

The C.U.R.E.



When we are in Harmony with Nature, we are in Harmony within ourselves.

Genesis 1:29 *“Behold, I have given you every plant yielding seed that is on the face of all the earth, and every tree with seed and its fruit. You shall have them for food.”*

Revelations 22:2 *“In the midst of the street of it, and on either side of the river, was there the tree of life, which bare twelve manner of fruits, and yielded her fruit every month: and the leaves of the tree were for the healing of the nations.”*

Mission

The Center for Urban Resource and Empowerment (C.U.R.E) is a 501c3 non profit in Sarasota, FL that implements Alternative Wellness programs in and out the classroom for children and families through Nature and Song.

The Center for Urban Resource and Empowerment (C.U.R.E.) is on a mission to harmonize children and families of North Sarasota with the healing power of Nature; through Wholistic Health and Nutrition Education, Wholistic Health Alternatives, Wholistic Lifestyle Models, Lectures, Sound Healing and CommUNITY fellowship. Our mission is to provide Children and Families safe Wholistic Health Alternatives, Educational Resources and Program Options for the North Sarasota CommUNITY, rooted in **Balance, Restoration, and Culture.**

Vision

Our vision is to establish a lifestyle, culture, and tradition within the North Sarasota CommUNITY that can be implemented for generations to come, where children and families experience Optimal Health through Balance and Harmony within themselves and Nature.

Our Speciality

1. **Quality Support.** We provide quality/genuine support rooted in cultural competence, empathy, and love. Our approach to helping children and families achieve their health goals is by harmonizing with Nature; keeping it simple, natural and whole, while educating the North Sarasota CommUNITY in Wholistic wellness through Nature and Natural daily routines and habits.
2. **Cultural Competency.** We provide support to children and families with the utmost respect, honoring, acknowledging, and welcoming different opinions and inquisitiveness, while being educated and assisted. Questions are welcomed and solutions are carried out with children and families being a part of the process. The C.U.R.E was created to secure safe alternative health care support for children and families who choose alternative ways for their health and healing. We are dedicated to holistic care for children and families without hidden agendas that are rooted in financial incentives, judgment, uprooting children from their loving homes, compromising children, and the destruction of the Family. We are dedicated to wholistic care for children and families rooted in the understanding that health is not one-size-fits-all.
3. **Connection to Nature.** We infuse healing of the mind, body, and soul with Nature, by keeping our approach to optimal health **simple, natural, and whole.** We empower and assist children and families with the healing power of Nature by providing:
 - Wholistic Lifestyle Models (Including outdoor Family Wellness and Fun)
 - CommUNITY & Classroom Lectures & Programs
 - Outdoor Drum Circles
 - Nature Walks
 - Group/CommUNITY Grounding
4. **Community Resource Support.** Once every 90 days each family we serve is eligible for emergency financial support if needed; fixing a vehicle, rent/mortgage, medical, or educational expenses.
5. **Healthy Food Program.** Weekly food pantry with All Faiths Food Bank partner, offering exclusively fresh produce to the families we serve.
6. **Art Therapy.** Utilizing Music, sound bowl healing, drumming, and painting as a resource for healing.

Redefining Health

The Oxford dictionary defines wellness as, “ the state of being in good health, especially as an actively pursued goal.”

What is Good Health?

Good health varies from person to person and there is no one-size-fits-all when it comes to what is considered Healthy. Not everyone has the same “actively pursued goal” when it comes to health. So, our approach to helping one reach health goals varies from family to family, keeping in mind social, personal, and cultural differences.

How Do We Define Good Health?

Wholistic Wellness; Balance in the Mind, Body, Soul, and Spirit. Not just looking healthy on the outside, but actually experiencing optimal health from the inside out.

CDC Research and Data

According to the CDC the leading causes of death for African Americans are **“Heart Disease”, “Cancer”, and “Stroke”**.

The CDC reports that **“African Americans** ages 18-49 are **2 times as likely to die from heart disease than whites**” and “African Americans ages 35-64 years are 50% more likely to have high blood pressure than whites”

The CDC also reports, “Health differences are often due to economic and social conditions that are more common among African Americans than whites. For example, African American adults are more likely to report they cannot see a doctor because of cost. All Americans should have equal opportunities to pursue a healthy lifestyle.”

The Problem According to the CDC

Problem:

Young African Americans are living with diseases more common at older ages.



According to the CDC the problem is “Young African Americans are living with diseases more common at older ages”, and “African Americans are more likely to die at early ages from all causes.”

Unemployment, Living in poverty, No home ownership, Could not see an MD, Smoking, Not active, and Obesity are listed as some social factors and health risks that affect African Americans at younger ages.

MAY 2017

CDC
Vitalsigns™

African American Health

Creating equal opportunities for health

African Americans are living longer. The death rate for African Americans has declined about 25% over 17 years, primarily for those aged 65 years and older. Even with these improvements, new analysis shows that younger African Americans are living with or dying of many conditions typically found in white Americans at older ages. The difference shows up in African Americans in their 20s, 30s, and 40s for diseases and causes of death. When diseases start early, they can lead to death earlier. Chronic diseases and some of their risk factors may be silent or not diagnosed during these early years. Health differences are often due to economic and social conditions that are more common among African Americans than whites. For example, African American adults are more likely to report they cannot see a doctor because of cost. All Americans should have equal opportunities to pursue a healthy lifestyle.

Public health professionals can:

- Use proven programs to reduce disparities and barriers to create opportunities for health.
- Work with other sectors, such as faith and community organizations, education, business, transportation, and housing, to create social and economic conditions that promote health starting in childhood.
- Link more people to doctors, nurses, or community health centers to encourage regular and follow-up medical visits.
- Develop and provide trainings for healthcare professionals to understand cultural differences in how patients interact with providers and the healthcare system.

Want to learn more? www.cdc.gov/vitalsigns/aahealth



Centers for Disease
Control and Prevention
National Center for Chronic
Disease Prevention and
Health Promotion

25%

The death rate for
African Americans
decreased 25% from
1999 to 2015.

