

RECOMMENDATIONS

**FOR THE ORGANIZATION
AND PLANNING OF ACTIVITIES**



**Health Ministries Department
Euro-Africa Division**

HEALTH MINISTRIES DEPARTMENT
*Recommendations for the
Organization and Planning of Activities*

EURO-AFRICA DIVISION
October 2000

Health Ministries Department leaders have often asked for guidance regarding the organization of their department and planning of activities. The following recommendations shall assist in this endeavor. Basically, the activities of the Health Ministries Department comprise the promotion of a healthy lifestyle inside and outside the church, and in many cases, the establishment and maintenance of health care institutions, always leading to Christ as the true savior and healer.

The specific activities may vary from country to country according to particular circumstances and needs. The following considerations represent an overall outline to assist the HM Director in the planning of his/her activities. Additional guidelines and suggestions may be found in the General Conference Working Policy book, chapter G, which should exist in the library of each Union and Conference. A partial extract of this chapter is found in the Appendix A.

We encourage the HM Leaders to use their own creativity in finding new ways and methods for effective health promotion to reach all classes of society.

A. ORGANIZATION OF THE HEALTH MINISTRIES DEPARTMENT

1. The Health Ministries Department as a Resource Center

It is impossible for each HM Department office to store all available literature on health promotion and to have a full stock of audio-visual materials. Nevertheless, there should be a basic selection of books and useful journals for reference. (See appendix B) At least have some catalogs and addresses about audio-visual material in case someone asks you for help. Continue upgrading your resources.

It is a good practice to keep written record in a special file of all materials that are loaned out, even if it is only for a few days. Register the date, name of the person and item that has been loaned and also put a mark when it is returned.

A good thing is to have a whole file cabinet to store pictures, illustrations, journal excerpts, references, articles, etc. under specific topic titles according to your experience and needs. A good filing system is of great help to easily find materials.

Ideally each HM Department Leader should have a modern computer (Pentium II or above) with a large hard disk (4 GB or more), CD-ROM and an inkjet color printer in order to produce color overhead transparencies or computer presentations in a professional manner. Time has now come for HM Leaders to exchange the products of their brain work with each other either by modem or at least by exchanging diskettes.

Speaking about exchange, I urge you to freely share any new finding in literature, or special material which would be useful in health promotion with your fellow workers on all

levels. This will save a lot of duplicate work and will contribute to finish our work quickly, so that Jesus may return soon.

2. Communication

An efficient channel of communication with your co-workers (local health leaders, physicians, nurses, pastors, self-supporting workers, etc.) is necessary in order to secure unity in philosophy and objectives. You also need feedback from above and below. Search for the best method of communication.

Possible means for communication are: Departmental newsletter, circular letters, personal letters, Compuserve or Internet messages, phone calls, meetings, announcements in denominational periodicals, etc.

It is important to have good address lists of the SDA health professionals in your field, which include name, age, specialty, address, phone, FAX and special remarks. We all know that it is a difficult task to keep these lists updated. Do your best!

You should also have the addresses of all self-supporting institutions and of lay people interested in health promotion since these may be of valuable help in your work, or possibly, cause some trouble.

Furthermore, it is good advice to have addresses of important specialists and institutions worldwide to which you may turn for assistance, materials, consultation or to request guest speakers.

Now, that you have addresses and resources, use them! Don't work alone. Get advice and help from others and let them know what you are doing, your success, but also your failures and your dreams. Others may benefit from your experiences and be strengthened as well. Use words and letters of encouragement with your co-workers and communicate often with your superiors, not only when you are in need. Pray for each other.

3. Finances

There are always more needs than available resources. As the Lord's stewards it is important to carefully plan the yearly budget, to set priorities and to practice great economy in the expenses.

If you have a good project and if you can write a convincing proposal, there are chances that you may get some funding from the treasury department or from external donors. A written proposal will also assist yourself to better evaluate your own project. Much more could be said about management, financing, development and evaluation of projects. There are many good and concise handbooks available on the market. Don't hesitate to also ask counsel from other experienced leaders.

