Introduction

Welcome to *Just Women*! We hope this leader’s guide will help you plan meaningful study sessions using the Fall 2015 issue of *Just Women*.

In the Introduction to Fall issue of *Just Women*, Chesla Nickelson, Program Director of Disciples Women writes “Writing our future story, Disciples Women will focus on developing programs, resources, and gatherings that support our purpose *to be a conduit for diverse connections empowering each woman to find her own voice and live out her call*.” This has been an ongoing part of the mission and ministry of Disciples Women throughout our history. From its inception in 1874 as the Christian Woman’s Board of Missions (CWBM), women of the Christian Church (Disciples of Christ) have changed their own lives and the lives of others by refusing to accept narratives that limit their possibilities and only partially accepts their gifts. Recognizing the power of women and the call of God in the life of women, CWBM was the first group to be managed entirely by women while at the same time recognizing and accepting the gifts of women and men who came to be a part of the staff. Throughout its history, women’s ministries of the Christian Church (Disciples of Christ) have recognized that they are part of an ongoing story that is being written with their lives. This realization has been lived out through the examination and reimaging of the organization throughout its history. In 1949, CWBM gave way to Christian’s Women Fellowship when women in the Christian Church (Disciples of Christ) were first organized at a congregational, region and world level to “develop all women in Christian living and Christian service.” Four years later in 1953, the International Christian Women’s Fellowship (ICWF) was launched. ICWF expanded programs, multicultural leadership emerged, and Woman-to-Woman Worldwide began connecting women around the globe as the women of the Christian Church continued to change lives and a shared narrative was written. Most recently, flexibility rather than a fixed narrative has been emphasized and a new chapter of International Disciples Women’s Ministries began and continues to be written.

*Just Women* is a part of that telling that story as well as serving as resource for those who are writing the story. The Fall Issue focuses on how women are changing the narratives of their lives rather than merely accepting what others are writing for them. In this issue, a new feature Connections provides a place for Disciples Women in the United States and Canada to share ideas, resources, and ministry stories.

In this study guide, we will consider how to rewrite the story of those with mental illnesses for families and for the church as we read *Blessed are the Crazy: Rewriting the Story of Mental Illness, Family and Church*, pages 4 – 7. We will consider what we are
teaching as we share Bible stories and how our faith stories may be a source of empowerment for girls and women as we read *What Do They Say We Are? Redeeming Faith Stories for Women* by Jennifer D. Crumpton, pages 10 – 13. We will be introduced to *Connections* as we learn about women at the 2015 General Assembly, Pages 14 – 17. Finally, we will consider how we can rewrite our stories as we take charge of our physical health we read *Past Bad Decisions Do Not Define Our Future Story*, by Crystal L. Cochren, page 23 and *Fitness Coach who Leads Women who Do Better Together*, by Patrice Pickett, pages 24 – 25.

**Preparation**

In preparing for the study sessions outlined here, have an individual subscription for each woman in your group. If you need more magazines, go to [http://www.discipleswomen.org](http://www.discipleswomen.org), and follow the link to *Just Women*.

The four sessions in this study guide will provide opportunities for the members of your group to look at the narrative that they are writing and consider what changes they desire as they write the next chapter with their lives. Read through the Fall 2015 edition and familiarize yourself with how the theme is developed in the articles. Ask your group members to read the article that you will be focusing on before your meetings so everyone will be prepared to participate in the study.
Session 1

Supplies
Bibles, Copies of the article *Blessed are the Crazy: Rewriting the Story of Mental Illness, Family and Church*, pages 4 – 7, copies of GA resolution 1523 Becoming a People of Welcome and Support to People with Mental Illness and/or Mental Health Issues, and a computer where you can access www.stations2015.com.

Opening Prayer

Lord Jesus Christ,
you healed those who suffered in mind as well as body.
Look in your compassion
on people among us who are mentally ill.

We pray for all
- who are driven by depression to the depths of despair
- who attempt to end their own lives
- who are victims of obsession
- who are persecuted by the voices they hear
- who live in a world of their own
- who are violent or withdrawn
- who are plagued by religious delusions.

