



Rev. Kendra Smith and the Kingdom FAME TEAM at White Oak Gardens Food Distribution Event

**AAHP MONTHLY REPORT**  
**April 2021**



## I. INTRODUCTION

April marks the beginning of the final quarter of the five-year service contract between Montgomery County Department of Health and Human Services (DHHS) and McFarland & Associates, Inc. to provide prevention, wellness, and health promotion services to reduce health disparities in the Black population of Montgomery County. DHHS renewed McFarland and Associates, Inc. by granting a one-year contract extension in April.

The achievements presented in this April report demonstrate that McFarland & Associates [meet requirements to continue to provide services](#) to improve health outcomes for residents of African descent. The report highlights improvements in health outcomes through multiple testimonials, charts, tables, and graphs. Remarkably, AAHP adapted to the challenge of social distancing by devising tailored strategies to meet the unique health conditions of individual program participants. A strong bond of trust has emerged between participants and AAHP staff as a result of the shared experience of working consistently towards better health by adopting a healthier lifestyle and gaining health literacy.

This month's report celebrates the SMILE program's largest monthly caseload (157 for the fiscal year 2021). Importantly, 12 healthy babies were born in April, and 11 at a normal weight. Increasingly, program participants with health risks are encouraged to enroll in other AAHP programs and services to reduce their risk of prediabetes, diabetes, and hypertension, and to help them manage their weight with exercise, good nutrition, and optimal sleep. For example, a mother with multiple health risks enrolled in both AAHP's SMILE and Chronic Disease Management and Prevention (CDMP) programs as evidenced in the various tables presented in this report.

Preliminary 2020 Census data recently reported that the nation experienced a relatively dramatic decrease in the birth rate among women of childbearing age throughout the United States and the rates have dropped further since the COVID-19 pandemic. Similarly, AAHP noticed a corresponding decrease in the number of referrals to the SMILE program during the past year. To reverse this trend, staff began implementing new strategies to recruit prenatal mothers by reaching out consistently to OB/GYN offices and urging mothers to refer their friends and associates who are pregnant. The most recent data for the last two months suggests that those efforts have yielded an increased number of new enrollments.

In April, the CDMP program reported significant improvements in recording positive and measurable program results. For example, the current program of remote patient monitoring recorded very high levels of participation. Of the total 29 program participants, 25 reported daily measures for at least 16 days and four clients reported measures for up to 10 days. None of the participants failed to report any measures.

The Diabetes Prevention Program (DPP) also recorded outstanding results among program participants. Four of the 14 participants who attended at least 15 sessions have now reversed their prediabetes state. The Weight Management Program initially planned to enroll a static number of 20 participants at any given time. However, at the end of April, the number of participants was at an all-time high of 26 participants. Almost all 22 participants lost weight

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**Deleted:** The significance of these achievements is even more profound given the challenges presented by the COVID-19 pandemic.

ranging from one to 29.32 lbs. Overall, all participants enrolled in Weight Management during April lost slightly less than 10 pounds.

The impact of the pandemic has been devastating for people of African descent. They are more likely to suffer a heavier burden of economic hardship such as higher unemployment and longer duration and loss of their homes or apartments. These circumstances generate a tremendous amount of stress that negatively impacts their health and overall well-being. Because AAHP has become a known and trusted resource in the County, many of those cries for help are addressed by AAHP's social worker. She continues to receive requests for social assistance and support. Mental health is another major concern that is inadequately addressed. This problem is magnified by the shortage of mental health professionals, and especially a shortage of Black mental health professionals.

**Deleted:** The waiting time for service in times of crisis runs usually from two to three weeks.

## II. AAHP PROGRAM ACTIVITIES

Although each monthly report focuses on measurable accomplishments, it is also important to recognize the disparate challenges that Black Montgomery County residents face—made even more difficult due to COVID-19—and to understand the human conditions that define health and well-being. As a result, this monthly report presents examples of individual situations and circumstances that highlight the social challenges that contribute to higher mortality and morbidity among Black County residents.

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

#### *SMILE Example Case*

Illustrating the intensity of intervention services required in April, a particular case involves a mom who is in a constant state of distress and crisis. Most recently, her problems stem from mental health-related depression and anxiety that are further exacerbated by the difficulty of rearing five young children in a small, confined rodent-infested apartment. She also experiences stress and postpartum depression. The five young children living in the home have also been affected by the living conditions; they suffer from lack of sleep for fear of mice and other rodents. The family fears entering the kitchen or using appliances because of the presence of rodents. These extreme conditions have been debilitating and are described by a client as “unlivable.” The client reports little to no sleep most nights, symptoms of anxiety, sadness, and feelings of helplessness pervading her every waking moment. SMILE staff is concerned about the client's resilience and ability to cope given the multitude of stresses in her life at this time. The situation has been brought to the attention of the Department's Child Welfare for a solution.

