

AAHP staff disseminating information at AfroLatino Caribbean Day at the Sandy Spring Slave Museum on Saturday, August 20

AAHP MONTHLY REPORT August 2022







I. INTRODUCTION

In August, the African American Health Program (AAHP) organized and conducted community outreach and health screening events throughout Montgomery County. These events involved taking health screening services to sites throughout the County where residents of African descent live, gather and worship. These events also served as opportunities to build community trust and engagement surrounding health literacy; assess personal health risks; collect actionable biometric data on blood pressure, cholesterol, glucose, weight, and mental health status; and assess HIV/AIDS infection status. Assessments included physical and mental health screenings conducted at The People's Community Baptist Church, Kings and Priests International Ministries, White Oak Community Recreational Center, Leisure World Senior Living Community, Hampshire Towers Apartments, the Afro-Latino Caribbean Day at the Slave Museum, the East County Food Exposition at White Oak, and health screenings conducted at AAHP's Rockville office.

In addition, almost every day in August, AAHP staff conducted nutrition, exercise, and chronic disease prevention and management classes while assessing health risks and motivating residents to adopt healthier lifestyles to avoid preventable diseases, illnesses, hospitalizations, and medical emergencies.

Also, AAHP staff conducted group walking events at the Burnt Mills East Recreational Park and Fleming Park on the Bethesda Trolley Trail. These walks intended to encourage participation and group involvement and underscored the importance of walking as an exercise to reduce weight and improve physical health and wellbeing.

During August, the new SMILE nurses participated in advanced training conducted by a retired SMILE nurse with more than two decades of experience working to improve birth outcomes and overall health and conducting home visits among and for pregnant and postpartum women. This training emphasized the insights and skills gained by the retired SMILE nurse over the past two decades of working with Black/African American women in Montgomery County.

During August, the Kaiser Foundation solicited AAHP's support and assistance in helping families and individuals who are not eligible for insurance in the regular marketplace to reapply for insurance on the Kaiser Foundation's Community Health Access Program (CHAP). CHAP provides *free* health insurance coverage for individuals and families who are not eligible for other health coverage such as Medicaid, Medicare, or a job-based health plan or financial help through the Maryland Health Connection. Participation in this program saves residents thousands of dollars and increases the likelihood that they will use these services to improve their health and their families' health.

During August, AAHP received applications from graduate and undergraduate students interested in completing the requirements for either a Master of Public Health or an undergraduate degree in public health. During August, AAHP staff devoted time outlining core competencies and developing learning objectives consistent with each university's overall mission and objectives. In August, a registered pharmacist with the U.S. Food and Drug Administration completed all the requirements for receiving a Master of Public Health from

the University of Maryland based on her internship work with AAHP. Throughout the past six months, this individual conducted presentations to educate pregnant and postpartum mothers about using over-the-counter medications and dispensed advice about issues to discuss with their OB/GYN and primary care physician during their periodic visits. Moreover, this individual plans to continue joining AAHP staff at community events. Notably, she brings more than 20 years of continuous experience as a registered pharmacist to AAHP's community engagement at no cost to the contract.

II. AAHP PROGRAM ACTIVITIES

A. The SMILE Program

August continued the trend of increasing enrollments from month to month over the last quarter. In August, the SMILE caseload included 116 mothers and 91 infants. Of the 116 mothers, 42 were prenatal cases, and 70 were postpartum. The SMILE program enrolled nine (9) new pregnant women and discharged (2) two infants who reached the milestone of their first birthday. Ten (10) babies were born into the program in August and were healthy and at term. To support the mothers, newborns, and their families, AAHP staff arranged for the pickup or delivery of infant car seats, cribs, and other items. The SMILE program continues to find new and creative ways to encourage mothers to bond as a group based on their shared experiences of pregnancy and new motherhood. Mothers have also donated slightly used clothes that can save hundreds of dollars during this period of high inflation and economic downturn.

AAHP encourages all SMILE moms to breastfeed whenever practical and feasible. On a comparative basis, AAHP's SMILE enrollees continue to outpace the national averages. The August data shows that the SMILE program continued to improve performance. According to the 2020 CDC Breastfeeding Report Card, 58% of infants born in 2017 breastfed at six months and 35% at 12 months. The SMILE breastfeeding rates were 85% at six months and 64% at twelve months (*Figure 1*).