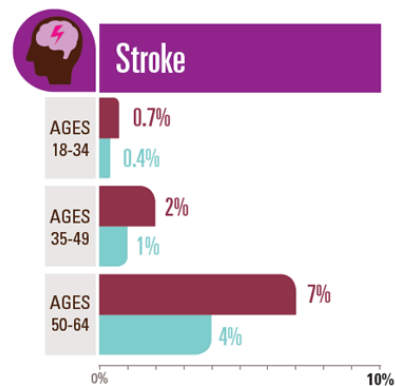
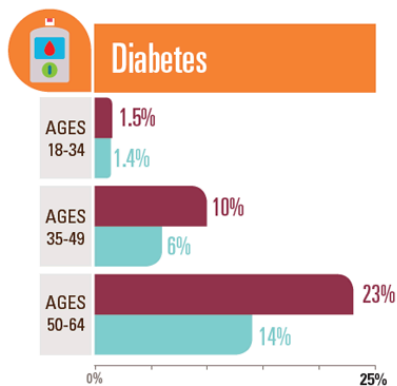
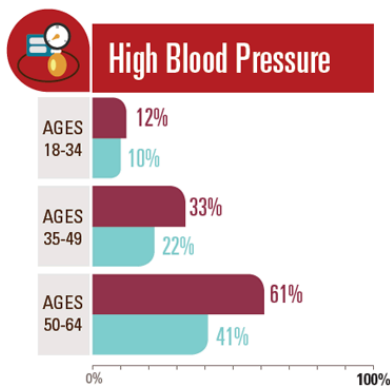
2x

African Americans
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times as likely to die
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than whites.

50%

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ages 35-64 years
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to have high blood
pressure than whites.



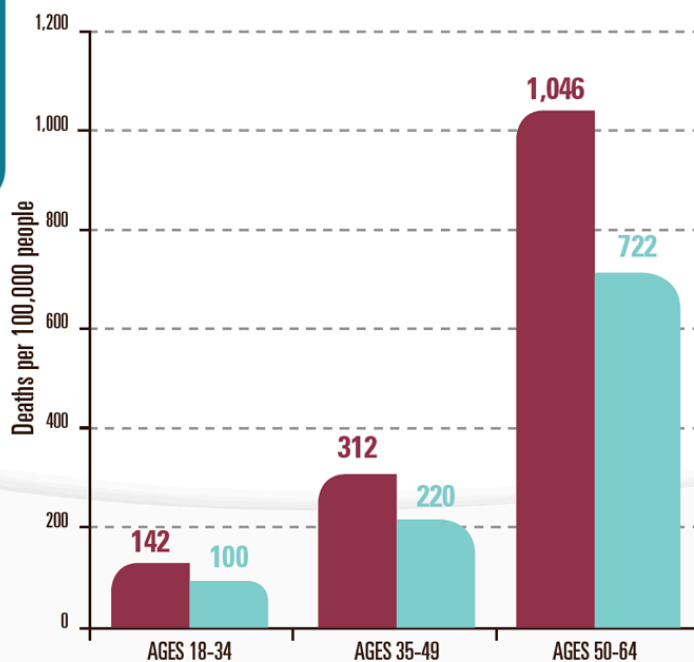


African American **White**

African Americans and whites include Hispanic and non-Hispanic origin.

SOURCE: Behavioral Risk Factor Surveillance System, 2015.

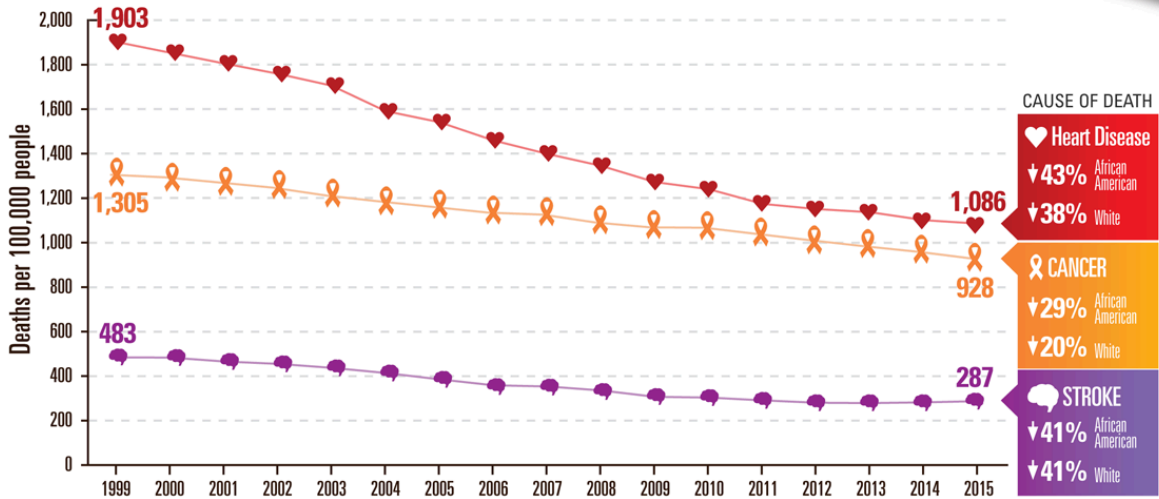
African Americans are more likely to die at early ages from all causes.



SOURCE: US Vital Statistics, 2015.

The leading causes of death for African Americans have decreased from 1999–2015.

Deaths in African Americans ages 65 years and older

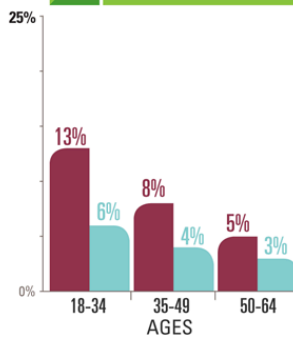


SOURCE: US Vital Statistics, 1999–2015.

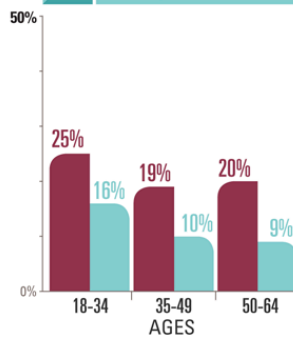
Some social factors and health risks affect African Americans at younger ages.

