



Engaging the Faith Community A Congregational Toolkit

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Why Engage Faith Communities?

Faith communities have a long history of providing healthcare and healing. Many of the nation's first hospitals were started by faith communities and many still maintain their faith connections.

Faith teachings encourage health and healing. Most sacred texts and denominational or faith body teachings talk about health and healing. The Golden Rule of loving your neighbor as you love yourself is in every faith tradition. Caring for people, including their health, is fundamental to most faith traditions.

Faith communities work towards social and economic justice. Most faith communities have a commitment to justice. Many faith traditions have position statements that encourage faith communities to look at the root causes of problems and engage in educating their congregations. Faith communities bring moral authority. Engagement of faith voices in public debates helps highlight the moral dimensions of the problem and solution.

Elected leaders are engaged with faith communities. Many elected leaders are members of or at least historically connected to faith communities. They likely care what faith leaders, especially from their own traditions, say about the issues. At a minimum, faith leaders may have access to elected leaders.

Faith communities have many leaders and spokespeople. Faith communities develop leaders. Both clergy and lay leaders involved in congregations bring skills in leading groups, public speaking, planning events, and negotiating conflict.

Faith communities reach diverse constituencies. People of all races, ethnicities and classes are engaged in faith communities. If you seek to engage diverse constituencies in your advocacy work, faith communities can help.

Faith communities have many communication structures. There are many ways to reach people who are engaged with congregations – email lists, listservs, bulletin inserts, newsletters, weekly services, and regional gatherings.

Faith communities have organized groups. There are many organized groups within faith communities that can be engaged in advocacy. Congregations often have mission groups, social action groups or women's committees that can lead advocacy efforts. Denominational committees may exist between congregations. In communities, there may be a ministerial association or interfaith organization that might play some advocacy role.

Faith communities have resources. Most faith communities have buildings that can be used for meetings and events. Some have buses that can help transport people to mass actions. Some have funds that can help support advocacy work. Some will provide food or snacks for events. Members of their community are also important people-power resources in a campaign! Although there is a

wide range of financial capacity in congregations, all congregations have some resources that can be tapped.

Learning the Religious Landscape

Getting Started

If you are trying to understand the religious landscape of your state or city, the best place to start is with personal connections: talk to volunteers, colleagues who are involved with a faith community, and friends to understand the local landscape.

According to the Pew Research Center (see Additional Reading section), the majority of South Dakotans identify as members of a Christian faith tradition, specifically as Catholic, Methodist or Lutheran. Given our commitment to diversity and the importance of connecting with all faith communities, you will want to make special outreach to Muslim, Buddhist, Jewish, and other minority traditions, even though the number of adherents may be smaller.

Schedule meetings with the leadership of interfaith organizations or councils of churches in the state or community. Find out if they are interested in working on healthcare issues with you. Don't be disappointed if they don't jump on your issues immediately. Some interfaith organizations and councils primarily meet and build relationships. Others, known as "faith-based organizing" groups, often have one primary issue they work on for a year or two and won't take up others. Be patient as they navigate internal review and approval of your invitation to work together. Even though these organizations may not work on healthcare issues, they may allow you to make a presentation which can help you meet key leaders.

Congregations

The heart of all faith communities is the congregation. Most work and most engagement occur at the congregational level. Every faith community will have activist clergy who are known for their community engagement. Meet with these key religious leaders and ask them what other congregations and leaders you should seek to engage. Usually these leaders will know one another, although there could be divisions based on race or ethnicity. Activist Catholic pastors will know one another, but may not know activist Black Baptist pastors, and vice versa.

Judicatory Structures

Most Christian denominations and some other faith traditions have regional judicatory structures that help congregations collaborate and have varying levels of responsibility for and over the congregations. In some traditions, like Catholic or Episcopal, the judicatory (referred to as the diocese) has a fair amount of control and input in terms of what congregations do. In others, like Baptist or United Church of Christ, the judicatory (referred to as the association or conference) has less executive power and plays more of a convening role. Regardless, these judicatory structures are important channels to reach clergy and congregations. They have meetings, training sessions, newsletters, email lists and other means of reaching people.

