Congregational Health Index

A Self-Assessment and Planning Guide 2010





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- Download from: www.faithandwellness.org
- Request by e-mail: <u>www.faithandwelness.org</u>
- Para màs información en Español envie un e-mail a www.faithandwellness.org

The CHI is meant to be flexible. Feel free to make simple changes to the CHI, as needed, but keep in mind that nutritional information and recommended amounts of physical activity should stay the same, as the CHI was created with dieticians and others with special knowledge about food and physical activity. If you make more extensive changes to the tool, it can no longer be called the CHI. Instead, please note that it is a document "based on the Congregational Health Index created by Ecumenical Ministries of Oregon and Community Health Partnership: Oregon's Public Health Institute." If you do adapt the tool, please contact the authors so we can track how it is being used: www.faithandwellness.org.

Introduction

Why Use the Congregational Health Index?

Our health is powerfully shaped by the places we work, learn, play and worship. Our daily environments make healthful diets and physical activity easier or harder to achieve. In recent decades, these environments have changed drastically, making it more challenging to maintain a healthy way of life in many communities. When fast food options are cheap and convenient, but healthy foods are not, and neighborhoods lack safe areas for outdoor play, our health suffers. With the right tools, we can change our immediate environments to make healthy choices the easy choices.

Faith communities have a unique opportunity to create environments that promote health. Congregations often hold values, beliefs and traditions that support health. They also often have kitchens, land, and buildings that can be used to create access to nutritious food and physical activity. Community kitchens and gardens, produce buying clubs, farm stands, exercise space, bike racks and playgrounds are some of the resources faith communities can develop to promote health.

The Congregational Health Index invites your congregation's leaders and members to take a fresh look at your faith community's facilities, policies and practices – the many ways you eat, worship and play together and use your buildings and grounds. It is designed to be flexible enough to fit the unique circumstances, culture, and religious beliefs of your congregation. The practices and policies you adopt within your congregation will likely carry over into other settings and influence your community ministry, outreach and social justice work. These healthy practices can become part of who you are as a congregation and serve as an example for others.

The idea that healing and wellness are not limited to the needs of the physical body is found throughout different religious traditions, beliefs, customs, and spiritual practices. We heal and care for the mind, body and soul. The Congregational Heath Index (CHI) is a concrete assessment that highlights the needs of the body. However, the CHI was developed to be completed within the framework of a faith community; as such, it is important to address the mind and soul throughout the assessment process. For example, it would be appropriate to open and close your meetings and trainings with a prayer, reading or spiritual thoughts that are meaningful to your congregation. For some suggestions and web links please refer to www.faithandwellness.org.

What is the Congregational Health Index?

The Congregational Health Index (CHI) is a self-assessment tool and planning guide that will enable you to:

- Identify the strengths and weaknesses of your congregation's facilities, policies, and practices for promoting health;
- Develop an action plan for improving your congregation's facilities, policies, and practices, and;
- Involve your faith community in implementing this improvement plan.

What Does the Congregational Health Index Involve?

The CHI includes two activities that are to be completed by members of your congregation: two assessment sections (one for food/nutrition and one for physical activity) and a planning guide for the improvement process. The self-assessment process allows members of your congregation to come together and discuss how your congregation's facilities, policies, and practices promote health.

After you complete the self-assessment, you will identify actions your congregation can take to improve its performance in areas that received lower scores. Then you will prioritize the actions and develop a Congregation Health Improvement Plan to implement your actions.

Completing the CHI is an important first step toward improving your congregation's environment to promote health. Your congregation can then develop an ongoing process for monitoring progress and reviewing recommendations for change.

Why Were These Health Topics Selected?

The Congregational Health Index (CHI) addresses the facilities, policies, and practices within your congregation that impact nutrition and physical activity behaviors of members. The environment where we worship affects our behavior by influencing our food choices and our physical activity opportunities, and as a result, our health. For example, serving only donuts during fellowship hour encourages poor eating habits while serving both donuts and fruit makes the healthy choice available. Serving only fruit makes the healthy choice the easy choice. Poor eating habits and physical inactivity are primary causes of obesity and obesity-related chronic diseases – such as heart disease, cancer, stroke, and diabetes – and are the leading causes of death in our nation. By changing the places where we work, live, learn, play and worship, we can make sure healthy choices are, more often than not, the easiest choices before us.

Should the Congregational Health Index Be Used to Compare or Rate Congregations?

No, the CHI is <u>your</u> congregation's self-assessment tool. It is not meant to be used to compare congregations. It should not be used for evaluating staff either. There is no such thing as a passing grade on the CHI. You should use your CHI scores only to help you understand your strengths and weaknesses and to develop an action plan for improving your congregation's facilities, policies, and practices to promote health. Low scores on the CHI should be expected, and they do not indicate a "low-performing" congregation. They merely point you to ways your congregation can make healthy eating and activity choices available to everyone.

What Resources Are Needed?

The CHI is a free resource that can be found at faithandwellness.org; it can be completed in as little as four hours. The process may even take less time. A small investment of time can pay big dividends in improved health. Many of the improvements you will want to make after completing the CHI can be done with existing staff and volunteers and with few or no new resources. For priority actions that require new resources, your CHI results can help you build community support for change and help you develop strong funding requests. Some congregations will want to address only one section or goal at a time, and some congregations might already have funding or ministries in place to address more issues. Your Improvement Plan will be unique and the resources required to implement it will vary too.

What is the Congregational Health Index Based On?

The CHI is adapted from the School Health Index, a tool designed to implement the Centers for Disease Control and Prevention's (CDC's) model of a coordinated school health program. This model highlights the importance of involving and coordinating the efforts of all people, programs, facilities, policies, and practices within a school that influence the well-being of young people. The original document was developed by CDC's National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health, Division of Nutrition and Physical Activity, and Office on Smoking and Health; and the National Center for Injury Prevention and Control, Division of Unintentional Injury Prevention, and Division of Violence Prevention. Funding for the development of the first edition of the *School Health Index*, published in 2000, came from the CDC Foundation and the Robert W. Woodruff Foundation. For more information on the School Health Index, please see: http://www.cdc.gov/HealthyYouth/SHI.

How to Get Started?

Instructions for the self-assessment follow in the next section. Before you begin your assessment, set the tone by taking a moment for a reflective reading or prayer, candle lighting or other ritual that is meaningful to your group (see suggestions on faithandwellness.org), and have Wellness Team members (see instructions for Wellness Team Coordinator, beginning on page 5) briefly reflect on how they see wellness as a faith issue. (You can explore these themes in more depth later, with your whole congregation, through worship, religious education, Scripture study, study of other holy books or sources of inspiration, small group ministry, and educational sessions with invited speakers or activities). To get you started, you may want to consider the following ideas or facts. Consider checking with your state or local public health department for specific regional data, or with the Centers for Disease Control and Prevention:

- Our bodies are sacred and we should care for ourselves as part of Creation;
- When we are well, we are best able to bring our unique gifts into the world;

- Because of social and economic inequities, some communities have less access to healthy foods, safe physical activity and recreation, and nature for active recreation and spiritual sustenance;
- In the US, only 32.6% of adults eat the recommended (two or more) servings of fruits each day and even fewer adults, 27.2%, eat the recommended (three or more) servings of vegetables each day;
- The typical school-age child spends more than 7 hours a day in front of TV, video game and computer screens or using mobile media for entertainment, instead of being active and engaged with others;
- In the US as a whole, more than two-thirds of adults over the age of 20 are obese (34.3%) or overweight (32.7%), up from 15% adult obesity rates in 1980³. According to the 2007 National Survey of Children's Health, more than one-third of children aged 10 to 17 are obese (16.4%) or overweight (18.2%). Obesity rates vary by location; for information by state, see: http://healthyamericans.org/reports/obesity2009/;
- Obesity increases the risk of cancer, diabetes, heart disease and stroke and can contribute to depression and low self esteem. Obesity-related diseases cause preventable human suffering and treating those diseases costs an estimated \$147 billion a year in the US₄.

If we prevent obesity-related illnesses, we will not only improve lives and help children reach their potential, but those resources that would have been spent on health care costs could go towards creating a more just, sustainable world. What are the health, spiritual, and social justice consequences of an unhealthy lifestyle? How can improving your congregation's facilities, policies, and practices to promote health enable you to put your faith and values into action?

Footnotes

1 Centers for Disease Control and Prevention (CDC) (2007-2008 data) www.cdc.gov/mmwr/preview/mmwrhtml/mm5610a2.htm.

2Kaiser Family Foundation, "Generation M" Report, 2005, updated 2010.

<u>3</u>National Center for Health Statistics (NCHS). "Prevalence of Overweight, Obesity and Extreme Obesity among Adults: United States, Trends 1976-80 through 2005-06." NCHS E-Stats, December 2008. http://www.cdc.gov/nchs/products/pubs/pubd/hestats/overweight/overweight_adult.htm (accessed April 2, 2009).

4Health Affairs, March 2010; 29(3): 364-371.

At a Glance Steps for Using the CHI at Your Congregation

- **1.** Review the CHI sections and planning questions so you will have a good understanding of the whole process.
- **2.** Talk to your clergy or spiritual leader and your congregation's governing body about the CHI and get their support.
- 3. Identify a Wellness Team Coordinator to lead the CHI process.
- **4.** Recruit a Wellness Team to keep the CHI work moving along and to have a core group of people advocating for wellness.
- **5.** Gather your Wellness Team, clergy and other leaders to tell them about the CHI what it is and what your congregation could gain by using it. Together, <u>plan how to move forward</u>.
- **6.** Complete the Assessment Questions/Check Lists on Food in Your Congregation and Physical Activity in Your Congregation, in whatever way works best for your congregation. Just be sure to get input from your key leaders and a majority of members. Community conversations are one of the most important parts of this process. Note your results on the score cards.
- **7.** Complete the planning questions and use them to choose your top priority actions.
- **8.** Complete the Congregational Health Improvement Plan that helps you come up with steps for meeting each of your goals.
- 9. Make your action plan come to life! Ideally, the Wellness Team will continue meeting to keep track of and celebrate your progress and to make sure action items get done. The Team can also offer educational opportunities to help people adjust to and support the healthy changes at your congregation.

Instructions for Wellness Team Coordinators

Welcome to the Congregational Health Index (CHI) and thanks for volunteering your time to improve the health of your congregation. As the person who will coordinate the CHI process, you are:

- An individual who knows the congregational campus/facilities well and understands the decision-making process within the congregation;
- A good listener who does not try to push your own opinions on the group;
- An individual who is respected by participants and by the congregation's leadership; and
- A group facilitator who can keep meeting participants on task while making them feel good about their participation.

As the Wellness Team Coordinator and point person for the CHI work, you might be someone with a health-related background or someone who simply cares about the health of your congregation. For example, you could be a volunteer, parent, student, health educator or promoter, nurse, or nutritionist. Having a health background helps, but it is not essential, since your Wellness Team will bring additional skills, knowledge, and talents to the project. Also, the CHI provides accurate information on nutrition and recommendations for physical activity.

There is no single way to work through the CHI. Congregations will have many approaches, and you need to find the one that meets your congregation's needs. The most essential thing to remember is that completing the CHI should be a **group** effort: the strength of the process comes from having individuals from different parts of the congregational community sit down together and plan ways to work towards improving your congregation's facilities, policies, and practices to promote health. The connections and sense of community that develop among CHI participants are among the most important results of this process.

What follows are step-by-step instructions for the most common approaches taken by congregations using the CHI:

STEP 1: Familiarize yourself with the two sections (Food in Your Congregation and Physical Activity in Your Congregation), the score cards, planning questions 1-3, and the table for outlining your Health Improvement Plan.

At first it may seem like a lot of information, but once you look it over, you will start to understand the whole process. You will also see that taking the CHI one step at a time makes it much easier.

STEP 2: Talk to your clergy or spiritual leader and your congregation's governing body about the CHI and get their support.

Meet with your clergy and governing body to let them know about the CHI and why you would like your faith community to use it. Invite them to an orientation meeting so they can learn more (see Step 4). Ask for their support, in the meantime, to start recruiting a Wellness Team. Support from congregational leaders greatly improves commitment to the CHI process and to putting your Congregational Health Improvement Plan into action. Leaders can give the Wellness Team the power to implement healthy changes.

STEP 3: Begin forming a Wellness Team.

Your next step towards a healthier congregation is to identify a team of people who will be responsible for completing the CHI. You may choose to (1) create a new team or (2) use an existing team. Try to involve as many people from your congregation as you can in the Wellness Team. Diverse participation is important for an accurate assessment of your congregation as well as for successful planning and following through with healthy changes. You will likely add members to the Team as you do the CHI work, so it is fine to start off with just a couple of people, if that works best for you. Make a list of people that you may want to invite to join the Wellness Team. In addition to your clergy or spiritual leader, consider including parents and healthy role models, and people involved in:

- Religious education for children, youth and adults
- Worship
- Community ministry/outreach/social justice
- Parish nursing or health ministry
- Fellowship time or hospitality
- Events
- Building use and maintenance.

STEP 4: Meet with potential members of the Wellness Team and other leaders to tell them more about the CHI and to plan how to move forward together.

Invite leaders and potential Wellness Team members to a meeting to learn more about the CHI, even if they are not sure if they can be on the Team. For an outline of suggested points to cover during this introductory meeting, more information on obesity and chronic diseases, and tips for success with the CHI, go to http://faithandwellness.org.

Explain what the CHI is and possibly look over the questions together, talk about why working on obesity and chronic disease prevention is important, and what your congregation could gain by using the CHI. Make sure all Team members and leaders understand that

changing the environment as a whole at your faith community will be more effective and lasting than asking individuals to make healthy eating and activity choices on their own.

Team members should also understand that their work on the CHI can make a great difference in the lives of all congregants and people who are connected with your ministries, programs and events.

Finally, talk about ways you can do the CHI work. If your congregation's clergy and other spiritual leaders have not already come up with a process for moving forward, you can have the group at this introductory meeting, or just Team members, decide how to do that.

STEP 5: Complete the Assessment Questions on Food and Physical Activity, the Score Cards, and Planning Questions for each section.

There are many ways to complete these tasks, so choose what works best for your Wellness Team. Some congregations have their entire Wellness Team stay together to answer both sections of the assessment, sometimes in just one meeting. Others form sub-teams to work separately on each of the two sections. It is very important to have at least two people working on each section, which will increase accuracy and uncover a variety of creative ideas for improving congregational facilities, policies and practices.

Be sure to hold conversations with leaders and members of the congregation who are not on the Team. Involvement in the CHI can build community and you will need support from a range of people to be able to make healthy changes. You can share your Team's CHI answers and planning recommendations and get peoples' feedback after doing this part of the work at first yourselves. Or, you can invite most of your community to do the survey and planning questions together from start to finish, either at one meeting or several meetings. Just be sure to keep people informed.

Answer all questions as a group. You may have to talk it out to decide which answer makes the most sense for each question, but you need to come to an agreement. Think about circumstances at your congregation <u>right now</u>, not where you hope to be. Make sure participants understand that results are not meant to evaluate staff or volunteers or to compare congregations. The CHI is meant to show your congregation's strengths and ways you may want to improve the congregation's environment to support healthy choices.

Whoever is leading CHI discussions will need to photocopy the following documents and have them available at each conversation. If you prefer, you can use an online form to note your answers, available at: http://www.faithandwellness.org:

1) Section Discussion Questions, 2) Section Score Cards, and 3) Section Planning Questions.

Groups working on each section will:

• Answer the section Discussion Questions, one by one, and see what score you get for each question (based on how many boxes you check). Write the scoring results on the printed section Score Cards, or type answers into the online section Score Cards. If you are having more than one CHI conversation for either or both sections, you will need to combine scores – for each answer – and divide that total by the number of conversations. You want to end up with only one final check list answer per question, one final score for each question, and one final score card per section. If the average score does not come out evenly on some questions, the Wellness Team can decide what the final score will be.

It is possible that some questions might not be relevant for every congregation. If you are sure that this is the case, you may choose not to answer the question – just remember to adjust the total number of points possible to calculate the Overall Section Score (i.e., subtract 3 points from the Overall Section Score for each question you skip).

In many cases questions that seem to be irrelevant can be restated to become relevant, or it may be something you want to work towards in the future. For example, a question might ask about a congregation's gymnasium or dining area and your congregation does not have a gymnasium or cafeteria. However, if congregants eat meals or participate in physical activity somewhere on your congregation's campus, you can modify the question to make it fit your circumstances. If meals are cooked off-site, it might be harder for you to obtain information about food preparation practices and to influence those practices – but it can be done. Planning Question 3 will ask you to consider feasibility. Trying to influence meals that are cooked at home might not be a high priority for your faith community right now because it may score lower on feasibility than other action items, but maybe you will choose to work on that goal in the future once other changes have been successful.

- Review the section Score Card results to answer the section Planning Questions, either as a Team or during your CHI conversations, and
- Use the results from the third Planning Question to find the one, two, or three
 highest priority actions for each section that the Wellness Team will recommend
 for implementation within the year.

Please allow plenty of time to complete both sections, including the planning questions. You may find that some areas of each section can be completed quickly, while others may take longer. You will need at least one hour for the check lists and scoring and longer for planning. If you need additional information or assistance using the CHI, you can find out who to contact at: http://www.faithandwellness.org.

STEP 6: Complete the Overall Score Card.

Collect each section Score Card, and transfer the scores to the Overall Score Card.

STEP 7: Complete the Congregational Health Improvement Plan.

Some congregations choose to do this part as a Wellness Team first, before getting feedback from the rest of the congregation. At a Team meeting:

- Give a copy of the completed Overall Score Card to each participant;
- Review the Overall Score Card results;
- Discuss the recommendations for action in each section;
- Have participants work together to identify the top priority actions for the entire
 congregation and to complete the Congregational Health Improvement Plan
 (located in the Planning for Improvement section at the back of the CHI
 document). Most congregations will choose between two and four top priority
 actions to complete each year. You may decide to produce a brief report that lists
 all the recommended actions in each section; this report can guide future planning
 efforts;
- Discuss how you will inform the rest of your congregation, how you will monitor progress and when the Team will meet again.

STEP 8: The Wellness Team can meet regularly to check on progress and to keep making healthy changes at your congregation.

After completing your CHI assessment and planning work, ideally the Wellness Team will choose to keep meeting. The Team can make sure action items are being carried out and plan for future healthy changes. The Team can become an ongoing health ministry, where congregants can take their healthy eating and activity concerns or other health issues. Having a constant group to lead and sustain wellness efforts at your congregation is a good way to continue making improvements that will benefit everyone, and to start looking at needs in the wider community. Whether or not your Wellness Team continues, the policies and guidelines, new traditions, building and property improvements, and growing awareness and commitment to wellness should stick with your congregation after the CHI is done.

Our health is powerfully shaped by the places we work, learn, play and worship. Our daily environments make healthful diets and physical activity easier or harder to achieve. In recent decades, these environments have changed drastically, making it more challenging to maintain a healthy way of life in many communities. When fast food options are cheap and convenient, but healthy foods are not, and neighborhoods lack safe areas for outdoor play, our health suffers. With the right tools, we can change our immediate environments to make healthy choices the easy choices.

The Congregational Health Index invites your congregation's leaders and members to take a fresh look at your faith community's facilities, policies and practices – the many ways you eat, worship and play together and use your buildings and grounds. It is designed to be flexible enough to fit the unique circumstances, culture, and religious beliefs of your congregation.

The Congregational Health Index (CHI) is a self-assessment tool and planning guide that will enable you to:

- Identify the strengths and weaknesses of your congregation's facilities, policies, and practices for promoting health;
- Develop an action plan for improving congregation's facilities, policies, and practices, and;
- *Involve your faith community in implementing this improvement plan.*

Instructions for completing the section

- **1.** Make a photocopy of the Discussion Questions for each team member. Make at least one photocopy of the Score Card and the Planning Questions.
- **2.** Give each team member a copy of the Discussion Questions. Use the copies of the Score Card and the Planning Questions to record the team's work or use the online forms.
- **3.** At a Wellness Team meeting, or with a larger group or groups in your congregation:
 - Discuss each of the Discussion Questions and its scoring choices;
 - Arrive at a consensus score for each question. Skip or change any questions to reflect your congregation's needs, culture, and beliefs. If you don't have enough information to answer a question, leave it blank until later, when you can double check;
 - Record the scores (0-3) for each question on the Score Card and calculate the overall Score. If you decide to skip any of the topic areas, make sure you adjust the denominator for the Section by subtracting 3 for each question eliminated;
 - Use the scores written on the Score Card to complete the Planning Questions at the end of the section;
 - Use the results from the third Planning Question to identify the one, two, or three highest priority actions that you will recommend to your congregation's leadership and the entire community for implementation this year;
 - Use the answers to the Planning Questions to decide how you will present your results and recommendations to people in your congregation who were not part of the discussion.

We wish you success in your efforts to improve the health of your congregation!

Food in Your Congregation

Discussion Questions

Before you begin,	identify	where	meals	and	refreshments	are	offered.
Circle all that appl	y:						

Meetings

Fellowship Hour

Oneg Shabbat

Scripture Study or other small group programs

Weekly Events

Child Care

Fundraisers

Children and Youth Programs/Religious Education

Field Trips

Youth or Adult Retreats

Adult Religious Education

Special Events

Potlucks

Holidays/Traditions

Other _____

As you answer the questions below, be sure to consider meals and refreshments in these settings.

N.1 - Nutritious meals and refreshments

Does your congregation usually offer nutritious meals* and refreshments**?

*A congregation meal is a set of foods that make a full meal. This does not include refreshments.

** **Refreshments** mean a set of foods from which members can choose individual items that do not make a complete meal -- for example, refreshments served at social hour.

Nutrit	ious meals and refreshments mean (check all that apply):
	whole grains
	fruits and vegetables
	\prod foods low in saturated fat (less than 5-8 g per serving) and cholesterol (less than 200 mg per
	serving) and moderate in total fat (less than 15 g per serving)
	beverages and foods with moderate sugars (less than 15 g per serving)
	baked, broiled, or grilled chicken, fish, other lower-fats meats, or vegetarian selections (like
	beans or tofu)
	fried food is offered on a limited basis

Circle your score for this question and transfer it to the score card.

- 3 = Yes, usually all 6 healthy options available
- 2 = Four or five healthy options available
- 1 = One to three healthy options available
- 0 = No healthy options are usually available

N.2 - Healthy beverages available

Do congregation meals and refreshments usually include a variety of healthy beverage choices?

Health	y beverage choices mean (check all that apply):
	water or unsweetened tea
	diet or low-calorie beverages
	\square juice – fruit or vegetable that contains at least 50% juice
_	non-fat or 1% fat milk
	no regular soda

Circle your score.

- 3 = Yes, all five choices available
- 2 = Three to four choices available
- 1 = One to two choices available
- 0 = None of these choices available

N.3 - Meals include low-fat items

Do congregation meals usually include at least one low-fat* fruit, vegetable, whole grain, and dairy product?

NOTE: Congregation breakfasts should not be expected to include vegetables.

*Low-fat means items that contain no more than five grams of fat per serving. In most cases, fried potatoes, other fried foods, foods cooked with or covered with butter, margarine or lard, pies, cobblers, cookies, cakes, donuts, and other pastries are not low-fat.

Circle your score below.

- 3 = Yes, meals usually include at least one low-fat item from each of these four food groups
- 2 = Usually include at least one low-fat item from two or three of these food groups
- 1 = Usually include at least one low-fat item from one of these food groups
- 0 = Congregation meals do not usually include low-fat items from any of these four food groups

N.4 - Refreshment offerings include low-fat items

Do your refreshment offerings usually include at least one low-fat fruit, vegetable, whole grain, and dairy product?

Circle your score.

- 3 = Yes, refreshment offerings include at least one low-fat item from each of these four food groups
- 2 = Include at least one low-fat item from two or three of these food groups
- 1 = Include at least one low-fat item from one of these food groups
- 0 = Refreshment offerings do not include low-fat items from any of these four food groups

N.5 - Sites outside the dining area/fellowship or parish hall offer low-fat items

Do most or all sites outside your dining area/fellowship or parish hall* usually offer low-fat fruits, vegetables, whole grain, or dairy products?

*Examples o	fsites	outside	the dining	area/fellor	wship or	parish h	ıall include

- party rooms
- meeting rooms
- classrooms for extended day programs (i.e., congregation-sponsored after-school or pre-school programs, Vacation Bible School or summer camp)

	other:					
•	otner:					

Circle your score.

- 3 = Yes, most or all sites do offer low-fat items
- 2 = About half the sites offer low-fat items
- 1 = Fewer than half the sites offer low-fat items
- 0 = None of the sites offer low-fat items

N.6 - Food purchasing and preparation practices to reduce fat content

Does your congregation food service consistently use the following food purchasing and preparation practices to reduce the fat content of foods served? (check all that apply)

spoon solid fat from chilled meat and poultry broth before using
purchase lower fat items when ordering pre-prepared foods such as hamburgers,
pizza, chicken nuggets, etc.
rinse browned meat with hot water to remove grease before adding to other ingredients
remove skin from poultry before or after cooking
roast, bake, or broil meat rather than fry it
roast meat and poultry on a rack so fat will drain
use low-fat or reduced-fat cheese
prepare vegetables and greens using little or no fat
prepare beans and other foods using little or no lard
cook with nonstick spray or pan liners rather than with grease or oil
offer low-fat salad dressings
offer appropriate serving sizes for meats (3 ounces cooked)

Circle your score.

3 = Yes, uses eleven to twelve of these practices

,

- 2 = Uses seven to ten of these practices
- 1 = Uses four to six of these practices
- 0 = Uses three or fewer of these practices

N.7 - Healthy community meals/soup kitchen offerings

Do community meals/soup kitchen offerings usually include a variety of nutritious foods?

Nutritious foods mean (che	eck all that apply):
☐ whole grains	
\square fruits and vegetable	<i>28</i>
foods low in satura	ted fat (less than 5-8 g per serving) and cholesterol (less than 200 mg per
	in total fat (less than 15 g per serving)
	s with moderate sugars (less than 15 g per serving)
	rilled chicken, fish and other lower-fat meats, or vegetarian selections (like
beans or tofu)	······································
fried food is offered	on a limited hasis
	on withinted outer
Cincle very score	3 = Yes, meals usually include five to six healthy offerings
Circle your score.	2 = Meals usually include three to four healthy offerings
	1 = Meals usually include one or two healthy offerings
	0 = Meals include no healthy offerings
N.8 - Healthy emergence	y food assistance/food ministry offerings
Do emergency food assis	tance/food ministry offerings usually include a variety of
nutritious foods?	
y	
Nutritious foods mean (che	eck all that apply):
low-fat protein rici	h foods (i.e. soups, canned meats, canned or dried beans, or vacuum-
packed tofu)	
fried food is offered	l on a limited basis
	etable that contains at least 50% juice
fresh, frozen, dried	·
<u> </u>	l, and canned vegetables
	nilk (fresh or powdered)
foods containing u	·
	note gruins
3	= Yes, food assistance usually includes six to seven nutritious foods
	= Food assistance usually includes three to five nutritious foods
Circle your score.	= Food assistance usually includes one to two nutritious foods
	= Food assistance includes no nutritious foods
U	1 ood doordance metades no natitious toods

N.9 -	Healthy	snack	vending	machine	offerings
-------	---------	-------	---------	---------	-----------

Do snack vending machines offer healthy choices?

0	3
items with items with items with items with	an (check all that apply): no more than 35% of calories from fat (Nuts and seeds exempt.) no more than 10% of calories from saturated fat (Nuts and seeds exempt.) no more than 35% sugar by weight ngle serving size packages (no more than 200 calories per package)
Circle your score.	3 = Yes, vending machines include all four of these healthy choices 2 = Include three healthy choices 1 = Include one or two healthy choices 0 = No healthy choices included
Do beverage vend Healthy choices me no regular diet or low-	-calorie beverages t or vegetable that contains at least 50% juice
water (pla	flavor, non-fat or 1% fat in) e serving size (12 ounces maximum/ 8 ounces preferred)
Circle your score.	3 = Yes, vending machines offer five to six healthy choices 2 = Vending machines offer three to four healthy choices 1 = Vending machines offer one to two healthy choices 0 = Vending machines offer no healthy choices

N.11 - Clean, safe, pleasant dining area/fellowship or parish hall and kitchen

Does your congregation provide a clean, safe, and pleasant dining area/fellowship or parish hall and kitchen, according to the following criteria? (check all that apply)

physical structure (e.g., walls, floor covering) does not need repairs
tables and chairs are not damaged and are of appropriate size for all members
seating is not overcrowded (e.g., never more than 100% of capacity)
rules for safe behavior (e.g., no running, no throwing food or utensils) are enforced
tables and floors are cleaned between meals
age-appropriate decorations are used
appropriate practices are used to prevent excessive noise levels
smells are pleasant
full kitchen (e.g., refrigerator, oven, stove, sink, dishwasher, and microwave)
hand washing station/signs

Circle your score.

- 3 = Yes, dining area/fellowship or parish hall and kitchen provide all ten of these criteria
- 2 = Dining area/fellowship or parish hall and kitchen provide five to nine of these criteria
- 1 = Dining area/fellowship or parish hall and kitchen provide three or four of these criteria
- 0 = Dining area/fellowship or parish hall and kitchen provide two or fewer of these criteria

N.12 - Promote healthy food and beverage choices

Does your congregation promote food and beverage choices that are low in fat, salt, and added sugars through the following methods? (check all that apply)

promote healthy eating in bulletins and/or newsletters and other written or online
means of communication (i.e. website)
promote healthy eating in sermons and/or religious education and its connection to wellness
and faith
promote healthy eating in community events/workshops or other program areas
place healthy foods in more visible locations than less nutritious choices
offer healthy foods at lower prices than less nutritious choices
display nutritional information about available foods
\square display promotional materials such as posters that highlight the benefits of healthy eating
highlight healthy selections in menus that are distributed or posted
offer taste-testing opportunities
have fundraisers that promote healthy food and beverages
make congregation-wide audio or video announcements
have contests to promote healthy foods and beverages

Circle your score.

- 3 = Yes, healthy foods and beverages promoted through ten or more methods
- 2 = Healthy foods and beverages promoted through five to nine methods
- 1 = Healthy foods and beverages promoted through one to four methods
- 0 = Healthy foods and beverages are not promoted

Food in Your Congregation Notes and Questions Page

Use this space to make notes as you go through the discussion questions.

If you have questions, please talk to your Wellness Team Coordinator.

Score Card

(photocopy before using)

Instructions

- 1. Carefully read and discuss the Food in Your Congregation Discussion Questions, which include questions and scoring descriptions for each item listed on this Score Card.
- **2.** Circle the most appropriate score for each item.
- **3.** After all questions have been scored, calculate the overall Score and complete the Planning Questions at the end of this section.

	Fully in Place	Partially in Place	Under- Develop ment	Not in Place
N.1 Nutritious meals and refreshments	3	2	1	0
N.2 Healthy beverages available	3	2	1	0
N.3 Meals include low-fat items	3	2	1	0
N.4 Refreshments include low-fat items	3	2	1	0
N.5 Sites outside dining area/fellowship or parish hall offer low-fat items	3	2	1	0
N.6 Food purchasing and preparation practices to reduce fat content	3	2	1	0
N.7 Healthy community meals/soup kitchen offerings	3	2	1	0
N.8 Healthy emergency food assistance/food ministry offering	ngs 3	2	1	0
N.9 Healthy snack vending machines	3	2	1	0
N.10 Healthy beverage vending machines	3	2	1	0
N.11 Clean, safe, pleasant dining area/fellowship or parish ha and kitchen	11 3	2	1	0
N.12 Promote healthy food and beverage choices	3	2	1	0
COLUMN TOTALS: For each column, add up the numbers that are circled and enter the sum in this row.				
(If you decide to skip any of the topic areas, the make sure you adjust the denominator for the	TOTAL POINTS: Add the four sums above and enter the total to the right. SCORE = (Total Points/36) x 100			
				0/0

Planning Questions (photocopy before using)

The Planning Questions will help your congregation use its CHI results to identify and prioritize changes that will improve your facilities, policies and practices to promote members' health.

Planning Question 1

Look back at the scores you assigned to each question. According to these scores, what are the *strengths* and the *weaknesses* of your congregation's facilities, policies and practices?

Planning Question 2

For each of the weaknesses identified above, list several recommended actions to improve the congregation's scores (e.g. offer only juice and water in vending machines).

Planning Question 3

List each of the actions identified in Planning Question 2 on the table below. Use the five-point scales defined below to rank each action based on five factors (*importance*, cost, time, commitment & feasibility). Add the points for each action to get the total points. Use the total points to help you choose one, two or three top priority actions that the Wellness Team will recommend for implementation this year.

Importance	How important is the action to my congregation?			
	5=Very important	3=Moderately important	1=Not important	
Cost	How expensive would it be to plan and in	nplement the action?		
	5=Very inexpensive	3=Moderately expensive	1=Very expensive	
Time	How much time and effort would it take	to implement the action?		
	5=Little or no time and effort 3=Moderate time and effort 1=			
	ime and effort			
Commitment	How enthusiastic would my faith community be about implementing the action?			
	5=Very enthusiastic	3=Moderately enthusiastic	1=Not	
	enthusiastic			
Feasibility	How difficult would it be to complete the action?			
	5=Not difficult	3=Moderately difficult	1=Very difficult	

						Total	Top Priority Action?
Actions	Importance	Cost	Time	Commitment	Feasibility	Points	Action?
			_			_	

Our health is powerfully shaped by the places we work, learn, play and worship. Our daily environments make healthful diets and physical activity easier or harder to achieve. In recent decades, these environments have changed drastically, making it more challenging to maintain a healthy way of life in many communities. When fast food options are cheap and convenient, but healthy foods are not, and neighborhoods lack safe areas for outdoor play, our health suffers. With the right tools, we can change our immediate environments to make healthy choices the easy choices.

The Congregational Health Index invites your congregation's leaders and members to take a fresh look at your faith community's facilities, policies and practices – the many ways you eat, worship and play together and use your buildings and grounds. It is designed to be flexible enough to fit the unique circumstances, culture, and religious beliefs of your congregation.

The Congregational Health Index (CHI) is a self-assessment tool and planning guide that will enable you to:

- Identify the strengths and weaknesses of your congregation's facilities, policies, and practices for promoting health;
- Develop an action plan for improving congregation's facilities, policies, and practices, and;
- *Involve your faith community in implementing this improvement plan.*

Instructions for completing the section

- **4.** Make a photocopy of the Discussion Questions for each team member. Make at least one photocopy of the Score Card and the Planning Questions.
- **5.** Give each team member a copy of the Discussion Questions. Use the copies of the Score Card and the Planning Questions to record the team's work or use the online forms.
- **6.** At a Wellness Team meeting, or with a larger group or groups in your congregation:
 - Discuss each of the Discussion Questions and its scoring choices;
 - Arrive at a consensus score for each question. Skip or change any questions to reflect your congregation's needs, culture, and beliefs. If you don't have enough information to answer a question, leave it blank until later, when you can double check;
 - Record the scores (0-3) for each question on the Score Card and calculate the overall Score. If you decide to skip any of the topic areas, make sure you adjust the denominator for the Section by subtracting 3 for each question eliminated;
 - Use the scores written on the Score Card to complete the Planning Questions at the end of the section:
 - Use the results from the third Planning Question to identify the one, two, or three highest priority actions that you will recommend to your congregation's leadership and the entire community for implementation this year;
 - Use the answers to the Planning Questions to decide how you will present your results and recommendations to people in your congregation who were not part of the discussion.

We wish you success in your efforts to improve the health of your congregation!

Discussion Questions

PA.1 - Built environment supports physical activity

Are the following features of the built environment* currently available on your congregational campus?

*Built environment - In the congregational setting, please consider only the immediate property the congregation occupies and facilities located on the campus. For example, the built environment may include walking trails, open/green space, sidewalks, playgrounds, and recreational rooms. For a complete definition of the built environment, please see the Glossary. In some cases, congregations may also have access to nearby schools or other facilities through joint use agreements; include these facilities as though they were part of your congregational space.

What are the conditions at your congregation that support physical activity? Features of the <u>built</u> <u>environment</u> which support physical activity (*check all that apply*):

	continuous sidewalks on congregation property
	paved or otherwise marked walkway on congregation campus
	walking track or trail on congregation campus
	pedestrian scale lighting along sidewalks or walking paths
	standard bicycle racks (e.g. inverted U, post and loop, or A rack)
	modified bicycle parking or shelter (e.g. railings, posts)
	green/natural space
	stairwells or staircases
	garden space for congregation and community
	vacant land or lot (e.g. paved, graveled, potential use for play)
	skate park
	gymnasium
	swimming pool
	open field (e.g. track, soccer)
	recreational room (indoor or outdoor) that could be used for physical activity (e.g. room that
coi	ıld be used for stretching/ yoga class, dance class)
	playgrounds (e.g. swing sets, tether ball, fixed play equipment)
	outdoor marked courts (e.g. tennis, basketball, hopscotch, four square)
	other (please explain)

Circle your score for this question and transfer it to the score card.

3 = Most (thirteen to seventeen) features are present on our campus

2= Many (eight to twelve) features are present on our campus

1 = Few (three to seven) features are present on our campus

0 = Two or fewer features are present on our campus

PA.2 - Physical activity equipment

What <u>equipment</u> is available in your congregation that is used for – or could be used for – physical activity? (check all that apply)

free weights (e.g. hand weights, dumbbells)
stationary exercise machines (treadmills, elliptical machines, stair steppers)
rolling sports set(s) with nets and balls (e.g. basketball, tennis, volleyball, badminton,
soccer, croquet, bocce ball, horseshoes)
table sports (ping pong, air hockey, foosball)
activity/aerobic equipment sets (e.g. hula hoops, jump rope, balls, frisbees)
chalk (for parking lot games, such as hopscotch)
dynabands (e.g. rubber bands for stretching)
bicycles/tricycles/roller skates/scooters/skateboards
helmets
gardening and landscaping tools
pedometers or step counters
stereo/sound system
other (please explain)
· · · ·

Circle your score.

- 3 = Most or all (ten to twelve) equipment options are available at our congregation
- 2 = Many (seven to nine) equipment options are available at our congregation
- 1 = Few (four to six) equipment options are available at our congregation
- 0 = Three or fewer equipment options are available at our congregation

PA.3 - Promote	physical	activity
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PA.3 - Promote pr	lysical activity
Does your congrega	tion promote physical activity through the following methods?
(check all that apply)	
(encent un num uppry)	
	usical activity in bull sting and/on a graphethous and other positions on ordina
, , ,	ysical activity in bulletins and/or newsletters and other written or online
	mmunication (e.g. website)
	egation-wide audio or video announcements
	ysical activity in community events/workshops or other program areas
🔲 display pror	notional materials such as posters highlighting benefits of
physical acti	vity (e.g. using staircases)
<u>—</u> : •	l messages feature guidelines* for recommended physical activity
	rship/religious education include messages about the importance of
	ivity and its connection to wellness and faith
	ivity (e.g. active games, sports, group walks, dances, stretching) is a part of
	community-building/social time
<u> </u>	sical activity in events/workshops that are open to the public and the
congregatio	
	days and open hours are offered (outside of worship days) for children,
	d public for recreational use ** of facilities
	efforts include physical activity opportunities (e.g. fundraiser to purchase
physical act	ivity equipment for youth or the event itself promotes physical activity, such as
running or	walking a certain distance to raise money).
	ts to promote physical activity
	nd celebrate clergy and congregation members for physical activity
accomplishr	
иссопіризні	TETTO
*TT1 2000 C	
	Disease Control and Prevention's Physical Activity Guidelines for
	commendations for adults, children, and older adults to reduce the risk of overweight
and/or obesity and rela	ted chronic diseases (please see Appendix 3 for complete guidelines).
**Recreational use re	efers to usage of any of the above facilities during hours outside of worship.
	:
	3 = Most or all (ten to twelve) promotional strategies are used
rcle your score.	2 = Many (six to nine) promotional strategies are used
icic your score.	1 = Few (two to five) promotional strategies are used
	0 = One or none of the promotional strategies are used
	O VIIC OF HORE OF THE DIVINOUNIAL SHAREFIES ARE USED.

PA.4 - Clean and plea	asant environment for physical activity
Does the congregation	provide <u>clean and pleasant facilities and environment</u> for physical
activity that meet the	following criteria?
(check all that apply)	
adequate space if facilities are clean noise levels are clean storage for phys cleaning supplies kept in a secure physical activity ramps, railings the environmen facility equipme layout, and height	I facilities are accessible for people of different abilities (e.g. include on staircases) It is monitored to reduce exposure to potential allergens or irritants Int is appropriate for all ages (designs should consider scale of equipment, which the based on age, for example, platforms, guardrails, and protective barriers) If spaces are appropriate for the customs of your faith tradition
Circle your score.	3 = Most or all (eight to eleven) criteria are met 2 = Many (five to eight) criteria are met 1 = Few (two to four) criteria are met 0 = One or none of these criteria are met
PA.5 - Physical activi NOTE: Please disregar (check all that apply)	ty facilities are safe ed any standard that is not relevant for your campus
playgrounds an where appropria standards for de slip resistant su all staircases ine facilities reduce padded gym wa pools designed, physical activity	the risk of injury (e.g. protective surfacing on playground equipment, lls and equipment) constructed, and retrofitted to eliminate entrapment gopen hours are supervised by a clergy member or member of
congregation w	ith an appropriate child/adult ratio

Circle your score.

3 = Most or all (seven to nine) safety features are in place

2 = Many (four to six) safety features are in place

1 = Few (one to three) safety features are in place

0 = No safety features are in place

rules for safe behavior and risk of injury are posted rules for safe behavior and risk of injury are enforced

Physical Activity in Your Congregation Notes and Questions Page

Use this space to make notes as you go through the discussion ques	tions.
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If you have questions, please talk to your Wellness Team Coordinator.

Score Card

(photocopy before using)

Instructions

- **1.** Carefully read and discuss Physical Activity in your Congregation Discussion Questions, which include questions and scoring descriptions for each item listed on this Score Card.
- **2.** Circle the most appropriate score for each item.
- **3.** After all questions have been scored, calculate the overall Score and complete the Planning Questions at the end of this section.

	Fully in Place	Partially in Place		Not in Place
PA.1 Built environment supports physical activity	3	2	1	0
PA.2 Physical activity equipment available	3	2	1	0
PA.3 Promote physical activity	3	2	1	0
PA.4 Clean and pleasant environment for physical	3	2	1	0
activity				
PA.5 Physical activity facilities are safe	3	2	1	0

COLUMN TOTALS:		
For each column, add up the numbers that are circled and enter the sum in		
this row.		
	TOTAL POINTS: Add the four	
(If you decide to skip any of the topic	sums above and enter the total	
areas, make sure you adjust the	to the right.	
denominator for the Score (15) by	_	
subtracting 3 for each question	SCORE = (Total Points/15) x	0/0
eliminated).	100	70

Physical Activity in Your Congregation

Planning Questions

(photocopy before using)

The Planning Questions will help your congregation use its CHI results to identify and prioritize changes that will improve your facilities, policies and practices to promote congregants' health.

Planning Question 1

Look back at the scores you assigned to each question. According to these scores, what are the *strengths* and the *weaknesses* of your congregation's facilities, policies and practices?

Planning Question 2

For each of the weaknesses identified above, list several recommended actions to improve the congregation's scores (e.g. build a bike rack).

Continued on next page

Physical Activity in Your Congregation

Planning Question 3

List each of the actions identified in Planning Question 2 on the table below. Use the five-point scales defined below to rank each action based on five factors (*importance*, *cost*, *time*, *commitment* & *feasibility*). Add the points for each action to get the total points. Use the total points to help you choose one, two or three top priority actions the Wellness Team will recommend for implementation this year.

Importance	How important is the action to my congrega	tion?					
	5=Very important	3=Moderately important	1=Not important				
Cost	How expensive would it be to plan and impl	ement the action?					
	5=Very inexpensive	3=Moderately expensive	1=Very				
	expensive						
Time	How much time and effort would it take to implement the action?						
	5=Little or no time and effort	3=Moderate time and effort	1=Very great				
	time and effort						
Commitment	How enthusiastic would my congregation b	e about implementing the action?					
	5=Very enthusiastic	3=Moderately enthusiastic	1=Not				
	enthusiastic						
Feasibility	How difficult would it be to complete the ac	tion?					
	5=Not difficult	3=Moderately difficult	1=Very difficult				

						Total	Top Priority Action?
Actions	Importance	Cost	Time	Commitment	Feasibility	Points	Action?

Congregational Health Index

Overall Score Card

For each section, write an X in the column where the section score falls.

	Low		Medium		High
	0-20 %	21 % - 40%	41 % - 60%	61% - 80%	81 % - 100 %
Food in Your					
Congregation					
Section 1					
Physical Activity					
in Your					
Congregation					
Section 2					

Congregational Health Index Improvement Plan

Instructions

Your improvement plan is a road map to help you achieve policy and environmental changes in your congregation. Your improvement plan will help your Wellness Team monitor progress towards agreed upon goals discussed in the **Planning Questions** for each section.

- 1. In the first column: list, in priority order, the actions that the *Congregational Wellness Team* has agreed to implement.
- 2. In the second column: list the specific steps that need to be taken to implement each action.
- 3. In the third column: list the people who will be responsible for each step and when the work will be completed.

ACTIONS	STEPS	BY WHOM AND WHEN
	A	
	B	
	C	
	D	
	E	
	F	

2.	A	
	B	
	C	
	D	
	E	
	F	
3.		
0.	A	
	B	
	C	
	D	
	F	
	E	
	F	

4.	A	
5.	A	

Appendix 1

Resources

Food in your Congregation

Action for Healthy Kids

www.actionforhealthykids.org

Action for Healthy Kids is a national non-profit organization aimed at improving physical activity and nutrition by focusing on changes in the school environment. Model wellness policy tools, and state by state information is provided on their website.

African-American Churches Eating Smart and Moving More: A Planning and Resource Guide/East Smart, Move More NC

http://www.eatsmartmovemorenc.com/Faith.html

This planning and resource guide – one of many resources for faith communities on this website – provides African American church staff and members, health department staff, community partners and others with information and tools to plan and conduct multi-level nutrition and physical activity programs in the church.

Alliance for a Healthier Generation www.healthiergeneration.org

The Alliance for a Healthier Generation is a partnership between the American Heart Association and the William J. Clinton Foundation. The Alliance offers programs for both public and private partnerships to promote health.

American Community Gardening Association www.communitygarden.org

The American Community Gardening Association (ACGA) is a bi-national nonprofit membership organization of professionals, volunteers and supporters of community greening in urban and rural communities. ACGA provides networking, publications, trainings and annual conferences to assist community garden organizations across the United States and Canada.

American Dietetic Association www.eatright.org

The American Dietetic Association provides educational materials and speakers on healthy eating topics.

The American Heart Association www.americanheart.org/

The American Heart Association provides educational materials, local programs, toolkits, and speakers to talk about nutrition and heart disease. You can request information and materials on the website.

