Community/Public Service Worksheet

Service Category: Health and Wellness Programs

Title: Saving Lives

Primary UA Contact(s): Carol Agomo (name) Community Affairs (Office)

Community Partner(s) (if any): College Hill Baptist Church (name) Church (Organization)
First African Baptist Church (name) Church (Organization)
Hightown Church of God (name) Church (Organization)
Mount Pilgrim Baptist Church (name) Church (Organization)
New Zion Missionary Baptist Church (name) Church (Organization)
Plum Grove Baptist Church (name) Church (Organization)

Program Description: Saving Lives
Saving Lives is a community-university faith-based partnership designed to increase health literacy and to support Alabama residents in attaining higher levels of health and wellness. Saving Lives applies a unique approach to healthy living and wellness by using scripture or text from theologically sound doctrine to supplement health care information and recommendations coming forward from health care providers and policymakers to the members of the churches. This program is designed to empower faith-based leaders and congregational members to engage in activities that will enhance their overall physical, mental, emotional and spiritual wellness.

Objectives/Outcomes: This initiative should help demonstrate ways to connect health and spirituality, empower participants to take charge of their health and provide access to vital health information at their church.

Assessment Measures: Monthly questionnaires are provided to workshop participants and will ask them to provide new knowledge learned during the workshop. The survey may ask that each participant provide three important items for each topic. During each semi-annual health screening participants provide perceived status on their health behaviors (eating, exercise, sodium intake and drinking and smoking habits). Each indicator is tracked along with changes in Body Mass Index, cholesterol levels, blood pressure and blood glucose levels.
Results: In our pilot phase we have found an improvement in overall health indicators of participants including an increase in physical activities and a downgrade shift in number of participants (returning for health screenings) in high risk categories for each measure.

Conclusions: With the aid of committed members at each church, a demonstration of commitment from church leadership and a continued connection of health and spirituality we are seeing improvements in health outcomes and a shift toward recommended health behaviors.

Improvement Actions: 1.) Increased participation from church leadership, 2.) increased opportunities to implement recommended changes in eating and exercise habits, 3.) changes in our survey/questionnaire tool to gauge increase in understanding of each monthly topic, 4.) streamlining the content covered in each workshop session so that we can be sure the same materials are covered in each church.