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**WACO REGIONAL
BAPTIST ASSOCIATION**

About WRBA's Health Ministry – Faith Health Waco

The Waco Regional Baptist Association was formed in 1860 and is a 501c3 non-profit organization. Today, the WRBA has 97 member congregations that worship in five different languages. One of our ministries is the Church Health Ministry. The goal of this ministry is to encourage WRBA member churches and all faith communities to include a Health Ministry as an integral part of their mission to their members and their community. The WRBA's Church Health Ministry team is comprised of staff and/or volunteers of "member" churches and "non-member" churches that are passionate about wellness/health as well as "Non-Church Advisory" team members who are representatives from all health care points of contact for residents of McLennan County

On August 9, 2018, Faith Health Waco officially launched its pilot program with 23 churches and was created by the church for the church, not created by a medical/health care entity. This program was grown out of the need of the church to address the health and wellness of its members. Faith Health Waco intends to partner with the city's churches to assist them in starting or growing their own Church Health Ministry. This Church Health Ministry will support the wellness of both church members as well as community members.

Faith Health Waco is the result of research and study of the Memphis Model provided by the Center of Excellence in Faith & Health through the Methodist Le Bonheur Health Care system and the Faith Health North Carolina Model through the Division of Faith and Health Ministries of Wake Forest Baptist Health. The goal of this program is facilitating a partnership between churches/faith communities and hospitals, clinics and the health district to provide a network of support to improve the health of the Waco community. This will be known as the Good Samaritan Network.

There are many roles within the Good Samaritan Network and Faith Health Waco and more information about each specific role can be found at the Waco Regional Baptist Association's Website under the Ministry tab (<https://www.wacobaptists.org/wp-content/uploads/2018/09/Description-of-Faith-Health-Waco-for-Launch.pdf>). On the next page is a graphic organizer indicating the structure of Faith Health Waco. The role specific to churches is the Faith Health Liaison,

Faith Health Liaisons are respected members of their faith communities who will bridge the partnership between their congregation and the Good Samaritan Network. These liaisons will be trained to coordinate the needs of their members, schedule health education programming, update members of health-related classes, seminars, screenings and other events in the community, and provide support and referrals for members following an illness, hospitalization or treatment.