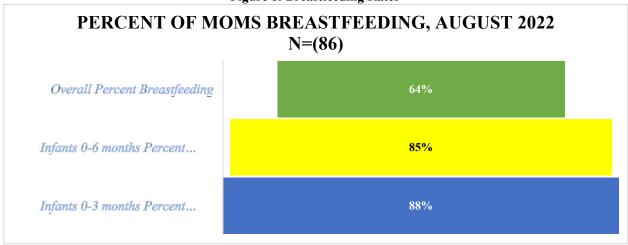


Figure 1: Breastfeeding Rates

Despite growing concerns about maternal morbidity and mortality risks during the postpartum period, the SMILE program has closely monitored all enrollees for signs traditionally linked to poor health outcomes. In the past few decades, the United States has had the highest maternal mortality and morbidity rate among the ten most developed nations, with a persistent overrepresentation of racial and ethnic minorities in these rates. (Tikkanen et al., 2020). Most pregnancy-related deaths are preventable, however controlling the risk factors associated with these outcomes has been challenging. Nearly 17% of pregnancy-related deaths occur during delivery, while 52% occur during the postpartum period, including up to one year after birth (Agency of Health and Research Quality, 2022). Various factors such as access to health care, history of chronic disease, and health problems developed during pregnancy are associated with the complications that occur in and after childbirth. For instance, around 5% of women who give birth are at risk of a postpartum hemorrhage, uncontrollable bleeding that can happen up to twelve weeks postpartum (Postpartum Hemorrhage, 2020). Medical conditions affecting the uterus and placenta, c-sections, lacerations associated with vaginal births, obesity, blood disorders, and gestational hypertension increase the chances of hemorrhages in women. Infections also affect 5 to 7% of women worldwide, occurring anytime between birth and six weeks postpartum (Boushra & Rahman, 2022). The risk for infections is higher in women of advanced maternal age, women who experience other complications during delivery, and those with a history of diabetes and hypertension during pregnancy (Boushra & Rahman, 2022).

Gestational diabetes (GDM), a manifestation of impaired insulin production and secretion during pregnancy, contributes to the risk of acute and long-term complications after delivery. It increases the risk of chronic diabetes and recurrent gestational diabetes in future pregnancies. Women with gestational diabetes in their first pregnancy have a 41% risk of gestational diabetes in their second pregnancy compared to the 4% risk in women who do not develop the condition (Kim, 2014). Additionally, a meta-analysis indicates that women with gestational diabetes have a sevenfold increase in the lifetime risk of type 2 diabetes (Kim, 2014).

The SMILE program routinely monitors these risks to raise awareness and educate the moms in identifying them early enough to access the appropriate interventions. *Figure 2* shows the risk profile of these moms in August.

MOMS' RISK CATEGORIES, AUGUST 2023 N=(116)High Mixed Risk High Mixed Risk, 27 Low Social Risk Low Social Risk, 57 Moderate Social Risk Moderate Social Risk, 5 High Social Risk High Social Risk, 54 Low Medical Risk Low Medical Risk, 62 Moderate Medical Risk, Moderate Medical. High Medical Risk High Medical Risk, 50 10 20 30 40 50 70

Figure 2: Risk Profile

Medical risk factors included gestational diabetes, pre-eclampsia, and mental health challenges; social risk factors included limited access to transportation, housing, safety, isolation, and a lack of support.

The SMILE program addresses these issues by providing education and resources to women during and after pregnancy. Clients are classified based on medical and social risk factors and offered guidance up to one year after delivery. Prenatal and postpartum mothers get screened for depression and referred to care based on Edinburgh Postnatal Depression Scale scores. The SMILE nurses also regularly contacted mothers to ensure they received the necessary care for their medical problems. Mommy Chat provides a forum for these women to exchange experiences and lessons among themselves and with the nurses.

The ethnic profile of mothers participating in the SMILE program showed the following distribution in August: 56% African, 41% Black American, and 3% Caribbean. See *Figure 3 below*.

MOMS' ORIGIN, AUGUST 2023
N=(116)

Black American
41%

■ Black American ■ African

Figure 3. Ethnic Profile

Teamwork and collaborative planning were essential for effectively managing and supervising cases. The nurses met weekly to review complex cases and plan interventions with AAHP's community health workers, social workers, nurse supervisor, and clinical director. Other AAHP staff assisted mothers and families by providing diapers, car seats, breast pumps, pack-and-play cribs, and other items to support the growth and development of healthy mothers, infants, and families.

Caribbean

The table below presents an overview of the SMILE rolling three-month data from June 2022 through August 2022 compared to the program performance in 2020.

PROFILES/SERVICES	*Monthly Average Calendar Year 2020	June 2022	July 2022	August 2022	Comments About July
A) Currently Active Moms	83	107	112	116	
Prenatal (still pregnant)	24	39	42	31	
Postpartum (Moms who have					
delivered)	58	68	70	85	
B) All infants	58	74	77	91	
Single Births	55	68	67	77	
Multiples	2	8	10	12	
Case Load (A+B)	140	181	189	207	
MOM'S ETHNICITY					
African American Clients	31	47	46	36	
African Clients	49	56	63	77	
Caribbean Clients	2	4	3	3	

