Mississippi Faith-Based Health and Wellness Initiatives

The Brown (Baptist Church) Health Awareness Ministry is comprised of lay individuals and health professionals. This same ministry supports the E.R.T. (Emergency Response Team) that functions as the first line of response to health and safety issues within Brown. The mission of the Health Awareness Ministry is to A.I.M. (Advocate, Inform and Motivate) our congregants and community to lead healthy lives through education and awareness.

Delta Alliance for Congregational Health (DACH) is a consortium of congregations in the Mississippi Delta that support and promote the institution of health ministries in the faith setting. For more information, contact Vanessa Hodges at (662) 455-1344 or e-mail vanessa.hodges@msdh.state.ms.us.

Healthy Congregations (North MS) was a multi-denominational coalition of faith leaders in Northwest Mississippi to train, recognize, and empower faith leaders and lay people as advocates for Healthier Communities sponsored by Get A Life! an initiative of the Community Foundation of Northwest Mississippi to prevent childhood obesity: www.kidsgetalife.org. It was originally supported by the Robert Wood Johnson Foundation. It’s now integrated into the Mississippi Faith-Based Health and Wellness Network.

The mission of the North Central AHEC is to increase the accessibility and availability of quality health care to medically underserved populations and seeks to optimize the awareness and prevention of disease and to promote healthy outcomes for the residents of Coahoma,Quitman,Tunica,Desoto,Tate,Marshall, Panola,Lafayette,Yalobusha,Calhoun,Grenada,Montgomery, Webster, and Choctaw Counties. For more information, call (662) 624-4292

One Mississippi National Baptist Unity Conference is a collaborative effort of the six Mississippi National Baptist Congresses of Christian Education having health and wellness as one of its major initiatives. For more information, go to www.midsouthchurches.org/unity_conference.

Southern Remedy is Mississippi Public Broadcasting’s flagship wellness show. It consists of a weekly radio program hosted by Dr. Rick deShazo and MPB’s Kevin Farrell and a quarterly television program, Southern Remedy: Mississippi’s Big Problem. To email Southern Remedy, southernremedy@mpbonline.org.

3. What does the customer value? This is answered by determining what they value. Sometimes, volunteers in a church ministry may focus on “their” likes leading to activities that make them happy but fail to satisfy those needing to be reached. The simplest way to determine what your customers value is by asking them directly. Use a survey form to determine what your customer values. For example, they all may want to live healthier but some might want to participate in many outdoor activities while others would prefer indoor.

Questions to answer:
† How can you hear the voice of the customer?
† What does your organization think the customer values?
† What does the customer really value? How do you know this?

4. What are our results? People want to see some results of their efforts. In ministry, results are never quantitative only – what we can count, but are also qualitative – how we and those we help feel about the results. Use a reporting form for quantifying your CHM’s health and wellness activities – how many were helped, how many pounds were lost, and so on. Yet, use separate sheets to capture both positive and negative comments about these activities. Sometimes, these comments may lead to improvement of services offered or insights into what your customers’ value.

Questions to answer:
† How does our ministry define success?
† How will we set measurable goals and monitor our performance during the planning period?

5. What is our plan? Your CHM will not be effective without a written strategic plan. When your plan is completed, don’t put it on a shelf. Make copies. Put it in notebooks for ministry volunteers. Make it a working guide for your ministry efforts.

Questions to answer:
† How effective is our plan? (getting results)
† How efficient is our plan? (using an optimal number of resources)

Congregational Health Ministry Assessment Process

How do you know whether your congregational health ministry (CHM) is effective? To measure effectiveness, health ministry should undertake periodic assessment. There are numerous assessment models. Yet, the best models are the simplest. So, we have adapted Peter Drucker’s five question model for organizational assessment. We assume that your CHM has completed a strategic plan.

1. What is our mission?
2. Who is our customer?
3. What does the customer value?
4. What are our results?
5. What is our plan?

1. What is our mission? Every organization should have vision and mission statements. A vision statement tells what the organization will be when it reaches maturity; what is the ultimate aim of the organization. An example of a vision statement is “we will become the largest full-service grocery store in North Mississippi.”

The mission statement tells how the organization will achieve its vision; it narrows the focus of the vision. A mission statement for the grocer could be “we will become the largest full-service grocery store in North Mississippi) through providing quality products and services at reasonable prices.”

