Exploring the Relationship Between Faith Communities and Public Health:

Foundational Partners For Creating and Sustaining Healthier **Communities**

Arkansas Public Health Program Hometown Health Improvement (HHI)

- A community-driven process that empowers local communities to take ownership of health problems and work to identify and implement solutions that improve the health of the citizens.
- Based around the local public health system that includes all public, private, and voluntary entities that contribute to the delivery of essential public health services within a county.





Goals of Arkansas Hometown HHI

- · Bringing together consumers, business leaders, health care providers, elected officials, religious leaders, and educators to identify community health problems and develop and implement ways to solve them.
- Focus on creating systems that **promote**, maintain, and improve health rather than on treating illness.
- Strategies include: tobacco-free living, active living and healthy eating.
- HHI done through policy, systems and environmental change

Public Health Challenges to Accomplishing HHI Goals

- Resource Allocation where to spend \$\$ and how much - Most \$\$ spent in Schools
- Assumption of Capacity and Willingness of Partners to Participate in HHI
 - What Level of Participation and Commitment Desired
 - Financial, Human resources (volunteer)
 - Establishing Partnerships (Are they Equal, Meaningful, & Respected Relationships?)
- Different Resource Distribution in urban vs. rural areas (Central Arkansas vs. Southeast Arkansas)
 - Impacts potential achievement of Health Goals and Outcomes
 - Zip Codes determine Health Outcomes



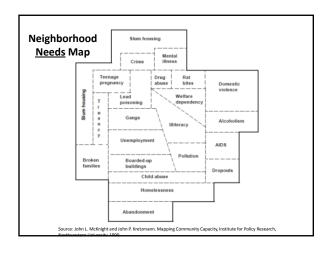
Social Determinants of Health

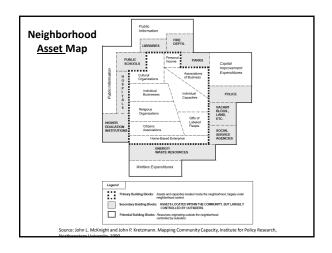


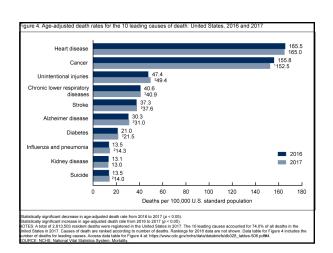
Source: PBS documentary, "Unnatural Causes - Is Inequality Making Us Sick?

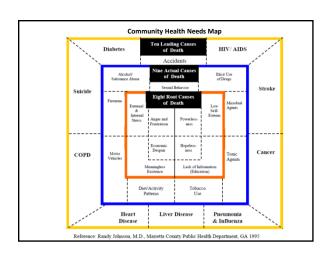
Neighborhoods

Needs and Assets









Eight Root Causes of Death

- Low self-esteem
- Anger and frustration
- Powerlessness
- Hopelessness
- External and internal stress
- Meaningless existence
- Lack of information (education)
- · Economic despair



Eight Root Causes of Death

- · Low self-esteem
- Anger and frustration
- Powerlessness
- Hopelessness

Faith Based Communities
Have a Great Impact on All of These

- External and internal stress
- · Meaningless existence
- Lack of information (education)
- · Economic despair



Faith Based Communities

Assets and Challenges

Faith Based Community Assets

- Faith Communities are in every neighborhood – rural, suburban, urban
- Desire to do good and serve the common good (including health)
- Serve hard to reach populations, including underserved populations and communities
- Faith Based Communities have long legacy and involvement in health (i.e. most modern example is with hospitals)



Faith Based Community Challenges

- Worship can be one of the most segregated days of the week
- Faith community's current understanding and definition of community and health can be limited
 - Serve my own congregation and/or broader community
 - Limited understanding of the relationship between faith and health
- Faith community's lack of understanding the language and culture of other sectors (public health, hospitals, government)
- Faith communities need economic support for sustained efforts (ministries), including health



Other Key Elements in Understanding Faith Communities & Their Culture

- Pastor plays a key role in determining congregation's focus and priorities, including health
- Faith leader education and preparation on health varies
 - Degree (seminary) or street pastor
 - Most are not educated or prepared to address health broadly
 - How equipped faith leaders are in properly addressing particular health issues is important (i.e. mental health)
- Faith communities need basic education and preparation around health



Wesley Theological Seminary Community Engagement Institute @ Wesley Theological Seminary Downtown Washington, DC Wesley Theological Seminary Main Campus - NW, Washington, DC near American University



Mission of Heal The Sick program



Prepare leaders to advance whole person health and well-being of individuals, communities, and congregations, especially those who are underserved.