Take them from all unreality
Help them to know that in the depths
you search for them
and that in your presence
you hold them secure.
Grant to them wholeness of mind
So that they may be at peace,
at one with themselves
and at one with you.
We ask this for your name’s sake. Amen

Neville Smith¹

Icebreaker

As your group arrives, share the following information about Mental Health by sharing the Myths and having group members respond by sharing their understandings. When the discussion seems to be drawing to an end, share the facts before moving on to the next myth. Ask the group what surprised them in the information that was provided? Share symptoms of Mental Illness. Share ways to maintain mental health. Ask group to identify ways that they cope.

Mental Health Myths and Fact

Source – MentalHealth.gov

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. Factors that contribute to mental health problems include: biological factors, life experiences, and family history of mental health. Positive mental health allows people to

- Realize their full potential
- Cope with the stresses of life
- Work productively
- Make meaningful contribution to their communities

The Myths

1. Mental health problems don’t affect me.
   - Mental health problems are very common.
   - In 2011 one in five American adults experienced a mental health issue. One in ten young people experienced a period of major depression. One in twenty Americans lived with a serious mental illness such as schizophrenia, bipolar disorder, or major depression.

2. Children don’t experience mental health problems.
   - Fact very young children may show early warning signs of mental health concerns. These mental health problems are often clinically diagnosable, and can be a product of the interaction of biological, psychological, and social factors.
   - Half of all mental health disorders show first signs before a person turns 14 years of age, and three quarters of mental health disorders begin before age 24.
   - Less than 20% of children and adolescents with diagnosable mental health problems receive the treatment they need.

---

2 http://www.mentalhealth.gov/basics/myths-facts/.
3. People with mental health problems are violent and unpredictable.
   - The vast majority of people with mental health problems are no more likely to be violent than anyone else. Most people with mental illness are not violent and only 3 – 5 % of violent acts can be attributed to individuals living with a serious mental illness. In fact, people with severe mental illnesses are over 10 times more likely to be a victim of violent crime than the general population.

4. People with mental health needs, even those who are managing their mental illness, cannot tolerate the stress of holding down a job.
   - People with mental health problems are just as productive as other employees. Employers who hire people with mental health problems report good attendance and punctuality as well as motivation, good work, and job tenure on par with or greater than other employees.
   - When employees with mental health problems receive effective treatment, it can result in lower total medical costs, increase productivity, lower absenteeism, and decreased disability costs.

5. Personality weakness or character flaws cause mental health problems. People with mental health problems can snap out of it if they try hard enough. Mental health problems have nothing to do with being lazy or weak and many people need help to get better.
   - Many factors contribute to mental health problems including: biological factors, life experiences including trauma or history of abuse, and family history of mental illness.

6. There is no hope for people with mental health problems.
   - Studies show that people with mental health problems get better and may recover completely. Recovery refers to the process in which people are able to live, work, learn, and participate fully in their communities. There are more treatments, services, and community support systems than ever before.

7. Therapy and self-help are a waste of time.
   - Treatment for mental health problems varies depending on the individual and could include medication, therapy or both. Many individuals work with a support system during the healing and recovery process.

8. I can’t do anything for a person with a mental health problem.
   - Friends and loved ones can make a big difference. Only 38% of adults with diagnosable mental health problems and less than 20% of children and adolescents receive needed treatment. Friends and family can be important influences to help someone get treatment and services they need by: reaching out and letting them know help is available, helping them access mental health services, learning and sharing facts about mental health,
treating individuals with mental illnesses with respect, and refusing to define individual with mental illnesses by their diagnosis.