† How have we furthered our mission?
† What changes, modifications, or things should we not do going forward?

2. Who is our customer? No, your CHM is not trying to sell products or services for money! Rather, you’re trying to “sell” the idea of healthier living through education and example. You have two sets of customers: those in the church and those in the geographic community surrounding the church. As part of the implementation process, you should have performed a congregational health and wellness assessment to determine the specific needs of your congregation. This process should be completed externally if your CHM wishes to minister to the community at large.

† How are our customers changing?
† Are there new customers we must satisfy to achieve the results?
Mississippi Faith-Based Health and Wellness Network
www.healthycongregationsms.org

Who Are We?
We are a collaborative effort captained by faith partners joined by medical professionals, health related organizations, and concerned citizens united to make Mississippi a healthier place to live, work, and play. Go to www.healthycongregationsms.org for a complete list of collaborators.

What We Do?
Health Ministry Training Continuum. Promote a continuum of faith-centered health and wellness training from novice to health professional including certified health ministry ambassador (CHMA), health ministry advocate (HMA), community health advocate (CHA), faith community nurse (FCN), and congregational health leader (CHL) designations.

Annual Congregational Health Guide. Distribute annual congregational health and wellness guide featuring one or more monthly health and wellness focal areas and resources for implementation, helpful hints, and spiritual enlightenment.

Healthy Vacation Bible Schools (VBS). Provide health and wellness addendum to existing VBS curriculum.

Healthy Fellowship Meals. Encourage healthy menu choices in congregational fellowship meals.

Congregational/Community Gardens. Promote local congregational and community garden projects to improve access to fresh locally grown produce.

Annual Conference. Each year, the Mississippi Faith-Based Health and Wellness Network hosts a comprehensive state-wide multi-denominational conference. Conference workshops and activities integrate health and wellness into the ministry of local congregations to achieve better health outcomes.

Action Step 5
Consider strategies to set minimum play space, physical equipment, and duration of play in preschool, after-school, and child care programs.

Child-care facilities provide a valuable opportunity to promote healthy eating and physical activity behaviors in children. Communities can create policies that require new childcare facilities have adequate space for physical activity.

Recommended by: Institute of Medicine (IOM) Report: Local Government Actions to Prevent Childhood Obesity

For more information: Healthy Eating Research: Promoting Good Nutrition and Physical Activity in Child-Care Settings

Action Step 6
Create and promote youth athletic leagues and increase access to fields with special emphasis on income and gender equity.

Children and adults alike benefit from programs and facilities that promote active play and recreation. Communities can make concerted efforts to promote affordable athletic leagues for all ages regardless of gender.

Recommended by: Institute of Medicine (IOM) Report: Local Government Actions to Prevent Childhood Obesity

Scroll back to the top

Action Step 4
Improve opportunities for safe physical activity for pedestrians and bicyclists

Research suggests that children in neighborhoods with sidewalks and controlled intersections were more physically active than those children in neighborhoods with road hazards and unsafe intersections. Studies also indicate that simply adding and improving bicycle lanes, traffic signals, sidewalks and crosswalks can increase the number of children walking or bicycling to school and/or getting recreational physical activity. In order to increase opportunities for safe physical activity for pedestrians and bicyclists, communities can:

- Enhance traffic safety by planning, building, and/or retrofitting streets to reduce vehicle speeds, accommodate bicyclists, and improve walking environment (e.g. complete streets, separate bike lines, raised medians, streetscaping, well timed traffic lights and street lights);
- Expand trails and connections;
- Plan, build, and maintain a network of sidewalks and street crossings that connect schools, parks, and other destinations;
- Improve access to bicycles, helmets, and related equipment for lower income families through subsidies or repair programs.

Recommended by:
- Centers for Disease Control and Prevention (CDC)
- Institute of Medicine (IOM) Report: Local Government Actions to Prevent Childhood Obesity
- Robert Wood Johnson Foundation (RWJF)

For more information:
- National Complete Streets Coalition
- Rails To Trails Conservancy: Trail Building Toolbox
- Prevention Institute, Policy Link, and Convergence Partnership: The Transportation Prescription: Bold new ideas for healthy, equitable, transportation reform in America
- Active Living by Community Design
- Example: Columbia, MO: Get About Columbia

Example: Chicago, IL: Active Transportation Alliance

The Congregational Health Network

The Congregational Health Network (CHN) is part of Methodist LeBonheur Healthcare’s (MLH), a large, faith-based, religious hospital system comprising 7 hospitals, 1000 beds and 47% of patient market share in the Memphis area. The CHN is a covenant relationship between Methodist Le Bonheur Healthcare hospitals, Mid-South congregations, and community health organizations. The CHN provides a network of more than 300 congregations (the long-term goal is 400) and faith communities that are partnering with us to share the ministry of caring for our patients—helping people navigate the journey from home to medical care and back.

