



## REPORT

*Bringing Faith Leaders together  
"Face to Face and Side by Side"*

*Topic: Faith, Health and Well-being*



*Monday 4<sup>th</sup> February 2008 at Christchurch Halls, Uxbridge*

HIFN, Connecting Communities, 3E/02 Civic Centre, High Street, Uxbridge, Middx. UB8 1UW

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## **Introduction**

Hillingdon Inter Faith Network was officially launched in July 2007 and its aims are:

To promote religious harmony through greater understanding and respect, to the benefit of the wider community of the London Borough of Hillingdon.

- To talk, network and learn from each other
- To join together to increase our awareness and understanding of each other's beliefs
- To share what we have in common in our work and activities and raise awareness of the needs of the communities we support
- To work together united in our resolve to maintain peace and unity in a community that supports each other
- To develop and improve upon faith links across the borough

Membership of the network includes representatives of all the major faiths in Hillingdon. There are also nominated representatives from the Local Authority and the Metropolitan Police.

This breakfast meeting was to be the first in a series of meetings to look at specific issues and build relationships between faiths and the statutory services in the borough. The topic of this meeting was to be: "Faith, health and well-being".

The aim of the session was to give faith leaders the opportunity to share their concerns, issues and experiences from within their communities and to look at how services and faith leaders can work more effectively together for the benefit of the whole community.

## What makes you healthy and happy?

We started the session by looking at what makes us healthy and happy.

*Being with my family*

Seeing people achieve against the odds

Lots of activities with families

My children, my friends, my family, time to relax!

When people understand and get along with each other, respect one another

Feeling of belonging

peace between communities

Walking the London Loop

*A lively family service where all ages take part and enjoy worshipping God together*

Family/ friends

prayer/ God

working with people, meeting new people

Song

nature – flowers/ blue skies/ sun

holidays

children

Working with other faith community leaders to find out more about their faith and solutions for a common ground

Being with **all** my family and walking the coastpath in the Southwest

As a Buddhist we practice for one's self and others – I am happy when I can help another person

Seeing people achieve their goals and the society appreciating them makes me happy

Lots of crowd around me

*being appreciated for who I am and what I represent*

The increase in self-esteem and smiles on the faces of overweight/obese children who have completed the "MEND"

Being approachable

being comfortable talking with others- everyone

When I give myself goals and targets and achieve them

being loved and feeling safe

*Clean language*

"All things are possible" prayer and helping others

Being appreciated

the feeling of achievement

helping other people

watching TV

Engaging myself in leisure works and activities e.g. charitable work and watching soccer

Helping the less privileged in the society and the youths

talking

Waking up in the morning and knowing that I am loved as a member of my family and community

Being at peace with my family, my neighbours, my God

seeing people

smile

## **Faith, Health and Well Being**

### **What is a healthy community?**

The World Health Organisation (WHO) defines a healthy community as:  
“ ...one that is continually creating and improving those physical and social environments and expanding those community resources that enable people to mutually support each other in performing all the functions of life and in developing to their maximum potential”.

WHO also suggested a set of key components that make up a healthy city/ community:

- A clean, safe, high-quality physical environment (including quality of housing)
- An ecosystem that is currently stable and is sustainable in the long term
- A strong, mutually supportive and nonexploitative community
- A high degree of public participation in and control over the decisions affecting one's life, health and well-being
- The meeting of basic needs (food, water, shelter, income, safety, work) for all the city/ community's people
- Access to a wide variety of experiences and resources with the possibility of multiple contacts, interaction and communication
- A diverse, vital and innovative economy
- Encouragement of connectedness with the past, the cultural and biological heritage, and with other groups and individuals
- A city/ community form that is compatible with and enhances the above parameters and behaviours
- An optimum level of appropriate public health and care services available to all
- High health status (both high positive health status and low disease status)

To build a healthy community it takes a combined effort from a wide range of partners including statutory services, voluntary groups, communities and individuals.