9. Prevention doesn’t work.
   - Prevention of mental, emotional, and behavioral disorders focuses on addressing known risk factors such as exposure to trauma that can affect the chances that children, youth, and young adults will develop mental health problems.
   - Promoting the social-emotional well-being of children and youth leads to
     Higher overall productivity
     Better educational outcomes
     Lower crime rates
     Stronger economies
     Lower health care costs
     Improved quality of life
     Increased lifespan
     Improved family life

**Symptoms of Mental Illness**

- Eating or sleeping too much or too little
- Pulling away from people and usual activities
- Having low or no energy
- Feeling numb or like nothing matters
- Having unexplained aches and pains
- Feeling helpless or hopeless
- Smoking, drinking, or using drugs more than usual
- Feeling unusually confused, forgetful, on edge, upset, worried, or scared
- Yelling or fighting with family and friends
- Experiencing severe mood swings that cause problems in relationships
- Having persistent thoughts and memories you can't get out of your head
- Hearing voices or believing things that are not true
- Thinking of harming yourself or others
- Inability to perform daily tasks like taking care of your children, work, or school

**Maintaining Mental Health**

- Getting professional help if you need it
- Connecting with others
- Staying positive
• Getting physically active
• Helping others
• Getting enough sleep
• Developing coping skills

**Scripture Focus**

*Matthew 23: 3 – 4*

**Questions**

• Sarah Lund shares her story of first becoming a Disciple and how that is connected to her becoming an ordained minister. What do you first remember about becoming a Disciple? Where is your space to deepen your spiritual identity and connect with who God is calling you to be?

• Read Matthew 23: 1 – 12. In this passage, Jesus condemns church leaders who seek honor and who place burdens on others while not practicing their own teaching. What burdens do we place on individuals with mental health issues? What would it look like to practice compassion and hospitality with persons with mental health issues?

• Sarah shares how she was able to break the silence around her father’s mental illness in the safety of her Bethany small group. What contributes to the silence and secrecy that surrounds mental illness? What are your experiences with individuals who have been diagnosed with a mental illness? In your experience are those individuals treated differently than individuals who do not have a mental illness?

• How openly is mental illness discussed in your congregation? What attitudes are expressed in these discussions or lack of discussion? How can we create safe spaces for others to break the silence?

• Sarah Lund raises the question, “What does it look like for the church to love its neighbors (and its members, lay leaders, staff, and clergy) who live with mental illness?” How do you answer that question? How do you/your congregation provide support and foster friendships with individuals with mental illnesses?

• Read and discuss GA – 1523 which was adopted at the 2015 General Assembly of the Christian Church (Disciples of Christ) in Columbus, Ohio this past July.

**Resolution 1523 BECOMING A PEOPLE OF WELCOME AND SUPPORT TO PEOPLE WITH MENTAL ILLNESS AND/OR MENTAL HEALTH DISORDERS**

**WHEREAS**, Scripture affirms that all people are created in the image of God and share with all others in the worth that comes from being unique individuals (Genesis 1:26-7); and
WHEREAS, Scripture affirms that as Christians we are many members, but are one body in Christ each with different gifts, called by Jesus to love neighbors as ourselves and called to the ministry of reconciliation and wholeness within the world and within the church (2 Corinthians 5:18); and

WHEREAS, Scripture affirms that as Christians we are called to be compassionate, rejoice in hope, care for the needs of others, weep with those who weep... (Romans 12:9-15); and

WHEREAS, according to the National Institute of Mental Health (NIMH), 20% of adults experience a mental illness in a given year and 20% of teenagers experience a severe mental illness in the United States, [1] and, according to the Mental Health Commission of Canada, 20% of adults experience a mental illness and 10-20% of teenagers experience a mental illness in Canada [2]; and

WHEREAS, according to the Canadian Mental Health Association, suicide accounts for 24% of all deaths among 15-24 year olds and is one of the leading causes of death in both men and women from adolescence to middle age in Canada[3], and, according to National Alliance of Mental Illness (NAMI), mood disorders are the third most common cause of hospitalization for adults ages 18 to 44, suicide is the tenth leading cause of death and the second leading cause of death for ages 15 to 24 years in the United States[4]; and

WHEREAS, loved ones and caregivers of people who have a mental illness are also affected and need support; and

WHEREAS, recovery is not a cure; but “a deeply personal, unique process..., a way of living a satisfying, hopeful and contributing life even with limitations caused by the illness and involves the development of new meaning and purpose in one’s life as one grows beyond the catastrophic effects of mental illness[5]”; and