If you are building long-term relationships, you want to get to know both the judicatory leaders (e.g. the bishops) and the key staff people who can help make things happen (e.g. the assistant to the bishop or the chair of missions and outreach). Many traditions have multiple judicatory structures. For example, Virginia is in the Presbyterian Synod of the Mid-Atlantic and it also has five Presbyteries within the state.

Below is a chart of some of the judicatory structures:

Denomination	Structure	Top Leader	How to address
African Methodist Episcopal (AME)	Conference	Bishop	Bishop (Dear Bishop _____)
Baptist	Conference	President (volunteer) and Executive Minister (staff)	Usually Pastor or Dr. if the person has the degree (Dear Pastor or Dear Dr. _____)
Catholic	Diocese	Bishop	Most Reverend (Dear Bishop _____)
	Deanery	Dean or Archpriest	Reverend (Dear Rev. or Dear Fr.)
Episcopal	Diocese	Presiding Bishop	The Most Reverend (Dear Bishop _____)
	Deanery	Dean	The Reverend (Dear Rev. _____)
Lutheran	Synod	Bishop	Bishop (Dear Bishop _____)
	Conference	Conference Chair	The Reverend (Dear Rev. _____)
	Deanery	Chair of the Deanery	The Reverend (Dear Rev. _____)
Presbyterian	Synod	Synod Executive	The Reverend (Dear Rev. _____)
	Presbytery	Presbytery Executive	The Reverend (Dear Rev. _____)
United Methodist	Conference	Bishop	Bishop (Dear Bishop _____)
	District	District Superintendent	The Reverend (Dear Rev. _____)
Buddhism	No central authority	Monk	Venerable (Dear Venerable _____)
Hinduism	No central authority	Pujari or Temple Priest	

Islam	No central authority	Imam (Shi'a)	Imam (Dear Imam ____)
Judaism	Community	Community Co-Chairs	Rabbi, or Mr./Ms. Dear Rabbi or Dear Mr/Ms. _____)
The Church of Jesus Christ of Latter-day Saints (LDS or Mormon)	Ward (congregations of 300+)	Bishop	Bishop (Dear Bishop ____”
	Stake	Stake President	President (Dear President ____)
	Branch (congregations of less than 300)	Branch President	President (Dear President ____)
Sikhism	Local Board of Directors	President of Board of Directors	
	Gurdwara (individual place of worship)	Granthi (worship leader)	Sardar Sahib for men, Sardarani Sahiba for women (Dear Sardarani Sahiba,)

Faith-based Networks

Many faith communities have internal networks or national networks with local chapters that are active in social justice issues and can be great places for finding partners for your work. Ask around about the following networks:

- AME
 - Connectional Health Commission
- Baptist
 - Missions Committee
 - Health Committee
 - Women’s Committee
- Catholic
 - Catholic Campaign for Human Development Committee
 - Hispanic Apostolate
 - JustFaith congregations
- Episcopalian
 - Mission and Outreach Committee
 - Episcopal Women
- Lutheran
 - Hunger Committee
 - Lutheran Women

- Presbyterian
 - Hunger Enablers
 - Presbyterian Women
 - Presbytery Peacemaking Committee
- United Methodist
 - Methodist Federation for Social Action
 - Church and Society Committee
 - United Methodist Women
- Jewish
 - Jewish Federation (may have a policy committee)
 - National Council of Jewish Women
- The Church of Jesus Christ of Latter-day Saints (LDS/Mormon)
 - The Relief Society
- Muslim
 - Muslim Student Association
 - Muslim American Society
 - Islamic Society of North America
 - Islamic Circle of North America

