Building the PRAISE Guidebook: Working Together to Encourage a Healthier Community within Local Churches

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Abstract
The mission of the Asheville Buncombe Institute of Parity Achievement (ABIPA) is to make our community a healthier place by helping neighbors of color improve their quality of life. UNCA and ABIPA have joined to create the PRAISE (Preventative Health Education Resulting in Action Inspiring Success for Everyone) program for churches, which is built upon established health-promoting programs includes incentives for church participation. I was recruited to build the PRAISE guidebook, with customizable details, including: descriptions of the available programs for participants to choose from based upon their wellness ambitions at no cost to the church; details concerning the incentives to follow through the PRAISE program and how to obtain either bronze, silver, or gold status; health tips and resources such as the Know Your Numbers section; and information on ways to access resources for healthier living. Through my involvement, I have realized the importance of tailoring messages to the intended audience, using visual simplicity, and using inviting text and images. This project contributes to the reduction of health disparities by increasing the access to preventive resources, the detection of health concerns through monitoring, the triumph in the growth of understanding the comorbidity of prevailing chronic illnesses, and possibly the reduction in trips to the local emergency room for primary care. Overall, this project has taught me the value of organizations like churches in promoting health. The foundation of a compassionate, supportive group of people is already in place with the vision of making a better community, member by member.

Key Words: Health Education, Community, Asheville Churches, ABIPA, Civic Engagement, Local Health Disparities

Origins of the Project

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Health disparities in Buncombe County are a major concern. Asheville Buncombe Institute of Parity Achievement (ABIPA) dedicates resources and manpower to advocating for their neighbors, whether it is helping to navigate through healthcare paperwork in pursuance of health insurance, linking with local programs for free preventative screenings, offering educational information on diabetes prevention in local churches, or encouraging local high school seniors to intern with physicians and health professionals. With their new initiative, PRAISE (Preventative Health Education Resulting in Action Inspiring Success for Everyone), they are integrating the desire for better health within the established support structure of local churches. PRAISE (Preventative Health Education Resulting in Action Inspiring Success for Everyone) is built upon established health-promoting programs that will include incentives for church participation. The goals of PRAISE are to improve eating habits, increase physical activity, and to improve health conditions amongst participating church members.

The need for this type of program is enormous. In North Carolina, 1 in every 10 people reported to have diabetes and 1 in 3 has been diagnosed as pre-diabetic by their doctors according to data collected by North Carolina Division of Public Health: Diabetes Prevention and Control. This does not include the vast amount of people who do not seek regular physician visits. Within the past two decades, the percentage of obese or overweight adults in North Carolina has doubled to 29 percent. “This is an increase of more than 1.9 million adults or enough adults to fill the Carolina Panther’s Stadium 26 times.”

Figure 1. North Carolina Adult Obesity Related Risk Factors and Chronic Diseases

Figure 1. North Carolina Adult Obesity Related Risk Factors and Chronic Diseases, *NC Eat Smart Move More*
In May of 2014, the Community & Clinical Connections for Prevention & Health Branch of North Carolina’s Division of Public Health published a “Type 2 Diabetes in North Carolina” fact sheet. As part of a 2012 study, modifiable risk factions for diabetes in North Carolina data were collected:

These are modifiable behaviors that if changed could lead to preventing and reversing type 2 diabetes. Eating fresh fruits and vegetables, increasing aerobic movement and not smoking tobacco are all choices that can transform a person’s wellness. PRAISE offers ways to incorporate these changes with guidance and the familiar support of church members. Specifically, the African American population has a higher risk for diabetes. In the same 2014 “Type 2 Diabetes in North Carolina” fact sheet it was reported that diabetes was most prevalent in African Americans with a 14.5% rate and according to a 2012 statistical survey African Americans have a higher diabetes-related deaths rate of 52.3 per 100,000. This is a significant health disparity with diabetes as the fourth leading cause of deaths in African Americans compared to the eighth cause of deaths in Caucasians. Many risk factors are innate and cannot be altered such as, “older age, a family history of type 2 diabetes (parent, brother or sister), and race/ethnicity (African-Americans, Hispanics, and other minority groups).” However, numerous contributing factors may be addressed through behavior changes and better choices.