African American
White

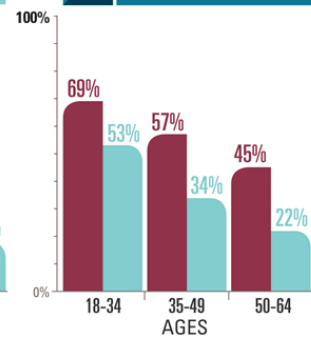
Unemployment



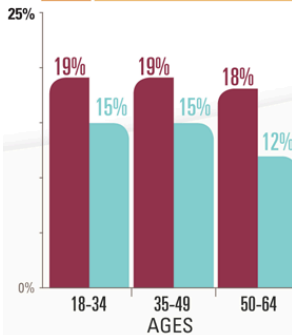
Living in poverty



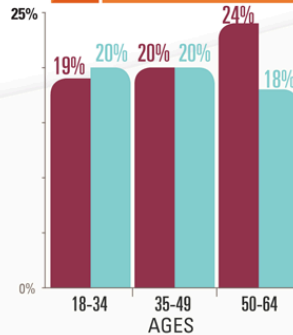
No home ownership



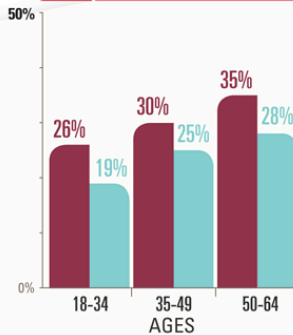
Could not see an MD because of cost



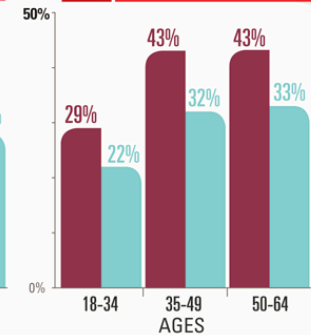
Smoking



Not active



Obesity



SOURCES: Behavioral Risk Factor Surveillance System, 2015; American Community Survey of the US Census Bureau, 2014.

What Can Be Done?



The Federal government is

- Collecting data to monitor and track health and conditions that may affect health, such as poverty and high school graduation rates, through Healthy People 2020.
<http://bit.ly/2c0hWW4>
- Supporting partnerships between scientific researchers and community members to address diseases and conditions that affect some populations more than others.
- Addressing heart disease, stroke, and other cardiovascular diseases, which disproportionately affect African Americans, by implementing national initiatives such as Million Hearts®.
<http://bit.ly/2pOUx0N>
- Supporting actions to create healthy food environments and increase physical activity in underserved communities.

Public health professionals can

- Use proven programs to reduce disparities and barriers to create opportunities for health.
- Work with other sectors, such as faith and community organizations, education, business, transportation, and housing, to create social and economic conditions that promote health starting in childhood.
- Link more people to doctors, nurses, or community health centers to encourage regular and follow-up medical visits.
- Develop and provide trainings for healthcare professionals to understand cultural differences in how patients interact with providers and the healthcare system.

Community organizations can

- Train community health workers in underserved communities to educate and link people to free or low-cost services.
- Conduct effective health promotion programs in community, work, school, and home settings.
- Work across sectors to connect people with services that impact health, such as transportation and housing.
- Help people go see their doctor, take all medications as prescribed, and get to follow-up appointments.

Healthcare providers can

- Work with communities and healthcare professional organizations to eliminate cultural barriers to care.
- Connect patients with community resources that can help people remember to take their medicine as prescribed, get prescription refills on time, and get to follow-up visits.
- Learn about social and economic conditions that may put some patients at higher risk than others for having a health problem.
- Collaborate with primary care physicians to create a comprehensive and coordinated approach to patient care.
- Promote a trusting relationship by encouraging patients to ask questions.

1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348
www.cdc.gov

Centers for Disease Control and Prevention
1600 Clifton Road NE, Atlanta, GA 30329
Publication date: 5/02/2017

The Truth About Genetics

“It is commonly thought that certain diseases such as **diabetes, heart disease, cancer, and hypertension** are determined solely, or primarily, by genetic predisposition. “Heart disease is very prevalent in my family so there’s nothing I can do”, is a common statement I hear. All of our body’s functions are controlled by genes, and therefore they are all genetic by definition. This makes all diseases technically genetic in origin as well. It is important to understand that our genes do not necessarily determine *that* we will get sick. They essentially determine *how* we get sick, if we do get sick. Our genes have good components and bad components. If exposed to a bad environment, as is the case with bad foods, they express cell products that predispose us to disease states. When exposed to a good environment, such as having access to only good food, they express cell products that allow for optimal health or disease reversal.

For example, if 1,000 individuals eat the very same amount of fried animal protein, dairy, and processed foods regularly they would all get sick. However, they would get sick in different ways. Some would get fat (likely most), some would develop diabetes and hypertension, some would develop diabetes and heart attacks, and yet others would neither get fat nor develop a common chronic disease, but would become depressed or emotionally unstable.

In essence,

how they get sick would be determined by their genetics, but that they get sick would be determined by the food they eat.

Conversely, if the same group of individuals eat a minimally processed, whole food, plant-based nutritional diet, they would all develop the same condition of optimal health, without physical or emotional illness. The same genes that will predispose them to sickness in the setting of bad food will predispose them to optimal health in a setting of good food.”

Author Baxter D. Montgomery, MD of “The Food Prescription for Better Health A Cardiologist’s Proven Method to Reverse Heart Disease, Diabetes, Obesity, and Other Chronic Illnesses, Naturally”

What is the actual problem?

Unnatural Living. We as a society and a CommUNITY have moved further and further away from our indigenous ways of living and as a result our internal and external eco-systems are struggling to get back to balance or to maintain balance. We have been living in unnatural and toxic ways that have been normalized within our society and that promote the deterioration of our overall health; to our internal and external environments. All this toxic waste; pharmaceutical drugs and over stimulation have left us sick, at dis-ease, and crying out for healing and restoration at an atomic level. Our bodies and planet need a reset.