The goal of this program is to more intentionally build stronger relationships and bridges between local faith communities and Methodist Le Bonheur Healthcare (MLH) in order to improve the patient journey through the MLH system and more broadly to build healthier communities in Memphis, Tennessee, and the Mid-South.

Our research confirms that these assets certainly do exist. But, they need to be aligned and strengthened, which is an innovative work of faith and science. What is unique about this approach, is that the congregation becomes a part of the quality care team, not an afterthought or stopgap. We are blending the complementary strengths of congregation and hospital in a tightly woven network of care.

It is a human bridge connecting the professional care system (including the hospital) with the natural caring system of family, neighbors and especially congregations. Newly created, full-time navigators at each adult hospital and hundreds of unpaid liaisons in participating congregations complete the equation.

- Navigators: Employed by Methodist Le Bonheur Healthcare, “community case workers” responsible for improving connectional relationships between MLH and the community by providing a continuity of care between the hospitals and area congregations
- Liaisons: Volunteer community health workers and representatives of the local faith communities
The Congregational Health Network provides the following:
- Development and maintenance of a social system (including congregations, volunteers, MLH and partners);
- Implementation of covenant relationships (including value-added incentives);
- In-hospital support and accompaniment;
- Community health promotion;
- Micro-grants to congregations and community partners to support health-promoting work and networking;
- Mapping and leveraging of religious health assets in Memphis;
- Building practical interfaith collaboration; and
- Training and education of congregations and liaisons (e.g. in community care, hospital visitation, aftercare training, end of life care, mental health first aid).

Training and Education
The Center of Excellence in Faith and Health is an engine of training and education for congregations, religious leaders, communities, health professionals, community health workers, seminary and public health students, and Methodist Le Bonheur Healthcare Associates.

Training Programs
**Congregational Health Network:** Training sessions for liaisons, clergy and the general public are seven week courses offered on Thursday evenings from 6:00 - 8:00 p.m. at the Methodist University Hospital. These offerings are an integrated blend of “church” and education that are designed to enhance caregiving and skills to build capacity across our volunteer staff in the community (those who compassionately do the work for “love,” not money).

**Hospital Visitation:** Designed to help clergy and congregational members function comfortably while visiting patients within the hospital context and providing basic pastoral care.

**Care for the Dying:** Provides lay people with basic understanding of the natural dying process, as well as spiritual, emotional, and mental aspects of life at the end-of-life. Also, this includes hospice education and ways to negotiate the legal and medical system when a loved one is transitioning.

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**Action Step 3**

Adopt community policing strategies to improve safety and security of community especially areas where children can be physically active.

Communities should explore a variety of community policing strategies such as increased police presence and neighborhood watch. In addition, they should consider changes to the infrastructure. For example, they can ensure safe, attractive walking environments by providing appropriate lighting, properly groomed landscaping, building design features that promote eyes on the street (such as front porches and active storefronts with windows overlooking sidewalks), and pedestrian-friendly sidewalks and streets.

**Recommended by:**
- AAP Policy: The Built Environment: Designing Communities to Promote Physical Activity in Children
- Centers for Disease Control and Prevention (CDC): Recommended Community Strategies and Measurements to Prevent Obesity in the United States
- Institute of Medicine Report (IOM): Local Government Actions to Prevent Childhood Obesity

**For more information:**
- Local Government Commission Center for Livable Communities: Land Use Planning for Safe Crime Free Neighborhoods
- Active Living by Community Design
- Active Living Resource Center
- Example: Somerville, MA: Shape Up Somerville

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Page 3 2012 Congregational Health Guide
**Action Step 2**

Improve access to recreational facilities by establishing joint-use agreements, partnering with centers to extend hours, providing public transportation, and exploring incentives to promote affordable and free physical activity opportunities.