REFERRALS					
HHS Prenatal Referrals Received	4	2	1	1	
Referrals from Other Sources	4	12	9	7	
Total Prenatal Referrals	8	14	10	8	
NEW ENROLLMENTS					
Prenatal Moms Newly Enrolled	7				
During the Month	7	13	10	9	
Infants Newly Enrolled during the	5	9	7	10	
month					
Newly Enrolled Post-Partum Moms					
All New Enrollments for the month	12	22	17	19	
DISCHARGES					
Prenatal Discharges	1	0	0	0	
Infant Discharges	5	8	1	2	
Total Discharges	6	8	1	2	
DELIVERIES					
Term Deliveries	5	9	6	10	
Preterm Deliveries	1	0	1	0	
Preterm Denveries	1	v		v	
Total Deliveries	6	9	7	10	
BIRTH OUTCOMES					
% Healthy Birth Weight	95%	78%	100%	100%	
Number of Low Birth Weight	1	2	0	0	
Number of Very Low Birth Weight	1	0	0	0	
Infant Deaths (includes Stillbirths)	0	0	0	0	
Unfavorable Birth Outcomes	0	0	0	0	
(Congenital Anomaly, Fetal Demise,					
Miscarriage)	0	0	0	0	
SERVICES					
Total Home Visits	17	0	0	0	
Telephonic Consultations	144	184	189	246	
Community Referrals Made	26	16	15	16	
BREASTFEEDING MOMS					
Breastfeeding 0-3 months	92%	100%	76%	88%	
Breastfeeding 0-6 months		90%	60 %	85 %	
Breastfeeding 0-12 months	73%	65%	56%	64%	
INSURANCE					
Clients with Private Insurance**	23	31	27	30	
Clients with Medicaid Insurance**	60	74	80	81	
Clients without Insurance	n/a	2	0	5	

*Averages are rounded up to the next integer

** A client may have multiple insurances

Increase above reference year

Level with reference year

The decrease from the reference year

Untoward Outcome

Desired Outcome

B. Chronic Disease Management and Prevention (CDMP) Programs

1. CDMP Virtual Health Education Webinars

The CDMP team continued conducting weekly virtual and in-person evidence-based health education classes on different topics to help participants improve their overall health and manage and prevent chronic diseases. The focus for August was heart health which included an overview of heart and cardiovascular diseases, functions and pathologies of the heart and cardiovascular system, and prevention and treatment modalities. Attendees were taught how to keep their hearts healthy through good nutrition and exercise. The classes also covered cholesterol, its role in hypertension and atherosclerosis, and treatment options.

The CDMP's Kick Start Your Health (KSYH) I & II series continued on Wednesday and Thursday evenings. Quizzes, recipes, and healthy cooking demonstrations were presented during the Health and Nutrition classes on Thursday afternoons and two Monday evenings in August. At the start of each class, the participants had a chance to share their triumphs and challenges from the following week, including their experience with the recipes shared. Below are the classes taught and the foods prepared:

- August 4th: Getting in Gear and Healthy Blood Pressure, Spicy Buffalo Pasta Salad, Buffalo-Spiced Hummus, Berry-Banana Ice-Cream
- August 8th: The Power of Your Plate, Breakfast Tofu Scramble, Green Monster Smoothie, Mexican Kale and Blue Corn Salad
- August 11th: 11 Southwestern Lentil Mac, Red Pepper Hummus, Purple Power Smoothie
- August 18th: Provided Topic for Class Foods for a Healthy Heart
- August 2nd: A Healthy Thyroid, Orange Smoothie, Lentil Cucumber Salad, Simple Spring Rolls
- August 25th: African American Culinary Heritage Foods for a Healthy Heart, Gumbo, Brown Rice Roux, Brown Rice, Georgia Watermelon, and Peach Salad

One Health and Nutrition class was held on-site at Leisure World. Participants could attend in person or via zoom. Class participants listened to guest speakers regarding foods for a healthy heart and after each lecture, food demonstrations and samples were

offered. One class participant called the hybrid program to share that she was doing well. She started attending classes several years ago at a time when her doctors told her that she would need to go on dialysis, but she changed her diet and avoided dialysis.

Zumba classes were conducted on Fridays and Yoga classes on Wednesdays. On Tuesday evenings, participants with prediabetes developed plans to reverse their diagnosis through step-by-step lifestyle changes outlined in the Diabetes Prevention Program (DPP).

CDMP CLASS Activities

ACTIVITY	HOURS	DATA REQUESTED	TOPIC COVERED
Health and Fitness online Webinar YOGA: ZUMBA: August 5, 12, 19,	10 am – 11 am	Class and Height, Weight, BP, BMI, % BF, Glucose, Cholesterol Screenings	This month focused on online, guided exercise, including yoga and Zumba, by trained exercise professionals and AAHP staff that allowed participants to join from the comfort of their homes and get moving. Participants learned how fitness could prevent, manage, and reverse the risk of chronic diseases, such as hypertension and
and 26	11 am – 12 pm		heart disease. Participants continued to maintain or improve their HEDIS measures and make positive behavioral changes in favor of more exercise and a more nutritious diet.
Kick Start Your Health I (Hypertension): August 3, 10, 17, 24 and 31	6 pm – 7 pm	Class and Height, Weight, BP, BMI, %BF, cholesterol	This month's class topic was hypertension and cardiovascular health, understanding terminology, and how to reduce risk through education, exercise, and nutrition. Guest speakers led an in-depth discussion on hypertension and medications used to treat it. They answered questions and provided advice on how to save money on medications. Participants continued to maintain or improve their HEDIS measures and to make positive behavioral changes in favor of more exercise and a more nutritious diet.
Health and Nutrition VEGAN, Plant-Based August 4, 11, 18, and 25 - afternoons August 8 and 22 - Evenings	1pm - 3pm	Weight, BP, BMI, %BF, Glucose, and Cholesterol screenings	Class topics were focused on healthy eating choices and how food choices can reduce or increase the risk of chronic conditions. AAHP's Food for Life nutritionist/chef continued demonstrating plant-based diet/healthy cooking to the class. Participants continued to maintain or improve their HEDIS measures and make positive behavioral changes in favor of more exercise and a more nutritious diet.