4. Cooperation With Other Departments

Finally, don't hide yourself in your department. Work as a team with your colleagues of the other departments. Health and temperance is part of many aspects of church education, ministry, evangelism, youth, ADRA, family life, etc. They will be happy to participate and you will achieve more.

B. HEALTH PROMOTION FOR CHURCH MEMBERS

1. Health Education in SDA Schools

This is basic in order to lay a firm foundation of knowledge of the principles of the health reform for the next generation. At the same time it serves as a protection against extremism and quackery.

There is a curriculum prepared for the teaching of principles of a healthy lifestyle in the SDA theological seminaries. It is the duty of the HM Leader to assure that this teaching be realized and to assist in its implementation, if necessary.

2. Printing of Literature on Health Reform

This is another important pillar in health reform. Without sound literature, people have no firm anchor and may be led astray by any current of philosophy.

a) E.G. White books -

Are the basic books on health by E.G. White (Ministry of Healing, Counsels on Diet and Foods, Counsels on Health, Medical Ministry, Temperance) translated into your country's language? If not, search for ways to have them translated as soon as possible. The translation and publishing of these books should be directed by our own publishing houses in order to secure accurate work.

b) Other books on health reform -

There are several other good books which may complement in different areas of health reform. See Appendix B.

c) Denominational periodicals -

If a special journal on health is being published in your field, be sure its contents represent the philosophy of the Church and do not promote or advertise dubious methods or products.

Do not leave the responsibility of this surveillance in the hands of the editor alone: Let the editor know that you as the HM Leader are also interested in the soundness of this journal.

Some articles on health reform which are addressed only to church members should be published in the Adventist Review (or corresponding journal). In fact, the publishing of special articles on health reform in our Adventist Review should be fostered.

d) Health Department Newsletter -

The publication of a regular newsletter requires expertise, time and money. The utility of it must be carefully evaluated. (See also point A-2 on Communication)

3. Food Service of SDA Institutions

It is part of the duties of the HM Directors to assist the leaders of our institutions (schools, old people's homes, recreational centers, hospitals, etc.) in securing a food service according to General Conference guidelines for SDA institutions. All institutions have received these guidelines. (Appendix C.)

4. Health Professionals

Physicians, dentists, nurses, paramedics, medical students, chaplains are all valuable elements in promoting health reform. Some of these have their own association and regular conventions. These conventions are excellent opportunities to motivate our health professionals for medical missionary work. A special document for the planning and organization of such conventions is available at the EUD Health Ministries Department. (Appendix D)

It is very important for the church HM Leader to cultivate good relationship and communicate regularly with the SDA health professionals.

5. SDA Hospitals and Clinics

It is part of the duties of the HM leader to give counsel to health-care institutions in regard to the fulfillment of their objectives and to help in the recruiting SDA personal for these institutions and for the mission field in close cooperation with the Division Secretary.

6. Health Sermons and Seminars

Many occasions can be used as opportunities for the presentation of health sermons or lectures to the church members. In planning these sermons or seminars, great care must be taken to present a balanced message. Health reform is much more than “not eating meat”. Presentation of extreme ideas and polemics over unimportant food issues must be avoided.

a) The General Conference has assigned each year one week for Health and Temperance, usually in the month of October. The offering of the last Sabbath of this week is for the Health and Temperance work. The use of this opportunity is often forgotten because of lack of early planning. Each church should have a health sermon on this Sabbath, either by the pastor himself or by an invited health professional (including ladies).

b) Health retreats and week-end seminars -

These are special occasions to present different health-related topics more in depth. Round-table talks, discussions, films and other didactic methods are recommended.

It is ideal to invite one or more special guest lecturers for these occasions. There is a tendency, however, that only health-oriented people attend this kind of meetings. Special efforts must be made to also attract church members who may benefit from these lectures.

c) Some churches in other Divisions have introduced a few minutes of health talks on Sabbath morning before the sermon or use other meetings during the week for ongoing series of study of different topics on health reform. This depends on local circumstances and needs. Be creative in planning your activities. Any innovation meets some resistance at the beginning. Proceed wisely and stepwise.