School and local government officials can develop joint-use agreements that allow community members to use school-owned recreation facilities during non-school hours. In turn, communities can offer facilities to schools, such as swimming pools. In addition, communities can partner with private recreational centers (gyms, dance studios, churches with gym facilities, etc) to encourage extended hours and discounted rates or occasional free classes for children and families.

**Recommended by:**

- AAP Policy: *The Built Environment: Designing Communities to Promote Physical Activity in Children*
- Centers for Disease Control and Prevention (CDC): *Recommended Community Strategies and Measurements to Prevent Obesity in the United States*
- Institute of Medicine Report (IOM): *Local Government Actions to Prevent Childhood Obesity*

**For more information:**

- National Policy and Legal Analysis Network to Prevent Childhood Obesity (NPLAN): *Joint-Use Agreement Resources*

**Regional Success Story:**
The City of Hernando Parks and Recreation Department has used joint use agreements with the local school board to leverage more opportunities for youth to have safe, accessible places for physical activity. For more information go to [www.hernandoparks.org](http://www.hernandoparks.org) or call (662) 429-2688.

**Mental Health First Aid:** Tailored to the Mid-South culture, helps lay people understand the basics of mental health disorders (depressive disorders, anxiety disorders, thought disorders, substance abuse, self-mutilation, eating disorders), as well as to “triage” those with these issues to traditional mental health services safely and effectively.

**Hands on Caregiving:** A course designed to provide lay people with practical knowledge of how to care for patients after they return home especially for those who have experienced strokes, heart attacks or other debilitating illnesses. Information presented includes sessions on nutrition, moving or transporting those who are frail or elderly, medication issues, navigating the medical system for homecare, and issues around communicating with medical personnel.

**Contact Us:**
Rev. Bobby Baker, Director of Faith and Community Partnerships; Methodist Le Bonheur Healthcare 901.516.8477, Email: bobby.baker@mlh.org

**Navigators**
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- North Hospital, Sheilah Easterling-Smith - 901.516.5617, Email: sheilah.easterling@mlh.org
- Germantown Hospital, Russell Belisle 901.516.6191, Email: russell.belisle@mlh.org
- International, Rafael Miranda - 901.516.8636, Email: rafael.miranda@mlh.org
The Center for Faith-based and Neighborhood Partnerships

The Center for Faith-based and Neighborhood Partnerships leads the U.S. Department of Health and Human Services efforts to build and support partnerships with faith-based and community organizations in order to better serve individuals, families and communities in need. Several of the Partnership Center’s key initiatives are described below.

The Affordable Care Act and Your Community. The Partnership Center helps provide information, tools and materials to help you understand and share with others what the Affordable Care Act means for your community including the most vulnerable and those most in need of health care.

Let’s Move Faith and Communities: Working Together to End Childhood Obesity within a Generation. Let’s Move Faith and Communities focuses on ways organizations can participate, and includes a toolkit to support action and highlights exciting challenge opportunities. Please consider joining Let’s Move Faith and Communities as congregations and organizations around the country get active to meet one or more of these challenges from the First Lady:

- Walk a total of three million miles
- Complete 500,000 Presidential Active Lifestyle Awards (PALAs) or establish new exercise programs
- Host 10,000 community gardens, farmers markets, or other fresh food access points
- Host 1,000 new Summer Food Service Program sites

Join the President’s Fatherhood and Mentoring Initiative. Being a dad is one of the most important jobs any man can have. As the father of two young girls and someone who grew up without his dad in the home, President Obama knows firsthand the power of a father’s presence in the lives of his children – and the holes dads leave when they are absent. Join the Presidents’ Fatherhood Initiative by signing up at: www.fatherhood.gov/initiative.

For more information, go to www.hhs.gov/partnerships

Action Step 1
Build, maintain, and enhance infrastructure for opportunities for safe indoor and outdoor physical activity.

Children are less likely to engage in recreational physical activity if parks or playgrounds are unavailable, in disrepair, or are not accessible by safe routes. Communities should make it a priority that there are safe and developmentally appropriate physical activity opportunities for all children (e.g. playgrounds, parks, community pools, etc).

Efforts should be made to regularly maintain these sites and keep them safe (e.g. ensure appropriate lighting, landscaping, equipment is in good repair, adequate policing, etc). In many communities, there are opportunities to utilize vacant land/lots, or rehabilitate blighted areas.

