Another World Is Possible! In that world, the President and Congress would answer the moral question “Am I my brother’s/sister’s keeper?” with a resounding YES! And would not promote further unraveling of any remaining shred of social solidarity. (Universal Health Care Action Network—http://www.uhcan.org)

Another World Is Possible! In that world, the President’s budget would reflect his own words:

“When we see this kind of preventable suffering, when we see a plague leaving graves and orphans across a continent, we must act. When we see the wounded traveler on the road to Jericho, we will not, America will not pass to the other side of the road.”

Another world would require covering all Americans and protecting individuals from the economic hardships that can result from catastrophic illness. It would require ensuring quality health care is a human right, a moral value. And, it would require that everyone had access to affordable health care. Our shared values mandate moral support for fair and just access to health care. We believe that every person deserves quality health care. This must be embedded in our core values, and we must strive to live out that conviction as a society. (Center for American Progress, “Health Care, The Budget and Morality: A Discussion of National Priorities” (Washington, DC, January 2005) <http://www.americanprogress.org>

To read the full article go to: Winners and Losers—<http://www.ucc.org/justice/index.html>
Gender inequalities are a major driving force behind the global AIDS crisis. Globally, nearly 5,000 women become infected with HIV every day. Hardest hit of all are black women and girls in Africa and in the U.S., who are most vulnerable as a result of poverty and discrimination (source: Africa Action). African women and girls are disproportionately affected by the HIV/AIDS crisis. Inadequate access to health care and education leaves women less able to protect themselves from HIV infection. Further, economic and social inequalities leave African women marginalized, with limited power over their sexual choices and their own life decisions. Similarly, HIV infection rates among African-American women in the United States are continuing to increase. Here, as in Africa, poverty, racism and gender-related inequalities fuel the spread of HIV/AIDS. (source: Africa Action).

Recently a 12-member team representing Global Ministries—The United Church of Christ and the Christian Church Disciples of Christ journeyed to southern Africa (Durban, Cape Town and Johannesburg) to listen and learn of the social, cultural, and economic conditions that shape the spread of HIV/AIDS. While we were there, our eyes were opened to the plight of women living with HIV/AIDS and struggling to survive day-to-day. We witnessed how HIV/AIDS had changed their lives. Many of the women and young children are poor and left alone.

We toured hospitals, clinics and townships where high rates of HIV/AIDS exist. And, we witnessed the hopelessness and shame in the eyes of those infected. We were told how the elderly are now taking care of the grandchildren more and more as the culture’s traditional social security (children taking care of the elderly) is no longer the norm. One thing was clear to us—to empower the family against this devastating disease, you must empower the woman. Women tend not to disclose their status because of fear and stigma, lack of education, fear of violence and being ostracized. Women are challenged by remaining faithful when partners are not, by not being able to communicate to their partner about condom use, by not having access to medicines, and by poverty and loss of income.

And what about the church? HIV/AIDS has become the new apartheid. The church is struggling with this issue. In many ways it is not equipped to deal with HIV/AIDS. Some churches are confused, judgmental and in denial. And, as a part of the denial, some are unwilling to act. As an Anglican Priest stated, “We can never solve the challenges of HIV/AIDS unless the church is involved. But the church must deal with its mindset and attitudes and have a change of heart.” The United Congregational Church of South Africa (UCCSA) in partnership with Global Ministries (UCC/DOC), and other organizations,
It is estimated that approximately 950,000 people are infected with HIV in the United States. AIDS is the leading cause of death for African American Women aged between 25 & 44.

African American and Hispanic women account for 83% of AIDS diagnoses reported in 2003. 80% of all diagnosed HIV infections in women were through heterosexual contact. Incarcerated women are three times more likely to be HIV infected than incarcerated men.

Women’s “Beading Project” in the Langa Community, southern Africa

Every day 6,000 children and youth in the world are infected.

For more information on how your congregation can be involved in the global AIDS fight contact:
Angela Balfour, Program Associate, Africa Office, (317) 713-2575
abalfour@dom.disciples.org
<http://www.globalministries.org/africa/index.html>

To Find out more about starting an HIV/AIDS ministry in your local congregation, Contact:
Barbara Baylor, MPH, Minister for Health and Wellness Programs (216) 736-3708-baylorb@ucc.org
Rev. Michael Schuenemeyer, HIV/AIDS Ministries (216) 736-3217-schuenem@ucc.org

provide income generation opportunities and skills training projects for individuals and families. For women, in particular, finding solace and peace and assistance from UCCSA – has proved to be beneficial. And life-saving. What can our churches do to assist women and their families?

