

# Being a Good Steward of Our Health

By  
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At one time the concept of faith was considered a myth. By still others, the notion that faith combined with good works could move and shake mountains was considered as little more than superstition. Yet, over recent years, scientists have begun to test and confirm the hypothesis that faith is like a magnet that can absolutely enlarge positive outcomes in every single area of life. For example, researchers have observed findings such as those listed in Table 1 below.

Table 1: Faith and Health: Recent Findings

- According to a study conducted at Duke University, persons who participate in weekly religious services and who pray and study throughout the week have diastolic hypertension 40 percent less often than their counterparts who are matched in terms of age, income, and other relevant factors.<sup>1</sup>
- In a matched sample of patients who had elective heart surgery, persons who worship regularly experienced a statistically significant lower death rate after six months than their non-worshipping counterparts.<sup>2</sup>
- Medically ill, depressed senior citizens who are religious had higher recovery rates from depression than their non-religious counterparts.<sup>3</sup>
- Persons who pray and worship regularly among heart-transplant patients have shorter recovery periods than their counterparts.<sup>4</sup>
- In a 1988 study of 393 heart patients in San Francisco, positive outcomes were elevated for those for whom a prayer group prayed.<sup>5</sup>
- Persons over 60 who worship and pray regularly were hospitalized 10 days per year relative to 60 days for their non-religious counterparts.<sup>6</sup>
- A meta-analysis of 350 physical health studies and 850 meta health studies found that religious or spiritual involvement correlated with lower mortality a lower incidence of cardiovascular disease, lower blood pressure and reduced hypertension, less depression, less anxiety, lower rates of suicidal ideation, etc.<sup>7</sup>
- Persons who regularly pray and worship are less likely to use alcohol, tobacco, and/or other drugs. They are also more likely to maintain sobriety. In fact, adults who never participate in religious services are seven times more likely to drink, three times more likely to use tobacco, five times more likely to have used an illicit drug other than marijuana, seven times more likely to binge drink, and eight times more likely to use marijuana.<sup>8</sup>

<sup>1</sup> <http://www.americancatholic.org/Messenger/Mar2000/feature2.asp>

<sup>2</sup> *ibid.*

<sup>3</sup> *ibid.*

<sup>4</sup> *ibid.*

<sup>5</sup> *ibid.*

<sup>6</sup> Proudfoot, W. *Religious Experience*. Berkeley: University of California Press; 1985.

<sup>7</sup> *Mayo Clinic Proceedings*, 2001. 76: 1225-1235.

<sup>8</sup> *So Help Me God: Substance Abuse, Religion and Spirituality*, The National Center on Addiction and Substance Abuse, Columbia University, 2000.

- Teens that do not practice religion are three times more likely to drink, binge drink and use tobacco; four times more likely to use marijuana; and seven times more likely to use illicit drugs.<sup>9</sup>
- Faith-based Substance Abuse Programs have a 60-80 percent success rate for cocaine addiction relative to a 6-13 percent rate for non-faith based substance treatment programs.<sup>10</sup>

Even in the area of diabetes, faith can play a proven role in improving outcomes. Stress is, according to researchers Lloyd et al. (2005), a major correlate of poor diabetes outcomes<sup>11</sup>. However, research by Boswell et al. (2006) indicates that persons who worship on a regular basis report themselves as experiencing less stress than their counterparts who do not worship<sup>12</sup>. But, as we are often reminded by our faith leaders, faith, when combined with good works, is an extraordinarily powerful combination. For the more than 20 million Americans (including 3.2 million African Americans) who are diabetic, good works involve employing tested strategies that can reduce their chances of premature death and disability from their disease.

Conducting blood sugar testing daily or even multiple times per day; maintaining a nutritious diet that restricts carbohydrates, refined sugars, and other foods; controlling caloric intake so that overweight and obesity are addressed; engaging in age- and health-appropriate physical activity; checking lower extremities for hard-to-heal injuries and sores; reminding one's physician to check one's feet and eyes; and engaging in other relatively simple acts are good works that can drastically improve the health outcomes of our diabetic mothers and fathers, grandparents, and even sisters and brothers.

Despite the "good works," many diabetics fail to practice these self-management strategies. As a result, they experience extreme weakness; amputation of toes, feet, and legs; blindness; heart attack; stroke; damaged blood vessels and kidneys; and, in many cases, premature death. Moreover, many of these persons who fail to maintain good stewardship over their physical temples can be found in faith-based institutions every week for Saturday and/or Sunday services.

For this reason, the United States Department of Health and Human Services' Centers for Medicare & Medicaid Services (CMS), is soliciting the support of persons in the faith community. In order to reduce early death and disability among diabetic Medicare beneficiaries, CMS is launching a program known as *Every Diabetic Counts!* This initiative involves enrolling Medicare beneficiaries with poorly managed diabetes into free workshops taught by teachers/trainers who know how to maximize learning. This process will also include the use of exercises and activities that will strengthen the will and motivation of diabetic Medicare beneficiaries to engage in the "good works" necessary to improve their health.

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<sup>9</sup> *ibid.*

<sup>10</sup> National Center for Neighborhood Enterprises, *Outcry From the Alamo* (NCNE; Washington, D.C.), 2002.

<sup>11</sup> Cathy Lloyd, PhD, Julie Smith, BSc, RGN, MSc and Katie Weinger, EdD, RN, Stress and Diabetes: A Review of the Links, © [American Diabetes Association @, Inc.](#), 2005, *Diabetes Spectrum* 18:121-127, 2005

<sup>12</sup> Boswell, G.H.; Kahana, E. and Dilworth-Anderson, P., "Spirituality and Healthy Lifestyle, Behaviors: Stress Counter-balancing Effects on the Well-being of Older Adults," *Journal of Religion and Health*, Springer Netherlands, Vol 45, pp. 587-602, pub online Nov 07, 2006, No. 4 / Dec, 2006

To find out more about this program and/or to enroll you, family members, and/or a friend in the “Every Diabetic Counts” program, please call **1-877-746-6465**. You may also ask your physician about this program.