WHEREAS, according to NAMI, recovery is not only possible but probably for people[6] because, with a combination of pharmacological and psychosocial treatments and support, 70-90% of people with a serious mental illness have significant reduction of symptoms and improved quality of life[7]; and

WHEREAS, people who have a mental illness often do not seek help because they fear the associated stigma, [8] do not know how to access services and/or can’t afford services (especially therapy); and

WHEREAS, a recent study from Baylor University, concluded, “clergy, not mental health professionals, are the most common source of help sought in times of psychological distress” [9];
THEREFORE, BE IT RESOLVED that the General Assembly of the Christian Church (Disciples of Christ) in the United States and Canada, meeting in Columbus, Ohio, July 18-22, 2015, calls upon all expressions of the Christian Church (Disciples of Christ) in the United States and Canada to strive to become a people of welcome and support to all God’s children despite their mental health status; and

BE IT FURTHER RESOLVED, that church leaders become more knowledgeable so they can fight stigma, be supportive of recovery, and provide information about mental health, recovery and available resources for treatment; and

FINALLY, BE IT RESOLVED that the General Assembly of the Christian Church (Disciples of Christ) in the United States and Canada, meeting in Columbus, Ohio, July 18-22, 2015, calls upon the Disciples Home Missions to encourage and help enable the education of church leaders (lay and clergy) by putting on its website and in print information to enable regions and congregational leaders to fight stigma, be supportive of recovery, educate church members about mental health, and provide information on available resources in order that people affected by a mental illness, their loved ones, and caregivers will experience welcome, support and recovery.

Christian Church (Disciples of Christ) in Arizona


- In your own words summarize this resolution. What thoughts and feelings do you experience as you read this resolution? How can you/your congregation “become more knowledgeable so they can fight stigma, be supportive of recovery, and provide information about mental health, recovery, and available resources for treatment?”

GOING DEEPER

Introduce your group to Mary Button. How does she describe her experience of mental illness? View the Stations of the Cross on the website. What thoughts and/or feelings are evoked as you study the images? A preview to the Stations of the Cross book is available at http://store.churchhealthcenter.org/products/stations-of-the-cross?variant=1116448452. You may choose to use this free portion or purchase the entire book and study it with your group.
**Closing Prayer**

Close your group with the Disciples Women Benediction or have a member of your group close in prayer.

**Benediction**

*God, be merciful unto us and bless us, and cause your face to shine upon us; that your way may be known upon the earth, your saving health among all nations, through Jesus Christ our Lord. Amen.*
Session 2

Supplies

Prior to your group meeting divide your group in half. Ask half of the women to read Genesis 16 and be prepared to summarize it. Ask half of the women to read Genesis 21: 8 -20 and be prepared to summarize it.

*Opening Prayer*

O Flaming Spirit of Love,
We cry to you in the midst of the struggles of our lives!

**O sacred fire, empower us.**

Together we release our anger and our rage.  
Transform them into the power of your compassion.

**O sacred fire, empower us.**

Together release our fears.  
Transform them into courage.

**O sacred fire, empower us.**

Together we release our despair.  
Transform it into hope.

**O sacred fire, empower us.**

Together we release our doubts.  
Transform them into wisdom.

**O sacred fire, empower us.**

We offer to your our broken sisterhood.  
We offer to you our broken brotherhood.
Help us to remember the wholeness that you intended.

O God of fire,
burn within us,
heal us, strengthen us,
remake us,
empower us with your passion for justice. Amen

Victoria Walton for the Saskatchewan Christian Feminist Network

Icebreaker

Display the poster with the names of the Women from the Bible where the members of your group can see it. Ask the women to share what they remember about each of the women. If they are unable to identify a woman have someone read the associated Bible verses. After they have identified each one of the women, ask each woman in your group to identify what woman in the Bible (one discussed or another Woman in the Bible) they relate best to? Ask them to identify which woman in the Bible they relate least to?