- Pray for the churches in the southern Africa region who are implementing HIV/AIDS ministries with very little resources
- Conduct prayer vigils to lift up those throughout Africa and the world who are HIV infected and affected.
- Encourage our children and youth to become pen pals with HIV/AIDS youth in southern Africa
- Write our congress person and the President about sending “no-strings-attached” HIV/AIDS funds to Africa.
- Increase awareness education
- Encourage voluntary counseling and testing
- Work for economic development and people empowerment
- Engage in Advocacy
- Establish ministries for women and children
- Support our missionaries and other caregivers so that they don’t burn out
- Spread the word about the pandemic
- Deal with issues of sexuality
- Empower young girls to see a difference in their lives
- Partner with Lydia House (an income generation project for women who make clothes, jewelry and clergy stoles)
- Pray for the Treatment Action Campaign which aims at bringing affordable treatment and drugs to persons living with HIV/AIDS.
34% of teen girls get pregnant at least once before they reach age 20, resulting in more than 820,000 teen pregnancies a year. Eight in ten of these pregnancies are unintended and 79% are to unmarried teens.

Sources: National Campaign to Prevent Teen Pregnancy, The Alan Guttmacher Institute

Since 1991, U.S. teenage pregnancy, abortion, and birth rates have declined steadily in every age and racial/ethnic group. Teenage birth rates declined in every state as well as in the District of Columbia and the Virgin Island. Research indicates that sexually active teens are becoming more effective users of contraception and that more teens are choosing to remain abstinent during early and middle adolescence. Nevertheless,

The United States has the highest rates of teen pregnancy and births in the western industrialized world.

Source: National Campaign to Prevent Teen Pregnancy

Studies in three countries in Europe (Netherlands, France and Germany) reveal an attitude towards youth which does not reflect the attitude many people in the United States have toward their children when it comes to providing sexuality education. In these countries there is an unwritten social contract with young people:

In these countries, societal openness and comfort in dealing with sexuality, including teen sexuality and pragmatic governmental policies created greater, easier access to sexual health information and services for all people, including teens.

The United Church of Christ and the Unitarian Universalist Association have published the most comprehensive sexuality resources ever developed for youth kindergarten age through high school. Written by sexuality educators, these resources provide medically accurate and age-appropriate information for parents, teachers and pastors to use with children and young people to help them learn about sexuality in an affirming and supportive setting. The resources are based on the Guidelines for Comprehensive Sexuality Education produced by SIECUS.

In order to use Our Whole Lives—Sexuality and Our Faith, teachers need to attend training sessions sponsored by the UCC and UUA. For more information on these resources, please go to:

<http://www.ucc.org/justice/owl> Or contact Ann Hanson, (216)736-3718.
hansona@ucc.org

Families Are Talking

As parents and caregivers, you are the primary sexuality educators of your children.

Seek “Teachable moments” to share your values. Be “Ask-Able”. “Listen”.

“We’ll respect your right to act responsibly, giving you the tools you need to avoid unintended pregnancy and sexually transmitted infections, including HIV.”

Source: www.advocatesforyouth.org
Empowering Americans to Live Stronger, Longer!

New Survey finds Older Adults Know How To Be Healthy, but Barriers Prevent Action. According to a survey released by the American Public Health Association (APHA), Americans over 55 are well aware of proven steps to better health such as proper diet, regular exercise, reducing stress and having a positive attitude. Key findings from the survey conducted during National Public Week (April 4-10) include:

- Half of older adults believe they are living a healthy lifestyle, while half recognize they need to make changes to improve their health.
- A lack of motivation (51%) followed by money (45%) and time (34%), were cited as primary barriers to taking action to be healthier.

The survey also asked older Americans about attitudes on the state of health care in the United States. The survey found that:

- More than one in four older adults rank health care as their top concern for the country—well ahead of the war in Iraq, the economy and terrorism.
- Nearly two-thirds (61%) of older adults say the cost of health care is of particular concern, followed by quality and access.