PRAISE and other like programs will help reverse the direction of these stunning numbers by joining members of a congregation to utilize their passion for a different cause: making themselves and their neighbors healthier.

Je’Wana Grier-McEachin, my community advisor from ABIPA and Dr. Ameena Batada of UNCA decided that a guidebook was needed to establish the workings of the program,
descriptions of resourceful programs available, incentives for participating together as a team, suggestions on providing healthier foods at church potlucks, a sample of a productive food policy, and nutritional guidance resources for parents. Providing these printed materials for the churches will encourage participation leading to lasting positive health outcomes.

Through previous involvements, I have had the rewarding experience of working with ABIPA on other health-promoting campaigns, collaborating with them through in a common goal of encouraging greater wellness within our community. Last Spring was my first time to work with ABIPA through my HWP 310 Community Outreach and Health Promotion course. With fellow students, we had the opportunity to work directly with a local church with the goal of filling a health-based need within the church. The Greater Works Church of God In Christ graciously welcomed us to meet with them in efforts of developing useful materials to share with the members. Their concern surrounded type II diabetes and finding healthier, yet realistic, ways of preparing meals that could improve member’s health. We wanted our involvement to be useful. After receiving feedback from the church, they asked us to prepare an after-church snack with printed materials to share. We created several options of food including a typical healthy snack of celery and peanut butter, entrée of vegetable tacos, and a sweet of cheesecake stuffed strawberries – all low-carb minded. Our printed materials consisted of a brief background, recipes, and local sources for healthier foods and meal ideas. Throughout the event members of the church actively approached each of our group members with questions, gratitude, interest and personal stories of their health concerns. Many asked how to stay in touch or where else they could find more information. This would have been a wonderful opportunity share a PRAISE guidebook with them, if one were available. Through PRAISE church members are encouraged to work together on improving individual health – therefore health as a whole. A guidebook would serve as a foundation of information to build upon.

Although PRAISE was established prior to my involvement I am grateful that I was welcomed by ABIPA to work with them in preparation of implementing PRAISE into community churches. Prior experience with UNCA, ABIPA and ABCCM (Asheville Buncombe Community Christian Ministries) has increased my knowledge of gathering local resources with the mindset that health improvements must be easily understood and accessible in order to be essentially utilized. Collaboratively, our goal was to create a guidebook that will be practical and straightforward, encouraging a group of people to grow together in their wellness as they have in their faith, as a church.

**Methods and Work Undertaken**

The first steps of this project included the initial meeting with my community advisor and the executive director of ABIPA, Je’Wana Grier-McEachin, to explore her vision for the PRAISE guidebook. She had a clear understanding of what she thought should be included as necessary resources for the participants. She wanted the guidebook to be
informative and encouraging. As for the design of information and layout, she granted me much freedom. Her direction was vital to the success of this guidebook as she was familiar with the intended population and knew how to encourage them to take notice of our guidebook. We discussed the available programs ABIPA had acquired that would be options for the congregations based on their health needs. Many of the programs had current online counterparts, which I spent time reviewing to gain a better insight of the program’s approach. To understand the functionality of the programs was important in order for me to create alluring descriptions.

Taking Je’Wana’s notes and the research on the health programs, I began a layout for the guidebook. Keeping in mind the theme and look of ABIPA’s website, I decided upon the colors red and black as the color palette to highlight certain sections. The layout of the information needed to be orderly, but informative. It was also important for the guidebook to be on level with the community’s health literacy with relatable terminology. I browsed other instructional booklets to see what layouts were most pleasing while incorporating the most information. Including pictures of the available programs also helped to connect with the reader. In researching various resources it was important to find the most accessible, cost effective and user-friendly options. The parent’s resource section needed additional consideration as the suggestions we offered parents needed to be helpful and applicable as they are busy. I reviewed many children nutritional resources before find the ones that seemed to have the highest potential effectiveness.

