



AAHP at the Black History Month Program at Strathmore

## AAHP MONTHLY REPORT February 2020



# **African American Health Program**

## **February 2020**

### **I. INTRODUCTION**

In February, the African American Health Program (AAHP) expanded prevention and wellness services throughout Montgomery County. AAHP staff conducted health screenings at the White Oak Recreation Center, the Dennis Avenue Health Center, Progress Place Homeless Services Center, the People's Community Baptist Church, Hampshire Towers Apartments, the Victory House, Charter House Apartments, the Sodexo Corporation, Montgomery College's Germantown campus, Fitzgerald Theater, John F. Kennedy High, and other locations throughout the County.

Efficient teamwork helped to maximize the work performance of all program staff. AAHP nurses, community health workers, and social workers worked in close concert to improve access to prevention services by helping clients navigate social barriers such as uncertain immigration status, language barriers, and a lack of knowledge about the availability of resources that can address their health and well-being. Social determinants continued to be a major factor driving health disparities. In February, AAHP staff participated in an informational session with Maryland State officials on the requirements for becoming Certified Community Health Workers in Maryland. Most of AAHP's community health workers completed applications for certification in February. Receiving State certification is expected to standardize the practice of community health work and improve the quality of prevention services. Staff also participated in a separate training with Maryland State HIV and AIDS program officials on effective, evidence-based strategies for engaging people of African descent with HIV and STI testing and counseling services.

AAHP's chronic disease management classes consistently achieved high attendance levels each week of the month. Class retention rates remained high with continuing participants increasingly inviting friends and family members to join them at classes at both White Oak and Germantown. A detailed description of attendance is presented in the chronic disease section of the February report.

Also, more participants tell us that AAHP's website helped motivate them to join the chronic disease management classes. An increasing number of undergraduate and graduate students from George Washington University, the University of Maryland, and several national universities have expressed strong interest in interning at AAHP. These students are eager to acquire knowledge and skills in the practice of health promotion, prevention, and wellness, and will serve as a reservoir of talent capable of meeting the demand of expanding services.

In February, AAHP's data coordinator organized and analyzed program performance data to help inform and guide program work. An example includes an audit and geanalysis of SMILE client data accumulated over the past two years showing nurse-specific and summary representation of SMILE clients' locations by zip code. The value of this data is that it provides

a clearer picture of where most cases are concentrated as well as additional information about potential case management.

In February, the quantity and variety of health screenings continued to increase. AAHP expanded the use of screenings for body fat analysis and the number of participants enrolled in the dMeetings online diabetes education and training program increased. Also, program staff increased the number of follow-up calls to participants to assess program effectiveness and the level of adherence with health education provided during classes and health screenings.

To continuously increase SMILE monthly enrollments, the SMILE nurses and the nursing consultant began implementing new outreach and marketing services to recruit more women of African ancestry. Similarly, the chronic disease program staff increased the distribution of biometric health monitoring tools and training in the proper use of blood pressure and A1c glucometers to provide participants with the capacity to record, manage and report data recorded between classes and during the month.

AAHP is especially pleased about the high level of progress reported consistently by almost all participants in the chronic disease management classes.

A more detailed description of AAHP's accomplishments and activities during February are described below.

## **II. PROGRAM ACTIVITIES**

### **A. SMILE PROGRAM (Start More Infants Living Equally healthy)**

In February, the SMILE program's caseload included 80 mothers and 56 infants. The cohort of mothers included 24 prenatal cases and 56 postpartum mothers. Three mothers delivered new infants who were enrolled in the program in February. One infant was born underweight and prematurely at 34 weeks. The premature birth occurred during a period of intense family stress that may have induced premature labor.

The nurses, community health workers, and social workers conducted a total of 76 home visits in February, a decrease of 4 visits when compared to the monthly average of visits in 2018. The slight decrease is attributed to fewer workdays in February.

At the end of February, 16 of the 80 mothers were assessed and evidenced high-risk medical issues, 22 mothers evidenced high social risk and 10 mothers were assessed as having evidence of both high medical and social risks. High-risk medical conditions included gestational diabetes, pre-eclampsia, multiple past miscarriages, and advanced maternal age. Seven prenatal cases were enrolled in February and two postpartum moms were evaluated for depression using the Edinburgh Depression Scale. Three mothers recorded elevated scores for depression and were counseled and referred for further evaluation and care. Social risks included evidence of emotional stress, difficulties in communicating in English, unemployment, low educational attainment, unclear immigration status, and low levels of family support.

In February, 66% of all mothers were breastfeeding and the percentage of mothers breastfeeding up to three months was 83%. The overall breastfeeding percentage continued to exceed the national average monthly performance of the program in 2018. Both breastfeeding indicators exceeded national rates. According to the Centers for Disease Control and Prevention (CDC), the percentage of African American women who ever breastfed was 64.3%, and of that number, only 20% breastfed exclusively for six months after delivery.

The ethnic origin of mothers enrolled in the SMILE program in February remained fairly stable at 41% Black American, 56% African immigrant, and 3% Caribbean.

During February, the nurses held weekly meetings to discuss ways to improve access to care, and improve program documentation and patient engagement. AAHP's nursing consultant attended all sessions and provided advice and recommendations on strategies to increase new prenatal admissions while also improving the quality of prevention services for pregnant and postpartum mothers. These meetings included a review of individual cases and a discussion about ways to improve home visits and staffing. These meetings also involved in-depth reviews of difficult cases in consultation with AAHP's social worker, nurse supervisor, and clinical director.

The table and charts below present an overview of the SMILE cumulative data for February 2020 as compared to the performance in the calendar year 2018.

	<b>PROFILES AND SERVICES</b>	<b>*Monthly Average of Reference Calendar Year 2018</b>	<b>February 2020</b>	<b>Comments</b>
1	<b><i>A) Currently Active Moms</i></b>	<b>92</b>	<b>80</b>	
2	Prenatal (still pregnant)	<b>28</b>	<b>24</b>	
3	Postpartum (Moms who have delivered)	<b>64</b>	<b>56</b>	
4	<b><i>B) All infants</i></b>	<b>65</b>	<b>56</b>	
5	Single Births	<b>61</b>	<b>56</b>	
6	Multiples	<b>4</b>	<b>0</b>	
7	<b>Case Load (A+B)</b>	<b>157</b>	<b>136</b>	
	<b>MOM'S ETHNICITY</b>			
8	African American Clients	<b>36</b>	<b>33</b>	
9	African Clients	<b>50</b>	<b>45</b>	
10	Caribbean Clients	<b>6</b>	<b>2</b>	
	<b>REFERRALS</b>			

