The Presbyterian Panel consists of three nationally representative samples of groups affiliated with the Presbyterian Church (U.S.A.): members, elders serving on session (lay leaders), and ordained ministers. For most analyses, ministers are split into two groups based on current call: pastors, serving congregations, and specialized clergy, serving elsewhere. New samples are drawn every three years. These pages summarize major findings from the seventh survey completed by the 2009-2011 Panel, sampled in the fall of 2008.

**HEALTH FINDINGS FROM THE MAY 2010 SURVEY**

**PERSONAL HEALTH**

**General Health**

- About nine in ten in each Panel group (members, 85%; elders, 95%; pastors, 91%; specialized clergy, 89%) rate their physical health as excellent or good.

**Figure 1. Self-Rating of Physical Health**

<table>
<thead>
<tr>
<th></th>
<th>Excellent</th>
<th>Good</th>
</tr>
</thead>
<tbody>
<tr>
<td>Members</td>
<td>60%</td>
<td>40%</td>
</tr>
<tr>
<td>Elders</td>
<td>70%</td>
<td>30%</td>
</tr>
<tr>
<td>Pastors</td>
<td>80%</td>
<td>20%</td>
</tr>
<tr>
<td>Specialized clergy</td>
<td>80%</td>
<td>20%</td>
</tr>
</tbody>
</table>

- The median number of prescription medications that members take is three. Two is the median for elders, pastors, and specialized clergy.

**Preventive Care**

- During the 12 months before the survey, majorities of panelists in each group:
  - Had a general physical exam by a doctor or health-care provider (members, 86%; elders, 87%; pastors, 84%; specialized clergy, 83%).
  - Received a traditional flu vaccination (68%; 65%; 57%; 67%).

**Health-care Advice and Diagnoses**

- During the ten years before the survey, half of members (49%) and elders (52%), two-thirds of pastors (64%), and five in nine specialized clergy (56%) were advised by a doctor or health-care provider to engage in more physical activity, improve diet, reduce weight, or make another lifestyle change.

- During the same period large minorities of panelists in each group:
  - Were diagnosed with hypertension (high blood pressure) (members, 37%; elders, 39%; pastors, 26%; specialized clergy, 29%).
  - Were diagnosed with high cholesterol or triglyceride levels that needed to be treated by medication (36%; 38%; 33%; 33%).

- At least one in ten panelists in each group had some responsibility for caring for a person:
  - With a serious physical limitation (members, 18%; elders, 17%; pastors, 14%; specialized clergy, 10%).
  - With a serious memory problem (14%; 12%; 11%; 13%).

- Majorities of panelists in each group (members, 58%; elders, 56%; pastors, 55%; specialized clergy, 60%) report that during the ten years before the survey a family member or close friend was advised by a doctor or health-care provider to engage in more physical activity, improve diet, reduce weight, or make another lifestyle change.
Legal Issues

✓ About three in five members, elders, and specialized clergy, but only half of pastors:
  • Have completed a living will that specifies which treatments they would or would not want should they become incapacitated (members, 64%; elders, 60%; pastors, 53%; specialized clergy, 63%).
  • Have completed a durable power of attorney for health care, a designation of health-care surrogate, or a similar document appointing someone to make medical decisions for them should they become incapacitated (61%; 57%; 49%; 59%).

Source of Health Insurance Coverage

✓ Almost all panelists report that they themselves (members, 99%; elders, 99%; pastors, 100%; specialized clergy, 98%) and other family members in their household (98%; 97%; 97%; 97%) have health insurance coverage.

✓ Half each of members and elders have health insurance through a current or former employer (members, 49%; elders, 51%) and/or Medicare (50%; 46%). One-quarter (25%; 25%) have insurance through a family member’s employer or former employer. (Some have insurance from multiple sources.)

✓ Almost all pastors (97%) and seven in ten specialized clergy (71%) have health insurance through their employer or former employer.

✓ Family members in the households of at least two in five members and elders have health insurance through the panelist’s employer or former employer (members, 46%; elders, 45%) or through Medicare (46%; 40%).

✓ Family members in the households of nine in ten pastors (90%) have health insurance through the pastor’s employer or former employer. Family members in the households of three in five specialized clergy (59%) have insurance through the minister’s employer or former employer.