Once a draft of the guidebook was designed, Je’Wana and I met for her to review. With much positive feedback, we revised some of the information, moved bits around, and added additional information. Je’wana complimented the layout, the eye-catching pictures and the design of the information. She provided a sample of a food policy and suggestions of healthy options at potlucks. The overview of the program and the assessment of the church were vital, as she wanted each participating church to understand how to succeed.

Included within the guidebook were the following sections:
   I.  Overview of PRAISE Program
   II. Assessment of Church
   III. Know Your Numbers
   IV.  Trainings & Programs
   V.   Sample of Food Policy
   VI.  Health Integration of Pot Lucks
   VII. Resources of Parents

* The PRAISE guidebook can be viewed in an appendix located at the end of the paper.

ABIPA has developed several health promotion programming options for the churches to choose from based upon the needs of their participating congregation. Je’Wana is certified to teach all of the programs, as someone who has attended the workshops and trainings must facilitate many of them. Options churches can choose from include:
Living a Healthy Life: Chronic Conditions, Creation Health through the National Wellness Institute, We Can! Energize Our Community through the National Institute of Health, With Every Heartbeat There Is Life from the National Heart, Lung and Blood Institute, Body & Soul from the National Cancer Institute, or The Diabetes Self-Management Program created by Stanford. In addition, if the church wishes, ABIPA is willing to create a tailored program specifically designed to meet the needs of the specific congregation.

For further feedback the guidebook will be shared with other contributors to the PRAISE project including Mission Health and our intended audience – local church leaders and members. Dr. Batada’s impressions of the final draft of the guidebook are very important as a major stakeholder as well as academically. Additional steps, after a collection of feedback is received, are: 1) revise the guidebook; 2) print and assemble copies of the guidebook for distribution to the churches; 3) lead presentations introducing the PRAISE project to churches (by JeWana); and assisting participating churches in gathering information about church members’ health and the policies and programs in existence. This assessment is an important first step to determine possible meeting spaces, current involvement in health activities, and current members who have expressed interest or are currently leading wellness events at the church. Once the assessment is complete church will be able to begin the program of their choosing.

Ties to Academia

Pursuing a career in health promotion, I find that obtaining optimal health is a multifaceted task in which many dimensions need to be examined. Public health is an exchange. A need must be established and all efforts must be practical. As a promoter of public health it is vital to realize and analyze what is needed in a specific community and where small steps can lead to bigger changes. We must find how to utilize our classroom knowledge and experiences in an organic manner to meet the needs of our community. Involvement must be fluid to be successful.

As a Health and Wellness Promotion major, being a part of this project is a linked directly with my coursework at UNCA. Through our studies, we are taught to observe our community and work together to fulfill a need in efforts of improving the wellness of our neighbors. Working with Je’Wana and Dr. Batada on the PRAISE guidebook has put into action the elements we have learned in our Health and Wellness Promotion classes. Examining the social determinants of health is a topic that is often revisited in our studies. According to the World Health Organization (WHO), the social determinants of health are defined as, “the conditions in which people are born, grow, live, work and age and the systems put in place to deal with illness.” These are the origins of shaping a person’s state of wellness. An example provided in Dr. Batada’s Community Outreach course discussed a person with a high risk of heart disease. Perhaps the contributing factors to the high risk included biological: overweight, hereditary, age, gender; behavior: lack of movement/exercise, high-fat diet, smoker, high stress levels; social
environment: eating patterns, interactions with others, habits of family/friends, exposure to advertisement for unhealthy foods; physical environment: dense fast foot, lack of access to health foods, safe places to exercise; and health services: lack of insurance, access to healthcare, and quality of care. Some of these are avoidable and once acknowledge can be prevented. In PRAISE each participant will have a pre- and post-assessment of their health. Within the course of the program each person will examine their life, behaviors, habits, routines, environments, work schedule, activity levels, etc. to establish which social determinants he or she can control and improve upon.