Service. Many local media outlets, non-profits, and political figures have described the North Sarasota community as underserved. **What does underserved mean?** The Oxford English Dictionary defines underserved as: *inadequately provided with a service or facility: a medically underserved community*. If we break down the word inadequately we are given two options for the meaning; not enough; **not good enough**. Then, if we look at the word **under** there are many different meanings for this word, like lower in grade or rank, behind or **hidden behind (an appearance or disguise)**, and controlled, managed, or governed by: *the country is now under martial law*. Let's focus on the definition **behind or "hidden behind" (an appearance or disguise)**. Then, we have the word served, which also has many different meanings like; **to play (a trick) on (someone)**, "I remember the trick you served me", perform duties or services for (another person or an organization), "Malcolm has served the church very faithfully". With all the different available meanings for these words, how does one really know how it's being used by the ones actually doing the "serving"? Health Screenings are frequently made available to North Sarasota residents and free Health clinics exist in the area too.



Free & Income Based Clinics In Sarasota, FL

We have located **11 free and income based clinics** in or around Sarasota, Florida.

We listed all of the free, income based health clinics, public health department clinics, community health centers that we have located in Sarasota, FL. For the most part these clinics are for low income persons or those without insurance.

Review all of the information we have provided for the clinics. Some of them provide a wide array of services ranging from free to sliding scale services. We have provided as much detailed information including phone numbers, emails, and websites where available.

Something to ask ourselves is....what do service providers and local organizations mean when they say **underserved**? As a CommUNITY our biggest issue has not been that we are not given ENOUGH services, instead it's the QUALITY of service we've been given; rooted in trickery, deceit and HIDDEN agendas, lacking cultural competence and actual solutions towards healing humans. Free services have been given to our CommUNITY and continue to be given to our CommUNITY in abundance primarily to; collect data, compromise optimal health with Chemical Weapons under the guise of "Medical Treatment", and fulfill Eugenic hidden agendas instead of ACTUALLY providing quality care rooted in listening to the community's needs and actually providing healing to the people of our CommUNITY.

Trust. The problem is where we put our Trust. *"Our bodies are amazing machines, more advanced than anything technology or modern medicine has to offer us today,"* but we have been programmed to trust everything other than our own body and intuitive nature. Many of us find ourselves in the emergency room or doctor's office regularly, looking for all the answers to our health concerns, because we have been programmed to put our trust in the medical system that continues to mislead, misguide, misinform and provide treatment with hidden agendas, all while violating our bodies and human rights. The medical system is more concerned with creating healthy cash flow, NOT healthy humans.

"What looks like industry contributions to our well-being are often pure profit plays, dressed up as health initiatives." -Whole: Rethinking the Science of Nutrition T. Colin Campbell, PhD.

As a result of this ever-increasing greed, children and families have suffered at the very hands of those they have been taught to put their complete trust in. Throughout history the medical system has traumatized, experimented on, and caused severe mental and physical damage to indigenous beings/African Americans..... to our CommUNITY, under the guise of titles such as; doctor, physician, nurse, expert, specialist and using terms such as helping, contributing, assisting, and serving. As a result of our suffering a billion dollar industry was created, advanced and is still maintained.

“I have witnessed such injustice and harm brought to these families that I am not sure if I even believe reform of the system is possible! The system can not be trusted. It does not serve the people. It obliterates families and children simply because it has the power to do so. Children deserve better. Families deserve better. It’s time to pull back the curtain and set our Children and families free.” - Senator Nancy Shaefer

"Side effects of prescription drugs are the third leading cause of death, behind heart disease and cancer...."

Prescription drugs will kill more people than traffic accidents. According to Dr. Barbara Starfield, writing in the Journal of the American Medical Association in 2000, "adverse effects of medications" (from drugs that were correctly prescribed and taken) kill 106,000 people per year. And that doesn't include accidental overdoses.

Add to that the 7,000 annual deaths from medication errors in hospitals, 20,000 deaths from errors in hospitals not related to medications (like botched surgeries and incorrectly programmed and monitored machines), 80,000 deaths from hospital-caused infections, and 2,000 deaths per year from unnecessary surgery.

Yet when you ask the U.S. government about this, you're met with deafening denial. Look at the CDC webpage.... not a peep about the medical system being the third leading cause of death in the United States. Admitting that would be bad for business, and if the U.S. government cares about one thing here, it's the economic interests of the medical establishment.”

-Whole: Rethinking the Science of Nutrition T. Colin Campbell, PhD

According to Webmd.com, in the U.S., 41% of Black's have High Blood pressure, as compared to 27% of whites.

High Blood pressure can cause:

- *Heart attack
- *Aneurysm
- *Heart failure
- *Kidney problems
- *Metabolic syndromes
- *Dementia

NBC News Maggie Fox covered:

A study by *Journal of the American Medical Association* shows the main reason Black's die younger than whites is heart disease, caused by high blood pressure.

A southern diet is the main factor.



SHARE THIS —



Oct. 2, 2018, 11:59 AM EDT

By Maggie Fox

“It’s rich and delicious, that Southern diet: plenty of fried food, cheesy casseroles, and sweet, sweet tea.

But it’s deadly, especially to African-Americans. The fat, sugar and sodium that make Southern food so tempting also sends blood pressure up to killer levels.

A study out Tuesday in the Journal of the American Medical Association shows the main reason African-Americans die younger than whites is heart disease. It finds heart disease, mostly caused by high blood pressure, accounts for fully one-third of the disparity.

And the main factor raising blood pressure? A Southern-style diet. George Howard, of the University of Alabama, at Birmingham and colleagues studied just under 7,000 people who had been taking part in a larger, long-term study of diet and lifestyle. The volunteers got their first medical exams for the study between 2003 and 2007, and were examined again an average of nine years later.

Howard’s team compared blacks to whites in the study. They checked weight, blood pressure, cholesterol; asked questions about drinking alcohol, about income and about exercise habits; and checked for symptoms of stress and depression. They asked what type of foods people ate, also.

As expected, blacks had higher rates of early death than whites, and much of that was due to high blood pressure. That’s been shown often before.