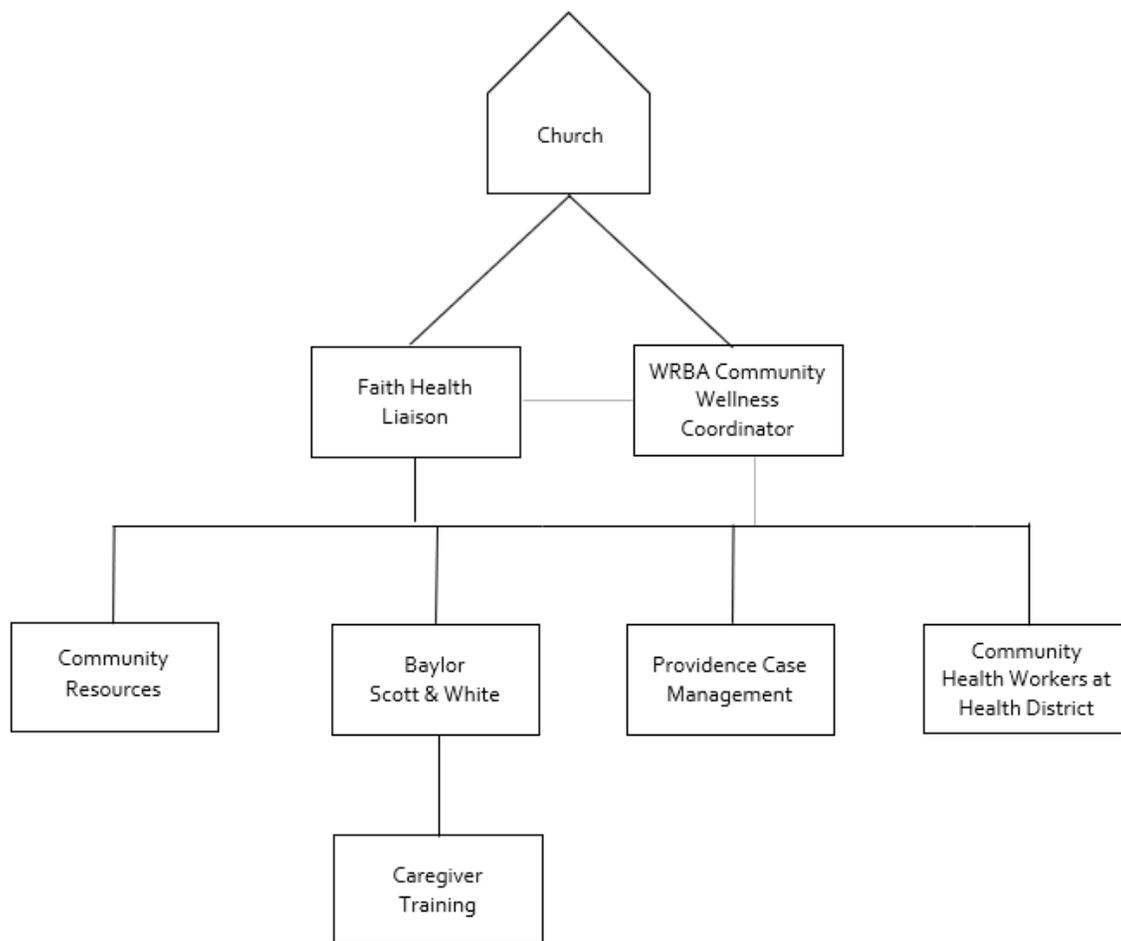


Figure 1: Faith Health Waco Structure

What is the Church's Role in Wellness?

The church is historically a place where people have sought help – spiritual, social, and even medical. In the early days, witnessing the healing of the sick and poor was considered an essential sign to members of the church and many miracles performed in the Gospels are health-related. Another example is Santa Maria della Scala in Siena, Italy, a monastery that grew into one of the earliest hospitals, serving victims of the Crusades.

Historically and empirically, the primary ministry of Jesus on earth was to preach the truth of God and speak to the almighty power and love of our Creator. The Bible tells us of times when Jesus chose to continue on his journey to other towns to preach rather than stay where He was and perform more miracles for those coming to Him. This is due to the fact that the importance of hearing and receiving the Word of God surpasses the physical acts of miracles. Throughout the New Testament, there are many examples of Jesus performing miracles, but these are merely signs and testimonials to the power of God, which can only take on meaning, if the recipient and onlookers have heard and received the Gospel.

Matthew 25:35-40 is a passage of vital importance when considering how the church plays a role in helping others. It describes the final judgement where Jesus separates the sheep from the goats and tells His sheep that they are blessed by the Father and shall inherit the kingdom prepared for them. “For I was hungry and you gave me food, I was thirsty and you gave me a drink, I was a stranger and you welcomed me, I was naked and you clothed me, I was sick and you visited me... Truly, I say to you, as you did it to one of the least of these my brothers, you did it to me.” By caring for the well-being of others and extending compassion in the way that Jesus would, we are demonstrating God's will here on earth. Furthermore, we are extending the opportunity for members of the community to come to know the Lord.

The goal of WRBA's health ministry to address wellness within congregations and provide education and resources to members, as well as providing an opportunity for people to come to the Lord. The ministry of healing is centered on Jesus caring for the wholeness of a person – body, soul and spirit – and as followers of Christ, we should be empowered by His example. Of all the miracles that Jesus performed, miracles of healing were some of the most abundant and the most magnificent. As the Creator and the Great Physician, Jesus has the power to heal those who call upon him and glorify His name. Mark 6:1-6 tells us how we must believe

in order to be healed. Based on this premise, the goal of the church is to lead followers to Christ, but also to care for the wholeness and well-being of the entire individual.