In Dr. Batada’s Health Parity course we learned how important identity is, whether it be innate (physical trait) or modifiable (choice of profession). The state of wellness does not always have to be innate as we can transition it to be modifiable with knowledge, encouragement and determination. In many cases, type II diabetes can be successfully managed, for example, with lifestyle changes. Therefore, one’s identity could alter through the changes made through a program like PRAISE. With the support of fellow churchgoers, a member could change their entire lifestyle and decrease limitations through working together toward a healthier quality of life. Dr. Batada often mentioned access to resources as a contributor to many chronic health illnesses. Through PRAISE participants will have access to programs without the concern of cost or necessary training as the ladies at ABIPA are already prepared to work with them.

In another class of Dr. Batada’s, Community Outreach and Health Promotion, we learned the value of communicating effective messages while knowing your audience. Our lives are so busy these days trying to keep up with the necessities of life. We also have stimuli coming at as from all angles: television, radio, cell phone, magazines, newspapers, etc. that we often cannot separate what information could benefit our lives from the superfluous rubbish. For us to pause a moment to read, hear, and absorb anything is a difficult task. Knowing your intended audience is an extremely important step in making a connection and introducing any type of message. Equally important in knowing your audience is acknowledging how diverse people or groups of people react and interpret knowledge. As stated in the Journal of Health Care for the Poor and Underserved in the article, Predictors of Cancer Screening Among Low-Income Primary Care Patients, when discussing the effects of cultural boundaries on preventative screenings, “Interventions developed to increase utilization of screening by at-risk people should take a multifaceted approach, emphasizing both physician recommendation and the use of culturally-sensitive patient education.”

Having the most nurturing health promotion setting is another significant dynamic when trying to share a message with a group of people. Published on the WHO website, The Ottawa Charter stated, “Health is created and lived by people within the settings of their everyday life; where they learn, work, play and love.” While part of the message is changing behaviors that have lead to a less healthy life, it is vital that the surrounds be reassuring. As one of the seven dimensions of wellness, we learn in many of our Health & Wellness Promotion courses that sociality is a vital aspect in wellness. The socialness
of supporting others and the connection of working with one another can be rewarding and self-motivating. In a church setting strong relationships are already in place creating a sense of security and support to try something new such as changing a behavior or cooking in a different way than family traditions. The other dimensions of wellness include spiritual, occupational, emotional, physical, and intellectual.

Figure 2. The Seven Dimensions of Wellness, Clinical Supervision 2012

As a unique major, UNCA’s Health and Wellness Promotion presents a comprehensive look at wellness in our country (as well as internationally). All beings share the struggles of health or lack of health as it may be at times. To be introduced to the realm of wellness, the costs, the access, and the influences – is irreplaceable as we approach health within our communities no matter which path we choose. Working on this project with ABIPA has facilitated me to integrate knowledge learned from being a Health and Wellness Promotion major at UNCA with fulfilling a genuine need with our community. My knowledge of the multilayered process of creating an informative and beneficial booklet has grown during this project. My background in health and wellness through my classes at UNCA assisted me in understanding many elements of the programs churches can choose from. For example, when reviewing the background materials for Body & Soul, I realized the importance of eating a balanced diet with fresh vegetables and fruits through my physiology and nutrition classes.

Challenges Faced and Responses to those Challenges
Our team (my advisors and I) worked together well. Challenges rested with tweaking the guidebook to be just right in amount of information and appeal with both advisors approval. With open communication, we moved interchanged wording, moved images, and refined sections to make the guidebook easily comprehensible. The length of time working on this project was a challenge as this was a project with a limited time frame. We want to have more feedback from local congregations on their reactions to the guidebook. We were able to receive some responses from a few local church members, which was still very helpful.

Logistically, creating the flow of the guidebook had its challenges. As the digital guidebook needed to be sustainable for future updates and editing, producing a format that could be easily adjusted proved to have moments of trial and error. Once settled upon a layout, entering data and images initiated new challenges as previously inserted information shifted onto a page of the booklet that was several pages away in reality. The digital version of a booklet varies from the printed version a great deal. For example, page 10 is connected to page 3, but when it is printed and folded correctly all pages will be in order. Another formatting difficulty came with revising needed material into the allotted space with a font that was legible. With this volume of information each added section was a shift and a shuffle to make it all flow together.