### **Impact of faith on health and well-being**

Dr Harold Koenig of the Duke University's Centre for the study of religion/spirituality and health, in his book entitled “ *faith and Mental health*” points out that:

“ many studies have explored the relationship between religious practices and positive emotions such as well-being, happiness, hope, meaning, purpose and optimism. Of 100 studies that examined religion and well-being prior to the year 2000, nearly 80 per cent found a statistically significant relationship

between greater religious involvement and greater life satisfaction, happiness, better mood or higher morals”

Many of the Duke Centre’s studies have produced groundbreaking findings:

- People who regularly attend church, pray individually, and read the Bible have significantly lower diastolic blood pressure than the less religious. Those with the lowest blood pressure both attend church and pray or study the Bible often.
- People who attend church regularly are hospitalized much less often than people who never or rarely participate in religious services.
- People with strong religious faith are less likely to suffer depression from stressful life events, and if they do, they are more likely to recover from depression than those who are less religious.
- The deeper a person's religious faith, the less likely he or she is to be crippled by depression during and after hospitalization for physical illness.
- Religious people have healthier lifestyles. They tend to avoid alcohol and drug abuse, risky sexual behaviour, and other unhealthy habits.
- Elderly people with a deep, personal ("intrinsic") religious faith have a stronger sense of well-being and life satisfaction than their less religious peers. This may be due in part to the stable marriages and strong families religious people tend to build.
- People with strong faith who suffer from physical illness have significantly better health outcomes than less religious people.
- People who attend religious services regularly have stronger immune systems than their less religious counterparts. We found that people who went to church regularly had significantly lower blood levels of interleukin-6 (IL-6), which rises with unrelieved chronic stress. High levels of IL-6 reflect a weakened immune system, which, in turn, increases the risk of infection, autoimmune disease, and certain cancers.
- Religious people live longer. A growing body of research shows that religious people are both physically healthier into later life and live longer than their nonreligious counterparts. Religious faith appears to protect the elderly from the two major afflictions of later life, cardiovascular disease and cancer. In this regard, religion may be as significant a protective factor as not smoking in terms of survival and longevity.

In 1999 the Health Education Authority in the UK highlighted the important role religious and spiritual belief plays in protecting people from mental health problems.

## Discussion groups

Attendees were asked to discuss in small groups the following and provide feedback.

Firstly to identify a health related topic and discuss what your faith or organisation contributes in view of the following:

- Faith
- Health
- Well-being

Secondly to carry out a SWOT analysis: Strengths, Weaknesses, Opportunities and Threats

### **Group One: Young People's health - obesity**

#### **Faith**

Provision of youth clubs, uniformed organisations.

Communities generally do not support faith groups. But faith groups support each other

#### **Health**

Voluntary support groups

Education in the widest form

Doctor's surgeries/ community health centres

Volunteers

#### **Well-being**

Volunteer support groups

Fear of crime – emergency service initiatives

Youth clubs

Uniformed organisations

Volunteers

<b>Strengths</b>	<b>Weaknesses</b>
Work with schools Clubs for adults and children Swimming, lunch clubs, keep fit	Fast food outlets – more in the south of the borough Lack of leisure facilities – in south of borough Inequalities within the borough Cycle lanes Poor environments – particularly south of borough 24 hour licensing Lack of youth facilities Cost of health clubs
<b>Opportunities</b>	<b>Threats</b>
Offer premises Lunch clubs Parent and child groups Vulnerable groups	Fear of youths – prevent older people going out prevents younger children being outside Drug culture, gang culture

## Group Two: Health Services/ Hospital services

### Faith

Sense of value and worth  
Communication  
Sense of belonging  
Structure  
Moral guidance

### Health

Mutual support within communities  
Communication

### Well-being

Open spaces/ public spaces  
Tolerance  
Communication  
Public services

<b>Strengths</b>	<b>Weaknesses</b>
Christmas hospital help by Jewish community Faith communities give help in times of sickness	Hospital visit prevention: Coldcut Rule which prevents chaplaincy visits without prior request of the patient Legislative problems – must be two people - not just drop-in.
<b>Opportunities</b>	<b>Threats</b>
For HIFN ( Hillingdon Inter faith Network) to provide forums for faith communities to share commonalities	Advocacy (HIFN) to the health service Need for planning – a strategy

## Group Three: Obesity

### Faith

Yoga helps in spiritual health  
Dialogue with practitioners on issues of health  
Having a sense of community with other people  
Community magazine to reach out to others  
Punjab radio in Hayes

### Health

Personal interaction and engagement on issues of faith/health  
Health volunteers  
Healthy eating in the council, help with information  
Raise volunteers who could carry the information of health to ordinary people