Finally, the health of individuals that make up a congregation is important not only in their ability to receive the Word, but to be servants and perform the good works with which the Lord has given them gifts for. 1 Corinthians 12 describes the Church as one body with many members and how each part is important because it carries out a function that the other parts cannot. God has crafted the body just so “that there may be no division in the body, but that the members may have the same care for one another. If one member, suffers, all suffer together, if one member is honored, all rejoice together”. Each member has their own unique talent and it should use it to build up each other and the Church, and in doing so, honor God. Individuals suffering from food insecurity lack the ability to cultivate their spiritual gifts effectively and thus the Church should support these people in order to unify the body of Christ into one that is able to reach out to the nonbelievers and show them the future that God has planned for them.

Why is a Health Ministry Necessary?

Congregations can be powerhouses of life-giving community. Churches can step up to speak to the world with God’s message of healing—beginning with the people in their own midst who badly need to hear this good news. Health ministry is not about filling the pews with doctors and nurses. The roots are not in science and medicine but in being faithful to the gospel’s call.

Health means wellness in body and spirit, it is not just the absence of disease. Even when we fail miserably in the ways we treat our bodies, God comes to us and transforms us. This good news is a wide open opportunity for people of God to live out what we read in the Bible and believe in our minds.

Congregational health ministry is an opportunity for individual members and the faith community as a whole to encounter the good news through a whole-life lens. Scripture teaches us that God created us as body-and-spirit beings right from the start. Genesis 2:7 reminds us the Lord “formed man from the dust of the ground” (body) and breathed into his nostrils the breath of life” (spirit). Throughout the Bible, we read of God’s care for both physical and spiritual needs—usually at the same time. The call of Scripture is that we are whole people not divided between, but rather united by, body and spirit.

Health ministry is a lived faith intimately connected to the core of what Jesus did. When Jesus sent his first followers out to do the work he had prepared them for, he sent them to “proclaim the kingdom of God and to heal” (Luke 9:2). As people who follow Jesus now, we are called to do the same. The gospel message calls people to God both in body and spirit to experience whole and abundant lives. Health ministry helps people find places to belong in the faith community and feel less alone with the impossibilities they face. Community removes hopelessness—about weight, disease, faith crisis, relationships or any other aspect of life that gets in the way of positive choices. It is embracing the goodness and richness of the life God gives.

The Bible uses the word *shalom* to show us God’s vision for what our lives can be. The biblical concept of *shalom* is a powerful argument that God cares about the well-being of people. The word appears in the Old testament more than 250 times and describes not only a spiritual connection to God, but a life connection—bodily health, contentedness, social relationships. The prophet Isaiah spoke of the Messiah to come as the Prince of Peace, the embodiment of *shalom* (Isaiah 9:6). Jesus was the fulfillment of the prophecy. Healing of body and spirit point to God’s active presence in this world.

If health ministry becomes part of the language of the faith community—in the sense of wellness that includes appropriate medical care yet goes far beyond it—the culture will shift. People will come out of isolation and welcome being part of a community that supports their efforts to make health-sustaining choices. Then the vision will spread to how to bring better health to the wider community, such as by partnering with groups already at work in specific ways.

*Adapted from “Good news through a whole-life lens” by Rev Scott Morris – featured in Fall 2016: Health Ministry Matters of Church Health Reader

Ladder of Involvement

1. Educational materials relating to common morbidities (hypertension, diabetes, obesity, etc.) or nutrition
2. Organize medical screenings/clinic – vitals, glucose testing, etc.
3. Do a Church Health Assessment to determine the health needs of your congregation
4. Home aide/volunteer program (Faith Health Waco implementation) or programs pairing college students with senior adults to do activities like lunch after church, going on walks, etc.
5. Pick a Health Emphases, based on our How to Start a Church Health Ministry Guide
6. Form partnerships with other churches who have health ministries or wellness centers

Starting A Health Ministry

- Align the new ministry with the mission/overall strategy of your church
 - You want your health ministry to be part of your church mission and or church strategy/plan.
- Recruit a leader who can develop a team
 - As Rick Warren says, “never start a ministry without a minister”.
 - You need more than passion you need a person or persons who can lead this ministry and who can build a team.
 - While *The E-Myth* by Michael E. Gerber is a business book, the principles are transferable to the church. Here are two:

“A **STARTER** is not usually a **SUSTAINER**. The Apostle Paul started a lot of churches, but he moved on leaving qualified pastors to do the work of the ministry. A lot of ministries are started by passionate people, but don’t thrive because running a ministry is different than starting a ministry. You need both skills.