11	HHS Prenatal Referrals Received	8	5	
12	Referrals from Other Sources	6	3	
13	<b>Total Prenatal Referrals</b>	<b>14</b>	<b>8</b>	
	<b>NEW ENROLLMENTS</b>			
14	Prenatal Moms Newly Enrolled During the Month	8	7	
15	Infants Newly enrolled during the month	6	3	
16	<b>All new enrollments for the month</b>	<b>14</b>	<b>11</b>	
	<b>DELIVERIES during the month</b>			
17	Term Deliveries	6	2	
18	Preterm Deliveries	1	1	Stressed mom delivered at 34 weeks
19	<b>Total Deliveries</b>	<b>7</b>	<b>3</b>	
	<b>BIRTH OUTCOMES</b>			
20	% Healthy Birth Weight (% of Total Deliveries)	95%	67%	
21	Number of Low Birth Weight	0	1	Stressed mom delivered at 34 weeks
22	Number of Very Low Birth Weight	0	0	
23	Infant Deaths (includes Stillbirths)	0	0	
24	Unfavorable Birth Outcomes (Congenital Anomaly, Fetal Demise, Miscarriage)	0	0	
	<b>SERVICES</b>			
25	Total Home Visits	80	76	Includes 7 visits by SW and 1 visit by CHW
26	Telephonic Consultations	17	24	Includes 6 by SW
27	Prenatal Discharges	1	1	The client moved out of County
28	Infant Discharges	8	7	
29	Community Referrals Made	18	24	Includes 6 referrals by SW
30	Classes/Presentations Completed	3	3	
31	Manual Breast Pumps Given	2	0	Most insurance companies provide electric pumps to

				new moms. AAHP offers manual pumps.
	<b>BREASTFEEDING MOMS</b>			
32	Percent Clients Breastfeeding Infants 0-3 months	<b>90%</b>	<b>83%</b>	
33	Overall Breastfeeding Percent	<b>51%</b>	<b>66%</b>	
	<b>INSURANCE</b>			
34	Clients with Private Insurance**	<b>30</b>	<b>20</b>	
35	Clients with Medicaid Insurance**	<b>62</b>	<b>60</b>	

