming collaborations with other congregations.
 - Become a C.H.A.M.P. congregation. This means Churches Helping And Mentoring Peers. Your church will be added to our website and your health ministry will be shown as one that has made a difference in the lives of your members. Contact the Tennessee Department of Health, Faith-Based Initiative at 615-532-2696 or email us at Faithbased.Initiative@state.tn.us for more information on the CHAMP program.

Step 4 E = Evaluate

- ✚ You have a successful health ministry. People have changed their lifestyles: improved their eating, exercise 3-4 times a week, stopped smoking, and are making important lifestyle changes that they can maintain for a lifetime. But, how will you know what changes have been made if you don't keep records.
 - ✚ Evaluate your programs so you will know what works and what programs were not helpful.
 - ✚ Evaluate your programs so you will have results to inspire others to change their lifestyle.
 - ✚ Evaluate your program to have a progress report on your program. If you decide to apply for a grant from a community agency, you will need history of your process and what changes occurred in your congregation.
- ✚ Use the simple form, Satisfaction Survey, in Appendix D or create your own tool to get feedback on your programs.
 -

IV. Closing (10 minutes)

1. Have a member close in prayer.
2. (Optional) Form a circle and allow members to send up prayer requests. (If you ask for prayer requests, close after all prayer requests.)



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⁴Thoresen, CE and Harris MS. Spirituality and health: What's the evidence and what's needed? *Annals of Behavioral Medicine*, 2002, 24(1): 3-13.

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Appendix A

CONGREGATIONAL HEALTH MINISTRY SURVEY

This survey has four purposes:

- a) Identify the health needs and interests of members.
- b) Introduce new ideas about health and wholeness.
- c) Discern the church's present health ministries.
- d) Discover resources for any additional health ministry actions your congregation may consider.

The term "health" is used here in its broadest sense to describe the physical, emotional, spiritual, and social well-being of a person or institution. "Health care" here means all the ways we promote and develop good health. "Medical care" refers to the ways we treat illness.

Using this broader view of health, please answer the following questions. You do not need to sign your name. Please return the completed survey to the committee or person collecting the results for the whole congregation.

1. What health and medical problems do you have, or do you know of in your family, congregation, and community? (Please check all that apply.)

Individual and Family

- Can't afford medical care
- Problems with stress
- Persons ill at home
- Substance abuse problems
- Problems with sexuality
- Under/uninsured persons
- Poor health habits
- Loneliness, isolation
- Grief and/or loss
- Physical/emotional abuse or neglect
- Problems in relationships with others
- Barriers to raising healthy children
- Need for spiritual renewal and focus
- Chronic illness or disability
- Primary caregiver for another person
- Need for personal counseling
- Financial problems
- Legal issues
- Housing problems
- Job problems
- End of life issues
- Other

Please list: _____



Community

- ___ Too few doctors/hospitals
- ___ Hard to get to medical services
- ___ Inadequate health promotion/illness prevention programs
- ___ Lack some medical services
- Please list: _____
- ___ High infant mortality rate
- ___ Substandard housing or homeless
- ___ Lack of accountability for health/medical services
- ___ Environmental health risk (examples: water or air pollution, toxic disposal)
- ___ Other
- Please list: _____

2. In your congregation's meetings, classes, worship, and sermons, about how often do you hear or talk about each of the following from a faith perspective? Please check all that apply.

- ___ Physical health
- ___ Emotional/mental health
- ___ Social/relational health
- ___ Medical care issues

3. How much interest do you and your congregation have in learning more and taking some active steps to improve health at each of these levels? Please check all that apply.

Myself	A Lot of Interest	Some Interest	No Interest
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Individual health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Congregational health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health in our community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Congregation	A Lot of Interest	Some Interest	No Interest
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Individual health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Congregational health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health in our community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



4. How much interest is there in learning more and taking active steps to improve medical care at the same levels? Please rate each as (1) little interest, (2) some interest, or (3) high interest.

Myself	A Lot of Interest	Some Interest	No Interest
Individual medical issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family medical issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health issues in our congregation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health issues in our community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Congregation	A Lot of Interest	Some Interest	No Interest
Individual medical issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family medical issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health issues in our congregation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health issues in our community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Are there any specific health related activities you would like to see? (Please check all that apply, add others if needed)

	Now	Future
Observe Health Awareness Week	___	___
Observe an annual Health Care Sabbath	___	___
Health Risk Appraisal	___	___
Health Fair	___	___
Exercise program	___	___
Weight control program	___	___
Smoking cessation program	___	___
Illness/disability support groups	___	___
Alcohol/substance abuse support groups	___	___
Optional healthy snacks at meetings	___	___
Parish Nurse/Minister of Health	___	___
Study groups on health issues	___	___
Services of prayer and healing	___	___
Support for persons with mental illness	___	___
Stress management classes	___	___
Illness Screening: high blood pressure, diabetes...	___	___
Ministry to persons with or affected by HIV/AIDS	___	___
Education for youth about HIV/AIDS	___	___
Other: _____	___	___



Do you need additional information concerning specific health/medical topics or issues? Please list below. If you would like special assistance for yourself, a family member, or your congregation, please write below:

Please Return the Completed Survey to:

Person or Committee

(Adapted from the Presbyterian USA Church <http://www.pcusa.org/health/usa/survey.htm>.)