WOW people need HOW people. WOW people are the visionary leaders. It’s the guy with the great idea and the passion to make something happen. It’s the woman willing to take a risk because she believes something needs to change. WOW people are idealistic, inspirational and excited about the possibility. But WOW people rarely get things done on their own. They need HOW people. HOW people may not come up with the idea, but they know how to execute. They are implementers and executioners. They know how to take a big dream and break it down into steps. They love progress and process.”

- Build a Ministry Action Plan: Examples to use are available in your packet.
- Create a Communication Plan: There are two critical parts to a good communication plan:
 - “**Internal communication is for your church.** You want to use all the resources at your disposal to make sure your church knows about the ministry. Tell people WHY you’re starting it. Create graphics, videos and emails to tell the story. Craft interesting announcements and emails to let people know why it matters and how to get involved. Make sure your volunteers know why they are serving and exactly what they are doing.
 - **External communication is for the community** (or the people the ministry is aimed at helping). This is where you can utilize email marketing, direct mail, graphics, press releases and other forms of advertising. Again, it’s nearly impossible to overdo this. Don’t try to change the subject too soon. You’ve decided to launch an important ministry so it’s worth talking about.”

- Evaluate and Improve
 - “You also have the opportunity to evaluate, improve and make necessary changes. Don’t wait until something breaks to evaluate. Go ahead and schedule your first evaluation meeting for 30 days after you launch. Be proactive about getting people together to celebrate, write down lessons you’ve learned and talk about changes that can help your new ministry go to the next level.”

* Adapted from Church Fuel: A Step-By-Step Plan to Starting a New Ministry In Your Church

Evaluation Tools

What Inspires Your Health Ministry?

Please place an **X** in the position along the line which represents your response to each statement.

Then, turn to the next page, where you can read about how your selection might inform your experience with health ministry in your congregation, and take an opportunity for reflection.

A.

The term that best describes the relationship of a health ministry to the overall life of our church is

Central

|-----|

Peripheral

B.

Our congregation's primary motivation for participating in a health ministry is

Evangelism

|-----|

Biblical Justice

C.

The programs which we sponsor, support and primarily deal with

Immediate needs

|-----|

Root causes

D.

In the interactions between our church members and those who benefit from our health ministry, there is a sense of

Us and them

|-----|

All of us together

E.

In terms of the way it approaches the community, our health ministry program can best be described as

Partnership

|-----|

Charity

A. In many congregations, health ministries are run primarily by interested members who are willing to take the lead. In large congregations, they may even be assigned to paid staff. Both tendencies may move health ministry to the periphery of congregational life, where most members know little about the ministry or those who benefit from it. This can make funding difficult to find, and may also deprive members of knowing both the joys and challenges of health ministry. **What can be done to move health ministry more into the center of congregational life?**

C. Social determinants of health impact entire communities, not just individuals. Many of our health ministries offer “symptomatic relief,” addressing the results but not the causes of the problems. There is certainly a place for relief and emergency ministries, but it can be valuable, to think about root causes. **How can your church learn about what other factors are affecting the lives of people and families in need, and perhaps move beyond offering food alone?**

E. As we reach out to people experiencing health problems in our community, it is important to consider the long term effect of our involvement. We can promote dependency or help build self-reliance. We can come in as experts with all the answers, or we can seek to be long-term partners with those who are the experts on their own conditions. **How might your health ministry learn from people experiencing hunger and treat them as long-term partners in your efforts?**