American Public Health Association www.apha.org

American Public Health Association (APHA) builds a collective voice for public health, working to ensure access to health care, protect funding for core public health services and eliminate health disparities, among myriad other issues. APHA communicates the latest public health science and practice to members, opinion leaders and the public. They also publish the *American Journal of Public Health* and the *Nation's Health*.

Body & Soul: A Celebration of Healthy Eating and Living rtips.cancer.gov/rtips/viewProduct.do?viewMode=product&productId=257631

Body & Soul is a wellness program developed by African American churches. The program empowers church members to eat a diet rich in fruits and vegetables every day for better health. It contains tools and handouts on how to create a Body & Soul program to fit your congregation.

California Center for Public Health Advocacy www.publichealthadvocacy.org/

California Center for Public Health Advocacy provides a number of resources for policy reform at the state and local level, trends and background reports on the national obesity epidemic and related chronic diseases, and tactics and strategies that build momentum for policy change.

Centers for Disease Control and Prevention www.cdc.gov

Centers for Disease Control and Prevention (CDC) provides resources on many health topics, and intervention and promotional materials to help communities, non-profits, and government agencies prepare presentations, implement wellness practices, and conduct other health promotion interventions. CDC has updated its fruits and vegetables website to reflect the new Fruits & Veggies-More Matters TM campaign, which takes the place of the 5 A Day program. Visit www.fruitsandveggiesmatter.gov for more information.

Center for Science in the Public Interest http://www.cspinet.org/nutritionpolicy/

Center for Science in the Public Interest has been a strong advocate for nutrition and health, food safety, alcohol policy, and sound science. CSPI has long sought to educate the public, advocate for government policies that are consistent with scientific evidence on health and environmental issues, and counter industry's powerful influence on public opinion and public policies.

Community Food Security Coalition www.foodsecurity.org

The Community Food Security Coalition (CFSC) is a North American membership-based coalition of diverse people and organizations working from the local to international levels to build community food security. CFSC is a national leader in food and farm policy strategies to improve community food security.

Community Health Partnership: Oregon's Public Health Institute www.communityhealthpartnership.org

CHP: OPHI, founded in 1999, is a not-for-profit organization whose mission is to improve the health of Oregonians through advocacy and support of effective public health policy and activities. The organization's current focus is on the prevention of childhood obesity.

Ecumenical Ministries of Oregon: Interfaith Food and Farms Partnership and Congregational Wellness Project

www.emoregon.org/food_farms.php www.faithandwellness.org

Ecumenical Ministries of Oregon (EMO) is a regional faith-based group focused on interfaith dialogue, community services, advocacy and environmental ministries. The mission of EMO's Interfaith Food and Farms Partnership (IFFP) is to empower faith communities, farmers and neighborhoods to build urban-rural alliances and create innovative partnerships for just and sustainable food systems that promote community health. It provides on-line manuals for organizing farm-to-congregation partnerships to increase neighborhood access to fresh, local produce for all and on how to use congregational assets such as kitchens, land, meeting space and land to enhance food security at: www.emoregon.org/food_farms.php.

The Congregational Wellness Project, which focuses on shifting the eating and physical activity environment at congregations through policies, practices and building and grounds use, was created by IFFP. The project website: faithandwellness.org, offers an assessment tool (Congregational Health Index), resources, and best practices for healthy eating and active living on your congregational campus.

Healthy Eating by Design

www.activelivingbydesign.org/category/initiatives/healthy-eating-design

A national program sponsored by the Robert Wood Johnson Foundation to create opportunities for healthy eating by implementing changes to the built environment (places we live, work, and play). Case studies, community profiles, and many resources are available to help you start initiatives in your own community.

Healthy Vending Guidelines (San Antonio Bexar County Community Health Collaborative) www.healthcollaborative.net/assets/pdf/vendingcriteria.pdf

An exemplary model vending machine policy with guidelines for food and beverage selections and rationale.

Let's Move!

www.letsmove.gov

The *Let's Move!* campaign, started by First Lady Michelle Obama, has an ambitious national goal of solving the challenge of childhood obesity within a generation so that children born today will reach adulthood at a healthy weight. *Let's Move!* is a comprehensive approach that engages every sector impacting the health of children and provides schools, families and communities with simple tools and suggestions to help kids be more active, eat better, and get healthy. You can sign up to receive email updates and tips for healthy living.

National Dairy Council

www.nationaldairycouncil.org

National Dairy Council focuses on providing general nutrition information and recipes for low-fat dairy options.

National Food Service Management Institute http://www.nfsmi.org/

The mission of the National Food Service Management Institute is to provide information and services that promote the continuous improvement of child nutrition programs. The Institute takes its programs and services nationwide through seminars and workshops, satellite presentations, teleconferences, participation at professional meetings and conferences, and via the NFSMI website.

(Oregon) Healthy Worksites Initiative www.oregon.gov/DHS/ph/worksites/toolkit/index.shtml

Resources on the Oregon Department of Human Services' website will give you tools to improve the health of your employees and make your organization a healthier place to work. Try the New Hampshire Department of Health and Human Services' workplace wellness page too: http://www.dhhs.state.nh.us/DHHS/NHP/worksite.htm and the Centers for Disease Control and Prevention's Healthier Worksite Initiative page: http://www.cdc.gov/nccdphp/dnpao/hwi/index.htm.

United States Department of Agriculture, Food and Nutrition Services/My Food Pyramid http://www.fns.usda.gov/fns/

The Food and Nutrition Services of the USDA provides a number of resources for governments, schools, and communities on food and nutrition guidelines and recommendations, and promotional materials including an online program using the Food Pyramid to plan healthy meals for all ages at http://mypyramid.gov/index.html. They also have a soul food pyramid and one in Spanish.

Resources

Physical Activity in your Congregation

Action for Healthy Kids

http://www.actionforhealthykids.org/

Action for Healthy Kids is a national non-profit organization aimed at improving physical activity and nutrition by focusing on changes in the school environment. Model wellness policy tools, and state by state information is provided on their website.

Active Living by Design

http://www.activelivingbydesign.org/

A program sponsored by the Robert Wood Johnson Foundation to create opportunities for active living by implementing changes to the built environment (places we live, work, and play). Case studies, community profiles, and many resources to help you start initiatives in your own community.

African-American Churches Eating Smart and Moving More: A Planning and Resource Guide/Eat Smart, Move More NC

http://www.eatsmartmovemorenc.com/Faith.html

This planning and resource guide – one of many resources for faith communities on this website – provides African American church staff and members, health department staff, community partners and others with information and tools to plan and conduct multi-level nutrition and physical activity programs in the church.

Alliance for a Healthier Generation

www.healthiergeneration.org/

The Alliance for a Healthier Generation is a partnership between the American Heart Association and the William J. Clinton Foundation. The Alliance offers programs for both public and private partnerships to promote health.

American Alliance for Health, Physical Education, Recreation & Dance www.aahperd.org/

The American Alliance for Health, Physical Education, Recreation and Dance (AAHPERD) is the largest organization of professionals supporting and assisting those involved in physical education, leisure, fitness, dance, health promotion, and education and all specialties related to achieving a healthy lifestyle.

American Community Gardening Association www.communitygarden.org/

The American Community Gardening Association (ACGA) is a bi-national nonprofit membership organization of professionals, volunteers and supporters of community greening in urban and rural communities. ACGA provides networking, publications, trainings and annual conferences to assist community garden organizations across the United States and Canada.

American Public Health Association www.apha.org/

American Public Health Association (APHA) builds a collective voice for public health, working to ensure access to health care, protect funding for core public health services and eliminate health disparities, among myriad other issues. APHA communicates the latest public health science and practice to members, opinion leaders and the public. They also publish the *American Journal of Public Health* and the *Nation's Health*.

California Center for Public Health Advocacy www.publichealthadvocacy.org/

California Center for Public Health Advocacy provides a number of resources for policy reform at the state and local level, trends and background reports on the national obesity epidemic and related chronic diseases, and tactics and strategies that build momentum for policy change.

The Center on Media and Child Health www.cmch.tv/

The Center on Media and Child Health at Children's Hospital Boston, Harvard Medical School, and Harvard School of Public Health is dedicated to understanding and responding to the effects of media on the physical, mental, and social health of children through research, production, and education. The site provides the latest news and research on the issue and how families can use media in a healthy way.

Centers for Disease Control and Prevention www.cdc.gov/

Centers for Disease Control and Prevention provides resources on many health topics, and intervention and promotional materials to help communities, non-profits, and government agencies prepare presentations, implement wellness practices, and conduct other health promotion interventions.

Centers for Disease Control and Prevention, National Center for Injury Prevention and Control www.cdc.gov/injury/index.html

The National Center for Injury Prevention and Control aims to prevent injuries and violence, and reduce their consequences. This site offers injury reduction publications, research materials, and profiles of state programs.

Community Health Partnership: Oregon's Public Health Institute www.communityhealthpartnership.org

CHP: OPHI, founded in 1999, is a not-for-profit organization whose mission is to improve the health of Oregonians through advocacy and support of effective public health policy and activities. The organization's current focus is on the prevention of childhood obesity.

Ecumenical Ministries of Oregon: Interfaith Food and Farms Partnership and Congregational Wellness Project

www.emoregon.org/food_farms.php www.faithandwellness.org

Ecumenical Ministries of Oregon (EMO) is a regional faith-based group focused on interfaith dialogue, community services, advocacy and environmental ministries. The mission of EMO's Interfaith Food and Farms Partnership (IFFP) is to empower faith communities, farmers and neighborhoods to build urban-rural alliances and create innovative partnerships for just and sustainable food systems that promote community health. It provides on-line manuals for organizing farm-to-congregation partnerships to increase neighborhood access to fresh, local produce for all and on how to use congregational assets such as kitchens, land, meeting space and land to enhance food security at: www.emoregon.org/food_farms.php.