Types of Health-care Services Covered

✓ Almost all panelists in each group who have health insurance and know about their coverage say their insurance covers:
  • Visits to specialists (members, 99%; elders, 99%; pastors, 100%; specialized clergy, 100%).
  • Hospitalization (98%; 99%; 100%; 100%).
  • Routine doctor visits (98%; 98%; 100%; 99%).

✓ At least nine in ten panelists in each group who have health insurance and know about their coverage report that it covers:
  • Prescription medication (members, 96%; elders, 96%; pastors, 98%; specialized clergy, 99%).
  • Behavioral or mental health services (92%; 92%; 99%; 96%).

✓ At least nine in ten ministers (pastors, 97%; specialized clergy, 94%)—but only four in five members (82%) and elders (80%)—who have health insurance and know about their coverage have insurance that covers pregnancy and maternity care.

✓ Smaller majorities of panelists in each group who have health insurance and know about their coverage indicate that it covers:
  • Home health care (members, 80%; elders, 73%; pastors, 69%; specialized clergy, 72%).
  • Dental care (60%; 54%; 50%; 58%).

Financial Issues

✓ One-third of specialized clergy (32%) and one-quarter of pastors (27%)—but only about one in eight members (14%) and elders (11%)—delayed making an appointment with their doctor or health-care provider or skipped an appointment for financial reasons at least once in the ten years before the survey.

✓ Due to financial reasons, one in eight pastors (12%) and specialized clergy (15%)—but fewer members (6%) and elders (8%)—did not take medication that a doctor or health-care provider had prescribed for them or took less medication than prescribed at some time in the ten years before the survey.

✓ Very few panelists in any group, at some point in the ten years before the survey:
  • Were denied health insurance due to a pre-existing condition (members, 3%; elders, 4%; pastors, 2%; specialized clergy, 4%).
  • Dropped their health insurance due to increasing costs (3%; 3%; 2%; 7%).

✓ During the 12 months before the survey, one in eight members (12%), one in ten elders (10%), and one in six ministers (pastors, 18%; specialized clergy, 18%) paid all or part of someone else’s health-care bills that the other person could not otherwise afford (excluding panelists’ children ages 25 or younger who live at home).
Interest in Possible Resources and Programs

- Half or more of pastors and specialized clergy involved in a PC(USA) congregation—but minorities of members and elders—would be very interested or interested in resources or programs that could be offered in their congregation on each of the following topics:
  - Living wills and other end-of-life issues (members, 46%; elders, 48%; pastors, 71%; specialized clergy, 72%).
  - Alzheimer’s disease (and other memory illnesses) (43%; 44%; 59%; 62%).
  - Cancer (42%; 44%; 55%; 53%).
  - Care-giving (40%; 48%; 68%; 65%).
  - Navigating the health-care system (40%; 40%; 60%; 59%).
  - Nutrition and diet (39%; 42%; 52%; 50%).
  - Stress management (39%; 39%; 58%; 56%).
  - Depression (36%; 35%; 61%; 59%).
- More than one-third of members (37%) and elders (38%), four in nine pastors (44%), and half of specialized clergy (51%) would be interested in resources or programs in their congregation on heart disease.

- Minorities of panelists in each group would be interested in resources or programs in their congregation on the following topics:
  - Hypertension (high blood pressure) (members, 34%; elders, 36%; pastors, 44%; specialized clergy, 45%).
  - Diabetes (32%; 31%; 44%; 45%).
  - Preventing accidents and falls (30%; 30%; 38%; 40%).
  - Flu vaccinations (29%; 27%; 34%; 41%).
  - Managing medications (24%; 26%; 42%; 43%).

Most Interesting and Least Interesting Topics

- From the same list, at least one in five panelists in each group identify each of the following topics as one of the two most interesting for resources or programs that could be offered in their congregation:
  - Living wills and other end-of-life issues (members, 32%; elders, 33%; pastors, 44%; specialized clergy, 42%).
  - Alzheimer’s disease (and other memory illnesses) (24%; 25%; 25%; 21%).
  - Navigating the health-care system (24%; 22%; 24%; 24%).
  - Care-giving (21%; 24%; 32%; 26%).

- Half of pastors (51%) and four in nine members (43%), elders (46%), and specialized clergy (46%) identify flu vaccinations as one of the two least interesting health-related topics for congregational resources or programs during the next two years.