C. PUBLIC HEALTH PROMOTION

Considering the health message as the “entering wedge” it plays an important role in preparing the hearts of the people for the gospel of salvation by Jesus Christ. This work is being done by our many hospitals, clinics and private medical practices where devoted Christian doctors and nurses provide healing for sick bodies and souls.

Actually preventive medicine through lifestyle change is gaining increasing popularity. It is mainly in this area where HM Leaders exert their activities. This is a vast and open field with many possibilities for creative activities. Nevertheless, we must be aware that human suffering and the desire for better life is also being exploited by other religions, political and private groups sometimes for personal advantages. We must be careful to present a clear and distinctive message that withstands Biblical and scientific criteria.

The promotion of extreme ideas, specially in nutrition, even by well-meaning people, may do more harm than good to the promotion of health reform. There is always a danger to contaminate the good message with quackery or New Age philosophies.

1. Contact with Healthcare Authorities (government, universities, private organizations, others).

It is of good sense to know the activities and priorities of other organizations in our area of influence and to cultivate good public relations with them. They may provide us moral or even financial support if our activities harmonize with their objectives.

2. Public Conferences and Lectures on Health

The content must be sound and the presentation done in a professional way. According to the possibilities such conferences may be held in public halls, schools, or in our own churches.

- a) Topics and materials.

There are several well-organized seminars already prepared on various subjects of public concern:

- Smoking cessation.

Since the introduction of the “Five-day Plan” by Dr. Wayne McFarland and Dr. Elman J. Folkenberg some 30 years ago, many other programs and methods came into the market, from group therapies to hypnosis, acupuncture and the nicotine patch. The recently revised “Five-day Plan”, called now “Breathe-Free” (in America), or “Quit Now!” (in Australia), or “Endlich Frei!” (in Germany) is still one of the best. In fact, it is the only program with spiritual content and a healthy lifestyle approach. We must recognize, nevertheless, that the number of participants is constantly decreasing in the Western countries. Eastern and Moslem countries are still a virgin terrain for smoking cessation programs.

- Stress management.

This is still an attractive topic and fits well into the evangelistic campaigns. In the area of stress management and coping with life problems, there are also a great number of mystical methods and oriental religious philosophies which claim to offer the solution.

- Weight control, coronary heart disease risk reduction, diabetes management, are all topics which address only a special audience.
- The NEWSTART total lifestyle approach has not been duplicated yet and offers good flexibility in its presentation. The lecturer must know well the NEWSTART principles in order to avoid the presentation of unilateral treatments or methods and call them NEWSTART. The NEWSTART program is copyrighted by the EURO-Africa Division. More information may be obtained from the EUD Health Ministries Department.

b) Common problems.

Public lectures on health offer a great potential for variety. Much creativity must be used for searching opportunities. Nevertheless, there are three common problems associated with public conferences on health:

- Finding good speakers.
Lecturers who are at the same time knowledgeable and good speakers are rare. Apart from that, health professionals usually are specialists in one main area. In order to cover a large spectrum of topics in a harmonious manner, it is necessary to find several lecturers, who are not always available. Sometimes speakers from other countries must be invited which may become expensive. With long-term planning in advance and good communication as explained in section A-2, this problem may be minimized. Do the best you can.
- Lack of continuity.
When “stand alone” seminars on stress management, stop smoking, weight reduction, etc. are finished, it is easy to lose contact with the audience, specially if no bridge has been built to other church activities as explained further down.

The follow-up meetings of the revised “Breathe-Free” plan are steps towards continuity. Considering the individual seminars as part of a whole program (like the NEWSTART program), where one is linked to another with cross-references, and with a planned program of sequential lectures on different but cross-linked subjects throughout one year or more, the audience may end up being part of the church fellowship. This cannot be done by one person alone. It requires a whole team of health professionals, laymen and the active involvement of the pastor as well.

