

The mission of the AME church to achieve health equity

Introduction

“The health status of a population is shaped not only by individual risk factors such as one’s genetic predisposition and behavioral traits, but it is also influenced to a greater extent by the economic and social conditions resulting from the educational attainment, economic stability, physical environment, social support, and the quality of health and health care. These variables which cultivate the quality of life within a community are referred to as the social determinants of health.¹ “Since prior to the Emancipation Proclamation,² African American faith leaders have stood steadfast at the forefront of society advocating for the elimination of negative social determinants of health to help elevate the quality of life of their parishioners” as well as communities under their jurisdiction.³ The nation’s history of avoidance in addressing the presence and underlining causes of negative social determinants of health has permitted societal forces of oppression to decrease the quality of life of many African Americans thus possibly leading to the demise of their communities.⁴

Founding of the free African society and the AME church

“The progressive visionary Black faith leaders Richard Allen and Absalom Jones” founded the Philadelphia, Pennsylvania Free African Society (1787-1794) which was a benevolent organization applying positive social determinants of health in the areas of “spiritual well-being, physical health, educational attainment, burial assistance in cemeteries, and economic and social support” to help elevate the quality of life of its’ African American members.³ The Free African Society assisted the Philadelphia community-at-large during the Yellow Fever Epidemic of 1793 as nurses and aides striving to achieve health equity during an emergency scenario involving public health preparedness and response.⁵ Afterwards, desiring to organize a religious denomination where “free Blacks could freely worship without racial oppression and Black slaves could attain a measure of dignity” “Richard Allen founded the African Methodist Episcopal (AME) Church” not due to theological differences but based on principles of social justice believing that people of African descent were equally as valuable as nonblack parishioners in the sight of God to engage in church service worship and prayer and ordained Christian leadership.^{3,5} His perseverance of being a founder and a sustainer of the first Black Christian denomination on American soil led to him becoming “the first elected and consecrated bishop in the African Methodist Episcopal Church which recently celebrated its’ bicentennial (1816-2016) anniversary.³ Richard Allen’s experience of having to purchase his freedom from the inhumanity of slavery led to him fulfilling his calling as an abolitionist ordained in Christian itinerant ministry (Africans in America - PBS, n.d.). His proclaim that all men were created equal was substantiated in the United States Declaration of Independence.⁶ Naturally, his personal freedom resulted in him experiencing a higher quality of health in comparison to his time of enslavement. Health, as defined by the World Health Organization (WHO), is “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.⁷

Volume 8 Issue 1 - 2019

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Received: January 21, 2019 | **Published:** February 07 2019

The removal of societal barriers such as slavery, racism, and diverse forms of discrimination would enable health equity to permeate throughout all localities thus elevating the health status of our nationwide community.⁸

Social determinants of health

“A community described as having a high quality of life is comprised of positive social determinants of health enabling it to operate as a vibrant society. The majority of residents have obtained levels of sufficient educational attainment allowing them to gain full employment possibly affiliated with benefits such as medical and/or dental coverage. Their higher socioeconomic status enables them to adequately take care of their families with strong social support systems located within safe neighborhoods free of environmental hazards. In addition to having adequate access to health care, they possess a greater tendency to engage in preventive health and are more equipped to make well-informed health-related decisions when needed.¹ “A greater onset of health disparities manifesting within a community comprised of multiple negative social determinants of health result in the epidemic manifestation of preventable chronic disorders. The low level of educational attainment imposes limitations on possible future career opportunities requiring at least a high school diploma or a specialized type of certification. Prospects for career advancement may be confined to part-time and/or minimum wage employment lacking benefits such as medical coverage or the work environment may possibly be confined to hazardous conditions. Inadequate housing conditions, low social support systems, and hazardous environmental factors may deteriorate the physical composition and morale of an entire community. Since many of the community residents live in a chronic survival mode barely meeting their financial obligations from one paycheck to the next, they may not possess the time and affordability to engage in preventive health, become educated to make adequate informed health decisions, and gain accessibility to quality health care.¹

21st Century connectional AME striving for health equity

Members of “the various operating entities of the Connectional AME Church including the clergy, Social Action Commission, Women’s Missionary Society, and the International Health

Commission” have all diligently labored to educate the global community in order for positive social determinants of health and health equity to flourish throughout the 20 AME Episcopal Districts.³ AME clergy have fulfilled the mission of the African Methodist Episcopal Church through “ministering to the social, spiritual, and physical development of all people” while spreading the gospel of Jesus Christ, for example: AME clergy recently stood in solidarity with over 200 ministers of diverse faiths in the Michigan Poor People’s Campaign: A National Call for Moral Revival advocating against an imminent massive water cut off threatening the quality of life for thousands of vulnerable residents of the Detroit community.⁹ Studies have shown that a daily supply of clean water is a necessity for humans to maintain adequate hydration and homeostasis since their bodies are largely composed of fluid.¹⁰ Whereas, dehydration prevents the human body from operating long term at its’ optimal capacity.¹¹ The glorious history of the AME Social Action Commission has impacted the health status of the African American community as demonstrated by studies released from the Center for Disease Control and Prevention (CDC).¹² The AME Women’s Missionary Society has an extensive history of enhancing the lives of others through national and global missions providing adequate food, clothing, and other basic necessities utilized for daily living as well as for during urgent times of emergencies and disasters affecting human survival. The AME Church International Health Commission has addressed health disparity through engaging in health-related initiatives pertaining to health promotion and education, early disease detection, disease prevention, behavioral modification, and a healthy dietary lifestyle to help elevate the health status of the Connectional AME Church. The overall goal of achieving health equity has reflected the dedication and model work of the Connectional AME Church to create and sustain healthy congregations as well as communities.

AME church recognition for achieving health equity

“The faithful work of the AME denomination has not gone without notice among prominent public health officials. The AME Church was the recipient of the 2017 Public Health Community Achievement Award at the Michigan Premier Public Health Conference whose

theme was “Bridging the Gap to Achieve Health Equity.” Evaluating the nomination statement, “Achieving Health Equity through the AME Church,” submitted by Bethel AME Church in Detroit, the Michigan Public Health Association and the Michigan Association of Local Public Health (representatives of public health departments located throughout Michigan) agreed that the work of the AME Church was worthy of honor of this esteemed public health recognition.³

Acknowledgements

None.

Conflicts of interest

Author declares that there is no conflict of interest.

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