A personal challenge I was aware of from the beginning was the identifiable difference between my background and the background of our audience. As a Caucasian college student studying health and wellness, my awareness to our potential variances was forefront in my mind. My ambition to increase my knowledge within the realm of health was what linked my connection with ABIPA and with the PRAISE project. However, I resisted the appearance that as a university student I would exceed my current knowledge base and be viewed as someone trying to educate others beyond my means. All I have learned through my UNCA classes is something I hope to build upon and share with others when presented with the opportunity. I believe community health is an exchange between people where all parties can learn something new. In addition, the churches PRAISE is reaching out to are predominately African American congregations therefore I maintained sensitivity to the varied viewpoints we may have on how information may be perceived. Our goal was to encourage people to participate in mindful changes towards healthier behaviors. We definitely wanted them to be enticed to read the guidebook. Dr. Batada’s and Je’Wana’s feedback and gentle encouragement helped to mold our presentation of PRAISE.

Results

As a result of our partnership working together on this project, an informative guidebook was created for the PRAISE program lead through ABIPA. The guidebook provides a background of the program itself; a sample of a food policy to show each church how to model their own, health modifications of potluck dishes, details of optional programs each church can review before choosing one, resources of healthy meals and activities for
parents, section on the importance of *Knowing Your Numbers*, and the incentives to encouraging each church’s congregation to actively participate in PRAISE. Providing background information on PRAISE will show the workings of the process to which each church needs to follow and the offering of potential life changing health outcomes.

Gatherings and potlucks are a wonderful way to spend them with friends. Good food is usually pivotal, however often the food is made to share without the concern for healthier methods. With suggestions built into the PRASE guidebook members may find health-minded alternatives to share that taste delicious. Little changes such as other spices instead of large portions of salt or grilled vegetables instead of starches can make a big difference in redefining daily habits. When a church member tastes good (and healthy!) food at the church potluck perhaps they will be persuaded to incorporate some of those preparations and foods in their own meals resulting in positive behavior changes.

ABIPA has put many hours into training in various wellness programs to offer their community. Each program description needs to be detailed and brief to allow the congregations to understanding the process. *Know Your Numbers* is a vital key to PRAISE. There are important predictors in our bodies that help can warn us of possible conditions including blood pressure, body mass index, cholesterol, and blood sugar. In the pre- and post- assessment that each participant is required to complete, church members will be exposed to the importance of monitoring these numbers and how to check them regularly. With careful monitoring of these numbers, physicians can often predict potential medical conditions. The physician can then lead the person to behavioral changes and/or medications to prevent further concerns. We hope PRAISE will improve the health of participants whether through ways to better their bodies or to bring light to an unknown illness. Hopefully this guidebook will serve its purpose and inspire churches to participate in PRAISE and thus increase the wellness of people within our community.

The guidebook is a part of a project that hopefully will be expanded and replicated. ABIPA anticipates expanding PRAISE to other churches locally and beyond Buncombe and Hendersonville counties. Currently, there are twelve churches that have responded positively when asked if they would participate in PRAISE. In addition, the PRAISE guidebook will serve hopefully as a model for others to develop similar programs in other areas.

Personally, I have strengthened my communication and teamwork skills while working with Je’Wana and Dr. Batada. Listening to the direction and objectives of my advisors was important in this process as they offered knowledgeable viewpoints. It was important to blend both of their views into one product. Through this project I have been fortunate to work with two wonderfully gifted people. No doubt their guidance will aid me in future projects.

**Sustainability**
Creating a guidebook for PRAISE is a foundational step in launching the program. I believe having a printed informative booklet will assist ABIPA in reaching out to local churches encouraging their participation. The guidebook will also provide answers to questions the churches may have and offer a clear overview of the PRAISE program. PRAISE is a wonderful asset to our community offering a free source of improving health with likeminded friends of the same church.

The guidebook is sustainable as it provides a reference point of information for the PRAISE program. Everything included within the booklet can be further detailed verbally, if needed during ABIPA’s presentation. The resources within the guidebook are current and established with no foresight of them discontinuing their assistsances. If aspects of the guidebook need to be changed it was created with Word making it easy to update. Both Je’Wana at ABIPA and Dr. Batada will have digital copies of the guidebook for future modifications.