\*Averages are rounded to the next integer

\*\* A client may have multiple insurances

Increase above reference year

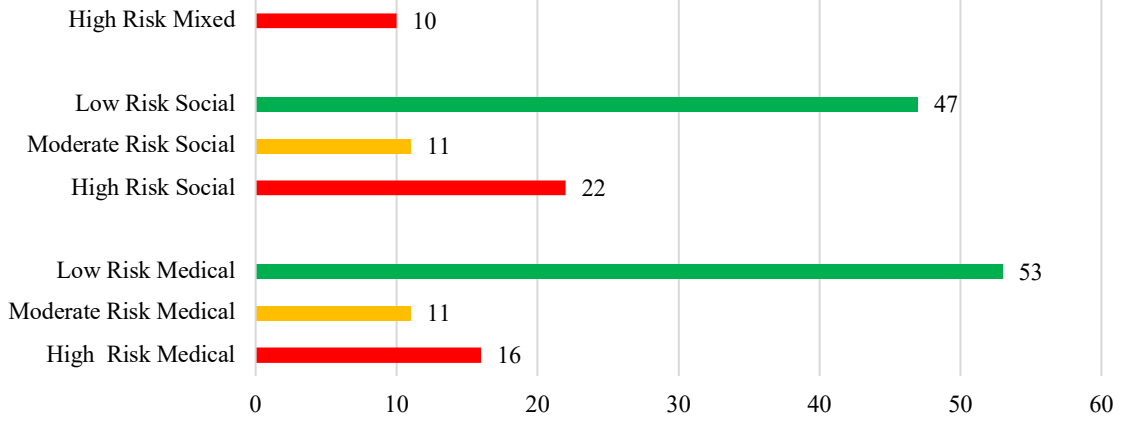
Level with reference year

The decrease from reference year

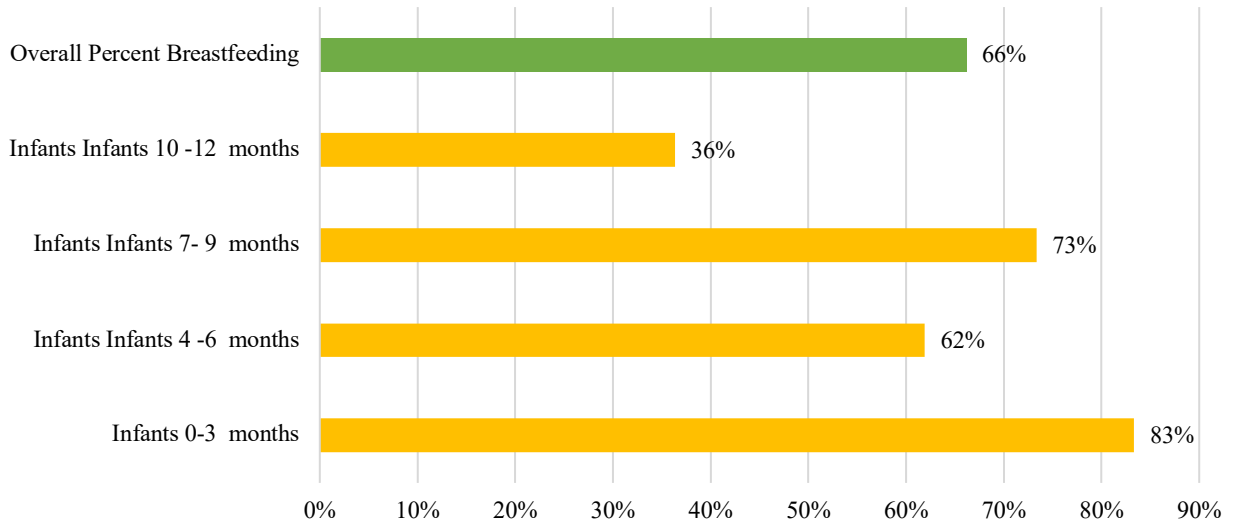
Untoward Outcome

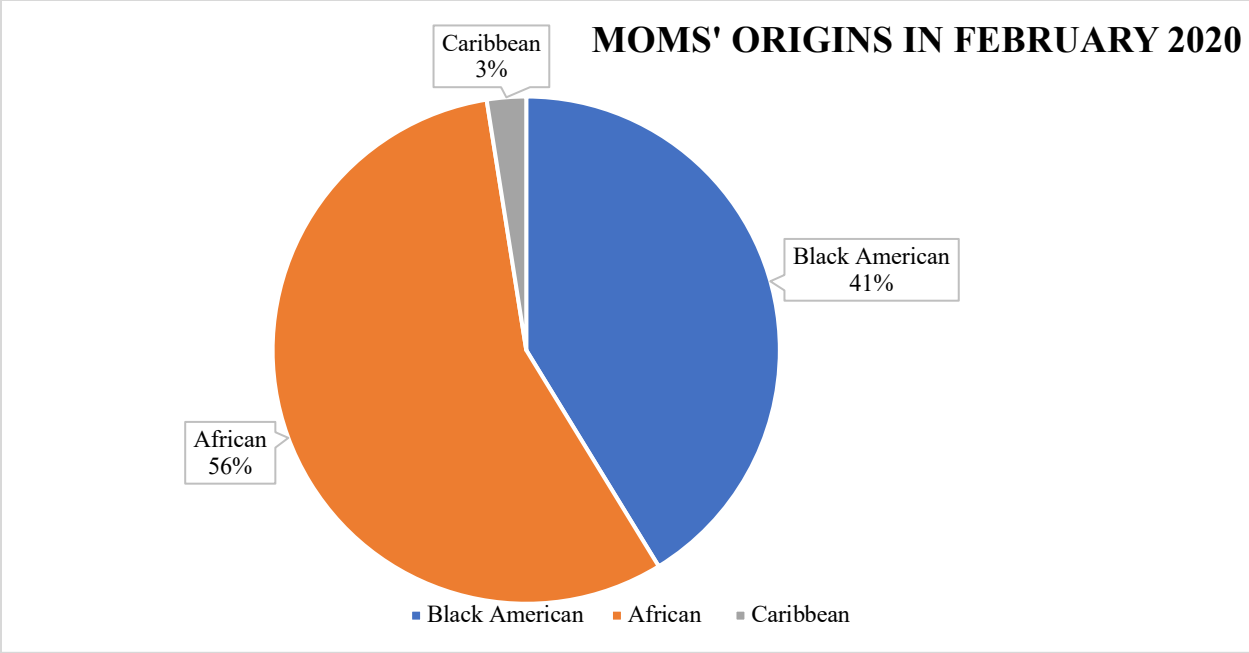
Desired Outcome

### Risk Category February 2020



### Percent Breastfeeding February 2020





**B. The Chronic Disease Management Program (CDMP)**

In February, the CDMP team continued to provide education and information needed to prevent and manage diabetes, heart disease and Alzheimer’s. The program remained focused on documentation and collection of data, outreach to potential and existing participants, follow-up with class participants, class retention, and engagement and collaboration with community partners. Because February was National Heart Health Month, classes focused on heart disease and hypertension. The curriculum included: Introduction to Hypertension and Heart Disease; Causes and risk factors for Hypertension and Heart Disease; Complications of Hypertension; Link between Diabetes and Hypertension; Healthy Eating, Being Active, Taking Medications, Monitoring, Problem Solving, Healthy Coping, and Reducing Risks and Stress management. Special emphasis was placed on showing the relationship between obesity and hypertension and heart disease in the discussion about specific ways to significantly reduce health risks through diet and exercise.

All classes continued to emphasize empowering class participants with education and biometric monitors to track hypertension in the deployment of self-management tools and skills to record performance. Also, participants were taught how to properly use self-monitoring devices and recording logs to determine the extent to which they were able to control and manage their blood pressure. Additionally, AAHP’s partnering pharmacists offered personalized advice and guidance including one-on-one medication therapy management (MTM) sessions, also known as “brown bag” sessions. Non-adherence to medications usually stems from polypharmacy, contraindications, and a lack of follow-up. During these sessions, participants asked questions about their medications and received recommendations that could potentially be used to further consult with their physician and pharmacist during future office visits or telephone consultations.



AAHP's healthy cooking demonstrations provided education about the importance of adopting a healthier lifestyle by adopting a plant-based diet. AAHP's nutritionist conducted discussions and lectures about the benefits of a plant-based diet and food preparation practices for improved nutrition. The last class of the month at White Oak Recreation Center included a potluck food-sharing demonstration sponsored by the CDMP instructor and catered by NuVegan, a Black-owned vegan Soul Food restaurant. The idea was to provide the class with food options closer to the "traditional African American diet," with a menu that included tofu fried chicken, collard greens, and vegan non-dairy potato salad. These meals were prepared without high fat and cholesterol, as plants have little fat and no cholesterol. Class attendance for February at White Oak continued to average 21 participants; this level of participation averages about five times the national average (4-6 participants/week) for chronic disease self-management education classes.

In February, the CDMP's instructor led a new collaboration with the Fatherhood Initiative with the County's Housing Opportunity Commission (HOC). This collaboration provided AAHP with an opportunity to reach a slightly younger male population between the ages of 18-55 who are frequently missing from preventative health services and education. The Fatherhood Initiative is designed to engage fathers who have families in the Montgomery County Public Housing system and enroll them in a month-long fatherhood and workforce development training program. The purpose of the program is to improve their roles as fathers within their families while also providing employment training and financial literacy. The program graduates on average 30-40 men on the first Friday of each month. AAHP's clinical staff provided glucose, HbA1c, cholesterol, and blood pressure screenings as well as counseling and referrals as part of this new collaboration. This is an invaluable service to the men because most are in transition and may not have medical homes where they might otherwise receive preventative health services and check-ups. The screenings and information about the CDMP classes were well-received and over 30 graduates and family members were screened and contacted for follow-up. Significantly, some class participants have subsequently enrolled in the White Oak Recreation CDMP classes. Next month, AAHP will also incorporate HIV/AIDS screenings into the collaboration. In the future, AAHP plans to gain additional support for the program through a collaboration with the National Institutes of Health, University of Maryland Center for Integrative Health, classes at Plum Gar Recreation in March, and Leisure World beginning in April.

In honor of National Heart Health Month, the CDMP team, AAHP's social worker, and the Chronic Disease sub-committee conducted a presentation at the February Executive Coalition Meeting on "The Bermuda Triangle of Cardiovascular Disease," which focused on the intersection of obesity, mental health, and cardiovascular disease. Both obesity and mental health are frequently two major risk factors for cardiovascular disease but are also factors that can be acted upon to reduce health risk. Both presentations outlined the pathology of obesity and related mental health disorders.

The following tables present a more detailed listing of information about classes, screenings, attendance, and training content.

Screening and Outreach Activities			
ACTIVITY	HOURS	SERVICES	OVERVIEW OF MONTH
<p>White Oak Recreation Center</p> <p>February 5<sup>th</sup>, 12<sup>th</sup>, 19<sup>th</sup>, 26<sup>th</sup> 2020</p>	6pm-8pm	Class and Height, Weight, BP, BMI, %BF, Glucose, Cholesterol screenings	<p>This month's class topic was Hypertension and Heart Health. Class content included the origins of the disease state; causes and complications; medications, treatments, and side effects; and diet and exercise to reduce stress and health risk. All participants received screenings and had individualized counseling and review of lab values, outcome measures, goals, and medications. <b>NOTABLY: SIX</b> new people joined the class and there were 36 total participants. All participants maintained or improved their HEDIS measures and adopted positive behavioral changes in exercise and diet. AAHP's nutritionist lectured on a plant-based diet/healthy cooking and conducted the food tasting portion of the class.</p>
<p>Germantown Library</p> <p>February 6<sup>th</sup>, 13<sup>th</sup>, 20<sup>th</sup>, 27<sup>th</sup> 2020</p>	6pm-8pm	Class and Height, Weight, BP, BMI, %BF, Glucose, Cholesterol screenings	<p>This month's class topic was Hypertension and Heart Health. Class content included the origins of the disease state; causes and complications; medications, treatments, and side effects; and diet and exercise to reduce stress and health risk.</p>