APHA, whose mission is to assist in monitoring and diagnosing the health concerns of entire communities and promote healthy practices and behaviors to assure our populations stay healthy, encourages all Americans to adopt the three P’s to living stronger, longer—PREVENT problems from happening, PROTECT your health through early detection, and PLAN to stay healthy for many years to come.

For more information on ways to incorporate the 3 P’s for healthy aging go to: National Public Health Week—<http://www.apha.org/nphw>

10 Commandments for a Heart-Healthy Temple
1. Thou shall have your blood pressure checked regularly.
2. Thou shall not smoke cigarettes or other tobacco products
3. Thou shall eat a low-fat diet.
4. Thou shall each a low-cholesterol diet.
5. Thou shall have your blood cholesterol level checked regularly.
6. Thou shall limit the amount of salt in cooking and at meals.
7. Thou shall be physically active.
8. Thou shall maintain your proper weight.
9. Thou shall know the warning signals and actions of heart attack and stroke.
10. Thou shall know the risk factors for heart disease.

Taken from “Search Your Heart”—Faith-based curriculum for heart health and stroke prevention. The Health & Wellness Program. JWM/UCC is a partner with the American Heart Association. Ten UCC churches have been trained to use this module. To learn more about this program contact: The American Heart Association at 1-800-242-8721 or go to: <http://www.americanheart.org>

Stroke is the 3rd leading cause of death in the U.S. Every 45 seconds someone suffers from a stroke. Every 3 minutes someone dies from Stroke. Sometimes symptoms of a stroke are difficult to identify. The American Stroke Association now recommends that the following three simple questions be asked which could result in prompt diagnoses and treatment of the stroke and prevent brain damage:

1. Ask the individual to smile.
2. Ask him/her to raise both arms.
3. Ask the person to speak a simple sentence.

If the individual has trouble with any of these tasks, Call 9-1-1 immediately! 1-888-4stroke <http://www.strokeassociation.org>
Senator Kerry’s Kids Come First Act of 2005
S. 114 sponsored by John Kerry (D-MA) will provide health insurance to every child in America. The Kids Act is a federal-state partnership. It will focus on state’s expansion of coverage, parents responsibility and eliminating enrollment barriers.

Establishment of Bipartisan Commission on Medicaid
H.R. 985/S.338 sponsored by Heather Wilson (R-NM 1st) and by Gordon Smith (R-OR) establishes the Bipartisan Commission on Medicaid to review Medicaid’s major functional responsibilities. This legislation is similar to the Smith-Bingaman amendment passed during the Senate deliberation of their budget resolution.

Assured Funding for Veterans Health Care Act of 2005
H.R. 515 sponsored by Lane Evans (D-IL) will amend title 38, United States Code, to provide for an assured adequate level of funding for veterans health care.

U.S. National Health Insurance Act
H.R. 676 sponsored by John Conyers, Jr. (D-MI) and H.R. 15 sponsored by John Dingell (D-MI) to provide comprehensive health insurance coverage for all U.S. residents. A related bill H.R. 1399 titled the Health Care Act of 2005 was also introduced by Representative Marcy Kaptur from Ohio.

Affordable Health Care Act
S. 16 introduced by Senator Ted Kennedy (D-MA) will reduce the cost of quality health care coverage and improve the availability of health care coverage for all Americans.

Health Empowerment Zone
H.R. 56, sponsored by Donna Christensen (D-VI) will require the Secretary of health and Human Services to establish health empowerment zone programs in communities that disproportionately experience disparities in health status and health care.

Minority Populations Diabetes Prevention and Control Act of 2006
H.R. 159 sponsored by Juanita Millender-McDonald (D-CA) will direct the Secretary of HHS to increase activities regarding diabetes in minorities.

The Ronald Reagan Alzheimer’s Breakthrough Act of 2005
H. R. 1262 sponsored by Chris Smith (R-NJ) and a companion measure S. 602 sponsored by Barbara Mikulski (D-MD) would double funding for biomedical research on Alzheimer’s disease at NIH, the National Caregiver Support Program, and the Alzheimer’s Demonstration Grant Program.

Repeal Medicare Therapy Caps
S. 438 sponsored by John Ensign (R-NV) would amend Title XVII of the social Security Act to repeal the Medicare outpatient rehabilitation therapy caps on Medicare Part B.