As a successful project accomplished by the joint efforts of UNCA and ABIPA, PRAISE has provided another opportunity to compliment the shared exchange between education and community. Education provides the knowledge of updated information while community supplies the direction of the people’s need. To further wellness locally and broadly, both education and community is needed. The relationship between these two organizations has strengthened providing future Health and Promotion students additional opportunities to build upon this connection.

**Conclusion**

Creating the PRAISE guidebook provided a valuable resource for potential and active participants. Taking the initiative to seek better wellness is a big step toward a higher quality of life. With these materials, our desire is for the members of individual churches to seek wellness through the resources provided in PRAISE by ABIPA. Through these tools, participants will learn how to listen to their own bodies and find methods to improve their quality of life by making better, healthier choices. By working together with their congregation, they are not only revitalizing their own health, but the health of their church and their fellow members. The experience of working on this project broadened my view of how the seven dimensions of wellness can blend and promote one another. Given the supportive environment, people can improve their physical, social and spiritual health through a single activity. The success of this project will be confirmed once the guidebook is given to the churches and their participation is effective. The actions of the partaking congregations will serve as a testament to the success of the guidebook.
Resources


Physical Activity, Nutrition and Obesity in North Carolina Quick Facts. (2013). *Eat Smart Move More NC.*


Type 2 Diabetes in North Carolina. (2014). *Community & Clinical Connections for Prevention & Health Branch*.


Appendix

PRAISE Guidebook:
Healthy eating means choosing the right foods. Build a base by selecting nutrient-packed foods such as whole grains, fruits, and vegetables, with smaller amounts of protein-rich foods, plus small amounts of fats, oils and sweets. Purchase fruits and vegetables in season. When fresh isn’t available, frozen and/or canned are also good, to increase vitamins, minerals, and fiber. Read food labels, to choose better sources of nutrients and to help limit fat, cholesterol, sugar and sodium. Cook using vegetable oils (olive, canola or peanut) instead of lard and butter.

**Healthy Meal & Potluck Choices**

<table>
<thead>
<tr>
<th>Food Groups</th>
<th>Less Healthy Options</th>
<th>Healthy Options &amp; Ideas</th>
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</thead>
<tbody>
<tr>
<td>Grains (bread, baked goods, corn)</td>
<td>White rice</td>
<td>Brown/wild rice dishes</td>
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<td></td>
<td>White flour</td>
<td>Whole wheat pasta</td>
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<td>White pasta</td>
<td>Whole wheat bread or tortillas</td>
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<td></td>
<td>White flour tortilla</td>
<td>Corn tortillas</td>
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<td>Fruits</td>
<td>Almost all forms of fruit are healthy</td>
<td>Sliced fresh fruit</td>
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<td>(try to avoid &quot;fruit cereal&quot; items that contain little or no fruit, but lots of sugar or fat.)</td>
<td>Fruit salad</td>
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<td>Frozen berries made into smoothies</td>
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<td></td>
<td>Fruit kabobs</td>
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<td>Dried fruit (if it is low in sugar and fat)</td>
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<tr>
<td>Vegetables</td>
<td>Almost all forms of veggies are healthy</td>
<td>Lightly steamed veggies (green beans, broccoli, cauliflower)</td>
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<td>(try to avoid land, butter, and a lot of salt.)</td>
<td>Snap peas or salads</td>
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<td>Baked or roasted potatoes</td>
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<td>Casserole/potato with low-fat crust</td>
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<td>Proteins (meat, eggs, beans, nuts)</td>
<td>Fried Chicken</td>
<td>Broiled/baked turkey, chicken, fish</td>
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<td>Beans made with land</td>
<td>Peanut/almond butter</td>
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<td></td>
<td>Bacon</td>
<td>Tofu (baked or scrambled)</td>
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<td></td>
<td>Sausage</td>
<td>Egg casseroles/pizzas with low-fat crust</td>
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<td></td>
<td>Egg made with lots of butter, mayonnaise or cheese</td>
<td>Baked beans/ents/pasta or black beans</td>
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<td>Stews/soups with beef or chicken</td>
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<td>Dairy</td>
<td>Whole milk</td>
<td>Low fat yogurt &amp; cheese dishes</td>
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<td>Whipped cream</td>
<td>Reduced fat cream cheese</td>
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<td></td>
<td>Butter</td>
<td>Puddings/potatoes made w. low fat milk</td>
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<tr>
<td>Fats</td>
<td>Coconut/palm-oils</td>
<td>Canola/vegetable oils</td>
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<td>Fat in meats</td>
<td>Soft tub margarine</td>
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<td></td>
<td>Butter</td>
<td>Peanut/almond butter dishes</td>
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<td></td>
<td>Cream cheese</td>
<td>Tahini (sesame paste)</td>
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<tr>
<td>Desserts</td>
<td>Bakery muffins/cookies</td>
<td>Baked goods using whole-grains</td>
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<td></td>
<td>Cakes/pot/sweet milks</td>
<td>Desserts based around fresh fruit</td>
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<td>Ice cream</td>
<td>Gelatin with fruit</td>
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<tr>
<td>Beverages</td>
<td>Fruit punch (or other drinks w. little or no actual fruit juice)</td>
<td>Water</td>
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<td>Soda</td>
<td>Low-fat milk</td>
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<td></td>
<td>Energy drinks</td>
<td>Unsweetened hot or iced tea</td>
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<td>100% juice</td>
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**OVERVIEW**