Holy Seasons

Communication with faith communities can be difficult during holy seasons. It is valuable to note on your calendar when these busy periods occur to help you better engage with congregations. While there are numerous holidays to be aware of, below is a list of the major holy seasons to add to your planning calendar before the November 2022 general election

Month	Observance	Faith Tradition
September 25-27th	Rosh Hashanah	Jewish
October 4-5 th	Yom Kippur	Jewish
October 24th	Diwali	Hindu

Developing Partnerships with Congregations

If you want to engage congregations in educating their communities, you must have things for them to do that make sense. Here are reasonable requests for congregations to do to support a public education campaign. For each item you expect to ask congregations to do, you should have materials or resources that make it easy for them to do. Develop these tools from the lens of their faith tradition’s mission so the issue is framed in alignment with their stated principles.

Prayer

- Pray for those without healthcare.
- Pray for communities to join together and help their neighbors.

Resource: Offer sample prayers for inclusion in bulletins, newsletters or prayer requests.

Education

- Offer an adult forum class on healthcare.
- Distribute a bulletin insert on healthcare.
- Host a community forum about your topic.
- Plan a health care discussion in conjunction with a screening of one of the Medicaid Expansion short documentaries.

Resource: Draft a class outline for leaders to conduct. Provide a bulletin insert.

Media

- Organize a press conference with faith leaders, asking judicatory leaders to make short statements in support of your issue.
- Submit letters to the editor from faith leaders.

Resource: Provide talking points and sample LTEs.

Fostering Initial Conversations

Having direct, personal contact is essential to developing authentic relationships with faith leaders and their congregations. Like many other leaders, faith leaders are often busy and hard to reach. Reach out multiple times and in multiple ways – email, voicemail or Facebook messaging.

Schedule a Meeting or Call

When you reach the person, schedule a time to meet or a time to talk by phone. Don't assume the person can focus on you and your concerns just because you happened to reach them at that time. *"Hi. I'm Susie Smith, a volunteer organizer with the American Cancer Society Cancer Action Network. I've heard great things about your leadership in the community on social concerns. Could we schedule a time for me to pick your brain about ways to engage congregations in our campaign? I'd prefer to meet in person, but we could do it by phone or virtually if that works better for you."* You will almost always get more time in person than by phone and you will build a stronger relationship. Don't feel compelled to share too much on the phone during the initial call to schedule a meeting.

Prepare for the Meeting

Think about what you want to share at the meeting and what you want to ask the person to do. Recognize that you may learn things in the meeting that will adjust both what you share and what you ask, but you should still have a plan. Here's a short outline for preparing:

- Thank you. Thank the person for agreeing to meet and give a quick overview of the meeting. *"I want to learn about your vision for healthcare in the community, share what we are doing, get your advice for the work and explore ways that you all might want to be involved."*
- Learn about the person. *"Before I tell you about our campaign, I'd love to hear about your congregation (or judicatory) and how you got here."* Encouraging the person to talk so you can get to know him or her is a core organizing technique.

- Share. Talk a little about yourself, particularly as it relates to your campaign.
- Provide a brief. Give a quick overview of the campaign to expand Medicaid and why you think you can win. Explain why the faith community is important to help win.
- Ask for advice. *“How do you think we can involve more congregations? What other congregations would be good to engage?”*
- Ask for concrete things. *“Would you be willing to distribute information to your congregation?” “Could you host a screening and discussion of our short documentary?”*
- Confirm follow-up. Reiterate the things you will do and the person will do.
- Thank the person for the meeting.

Conducting the meeting

- Get to know the person. Encourage the person to talk about him- or herself and the congregation or denomination.
- Address the person as he or she wants to be addressed. Some religious leaders want to be called by their formal titles – Bishop, Pastor, Rev, Rabbi, Imam. Start with the more formal address. Others will tell you to use a first name—do that.
- Listen more than talk.
- Explain the overall strategy and vision in a clear and concise manner. If you can’t do this quickly, practice.
- Jot down notes on advice the person gives you, things you need to follow-up with and actions the person has agreed to take. Don’t think you can remember. Few of us can.
- Keep a positive spirit and show enthusiasm. Enthusiasm breeds enthusiasm. Many will forget what you say but will remember your spirit.