- basket of fruit instead of a box of chocolates
- nuts instead of sweets

Health awareness campaign in the faith community always bring success – wholeness club

### Well-being

Encourage links and contact with young people and adults to encourage mentoring role and role modelling  
Cross generational/ faith oriented will help  
Recognition of community in finding the solution of problems, which brings a sense of well-being

Strengths	Weaknesses
Healthy positive messages in the community	Food labelling and market advertising
Opportunities	Threats
Identifying children and approaching mums who cook for them to advise/ teach them on how to cook their children food	Find more opportunities to encourage the efforts of faith communities by statutory bodies

## Group Four: Mental Health

### Faith

Prayer provides strength and support  
Support for families in time of stress and need  
Spreading the word and giving support

### Health

Promoting a Healthy community – providing extra community led services

### Well-being

What are we doing for the most vulnerable who are excluded from mainstream services?

Strengths	Weaknesses
Strong faith belief can support through mental illness Listen, communication, talk, support – prevent loneliness and isolation Can give people feeling of being valued Volunteers	Not enough volunteers to support community need Services to support communities Better access Communication More befriending services needed Capacity issues of communities
Opportunities	Threats
Improve communication	Lack of resources

## Group Five: Obesity

### Faith

Tend to congregate within our own respective faiths

Multi-cultural activities –

Opportunities to visit places of worship

Facilitate more events

### Health

Laws and policies that victimise society – must support physical, mental and spiritual health – especially of young people

### Well-being

Planet their only home – share it by co-operation

Strengths	Weaknesses
Most people get on and cooperate	Glamorisations of fast foods and convenience foods Media reporting and sensationalising General fitness a concern Discipline
Opportunities	Threats
Hillingdon health professionals – develop obesity working group School activities Improving language of media and celebrating success Awareness of benefits should be more widely promoted	Stigma Fast foods Expensive health clubs Parental resistance to feedback or measurement Bullying Lifestyles which encourages fast food mentality

## **Information sharing**

### **Hillingdon PCT – Kevin Mullins**

Kevin brought to everyone's attention the current consultation that is taking place pan London to improve healthcare service provision across the capital. "Healthcare for London".

Kevin encouraged everyone to take an information pack and get involved in the consultation.

Further information can be obtained from:

<http://www.healthcareforlondon.nhs.uk/>

### **London Borough of Hillingdon: Local Involvement Network for Health and Social Care Services (LINK) – Ian Edwards**

Ian wanted to share with the meeting the new developing Local Involvement Network for health and social care services (LINK), which will be replacing Public and Patient Involvement Forums.

The Hillingdon LINK will be operational from April 2008. The LINK will provide local people and organisations with an interest in the quality of Hillingdon's health and social care services to:

- Help people tell the Council and NHS about their health and social care needs and their views about services
- Support the involvement of people in the design and the scrutiny of health and social care services
- Put forward reports and recommendations and requirement for services to respond
- Refer issues to Scrutiny and require a response
- Enter and check health and social care facilities

Further information will be available once the Host organisation that will be supporting the development of the LINK are in place.

### **Hillingdon's Metropolitan Police – Neil Collin**

Neil explained to everyone that he was now acting in a new role of Citizen Focus Inspector with a responsibility for working more closely with Hillingdon's communities and building stronger relationships.

### **Dovetail Community Outreach: Reg Craig**

Dovetail community outreach is now an independent charity and is part of Hillingdon Park Baptist church.

It seeks to bring healing and wholeness to Hillingdon's community through work among the elderly, families, youth, health and the unemployed.

Their dining centre had a 20 per cent increase in attendees during 2007 and is set to feed many more this year.

### **Christchurch Uxbridge and Communicare**

The church offers a safe space for community groups and local charities.

### **The Stroke Association – Homaira Khan**

Homaira is working in Hillingdon to raise awareness of issues regarding stroke.

She is available to talk to community groups and provides training and health awareness sessions

### **North Hillingdon Methodist Church**

The church run a Boys and Girls brigade group for young people aged 5- 20 years.

They have a very active and overflowing parent and toddler group in Yiewsley.