- Lack of integration with the overall church activities.
There are many ways to bridge the gap between merely scientific health lectures in a public hall and the spiritual activities in the church. None is enough by itself. First of all, the audience must come to feel that a healthy lifestyle is more than just not smoking, eating well and exercising regularly. They must feel that there is a spiritual component which is an integral part of total health. This is not obtained by having prayer at the beginning of the meeting, or by including a topic on prophecy in the lecture series, but by letting people know that Christian doctors conceive health as a continuous gift of God through obedience to divine laws of life. Only those who really have this conviction can truly transmit it to others. It is perhaps the lack of such conviction which causes many Christians to

still separate “medicine” from “religion”.

Some propose that health lectures should be given in the church building rather than in public halls in order to get the audience familiarized with the church building and the members. This is a good idea but should not be taken as a law.

There are some factors which contribute to make people feel uncomfortable in some of our churches:

- Not being greeted at arrival
- Beginning late
- Absence of pianist
- Mission story forgotten or presented in an unappealing manner
- Fighting among church members during Sabbath school lesson study
- Etc.

These things give a wrong impression about the beauty of our religion and the love of Christ. Strangers are not attracted by this way. It is a must that every church member feels the obligation to do his/her best in showing courtesy towards any visitor. This is part of our own spiritual growth. (John 13:35)

3. Radio, TV, Newspapers

In some places the mass media are very open to our work and offer free spaces or special facilities. These opportunities should be used at maximum. The talents of public speaking and/or writing are not evenly distributed among health leaders but may be acquired and developed. It is not a sign of failure to ask someone to assist you in this matter, if necessary. In fact, people will be proud to help you out.

D. FINAL WORDS

The above outlined principles and suggestions may serve as general guidelines to organize your department and to plan your activities. Nevertheless, don't limit yourself. Use your own judgement and creativity and have open eyes and ears for the needs and opportunities of your field. Work as a team with your associates and get advice and approval from your superiors before undertaking major actions.

Search in the Bible and the Spirit of Prophecy for counsel about the medical missionary work. Dedicate yourself entirely to the Lord and He will bless your efforts.

“There is no limit to the usefulness of those who put self to one side, make room for the working of the Holy Spirit upon their hearts, and live lives wholly sanctified to the service of God, enduring the necessary discipline imposed by the Lord without complaining or fainting by the way.”
(E.G. White, *Counsels to Parents, Teachers and Students*, p. 409)

-o0o-

APPENDIX A

G 10 Department Functions

The Department of Health and Temperance has the following functions at all levels of church organizations:

1. To serve as a resource for information and counsel on health and temperance affairs.
2. To advise the Church, and its departments and related agencies, in the development and administration of health and/or temperance related policies and programs.
3. To promote a healthful lifestyle among church members through literature, programs and Sabbath services.
4. To provide through publications, services, and programs, an ongoing witness to the world concerning the physical, mental and soul-destroying effects of tobacco, alcohol and other substances.
5. To sponsor and/or organize societies to effectively involve church and non church parties in united endeavors to promote the nonuse of tobacco, alcohol and other harmful substances.
6. To encourage involvement in the evangelistic thrust of the Church by developing and using health and temperance programs and media that will gain the trust and confidence of people, thereby leading them to a spiritual commitment.
7. To provide support for Seventh-day Adventist health care institutions, clinics and health/temperance programs at each level of church organization. This would be done through membership on boards, inspections, assistance in recruiting personnel, cooperation with community programs, and support for spiritual ministries including the work of chaplains.
8. To maintain liaison with Seventh-day Adventist health personnel-related organizations, dentists, dietitians, nurses, optometrists, and physicians.
9. To promote and/or sponsor health and temperance seminars and workshops.
10. To develop and/or catalogue resource material for health and temperance education and programs.