After the meeting

- Organize your notes.
- Do your follow-up. Send the items you promised to send. Reach out to others suggested.
- Send the person an email confirming the things he or she agreed to do. Just a reminder.
- Put on your calendar to check in with the person in a few weeks to make sure the tasks got done.
- Update your spreadsheet, database or other way in which you keep track of contacts.

Hosting a Film Screening

The American Cancer Society Cancer Action Network (ACS CAN) has partnered with local documentary film maker Kickturn Studio to produce a series of short documentary films that provide an in-depth look into the role of Medicaid in the lives of individuals, families, and communities across South Dakota.

The first of the series is entitled “Hope in the Heartland: Closing the Health Care Gap” and follows the stories of individuals, families, and health professionals across South Dakota. The second film, which will debut in September, will focus on Native Americans in South Dakota and outlines how

Medicaid dollars can supplement Indian Health Services (IHS) funding to and expand access to care for tribal communities.

These films are appropriate for anyone interested in learning more about health care in South Dakota – and anyone who has met, overcome, or continues to face challenges getting the health care they need so that they can take care of themselves and their families.

Where to Host

You can host screenings anywhere where you have access to wi-fi, a screen, and comfortable seating! Consider hosting at home, in a community center such as a school or place of worship, as well as places like local coffee shops or theaters, or even in your workplace.

Technical Information

- If you would like to download a copy of the film before your screening, please email kasey.penfield@cancer.org (Note: this is recommended to avoid buffering and delays.)
- To access the films, go to: www.fightcancer.org/medicaidexpansionsd, and click on the film you'd like to watch.
 - You will need internet access to download or stream the video, but not to re-play from an already downloaded copy.

Documentary Description

- “Hope in the Heartland: Closing the Health Care Gap”: Too many South Dakotans go without health care as families struggle to afford medical bills while the cost of food and housing rise. This short documentary explores how Medicaid would be a lifeline for residents caught in the health coverage gap and what voters can do to help.

Sample Discussion Questions

Following the screening of the film, have a conversation about what people learned, how they felt, and what they could do to support the health and well-being of their communities moving forward.

- Was there a story that resonated with you most? Why?
- Have you ever experienced difficulty accessing health care? Do you relate to any of the challenges the people in the film have experienced?
- What about a friend or loved one?
- What did you learn from watching the film? Anything new?
- What is your opinion about Medicaid expansion? Do you think it changed from watching the film?
- What impact do you think Medicaid expansion would have on South Dakota?
- Who else needs to see this film/understand these stories?

Words of Healing and Caring from Sacred Texts and People

Buddhist

Our sorrows and wounds are healed only when we touch them with compassion

- Buddha

Health is the greatest gift, contentment the greatest wealth, faithfulness the best relationship.

- Buddha

To keep the body in good health is a duty; otherwise, we shall not be able to keep our mind strong and clear.

- Buddha

Christian

Nevertheless, I will bring health and healing to it; I will heal my people and will let them enjoy abundant peace and security.

- Jeremiah 33:6

Do not exploit the poor because they are poor and do not crush the needy in court, for the Lord will take up their case and will exact life for life.

- Proverbs 22:22-23

Beloved, I pray that you may prosper in all things and be in health, just as your soul prospers.

- 3 John 1:2

Hindu

Om, Sarve bhavantu sukhinah

Sarve santu nirāmayāḥ

Sarve bhadraṇi paśyantū

Mā kashchit duḥkha bhāgbhavet

Happiness be unto all

Perfect health be unto all

May all see what is good

May all be free from suffering

- Shanti Mantra

The more we come out and do good to others, the more our hearts will be purified, and God will be in them."