Kick Start Your Health II	6 pm – 7 pm	Weight, BP, BMI, %BF,	This month's class topic was hypertension and heart
Online Webinar.		Cholesterol screenings	health. Classes focused on high cholesterol, obesity,
			fitness, and nutrition. The CDMP instructor explained
August 4, 11, 18, and 25			food nutrition labels and demonstrated how to find
			nutrition charts for restaurants and foods online. She also
			reviewed an example. Participants continued to maintain
			or improve their HEDIS measures and make positive
			behavioral changes in favor of more exercise and a more
			nutritious diet.

Small support groups were held after each fitness class to reinforce announcements, welcome new participants, and answer questions. All participants usually stayed till the end of class. AAHP staff asked questions during break sessions and used polling and share screen features to keep participants engaged and the classes interactive. AAHP staff called participants and emailed them weekly to check on their activities, get their readings, monitor their progress, and prepare them for their weekly classes. All readings were entered into SharePoint's biometric form for the month. The CDMP team continued to use a new charting system that was more user-friendly to determine average values of the Healthcare Effectiveness Data and Information Set (HEDIS) measures such as blood glucose, blood pressure, weight, height, and A1C.

August Health Champion

Ms. A.M. heard about AAHP's CDMP programming through a neighborhood club publication and friends who have attended classes. She visited AAHP's website and took the Diabetes Risk Test to discover that she had an elevated risk. She was screened by staff and was found to have prediabetes. She joined the DPP class and attended every single weekly session during the first six months. She also followed the other CDMP offerings to improve her diet, increase physical activity level and learn skills on how to reduce stress. She adapted her lifestyle to live heathier. As a result, she reversed prediabetes and brought her cholesterol and blood pressure under control. At her check-up in August, her physician was amazed by her results and reduced her medications. Ms. A.M. became an avid AAHP advocate in the community and has brought new participants to CDMP. Ms. A.M. is deservedly the Health Champion for August.

CDMP Virtual Webinar Attendance Metrics August 2022

	Health and Fitness 11 am – 12 pm				KSYH I 6pm – 7:15pm			Health and Nutrition			KSYH II 6pm – 7:15pm							
]	l pm – 1	2։15ր	m				
Date(s)	8/03	8/10	8/17	8/24	8/3	8/	8/1	8/1	8/2	8/3	8/0	8/08	8/1	8/22	8/0	8/1	8/1	8/2
(.,	&	&	&	&	1	03	0	7	4	1	4	&	8	&	4	1	8	5
	8/05	8/12	8/19	8/26								8/11		8/25				
Class	26	32	24	34	14	1	13	19	17	18	19	58		46	20	16	12	21
Size						9							15					
TOTAL			130					86			138			69				
Avg.			26			17				3	5			1	7			
Natl.	4-0	6 (For	classes	sses that meet		4-6 (For classes that		4-6 (For classes that			4-6 (For classes							
Avg.		1	weekly)				mee	et wee	ekly)			meet v	veekly	7)	that meet weekly)			

Participants	Health and Fitness: Zumba/YOGA	KSYH I (Diabetes)	Health and Nutrition: Vegan	KSYH I (Diabetes- related)	Total
Male	3	1	5	0	9
Female	99	54	171	54	378
Total	102	55	176	54	387
% African American					

2. Remote Patient Monitoring

Remote patient monitoring continued to be a significant part of raising clients' awareness of their biometric readings. In August, some patients vacationed, reducing the number of readings reported for the month. Unfortunately, one patient was unenrolled from the blood pressure monitoring program due to a failure to meet the benchmark for 16 monthly readings.

Active Days of RPM Participants

Number of active days	0 Days	0-5 Days	5-10 Days	10-15 Days	16-27 Days
Number of participants	0	0	0	4	12

Average Values for August RPM Data

	Average values for August RPM data (electronic data from RPM devices)					
Women's Weight	175.6 lbs.	1.2% Increase in Weight				
Men's Weight	277.8 lbs.	2.5% Increase in Weight				
Systolic BP	132.7 mmHg	5.2% Decrease in Systolic BP				

3. Diabetes Prevention Program (DPP)

DPP classes were held on Tuesdays, August 2nd, 9th, 16th, 23rd, and 30th from 6:00pm-7:00pm. Each week, staff called, emailed, and texted participants to remind them about classes and to check their progress, activities, and weight. A special guest speaker conducted presentations titled "Shop and Cook to Prevent T2" and "Diet for a Healthy Heart." Another guest speaker led the group in chair exercises intended to be easy, effective, enjoyable, and appropriate to do at home in the comfort of their home, even in the absence of ideal exercise conditions. As of August, five (5) participants in the program have reversed prediabetes.

