



ADVENTIST HEALTH MINISTRIES | NORTH AMERICAN DIVISION

North American Division Health Ministries Guidelines

Introduction. This policy proposal is a brief summary of guidelines and parameters for successful health ministry outreach. Our goal is to encourage health education activities and outreach that are characterized by:

1. Evidence-based materials, research, and practice
2. Balanced nutrition and lifestyle principles
3. Ethical, moral, and biblical guidelines held by the Seventh-day Adventist denomination.
4. Communication styles that reflect a balanced, careful, and positive approach to health education.
5. Whole-person emphasis on wellness
6. Well-defined parameters of service

Health education programs, activities, or materials approved and /or sponsored by local church boards and reflected in their minutes should adhere to these and approved CLIA standards and be approved by their local conference and risk management department.

Evidence-based Materials, Research, and Practice.

1. Evidence-based outreach refers to practice supported by research findings and/or demonstrated as being effective through a critical examination of current and past practices. Health educators should be prepared to understand and discuss data that may or may not represent positions Seventh-day Adventists support.
2. A balanced philosophy of wellness and disease prevention will be based on an understanding of and appreciation for the value of clinical assessments, diagnosis, and treatment of disease based on scientific methods.
3. Lifestyle interventions reduce the need for certain treatments, drugs, and medical interventions but do not eliminate them. Wellness programs should be evidence-based, using sound science and biology. Teaching prevention and healthful lifestyle practices does not mean shunning clinical modalities.

4. Health outreach programs are not meant to replace patient/practitioner relationships or prescribe treatments by unlicensed individuals. Individuals are always encouraged to work with their certified healthcare provider as they make lifestyle changes.

Balanced Nutrition and Lifestyle Principles.

Advocating a plant-based diet or other lifestyle changes involves communication principles that recognize and respect individual differences and needs. It is in this supportive context that health communicators should:

1. Present the “big” picture of healthful living in its varied aspects rather than unstudied “side” issues (i.e. warming food in microwave ovens)
2. Teach basic principles of plant-based nutrition with respect to ADA guidelines for vegetarians and vegans (see Appendix A)
3. Emphasize positive and practical messages that are “do-able” for the average consumer
4. Focus on principles instead of hard “rules” (i.e. Taking a snack between meals may be essential for a diabetic in a blood sugar crisis)
5. Emphasize the importance of supplementation with B12 for vegetarians and vegans

Ethical, Moral, and Biblical Guidelines.

It has been said that “true science and Inspiration are in perfect harmony.”¹ The way in which we teach health principles influences how people respond to the biblical truths we teach. “If they [the public] see that we are intelligent with regard to health, they will be more ready to believe that we are sound in Bible doctrine.”² In addition:

1. Many biblical teachings on lifestyle, including mental, physical, moral, social, and family health are being validated by science daily.
2. Using evidence-based materials in our programs provides an opportunity to reveal the goodness of our Creator and the truth of Bible teachings.
3. A proper theology of health teaches risk reduction for disease and cause/effect relationships without assuming that all sickness and disease are the result of some transgression on the part of the sufferer.

“Although sin and sickness are closely related, it is evident that not all sickness is directly traceable to transgression on the part of the sick...Disabilities and sicknesses are not always directly due to sin...To many, sickness and suffering are a sure sign of God’s disfavor, and conversely, they think that if nothing is troubling them, God is pleased with their general way of life. Such reasoning...is not safe.”³ Compare Job’s case with the Antediluvians.

Positive Communication Styles. Research on health communication has shown that “helping people change involves helping people want to change—rather than cajoling them ... Highly directive, confrontational styles are likely to backfire...leading to significantly poorer outcomes one year later than more supportive styles.”⁴

Ellen White similarly addressed the need for wisdom and prudence in presenting the health message: “It is impossible to make an unvarying rule by which to regulate everyone’s dietetic habits.”⁵ “Do not go to extremes in regard to the health reform. Some of our people are very careless in regard to health reform. But because some are far behind, you must not, in order to be an example to them, be an extremist.”⁶

Health communication involves interaction with people of various social, family, cultural, ethnic, and religious backgrounds. They will vary in their age and gender, activity level, lifestyle and environment, genetics, mental health, and risk for various diseases. They will have differing habits such as smoking and alcohol. With these facts in mind, health communicators should avoid:

1. Simplistic recommendations, avoiding “always” and “never” statements (i.e. “Never eat refined sugar”)
2. Sweeping claims (i.e. “Veganism cures multiple sclerosis”)
3. Over-generalizations (i.e. “Commercially grown vegetables are nutrient-depleted”)
4. Extreme positions (i.e. “A total raw diet is better than one including cooked food”)
5. Liability to the church due to unintended health consequences

Whole-person Emphasis on Wellness.

Successful health educators should consider each individual as a total person on a journey and encourage them as they:

1. Prioritize various health and wellness health goals
2. Identify specific and realistic measures to accomplish those goals
3. Use a reliable food guide system as the basis for forming a sustainable, healthful eating plan
4. Work with their health care provider in establishing the safety of certain protocols (such as certain types of exercise) if they have specific health problems

Educators should:

1. Be flexible enough to accommodate a wide range of goals and health concerns

2. Ensure adequate intake of individual nutrients
3. Be incremental and accommodating rather than overzealous and dogmatic in their teaching style

Parameters of Service.

Local church members are encouraged to serve their communities by providing various health ministries. Where applicable, waivers and consents should be signed by individuals taking advantage of various services and programs provided under the auspices of the church's health ministries (see Appendix B examples). While performing these ministries members are required to maintain certain professional standards. These include but are not limited to:

1. Maintaining strict confidentiality. This refers to the ethical principle or legal right that a physician or other health professional will "hold secret" all information relating to a patient, unless the patient gives written consent permitting disclosure. It is important for health educators to adhere to this policy and obtain like permission when sharing medically related information pertaining to an individual either publically or privately.
2. Invasive services and screenings such as blood draws must be conducted by certified personnel and laboratories.
3. Non-invasive screenings, such as blood pressures, should be done only by trained personnel who are following their particular scope and standard of professional practice.
4. All documentation from health screening should be considered confidential and given to the client with follow-up recommendations and copies kept in a secure location with access only by the Faith Community Nurse or Health Minister, Health Ministry leader, or designate. Health screening information should be shredded onsite under duly designated supervision within one year of receipt.
5. Individuals should be encouraged to work with their health care provider as they make lifestyle changes, especially if recommendations are made following health screenings, and especially if lab findings indicate potential medical problems.

¹ Testimonies Volume 4, p. 484.

² Christian Temperance and Bible Hygiene, p. 121.

³ Andreasen ML. The Faith of Jesus, p. 180, 186.

⁴ Ferdinand Binkofski, Ph.D.

⁵ Consels on Health p. 154-5.

⁶ Counsel on Diet and Foods, p. 204.