What was surprising, said Howard, was that diet seemed to be a major factor associated with the death rates.

“I would have guessed obesity would have been playing a big role and factors like stress and depression would have been playing a big role,” Howard told NBC News.

“Once I saw that it was a Southern diet, it was a ‘oh yeah that makes sense’ kind of thing.”

To some degree, the Southern diet represents the American diet overall — loaded with white flour, sugar, salt and meat. But this study showed big differences between blacks and whites in terms of eating the least-healthy foods.

“African-Americans eat not just more of this diet, but a lot more of this diet,” Howard said.

And blacks were also less likely to eat healthy foods that lower the risk of heart disease, including vegetables, fruits and whole grains, the study showed.

Obesity plays a role as well, but only for women, the team found. “Black men and white men have the same BMI (body mass index),” Howard said. Black women were more likely to be obese than white women, however, the study found, and for women, obesity was linked with a higher likelihood both of having high blood pressure and of dying young.

There’s been a lot of research into how diet affects the risk of high blood pressure and heart disease. The American Heart Association has guidelines on how to lower both and they’re straightforward: eat more vegetables, fruit and whole grains; exercise regularly; eat less sugar; and cut back on the fried food.

“There’s good news in this paper. The things that look like they are big contributors in the racial differences in hypertension are actually things that can be changed,” Howard said.

But, he added, healthy food can be more expensive.

And Howard has a reminder for all Americans. He described a visit he made to a deli in New York City where schmaltz was a major ingredient. “They put a pitcher of chicken fat on the table to pour on your food,” he said. “Bad eating and adding fat is not only a Southern experience.”

The Solution According to CDC

The CDC's African American Health data bullet points what can be done by the Federal Government, Community Organizations, Public Health Professionals, and Healthcare Providers.

Following a Whole Foods Plant Based Diet/Lifestyle is not mentioned. Actually the word Nutrition is not mentioned as the problem or solution.

What is mentioned frequently by the Center for Disease Control is following through with check-ups and medications.

The Real Solution?

We must assist our CommUNITY with managing health vs. managing sickness. There is no quick fix or magical pill that will help us reach Optimal Health. Optimal Health is achieved through trust in our body and dedication to what naturally works for us. This process varies from person to person. But, what is the same for us all is, all we need to heal comes from within us. The C.U.R.E. is there to assist and empower children and families to use the tools that already exist within them. We assist and guide to help Create a culture where CommUNITY and Nature Harmonize. When we are in Harmony with Nature, we are in Harmony within ourselves.

“There is a need for a revolutionary change in how we address chronic illnesses in this country and around the world. Our new paradigm will be one in which we address chronic illnesses from the perspective of our lifestyle behavior, with optimal nutrition being the central theme.

It is recognized that congenital abnormalities, physical injuries, and the like will continue to contribute to our overall health condition, and in many cases will require the best that medications and surgery have to offer. However, the

major burden of chronic illnesses on our collective health could be heavily reduced or nearly eliminated, by shifting focus to our new healthcare model.

This model places an emphasis on first recognizing poor health as an indicator of poor lifestyle behaviors, especially poor nutritional choices. We would then aggressively intervene on that lifestyle behavior to bring about true health for people. At this point we would be providing true health care, and not just sick care.”

Nutrition

Author Baxter D. Montgomery, MD of “The Food Prescription for Better Health

A Cardiologist’s Proven Method to Reverse Heart Disease, Diabetes, Obesity, and Other Chronic Illnesses, Naturally” writes:

“The first step in using nutrition as a form of therapy to reverse disease is to remove all suboptimal nutrition that has had a direct impact on our health. By removing foods that are toxic from our diet, we bring about the first phase of healing. The body is allowed to reverse its condition when the offending agents are removed. The removal of substances such as processed animal products (chicken, fish, turkey, beef, pork, all wild game, eggs, milk, cheese, and all other foods containing non-human animal milk), processed carbohydrates, and processed sugars allows the body to remove toxic waste substances that are the byproducts of metabolizing these suboptimal foods. This allows the body to cleanse itself.

Once we eliminate foods that are harmful to our body, we allow it to start rebuilding itself in a way that restores its ability to carry out physiological functions in an optimal manner. Furthermore, by introducing minimally processed, natural plant-based foods, we further enhance the rebuilding process. Simply stated,

optimal foods beget optimal health.

Although chicken, fish, eggs, cereal, milk, etc. are bad for us, these foods are what we have been eating all of our lives, and hence bring about a certain sense of safety.

The familiarity of certain foods, determined to be toxic to our bodies, makes it difficult for people to fully accept that these foods should not be eaten by anyone! Closely related to the concept of what Can I eat is the question, is it okay to eat meat, fish, dairy, eggs, or processed foods some of the time? I often respond to this question by stating that we live in a free society, and consuming these foods on rare occasion is not against any laws that I know of. Therefore, it is OK to eat them. But it is important this statement comes with a disclaimer.

We need to accept that these foods are “bio chemically” bad for us, and will potentially do harm to our bodies when consumed in any amounts.

It is always the best advice to leave these foods out of our diets completely.

I am given many examples of people who eat animal protein, dairy, eggs, and processed foods and are “doing well.” There are also examples of individuals who jump from airplanes, who have parachutes that failed to open and live to tell about the experience. I have heard that members of certain religious cults allow rattlesnakes to bite them and live to tell about it.

Many things in life are tolerable but not advised.

Hence just as I would advise you not to jump from an airplane with a defective parachute or allow yourself to be bitten by a rattlesnake, I advise you not to eat meat, fish, dairy, eggs or processed foods.

*We must consider that the antithesis to good nutrition is poison! The definition of **poison** is that of a **substance with an inherited tendency to destroy life or impair health.** We often think of a poisonous substance as something that leads to immediate death, a violent reaction, or an acute, severe illness when consumed.*

However, any substance that has the ability to impair health, at any level and to any degree, by definition can be considered a poison. In contrast, most nutrients that are beneficial for the body do not have the inherent ability to impair health, but rather have the important qualities of enhancing health—even when consumed in large amounts.