G 30 World Health and Temperance Sabbath

One Sabbath each year is designated as Health and Temperance Sabbath. The purpose of this special day is to call the attention of the membership to the importance of the health message and to secure their financial support for health and temperance programs. The Health and Temperance offering, as well as other contributions designated for health and temperance programs, is distributed in a manner determined by the respective division committees. Ten percent of the total offering is to go to the International Temperance Association.

APPENDIX B

List of suggested books on health reform. Many others may be available. **Be sure that the content harmonizes with Biblical and Spirit of Prophecy philosophy of health and healing.**

1. *World Health Statistics Annual*, World Health Organization, Geneva. (Is published annually.)
2. *The State of the World's Children*, UNICEF, Oxford University Press, USA. (Is published annually.)
3. *Diet, Nutrition, and the Prevention of Chronic Diseases*, World Health Organization, Geneva, 1990.
4. *Guidelines... for Seventh-day Adventist Better Living Centers*, Health Department, General Conference of SDA, 1977.
5. *Keys to Gretaer Success*, key quotations from E.G. White, Temperance Department, General Conference of SDA.
6. *The Church Health Educator*, Iris H. Stober and Barry H. Wecker, General Conference of SDA, Macmillan Publishers, 1989.
7. *Medical Practice and the Educational Program at Loma Linda*, The Ellen G. White Publications, General Conference of SDA, 1972.
8. *The Story of Our Health Message*, D. E. Robinson, Southern Publishing Association, 1965.
9. *Medical Science and the Spirit of Prophecy*, Ellen G. White Estate, General Conference of SDA, 1971.
10. *A Call to Personal Ministry*, E. Hon, The Eusey Press, 1976. (New editions are available or in preparation in several languages.)
11. *Nutrition for the Nineties*, Winston J. Craig, Golden Harvest Books, 1992.
12. *The McDougall Plan*, John A. McDougall & Mary A. McDougall, New Century Publishers, 1983.
13. *The Aerobics Program for Total Well-being*, Kenneth H. Cooper, Bantam Books, 1983.
14. *Grant Writing for Health Professionals*, Harry A. Sultz, Frances S. Sherwin, Little, Brown and Company, London, 1981.
15. *New Age Medicine - a Christian Perspective on Holistic Health*, Paul C. Reisser, InterVarsity Press, 1987.
16. *Mystical Medicine*, Warren Peters, Hartland Publications. (Dr. Warren Peters is now the Director of the Loma Linda Center for Health Promotion.)
17. *Irrwege des Heils*, Manfred Heide, Schulte + Gerth, 1990.
18. *New Start!*, Vernon Foster, Woodbridge Press, 1988.
19. *Journal Nutrition Update*, General Conference Health/Temperance Department. Is published four times a year.
20. *Journal Vibrant Life*, Review & Herald Publishing Association. (Bimonthly.)
21. *The Journal of Health & Healing*, Wildwood. (Quarterly.)
22. *Abundant Living Health Series*, School of Health, Loma Linda University. (The series is composed by at least 10 volumes.)
23. *The AIMS Health Evangelism Study Guide*, William and Yvonne Dysinger, 1991. (Is available also in Spanish and will soon be in German.)
24. *Spiritual Care - The Nurse's Role*, Judith A. Shelly & Sharon Fish, InterVarsity Press, 1978.
25. *Proof Positive*, Neil Nedley, 1010 14th St. NW, Ardmore, OK, 1998. ISBN 0-9661979-3-3
26. *Ministries of Health and Healing*, North American Division, 1997. ISBN 1-57756-009-4

-o0o-

APPENDIX C

GUIDELINES FOR SEVENTH-DAY ADVENTIST FOOD SERVICES

Stoy Proctor, M.Div., M.P.H., and John A. Scharffenberg, M.D.
(Members of the General Conference Nutrition Council)

GENERALITIES

The following recommendations are to be used as GUIDELINES for the Seventh-day Adventist food services.