			All participants received screenings and had individualized counseling and review of lab values, outcome measures, goals, and medications. <b>NOTABLY:</b> In the month, <b>THREE</b> new participants joined the class and 36 participants maintained or improved their HEDIS measures by adopting positive behavioral changes in exercise and diet. AAHP's nutritionist lectured the class on the benefits of a plant-based diet/healthy cooking and conducted a meal tasting to motivate behavioral change.
White Oak Recreation Bid Whist Club  February 6 <sup>th</sup> , 2020	10am-2pm	Weight, BP, BMI, %BF, Glucose, Cholesterol screenings	5 individuals screened. Reviewed screening forms for elevated BP, Cholesterol, and glucose values. All followed up for additional information and class.
Civic Center – Heart Health Expo  February 8 <sup>th</sup> , 2020	9am-2pm	Weight, BP, BMI, %BF, Glucose, Cholesterol screenings	5 individuals screened. Reviewed screening forms for elevated BP, Cholesterol, and glucose values. All followed up for additional information and class.
Fatherhood Initiative  February 7 <sup>th</sup> , 2020	5:30pm-7:30pm	Height, Weight, BP, BMI, %BF, Glucose, Cholesterol screenings.	20 individuals screened. Reviewed screening forms for elevated BP, Cholesterol, and glucose values. All followed

			up for additional information and class.
Progress Place February 12 <sup>th</sup> , 2020	9am-2pm	Height, Weight, BP, BMI, %BF, Glucose, Cholesterol screenings.	22 individuals screened. Reviewed screening forms for elevated BP, Cholesterol, and glucose values. All followed up for additional information and class.
People's Community Church February 19 <sup>th</sup> , 2020	9am-2pm	Height, Weight, BP, BMI, %BF, Glucose, Cholesterol screenings.	30 individuals screened. Reviewed screening forms for elevated BP, Cholesterol, and glucose values. All followed up for additional information and class.
Hampshire Tower February 22 <sup>nd</sup> , 2020	9am-2pm	Height, Weight, BP, BMI, %BF, Glucose, Cholesterol screenings.	36 individuals screened. Reviewed screening forms for elevated BP, Cholesterol, and glucose values. All followed up for additional information and class.
Sodexo February 26 <sup>th</sup> , 2020	9am-2pm	Height, Weight, BP, BMI, %BF, Glucose, Cholesterol screenings.	11 individuals screened. Reviewed screening forms for elevated BP, Cholesterol, and glucose values. All followed up for additional information and class.

**Screenings Participants and Outcomes him on February 20**

<b>Participants</b>	<b>White Oak</b>	<b>Germantown</b>	<b>White Oak Whist Bid</b>	<b>Civic Center</b>	<b>HOC Fathers</b>	<b>Progress Place</b>	<b>Peoples Community</b>	<b>Hampshire Tower</b>	<b>Sodexo</b>	<b>Total</b>
<i>Male</i>	13	3	2	0	17	12	1	4	3	55
<i>Female</i>	23	7	3	4	3	10	29	43	8	130
<i>Non-disclosed</i>	0	0	0	0	0	0	0	0	0	0
<i>Total</i>	36	10	5	4	20	22	30	47	11	185
<i>% African American</i>	100%	70%	100%	100%	90%	100%	100%	100%	100%	98%
<b>Health Profile</b>										
<i>Average Systolic</i>	149.61 mmHg	130.6 mmHg	119.4 mmHg	123.8 mmHg	133.9 mmHg	133.2 mmHg	138.9 mmHg	142.6 mmHg	142.6 mmHg	
<i>Average Diastolic</i>	87.1 mmHg	72.2 mmHg	76.8 mmHg	77.8 mmHg	83.3 mmHg	85.3 mmHg	76.8 mmHg	78.7 mmHg	78.7 mmHg	
<i>Average HB A1C</i>	6.50%	N/A	6.80%	N/A	N/A	N/A	5.00%	6.40%	6.40%	
<i>Average Glucose</i>	140.6 mg/dL	95.3 mg/dL	226.6 mg/dL	121 mg/dL	130.2 mg/dL	157.4 mg/dL	117.3 mg/dL	120.6 mg/dL	117.3 mg/dL	
<i>Average BMI</i>	29.3	29.6	25.6	34.9	30.3	N/A	29.5	N/A	29.5	
<i>Average %Body Fat</i>	27.7%	32%	42%	N/A	N/A	N/A	N/A	N/A	N/A	
<i>Average Cholesterol</i>	222.7 mg/dL	148 mg/dL	N/A	N/A	217.6 mg/dL	N/A	N/A	184.6 mg/dL	N/A	
<b>Diabetes</b>										
<i>Pre-diabetes cases</i>	3	1	1	0	0	2	4	0	4	15
<i>Diabetes cases</i>	12	5	2	0	1	7	2	2	2	33
<b>Hypertension</b>										
<i>Pre-hypertension cases</i>	2	1	1	2	3	4	4	5	4	26
<i>Hypertension cases</i>	15	4	2	2	13	12	33	23	0	104
<i>Uncontrolled hypertension</i>	0	0	0	0		0	2	0	2	4

<b>Cholesterol</b>										
<i>Desirable (&lt;200)</i>	4	6	0	0	4	0	0	0	0	14
<i>Borderline (200-239)</i>	4	0	0	0	8	0	0	0	1	13
<i>High Risk (&gt;240)</i>	6	0	0	0	4	0	0	0	0	10
<b>Elevated Values</b>	<b>46</b>	<b>17</b>	<b>6</b>	<b>4</b>	<b>33</b>	<b>25</b>	<b>45</b>	<b>45</b>	<b>45</b>	<b>219</b>

### Class Attendance Metrics February '20

	White Oak Recreation Center				Germantown			
Date(s)	2/5	2/12	2/19	2/26	2/6	2/13	2/20	2/26
<b>Class Size</b>	23	19	23	20	7	7	7	8
<b>TOTAL attendance</b>	36				10			
<b>Class Avg.</b>	21				7.3			
<b>Natl. Avg.</b>	4-6 (Among classes that meet weekly)				4-6 (Among classes that meet weekly)			

### Self-Management Outreach Efforts

Physician Referrals Received:	# Attended class:
2 (Welsh-1; Djamsson-0; Kelly-1)	1
#Referred to Primary Care Physician	# Attended Primary Care Visit
6	4
# of Self-Management Devices distributed (BP or Glucose)	# Taught to use Self-Management devices (BP or Glucose, Glucose SM data cord)
34 (2 Glucose, 22 Blood Pressure, 10 packs of strips)	24
# of People with Elevated values	# of People followed up with Elevated values
236	236
# of Educational Materials distributed	# of Home Visits

700+	1
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**February 2020 HEALTH CHAMPION**

February’s Health Champion was Ms. S.S. Her journeys with the CDMP classes began in December 2019, when her A1c was 7.9%. Mrs. S.S. was concerned about her increasing glucose values that had continued to increase since she was diagnosed three years earlier. Mrs. S.S. stated that her A1c laboratory value was at 9.1% three years ago and she subsequently brought her values down to 7.0%. However, her lab values started to increase during the past year, and she felt frustrated because she continued to take her medications as prescribed with only small decreases in her glucose values. In December 2019, Ms. S.S. adapted a Mediterranean diet and started exercising at least 100 minutes per week. She also participated in a medication therapy review with a pharmacist and received a recommendation for adjustment of her diabetes medications. After follow-up this month and successful acceptance of the medication recommendation, Mrs. S.S.’s A1c laboratory value dropped to 5.7%. Ms. S.S. now only takes one diabetes medication whereas previously she had to take two medications. AAHP staff is very proud to be part of this significant and positive health outcome and is excited to recognize and celebrate Ms. S.S. for her perseverance, determination, and commitment to improving her health and well-being by better controlling both her hypertension and diabetes.

