

Acute need: Medical-religious partnerships

by [W. Daniel Hale](#) in the [October 17, 2001](#) issue

Pastor Jeff Sumner was attending a health screening program led by members of his church when he learned that his blood sugar level was unusually high. Until then, it had not occurred to him that some of the physical changes he was experiencing were symptoms of diabetes. When subsequent testing confirmed that he had type II diabetes, Sumner was able to control the disease with the help of family, parishioners and classes at the hospital.

The health program is part of a new alliance forged between churches and hospitals, an alliance that is delivering valuable medical information and resources to people in their communities. Florida Hospital in metropolitan Orlando and Halifax Medical Center in Daytona Beach are working closely with clergy and lay leaders from dozens of congregations.

The programs started when faculty from Stetson University and administrators and physicians from Halifax Medical Center contacted clergy and offered to provide training and support for a health ministry for members of their congregations. Representatives from 11 congregations—including African Methodist Episcopal, Baptist, Catholic, Lutheran, Methodist and Presbyterian churches and a Jewish synagogue—attended the first set of classes in 1994.

This initial program, designed to train educators, brought together physicians, psychologists, nurses, pharmacists and 25 volunteers. In 16 hours of classes over an eight-week period, participants learned about the prevention, management and treatment of coronary heart disease, hypertension, cancer, diabetes, depression and dementia; they studied medication management, accident and fall prevention, influenza and pneumonia vaccinations, and advance directives. They learned how to use community resources, how to organize health education programs and screenings, and how to motivate others in prevention efforts.

These educators took their newly acquired medical information and resources and created presentations to fit the needs, traditions and values of their congregations. Health professionals served as speakers and consultants, and the presentations were reinforced by clergy who spoke on the theme of stewardship of the body or shared their own commitments to better health practices. Announcements in bulletins and congregational mailings reminded people to participate in early detection programs and follow prescribed treatment regimens. Directories listing community services announced screenings (e.g., blood pressure, diabetes, glaucoma, cholesterol) and preventive interventions (e.g., flu vaccinations) that would be available on-site and at convenient times. Programs on nutrition and health were presented at congregational dinners. Physicians met with women's groups to discuss breast cancer and with men's groups to discuss prostate cancer. Pharmacists talked about the management of multiple medications with older members. Some congregations organized walking groups and, in one community, congregations "competed" with each other in a walking contest.

Lay health educators also reached beyond their congregations. Three African-American churches in Daytona Beach organized a program on hypertension and heart disease. The cardiologist who led this program discussed risk factors and treatment options and answered questions. Nurses conducted blood pressure checks and urged those with elevated blood pressure to see their physicians.

At Mount Bethel Baptist Institutional Church in Daytona Beach, a woman listened to a presentation by physician Donald Stoner, then told others in the audience that if members of her family had known what Stoner had just said about the symptoms of a heart attack, they might have saved her father's life. Instead of seeking immediate medical care for what turned out to be a fatal heart attack, her father had gone to bed thinking he simply had indigestion. Stoner's message helped this woman and others to get back on track with their own heart-healthy diets.

Working in partnership with hospitals, churches can provide vital resources. Congregational volunteers deliver information and resources that many people would not otherwise receive. The ability of health professionals to help and heal is greatly increased through the volunteer efforts, especially through the work in minority and traditionally underserved communities.

A shift is occurring in health care—from a focus on curing acute illness to managing chronic disease. The congregation is a significant partner in promoting health and treating illness—and its potential for such a partnership is greater than ever.