Recommended by:
- Centers for Disease Control and Prevention (CDC)
- Institute of Medicine (IOM)
- Robert Wood Johnson Foundation (RWJF)

For more information:
- The Trust for Public Land: The Excellent City Park System
- US Department of Housing and Urban Development: Community Development Block Grant Program
- Rails to Trails Conservancy: Trail Building Toolbox
- Example: Miami Dade County Parks and Recreation Department: Master Plan for Parks and Open Space
- Example: Somerville, MA: Shape Up Somerville
Healthy Living Policy Change 2012: Increased Access to Safe and Attractive Places for Physical Activity

Promoting health and wellness in our communities is just a first step. We must go beyond conversation to advocating policy change. The American Academy of Pediatrics has developed the Policy Opportunities Tool to consolidate various policy statements. This matrix “is designed to showcase the various policy strategies that support healthy active living for children and families.” E-mail info@midsouthchurches.org for a copy of the complete matrix.

Each year the Congregational Health Guide will focus on one aspect of healthy living policy change. This year’s guide focuses on increased access to safe and attractive places for physical activity. Action steps to increase access to safe and attractive places for physical activity include:

1. Build, maintain, and enhance infrastructure for opportunities for safe indoor and outdoor physical activity.
2. Improve access to recreational facilities by establishing joint-use agreements, partnering with centers to extend hours, providing public transportation, and exploring incentives to promote affordable and free physical activity opportunities.
3. Adopt community policing strategies to improve safety and security of community especially areas where children can be physically active.
4. Improve opportunities for safe physical activity for pedestrians and bicyclists.
5. Consider strategies to set minimum play space, physical equipment, and duration of play in preschool, after-school, and child care programs.
6. Create and promote youth athletic leagues and increase access to fields with special emphasis on income and gender equity.

On the following pages, we present policy opportunities for increasing access to healthy food based on these six objectives. Go to http://www.aap.org/obesity/matrix_1.html for access to links for helpful resources.

2012 Suggested Monthly Health and Wellness Observances

On pages 6-12, we share suggested monthly health and wellness observances. Remember that congregational health ministries do not practice medicine or provide medical care, but educate and empower. The goal of congregational health ministries’ is facilitating access to accurate information and finding a voice to address disparities. Bringing a specific health issue to the forefront each month throughout the year is one way to ensure coverage of a wide range of health topics of interest and concern to your congregation.

For nearly ten years, congregations have used this listing to promote healthier lifestyles. What should ministry members do?

☐ Ask God for guidance and His blessing.
☐ Gain the blessing of your congregation’s leader.
☐ Follow the monthly guide of health observances.
☐ Make brochures, handouts, and worship bulletin inserts.
☐ Make announcements early and often each month.
☐ Involve other congregation members, neighbors, and co-workers.
☐ Take pictures; keep a scrapbook.
☐ CREATE EXCITEMENT!!!

Brief information is given for each observance. For more information and helpful web links, go to the monthly health observances section of the regional health and wellness webpage: www.healthycongregationsms.org.

JANUARY
National Volunteer Blood Donor Month
Sponsor a “Post-Holiday Blood Drive” at your church in partnership with your local blood donation center.

National Glaucoma Awareness Month
More than 2.2 million Americans age 40 and older suffer from glaucoma. Nearly half do not know they have the disease—it causes no early symptoms. Prevent Blindness America will provide insightful information about this “Sneak Thief of Sight.”
FEBRUARY
Heart Disease and Women. On Sunday, February 12 everyone is encouraged to wear something red to bring awareness to the number 1 killer of women – heart disease. Also, members may wish to participate in Wear Red Day – Friday, February 3.


MARCH
On World Kidney Day (March 11), the American Kidney Fund urges the public to Take Six Steps that Count to Fight Kidney Disease:
• Know your numbers
• Identify your risks for kidney disease
• Donate to help kidney patients with treatment-related expenses
• Notify your family of your wish to be an organ donor
• Eat healthy, exercise, and don’t smoke
• Your doctor is a resource—ask about your eGFR!

Taste Test Sunday (March 18) promotes healthy desserts at church functions by having desserts prepared in accordance with guidelines for diabetics. Invite the congregation to sample them after worship. Promote a contest among members to collect recipes with healthy substitutions for a “Healthy Cookbook.”

American Diabetes Association Diabetes Alert Day (March 27) is, which is held every Fourth Tuesday in March, is a one-day, “wake-up” call asking the American public to take the Diabetes Risk Test to find out if they are at risk for developing type 2 diabetes.