Appendix B

(Your Church Name) COVENANT

I, a member of _____, enter into a Covenant as a member of the Health Team for the purpose of creating/maintaining a congregation that lives life. . . abundantly. I recognize that our bodies are the temple of God and that part of the work of the church is to take care of our temples.

My commitment is as follows:

- ♥ To complete the Power in the Pews: Having a Heart for Health training as a foundation for our health ministry.

- ♥ To lead a health event or provide health information within 90 days of the Power in the Pews training.

- ♥ To exchange health information that will empower, enrich, and improve the health and well-being of our congregation, to evaluate programs, and to celebrate successes with our congregation.

- ♥ To take care of my own health as I work to make our congregation more healthy physically, mentally, and spiritually.

Date _____ Signed: _____
Pastor

Date _____ Signed: _____
Congregational Health Team member

Beloved, I pray that all may go well with you and that you may be in good health, just as it is with your soul. 3 John 2. NRSV



Appendix C

Tips for Your Health Ministry

Select one or more of these ideas and begin within 90 days of your training event. At the end of the 90 days use the Satisfaction Survey, an evaluation, (Appendix D) to find out how your congregational members felt about the health event.

Please add items to this list as you learn what works in your congregation. Use this list as a way of keeping track of what activities your Health Team has completed.

Date Completed

- Share idea with the clergy for approval
- Survey the congregation
- Keep the survey short, simple and anonymous
- Plan short exercise classes
- Donate fitness equipment to church
- Exchange healthy recipes
- Design health program around Bible study
- Support and encourage one another
- Suggest members try the buddy system
- Schedule fitness events for youth
- Plan health event with neighboring church
- Include healthy tips in bulletin
- Create a bulletin board with photos and success stories
- Motivate members with health tips during announcements
- Schedule a walk around the church parking lot
- Plan health programs along with other special church events
- Track program's success with Satisfaction Survey or other evaluation.
- Discuss program's strengths and next steps using survey results
- Discuss opportunities for improvement
- Get feedback from the congregation
- Recognize successes at a reception with healthy food choices
- Celebrate success!
- Plan next event!



Appendix D

Evaluation of Program

A Satisfaction Survey

This evaluation is created to show how the health ministry programs have made a difference in the lives of the faithful. It is a tool to measure small changes!! (Revise according to your event.)

1. Is this your first Health Ministry event? Circle one: Yes No

If "No" name the other events you attended:

2. Please fill in the blanks:

- a. I came today because _____.
- b. I will come back because _____.
- c. This program was (circle one) okay good super
- d. I enjoyed the _____.
- e. I would like more information on: _____.

3. I already know I should: (please circle all that apply):

- a. Eat 3-5 (min) servings of fruits and vegetables; Reduce fat; Drink more water.
- b. Exercise for 30 minutes, 2-3 times a week.
- c. Stop smoking.
- d. Get regular screenings--Ex: diabetes, breast/prostate cancer, high blood pressure, etc.
- e. _____

4. I want to learn how I can:

- a. Start exercising or Exercise more.
- b. Drink more water daily
- c. Eat five servings of fruits and vegetables every day
- d. Stop smoking
- e. _____

5. At the end of (give a time period—ex: 6 months) I want to be able to:

- a. Buy an outfit two sizes smaller.
- b. Walk up two flights of stairs without being out of breath.
- c. Eat 5-6 servings of fruits and vegetables every day.
- d. Take less medication.
- e. _____

6. I will increase my (select as many options that apply) each day until I reach my goal:

- a. Glasses of water
- b. Steps on my pedometer/Exercise time
- c. Numbers and types of vegetables I eat
- d. Days without smoking
- e. _____



Power in the Pews DVD Survey

1. Over a 30 day period how many people were shown the DVD?
 - ♥ 2-10
 - ♥ 10-25
 - ♥ 25-75
 - ♥ 75-100
 - ♥ Over 100

2. What was the reason for showing the DVD?
 - ♥ To a pastor
 - ♥ To a health team meeting/ church leaders
 - ♥ To train a congregational health team
 - ♥ For health educators
 - ♥ Other _____

3. Did you get the response intended for your group?
 - ♥ Yes, why
 - ♥ No, why not

4. Was the Leader's Guide helpful?
 - ♥ Yes, it was easy to follow
 - ♥ Yes, though I had to supplement or revise
 - ♥ No, it is confusing
 - ♥ No --please say why _____
 - ♥ Other _____

5. What other resources or technical assistance would be helpful?
Please list: