



Intercom

Kentucky Council of Churches

VOLUME 30, ISSUE 3

DECEMBER, 2009

“What can congregations do about health?”

We can do a great deal about health as disciples of Jesus Christ, the ultimate healer. Here are nine ways congregations can promote health: name the human need; address Kentucky's need; teach our children; address racial disparities; work for a healthier environment; start a wellness ministry; lead contemplative lives; advocate and pray; and strengthen our fellowship. May God bless your uses of this Intercom! -- Marian M. Taylor, ed.

Name the human need

Over a third of the families living below the poverty line are uninsured. More than 9 million children in America lack health insurance. 18,000 people die each year because they are uninsured.

A member of a congregation I served came to me in tears. He had been a transplant patient and because he was indigent he was able to get his transplants through Medicare. But it did not cover the anti-rejection medicine he needed to maintain his organs.

A nurse I know, when she found out I was coming here tonight, allowed me to share her angst. She's a nurse in a AIDS clinic in Cincinnati for indigent patients. And one of her responsibilities is to tell the patients who cannot afford the \$4,000 worth of drugs needed to survive that they are on a waiting list that can be as much as six months long in order to receive medication to survive.

I was traveling with my wife earlier this summer when she developed a blood clot in her leg and we were forced to stop in Gulfport, Mississippi for her to be treated. And they let us sit there in the emergency room, being diagnosed by a physician's assistant that she had a "muscle strain", until they found out that we did have insurance.

Bishop Vashti Murphy McKenzie, the prelate of Kentucky and Tennessee, what we call the 13th District of the African Methodist Episcopal Church, at the close of the 142nd session of the Kentucky Annual Conference two Saturdays ago, abjured us to view health care as not a political issue but a moral issue. That if we are people of faith who believe in a God of faith, then we have a moral issue to take care of one another. She reminded us that in Leviticus chapter 25, verses 35 and 36, it says that if any of us becomes poor and can't take care of ourselves then the rest of us have a responsibility to deal with it. And if that does not meet home, Imam Bagby* has already given from his faith perspective a story many of us who are Christians recognized immediately as similar to the story in Matthew 25 where Jesus said that when the Son of Man comes he's going to say to us that among other things that "I was sick and you did not care for me." It is a moral imperative that we take care of those among us. Because they, there, but for the grace of God, could have been us.



The Rev. Kenneth Golphin spoke to well over 100 people at an interfaith prayer service on August 30. He is a presiding elder in the African Methodist Episcopal church.

Let us pray:

Almighty, everlasting, and powerful and loving God, there are sometimes issues that face us that seem formidable. But we find you to be a God of love, compassion and of resource, that when we put our foot forward you help us to find the way. Help health care, Lord, to be one of those issues in our lives, that we recognize your moral imperative to take care of one another, to be our "brother's keeper," that we may more likely please you. In your name we pray, Amen.

* A Muslim leader who spoke earlier in the same prayer service.

Form a group to study faith and health

Two study guides we recommend are:

Vision and Voice available at
<http://www.visionandvoice.org/>

Body and Soul available at
<http://www.bodyandsoul.nih.gov/>



T time

with Marian M. Taylor



Warm greetings! I began to serve you as your new Executive Director on June 15, and was installed on October 15 during an assembly whose theme was "the creation waits with eager longing." For me vocationally the Council's work is all about that longing. It is a prayerful longing that God gives us – for right relations with God, self, neighbor and creation, and especially for the oneness in Christ we can enjoy in the Church.

I'd like you to be aware of the following news:

2010 Assembly in Bowling Green

Please mark calendars for October 14-15, 2010. The 2010 events will revolve around what the "world church" has to do with Christian mission in Kentucky today. After all, it is the 100th anniversary of the World Missionary Conference in Edinburgh, Scotland, that helped Christians conceive of a world church and launched a century of ecumenical work. This 2010 focus may include cross-cultural mission partnerships, and immigration issues.