The major objective of Seventh-Day Adventist food services is to service appetizing and nutritious foods in a pleasant atmosphere so that both precept and example health principles become a part of the lifestyle of those utilizing the food service.

The GUIDELINES are based upon the best information available to Seventh-day Adventists today. Consideration is given to where people are in their living habits and to where they should be. Allowances are made for those with particular dietary needs and for the great normal variation in individual needs, both physiologically and culturally. Optimum nutrition is a matter of education and not legislation.

The goal of the food service is to provide fruits, grains, nuts and vegetables in the natural state, prepared in a simple manner, and avoiding foods which have a deleterious effect upon the health. Both the inspired writings on health given to the Seventh-day Adventist Church and the current recommendations of the scientific community are the principles incorporated in these guidelines.

Basically this program recommends a vegetarian diet that when compared to that of the average West European is lower in fat (approximately 20% of the calories), especially saturated fat (less than 10% of calories), lower in added sugar (under 6% of calories), lower in cholesterol (less than 300 mg/day), lower in salt (5 grams/day) and higher in carbohydrates (65-75% of calories).

The following pages are not complete guidelines to the planning of menus. It is assumed that one has the ability to plan menus if in the position of responsibility for food services. However, many deficiencies are noted in the operation of food services. Therefore these MENU GUIDELINES are being recommended to remedy these common deficiencies.

I. FRUITS AND VEGETABLES

- A. With larger numbers of people being served at a time a greater variety of foods will be needed as compared to serving a single family. This is due to the greater variation of individual needs when there are more people being served.
- B. Fresh citrus fruit or unsweetened frozen citrus fruit juice should be available for the first and last meals of the day. One other fresh fruit should be available for these meals also.
- C. Dates, raisins, or dried fruits would be preferable for breakfast cereals, instead of sugar or honey.

- D. The use of dark green, leafy vegetables should be alternated with the deep yellow vegetables from day to day. Within each group (green and deep yellow vegetables) there should be a wide variety from time to time.

At least one of the more preferred varieties should be served in each category along with those not so commonly preferred.

- E. One fresh vegetable salad and one or two vegetables, either fresh or frozen, should be served at the midday meal.

II. BREADS AND CEREALS

- A. Whole grain cereals and breads should be also provided whenever cereals and breads are served.
- B. For baked desserts use whole grain flour such as whole wheat pastry flour.
- C. Whenever toast is served make available unbuttered whole grain toast.
- D. Whenever possible use pastas made from whole grain flours.
- E. When serving refined items, if used at all, such as the usual pancakes, waffles or French toast, be sure that one can get a substantial meal from the more nutritious foods of the whole grain type at the same meal. Be certain that toppings for even the more nutritious types of waffles, etc., are available from natural fruits such as apple-sauce, fruit purees and fresh fruits.

III. MILK TYPE FOODS

- A. Skim milk should be available at each meal.
- B. Fortified soy milk should also be available at each meal and adequately labeled. It is preferable to place it alongside with other milks.
- C. Fresh pasteurized, unripened cheeses such as cottage cheese should be available whenever any cheese is served.

IV. LEGUME-NUT GROUP

- A. At least one entree should be available which does not contain egg yolks and ripened cheese. Egg whites and cottage cheese may be used for protein and binding. Legumes may also be combined with grains, seeds or nuts.
- B. Cooked, dried legumes or fresh legumes should be available for the total vegetarian when an entree is served if requested.
- C. If non-fortified gluten is used, it should be supplemented with one or more of the following: food yeast, soy flour, rice polish, wheat germ, nuts, legumes, or whole grain flours.
- D. Efforts should be made to formulate entrees without eggs.

V. LIQUIDS AND DESSERTS

- A. Emphasize the use of fresh fruits when serving juices or desserts.
- B. Have available unsweetened and uncarbonated fresh, or frozen fruit juices whenever fruit drinks are served.
- C. Vegetable juices may be served.
- D. Desserts should contain no more than 2 teaspoons of sugar, honey, corn syrup or other such empty calorie type sweetener. Crusts, if used, should be made with whole wheat or whole wheat pastry flour and made with liquid oil rather than hard shortening if such fat is used at all. Dried fruits, fruit juices may be used for added sweetness.