Others’ Interest in Resources and Programs

- Majorities of panelists in each group believe that others in their congregation would be very interested or interested in resources or programs that might be offered in their congregation on each of the following topics:
  - Care-giving (members, 77%; elders, 69%; pastors, 69%; specialized clergy, 77%).
  - Alzheimer’s disease (and other memory illnesses) (74%; 73%; 72%; 74%).
  - Cancer (74%; 73%; 65%; 65%).
  - Living wills and other end-of-life issues (73%; 66%; 67%; 67%).
  - Heart disease (67%; 66%; 51%; 60%).
  - Navigating the health-care system (64%; 66%; 61%; 67%).
  - Nutrition and diet (64%; 54%; 50%; 52%).
  - Stress management (62%; 55%; 55%; 58%).
  - Depression (59%; 54%; 53%; 61%).

- Majorities of panelists in some groups and minorities in other groups report that others in their congregation would be very interested or interested in resources or programs on each of the following topics:
  - Hypertension (high blood pressure) (members, 63%; elders, 63%; pastors, 46%; specialized clergy, 56%).
  - Diabetes (59%; 55%; 45%; 56%).
  - Flu vaccinations (47%; 43%; 33%; 52%).
  - Managing medications (54%; 55%; 49%; 50%).
  - Preventing accidents and falls (51%; 49%; 40%; 51%).

- At least two in five ministers—but fewer members and elders—would be very interested or interested in each of the following aspects of a program to train volunteers in their congregation to provide assistance to people with chronic medical conditions who need assistance with following the treatment recommendations of their doctor or health-care provider:
  - Participating in the training (members, 24%; elders, 29%; pastors, 40%; specialized clergy, 36%).
  - Providing this type of assistance to others in the congregation (23%; 32%; 49%; 41%).
  - Providing this type of assistance to people in the community (18%; 25%; 43%; 40%).
Health-promoting Congregational Activities

✓ Most of pastors report that their congregation, congregational staff, or a group in the congregation was engaged in each of the following types of health-related activities during the 12 months before the survey:
  - Visited people in the congregation when they were sick, homebound, or in the hospital (100%).
  - Prayed publicly during Sunday worship for people in the congregation or community who were in need of prayers because of health concerns (98%).
  - Gave rides to people in the congregation who needed transportation when they were going to the doctor’s office, health-care provider, or hospital (94%).
  - Provided information via an announcement, newsletter, church bulletin, or website about people in the congregation or community who were in need of prayer because of health concerns (94%).
  - Visited people in the community when they were sick, homebound, or in the hospital (87%).
  - Ran or hosted a support group or preventive health activity (other than an exercise class) such as an Alcoholic Anonymous group or a Weight Watchers meeting (55%).

✓ Large minorities of pastors report that their congregation or a group in their congregation during the 12 months before the survey:
  - Had a worship service that focused on restoring emotional, physical, or spiritual health (49%).
  - Ran or hosted a blood drive (39%).
  - Provided information in a newsletter, church bulletin, or website on preventing or managing chronic conditions such as Alzheimer’s disease, cancer, or diabetes (37%).
  - Ran or hosted a seminar or educational event on a health-related topic (37%).

✓ Three in ten pastors report that over the same period their congregation or a group in their congregation:
  - Ran or hosted a health screening (31%).
  - Ran or hosted an exercise class (28%).

✓ More pastors of large congregations than of medium-sized or small congregations report that their congregation ran or hosted each of five health-related activities during the 12 month before the survey (see Figure 2).

Figure 2. Congregational Participation in Selected Health-promoting Activities During the 12 Months Before the Survey, by Membership Size

Paid Health-care Work

✓ One-quarter of specialized clergy (25%)—but only about one in ten members (10%), elders (7%), and pastors (8%)—are paid to do health-care work.

✓ One in eight specialized clergy (13%) work as counselors, psychologists, social workers, or therapists.

The survey was mailed on May 6, 2010, with returns accepted through July 13, 2010. Results are subject to sampling and other errors. Small differences should be interpreted cautiously. In general, differences of less than 8% between samples are not statistically meaningful.

For more numbers and interpretation of these results, a longer report with more charts will be available on the web (www.pcusa.org/research/panel) or for $15 from PDS (800-524-2612; order PDS# 02056-10307). It will include tables with percentage responses to each survey question separately for members, elders, pastors, and specialized clergy.

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