## Evaluation

### **1. Did you find today's meeting useful?**

**Yes**                    **24**

**No**                     **0**

**Comments:** Good to know all communities have similar concerns  
Useful in building networks

### **2. Was the timing convenient**

**Yes**                    **19**

**No**                     **5**

**Comments:** Does not interfere with rest of the day  
Hard to make early meetings  
My day off  
Traffic  
Not suitable

### **3. Was the location convenient?**

**Yes**                    **24**

**No**                     **0**

**Comments:** Excellent parking

### **4. How do you think the meeting could be improved?**

More meetings to get that familiar feel  
Findings to be published in media/ Hillingdon People  
More discussion time, starting discussion earlier, more time  
Involving youth and youth issues  
Agenda with topics; list of meetings e-mailed  
More understanding of faiths by promoting mutual respect and transparency  
List of people to contact  
Continue to have them focusing on one topic youth, elderly  
More focus on solutions and clarity of follow-up

### **5. Topics for future meetings?**

Vulnerable groups  
Teenage pregnancy; sexual health  
Alcoholism  
More topics  
Youth interaction  
Women in faith  
Faith 'phobia'  
Coordination of faiths by linking in a joint venture or event  
How faiths can help community  
Police services  
Education  
Provision for elderly, youth, families  
Hospital visiting arrangements

## List of Attendees

Cllr David Routledge	London Borough of Hillingdon
Cllr Mary O'Connor	London Borough of Hillingdon
Kevin Mullens	Hillingdon Primary Care Trust (PCT)
Heema Shukla	Hillingdon Primary Care Trust (PCT)
Ian Edwards	London Borough of Hillingdon
Angela Flux	Healthy Hillingdon
Inspector Neil Collin	Metropolitan Police
Fiona Gibbs	London Borough of Hillingdon
Anisea Skinner	London Fire Service
Anne Vallis	London Fire Service
Duncan Struthers	SACRE
Pastor Tunde Balogun	Kingsborough Family Church
Mike Gattleson	SACRE and Ruislip Synagogue
Amir Ahmed	Hillingdon Muslim Council
Homaira Sofia Khan	Vision and Voice, Muslim women's group
Promila Bhatia	Nav-Jeevan Asian Society
Jasvir Singh Rayat	Hillingdon Sikh Welfare Association
Anil Mitra	Hindu Cultural Association
Sudarshan Bhatia	Hindu Society Hillingdon
Rev. Reg Craig	Hillingdon Park Baptist Church
Mohamed Yusuf	Islamic Education and Cultural Society Hayes
Rev. Elizabeth Kemp	Christchurch Uxbridge
Guruji Singh	Kali Mata Mandir Association
Ann Power	Kali Mata Mandir Association
Muhammed Abani	Hillingdon Borough central Mosque and Community Services
Rabbi Alan Plancey	Northwood United Synagogue
Hazel Callender-Phillip	SGI Buddhist Society
Earl Trevor Phillip	SGI Buddhist Society
Rev. John Bernard	Coldharbour Lane Baptist Church
Rev. Carol Hamilton-Foyn	Methodist Ecumenical Dean
Richard Cripps	Waterloo Road Church
Jamal Pasha	Pakistan Association for Culture, Knowledge and Information
Enyinnaya Okoro	Kingsborough Family Church
Joy Ogbe	Kingsborough Family Church

## **Thank you**

Thank you to Christchurch, Uxbridge for allowing us to use their facilities for our meeting.

Thank you to Cllr David Routledge for providing such a wonderful breakfast

## **Outcomes**

Analysis of the SWOT exercise highlighted some common themes and concerns, including:

### **Hospital Chaplaincy services**

### **Healthy Eating**

### **Access to sports and leisure facilities**

Hillingdon Inter Faith Network aims to look further at these three key issues through the wider network meetings in partnership with the Hillingdon PCT, Healthy Hillingdon and London Borough of Hillingdon.

## **Next steps**

As this was the first faith leader breakfast, feedback was very positive and it is planned that future breakfasts will be held on other key topics including: Faith and Youth Leadership, Faith and Community Safety, Faith and Community Leadership and Faith and Older People.

These breakfasts aim to be a positive journey in building relationships between faith communities and with statutory agencies.

A report will be written after each breakfast and updates on progress from previous meetings will be included. We aim that this will be an ongoing dialogue and promote positive outcomes.

For further information on either this topic or future Faith Breakfasts or the work of Hillingdon Inter Faith Network, please contact:

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