**C. Mental Health Services**

In February, mental health screenings continued to play a significant role in increasing awareness about mental health and the importance of mental health to overall health. In February, AAHP’s online mental health screening assessments were completed by 30 participants. The website link was accessed 59 times, with a 65% completion rate. The majority of screenings were completed using computer tablets provided by AAHP at various community events (32 screenings completed via tablet; 5 screenings via desktop; 1 screening via phone). Twenty-six percent of individuals screened were between 18-24 years old, 21% were between 25-34 years old, and 15% were between 75-84 years old. This is significant because of the increasing rates of mental health concerns among young adults and seniors. According to the National Institute of Mental Health (NIMH) and Substance Abuse & Mental Health Services (SAMHSA), young adults have the highest reported rates of Serious Mental Illness in the nation.

Additionally, 63% of screeners identified as Black/African American when prompted to do so. A further breakdown of screenings reveals that there were:

- 19 Wellbeing Screenings
- 8 Wide Range Screenings
- 3 Generalized Anxiety Screenings
- 2 HANDS Depression Screening
- 2 Alcohol Misuse Screenings
- 1 PTSD Screening

- 1 Eating Disorder Screening
- 1 Bipolar Screening
- 1 Opioid Misuse Screening

During February, AAHP's social worker increased her participation in conducting health screenings in collaboration with the community health workers. Examples included the successful re-launch of the partnership with Montgomery County Colleges at Germantown and Rockville campuses where efforts were combined to provide free mental health and HIV screenings on a rotating schedule. AAHP's social worker also reestablished a relationship on the Montgomery College Takoma Park campus to provide mental health screenings in collaboration with the Mobile Market food pantry on campus. Current evidence shows that many of the students who use the Mobile Market team also experience exceptional stressors and as such could benefit from mental health screenings and ongoing emotional support.

In February the AAHP social worker conducted free health screenings at the People's Community Church on February 19. Screenings included blood pressure, blood glucose, and mental wellness. The majority of people screened elected to take the general screenings or Life Satisfaction Screenings rather than the Depression or Anxiety screenings. The social worker, in response to some of the needs identified through screenings, met with clients individually, provided consultation, developed stress-reduction goals, and provided information on counseling services at the client's request.

As a collaborative member of the SMILE team, the social worker received three (3) new community referred clients and continued to follow up with one (1) previous community-based client. One client in particular frequents AAHP's Generation One screening event. She was referred to the social worker in February after receiving an abnormally elevated blood pressure reading during the screening event and expressed concern about her mental well-being and stress levels. AAHP's social worker met with the client individually at the White Oak Library and provided counseling about ways to manage stress and where to find ongoing support.

As a member of the SMILE team, the AAHP social worker received five (5) new referrals from SMILE nurses in February. The social worker continued to work with clients on a follow-up basis, scheduling and completing seven (7) home visits during the month. All initial home visits consisted of the completion of the Health in Social Needs screening tool developed by the Center for Medicaid and Medicare (CMS). Home visits were conducted to develop service goals and to revise previous plans as required and necessitated with matters related to insurance coverage, financial difficulties, interpersonal stress, and other matters. In one instance, AAHP's social worker was able to provide a detailed letter advocating on behalf of a client for improved living conditions. This was a success and the client has reported positive results.

In the absence of a home visit, five (5) clients received telephonic sessions where obstacles were addressed and needed resources were discussed. Telephonic sessions are a successful and often preferred method of communication for clients (especially those who are employed and find it difficult to be physically present regularly). Telephonic sessions are typically 30-



45 minutes long, depending on needs. The social worker continues to work collaboratively with clients and their care providers including but not limited to therapists, caseworkers, and OBGYNs. The social worker also continues to work collaboratively with the team of SMILE nurses to identify the best care coordination techniques.

#### **D. Healthy Aging**

In February, AAHP's aging community liaison continued to strengthen AAHP's partnerships and collaborations with other County-based organizations dedicated to serving residents of African ancestry. Significant collaborations included WISH (Wellness and Independence for Seniors at Home), the Commission on Aging, United Healthcare, and the Montgomery County Fire & Rescue Service (MCFRS).

The File of Life completion, a health and wellness assessment and awareness event, was held at two WISH senior apartment buildings in Silver Spring, Victory Forest, and the Charter House. Moving forward, some of these events will include support from United Healthcare, which will sponsor games like Medicare Bingo and will offer prizes to encourage participation at these events. In recognition of the growing partnership between AAHP and WISH, the Aging Community Liaison was presented with a certificate of appreciation at the WISH Appreciation Breakfast in February.

The aging community liaison assisted the MCFRS in preparing a nomination for the National Association of Counties (NACO) 2020 Achievement Award in recognition of the AAHP-MCFRS senior home inspection program last September. The aging community liaison continued to assist with and participate in the planning for the Montgomery County Commission on Aging Public Policy Forum "Racial Equity in an Age-Friendly Community" to be held at the Bohrer Activity Center on March 18.

The aging community liaison also facilitated the "Vocabulary of Heart Disease" heart health presentation by the CDMP's instructor for the Generation One ministry at the People's Community Baptist Church. The aging community liaison also connected the coordinator for a study focused on exercise and dementia with other AAHP aging community partners and team members to recruit African American seniors to participate in the study.

#### **E. HIV/STI/AIDS Education**

In February, AAHP continued to conduct an aggressive program of community outreach, education, awareness, and testing to educate and inform more Montgomery County residents of African ancestry about ways to prevent the spread of HIV and STIs. Although the incidence and prevalence of HIV infection have steadily declined over the last five years, the County is continuing to record high levels of sexually transmitted diseases, particularly among people of African descent. Besides, the prevalence of HIV infection among immigrants of African descent and heterosexual women have continued to cause alarm. In response to this problem, both the State of Maryland and Montgomery County's Department of Health have set forth a mission of eliminating HIV infection within the next decade.

As part of AAHP’s effort to stem the rise of HIV and STI, the staff has increased the number of locations within the County where HIV testing is conducted. During February, HIV tests were conducted at the Progress Place Homeless Center, Montgomery College, Hampshire Towers, and the Health Department’s Infectious Disease Clinic at Dennis Avenue. To refresh and sustain the testing capabilities of the overall staff, starting in February, all certified staff began rotating testing responsibilities at the clinic every week on the Dennis Avenue site. Currently, five staff members are certified by the state to conduct an HIV test.

AAHP’s HIV coordinator and social worker established a new program to educate young people ages 13 to 24 about how to prevent sexually transmittable diseases. The initial session was conducted at Georgian Colonies, a HOC managed housing unit on Bell Preview Rd. in Silver Spring. The training session was conducted in concert with the HOC resident counselor assigned to that particular housing site. The training focused on improving access to knowledge on sexual health and what actions individuals can take to avoid sexually transmitted diseases including HIV/AIDS as well as chlamydia, gonorrhea, and syphilis. In addition to providing accurate information about ways to avoid transmission, the training also focused on attitudinal and behavioral changes required to make intelligent choices including the use of social skills and encounters involving sex. Training content included discussions about the importance of maintaining high self-esteem and the development of refusal skills and ways to mitigate bullying, peer pressure and other factors that lead to poor decisions about sex.

