The Church Bridge Project: An Academic–Community Perspective of a Church-Based Weight Management Pilot Intervention among Young Adult African Americans

Jennifer L. Lemacks, PhD, RD1, Robert E. James, ThD2, Laurie Abbott, PhD, MSN, RN3, Hwanseok Choi, PhD1, Ashley Parker, MPH1, Ashley Bryant, MS, RD1, Penny A. Ralston, PhD, ME4, Annither Gilner Rigsby4, Patricia Gilner4

(1) The University of Southern Mississippi; (2) Stone County Chapter National Association for the Advancement of Colored People; (3) The Florida State University; (4) Sweet Beulah Baptist Church

What Is the Purpose of this Study/Review?

• The Church Bridge Project was a community-driven and church-based weight management program that included a partnership between the University of Southern Mississippi, three Stone County churches, and the Mississippi State University Extension Services.

• In 2016, program planning and development began and was guided by an executive team of pastor-appointed church leaders, university faculty, and extension service faculty. We used church and outpatient primary care facilities and resources for participant recruitment.

• The purpose of this study was to examine the feasibility of delivering a church-based intervention to reduce obesity and related chronic disease disparities in rural, African American young adults.

What Is the Problem?

• Community-based participatory research facilitates the research process among populations who mistrust medical and/or academic institutions. The difficulties and challenges of community-based methods in communities new to or relatively untouched by research need to be further described and considered.

What Are the Findings?

• Churches are effective at recruiting a sample of young adult African Americans who are similar to the overall target population.

• Commitment to church-based health programs remains an issue.

• Primary care providers were difficult to work with to recruit minority patients into a church-based weight management program.

Who Should Care Most?

• Partners involved in community-based partnerships to improve community health.

• Researchers engaged in community-based participatory and church-based research.

• Primary care physicians and offices.

Recommendations for Action

• Church leaders are effective at reaching young adults.
• More flexible means of participant management (e.g., the use of mobile or web-based technology) may be required to facilitate enrollment and orientation for research studies.

• Project teams should support program coordinators who understand the research process and work well with communities to maintain forward motion of project activities.

• There are great challenges in working with primary care providers for health intervention research which may suggest that policies supporting the reimbursement of community-driven weight management programs are warranted.

• Before a partnership begins and as it progresses, the continuum of community-based partnerships should be discussed and partners should examine how they envision themselves contributing to the decision making for the research process.