- Swami Vivekananda

"Your duty is to treat everybody with love as a manifestation of the Lord."

- Swami Sivananda

Jewish

So you shall serve the LORD your God and He will bless your bread and your water. And I will take sickness away from the midst of you.

- Torah, Exodus 23:25

Give generously to [the poor] and do so without a grudging heart, then because of this the Lord your God will bless you in all your work and in everything you put your hand to

- Torah, Deuteronomy 15:10

Muslim

Those who believe and do good deeds – the Gracious God will create love in their hearts.

- Qur'an Ch. 19: 97 (Surah Maryam)

And him who seeks thy help, chide not.

- Qur'an Ch. 93:11 (Surah al-Dura)

Worship Allah and associate nothing with Him, and to parents do good, and to relatives, orphans, the needy, the near neighbor, the neighbor farther away.

- Qur'an Ch. 4:36 (Surah an-Nisa)

"What actions are most excellent? To gladden the heart of human beings, to feed the hungry, to help the afflicted, to lighten the sorrow of the sorrowful, and to remove the sufferings of the injured" ~ Prophet Muhammed (Bukhari)

"And if anyone saved a life, it would be as if he saved the life of the whole people" Quran 5:32

Sikh

Simar Simar Kattae Sabh Rog

Ever Remembering Him in Contemplation Are All Diseases Healed

ar mandar ayhu sareer hai gi-aan ratan pargat ho-ay.

manmukh mool na jaanee maanas har mandar na ho-ay.

This body is the Temple of the Lord, in which the jewel of spiritual wisdom is revealed. The self-willed manmukhs do not know anything at all; they do not believe that the Lord's Temple is within.

- Sri Guru Granth Sahib, M.3, Ang 1346

Denominational References to Health Care

The faith community is united in concern for health care. The following are a sampling of faith standards in support of expanding and supporting health care coverage.

African Methodist Episcopal

“What other time in our history will we be able to help our communities focus on wellness, to help every citizen access a means to be healthy and treat medical conditions breaking the trend of making emergency rooms and “urgent care” our primary care physicians? The need for messaging coming from trusted voices – the Black Church – made our involvement more compelling.”

https://www.ame-church.com/wp-content/uploads/2014/01/Conf_Call_With_Pres_Obama_whitepaper.pdf

American Baptist

“As American Baptists we affirm and support programs, legislation, research and other formulations which help develop a new comprehensive health care delivery system which provides quality services for all people. 1. Make health care resources, private and public, available in keeping with the total needs of people, rather than on the basis of economic, geographic or racial factors; 3. Provide equitable health care for all residents of the U.S.A. by eliminating financial barriers.” <http://www.abc-usa.org/wp-content/uploads/2012/06/HEALTH-CARE-FOR-ALL.pdf>

Catholic

“Catholic teaching supports adequate and affordable health care for all, because health care is a basic human right. Health care policy must protect human life and dignity, not threaten them, especially for the most voiceless and vulnerable. Health care laws must respect the consciences of providers, taxpayers, and others, not violate them. Coverage should be truly universal and should not be denied to those in need because of their condition, age, where they come from or when they arrive here. Providing affordable and accessible health care that clearly reflects these fundamental principles is a public good and moral imperative.” <http://www.migrate.usccb.org/issues-and-action/human-life-and-dignity/health-care/upload/2013-02-Health-Care-backgrounder.pdf>

Episcopal

“The Episcopal Church shall work with other people of good will to finally and concretely realize the goal of universal health care coverage; and be it further resolved, that church members and the Office of Government Relations communicate the position of The Episcopal Church on this issue to the President and Members of Congress, and advocate passage of legislation consistent with this resolution.” http://www.episcopalarchives.org/cgi-bin/acts/acts_resolution.pl?resolution=2009-D048