During February, the AAHP staff undertook a more concerted effort at identifying particular neighborhoods within the zip codes that may offer the highest potential for reducing the spread of sexually transmitted diseases. Particular sites identified for testing included apartment complexes Burtonsville off Castle Blvd., Hampshire Towers, and the Progress Place Homeless Center in downtown Silver Spring.

The table following presents data on the number of HIV tests conducted in February along with data on ethnicity and gender.

### February 2020 HIV TESTING REPORT

<b>African American</b>			
<b>Age Group</b>	<b>Male</b>	<b>Female</b>	
<b>1947 -1969</b>	3	2	
<b>1970 -1989</b>	9	8	
<b>1990+</b>	10	4	
Total	22	14	36
<b>All Others</b>			
	<b>Male</b>	<b>Female</b>	
<b>1947 -1969</b>	1	1	

<b>1970 -1989</b>	3	3	
<b>1990+</b>	4	2	
Total	8	6	14
<b>GRAND TOTAL</b>			<b>50</b>

### **III.Planning and Administrative Activities**

#### **A. Community Outreach Education and Administration**

In February of 2020, the AAHP staff continued to provide administrative and logistical support for meetings to promote collaboration and communication between the Department of Health and Human Services (DHHS) program manager, the AAHP Executive Committee, and members of the AAHP Executive Coalition. Specifically, the staff assumed lead responsibility for meeting logistics, including communications with the Committee co-chairs and members of the Executive Committee. Tasks included setting up a conference line for remote meeting participation, duplicating and distributing the agenda, and arranging light refreshments for participants. The Executive Committee meeting was held on February 6, 2020. The February monthly Executive Coalition meeting was on Thursday, February 13, 2020, at the Silver Spring Civic Building. Additionally, on February 16, 2020, the AAHP Leadership Team of McFarland and Associates, Inc. met with the DHHS program manager.

#### **B. Information System use and Implementation**

Over the past year, a great deal of time and work has been devoted to designing and implementing the AAHP Management Information System. The development and implementation of the system has proven to be both a challenge and an opportunity. The AAHP staff has played an intricate role in both the design of the data entry screens and identification of the reports that will be generated by the system when fully functional. All AAHP staff and AAHP consultants have invested ideas and recommendations to customize the system to meet the specific needs of the program with an understanding that the prevention program combines some of the best features of health promotion and an understanding of social determinants. After months of hard work, testing and acceptance, the system has now passed all of the tests.

Another major impediment was configuring the system to communicate with the DHHS information systems servers. Accomplishing this task required a great deal of coordination and communication with departmental officials and the consultant and programmer for Cygnus Consulting. Unfortunately, this consultant passed away suddenly on February 4 and left a big void in the system's implementation since he was its principal architect. Despite this serious setback, AAHP is pleased to report that the system has now passed all of the tests and is finally ready for launch in March. Other data and information-related projects conducted in February include organizing and storing various video testimonials by AAHP staff that can be used to conduct community education and outreach efforts aimed at increasing AAHP's profile.

Also, AAHP's data coordinator has compiled a directory of Black churches in Montgomery County and has established a grouping of Black churches that are located in contiguous neighborhoods and whose memberships may be open to creating a larger and combined health ministry. Also, in February the AAHP data coordinator

created a SMILE map that identifies where our SMILE clients are in Montgomery County. The map depicts three major hotspots where our clients reside (Germantown, Rockville, and Silver Spring). This map can be used to visualize what areas to focus on advertising towards in the future.

## APPENDIX A FEBRUARY 2020 MEDIA REPORT

### AAHP Health Notes

Date Distributed: Thu, Feb 6, 2020

General List Recipients: 1639

Successful deliveries: 1300

Unsubscribed because of this message: 0

Open rate: 22.5%

Click rate: 9.2%

AAHP's February Health Notes was packed with useful information and tips geared towards promoting the health of African Americans in Montgomery County as we observe American Heart Month, Black History Month, and other observances. Titled "#OurHearts Fight Heart Disease," February's Health notes highlighted AAHP's collaboration with the National Heart, Lung, and Blood Institute through participation in their #OurHearts campaign. The feature article explained how healthy relationships promote heart health and advertised AAHP's Kickstart Your Health classes, which focused on heart health in February. An ad for AAHP's upcoming flagship event, AAHP Community Day followed, complete with an exciting video from AAHP Community Day 2018. The next article, "Black History Month and the Future of Black Montgomery County" looked back on the history of African Americans in Montgomery County and encouraged readers to draw inspiration from the past to achieve our best health in the future. In observance of Children's Dental Health Month, the next article discussed dental care for babies and young children and included a video about community fluoridation from the Mighty Mouth. To help seniors stay healthy and safe during the coldest time of the year, "Cold Weather Safety Tips for Seniors" offered useful ideas and resources on issues such as preventing hypothermia, being smart about space heaters, and how to be smart when walking outside. The Health Hint advised readers to drink water to assist in weight loss. A cool animated video from TED-Ed on how blood pressure works was February's Featured Video. The Featured Recipe was Vegetarian Lentil and Mushroom Meatballs.

AAHP's February Health Notes was opened by 296 of the 1,639 delivered, reflecting an open rate of 22.5%, which is significantly better than January's open rate of 18%, which is 1% lower than AAHP's average and 5% higher than the industry average. The click-through rate of 10% is higher than last month's rate of 8%, and higher than AAHP's average of 7% and the industry average of 7%. The animated video received the most clicks. Of the 1,639 delivered, 1,300 were successfully delivered, 1,004 were not opened, and 339 bounced, reflecting a bounce rate of 21%. In the coming months, efforts will be made to examine the subscriber list to reduce the bounce rate. Not one subscriber unsubscribed. Overall, however, February's Health Notes performed remarkably well, which demonstrates that readers responded favorably to recent updates and enhancements in content.

### AAHP website

Limited data is available for the AAHP website. In general, more than 6,000 visitors accessed AAHP's new website recently, and 3,232 accessed the website in the second half of February. Also, in the second half of February, 59% of visitors accessed AAHP's website on their desktop computers, compared to 42% on handheld devices. Most of the website traffic came from Gaithersburg. More detailed analytics for AAHP's website are forthcoming.

### AAHP Social media

Facebook:

614 likes/followers, 9 new likes  
25 posts, +9 from previous month  
15 shares, +9 from previous month  
0 comments, -1 from previous month  
128 reactions, +118 from previous month

Top post: Are you wearing red tomorrow in recognition of American Heart Month?

Twitter:

23 tweets, +5 from previous month  
0 new followers, same as previous month  
6,257 impressions, 2% increase from previous month  
20 profile visits, +14 from previous month  
10 likes, -4 from previous month  
12 retweets, +3 from previous month

Top tweet: Healthy habits like managing stress, getting enough quality sleep, and quitting smoking help keep #OurHearts healthy. Social support makes healthy habits easier. This #HeartMonth join forces and support your #family and #friends to be heart healthy together. <https://twitter.com/aahpmoco/status/1230598285561389087/photo/1>

Instagram (@aahpmoco):

22 posts, +10 from previous month  
111 likes/followers, +2 from previous month  
22 post likes, +99 from previous month  
2 comments, +1 from previous month

Top post: #ChildrenandDentalHealthMonth Tooth decay can occur as soon as teeth appear in a baby's mouth.