Dr. T. Colin Campbell, author of The China Study, clearly defines the importance of plant-based nutrition over animal-based nutrition.

“There is strong scientific evidence showing associations with chronic diseases, such as an increase in cholesterol, elevation of blood pressure, osteoporosis, and type 2 diabetes with the consumption of animal flesh in any form, whether it is beef, chicken, turkey, or even fish.”

Many people have been programmed to believe that plants cannot supply all of the essential nutrients the body requires to function properly. This is sadly due in part to very successful lobbying by the meat and dairy industries to convince Americans they cannot be healthy without animal flesh, milk, and cheese in their diet. The American dietetic association (ADA) came out with the following proclamation in 2009:

“It is the position of the American Dietetic Association that appropriately planned vegetarian diets, including total vegetarian or vegan diet, are helpful, nutritionally adequate, and may provide health benefits in the prevention and treatment of certain diseases. Well planned vegetarian diets are appropriate for individuals during all stages of the life cycle, including pregnancy, lactation, infancy, childhood, adolescence, and for athletes.”

The ADA defines a vegetarian diet as one that does not include meat or seafood or food products that contain meat or seafood. The results of their evidence-based review showed that those who follow a vegetarian diet have a lower risk of death from heart disease, they maintain lower cholesterol levels, have a lower blood pressure, and have lower rates of hypertension and type 2 diabetes than non-vegetarians. This is likely because vegetarians tend to consume fewer foods containing saturated fats and cholesterol, while favoring fruits, vegetables, whole grains, nuts....fiber, and phytochemicals.

With regards to protein, the ADA states that whenever a variety of plant foods are consumed over the course of a day, the diet will provide all of the necessary amino acids, and ensure adequate nitrogen retention and use in healthy adults.”

Health vs. Disease

“Health by definition is the general condition of the body or mind with reference to soundness and vigor. It is, in essence, freedom from disease or ailment. Disease by definition is a disorder or abnormal condition of an organ, or other part of an organism, resulting from genetic or developmental errors, such as infection, nutritional deficiency, toxicity, or unfavorable environmental factors. Hence, health is defined by the absence of disease, which is the absence of some abnormal condition of an organ or other part of an organism.

The difficulty in defining disease in an absolute sense is related to the difficulty in determining at what point the organ or organism becomes abnormal. In clinical medicine, we have numerous diagnostic tests, clinical assessments, and physical evaluations we use to determine whether an individual has an abnormal condition. Over the centuries, the study of clinical medicine and human physiology has resulted in numerous clinical syndromes and physical assessments, developed and used to determine whether or not an individual is in a diseased state.

The point I want to make is that we are only able to define health versus disease based on limited clinical diagnostic tools. When I see someone in my office that has a normal physical exam and normal diagnostic tests, I do not know whether this person is truly healthy or not. If I see another patient with an abnormal physical exam and diagnostic tests, I will know that the person is not healthy, but I do not know when the disease state began or the full extent it exists.

Our current clinical approach is to define disease based on an abnormal clinical finding, which often occurs long after the disease state has begun at the cellular level. For example, “Barbara” is a 50-year-old woman who sees her doctor for a routine evaluation. Over a period of days, data will be collected to assess her health using blood tests, a Pap smear, pelvic exam, breast exam, and mammogram. Barbara is a smoker and eats foods high in trans-fats. Nevertheless, all of her tests are found to be normal. Unknown to her and her doctor, she has four breast cancer cells in her left breast that were undetected in the mammogram. Based on Barbara’s clinical evaluation she would be deemed healthy, despite the presence of cancer. The cancer would not become detectable until it is approximately 1 billion cells in number.

For an average growing breast cancer it could take approximately six to eight years to become clinically detectable. During this time, Barbara may get consistent, normal clinical evaluations and reassurances of being healthy. She would not likely be motivated to change her lifestyle because she is cosmetically healthy, with no evident medical problems. Barbara would continue to literally feed the cancer until it becomes clinically measurable.

The above example underscores the inadequacy of our current approach, defining disease states only in terms of abnormal clinical findings.

A paradigm shift is needed in our thinking in which we define disease states as the pathological lifestyle an individual has, regardless of their clinical findings.

The treatment of this pathological lifestyle should be the foundation of our treatment plan, regardless of the health condition the individual faces, whether it is pre-clinical, early stage, advanced, or even near terminal. With this approach, we will no longer overlook “removing the vice grip from the thumb.”

We are likely seeing an increase in the number of therapeutic interventions as a result of an increase in the amount of disease, which underscores an apparently single-minded or unilateral approach to treating chronic illnesses

in America. In my opinion, our current system of healthcare is not one of healthcare at all, but one of sick care. It is a system primarily using pharmaceutical and therapeutic interventions for the treatment of disease. Minimal attention is given to lifestyle in general and nutrition specifically. Sick individuals are only told they must “diet and exercise” or “lose weight” if they happen to be overweight and sick. They are told their illnesses are simply “genetic” if they are sick but not overweight.

If we understand that chronic illnesses are based on an underlying biochemical or psychological imbalance that is the primary problem, then the main concern needs to be in the treatment of that primary condition, and not the superficial system that brings a patient into a clinical office. In my opinion, the definitive health care intervention is one that intervenes at the level of the malnourished state of most Americans.

We not only need to make a paradigm shift in our thinking, but in our actions as well. More specifically, there is a need for a major paradigm shift in our current approach to the treatment of medical disease. This paradigm shift is one where we realize the need for nutritional intervention as the core, or foundation, of how we treat illness, with medical and surgical interventions used as secondary approaches.

For example, let's say Gina is a patient, admitted to the hospital for congestive heart failure (a condition of the heart weakening). She will be admitted to either a telemetry room where the electrical activity of her heart will be constantly monitored, or a cardiac care unit, depending on the severity of her condition. Congestive heart failure is a condition where the heart does not circulate blood adequately for the body's needs, causing fatigue and swelling. It is among the most common reasons for hospitalizations in America. Gina may also undergo expensive diagnostic procedures such as angiograms and electrical tests of the heart. She may even require the placement of a special implantable defibrillator that stimulates the lower chambers of the heart to improve their pumping function. These therapeutic interventions are excellent, and have shown to be helpful for people with this condition.