The Need for Faith and Health Education Among Multi-Sectors

- Growing scarcity of money and resources to fulfill individual missions.
- Increasing desire and consciousness by groups that they can better meet their mission by working with others.
- Individual sectors cannot address or improve adequately health disparities on their own.
- Moving faith communities beyond their physical walls, faith into action



Challenges to Reaching Optimal Health

- Shaped by numerous social determinants, gainful employment, affordable housing, access to healthy, fresh food, etc., which are beyond the control of any one group.
- There is often a lack of awareness of culture, language, and motivations within and between the groups.



Needed Components for Different Sectors Engaging in Collaborative, Community Health

- Basic, Foundational Education for Congregations, Faith Leaders, and Sector Partners
- Building Trusting Relationships & Local Networks



Basic, Foundational Education for Congregations, Faith, & Sector Leaders

Health education and preparation:

- "Whole person" health approach needed
- Explore understanding of personal and communal faith and health beliefs and language
- Helps one learn about different systems, structures, and cultures of different sectors (one's faith, other faiths, public health, hospitals, etc.),
- Helps one understand current sub-cultures (what is impacting a particular group right now)



Building Networks

- Need for sustained relationships in and between congregations and partners
- Networks help partners understand each other's evolving needs and challenges
 - Crisis and Reactionary vs. Prevention and Preparedness
- Opportunities for mutual ongoing learning and sharing of resources
- Networks foster trust so that together all can build healthier communities
- Relationships move at the speed of trust



Wesley Theological Seminary's **Health Minister Certificate**

- · 22 contact hour educational program offered by the seminary's Heal the Sick program
- Equips congregations, public health workers, social workers, hospital employees, government workers, and others with foundational language, skills, and knowledge in faith and health; including personal and communal asset mapping skills
- The curriculum is based on national best practices for health ministry from the Health Ministries Association, a national faith and health organization; the curriculum is reviewed annually and updated.
- The certificate learning format can be online (10 weeks) or in person (usually over two weekends), hybrid (new).



Health Minister Certificate - Results and Findings -

- 110 Health Ministers trained in-person over 3 years (2014-2017 from Baltimore, MD to Newport News, VA)
 180+ people trained online (Jan. 2017 till April 2019)
- Uses Pre & Post Training Evaluation Surveys to note changes in knowledge, skills, and attitude
- Based on surveys, most popular learning modules
 - Active listening
 - · Spiritual Practices Mindfulness, Theological reflection,





Certificate Funding from Government, Public Health, Faith Based, Healthcare, & **Foundations**

- Support & investment helps train and equip local faith and health collaborators
- Heal the Sick offers Certificate Scholarships with its partners to make education affordable
- · Scholarship funding helps sustain Heal the Sick program and mission



HTS Program Results Since Inception of Program

- 12 Congregational Interviews over 2 years— assisted us in grounding our understanding contemporary challenges/opportunities/landscape in congregations
- **Numerous Tools Created**
 - Common Health Ministry Models
 - Congregational Readiness Survey for Health Ministry
- Next steps:
 - Pilot Health Minister Facilitator Training for Hybrid Health Minister Certificate
 - Develop local leadership in local communities to sustain health ministry efforts (possible partnerships - public health, hospitals, congregations, etc.)



Key success factors

- Ongoing Relationships & Trust is important on all levels
- · Know your own assets as well as your partners' assets
- · Seek out strategic, collaborative partners who respect each other and share a mutual desire for long term success and share similar goal, mission, and vision
- Need Formal Commitments (staff, resources, partner agreements) from high level institutional leadership to front line people in ministry & work
- Support 'Boundary Leaders' (Clergy/Lay as Health Ministers & Faith Community Nurses) in this new health and healing environment



Contact Information

Tom Pruski RN, MAPS Heal the Sick Program Community Engagement Institute @ Wesley Theological Seminary 900 Massachusetts Avenue, NW Washington, DC 20001

Phone: 202-706-6843 www.wesleyhts.org www.wesleyseminary.edu