Participants	August 2	August 9	August 19	August 23	August 30	Total
Male	2	2	1	1	2	8
Female	10	8	10	9	8	45
Total	12	10	11	10	10	53
% African American	100%	100%	100%	100%	100%	

4. dMeetings Participation in August

During August, dMeetings gained 14 new enrollments. Two enrollees completed the course and received their transcripts and certificates. By August 2022, dMeetings had enrolled 181 participants since the previous July 2021, and 53 participants had earned their certificates of completion.

August 2022 Enrollments and Completions

	= 10.1	0/01	0/01	10/01	11/01	10/01	1 /00	2/22	2/22	4/00	= 100	(100	T ()
	7/21	8/21	9/21	10/21	11/21	12/21	1/22	2/22	3/22	4/22	5/22	6/22	Total
New	4	17	10	2	12	22	19	9	16	24	32	14	181
Enrollments													
Completion													
Certificates	1	1	4	0	4	8	6	2	6	12	7	2	53
Awarded													

5. Weight Management Program (WMP)

The Weight Management Program hosted two outdoor walk events in August. The first one was held on Saturday, August 13th, 2022 at Valley Mill Special Park at 1620 E

Randolph Rd in Silver Spring, MD. The group of 15 participants walked a 3-mile-long trail in total length. The second walk occurred at the Fleming Local Park (Bethesda Trolley Trail) where 14 participants walked for 3.5 miles.

Each exercise event above lasted approximately one hour and a half with allotted time for a cool down and stretching before and after. Accommodations were made for participants to walk at slow and medium-paced depending on their capacity. Both exercise events, as well as other community outreach events, served to recruit new enrollees into the program.

In August, the program enrolled two recruits. One person was recruited from previous event, and the other was recruited from one a previous walk. There was interest from SMILE clients, but no response has been received yet. Fortunately, no one was moved to inactive status for being unresponsive. The total enrollment of WMP members for the month is currently 41. The table below shows the breakdown.

WMP Enrollment

	Previously Enrolled Clients	Discharged Clients	New Clients	Total Clients
September	19	4	6	21
October	19	0	5	24
November	24	2	4	26
December	26	2	1	25
January	26	1	3	29
February	29	0	3	32
March	32	0	2	35
April	35	0	1	36
May	36	0	1	37
June	37	0	1	38
July	38	1	2	39
August	39	0	2	41

In August, all participants missed their weight goals. Below is a table showing the weight gain and loss in August.

Reported Weight Gain/Loss

Teported Weight Gam/ 2009										
	Weight Lo	ss	Weight Gair	n	Maintained					
	Male Female		Male	Female	Female	Male				
0 lb.					7					
1 lb.		8								
2 lbs.	1	4	1	2						
3 lbs.		1	2	3						

4 lbs.			2	
5 lbs.			1	
6 lbs.				
7 lbs.		1		
11 lbs.	1			

⁴¹ total members, five unreported, and two new members

The WMP faced challenges in August that included:

- Contact was difficult to establish by phone or text due to summer vacations. As a result, reports were not collected on many.
- Attending to daily activities and family priorities did not allow for strict adherence to set individual program goals.
- Poor time management.

C. Community Outreach Screenings and HIV Testing Hampshire Towers

The HIV/STI team held a screening event that included blood pressure screenings, glucose, cholesterol, and A1c. As people were going in and out of the apartment complex, the team encouraged them to receive AAHP's screening services and informed them about the importance of knowing their numbers.

King and Priests Health Fair

A team composed of AAHP's social worker and five other community health workers attended a health fair at the King and Priests Church. The church conditioned the receipt of an incentive package to a prior health screening by AAHP. This system stimulated active and broad participation in health screenings.

Progress Place

During August, the team provided health screenings of blood pressure, glucose, and HIV at Progress Place. During the event, AAHP could check in with many of the clients in the shelter. The residents in Progress Place are used to seeing AAHP and look forward to all AAHP screenings. The clients were very appreciative of services and frequently inquired about the next visit.

A total of three hundred twenty-eight (328) giveaway bags were disturbed during these events. Bags were filled with information pamphlets on AAHP, diabetes, heart diseases, stroke, mental health, dental health, weight, HIV, pregnancy, youth sexual health, cancer, cholesterol, mammograms, and fitness. A water bottle was also included.

Below is the table of screenings and touches resulting from these events:

	Sites	Date	Number Screened/ Informati on Dissemin	HIV Negative	Normal Blood Pressure	Elevated Blood Pressure	Normal Blood sugar	Elevated Blood Sugar	A1C Normal	Total Cholesterol Normal
١			ation							

Progress Place	Aug ust 3	25	15	19	6	16	9	11	6
Kings & Priest	Aug ust 6	70	26	47	18	30	20	11	16
Women Shelter-CB	Aug ust 10	19	10	12	6	14	5	4	7
Women Shelter TC	Aug ust 17	21	11	17	4	13	8	8	4
Hampshire Tower	Aug ust 19	47	25	31	12	11	9	19	10
Men Shelter	Aug 24	26	15	20	7	13	14	9	3
East County Fair	Aug 27	120	0	0	0	0	0	0	0

A total of 208 people were screened for blood pressure, cholesterol, glucose, A1C, and weight. Individuals with abnormal values were referred to a physician for further evaluation and the CDMP program for health education.