Scripture Focus

Genesis 16, Genesis 21: 8 – 20

Questions

- Jessie tells Jennifer D. Crumpton that she wants to be a concubine. What are her reasons? What where your thoughts and/or feelings about Jessie's reasoning?
- Crumpton suggests that Jessie’s identification with the concubine is a, “hidden consequences of a phenomenon we tend to overlook: the inevitable infiltration of self-defeating beliefs about God into the female Christian upbringing.” Do you agree or disagree? Why or why not? How have you experiences the infiltration of self-defeating beliefs about God? about women?
- In her article Crumpton states that once she began to move away from a faith based on male constructs she found herself asking the following questions: “Now that I saw both God and myself differently, how would I pray? How would I develop spiritually? Would I read the Bible? How would I build a relationship with God whom I couldn’t year picture or name?” Have you ever had to answer any of these questions? What were your answers? Have you

had other questions as you have encountered God through male constructs and a patriarchal system?

- Crumpton states that she found that she was no longer interested in the “same old tired ‘Christian lady’ stuff about purity, piety, patience, prudence, and obedience. I needed a Christian faith that would empower me as a woman.” She goes on to state that she wants to be an “effective woman: a productive, creative, consequential human being.” What does a Christian faith that empowers women look like? How is it lived? What does it mean to be an effective woman, a productive, creative, consequential human being? How is the church facilitating the development of effective women? How do you see yourself as an effective woman? Who do you know that has worked for the empowerment of women in the church? How have they done this?


- Read Genesis 16:7 -15. In this passage, Hagar finds herself in the wilderness. She feels hopeless and desperate without a sense of a future. In the midst of her despair, a messenger comes from God. Speaking directly to her, God identifies possibilities for her future; a future in which God makes direct promises to Hagar. Her future will include a son, Ishmael, who has a part in fulfilling God’s promise to Abraham.

    In the passage, God calls Hagar by name something that Abraham and Sarah have failed to do. Hagar’s understanding of God is one who sees rather than speaks (interestingly Ishmael means “God who hears). Hagar’s naming of God reminds us that God is not only one who speaks to us. God is one who sees the circumstances of our lives and responds to the specificity of those circumstances. In this passage, Hagar sees herself without a future. God assists her by reframing her possibilities, refocusing her to consider her future. God sees the reality of Hagar’s circumstances and he recognizes her specific need. He responds in a way that suggests new possibilities. God can do the same for us.

    How is this story familiar to you? How is this story new to you? What does it mean to be seen by God? How do we see/ fail to see women in our society?

- According to Crumpton, a Barna study reveals five factors that are changing women’s relationships with the church: 1) competing priorities, 2) busyness, 3) the changing family structure, 4) shifts in beliefs, and 5) lack of emotional engagement and support at church? What are some of the shifts in beliefs that Crumpton identifies in her article? Have your experienced these in your community? She states that the most disappointing of these factors is the lack of emotional engagement and support. How does community support women of all generations? Are there certain generations that are being reached more effectively than others? What do you believe contributes to this? Brainstorm
how your congregation might be a place of encouragement and support for girls and women of all ages. 

- Take some time and share stories of the effective women of faith that you know.

Closing Prayer

Close your group with the Disciples Women Benediction or have a member of your group close in prayer.

Benediction

God, be merciful unto us and bless us, and cause your fact to shine upon us; that your way may be know upon the earth, your saving health among all nations, through Jesus Christ our Lord. Amen.
Session 3

Supplies – Bibles, access to a computer and Internet connection, and Connections pages 14 – 17

Connections is a new feature of Just Women that is a “conduit for diverse connections empowering each woman to find her voice and live her call.” This session will explore what Disciples women shared at the 2015 General Assembly as your group seeks to identify your call to serve God and others.

Opening Prayer

Open by praying the Disciples Women Prayer in unison.

Unto you, O God, we give our thanks and lift our hearts in prayer. May your presence be with us and your love surrounds us as we work together as women of faith. Open our eyes to the needs of the world and fill our hearts with concern for all people. Guide us so that we may truly serve you through Jesus Christ, our Lord. Amen.