Designed in partnership with ABIPA and the University of North Carolina at Asheville, PRAISE is a healthy living initiative built for local African American churches in Buncombe County. Utilizing current congregational support, PRAISE offers the opportunity for church members to grow together in wellness as they do in faith. Through PRAISE, members will have access to preventative resources, background information about chronic conditions, detecting health concerns through monitoring, and support to make changes toward a greater wellness.

**HOW TO EARN TOP STATUS:**

- **GOLD:** +4 Program-Minded Classes
- 75% Participants Completed Program
- At Least One Health Event

- **SILVER:** +2 Program-Minded Classes
- 50% Participants Completed Program
- At Least One Health Event

- **BRONZE:** +1 Program-Minded Classes
- 25% Participants Completed Program

All participating churches must complete:

- A Church Assessment
- A Know Your Numbers Screening at the beginning and at the end of the program to document congregational improvements

**INCENTIVES:**

- **GOLD:** $500 and certification
- **SILVER:** $250 and certification
- **BRONZE:** $100 and certification
ASSESSMENT OF CHURCH

An assessment of the church will be necessary to consider how to proceed.
- Is there a current health program in place?
- What are the current health activities, if any?
- Who is currently working on a health program? What is the placement of current members?
- Is there adequate space available for classes?

HEALTH INTERGRATION AT POT LUCKS

A wonderful place to begin integrating healthier nutritional foods is church gatherings and potlucks. This provides an opportunity to include those church members who are unable to participate in the PRAISE program.

Good foods always win. Healthy good foods are a win-win.

Remember these tips when organizing a healthy food gathering:
- Fruits and vegetables: Make sure to include as many fruits and vegetables as possible. Remember: All fruits and veggies count, including fresh, frozen, canned and dried. Try including fruits and vegetables in baked goods and casseroles. You can also offer plates of raw or lightly steamed veggies, and bowls of unsweetened or fruit juice-only-sweetened canned fruits.
- Grains, Breads, baked goods: Try to offer whole grains instead of highly processed white flour in your meals. Brown rice, whole wheat pasta or other grains such as quinoa or barley are good choices. Grocery store muffins, quick breads and sweet rolls are usually very high in fats and sugars. Whole grain breads and crackers and homemade muffins are generally better. You can substitute whole wheat pasta or brown rice in many recipes calling for white pasta or rice and make it healthier.
- Healthy protein: Use lean meats, fish, beans, low-fat dairy products or soy protein. Trim visible fat from meats, including the skin. Grill, bake, boil, or braai foods instead of frying. Use low-fat cheese or less of a cheese with more flavor (sharp cheddar instead of mild cheddar) to create the same taste.
- Beverages: Try to provide water, low fat milk and juice as often as possible instead of sugary drinks. Some ideas to try: water with lemon and/or orange slices in a pitcher, herb or herbal teas such as hibiscus, mint or berry, plain or sweetened with a little honey.
- Desserts: Make fruit a prominent part of dessert or use low-fat or reduced sugar items. Include low-fat dairy or whole grains when possible.