AAHP's Kickstart Your Health Instagram is in its early stages with 15 posts and 3 new followers. A branding and content strategy and schedule is currently in development.

### Metrics Summary

AAHP's social media accounts continued to perform well in February. A great deal of February's social media content was derived and repurposed from the National Heart, Lung, and Blood Institute's #OurHearts campaign. Social media remains the primary method of online engagement between AAHP and its audience. The most significant improvements are as follows:

- Facebook engagement has increased significantly, driven by reactions to more posts.
- AAHP was retweeted 12 times, which is higher than in previous months. This metric shows AAHP is building authority and increasing its profile.
- On Instagram, the total engagement increased by 22.22% compared to the previous month. This increase is a consequence of more posting, and shows that the content marketing is accurate and relevant for the audience.

**APPENDIX B  
FEBRUARY 2020 HEALTH NOTES**



*AAHP HEALTH NOTES*

The newsletter of the African American Health Program of Montgomery County, MD

FEBRUARY 2020

[www.aahpmontgomerycounty.org](http://www.aahpmontgomerycounty.org)



#OurHearts Fight Heart Disease

February is American Heart Month! Did you know that people who have close relationships at home, work, or in their community tend to be healthier and live longer? One reason, according to the National Heart, Lung, and Blood Institute (NHLBI), is that we're more successful at meeting our health goals when we join forces with others. NHLBI launched the #OurHearts movement to inspire us to protect and strengthen our hearts with the support of others.

**Heart disease** is the leading cause of death for both men and women in the United States. Health problems that increase the risk of heart disease are common in African American communities, including being overweight and having high blood pressure, high blood cholesterol, and diabetes. Having multiple risk factors increases your risk for heart disease. You can reduce your risk by maintaining a healthy lifestyle and healthy relationships. Feeling connected with others and having positive, close relationships is extremely beneficial to the health of both our metaphorical and anatomical hearts.



AAHP encourages everyone to join the #OurHearts movement by seeking partnership and support from loved ones in adopting these heart-healthy lifestyle tips, together:

- Move more - Ask a colleague or loved one to walk or workout with you on a regular basis. Join an [exercise class at your neighborhood recreation center](#) and bring a neighbor along. Carpool or walk there together to make it a regular date. Grab your kids, put on music, and do jumping jacks, skip rope, or dance. Make your social time active and encourage everyone—family and friends alike—to think of fun activities that get you off the couch or out of the chair and moving.
- Aim for a healthy weight - Find someone in your friend group, at work, or in your family who also wants to reach or maintain a healthy weight. Check in with them regularly to stay motivated. Do healthy activities together, like walking or playing on a neighborhood sports team. Share low-calorie, low-sodium meals or recipes. Check out [NHLBI's Aim for a Healthy Weight](#) web page.
- Eat heart healthy - We tend to eat like our friends and family, so ask others close to you to join in your effort to eat healthier. Together, try NHLBI's free [Dietary Approaches to Stop Hypertension \(DASH\)](#) eating plan. Research shows that, compared to a typical American diet, it lowers blood pressure and improves blood cholesterol levels. Find delicious recipes at [NHLBI's Heart Healthy Eating](#) web page.
- Quit smoking - To help you quit, ask others for support or join a support group. Research shows that people are much more likely to quit if their spouse, friend, or sibling does. Social support online can also help you quit. All states have quit lines with trained counselors—call 1-800-QUIT-NOW (1-800-784-8669). You'll find many free resources to help you quit, such as apps, a motivational text service, and a chat line at [BeTobaccoFree.hhs.gov](#) and [Smokefree.gov](#).
- Manage stress - Reducing stress helps your heart health. Join with a friend or family member to do a relaxing activity every day, like walking, yoga or meditation, or participate in a stress management program together. Physical activity also helps reduce stress. Talk to a qualified mental health provider or someone else you trust.
- Improve sleep - Sleeping seven to eight hours a night helps to improve heart health. De-stressing will help you sleep, as does getting a 30-minute daily dose of sunlight. Take a walk instead of a late afternoon nap! Family members and friends: remind each other to turn off the screen and stick to a regular bedtime. Instead of watching TV before bed, relax by listening to music, reading, or taking a bath.
- Track your heart health stats, together - Keeping a log of your blood pressure, weight goals, physical activity, and if you have diabetes, your blood sugars, will help you stay on a heart healthy track. Ask your friends or family to join you in the effort. Check out NHLBI's [Healthy Blood Pressure for Healthy Hearts: Tracking Your Numbers worksheet](#).

Visit [#OurHearts](#) for inspiration on what others around the country are doing together for their heart health. Then join the #OurHearts movement and let NHLBI know what you're doing with friends, family, or others to have a healthy heart. Tag #OurHearts to share how you're being heart healthy together.

To learn more about preventing and managing heart disease, attend AAHP's Kickstart Your Health class on the following days and locations:

- ☐ WEDNESDAYS at WHITE OAK RECREATION CENTER, RSVP: [kickstartyourhealthwhiteoak.eventbrite.com](#)
- ☐ THURSDAYS at GERMANTOWN LIBRARY, RSVP: [kickstartyourhealthgermantown.eventbrite.com](#)

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**SAVE THE DATE**  
**AAHP COMMUNITY DAY 2020**  
HEALTH | WELLNESS | PREVENTION  
**SATURDAY, APRIL 18, 2020, 9AM - 2PM**  
DETAILS TO FOLLOW



Community Day 2020 is happening on Saturday, April 18, 2020, location TBA. For a snapshot of what you can expect, watch this video:







**Black History Month and the Future of Black Montgomery County**

African Americans have a long and proud history in Montgomery County. Among the first notable Black residents was Yarrow Mamout, a Muslim from Africa enslaved in Montgomery County until he was freed at the age of 60. He then bought property in Georgetown and became the first slave from Africa to ever own property in the US. Josiah Henson, enslaved in Montgomery County until he escaped to Canada in 1830, wrote a book titled "The Life of Josiah Henson, Formerly a Slave," which is said to have inspired Uncle Tom's character in Harriet Beecher Stowe's Uncle Tom's Cabin. Since slavery, African Americans in and from Montgomery County have made a tremendous impact on the world.

Today, at the dawn of a new decade, Black Montgomery County, now 190,000 residents strong, is among the most prosperous Black populations in the country. In spite of this, and the fact that Black County residents have a lower poverty rate than White residents, Black residents suffer more and die from chronic diseases and adverse health conditions at a much higher rate than White residents. During Black History Month, as we reflect on the past and take stock of the present, AAHP invites you to join us in building a future where Black County residents are as healthy as the rest of the population. Let's continue the greatness of Black Montgomery County by achieving parity in health!

#### **How can you help African Americans in Montgomery County have a healthier future?**

Participate! Partner with us for help achieving your health goals. Attend our [classes and events](#). Volunteer! [Join the Executive Coalition](#), which meets on the 2<sup>nd</sup> Thursday of the month at the Silver Spring Civic Building. You can also [volunteer](#) to assist at events and health screenings. Share the knowledge! Follow us on social media ([Facebook](#), [Twitter](#), and [Instagram](#)), and share our posts.