Scripture Focus

Matthew 28: 16 – 20

Activities

Have a computer with Internet access available for your group.

- 3000 bands printed with “Every 30 seconds...” were distributed to attendees of the General Assembly to bring awareness to the shocking fact that every 30 seconds another woman or child becomes the victim of human trafficking. Take a few moments and explore the website https://www.discipleswomen.org/linkbylink/ to familiarize yourself with the Disciples Women’s social action emphasis.

- The 2015 theme of the General Assembly was Soar! Working with the scripture “on the like eagles” Disciples Women were encouraged use the image of the peace crane and bring “birds of pray” to Ohio. 2000 cranes were gathered and displayed on the communion table and during worship during the assembly. Brainstorm how you might use “bird of pray” in your congregation. To learn how to make origami peace cranes visit “How to Make an Origami Peace Crane” on youtube.com. To go deeper share the story of the Peace Crane by Sheila Hamanaka or One Thousand Paper Cranes: The Story of Sadako and the Children’s Peace Statue by Ishii Takayuki.

- Prior to the Assembly, individuals and congregations were invited to bring plarn (plastic yarn) to Ohio to be used to crochet mats for the homeless. 13
mats were donated to the Open Shelter in Columbus, Ohio. Consider if this is a ministry that individuals in your congregation are called to engage. Contact a local shelter to determine if mats are needed in your area. To learn how to make mats visit "How to Make Sleeping Mats for the Homeless" on youtube.com.

- Since the 2010 Quadrennial the Disciples Women have been educating themselves and working to break the chains of modern day human trafficking. Learn how your lifestyle choices result in slaves working for you by visiting the online tool http://slaveryfootprint.org. After each woman in your group has completed the tool brainstorm how you might decrease your footprint.

- Discuss how your group is going to use the 2016 Just Women Bible Study “The Table and Beyond: Lavish Hospitality in the Bible.”

- Visit http://missionfirst.disciples.org to familiarize yourself “Mission First” the Disciples initiative to help identify our next mission priorities as we move toward 2020 and beyond. At the Assembly Dr. Sharon Watkins reminded those present that Fred Craddock stated, “The question is not whether the church is dying, but whether it is giving its life for the world.” What do you think this means? How are you / your congregation giving your life for the world?

- While in Ohio, attendees at the Assembly knitted scarves for the Open Shelter in Columbus. Experienced knitters shared their expertise with the less experienced. Visit the website www.craddockcenter.org to familiarize yourself with the Children’s Enrichment Program.

- Read Matthew 28: 16 – 20. What seems familiar to you in this passage? What seems new to you in this passage? The passage speaks of some doubting, how do you interpret this? What does it mean to make Disciples? How does this passage point us to look outside of the local congregation? How are the activities discussed in this article a part of the Great Commission? What are the ministries that enact the Great Commission in your congregation?

**Closing Prayer**

Close your group with the Disciples Women Benediction or have a member of your group close in prayer.

**Benediction**

*God, be merciful unto us and bless us, and cause your face to shine upon us; that your way may be known upon the earth, your saving health among all nations, through Jesus Christ our Lord. Amen.*
Session 4

Supplies

Opening Prayer

Eternal God,

_Strengthen the spirit of EVERY Eve you’ve created._
_Every RIB you found WORTH it_
_Found golden_
_Then molded_
_Into an unmatched energy the universe couldn’t spin without._
_They’ve never been without_
_Hugs and kisses from mothers or mother figures._
_Mothers figured,_
_They might as well manifest into reality the love YOU embedded in their SOULS,_
_Wrap this world so tightly in their arms that no parentless child would ever feel any holes._
_They would only FEEL . . . WHOLE._
_It’s in her nature to love Whole-Heartedly_
_To love hardened hearts, even though she hardly sees That she needs . . ._
_Love too._
_God love her like you’d love to_
_Love her like you have to_
_Show her that humanity’s version will never quite sufficiently do but YOU . . ._
_Will never grow fickle_
_You can’t be overused_
_You can’t be outdone you can only outdo and if she STILL doesn’t get it, HOLD her like she held that young boy, FILL her like she filled his hungry tummy, GIVE her YOUR shoulder like she gave him her pillow. And help her to know . . . That she could only do for HIM, because you did for HER. And THAT love . . . Is forever._

Amen

*Mariah Ivey, A Prayer for Her, Just Women page 31.*
Icebreaker

As your group arrives please give each woman a copy of the Health Indicator worksheet and ask them to complete the worksheet. After the women have had the opportunity to complete the worksheet, ask them to share their self-evaluations of their health. In what areas are changes needed?