* Guidelines for Health Church Meals & Potlucks prepared by the Health Ministry Team of Alisworth United Church of Christ, Portland, Oregon - February 2011

KNOW YOUR NUMBERS

To strive for great wellness it is important to know your body's numbers including your blood sugar, cholesterol, blood pressure, and body mass index.

As part of the PRAISE program all participants will have a pre- and post-assessment in partnership with Land of Sky Regional Council and Mission Health. This assessment will establish a starting place to monitor progress as participants advance in the program.

This policy applies to all meals (breakfast, lunch, and dinner) and snacks served at church sponsored meetings and functions. This policy also applies to all snacks and meals served to children in youth programs, including Sabbath school, vacation bible classes and after school activities.

The (CHURCH) Healthy Eating Policy encourages:
- Serving two or more vegetable dishes at every meal.
- Serving more fruit at meals.
- Providing a choice of fruit for dessert.
- Serving plenty of fresh fruits and vegetables as snacks.
- Serving healthfully prepared fruits and vegetables that are low in saturated fat.
- Serve water.
- Identify a health contact person to take the lead on organizing and/or promoting church health programs.
- Have all building designated as tobacco-free

Exercise
- Church will encourage congregation activity, by encouraging establishment walking and exercise classes. Congregation will also be encouraged to taking stretch/mint-exercise sessions during long meetings.
- Initial weigh-in will be documented during the WOW Ban event. Monthly weigh-in will be established to gauge weight loss. Group captains will log lifestyle goals reached. Incentives to be decided upon for those participating and reaching goals. Testimonies & Celebrations will be scheduled once a quarter to insure momentum is not lost throughout the year.

Date Ratified by Congregation

Pastor's Signature

CUSTOMIZABLE PROGRAMS

ABIPA will work with you to customize your programming to meet the specific needs of your congregation.

LIVING A HEALTHY LIFE:
CHRONIC CONDITIONS

A friendly guide to help people learn how to manage their chronic conditions with practical tips, helpful resources, explanation of illnesses, and tools to live a healthy, fruitful life.

CREATION HEALTH
(NATIONAL WELLNESS INSTITUTE)

This is a “faith-based wellness plan” based upon “Biblical principles and supported by evidence-based science.” Involving the whole body and mind in a plan for greater wellness.
(CHURCH) Commitment to Healthy Living

Background

The (CHURCH) is committed to improving the health of its members as part of its church’s mission. African Americans are at increased risk of developing and dying from certain diet-related diseases including heart disease, high blood pressure, diabetes, and many types of cancer. African American youth have the highest rates of overweight and obesity among all children. Type 2 diabetes is also increasing at alarming rates among youth. The unhealthy eating habits that contribute to these serious problems begin in childhood and lead to the development of many diet-related diseases in adulthood. Preventing these diseases is an important step in improving health in the African American community. Prevention saves lives, lessens the human burden of illness, lowers health care costs, and preserves our quality of life. Eating a healthy diet rich in fruits and vegetables may reduce the risk of these diseases. It is recommended that children ages 2 to 8 eat at least 2 cups of fruits and vegetables a day, older children, teen girls, and women eat at least 2 ½ cups and teen boys and men eat at least 4 ½ cups a day, depending on levels of physical activity.

The (CHURCH) Commitment to Health Living

In an effort to demonstrate our commitment to encouraging our congregation to adopt healthy eating habits and active lifestyles, (CHURCH) is establishing a Healthy Eating Policy to ensure that all meals and snacks served at church meetings and functions are a model of healthy eating. The goal of the Health Eating Policy is to increase the availability of fruits and vegetables in all meals and snacks served at the (CHURCH). The foods served in our activities should serve as a model of healthy eating to our children, our families and our community.