VI. MISCELLANEOUS GROUP

- A. Those who desire a light evening meal should be able to obtain foods of the most easily digested type such as fruits, fruit soups, or dishes made from grains containing very little fat.
- B. Iodized salt should be used in the cooking.
- C. It is preferable to serve or use mayonnaise without vinegar and eggs. Soft margarines should be available at each meal. Peanut or nut butters should be available at all meals. Soy mayonnaise can be made without eggs or vinegar.
- D. When visible fats are used in food preparation use only those low in saturated fatty acids and use small amounts.
- E. Use only mild seasonings.

FOODS NOT RECOMMENDED

Meat, fish, fowl, rich foods, ripened cheese, butter, baking soda, or baking powder, irritating spices, tea, coffee and other caffeinated drink, animal gelatin.

-o0o-

APPENDIX D

Guidelines for the Planning of Medical/Nurses' Conventions

The church does not have specific rules for the organization of medical/nurses' conventions. The following guidelines are the result of many years of experience and shall be considered as "suggestions".

GENERAL CONSIDERATIONS:

The medical and/or nurses' conventions have demonstrated to be a great blessing to our health professionals and all who participated in them. They should continue to be a part of the regular activities of the Health Ministries Department.

PURPOSE:

- Unite SDA health professionals as a group with a special purpose within the church.
- Promote spirit of mission
- Provide an opportunity for mutual acquaintance with other SDA health professionals, national and foreign.
- Foster the understanding of SDA philosophy of health and healing.
- Provide an opportunity of exchange of national and international experiences in medical missionary work.
- Promote better understanding and cooperation between health professionals and pastors.
- The SDA medical/nurses' conventions are not the place to discuss controversial issues on health. Special workgroups should be appointed for such purpose under the guidance of the Church's Health Ministries Department.

PLANNING:

- The larger the convention, the earlier the planning should begin. This means, one or more years in advance. The first points to decide are the topics and respective speakers. It is good to have some alternatives in mind for unpredictable changes (which usually happen because lecturers who have initially agreed to participate have changes in their own plans).
- It is always advisable to form a planning committee of 3-5 members to organize the convention. The Union Health Ministries Department Director should always be a member of this committee.
- Wherever a medical (AIMS chapter) or nurses' society exists, these may want to be responsible for the congress planning. Otherwise the initiative will be in the hand of the Union Health Ministries Department.
- The Division may assist in making arrangements with overseas guest speakers. Invitations of speakers from other Divisions should be processed through "regular channels". This means the following procedure: Choose a speaker and find out early if he/she would agree to participate. Make a request through the inviting Union, Division, General Conference, to the speaker's Division, Union and employing institution (if applicable). The apparently complicated process is necessary specially for church employees for travel schedule planning and insurance reasons.

PARTICIPANTS:

- Primarily addressed are SDA physicians, dentists, nurses and other paramedical professionals. In some countries physicians and nurses have separate organizations and conventions.
- Church leaders and pastors in general are welcome participants.
- Special attention should be given to facilitate the attendance of medical students.
- Any other person who identifies himself with the purpose of the convention.

FREQUENCY AND LENGTH:

- International conventions are recommended to take place not more often than every two years and have a duration of 4 to 5 days.
- National conventions should be yearly and have a duration of about 3 days. Long week-ends are ideal. There is no need for an additional national convention in the same year of an international convention.
- Regional conventions within a country may also take place once a year, preferably about half a year apart from the national (or international) meeting. Usually one day is enough, a Sunday or a holyday.
- Conventions of 3 or more days should include a Sabbath, whenever possible, to allow special spiritual activities.