Sources:
- Legislative Tool Kit—http://capwiz.com/results/issues/bills
- Thomas—http://thomas.loc.gov

“I’ve had to cut just a whole array of services from people and I’m done. I don’t want to cut people off of health care; enough is enough ... I will get busloads of people to come and march on Washington, and I think other governors will do the same.”

[Michigan governor Jennifer Granholm, speaking in opposition to President Bush’s proposed Medicaid cuts—Washington Post, 2-28-05]
Push For Passage of Keeping Families Together Act

Mental Health advocates are pushing for passage of this critical legislation to improve access to children’s mental health services. Children with mental health needs are ending up in state child welfare and juvenile justice systems. Send an E-mail to your Representatives and Senators urging them to sign on as an original co-sponsor of the Keeping Families Together Act.

Source: National Mental Health Association—<http://www.nmha.org>

Sound The ALARM for Health Care (The Social Security Debate and the Health Care Agenda)

The Bush Administration has pushed Social Security reform to the Top 10 list of priorities for 109th Congress. The proposed push to dismantle Social Security has dire implications for the future of health care reform. It would doom efforts to expand other social programs, particularly Medicare and Medicaid, and ultimately stand in the way of affordable health care for all. The demand for health care reform cannot get lost in the social security debate. Send letters to your U.S. Senators and Representatives expressing your concern about dismantling Social Security. Ask your members of Congress to go on record opposing proposals to privatize Social Security.

Helpful resources for understanding the issue:

- Universal Health Care Action Network: <http://www.uhcanc.org>
- Campaign for America’s Future: <http://www.ourfuture.org>
- Center on Budget and Policy Priorities: <http://www.cbpp.org>
- Economic Policy Institute: <http://www.epinet.org>

Jeff’s Story

“...legally blind and mentally challenged, he lives independently thanks to Medicaid.”

Jeff from Ohio

Many of people of faith outraged by the proposed cuts to Medicaid let their voices be heard!! On March 17, 2005, the Smith-Bingaman Bi-partisan Amendment to the Senate Budget Resolution to strike all Medicaid cuts passed by a vote of 52-48. We thank Senators Smith (R-OR) and Bingaman (D-NM) for sponsoring the Amendment. Voting for passage were Senators Chafee, Coleman, Collins, DeWine, Smith, Snowe, and Specter. All Democratic Senators and Senator Jeffords (Independent) voted for the Amendment. The Smith-Bingaman Amendment strikes the requirement to cut $15 billion from the Medicaid program over 5 years, therefore protecting the 53 million who rely on Medicaid. Some folks said the Luck of the Irish was with us, but we say “God Is Still Speaking!”

Yet, even though God Is Still Speaking, the fight to protect Medicaid is far from over. The House has now passed a bill which includes $15-20 billion cuts to Medicaid. In order to preserve the Smith-Bingaman victory, call the following Senators today and ask them to “Stick To The Senate Bill That Has No Cuts To Medicaid!” - Senators DeWine (OH), Collins (ME), Coleman (MN), Smith (OR), and Specter (PA)

Any cuts to the Medicaid Program will hurt the elderly, children, veterans, and other vulnerable citizens. These cuts will not only take away needed health care, but will also cut food and nutrition programs.

Source: Families USA -<http://www.familiesusa.org>

ANOTHER WORLD IS POSSIBLE!

Senate Votes To Overturn Devastating Global Gag Rule!

(04/05) The Senate has voted in favor of an amendment offered by Senators Barbara Boxer (D-CA) and Olympia Snowe (R-ME) to the State Department Reauthorization Bill (S.600) that would protect women’s health around the world by curtailing the Bush administration’s attacks on reproductive health and rights in other countries.

Source: Planned Parenthood—<http://www.plannedparenthood.org>
Affordable Health Care for All
A critically important issue for America
Principles for Insuring America’s Health

The United States needs health insurance that is:
• Universal
• Continuous
• Affordable to individuals and families
• Affordable and sustainable for society
• Able to enhance health and well-being by promoting access to high-quality care that is effective, efficient, safe, timely, patient-centered, and equitable

Recommendations on How to Get There

1. Universal health insurance coverage will only be achieved when the principle of universality is embodied in federal public policy.

2. Federal leadership and federal dollars are necessary to eliminate uninsurance, although not necessarily federal administration or a uniform approach throughout the country.

3. The President and Congress should develop a strategy to achieve universal insurance coverage and to establish a firm and explicit schedule to reach this goal by 2010.