APRIL
Minority Health Month held annually the month of April promotes health issues especially relevant to minority communities. The 2012 emphasis is the Patient Protection and Affordable Care Act.

The World Health Day (April 7) is celebrated to create awareness of a specific health theme to highlight a priority area of concern for the World Health Organization: 2012 – Health and Aging.

Alcohol Awareness Month, held every April, brings the public information about alcohol and alcoholism as a chronic, progressive disease, fatal if untreated, and genetically predisposed.

Healthy People 2020: Update
Healthy People 2020 continues the Healthy People tradition with the launch on December 2, 2010, of its ambitious, yet achievable, 10-year agenda for improving the nation’s health. Healthy People 2020 is the result of a multiyear process that reflects input from a diverse group of individuals and organizations.

Vision: A society in which all people live long, healthy lives.

Mission: Healthy People 2020 strives to:
 o Identify nationwide health improvement priorities.
 o Increase public awareness and understanding of the determinants of health, disease, and disability and the opportunities for progress.
 o Provide measurable objectives and goals that are applicable at the national, state, and local levels.
 o Engage multiple sectors to take actions to strengthen policies and improve practices that are driven by the best available evidence and knowledge.
 o Identify critical research, evaluation, and data collection needs.

Overarching Goals
 o Attain high-quality, longer lives free of preventable disease, disability, injury, and premature death.
 o Achieve health equity, eliminate disparities, and improve the health of all groups.
 o Create social and physical environments that promote good health for all.
 o Promote quality of life, healthy development, and healthy behaviors across all life stages.

Four foundation health measures will serve as an indicator of progress towards achieving these goals:
 o General Health Status
 o Health-Related Quality of Life and Well-Being
 o Determinants of Health
 o Disparities

Liturgical (Praise) Dance: Physical Fitness and Safety

Many congregations have liturgical (praise) dance ministries. However, many don’t utilize it to introduce physical fitness and maintaining a healthy lifestyle while serving the Lord at the same time. There are some important health aspects to consider before participating in this ministry.

There are some important points regarding exercise in general:

- Seek medical advice if you have a medical condition, are pregnant, or have physical injury.
- Use exercises from a well-qualified source and follow instructions carefully.
- Work at a level that is comfortable for your body (some people are more flexible than others and can stretch further). You should only feel a gentle stretch not pain.

Before practice or performance, it is important to do warm up exercises. Muscles are more prone to injury when doing vigorous movements without doing some gentle ones first. Joints can feel stiff if they have been held in one position for many minutes. This is because synovial fluid production (the “oil” in our joints) stops when the joint is still.

Gentle stretching exercises help to increase our flexibility and range of movement. This is helpful when doing worship dance, to achieve greater expression with our body. It also reduces the risk of injury from sudden unaccustomed movements.

While dancing, all should practice safety. Ensure that participants can dance safely on the floor without slipping. Dancers should have footwear that is flat with flexible soles. Proper dance shoes (ballet or jazz) are a good idea, but it can be safe to dance with bare feet if the surface is suitable (especially on carpet). Jazz shoes are good for dance outdoors or polished floors. Try to avoid any obstructions in the dance area that dancers may trip over (like wires).

Clothing/costumes used for dance need to allow a full range of movement. Long skirts need to be just above the ankle, if too long the dancers may trip over the hems.

Make sure dancers have plenty of space to move in. Be careful that they do not accidentally hit anyone or anything, especially when using flags.

MAY

American Stroke Association American Stroke Month. African Americans have higher rates of stroke than any other racial or ethnic group. Churches are invited to conduct Power Sunday educational activities the Third Sunday in May (May 20).

The purpose of Lupus Awareness Month is to raise awareness and educate others about lupus. The Lupus Foundation of America (LFA) urges people to Band Together for Lupus™ during Lupus Awareness Month to educate others and raise awareness of lupus.

May is Skin Cancer Awareness Month, a joint venture of the American Academy of Dermatology and the American Cancer Society. New research suggests that up to 3 million Americans will be diagnosed with skin cancer in the next year.

JUNE

The First Sunday is National Cancer Survivor’s Day®, an annual, worldwide Celebration of Life. Participants unite in a symbolic event to show the world that life after a cancer diagnosis can be a reality. Recognize cancer survivors in your congregation and/or community.