Lutheran Church of America

“Jesus was dedicated to alleviating the suffering of the sick and the poor, the hungry and the homeless. As people of faith we are called to live as Jesus did, accompanying the most vulnerable of our neighbors and serving our communities. As the ELCA social statement on economic life

explains, ‘Economic life is intended to be a means through which God’s purposes for human kind and creation are to be served.’”

http://download.elca.org/ELCA%20Resource%20Repository/2016_Budget_Resolution.pdf

“We ask that Congress fully fund the Affordable Care Act, ensure funding for Medicaid expansion, and avoid converting food assistance programs, such as SNAP, into block grants, which would cut the program by billions of dollars over several years.”

http://download.elca.org/ELCA%20Resource%20Repository/2016_Budget_Resolution.pdf

Presbyterian

“We have personal moral responsibility for our health and concern for the health of others. We are stewards of God’s creation and need to adopt healthier lifestyles. The church needs to continue to raise the issue of comprehensive, systemic health-care reform in support of the key values of access, quality, and affordability set forth in the Resolution on Christian Responsibility and a National Medical Plan (G.A. Minutes 1991).”

http://www.advocatehealth.com/documents/faith/Presbyterian_4.pdf

United Methodist

“The United Methodist Church is committed to health care for all in the United States and therefore advocates for a comprehensive health care delivery system that includes access for all, quality care, and effective management of costs.” <http://www.umc.org/what-we-believe/health-care-for-all-in-the-united-states>

Jewish Religious Action Center

“Providing health care is not just an obligation for the patient and the doctor, but for society as well. It is for this reason that Maimonides, a revered Jewish scholar, listed health care first on his list of the ten most important communal services that a city had to offer to its residents (Mishneh Torah, Hilchot De'ot IV: 23). Almost all self-governing Jewish communities throughout history set up systems to ensure that all their citizens had access to health care. Doctors were required to reduce their rates for poor patients, and when that was not sufficient, communal subsidies were established (Shulchan Aruch, Yoreh Deah 249:16; Responsa Ramat Rahel of Rabbi Eliezer Waldernberg, sections 24-25.)” <http://www.rac.org/jewish-values-reform-movement-positions>

Sample Op-Ed on the Value of Medicaid

From Christian perspective – adapt for other faith traditions

Every Sunday morning service at the church I pastor in XXXX begins with prayer requests for our members, their families, friends and neighbors. With just [XX] members, we are few in number, but our prayer list is always long. Most of the names you will find in our church bulletin have health care needs. Many have chronic illnesses and no insurance. Others have medical bills that make it hard for them to pay for rent and groceries.

We don't talk about politics at our church. When you take politics out of the conversation, the issue of health care is pretty simple. Everyone wants to be healthy enough to work, spend time with their families and have a good life. And there is broad agreement about the critical role that Medicaid plays in the health and well-being of our families, friends and communities.

Medicaid is an important part of South Dakota's health care system, and that is particularly true in rural communities like ours. Many of our families have benefitted from health coverage for their children through Medicaid or the Family Access to Medical Insurance Security (FAMIS) program. And most of the elderly and disabled people who need long-term care rely on Medicaid to ensure they have the medical services they need.

I was surprised to learn, however, that childless adults without a disability cannot qualify for health coverage under South Dakota's current Medicaid program no matter how desperate their financial situation. While some parents with children are eligible, the rules are extremely strict. In some situations, working parents in a three-person household lose coverage if their annual income exceeds \$10,584.

More realistic levels for coverage would give thousands of South Dakotans access to flu shots and other preventive care, as well as ongoing help with chronic diseases like cancer, diabetes and heart disease. They could afford routine check-ups rather than waiting until an injury or infection forced them to wait in line at the emergency room. And more people addicted to dangerous drugs would have access to substance abuse treatment.