B. The Bible emphasizes both evangelism and justice; either value can be appropriate motivators for ministry. If our desire to participate in health ministry is vague, however, our ministries may become “nice things to do,” or worse, “things that just feel good.” While there is nothing wrong with feeling good about our work, we must be very careful about whose needs are being met by our ministries. A dual focus on evangelism and on justice may lead us to seek solutions to the root causes of health disparities as we share the gospel, and we may find that evangelism and justice are more intertwined than we think. **What can be done to examine your ministry’s relationship to evangelism and biblical justice?**

D. The world emphasizes our differences, but the gospel recognizes our common standing before God. That is why effective health ministries begin with the assumption that “all of us are in this together.” When we seek to be in solidarity with those we serve, we find that we have much to learn from them about life, and very often about faith, too. We can increase unity in our community when we look for common ground. **What can your congregation do through health ministry to build bridges between those who serve and those who receive help from your ministry?**

Presbyterian Church (USA). (1996). *Hunger Ministry Series: Stopping to Think*. Louisville, KY: Presbyterian Hunger Program.

Discussion Questions

Considering the “Digging Deeper” activity, please reflect on the questions below. If your congregation already operates a health ministry reflect on the ministry itself. If you are looking to begin a ministry reflect on your preparedness.

1. What is a strength/are some strengths of your health ministry? OR What are some strengths of your congregation for health ministry?
2. What is an area/are some areas for growth/improvement of your health ministry? OR What are some areas for growth of your congregation for health ministry?
3. How can your health ministry be better accessible to your congregation?
4. What are some ways that your health ministry can assist other health ministries at your neighbor churches?

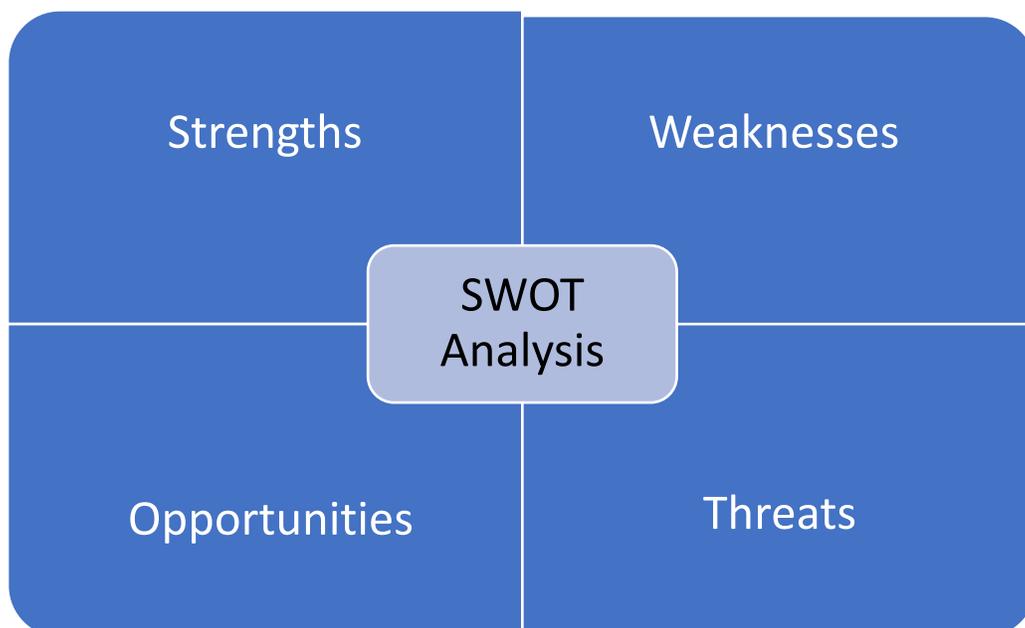
The Health Ministry Check – Up

Just as doctors recommend each of us get a check-up once a year to make sure we are healthy and all of our systems are functioning well, it is a great practice to evaluate the health of your ministry on a regular basis, or at least once per year.