4. Until universal coverage takes effect, the federal and state governments should provide resources sufficient for Medicaid and SCHIP to cover all persons currently eligible and to prevent the erosion of coverage.


NOTABLE QUOTE: Following a protest against the cuts in TennCare, Tennessee’s expanded Medicaid program, Gov. Phil Bredesen identified Lori Smith, one of the more vocal activist, as “a poster child for liberal advocates and the media. He denigrated Smith, and many of the 30,000 TennCare clients deemed uninsurable, for making lifestyle choices to work for small businesses that do not offer insurance rather than finding jobs with the state or large companies that do.”

Ms. Smith suffers from Lupus and Multiple Sclerosis and works part-time. [Ceci Connolly, The Washington Post, 1-18-05]

Medical Bills Contribute to Half of All Bankruptcies

About half of bankruptcies filed in 2001 were because of medical bills, according to a study published 02/02/05 on the Health Affairs web site. Data provided by the study includes:
• 46.2% of people reporting bankruptcy in 2001 cited illness and medical bills as the cause.
• 76% of people who had a medical-related bankruptcy had health insurance when they first became ill.
• 38% of those who filed for bankruptcy lost their health coverage at least temporarily by the time they had declared bankruptcy.
• Most of those who filed for bankruptcy because of medical costs were middle-income homeowners.

The full report by David U. Himmelstein, Elizabeth Warren, Deborah Thorn and Steffie Woodlhandler, is available at <http://www.healthaffairs.org>
Five Reasons to Develop a Congregational Health Ministry

5. Most congregations are already involved—to some extent—in the ministry of health, whether or not that title is used.

4. UCC churches are found in places—even today—where health education, prevention programs and even medical care are not adequate and available to all people. Outreach through churches is an important witness.

3. Inequities in the health care system, increases in the numbers of uninsured (now 45 million,) regulation changes in the financing and delivery of health care are faced daily by groups who need the voice and influence of the membership of the UCC to advocate for them.

2. Congregational Health Ministries programs provide wonderful opportunities to welcome and integrate new members into the life of the congregation by providing them with volunteer opportunities that are specific, interesting and for which they will be prepared/trained.

1. Congregational health Ministries articulate and demonstrate willingness to act as Christ did, and an adherence to a belief in compassionate concern for others that is foundational to our denominational faith group and informs our moral values.


A TRAINED HEALTH MINISTRY is empowering and effective in:

- Developing and promoting programs that deal with the many issues relating to health, health care, wellness, welfare and human services
- Building relationships with state and local human service agencies and community organizations
- Identifying public policy issues
- Mobilizing the congregation for action
- Advocating on critical social issues
- Engaging in a comprehensive ministry of health and wellness.

“Lay Approach to Developing A Health Ministry,” Barbara T. Baylor, MPH, Minister for Health Wellness Programs, baylorb@ucc.org

HEALTH MINISTRY TRAINING OPPORTUNITIES

1. "HEALTHY CONNECTIONS" - Certified Lay Minister of Health Program. A program of the National Setting of the United Church of Christ. For more information, contact: Barbara t. Baylor at (216) 736-3708 or by email—baylorb@ucc.org <www.ucc.org/justice/health

2. SEEKING JUSTICE IN HEALTH CARE—Congregational Workshop and Training for faith leaders who want to better understand the U.S. health care system and explore the role of faith communities in working for health care justice. For more information contact: Barbara Baylor at (216) 736-3708 or Rev. Linda Walling, Universal Health Care Action Network, 1-800-634-4422, <http://www.uhcan.org>

3. HEALTH MINISTRIES ASSOCIATION—Resources to assist in the development and planning of a health ministry. 1-800-280-9919, <http://www.hmassoc.org>
HELP US BUILD A “WALL OF WOE”*
Do You Have A Story To Tell? We Want To Hear It!

LOST YOUR HEALTH CARE?

CAN’T GET TO THE DOCTOR?

WORRIED ABOUT A SYMPTOM BUT HAVE NO HEALTH INSURANCE?

MADE TO FEEL UNCOMFORTABLE BECAUSE OF RACE, ETHNICITY OR INCOME?

TURNED AWAY BECAUSE YOU OWE A PAST BILL?

FEEL YOU WERE NOT TREATED IN A CARING WAY?

ARE OUT OF POCKET COSTS TOO HIGH?