Medicaid gives more families access to health care and relief from financial strains. It creates jobs at our hospital and in our medical offices as more people are able to seek health services. And it gives our community hope that we can support our young people struggling with substance use disorders.

As a Christian, I believe that we have a moral obligation to ensure that our neighbors have access to basic human needs. Jesus showed us the way by educating, feeding and healing his followers as well as providing for their spiritual needs. He also taught us the importance of being good stewards, and that certainly applies to taxpayers' hard-earned dollars.

I will be praying for a solution that meets the needs of my congregation and this community. Perhaps that one addition to our prayer list will help to ensure that future prayer lists are a lot shorter.

Sample Social Media Posts

“As [congregants/faith leader] of [church name], we know all too well the struggles of South Dakota families living without health care options. We are praying for a solution that meets the needs of our congregation and this community. Will you join us? Learn more: www.fightcancer.org/medicaidexpansionsd”

“At [synagogue name] we honor the stories of uninsured South Dakotans. Join us for a special screening of ACS CAN’s short documentary film “Hope in the Heartland: Closing the Health Care Gap” and learn more about how we can support our friends and neighbors dealing with this hardship.”

Agenda Template for Educational Forum

Medicaid Expansion in South Dakota Community Forum Agenda Outline (1 hour)

WELCOME by Host site Rep

INSPIRATIONAL INTRODUCTORY REMARKS

Opening Spiritual/Scriptural Message on spiritual/moral aspects of health care (5-7 min)
Local Faith Leader

Personal Story by an uninsured person or someone who has been impacted by lack of access to care (5-7 min)

INFORMATIONAL CORE PRESENTATIONS

Nuts & Bolts Explanation of Medicaid: what it is, why it’s a vital program. (5-10 min)
ACS CAN staff or volunteer, local DSS agency, or a clinic or health center rep

Screening of a Mini-Documentary (20 min)

Discussion on the Mini-Doc

See example questions at www.FightCancer.org/MedicaidExpansionSD

FINAL WORDS & THANK YOU

Community Ambassador

Member of the grassroots organization or congregation that is a volunteer for the Medicaid Expansion campaign outreach program (5 min)

Additional Reading

The many diverse and religious groups and entities found in the U.S. may seem intimidating. Accept that it is fine not to know everything and appropriate to ask questions. Here are a few good resources to learn about the growth and diversity of U.S. faith communities:

Handbook of Denominations in the United States by Roger E. Olson, Frank S. Mead, Samuel S. Hill and Craig D. Atwood is a classic reference book on 200 Christian denominations. The handbook is in its 14th edition.

Denominations Comparison by Rose Publishing is a glossy brochure that provides a quick summary and comparison of 12 Christian faith traditions.

The Pluralism Project has a great website (www.pluralism.org) to help understand the increasing religious diversity in the U.S. It has a searchable database of religious centers that aren't Christian or Jewish, which is helpful in finding newer faith communities by city.

The Pew Research Center on Religion and Public Life (www.pewforum.org) has many helpful reports on faith traditions, such as: A Portrait of Jewish Americans; The Religious Typology: A new way to categorize Americans by religion; America's Changing Religious Landscape; and The Shifting Religious Identity of Latinos in the United States.

Where to Find More Information About the Campaign

- More information, including other stories from around the country and materials to stay involved can be found on the campaign website: www.fightcancer.org/medicaidexpansionsd
- Make sure to follow ACS CAN on Facebook and Twitter so that you stay up to date on local events and even more content. And sign up to receive email updates from ACS CAN at the campaign website: www.fightcancer.org/actions/sign-petition-support-medicaid-expansion-south-dakota
- ACS CAN is a part of South Dakotans Decide Healthcare, a broad coalition of patient advocates, nurses, healthcare providers, farmers, faith leaders, educators, and more. It is one of the broadest coalitions to ever launch a ballot measure campaign in South Dakota history. To learn more, visit www.southdakotansdecide.org.