Billie Stockton to serve

Ms. Billie Stockton of the Episcopal Diocese of Lexington has agreed to serve on behalf of the KCC as a member of the Governor's Reentry Task Force. This state-wide group is dedicated to reducing recidivism rates in Kentucky's criminal justice system. Billie Stockton, a Licensed Psychological Practitioner, has for nearly a decade now chaired her diocesan Commission on Prison Ministry. We will make her reports available so that all our churches' prison ministries can grow and improve.

Officers for 2009-10

Melissa Holland has agreed to serve a third and final term as our President, and Amy Coultas continues as our Secretary. Rose Nelson continues as president of Church Women United and therefore as our 2nd Vice President. Mike Watts of the United Methodist Church is our new Treasurer, and Matthew Covington of Bowling Green is our new 1st Vice President. Thanks for your service!

A move up to "316"

The offices are now in the same Leestown Road building in Lexington, but in a different suite. It will be an easy address to remember because, as Jeanie Hartman pointed out, it reminds us of a well-known Bible verse, John 3:16!

~ Marian

Address Kentucky's need

To minister well, we must know our context. Here is an abridged version of "Expanding Health Coverage in Kentucky," produced by Kentucky Voices for Health. The full text is at : <http://kyvoicesforhealth.com/research.html>

Expanding health coverage to the estimated 604,000 Kentuckians without health insurance would substantially reduce or eliminate the more than \$1 billion in annual costs that all Kentuckians must pay as a result of care provided to the uninsured for which no payment is received.

The approximately 15 percent of Kentucky's population who have no health coverage are older, poorer, and more likely to work part-time than the average American who is uninsured. Also, Kentuckians without health insurance are more than three times more likely to skip needed medical care when sick than insured Kentuckians.

- More than half a million Kentuckians with health insurance skipped going to a doctor or seeking a medical treatment when sick, and almost 600,000 did not fill a prescription because of the cost.
- More than half of uninsured Kentuckians did not fill a prescription for medicine.
- More than 40 percent of uninsured Kentuckians did not see a specialist when needed.
- Almost one-third of the uninsured reported using all or most of their savings to pay medical bills in the previous year.



Intercom
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Churches

An occasional publication of the Kentucky Council of Churches,
1500 Leestown Road, Suite 316, Lexington, KY 40511.

Telephone: 859-269-7715 Website: www.kycouncilofchurches.org

Rev. Dr. Marian McClure Taylor, Editor & Publisher

Rev. W. Christopher Benham Skidmore, Web-Steward

Ms. Jeanie Hartman, Layout and Distribution

Member Communions & Congregations of the Kentucky Council of Churches are:

The African Methodist Episcopal Church; the African Methodist Episcopal Church Zion Church; the Christian Church (Disciples of Christ); the Christian Methodist Episcopal Church; the Cumberland Presbyterian Church; the Episcopal Church; the Evangelical Lutheran Church in America; the Presbyterian Church (USA); the Roman Catholic Church; the United Church of Christ; the United Methodist Church; Central Baptist Church (Lexington); Church of Christ, Union (Berea); Immanuel Baptist Church (Frankfort).

Observer/Participants & Ecumenical Partners are: Berea Friends Meeting, Kentucky Baptist Fellowship; Lexington Friends Meeting; Salvation Army; Church World Service; Kentuckiana Interfaith Community; Northern Kentucky Interfaith Community; Paducah Cooperative Ministries; Oikocredit.

Teach our children

My brother-in-law, Greg Taylor, is a friend to a child who has cancer and he volunteers in a program that fights childhood cancers. He was inspired to write this short story to be read with children. We've inserted some clip art but Greg hopes to create his own illustrations eventually.

Mom, What's Wrong With Billy?



Sam sits a few desks away from his friend Billy. When the students came back to school from a Christmas break, Sam noticed that Billy wasn't in his desk.