MADE TO FEEL UNCOMFORTABLE BECAUSE OF RACE, ETHNICITY OR INCOME?

DID YOU LOSE YOUR HEALTH?

CAN’T AFFORD YOUR MEDICINES?

The Health and Wellness Program, Justice and Witness Ministries of the United Church of Christ and the Faith Project of the Universal Health Care Action Network are collaborating with Congressman John Conyers’ office, other faith traditions and grassroots organizations to build a “Health Care Wall of Woe.” The “Wall of Woe” is a compilation of stories, pictures, poems, news articles, etc. that reflect the woes, suffering and hardships that you, a relative, a friend, and/or members of your congregation have endured because of inequities and injustices in the U.S. health care system. WE NEED YOUR STORIES! The stories will be used to construct a wall display that will be a visual tool to educate and inform law-makers that there is a real health care crisis in this country–A crisis that needs real, workable solutions! And, most importantly, a crisis that the faith community will not let law-makers ignore! Faith traditions must lift their moral voices and speak prophetically that health care is a basic right for everyone!

SUBMIT YOUR STORIES ONLINE TODAY!.
Click Here: <http://www.ucc.org/wallofwoe>
For more information, contact Barbara T. Baylor, MPH Minister for Health and Wellness Programs, JWM/UCC (216) 736-3708; Email-baylorb@ucc.org

HEALTH CARE FACTS

• 45 million Americans (1 in 7) without health care coverage

• 18,000 Americans die prematurely every year (about 2 deaths an hour) because they cannot afford health care insurance

• 9 million children without health care insurance

• Health care costs are the leading cause of personal bankruptcy

• Medical Mistakes is a leading cause of death and disability

• Communities of color endure major disparities in access and treatment

Sources: US Census Bureau; Centers for Disease Control; Americans for Health Care
COMING SOONER THAN YOU THINK!

General Synod, July 1-5 at the Georgia World Congress Center. UCC Health Network Luncheon featuring Gary Gunderson, Executive Director, Interfaith Health Center, Emory University, keynote speaker on “Boundary Leaders: featuring a panel of UCC churches discussing how the alignment of faith and health has helped them to improve the health of their communities. The luncheon will be held on Mondays, July 4, 2005 12:30-3:30 pm Tickets are $20.00 To register for this luncheon go to <http://www.ucc.org>

UPCOMING EVENTS

May is Mental Health Month
Theme: MIND Your Health!
Materials Now Available Online! <http://www.nmha.org>

Cover The Uninsured Week
May 1-8, 2005
Action Kit Available <http://www.CoverTheUninsuredWeek.org/interfaith>
Cover The Uninsured Week is supported by the National Council of Churches—<http://www.nccusa.org>

2005 National Health Observances

MAY
National Osteoporosis Awareness and Prevention Month
Older Americans Month
Asthma and Allergy Awareness
Skin Cancer Awareness
Better Sleep and Hearing Month
National Arthritis Month
National High Blood Pressure Education Month
National Women’s health Week (8-14)

JUNE
Fire Works Safety Month
National Men’s Health Week (13-19)
National Cancer’s Survivor’s Day (5)
National HIV Testing Day (27)

JULY
International Group B Strep Awareness Month

For A Complete List and for resources go to: <http://www.healthfinder.gov>

Resources

Faithful America—<http://www.faithfulAmerica.org>
Campaign for America’s Future <http://www.ourfuture.org>
Center on Budget and Policy Priorities <http://www.cbpp.org>
Economic Policy Institute <http://www.epinet.org>
Families USA <http://www.familiesusa.org>
Health Affairs <http://www.healthaffairs.org>
Americans for Health Care <http://www.americansforhealthcare.org>
Universal Health Care Action Network <http://www.uhcan.org>
Campaign for a National Health Care Program Now! <http://www.cnhcpnow.org>
The Healthy Voice is an informational, educational, and advocacy-oriented quarterly newsletter on current health and health-related issues. It is targeted to members of the Just Peace Action Network (JPANet) Health Cluster, Parish Nurse and Physician Networks, interested health advocates and social justice chairs. It is available online at <http://www.ucc.org/justice/health> and by mail. Contact Barbara T. Baylor, MPH, Minister for Health and Wellness Programs (baylorb@ucc.org) for more information.

The Healthy Voice is made possible with partial funding from Neighbors In Need <http://www.ucc.org/nin>