Scripture Focus
Psalm 139: 13 – 16
I Corinthians 3: 16 – 17

Questions
- Crystal Cochren identifies a history of “bad decisions” that affected her level of fitness. What type of decisions have you made that affected your level of fitness?
- Access the Internet http://www.today.com/popculture/6-women-drop-320-pounds-vow-live-longer-2D12092203 and watch the video segment 6 women drop 320 pounds, vow to live longer. What contributed to their weight loss? What was the impact of making healthier life choices? What are your experiences in making changes for healthier life choices?
- Summarize Patrice Pickett’s journey from being sick and tired to being healthier. What motivated Pickett? What do you find to be motivational for maintaining healthier life choices? How did the buddy system help Pickett? Have you ever had an accountability partner? Share your experiences.
- Read Psalm 139: 13 – 16. In your own words summarize this scripture. How does this scripture relate to healthier life choices?
- Read I Corinthians 3; 16 -17. What does it mean to be a temple of God? How does this relate to making healthier life choices?
- In a society that idolizes youth and physical beauty how do we maintain the balance of making healthy choices without succumbing to an unhealthy preoccupation with physical appearance and beauty? What distinguished health from physical appearance?

Closing Prayer
Close your group with the Disciples Women Benediction or have a member of your group close in prayer.

Benediction
God, be merciful unto us and bless us, and cause your face to shine upon us; that your way may be known upon the earth, your saving health among all nations, through Jesus Christ our Lord. Amen.
Health Indicators

1. A Healthy Diet

The following is recommended to be included in a healthy diet

- 2 – 3 cups of vegetables
- 1 ½ - 2 cups of fruit
- 5 – 6 ½ low fat protein
- 5 – 8 ounces of grain, with half being whole grain
- less than 23 mg of sodium
- less than 300 mg of cholesterol

What I have eaten over the past forty-eight hours

Breakfast

Lunch

Dinner

Breakfast

Lunch

Dinner

How I would evaluate my eating over the last forty-eight hours (check one)
Excellent ________ Good ________ Fair ________ Poor ________
2. **Regular Exercise**
   *2 ½ hours of moderately intense activity per week is recommended*

Amount of Exercise

Last week __________ hours                This week __________ hours

Is this typical? __________ yes           __________ no

How I would evaluate my exercise over the two weeks (check one)

Excellent __________ Good __________ Fair __________ Poor __________

3. **Normal blood pressure**

My blood pressure at last check-up

Medications that I take for blood pressure

4. **Normal Cholesterol**

My cholesterol at last check-up

Medications that I take for cholesterol

5. **Normal Blood Sugar**

My blood sugar at last check-up

I am diabetic __________ yes           __________ no

Medications that relate to my blood sugar
6. **Routine Immunizations for infectious diseases**

   My immunizations are up to date ______________ yes  ______________ no

   I have had a influenza shot ______________ yes  ______________ no

   I have had a pneumonia shot ______________ yes  ______________ no

7. **Normal Bone Density with screening beginning for women at age 65.**

   I have had a bone density scan ______________ yes  ______________ no

8. **Preventative Dental Care**

   I see my dentist regularly ______________ yes  ______________ no

9. **Regular Vision Screening and Eye Care**

   I have regular eye screening ______________ yes  ______________ no

10. **Hearing Screening beginning at age 50 and every 10 years thereafter.**

     I have had a hearing screen ______________ yes  ______________ no

Birthdate ______________ Height _______ Weight _______
Other health factors that are of significance

Family history of disease that is notable