Summer of Health and Wellness Vacation Bible School. Integrate the 9-5-2-1-0 health and wellness curriculum into your church’s VBS. Go to www.midsouthchurches.org/vacation_bible_school to download the 9-5-2-1-0 guide.

National CPR Week (June 3-9). In December of 2007, Congress declared the first week of June each year as National CPR/AED (automated external defibrillator) Awareness Week. The goal is to encourage states, cities and towns to establish organized programs that provide CPR and AED trainings and increase public access to AEDs.

Fireworks Safety Month (through July 4). During the months of June and July, Americans nationwide are encouraged to observe fireworks safety. While fireworks can be a cheerful reminder of warm, summertime weather, and fun times spent with family and friends outdoors, the fact remains that they are still extremely dangerous and should be used with caution and responsibility.
JULY
Fireworks Safety Month (through July 4) (See June observances.)

Juvenile Arthritis (JA) Awareness Month focuses on JA, an umbrella term used to describe the many autoimmune and inflammatory conditions that can develop in children ages 16 and younger. Approximately 294,000 children under the age of 18 are affected by pediatric arthritis and rheumatologic conditions.

AUGUST
National Immunization Awareness Month is a great way to rally local organizations in your immunization education efforts. Communities are encouraged to plan local health screenings or fairs, media events and other related immunization outreach efforts during the month to promote the benefits of immunization.

National Minority Donor Awareness Day is celebrated August 1 as a time to educate individuals on the need for minority donors and the facts surrounding organ, blood, and tissue donation.

SEPTEMBER
Prostate Cancer Awareness Month. Encourage all men over 50 to take a prostate exam. Prostate cancer is a common and very treatable when detected early!

Sickle Cell Disease Awareness Month promotes a call to conduct sickle cell awareness and education activities. Sickle Sabbath Sunday (September 16) is a national faith day to raise awareness and charitable giving within congregations for sickle cell disease.

Fruits and Veggies – More Matters Month asks Americans to remember two (2) things: fill half your plate with fruits and veggies at every eating occasion and all forms fresh, frozen, canned, dried and 100% juice count toward their daily intake! More than 90 percent of both adults and children do not eat the amount of fruits and vegetables recommended by the latest Dietary Guidelines for Americans.


Getting Youth Involved: empowerMe4Life
empowerME4Life is an 8-session healthy living course equipping kids ages 8-12 with new attitudes, skills and knowledge about eating better and moving more - for life.

Each session of empowerME4Life is grounded in the American Heart Association’s scientific recommendations and expertise in promoting heart-healthy lifestyles. The educational content and methods are aligned with the National Health Education Standards for fifth grade. empowerME4Life is based on the Alliance’s five steps kids can take to live healthier:
- Get physically active for 60 minutes each day
- Drink primarily water, 1 percent or fat free milk, and 100 percent juice with no added sugars
- Eat fruits and vegetables with EVERY meal
- Cut back on screen time and limit it to 1-2 hours a day
- Get at least 9 hours of sleep every night

Ideal for Afterschool and Community Settings
empowerME4Life is an 8-session healthy living course to equip youth ages 8-12 with new attitudes, skills and knowledge about eating better and moving more. It is designed for implementation in afterschool and community settings and to be facilitated by teens or adult allies. Each 45-minute sessions builds upon prior sessions and reinforces a variety of lifelong skills.

empowerME4Life reinforces the nutrition and physical activity objectives of health education curricula such as Coordinated Approach To Child Health (CATCH!) Kids’ Club, ReCharge™ from Action for Healthy Kids and the National Football League, as well as a host of others.

Ready to get started? Download the empowerME4Life lesson plans and facilitator guide from http://www.healthiergeneration.org/teens.aspx?id=3373. If you have questions implementing empowerME4Life, attend one of our webinars or contact us at empowerme@healthiergeneration.org.

Source: www.healthiergeneration.org/teens.aspx?id=2566
Congregational Health and Wellness Ministry Basics
Health and wellness ministries focus health promotion. Instead of asking only, "What makes people sick and how can we provide a healing ministry to save or heal them?" We need to also ask, "What keeps people well and how can we provide a whole person health ministry that will keep them that way?" We preach and teach the message of the interconnectedness of faith with health healing and wholeness to help people achieve the fullness of a life spiritually transformed.