The Congregational Wellness Project, which focuses on shifting the eating and physical activity environment at congregations through policies, practices and building and grounds use, was created by IFFP. The project website: faithandwellness.org, offers an assessment tool (Congregational Health Index), resources, and best practices for healthy eating and active living on your congregational campus.

Injury Free Coalition for Kids www.injuryfree.org/

The Injury Free Coalition for Kids is a national program of the Robert Wood Johnson Foundation comprised of hospital-based, community-oriented programs, whose efforts are anchored in research, education, and advocacy.

Kaiser Permanente Northwest

https://members.kaiserpermanente.org/kpweb/detailPage.do?cfe=288&html=/htmlapp/feature/288childrenshealth/nat_tvturnoff.html&rop=KNW

The site provides reasons parents may want to limit children's screen time and other media use and gives practical tips on how to start cutting back along with alternative activities. You can download a toolkit in English or Spanish, with fact sheets, forms to track how much screen time and other media use kids are actually getting, and activities for screen-free weeks and campaigns for children, parents and teachers.

Let's Move!

www.letsmove.gov

The *Let's Move!* campaign, started by First Lady Michelle Obama, has an ambitious national goal of solving the challenge of childhood obesity within a generation so that children born today will reach adulthood at a healthy weight. *Let's Move!* is a comprehensive approach that engages every sector impacting the health of children and provides schools, families and communities with simple tools and suggestions to help kids be more active, eat better, and get healthy. You can sign up to receive email updates and tips for healthy living.

National Association for Sports and Physical Education www.aahperd.org/Naspe/

The National Association for Sport and Physical Education's mission is to enhance knowledge, improve professional practice, and increase support for high quality physical education, sport, and physical activity programs through research, development of standards, and dissemination of information.

National Wildlife Federation/Get Outside page http://www.nwf.org/Get-Outside.aspx

On this website in the Get Outside section, you can use the "NatureFind" searchable database to find outdoor activities or events, parks and open spaces in every part of the country. Search by state, zip code, type of recreation, and type of natural area. The web page also offers general ideas on how to enjoy the outdoors to "refresh us and reconnect us with nature and wildlife" such as by observing wildlife, gardening, exercising, camping and through nature photography. Volunteer opportunities and actions families and institutions can take to make a difference for wildlife and nature are also featured.

No Child Left Inside (NCLI) Program/and NCLI Act

Nochildleftinside.org (at the time of printing, this website was temporarily shut down). See: http://www.ct.gov/dep/cwp/view.asp?a=3900&q=335880&depNav_GID=1642 if that is still the case.

No Child Left Inside ® is a national program launched in 2006 to reconnect children to the wonder of nature – for their own health and well-being (since research shows kids suffer health problems, including obesity, from too much sedentary time indoors) and for the future of environmental conservation. If children are not familiar with the outdoors, they will not be inspired to protect nature. The program, which is carried out by varying public and private organizations state by state, grew out of Richard Louv's 2005 book *Last Child in the Woods: Saving Our Children from Nature-Deficit Disorder*. Congress is currently considering the No Child Left Inside Act (H.R. 2054/S.866) that would provide national funding for environmental education and for designating the topic as a core subject area, so that students will be prepared to understand future environmental challenges. Check the above websites or do a general web search to find NCLI programs in your area.

(Oregon) Healthy Worksites Initiative

www.oregon.gov/DHS/ph/worksites/toolkit/index.shtml

Resources on the Oregon Department of Human Services' website will give you tools to improve the health of your employees and make your organization a healthier place to work. Try the New Hampshire Department of Health and Human Services' workplace wellness page too: http://www.dhhs.state.nh.us/DHHS/NHP/worksite.htm and the Centers for Disease Control and Prevention's Healthier Worksite Initiative page: http://www.cdc.gov/nccdphp/dnpao/hwi/index.htm.

Peaceful Playgrounds

www.peacefulplaygrounds.com/

The purpose of the Peaceful Playground Program is to introduce children and school staff to the many choices of activities available on playgrounds and field areas and to help schools implement them. The organization offers activity guides, blacktop stencils, tips on grant writing to fund new equipment and "playground blueprints" to assist schools with measurements, layout, spacing and game placement.

Take a Child Outside www.takeachildoutside.org

Take a Child Outside Week happens from September 24 – September 30 annually. The program is an initiative of the North Carolina Museum of Natural Sciences and is held in cooperation with partner organizations across the U.S. and Canada. The program is "designed to help break down obstacles that keep children from discovering the natural world. By arming parents, teachers and other caregivers with resources on outdoor activities, our goal is to help children across the country develop a better understanding and appreciation of the environment in which they live, and a burgeoning enthusiasm for its exploration." Suggested lessons and activities available on the site include: simple activities for all ages and seasons, animal signs and observations, Trees and Other Plants: Activities that facilitate the exploration of woods and fields and After the Sun Goes Down: Activities that involve discovering the night world.

United States Department of Agriculture (USDA)/My Activity Pyramid http://mypyramid.gov/pyramid/physical_activity.html

The USDA provides a number of wellness resources for governments, schools, and communities, including physical activity guidelines and recommendations and promotional materials. The above link is an online program using an "Activity Pyramid" to plan physical activity for all ages.

United States Consumer Product Safety Commission www.cpsc.gov/

The Consumer Product Safety Commission provides standard safety guidelines for product and equipment usage, and announcements about product recalls. You can sign up for recall alerts.

Appendix 2

Glossary

Advocacy – A broad term for organized activism related to a particular set of issues. Speaking out on issues of concern. Advocacy can mean something as formal as sitting down and talking to your legislator, talking to your congregation about a change in practice, or as simple as telling your neighbor about the impact of a law.

Body Mass Index (BMI) – An index of a person's weight in relation to their height determined by dividing the weight by the square of the height (in other words: weight divided by height x height). BMI of greater than 25 is considered overweight, BMI of greater than 30 is considered obese. BMI is a useful tool for determining the prevalence (frequency) of overweight in populations.

Built Environment – Includes buildings, roads, utilities, homes, fixtures, parks and all other human-made entities that form the physical characteristics of a community or property.

Congregational Environment – The primary space for worship and the practices and policies within that setting. Includes the immediate property the congregation occupies and facilities located on the campus. It can also include nearby buildings the congregation uses regularly through a joint use agreement with a school or other organization.

Dynaband – A resistive strength training product which also helps to tone and condition the body.

Food Insecurity – Limited or uncertain availability of nutritionally adequate, culturally appropriate and safe foods, or limited or uncertain ability to acquire acceptable foods in a socially acceptable way.

Joint Use Agreement – Joint use agreements create a partnership between two or more organizations, often school districts and local government agencies, to open up spaces such as playgrounds, athletic fields, pools, and gymnasiums to the community outside of school hours, or to open up community facilities to schools at a reduced cost or for free. Faith communities, too, can open their buildings and grounds to increase physical activity options for community members and non-profit groups like after-school programs, and they can arrange to regularly use nearby properties to promote congregants' health. Joint use partnerships can be formal (based on a legal document)

(continued)

Glossary

Joint Use Agreement (*continued*) - or informal (based on a conversation and a handshake), but formal agreements offer increased protection for both the facility and the community group using the facility. Since staffing can change over time, personal relationships are not the most secure way to guarantee access to facilities into the future. A formal agreement can also help prevent conflicts related to maintenance, operations, liability, ownership or cost. *Definition excerpted from http://jointuse.org*.

Light Pollution – "Artificial lighting that shines where it is neither needed nor wanted." Such inefficient lighting has many detrimental effects on human health, wildlife, the natural environment, and energy consumption. Light pollution also reduces the ability to see stars at night and to make astronomical observations. In general, lights should be directed to the area in use and shielded to prevent glare, since glare decreases visibility, especially for older adults and the visually impaired. *Definition from A Dictionary of Astronomy*, 1997. *Encyclopedia.com*. 21 Jun. 2010. http://www.encyclopedia.com.

Pedestrian-scale Lighting - Streetlights lining sidewalks - either overhead or laterally - (sideways) to improve pedestrian comfort, security, and safety. Lighting should be consistently positioned along a roadway or sidewalk to enhance the visibility of pedestrians by others, including motorists. Consider the effects of light pollution (see definition above) and energy efficiency in the design of your lighting system and the bulbs used. Choose LED bulbs. High pressure sodium and selected fluorescent bulbs are other energy efficient alternatives to mercury vapor and incandescent lights.

Physical Activity – Bodily movement of any type; it may include recreational, fitness and sport activities such as jumping rope, playing soccer, lifting weights, as well as daily activities such as walking to the store, housework, taking the stairs or raking leaves. Physical activity during the school day may include time spent in physical education class, classroom-based movement, recess, walking or biking to school, and recreational sport and play that occurs before, during, and after school.

U-rack – Type of bike rack shaped like an upside-down "U."

Wellness – Difficult to define since it could mean many different things to different people, but in general it means health. How do you define wellness for yourself? For your children? For your congregation? For your community?

Physical Activity Recommendations by Age

The 2008 Centers for Disease Control and Prevention's Physical Activity Guidelines for Americans

Adults need at least:

2 hours and 30 minutes (150 minutes) of moderate-intensity aerobic activity (i.e., brisk walking) every week, and muscle-strengthening activities on 2 or more days a week that work all major muscle groups (legs, hips, back, abdomen, chest, shoulders, and arms), or

1 hour and 15 minutes (75 minutes) of vigorous-intensity aerobic activity (i.e., jogging or running) every week and muscle-strengthening activities on 2 or more days a week that work all major muscle groups (legs, hips, back, abdomen, chest, shoulders, and arms).