Sam asked his teacher, "Ms. Jones, what's wrong with Billy?" Ms. Jones told the class that Billy was sick, and that the whole class was going to make a card for him, a "get well soon" card.

Sam thought, "I wonder, does Billy have a stomach ache? Or maybe he's got a cold." When Sam got home, he asked his mom, "Mom, what's wrong with Billy?"

Sam's mom said, "Billy is sick and in the hospital." Sam said, "I know he's sick, Ms. Jones said so, but does he have a runny nose?"

"No, Sam," she said, and she had Sam sit down at the table with her. "Billy has cancer, Sam. Do you know what cancer is?" she asked. "I think so, well, I've heard of it, but I don't know what it is," he said.

Sam's mom thought for a minute and then she tried to explain. "We are all made up of thousands of little things called cells. Cells are so tiny that you can't even see them without a microscope. As these cells grow, we grow. Sometimes, some cells grow too fast, way faster than they should and when these cells grow too fast and too big, they form things called tumors. These tumors can get so big that they make people sick."

"Does Billy have a tumor?" Sam asked. "Yes," she said, "Billy has a tumor in his head. That's why he's in the hospital, because the doctors are giving him medicine to try to get rid of his tumor."

Sam thought for a minute. He asked, "Can we go see Billy in the hospital?" Sam's mom said, "I'm sure Billy would love to see you, I'll ask his mom if it would be O.K."

A few weeks later, Sam's mom told him that

Billy was feeling a little better and would like to see him. Sam was glad, but he was also scared, he'd never been in a hospital before, at least not that he could remember. The next day, Sam and his mom went to the hospital. This place was really big, and it was kind of scary for Sam, so many people around, some people were in wheelchairs, others were on beds out in the hallway.

When they got to Billy's room, the nurse said she would go in and see if Billy was awake. He was, and they went in and there was Billy's mom next to the bed. Sam was really scared now because there were so many tubes and things around Billy. At first, Sam didn't want to go up to the bed. As he got closer, he didn't recognize Billy. His hair was gone and his face looked different now. Sam thought, "I don't think I'm in the right room."

Once Billy saw his friend, he smiled, and then Sam knew it was Billy for sure, it was that same smile Billy always had. Sam and Billy talked about baseball and school and what they got for Christmas. Sam gave Billy a baseball that he bought for him for Christmas, and once again, Billy smiled that same big smile.



When it came time to leave, Sam told Billy that he would be back to visit again, and that made Billy smile once again. On the way out, Sam asked his mom if they could come back to visit, she said they would come back as many times as they could.

As they drove home, Sam thought about his friend Billy and it made Sam smile, that same smile Billy always had.

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After reading the story, you may wish to:

- *make a drawing of someone your child or children cares about, asking for special attention to how that person smiles*
- *write a prayer for that person*
- *share an idea about what could be done to help someone who is sick*

Address the Racial Disparities

The federal government's Agency for Healthcare Research and Quality reports (at <http://www.ahrq.gov/qual/nhqr03/nhqr2003.pdf>) that race and ethnicity still have a staggering impact on the course and quality of the medical treatment a patient receives in the United States of America in areas such as:

Heart disease. African Americans are 13 percent less likely to undergo coronary angioplasty and one-third less likely to undergo bypass surgery than are whites.

Asthma. Among preschool children hospitalized for asthma, only 7 percent of black and 2 percent of Hispanic children, compared with 21 percent of white children, are prescribed routine medications to prevent future asthma-related hospitalizations.

Breast cancer. The length of time between an abnormal screening mammogram and the follow-up diagnostic test to determine whether a woman has breast cancer is more than twice as long in Asian American, black, and Hispanic women as in white women.

Human Immunodeficiency Virus infection care. African Americans with HIV infection are less likely to be on antiretroviral therapy, less likely to receive prophylaxis for *Pneumocystis* pneumonia, and less likely to be receiving protease inhibitors than other persons with HIV.