However, Gina is allowed to eat the same food she always has, with a few minimal changes. But that won't be enough to alter the factors that both started, and further perpetuates, her disease state. The only advice that individuals with a similar condition to Gina's will receive to change their current eating habits to improve their health are a few handouts encouraging them to eat a "low salt" diet. They are told about eating in "moderation" and weighing themselves. If they are smokers, they are told to stop (big revelation!). This information is given to them as basic supplemental information, as opposed to framing the foundation of the treatment plan.

Managing Health vs. Managing Sickness

So what does it mean to manage someone's health versus his or her sickness? We can best answer this by examining the current standard of care for treating an individual with type 2 diabetes. An individual -we will call him "Dave"- has elevated levels of blood sugar that are found by his physician during an examination. Likely, he will be started on oral medications in pill form to get the blood sugar down, depending on how high it is. Let's say Dave's initial fasting blood sugar is 250 mg/dL.

Since his levels are above 126 mg/dL, he will be considered to have diabetes. His condition will be classified as type 2 diabetes, a condition where the body's cells do not respond normally to insulin. He likely will start taking an oral medication with the recommendation to follow a standard diabetic diet, which includes monitoring carbohydrates and fruits. He will also be told to exercise and lose weight if he is overweight.

If Dave's blood sugar remains high despite starting the oral medication, he will begin a second diabetic pill or started on insulin. The focus of his overall care will be to get his blood sugar down, well below 200 mg/dL.

More and more medication will be added until the blood sugar is at or near the target range. Dave's physician will likely prescribe as many medications as necessary to "get the blood sugar down." Although reducing the blood sugar of a diabetic is a noble thing to do, this approach is inadequate because it is unilateral, and does not get to the underlying cause, which are the processed foods that Dave likely continues to eat.

With a primary nutritional approach, the first intervention for Dave would be to fully examine the foods he eats regularly to assess the extent that food is the root of the problem. In my experience,

the patient's diet is the major contributing factor for type 2 diabetes greater than 99% of the time.

The management of this patient would include a major change in Dave's diet, which would start by removing all forms of animal flesh, eggs, dairy, and processed foods. This initial phase of his treatment will focus on what he eats, and more importantly, which he does not eat. The psychosocial aspects of these changes would be addressed during this time. Dave would also be empowered through small group lectures, food preparation demonstrations, and informative shopping sessions. Medications would only serve as a last effort to keep Dave's health condition under control, with continued attempts to wean him off them as much as possible."

A New Role for Medications and Surgical Procedures

Looking back to Gina's situation with congestive heart failure, we would take a different approach with her as well. We would prescribe a change in her diet that would not only halt the disease state progression but would also begin reversing it. The underlying insult is removed by eliminating the unnatural food substances from Gina's diet and replacing them with natural

plant-based foods. This will support her body's ability to naturally repair the damaged blood vessels, repair the damaged underlying metabolic conditions that resulted in high cholesterol, and halt the underlying conditions that would lead to further weakening of her heart. This is what brings about disease reversal and healing.

The aforementioned lifestyle intervention would be nutritionally-based at first, with other components such as exercise added later. Her prescription would include the following;

- Information on specific foods to eat and those to avoid.*
- Details on the best ways to prepare foods.*
- Sample recipes and detailed meal plans.*
- Small and large group sessions would be encouraged.*
- Education on the fundamentals of optimal nutrition.*
- Practical and instruction on how to order at restaurants or manage food with travel schedules.*

Please do not misunderstand. I believe modern medicine has many benefits for the actually ill individual. An example is someone who goes to his or her physician with severe chest discomfort and is found to be having a heart attack. That individual is known to benefit from acute therapeutic procedures, such as an angioplasty. My point is that such procedures should be reserved for acute illnesses. In a similar way, individuals who are affected by significant trauma from motor vehicle accidents, gunshot wounds, and the like will definitely benefit from the technological advancement of modern medicine, and the acute care of therapeutic intervention. However, the vast majority of our medical care is utilized in individuals with chronic illnesses that are best treated and reversed by nutritional means. In these settings, medications and interventions are traditionally thought to be the primary medical approach, while diet and lifestyle changes, specifically optimal nutrition, is thought to be a secondary approach. My position is that for the vast majority of these chronic illnesses, such as heart disease, diabetes mellitus, obesity, hypertension, and immune complex disorders, nutrition should be the primary source of intervention, with medications and surgical procedures being a secondary option. Our whole approach to medically treating chronic illnesses needs to shift its focus to place more emphasis in helping people control their own health states through Optimal Nutrition.

True Health

The Real Solution is genuine guidance and assistance for our CommUNITY to **Optimal Health** at an Atomic/Cellular Level, by focusing on Wellness from the inside out through;

- Wholistic Lifestyle Models
 - Wholistic Education
 - Wholistic Nutrition Education
 - Wholistic Programming
- (in schools and community spaces)

The real Solution is empowering our CommUNITY through wholistic education, to get Back to Nature, which is really back to self...the ecosystem within. The real solution is empowering our CommUNITY with knowledge to heal from the inside out, by helping Children and families listen to their own actions that help facilitate their body's own ability to "heal" itself based on a Wholistic Lifestyle.

In our new way of thinking, true health should be a process of optimal living with a continual improvement in our actions over time. True health is more of a process than a condition clinical test value. A person will gain true health by achieving and maintaining a lifestyle of optimal nutrition and exercise, as well as continual mental and spiritual growth. This process can occur at any age or clinical condition.

For example, an 80-year-old woman with congestive heart failure, diabetes, and high cholesterol, can achieve true health by seizing to eat foods that are toxic to her body, and replacing them with nutritionally excellent food, exercising regularly, getting adequate sunshine, and rest. Although this person may have a weak heart on ultrasound, her truly aggressive lifestyle intervention may afford her a higher level of functioning than otherwise, with minimal or possibly no need for regular "sick care" treatments. In other words, true health for her would be to control her disease state with very few

or no medications, few or no regular admissions to the hospital, and even very few visits to her doctor. This person will be achieving true health because her actions would be such that she is facilitating her bodies ability to heal itself based on her new lifestyle.