In addition, 102 HIV tests were done, all yielding negative results.

August 2022 HIV Testing Report

African	-American			
	Age Group	Male	Female	
	1947 -1969	8	11	
	1970 -1989	17	16	
	1990+	10	14	
Total		35	41	76
All Oth	ers			
		Male	Female	
	1947 -1969	4	6	
	1970 -1989	7	3	
	1990+	3	3	
Total		14	12	26
GRANI	TOTAL			102

D. Social Work

During August, AAHP's social worker conducted mental health screenings via computer tablets at churches, senior facilities, shelters, and community events. A total of 186 mental health screenings were conducted throughout the County. The social worker also attended

community activities to promote AAHP's services and to disseminate material on AAHP's programs. The social worker also partnered with nurses to address the mental health needs of SMILE clients and provided needed resources, such as housing, food assistance, child care assistance, and diapers. The social worker also conducted group sessions (Mommy Chat) on patients' rights and vaccinations.

To provide guidance and influence younger generations of social workers, AAHP's social worker recruited two MSW interns from Morgan State University and completed Supervision and Field Orientation training with them. The students will start their practicums on September 12th, 2022.

In August, the following screenings were completed:

	NUMBER OF
TYPES OF SCREENING	TESTS
Wellbeing Screen	96
Wide Screen	42
CD-GAG Generalized Anxiety	20
HANDS -Depression	12
Audit Alcohol	2
Eating Disorder	4
PTSD	3
Bipolar	2
Gambling	2
Adolescent Depression	1
Psychosis	1
Substance use	1

The screenings were administered to individuals ages 18 through 85+. The results of the screenings were as follows:

- The highest number of respondents (26%) were between the ages of 35-44.
- Women represented the highest number of individuals taking the screenings at 49%, men represented 47%, and the remaining 4% identified as transgender.
- In partnership status, single individuals represented the highest number of individuals taking the screening at 51%.
- All groups were offered the screening, yet Blacks/African Americans represented 55% of the screening participants.
- Of the 12 individuals taking the HANDS (Depression Screening), 34% had scores consistent with depression. Seventeen percent of individuals were consistent, and 17% were highly consistent.
- **Audit Alcohol:** Of the two individuals taking the Audit Alcohol screening, 50% or half had symptoms consistent with alcohol dependence.
- **Generalized Anxiety screening:** Of the 20 individuals taking the anxiety screening, 55% reported having symptoms suggestive of anxiety.

- Eating Disorders Screening: Of the four individuals taking the Eating Disorders Screening, 50% may be at risk for eating disorders.
- **PTSD Screening:** Of the four individuals taking the PTSD screening, it was suggested that 75% were consistent with PTSD symptoms.
- **Adolescent Screening:** One individual took the BSAD Adolescent Depression screening which revealed the individual has 100% possibly of having symptoms of depression. The screening indicates the youth screened was between the ages of 15 to 18, female, in 12th grade, and Black/African American.
- **Bipolar Screening:** Two individuals took the Bipolar screening, and both showed signs consistent with bipolar disorder.
- **Psychosis disorder:** One individual took the Psychosis screening and showed 100% moderate risk for psychosis.
- **Substance Abuse Disorder:** One individual took the Substance Abuse Screening and demonstrated 100% moderate risk for substance abuse.
- Wide Screen (a combination of questions from all screenings): Forty-two individuals took the Wide Screen, and 60% showed some initial signs consistent with other disorders.
- **Opioid Screening:** Two individuals took the Opioid Screening and showed a 100% high risk for opioid addiction.
- **Well-Being Screening*:** Ninety-six individuals took the Wellbeing screening; 5% had mild symptoms, 79% had minimal, 8% had moderate, and 7% had severe symptoms.
- Suicide: Of the 44 individuals asked if they thought about ending their life, 50% said they thought about ending their life all the time, and 40% said they had not.

*The Well Being screening is frequently chosen because it is challenging for individuals to choose the screenings related explicitly to disorders or conditions, such as depression, anxiety, alcohol, etc. Individuals appear comfortable with the Well Being Screening because it is easy and non-intimidating. Due to the simplicity of the questions of the Wellbeing Screening, individuals tend to accept the screening results, even when it shows adverse results and signs of distress.

During two separate events, the tablets malfunctioned and the social worker was unable to perform screenings. The social worker continued to use the older tablets that are more reliable.

An Amharic-speaking social worker was recently hired who can screen Ethiopian residents, an often-missed population. A volunteer worker that speaks Spanish was able to screen several Hispanic residents. Hispanic residents represent a big group that AAHP cannot screen because of language differences. Hispanic residents are prominent in number and frequently use AAHP resources in the community.

The social worker noticed that immigrants taking the screening have difficulties with the terminology. The social worker is often asked by individuals taking the Depression screening what the term "feeling blue" means. The social worker then provides examples and explanations of the term "feeling blue."