Nursing home care. Asian American, Hispanic, and African American residents of nursing homes are all far less likely than white residents to have sensory and communication equipment, such as glasses and hearing aids.

Disparities in the sources of health care. About 30 percent of Hispanic and 20 percent of black Americans lack a usual source of health care compared with less than 16 percent of whites-- and the numbers are even higher among children: Hispanic children are nearly three times as likely as non-Hispanic white children to have no usual source of health care. This affects everyone because African Americans (16 percent) and Hispanic Americans (13 percent) are far more likely to rely on hospitals or clinics for their usual source of care than are white Americans (8 percent).

The Kentucky Council of Churches has a Program Unit on Peacemaking and Racism. This volunteer group is open to all who wish to serve. Please consider:

Praying for the current members of the KY Council of Churches' Program Unit on Peacemaking and Racism.

Joining the team. The group meets quarterly. Please call Chris Skidmore at 859-269-7715 to receive an invitation to the next meeting.

Hosting a discussion in your parish. We will guide the conversation about racism between members of black churches and white churches in your community. Call Chris for more information or to organize a joint discussion on racism between two congregations in your area.

Welcoming an anti-racism youth training event in your area. The KCC Unity Trek will provide an interactive and fun learning environment. Chris leads the entire experience. You will only need a local group to sponsor the event, publicize it locally, and help with the food.

Work for a Healthier Environment

The Kentucky Council of Churches has a very active team of volunteers who are organized as the KCC Program Unit on Local Economies and the Environment (PULEE). This group is open to all who wish to serve.

Eating is a moral act; each of us has a responsibility to eat healthy foods that have been produced locally and sustainably. Therefore, our PULEE team co-sponsors the annual Healthy Food Local Farms conference. This year's HFLF conference in Louisville KY featured Sam Levin, Josh Viertel, Laura Krebsbach, Sarah Fritshner, Nicolette Hahn Niman, Wendel Berry and many more.

We ask that you also please consider:

Praying for the current members of the KY Council of Churches' Program Unit on Local Economies and the Environment.

Joining the team. The Program Unit on Local Economies and the Environment group meets quarterly. Please call Chris Skidmore at 859-269-7715 to receive an invitation to the next meeting.

Hosting a speaker from our team in your parish. We are more than willing to discuss some curricular options with you and even travel to your congregation to help you kick off the in-depth study.

Becoming a member of the GrassRoots Ecumenical Environmental Network. Call the KCC office to sign up to become a point person in your congregation who is willing to receive information, action alerts, resources, and other support on environmental justice issues.

Host a Unity Trek training event for Youth



Start a wellness ministry

Every congregation should consider organizing a wellness ministry. If you decide to start a wellness ministry please let the KCC know so we can share your story and assist you. The Kentucky Faith Community Nurse Coordinators provided this essay:



When you look around during worship or survey your congregation from the pulpit what do you see? Do you see the members who are overweight, stressed, smoking, or have other lifestyle issues that are affecting their spiritual walk? Do you see people who have limited or no access to health care? Are there people who are giving so much of themselves to care for family members that their own health

and spiritual resources are stretched to the limit? If you see any of these people or even just one, your congregation could benefit from a health ministry led by a faith community nurse (parish nurse) or trained lay health minister.

Long before today's politicians took up the cause of health care reform, a quiet health care revolution was taking place in many congregations. It recognized the importance of Jesus' healing ministry and that of the deacons and deaconesses in the early Church. It is fueled by the growing belief that in promoting justice and advocacy the church has a responsibility to minister to the body as well as the spirit.

A faith community nurse (FCN) specializes in the intentional care of the spirit through providing care for the whole person—as mind, body, and spirit are intertwined and inseparable. The goal of faith community nursing is to protect, promote and optimize health and abilities, prevent illness and injury and respond to suffering in the context of the values, beliefs and practices of a faith community.