#### **Sources:**

[www.montgomeryhistory.org](http://www.montgomeryhistory.org)  
[www.bethesda magazine.com](http://www.bethesda magazine.com)  
[www.datausa.io](http://www.datausa.io)

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February is National Children's Dental Health Month, a time to focus on and promote the benefits of good oral health for children. Cavities (tooth decay) are among the most common chronic health conditions in children, affecting learning, socializing, speaking, sleeping, and more. Starting from infancy, a standard daily oral care routine, the consumption of fluoridated water and products, and regular dental care appointments will all go a long way towards preventing cavities and gum disease in a person's lifetime.

The care of a baby's teeth should begin soon after birth. Breast milk is best for the health of tiny teeth and gums. Parents and caregivers should wipe the gums of an infant with a clean cloth in the morning after the first feeding and again at night to remove any lingering cavity-causing bacteria and sugars. When the teeth appear, they should be brushed twice daily with a soft bristled toothbrush and plain water. By the first birthday, regular visits to a dentist should start. When all the teeth are fully present, parents and caregivers should teach their young children proper brushing techniques.

A healthy diet is the other part of the oral health equation. Children (and adults) should consume plenty of fruits, vegetables, and water, and a minimum of sugary snacks and drinks. Fluoridated tap water is especially beneficial; seventy years of research has shown that community water fluoridation prevents tooth decay by 25% in both children and adults.

This National Children's Dental Health Month, the American Dental Association celebrates the 75<sup>th</sup> anniversary of community water fluoridation with the slogan, "Fluoride in water prevents cavities! Get it from the tap!" Learn more from this video from the Mighty Mouth:



**Sources:**

[www.cdc.gov](http://www.cdc.gov)

[www.mouthhealthy.org](http://www.mouthhealthy.org)

<https://www.ada.org/en/public-programs/national-childrens-dental-health-month>

<https://www.ada.org/en/publications/ada-news/2019-archive/october/national-childrens-dental-health-month-to-celebrate-water-fluoridation-in-2020>



The weather affects our mood, comfort level, health, and safety, and no population is more impacted by the weather than seniors. Nevertheless, there's no need for seniors to hibernate during the winter like bears. With a little planning and a healthy dose of common sense, seniors can enjoy all that winter has to offer just like younger folks.

To plan: [Talk with your doctor](#) about your health problems and how to prevent hypothermia. Make sure your carbon monoxide and smoke detectors function properly and that the batteries have been changed within the year. Make sure you have easy access to flashlights and a battery-powered radio in case the power goes out.

Common sense: Stay warm indoors by keeping your thermostat at 65 degrees F or warmer. Stay warm outdoors by layering up. When walking outside, avoid icy patches, which are common culprits of slips and falls that can cause major injuries.

Another word of caution: Be smart about space heaters. If you use them, be sure to check out the following: [Reducing Fire Hazards for Portable Electric Heaters](#) and [Seven Highly Effective Portable Heater Safety Habits](#).

**Sources:**

[National Institute on Aging](#)  
[www.health.usnews.com](http://www.health.usnews.com)  
[www.healthinaging.org](http://www.healthinaging.org)

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## HEALTH HINT

Drink lots of water for weight loss. Drinking plenty of water shortly before a meal can help you feel fuller before you eat so that you eat less. The more water you drink, the less your body will retain as water weight. Some experts believe that ice-cold water helps you lose more weight than room temperature water because your body burns more calories warming up cold water. So, make sure plain ol' water is in your weight loss toolbox.

Sources:

[www.lifehack.org](http://www.lifehack.org)

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## FEATURED VIDEO

This cool animated video from TED-Ed explains the bodily processes that make up blood pressure:





**Featured Recipe:**  
**Vegetarian Lentil and Mushroom Meatballs**



**Ingredients**

- 1 cup dried brown lentils, picked over and rinsed
- 1 bay leaf
- 2 cups vegetable broth (or water)
- 8 ounces cremini mushrooms (or white mushrooms), sliced
- ½ cup old-fashioned oats
- ½ cup flat-leaf parsley leaves
- 1 teaspoon dried oregano
- ½ teaspoon red pepper flakes
- ½ teaspoon dried thyme
- ½ teaspoon dried tarragon
- 2 tablespoons olive oil
- 1 medium white onion, chopped
- 3 to 4 garlic cloves, minced
- ¼ cup red wine
- 1 tablespoon tamar soy sauce (optional)
- 2 eggs
- sea salt and pepper to taste

**Instructions**

1. Preheat oven to 400 degrees Fahrenheit and line a baking sheet with parchment paper. Combine lentils, bay leaf, and vegetable broth/water in a medium saucepan. Bring to a boil, then reduce heat to low and simmer for 10 minutes. (Don't worry, you want the lentils to be a little undercooked.) Remove from heat, drain and let cool for a few minutes. Discard the bay leaf.
2. In a food processor, combine the mushrooms, oats, lentils, parsley and spices (oregano, red pepper flakes, thyme and tarragon). Pulse/blend until the mixture is pretty well pulverized but not mushy (see photos).
3. In a large skillet over medium heat, warm the olive oil, then add the chopped onion and a pinch of salt. Cook, stirring often, until onions are translucent and turning golden at the edges, about 5 minutes. Add the garlic and cook, stirring, for about 30 seconds. Stir in lentil-mushroom mixture and cook until browned, about 5 minutes, stirring constantly.
4. Add red wine and soy sauce to skillet. Continue to cook, stirring constantly, until liquid has been absorbed. Remove from heat and, if you're using a pan that retains heat like cast iron, transfer the mixture to a heat-safe bowl. Season with salt and pepper to taste. Allow the mixture to cool until it is comfortable to handle.
5. In a small bowl, whisk together two eggs, then thoroughly mix the eggs into the lentil and mushroom mixture. Use your hands to scoop up one small handful of the mixture at a time, shaping it into a golf-ball sized ball (about 1 ½-inch diameter). Place each "meatball" onto the baking sheet, leaving an inch of space around each one (you should end up with 15 or more meatballs). Bake for 35 minutes, or until golden brown. Tastes better hours later.

Source: [Cookie and Kate](#)

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Rockville, MD 20852

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African American  
Health Program



# KICKSTART YOUR HEALTH

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**FREE health screenings for blood glucose, blood pressure, A1c, cholesterol, BMI, weight!**

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**WEDNESDAYS  
6PM**

WHITE OAK  
RECREATION CENTER  
1700 April Lane  
Silver Spring, MD

**THURSDAYS  
6PM**

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A class to help you **TAKE CHARGE OF YOUR HEALTH** and **MANAGE** and **PREVENT** chronic diseases like **DIABETES, CANCER, and HYPERTENSION.**

**KNOW YOUR NUMBERS, EAT BETTER, AND EXERCISE!**





# DMeetings

FREE ONLINE DIABETES EDUCATION

- 10 video sessions
- Conference calls with registered dietitian
- Individual appointments with doctor, dietitian or AAHP health professional
- Weight, bp and A1C assessments

Log in at [www.aahpmontgomerycounty.org/dmeetings](http://www.aahpmontgomerycounty.org/dmeetings)

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African American Health Program  
(240) 777-1833 | [www.aahpmontgomerycounty.org](http://www.aahpmontgomerycounty.org)



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