III. Administration

Over the past several years, AAHP has identified ways to collect, organize, store, retrieve and present program processes, performance data, and other valuable information essential to planning and refinement. As part of that strategy, AAHP audits data generated by both systems to ensure that the data is accurate, consistent, and logical. Part of that effort has involved maintaining spreadsheets and assessing the extent to which data contained in spreadsheets matched data generated from the computerized CMIS system. Another challenge has been customizing the system data entry format to ensure that it conforms to the logical and natural order and generates reports that produce insights for the nurses and other staff.

In this connection, the staff has integrated a new version of the SMILE master list document that keeps track of all the nurses' cases. A master list is a tool that records SMILE information for the nurses and makes it easy for them to report requested values. The master list version 2 update includes:

- The addition of a formula that records the number of clients who are both high-risk medical and high-risk social.
- The addition of a formula that shows how many mothers are breastfeeding.
- A section that details how many calls were made for each of the risk categories.

Additional software improvements completed in August included:

- Working with the CMIS system developer to incorporate the following changes into the system.
- Fixing a bug error that prevented the patient's demographic information from saving.
- Fixing a bug error that prevented new tile consult logs from being added.
- The addition of a feature to automatically transports notes from the mother's nursing documents to the tele consult log.

APPENDIX A - Media Report

AAHP Health Notes - Distributed: August 24th, 2022 at 5:29pm

Campaign Metrics

	July	August
General List Recipients:	7,540	7,470
Successful deliveries:	6,965	6,881
Open rate:	26.7%	27.6%
Click rate	.3%	.5%

AAHP's August 2022 Health Notes entitled "An August of Abundance" was sent on Wednesday, August 24th. The feature article focused on breastfeeding and the August observances of Breastfeeding Awareness Month and Black Breastfeeding Week. The article discussed the benefits of breastfeeding for both mom and baby and highlighted the SMILE program's effort to increase the breastfeeding rate among Black/African American moms. The following article, "Underrated Heart Health Habits" provided three tips for heart health that are not commonly known; the habits include having good relationships, eating home-cooked meals, and "listening for a heart attack." "Gun Violence is a Major Health Issue" discussed the rising levels of gun violence and their disproportionate impact on Blacks/African Americans and youth. The article included an innovative infographic from the National Institute for Healthcare Management Foundation. The Health Hint explained why more Blacks/African Americans should participate in clinical trials. In the Featured Video, Viola Davis speaks with EBONY about *A Touch of Sugar*, a documentary exploring America's diabetes crisis and how it disproportionately affects Black and Brown communities. The featured recipe was apple cinnamon peanut butter breakfast toast.

Of the 7,470 people who received August 2022 Health Notes, 1,897 people opened the newsletter, which is 37 fewer people than last month and represents an open rate of 27.6%, which is slightly higher than last month's open rate of 26.7. August's click rate of .5% was slightly higher than last month's click rate and lower than AAHP's average click rate of 2%, and lower than the industry average of 4%. The number of successful deliveries decreased by 84 and there were four unsubscribers.

Facebook

AAHP's Facebook page's performance dropped significantly in August after an extremely prolific month in July. Decreases were recorded in all metrics.

Facebook Metrics - August 2022

	Followers	Posts	Likes/Love	Comments	Shares
Total	766	24	27	0	8
Change from last month	-9	-20	-8	-5	-12

Twitter

AAHP's Twitter performance in August decreased dramatically with all metrics. However, despite the fewer posts and engagement, five new followers were added.

Twitter Metrics – August 2022

	Followers	New Followers	Tweets	Profile Visits	Mentions	Tweet Impressions	Retweets	Likes
Total		5	15	655	16	2,937	13	18
Change from last month	442	Same	-32	-266	-9	-901	-11	-7

Instagram

AAHP's Instagram performance in June showed decreases in all metrics with the exception of LinkIn bio clicks. Most notably the number of impressions increased in spite of less content. Seven new followers were added.

Instagram Metrics – August 2022

	Followers	Posts	Post Likes	LinkedIn bio clicks	Impressions
Total	277	16	56	3	690
Change from last month	+7	-16	-8	+2	+40

APPENDIX B - August 2022 Health Notes



www.aahpmontgomerycounty.org













AAHP strongly encourages moms to breastfeed as an important part of giving their infants a healthy start in life. Breastfeeding provides the perfect balance of nutrients and antibodies for infants, and reduces the risk of breast cancer, ovarian cancer, diabetes type 2, and heart disease for moms. It also helps moms lose weight after pregnancy and can even help to prevent postpartum depression. For numerous reasons, Black/African Americans have lagged behind other races/ethnicities in receiving these tremendous benefits. Vital to the mission of ending health disparities, AAHP's SMILE program provides breastfeeding support to Black/African American postpartum moms and infants. This and every August, AAHP celebrates National Breastfeeding Month to highlight our efforts and successes in helping Black/African American moms and families in their breastfeeding journey.