The goals of health and wellness ministry ought:

- to improve the health of all members through an established health ministry that focuses on Trinity Wellness: wholeness for body, mind and spirit.
- to help reduce health disparities by encouraging our members to participate in early detection, education classes, disease prevention and health screening programs.
- to increase quality of life and years of healthy living by assisting our members to understand health and wellness issues.

What can this ministry do for the congregation? The Health and Wellness Ministry provides information about community healthcare resources and encourages health promotion through periodic screenings and education related to health and wellness topics. It provides an opportunity to combine the physical body and the spiritual well-being of an individual into total health care.

What are the limitations of this ministry? Members of the health and wellness ministry do not diagnose illness, prescribe or supply medicine, or perform invasive procedures, i.e. giving injections, drawing blood, changing dressings. Persons in need of these procedures are referred to appropriate providers and agencies.


OCTOBER
National Church Safety and Security Month. Congregations are asked to perform a “top down” safety and security inspection of their houses of worship and grounds including fire evacuation and tornado drills. With the blessing of your leader, involve others by contacting your insurance company, local fire department, and law enforcement agency about other tips on safety and security measures.

National Breast Cancer Awareness Month observances have been at the forefront of promoting awareness of breast cancer issues and have evolved along with the national dialogue on breast cancer.

NOVEMBER
The American Diabetes Association sponsors Diabetes Awareness Month to focus on one of the fastest growing healthcare crisis. There are approximately 75 million Americans either at risk for type 2 diabetes or who currently have diabetes.

Diabetes ID (I Decide) Day (November 11) is a national day of action and call for support. People decide to get tested. People decide to fight this disease. People everywhere—in the work place, at schools, and in organizations—are invited to participate.

Pancreatic Cancer Awareness Month highlights the work of the Pancreatic Cancer Awareness Network creating hope in a comprehensive way through research, patient support, community outreach and advocacy for a cure.

During the American Cancer Society Great American Smoke Out Thursday, November 17, congregations can promote tobacco cessation activities throughout the month in partnership with the Tobacco Free coalition in your area. Consider asking your local elected officials to adopt a “no smoking policy” in public places where you live!

DECEMBER
1 World AIDS Day is dedicated to raising awareness of the AIDS pandemic caused by the spread of HIV infection. Health Ministries are asked to wear red ribbons, provide information, and a time for quiet reflection in recognition of all those stricken with HIV/AIDS.

National Drunk and Drugged Driving (3D) Prevention Month provides opportunities to reinforce the dangers driving under the influence of alcohol or other drugs.
2012 Suggested Health and Wellness Observances
Courtesy of the Rising Sun Usher Federation

January 2012
- National Volunteer Blood Donor Month
- National Glaucoma Awareness Month

February
- American Heart Month
- Wear Red Day (2/3)
- National Black HIV/AIDS Awareness Sunday (2/5)
- National Black HIV/AIDS Awareness Day (2/7)
- Wear Red Sunday (2/12)

March
- World Kidney Day (3/11)
- “Taste Test Sunday” (Diabetic Safe Desserts) (3/18)
- 27 Diabetes Alert Day

April
- Minority Health Month: Patient Protection and Affordable Care Act
- Alcohol Awareness Month
- Thursday, April 7 World Health Day

May
- American Stroke Month
- Lupus Awareness Month
- Skin Cancer Awareness Month
- Power Sunday (5/20)

June
- Summer of Health and Wellness Vacation Bible School
- Sunday, June 3 National Cancer Survivors Day
- National CPR Week (3-9)
- Fireworks Safety Month (through 7/4)

July
- Fireworks Safety Month (through 7/4)
- Juvenile Arthritis Awareness Month

August
- National Immunization Awareness Month
- National Minority Donor Awareness Day (8/1)

September
- Prostate Cancer Awareness Month
- Sickle Cell Disease Awareness Month
- Fruits and Veggies - More Matters Month
- Sickle Cell Sabbath (9/16)
- Mississippi Faith-Based Health and Wellness Network’s Annual Conference: Southaven, MS (9/28-29)

October
- National Church Safety and Security Month
- National Breast Cancer Awareness Month

November
- American Diabetes Month
- Pancreatic Cancer Awareness Month
- Diabetes ID (I Decide) Day (11/11)
- American Cancer Society Great American Smoke Out (November 17)

December
- National Drunk & Drugged Driving (3D) Prevention Month
- World Aids Day (Thursday, December 1)

For more information and helpful web links, go to www.healthycongregationsms.org.