On the other hand, and outwardly healthy 25 year old woman would not have true health if she smoked, consumed the standard American diet, and was sedentary. Despite the fact that she has no detectable disease on clinical evaluation, her actions and poor lifestyle choices are contributing to her potential heart disease, cancer, kidney failure, or perhaps even lupus. This is what should define her state of disease. With this new approach to wellness, her doctor would prescribe a more aggressive lifestyle intervention during her routine well-woman evaluation that may alter her course of life.

Author Baxter D. Montgomery, MD of “The Food Prescription for Better Health

A Cardiologist’s Proven Method to Reverse Heart Disease, Diabetes, Obesity, and Other Chronic Illnesses, Naturally”

The C.U.R.E. Branding

“On a Mission to Establish a Culture where CommUNITY and Nature Harmonize.”

www.Curethecommunity.org

The C.U.R.E Brand PURPOSE

ALIGN the people of the North Sarasota, FL CommUNITY with Nature, through Wholistic Health Education, Wholistic Food, Culture, and Fellowship.

The C.U.R.E. Brand STORY

A non profit that believes in FAMILY that serves the North Sarasota CommUNITY. Our proudest creations are our children. The C U.R.E. was created so that our children can exist within a commUNITY that is a reflection of themselves.

The C.U.R.E. Brand PERSONALITY

Building up people Wholistically (Mind, Body, Soul, Spirit). Healthy people create healthy families and Healthy families create Healthy Communities. A Healthy CommUNITY is only achievable with Healthy individuals as a foundation.

The C.U.R.E. Brand VALUE

A better future, for our children, that is rooted in Love, Safety and Protection starts within the family unit. We are here to strengthen the family and be the tribe, change, and the CURE we need for North Sarasota's Children and Families.

Community Reach

Children's Programs

Weekly Hour long activities offered at North Sarasota Schools that teach how our Anatomy is connected with Nature, sustainable ways of living through Wholistic Living, Art and Melodies centered around Anatomy and Nature.

Offer Programs For:

- Emma E. Booker
- Booker Middle
- Booker High
- Boys and Girls Clubs
- Preschools
- Forest/Outdoor Schools

Wholistic Experiences (Events):

- Drum Circles
- Nature Walks & Grounding
- Sound Healing & Meditation
- Afroverse Marketplace

Drum Circles and community experiences (events) will create Fellowship, commUNITY building, and engagement.



Operation Plan

Within North Sarasota Community

- CPR training required by All Staff
- 50 in-service Hours Required by All Staff

Service Departments:

- 1. Community Resources**
- 2. Health Coaching**
- 3. Artistry Development**

Children's Programs:

- 1 hour time slots for weekly children's wholistic learning
- Between the hours of 9am-2pm
- Available to All Schools in North Sarasota (outdoor/indoor)
- Available to Boys and Girls Clubs Between 3pm-5pm
- Nature Sings (Melodies and Healing chants)
- Nature Exploration and Tours
- Wholistic Health classes (Meditation and Breath work)

Classes:

Every Saturday @ 12 noon FREE Wholistic Health Classes will be available to the Newtown North Sarasota Community.

- Classes targeting Children's Health, Women's Health, Men's Health, Family Health, and CommUNITY Health.
- Implementing Sound Bowl Healing
- Implementing Meditation & Mindfulness
- Implementing Kemetic Yoga
- Sustainability
- Alternative Children's Learning; Melodies centered around Nature/Wholistic Nutrition/Self-Care/Anatomy
- Sound Healing; Vocals, Affirmations, Singing Bowls, Shakers, Drums, etc.

Orange Ave. Park

Obtain a permit over the Orange Ave. Park in Sarasota, FL and utilize the community Garden space to provide information on the Health Benefits of getting proper Sunlight, Grounding to the Earth, and Connecting with your Natural Environment.

- Meditation in the Garden
- Children's Garden Day
- Grow Your Own Food Classes
- Grounding in the Garden
- CSA (CommUNITY Shared Agriculture)
- Nature Exploration
- Wholistic Nutrition Workshops/Classes/Programming

Drum Circles

Every Sunday at 3:33pm we host a CommUNITY Drum Circle at Orange Ave. Park. This will give the opportunity for the entire commUNITY to come together by the beat of the Drum, to raise the vibration and frequency in our hearts and neighborhood. This will help the CommUNITY get back in rhythm with each other at the beginning of each week.

Events (Experiences)

Monthly Events, which are called experiences, will establish a Culture of celebrating life within our CommUNITY. Most experiences will take place outdoors. Also, at the Leonard Reid House. Our experiences will provide a safe haven for Children and Families.

Financial Plan

Service Salaries:

Director of Operations - \$70,000 yearly

*support all the company managers. Attend community events to promote and inform the community of our services. Facilitate weekly staff meetings to insure successful operations.

Administrative Assistant - \$45,000 yearly

*process data from management. Process payroll. Document and file any necessary documents for company operations.

Social media and Event Specialist - \$45,000 yearly

*Manage website, social media accounts, and preparation for all company events.

Cure Recourse Manager - \$65,000 yearly

*Manage the commUNITY resource department. Facilitate classes. Attend commUNITY events. Engage 1 on 1 with families to educate them on our resources of support.

(2) Minister of Wholistic Nutrition - \$65,000 yearly

Facilitate classes, intentional Nature walks, and events centered around Wholistic Health, Nature, meditation, and yoga. Engage with individuals, Families, and other health professionals of our services.

Yearly Total payroll : \$290,000

Monthly Total payroll : \$24,166

Office Space : \$36,000 yearly

Office space : \$3,000 monthly

Cargo Van : \$20,000

Full coverage auto insurance : \$4500 yearly

Golf Cart : \$10,000

Equipment (laptops, pc's, furniture, sound bowls, drums, cookware, juicer, vitamix, generator) : \$10,000

Initial start up cost : \$71,666

Monthly operating expenses : \$27,541

***Partner with North Sarasota Nonprofits and generous donors for fundraising and to maintain the annual budget.**