TIME OF THE YEAR AND LOCATION:

- International conventions should provide opportunity for cultural sightseeing and therefore take place in appropriate environment and during a suitable season of the year (spring or autumn). Special holidays may allow families to bring their children with them. Facilities for nature hikes and swimming will contribute to a balanced program.
It is a good idea, but not mandatory, to change the place from year to year.
- National or regional conventions should take place in any convenient, not expensive and centrally located site to reduce cost and travelling time. Any time of the year would be appropriate.
- It is of good sense to program the conventions at the same time every year in order to facilitate planning and to create a habit of regular attendance.
- It is obvious that not all desires and wishes of all health professionals can be met simultaneously, which would be ideal. A committee of representatives should plan the time and location to satisfy the majority. This is not an easy task.

SUBJECTS (TOPICS):

- Major emphasis should be put on SDA health reform and health evangelism rather than on purely scientific issues which may be obtained in any other secular medical convention.
- Scientific lectures that support SDA philosophy of health are ideal topics.
- There should be an overall general topic for the whole convention with various lectures related to it.
- The spiritual activities (Sabbath sermon, morning worships, etc.) should all focus on health and health evangelism.
- During conventions with a duration of 3 or more days, enough time should be provided for workshops, administrative issues and healthy recreation.

SPEAKERS:

1. Nationals

According to the time available, a variety of speakers with different backgrounds is desirable to complement each other in support of the subject.

Only speakers who support the church philosophy should be chosen to avoid polemics that may weaken the faith of congress participants.

2. Foreign

If possible, it is always good to have speakers from our institutions in other countries. This will add variety of experience and foster international thinking and mission. Keep in mind that these must be invited at least one year in advance to allow them to plan their work and travelling schedule.

3. Non-SDA Guest Lecturers

Speakers of authority and influence (medical or political) may be invited as long as they support the congress purpose and do not speak against SDA beliefs. Careful selection must be done before inviting.

4. Others

Any Adventist or Non-Adventist who does not support the SDA philosophy of health or who promotes extreme ideas, or unbiblical methods, should NOT be allowed to speak publicly at the convention.

MUSIC, SOCIAL ACTIVITIES, FOOD:

1. Music

- Singing during worships should be promoted.
- All musical interventions should promote elevating thoughts and feelings.
- A classical concert may successfully enrich the program if time allows.
- Folk music may or may not be appropriate. Careful selection of parts and way of presentation must be done beforehand.

2. Social Activities

- Walking in nature is always an excellent recreation for the taxed mind and provides opportunity for mutual acquaintance and exchange.
- A group visit to a place of historical, cultural or natural significance may successfully enrich the program if time allows.
- During international conventions an evening banquet may be a desirable feature. Care must be taken to avoid unnecessary expenses.

3. Food

- A vegetarian diet should be provided (as in all official SDA meetings). The custom of serving two diets, one of them containing meat, should be abandoned in conventions where SDA principles of health are promoted. Coffee should also not be served.
- Special arrangements should be made beforehand for individuals requiring special diets. This may, although not necessarily, increase their price for foods.

FINANCES

1. Budget

There are always expenses involved in a convention. Great economy must be exerted in order to keep the budget balanced at the end. A budget should be carefully prepared very early in the planning process.

2. Income

The financial situation varies from country to country. The income sources may include the following:

- Sponsors (companies, individuals). They must be sought way in advance.
- Union Health Ministries Department. In some cases the Union provides some help.
- Participants congress fees. These may be the major source of income. Therefore it is important to have a great number of participants.
- The number of participants depends in turn on the cost, subject, time of the year and location. There is a great variation in motivation to attend these meetings.
- Special attention should be given to make lower prices for students and other low-income groups.

3. Expenses

- Great economy is required to avoid unnecessary expenses. The costly factors are usually the banquet, excursions (if using busses or boats), travel expenses for overseas guest lecturers, and the publication of a congress summary book.
- These expenses may be reduced by keeping the banquet within reasonable limits, by choosing a low-cost excursion or by making it an optional event, by reducing the number of overseas guest-speakers, and by making summaries only of important subjects.

-o0o-