Factors Related to the Success of the Faith, Activity, and Nutrition (FAN) Program in Churches: Perspectives from Pastors and FAN Program Coordinators

Background:

Health programs offered in faith-based settings have the potential to reach a wide and diverse group of people. However, very little is known about factors that make churches more or less likely to put these programs into place.

We (University of South Carolina Prevention Research Center) partnered with the South Carolina Conference of the United Methodist Church to offer the Faith, Activity, and Nutrition (FAN) program to all churches in their conference. We evaluated whether churches trained in FAN increased in the four areas that FAN targets:

- increasing opportunities for physical activity and healthy eating
- setting physical activity and healthy eating guidelines (policies)
- sharing messages about physical activity and healthy eating
- enlisting pastor support support for physical activity and healthy eating

We also studied factors that predicted which churches were more likely to make these changes to their church environment.

What we did:

93 churches took part in this study; 42% had mostly African American members. Pastors and FAN coordinators from these churches completed surveys before their churches were trained, right after they were trained, and 12 months later.

FAN coordinators reported on opportunities, policies, messages, and pastor support for physical activity and healthy eating in their church.

We used a research framework to select factors that might predict which churches were more likely to improve their church environment. FAN coordinators and pastors were asked questions about factors in each of these five areas:

- **The program** (e.g., how they viewed FAN's cost and complexity, and how well the FAN program fit in their church)
- **Factors outside the church** (e.g., whether they thought conference or district leaders expected them to take part in FAN)
- **Factors within the church** (e.g., church size, race of members, church culture regarding health, church communication, acceptance of new ideas, program match with church priorities, whether the FAN coordinator was rewarded for FAN work, how FAN was received by members)

- **Personal views** of the pastor and FAN coordinator (e.g., belief that FAN was valuable for their church, belief their church would benefit, confidence in their ability to put FAN into place, sense of commitment to the church) and their demographic and health-related behaviors
- **Experiences with putting FAN into place** (e.g., whether leaders were actively involved, whether they had any program champions)

What we found:

Churches trained in FAN reported meaningful increases in physical activity and healthy eating opportunities, policies, messages, and pastor support and rated the FAN program positively.

The only **program (FAN) factor** that predicted an improved physical activity and healthy eating environment was the belief that FAN is more effective than other programs the church had tried.

Factors within the church best predicted whether churches improved their physical activity and healthy eating environment.

Greater improvements were seen in churches with mostly African American members (versus white members) and in churches where the FAN coordinators were more likely to:

- report that the health ministry is as important as the spiritual ministry in their church
- feel recognized for their efforts to put the physical activity and healthy eating parts of FAN into place
- believe that their pastor encouraged members to take part in the physical activity and healthy eating parts of FAN
- describe good communication and relationships between church leaders and members
- believe that new ideas were readily accepted in their churches
- report that the physical activity and healthy eating parts of FAN were well-received by most congregants

Several **personal views** of the FAN coordinators and their **experiences with putting FAN into place** were also important. Improvements were greater in churches where the FAN coordinators were more likely to agree that:

- they wanted to perform to the best of their ability for their church
- church leaders were actively involved in the physical activity and healthy eating parts of FAN
- at least one church member was a champion for the physical activity and healthy eating parts of FAN

Summary: The FAN training and technical assistance helped churches to improve their physical activity and healthy eating environment. We found several factors that might make a church more or less ready for a program like FAN, such as whether a church sees health as an important ministry of the church and whether a church has good communication between leaders and members. We also found areas that the FAN program could target more in future church trainings, such as recognizing the efforts of the FAN coordinator and identifying FAN champions.

To learn more: *An abstract of the research report is available here: https://www.ncbi.nlm.nih.gov/pubmed/32221601. If you have questions about the study or would like a full version of this research report, please contact Dr. Sara Wilcox, Director, University of South Carolina Prevention Research Center, wilcoxs@mailbox.sc.edu.*

To learn more about the FAN program, *please visit: http://prevention.sph.sc.edu/projects/fantraining.htm.*

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