Children and adolescents need at least:

60 minutes (1 hour) or more of physical activity each day consisting of aerobic, muscle-strengthening, and bone-strengthening activity.

Older adults need at least:

2 hours and 30 minutes (150 minutes) of moderate-intensity aerobic activity (e.g. brisk walking) every week **and** muscle-strengthening activities on 2 or more days a week that work all major muscle groups (legs, hips, back, abdomen, chest, shoulders, and arms),

or

1 hour and 15 minutes (75 minutes) of vigorous-intensity aerobic activity or an equivalent mix of moderate- and vigorous-intensity aerobic activity **and** musclestrengthening activities on 2 or more days a week that work all major muscle groups (legs, hips, back, abdomen, chest, shoulders, and arms) **or**

An equivalent mix of moderate- and vigorous-intensity aerobic activity **and** muscle-strengthening activities on 2 or more days a week that work all major muscle groups (legs, hips, back, abdomen, chest, shoulders, and arms).

Appendix 4

Food in Your CongregationSAMPLE COMPLETED Score Card

Instructions

- **4.** Carefully read and discuss the Food in Your Congregation Discussion Questions, which include questions and scoring descriptions for each item listed on this Score Card.
- **5.** Circle the most appropriate score for each item.
- **6.** After all questions have been scored, calculate the overall Score and complete the Planning Questions located at the end of this section.

	Fully in Place	Partiall y in Place	Under- Develo pment	Not in Place
N.1 Nutritious meals and refreshments	3	2	1	0
N.2 Healthy beverages available	3	2	1	0
N.3 Meals include low-fat items	3	2	\bigcirc	0
N.4 Refreshments include low-fat items	3	2	\bigcirc	0
N.5 Sites outside dining area/fellowship or parish hall offer	3	2		0
low-fat items				
N.6 Food purchasing and preparation practices to reduce fat	3	2	\mathcal{L}	0
content				
N.7 Healthy community meals/soup kitchen offerings	3	2	1	0
N.8 Healthy emergency food assistance/food ministry offerings	3	2		0
N.9 Healthy snack vending machine offerings	3	2	1	
N.10 Healthy beverage vending machine offerings	3	2	1	0
N.11 Clean, safe, pleasant dining area/fellowship or parish hall	3	\bigcirc	1	0
and kitchen				
N.12 Promote healthy food and beverage choices	3	2	1	

COLUMN TOTALS:

For each column, add up the numbers that are circled and enter the sum in this row.

(If you decide to skip any of the topic areas, make sure you adjust the denominator for the Section Score (36) by subtracting 3 for each question eliminated).

	0	6	6	0
TOTAL sums ab	12			
SCORE 100	33 %			

Food in Your Congregation

Sample Completed Planning Questions

The Section Planning Questions will help your congregation use its *Congregational Health Index* results to identify and prioritize changes that will improve your facilities, policies and practices to promote congregants' health.

Planning Question 1

Look back at the scores you assigned to each question. According to these scores, what are the **strengths** and the **weaknesses** of your congregation's facilities, policies and practices related to food?

Strengths

We always have water available
We almost always offer low-fat and skim milk

Weaknesses

We still offer half and half in coffee service We still have fried foods for Supper Night We don't ever include health messages in the bulletin We have regular soda in the vending machine We have only junk food in the vending machine

Planning Question 2

For each of the weaknesses identified above, list several recommended actions to improve the congregation's scores. This is your opportunity to brainstorm possible solutions to address the weaknesses. (Below is just one example of a list of possible solutions to address the half and half offered in coffee service.)

- 1. Meet with Hospitality Committee to discuss coffee service adding the option of serving low fat milk.
- 2. Meet with Hospitality Committee to discuss coffee service eliminating half and half.
- 3. Write a food policy that sets guidelines for coffee service.
- 4. Examine the cost of half and half vs. low-fat milk.

Food in Your Congregation

Planning Question 3

List each of the actions identified in Planning Question 2 on the table below. Use the five-point scales defined below to score each action based on five factors (*importance*, *cost*, *time*, *commitment*, *feasibility*). Add the points for each action to get the total points. Use the total points to help you choose one, two, or three top priority actions that the *Wellness Team* will recommend for implementation this year. (Below is just one example to address the half and half offered in coffee service.)

Importance	How important is the action to my congregation?					
	5 = Very important		1 = Not important			
Cost	How expensive would it be to plan and implement the action?					
	5 = Very inexpensive 3 = Moderately expensive 1 = Very expensive					
Time	How much time and effort would it	take to implement the action?				
	5 = Little or no time and effort	3 = Moderate time and effort	1 = Very great time and effort			
Commitment	How enthusiastic would my faith c	ommunity be about implementing the ac	ction?			
	5 = Very enthusiastic 3 = Moderately enthusiastic 1 = Not enthusiastic					
Feasibility	How difficult would it be to comple	How difficult would it be to complete the action?				
	5 = Not difficult	3 = Moderately difficult	1 = Very difficult			

Section Actions	Importa	Cost	Time	Commitment	Feasibility	Total	Top
	nce					Points	Priority
							Action?
Meet with Hospitality Committee	5	1	3	4	5	18	YES
to discuss coffee service adding the							
option of serving low fat milk.							
Meet with Hospitality Committee	5	1	3	3	5	17	MAYBE
to discuss coffee service eliminating							
half and half.							
Write a food policy that sets	5	1	1	2	2	11	NO
guidelines for coffee service.							
Examine the cost of half and half	3	1	2	2	4	11	NO
vs. low-fat milk.							

Physical Activity in Your Congregation SAMPLE COMPLETED Score Card

Instructions

- **7.** Carefully read and discuss the Physical Activity in Your Congregation Discussion Questions, which include questions and scoring descriptions for each item listed on this Score Card.
- **8.** Circle the most appropriate score for each item.
- **9.** After all questions have been scored, calculate the overall Score and complete the Planning Questions located at the end of this section.

	J	Partially in Place		Not in Place
PA.1 Built environment supports physical activity	3	2	①	0
PA.2 Physical activity equipment	3		1	0
PA.3 Promote physical activity	3	2	1	0
PA.4 Clean and pleasant environment for physical activity	3	2	1	0
PA.5 Physical activity facilities are safe	3	2	1	0

COLUMN TOTALS:

For each column, add up the numbers that are circled and enter the sum in this row.

(If you decide to skip any of the topic areas, make sure you adjust the denominator for the Section Score (15) by subtracting 3 for each question eliminated).

	6	2	1	0
su	TAL POI	9		
	the right.	60%		

Physical Activity in Your Congregation

Sample Completed Planning Questions

The Section Planning Questions will help your congregation use its *Congregational Health Index* results to identify and prioritize changes that will improve your facilities, policies and practices to promote your congregants' health.

Planning Question 1

Look back at the scores you assigned to each question. According to these scores, what are the **strengths** and the **weaknesses** of your congregation's facilities, policies and practices related to physical activity opportunities?

Strengths

We promote physical activity in all congregation facilities
All physical activity facilities are well maintained and adequate
We have a vacant lot for physical activities

Weaknesses

We do not have a bicycle rack
We do not have rolling sports sets
We do not have a community garden
We do not have adequate lighting adjacent to
sidewalks/walkways
We do not have adequate physical activity
equipment

Planning Question 2

For each of the weaknesses identified above, list several recommended actions to improve the congregation's scores. This is your opportunity to brainstorm possible solutions to address the weaknesses. (Below is just one example of a list of possible solutions to address the absence of a bicycle rack.)

- 1. Members of wellness team meet with facilities/property manager and obtain physical installment policies.
- 2. Members of wellness team meet with facilities/property manager to discuss feasibility of installing a bicycle rack.
- 3. Members of wellness team research bicycle rack options and cost scenarios.
- 4. Hire contractor to install bicycle rack

Physical Activity in Your Congregation

Planning Question 3

List each of the actions identified in Planning Question 2 on the table below. Use the five-point scales defined below to score each action based on five factors (*importance*, cost, time, commitment, feasibility). Add the points for each action to get the total points. Use the total points to help you choose one, two, or three top priority actions that the *Wellness Team* will recommend for implementation this year. (Below is just one example to address the absence of a bicycle rack.)

Importance	How important is the action?							
-	5 = Very important	3 = Moderately important	1 = Not important					
Cost	How expensive would it be to plan and implement the action?							
	5 = Very inexpensive	3 = Moderately expensive	1 = Very expensive					
Time	How much time and effort would it take to implement the action?							
	5 = Little or no time and effort	3 = Moderate time and effort	1 = Very great time and effort					
Commitment	How enthusiastic would my faith community be about implementing the action?							
	5 = Very enthusiastic	3 = Moderately enthusiastic	1 = Not enthusiastic					
Feasibility	How difficult would it be to complete the action?							
, and the second	5 = Not difficult	3 = Moderately difficult 1 = Very difficult						

Section Actions	Importance	Cost	Time	Commitment	Feasibility	Total	Top
						Points	Priority
							Action?
Members of wellness team meet with	5	5	3	4	5	22	YES
facilities/property manager and							
obtain physical installment policies.							
Members of wellness team meet with	5	5	3	3	4	20	MAYBE
facilities/property manager to discuss							
feasibility of installing a bicycle rack.							
Members of wellness team research	2	5	4	2	3	16	NO
bicycle rack options and costs.							
Hire contractor to install bicycle rack.	1	3	2	2	2	10	NO