The recent infant formula shortage highlighted the importance of breastfeeding and further justified AAHP's work. Breastfeeding SMILE moms were not as vulnerable to the infant formula shortage. Furthermore, AAHP put a great deal of effort into sharing resources that directed moms to available infant formula. AAHP understands that many factors influence whether a mom breastfeeds, including many factors beyond one's control. AAHP is proud to fill the gap in breastfeeding support and to support moms when breastfeeding is not an option.

Sources:

National Institute for Children's Health Quality www.cdc.gov/breastfeeding



You're probably aware of the lifestyle habits that keep your heart healthy: eating a nutrientrich diet, exercising, not smoking, not abusing alcohol or other harmful substances, and managing stress. But did you know the following are also good for your heart?

Good relationships. Social connectivity plays a large role in heart health. Positive, nurturing relationships can come from neighbors, spouses, relatives, and even pets. Studies have shown that holding hands, hugging, or petting an animal can lower levels of stress hormones. In addition, a supportive loved one might encourage you to exercise or eat better or see a doctor when you need one.

Home-cooked meals. Excessive sodium intake is a known contributor to heart disease, but most of the sodium that Americans consume—about 70%—comes from restaurant, prepackaged, and processed foods and not salt added to home-cooked meals. Data from 2009–2012 shows that up to 94% of Americans exceed the recommended limit of 2,300 mg of sodium per day, with salt added during cooking and at the table only accounting for 5–6% of daily sodium intake.

"Listening" for a heart attack. Be aware that a person can experience a "silent heart attack," or a heart attack with no symptoms, mild symptoms, or symptoms they may not associate with a heart attack. Heart attacks that happen silently can be just as harmful as those that occur more obviously, but if you don't know you're having a heart attack, you may not get the medical help you need to limit the damage. If you suspect you may be having a heart attack after experiencing these symptoms, call 911 right away even if you're not certain you're having a heart attack.

Sources

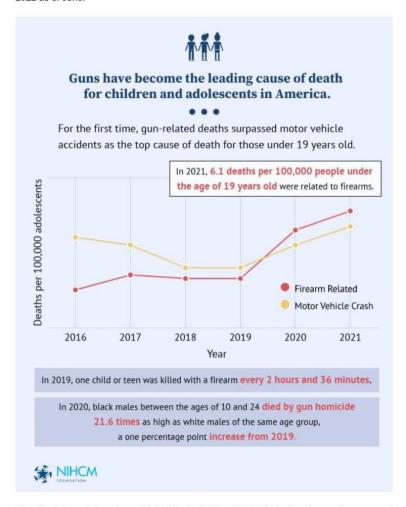
www.clevelandclinic.org www.cdc.gov www.cardiosmart.org

www.clevelandheartlab.com www.health.harvard.edu



Gun violence has increasingly become a major public health threat, as the number of firearm deaths grew by nearly 43% between 2010 and 2020. Firearms have now surpassed car accidents as the number one killer of children and teenagers, especially young Black/African American males. In 2020, Black/African American males between the ages of 10 and 24 died by gun homicide 21.6 times as often as White American males of the same age group. This is one of the most shocking, troubling, and heartbreaking health disparities facing Blacks/African Americans. Incidents of gun violence have far-reaching impacts on the health of Blacks/African Americans as a whole.

While generally regarded as safe, Montgomery County has experienced an uptick in gun violence as well. Lee Holland, president of Montgomery County's police union said, "Montgomery County is absolutely seeing a rise in gun violence. It's alarming the number of shootings our members are responding to on a weekly and in some cases daily basis." According to Montgomery County Police Department data, the number of homicides involving guns, victims, and suspects under 21 has more than doubled between 2021 and 2022 as of June.



View the infographic series published by the National Institute for Healthcare Management Foundation here.

Sources:

www.washingtonpost.com www.montgomerycountymd.gov National Institute for Healthcare Management Foundation

Health Hint

Enrolling in a clinical trial can help Blacks/African Americans achieve better outcomes when seeking medical treatment. Despite being disproportionately affected by chronic diseases, African Americans are severely underrepresented in clinical trials. Research conducted during clinical trials can provide valuable insight into how Blacks/African Americans react to different medications and therapeutics, thus improving those treatments and medications for Blacks/African Americans. A list of clinical trials in Maryland can be found here.

Source: www.rollcall.com

Featured Video

Oscar, Tony and Emmy-Award-winning actress Viola Davis speaks with EBONY about *A Touch of Sugar*, a documentary exploring America's diabetes crisis and how it disproportionately affects Black and Brown communities:



Featured Recipe: Apple Cinnamon Peanut Butter Breakfast Toast



Ingredients

- 4 slices sprouted grain bread (or any type)
 4 thsp peanut butter
 1 apple (thinly sliced)
 2 tsp cinnamon

- 1/4 cup granola
- 2 thsp pecan halves
 1 thsp crushed pistachios (optional)
 4 tsp Truvia® Nectar

- Instructions
 1. Toast the slices of bread.
 2. While the bread is in the toaster, thinly slice the apple.
 - 3. Top each piece of toast with the toppings.

Source: www.jaroflemons.com/apple-cinnamon-peanut-butter-breakfast-toast/