To gather information, you can:

- Talk with church members who are recipients of health ministry assistance
- Ask for feedback from community members who are recipients of health ministry assistance
- Hear from congregants who have helped with the health ministry
- Have conversations with congregants who have *not* been part of the health ministry
- Review financial records
- Review Faith Health Liaison Monthly Reports
- Communicate with the WRBA Church Health Ministry team to evaluate your health ministry

As you gather information from a variety of sources, take detailed notes about what you are learning. Then, use SWOT Analysis to place each observation into one of the following categories (see reverse page for a blank chart you can fill out)



Strengths	Weaknesses
Opportunities	Threats

Once you have filled in the grid, sit down with your team who is involved in the health ministry. Take time to review the information together, and talk about what you notice, and how your evaluation can help inform your work going forward.

Here are some questions you can use to guide your conversation:

1. What about the ministry is strongest?
2. What might need to change in order to better suit the strengths or needs of the community or the strengths or needs of your church?
3. What else do you need to know to be more effective in your ministry?
4. What might you like to try that is new or different?

Community Impact of a Health Ministry

The healthcare system in the United States today can often present challenges for many individuals and families seeking medical advice. Health insurance, appointment times, transportation, health literacy and cost of medication are just a few examples of some of the obstacles people face when they need to see a doctor. In addition, access to care and quality of care is often grossly disproportionate for patients in lower-income or rural communities. The establishment of a health ministry seeks to combat some of these issues by promoting preventative health practices and providing a support network capable of assisting congregants through the complex healthcare system.

In 2017, City Health Dashboard funded by the Robert Wood Johnson Foundation embarked on a mission to provide cities with reliable data to help city leaders create healthy and equitable communities. Waco, Texas, was one of the four pilot locations for this task. The data shows that health outcomes such as life expectancy are lower in areas that subsequently have lower socioeconomic status, lower rates of diversity, higher rates of obesity and higher rates of unemployment. Disparities exist across the seven major zip codes of Waco (76701, 76704, 76705, 76706, 76707, 76708 & 76711) but one common factor across all of these areas is the WRBA. Member churches of the WRBA are already conveniently located and connected to their communities in these areas, which provides the unique opportunity to create change using existing resources. This speaks to the importance of implementing health ministries in order to elevate the status of residents living all across Waco and improving quality of life on a broad scale.

Studies have shown that faith-based wellness/health education has proven very effective in healthy lifestyle behavior change, health care access & integration and positive health outcomes. When people are hurting- physically, emotionally, mentally, or spiritually they first seek help from their faith community, not necessarily their health care provider. Furthermore, doctors are trained to treat disease and can sometimes overlook the important ramifications of social determinants of health. Health ministries can help mitigate this gap.

Healthy People 2020, objectives created by the U.S. Department of Health and Human Services (HHS) to improve the nation's health, define social determinants of health as "social, economic, physical, or other conditions where people live, learn, work, and play that influence their health". Albeit a broad definition, it seeks to clarify that there are several extenuating circumstances which influence health and they should be taken into consideration when trying to improve the outlook of a community. Therefore, it is in the best interest of communities to find ways to alleviate social determinants of health in order to stimulate their economies, decrease healthcare expenditures, increase learning and development of children, prevent obesity and improve mental health.

Health ministries will not only directly benefit the congregations of churches who implement these programs but will uplift entire communities. The Good Samaritan Network has the ability to care for the well-being of individuals, which is more encompassing than just physical health. For example, the Memphis Model (city model) grew into the North Carolina

Way (state model) and now offers services include providing transportation, food, social support, medication assistance (funds for obtaining medications or delivery of medications), and other support such as home repair, light housekeeping, ramp building, and paperwork completion.

As previously stated, Faith Health Waco is based on previously successful models in communities similar to Waco and McLennan County. Medical outcomes reported in other models include:

- Lower Hospital Readmissions
- Lower Mortality Rates
- Lower Billable Costs to the hospital
- Longer between readmissions to the hospital
- Increased access to primary care physicians
- Lower ER visits

Statistics from FHW pilot program

Churches Participating in the Pilot Program

Church Address & Liaison Contact Information

Calvary Baptist Church

David & Elaine Norris
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China Spring Baptist Church

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Columbus Avenue Baptist Church

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Crossroads Fellowship

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Greater Mount Olive Baptist Church

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Woodway United Methodist Church

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