An FCN/health ministry team provides another “tool” for pastoral staffs to bring healing and wholeness to their congregations and communities. Brad King, pastor of Bethel Baptist church in Harrodsburg, states that, “Balancing the body, mind, and spirit is the key for anyone seeking maximized personal health. Our members understand this in deeper and more applicable ways because of our health ministry. I am personally thankful that we have this ministry, and even though it is still quite new, our members are really “getting it”. “Having a health ministry at our church helps us to minister more holistically to our congregation and community,” said Rev. Eric Bryant, pastor of St. Matthews United Methodist Church in Louisville, Ky.. “It helps us follow the pattern of the ministry of Christ who offered hope and healing for mind, body and soul.”

For more information call: 502-629-2703 or email: cathy.avery@nortonhealthcare.org.

Lead contemplative lives

A healthy life is lived intentionally and relationally. Learning to live this way takes practice, and Kentucky is blessed to have an Institute dedicated to teaching us how. Provided by The Merton Institute for Contemplative Living:



The Merton Institute Retreat Center

“Bridges to Contemplative Living with Thomas Merton” leads participants on the journey toward a more contemplative approach to life. This eight volume series is a resource for small group dialogue. The core of this program is the Contemplative Living Session that includes individual reflection on readings from Merton and other spiritual writers, contemplative dialogue on these readings with all retreatants, and prayer in common.

Each session focuses on aspects of our lives' basic relationships—with self, our neighbors, with nature and with God. By attention to these core relationships in daily living we become “contemplatives” who are learning that “our every day life is our spiritual life.”

For more information or to receive a Bridges to Contemplative Living series sampler, please contact The Merton Institute for Contemplative Living, 2117 Payne Street Suite 206, Louisville, Kentucky 40206. 502.899.1991 or contactus@mertoninstitute.org

Advocate and Pray



On Aug. 30, the KCC sponsored an interfaith prayer service at Central Baptist Church in Lexington.

KCC staff would like to contact you with information when it's timely for faithful voices to be lifted about issues like health.

Please sign up for KCC communications at <http://capwiz.com/kychurches/mlm/signup/>

Kentucky Council of Churches
1500 Leestown Rd, Suite 316
Lexington, KY 40511-9869

Office phone (859) 269-7715
Website www.kycouncilofchurches.org

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Strengthen our fellowship

Ecumenism is good for your health because it acknowledges the wholeness of the Body of Christ to which we all belong!

There are three actions we recommend:

Help Envision:

What should the Kentucky Council of Churches be and do in the next 5-10 years? Let us know your thoughts, or tell us the best person you've heard or read on this. Send input to the KCC office "Attention: the Rev. Ron Gaddie."

Respond to Challenge Grant:

We have a challenge grant! The KCC has received a pledge of \$5,000 to be used to match gifts from individuals when that gift is larger than that person's previous gift or when the person is a new contributor. The time frame for the challenge is December 1, 2009 to March 1, 2010.

Sign up for communications:

Go to this site and sign up to be part of the ecumenical communications network:

<http://capwiz.com/kychurches/mlm/signup/>

KCC 2009-2010 Calendar

Dec 1, 2009	Executive Board meets at Central Baptist Church, Lexington
Jan 14 -15, 2010	Annual Conference of the National Coalition to Abolish the Death Penalty (NCADP)
Jan 17 - 24	Week of Prayer for Christian Unity
Feb 18	Children's Advocacy Day, Frankfort
Feb 26 & 27	Annual Convention Episcopal Diocese of KY
Feb 25 - 27	Annual Convention Episcopal Diocese of Lexington
April 19 - 22	National Workshop on Christian Unity
April 23 & 24	Red Bird Mission Annual Meeting at Thousandsticks UMC
June 2 - 6	"Witnessing to Christ Today" event in Edinburgh, Scotland, marking centennial of World Missionary Conference