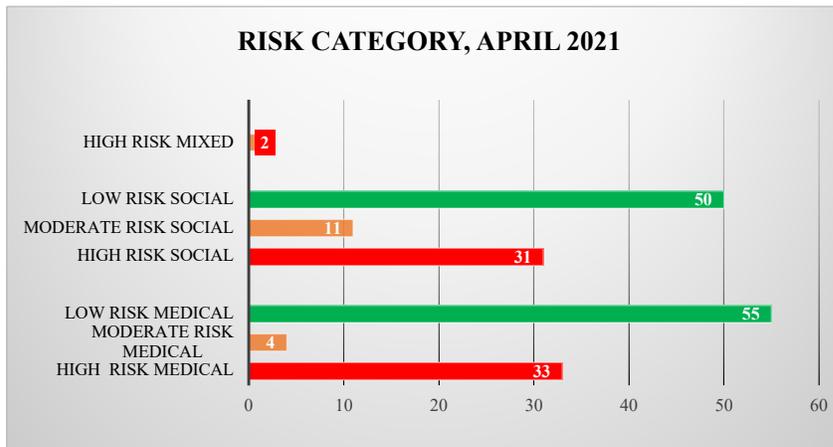
#### **SMILE Program (Start More Infants Living Equally healthy)**

In April, the performance of the SMILE program continued to excel in most categories. The number of active moms enrolled in the SMILE program remained at 92, comprising 32 prenatal and 60 post-partum cases. The total caseload in April was 157, the highest caseload for the fiscal year 2021. Twelve new babies were born in April. All but one birth was delivered at term. The lone case of prematurity and very low birth weight was due to placenta previa necessitating an early caesarian section. Eleven of the 12 babies were born

healthy and at a normal weight. The nurses arranged for the distribution of car seats, cribs, and other supplies to four new moms.

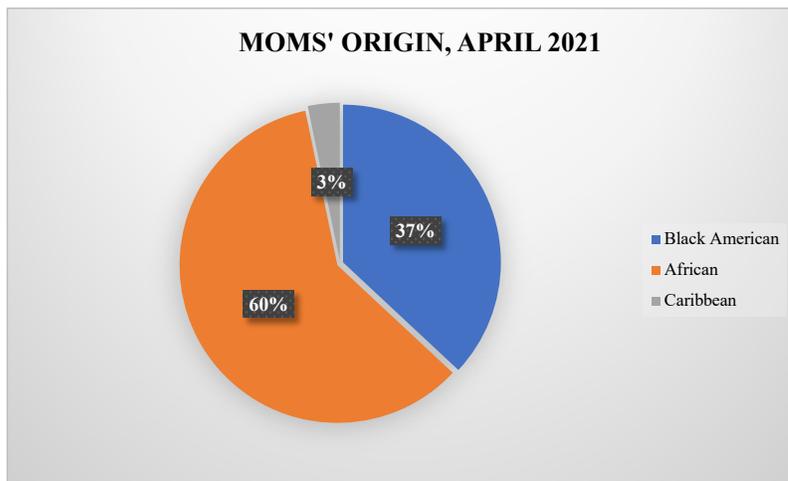
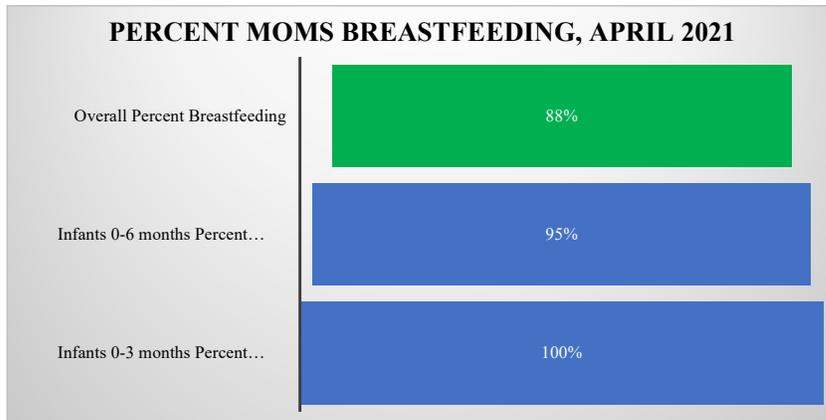
At the end of April, 33 of the 92 mothers were classified as high-risk cases because of medical issues, 31 cases were classified as high-risk for social issues, and two cases presented with both high medical and social risks. High-risk medical conditions included sickle cell disease, intellectual or mental challenges, gestational diabetes, pre-eclampsia, a history of multiple past miscarriages, and advanced maternal age. As in previous months, frequently cited social needs including housing, help with utility bills, transportation to medical appointments, food insecurity, and concerns about personal safety. Social risks included low self-esteem, unemployment, low educational attainment, unclear immigration status, language barriers, and inadequate family support. Staff addressed these issues through appropriate referrals.

Five new prenatal cases and 10 postpartum mothers were screened for depression using the Edinburgh Postnatal Depression Scale. During the month, six mothers scored above the normal range for depression and were referred for further evaluation and care. Other support services included assistance with stress management, anxiety, and feelings of isolation and disconnectedness. Because of the social distancing guidelines, AAHP continued operating virtually.



At the end of April, all mothers with infants aged zero to three months were breastfeeding and the overall percentage of mothers enrolled in SMILE and breastfeeding was 88%, and the percentage of mothers breastfeeding up to six months was 95%. Both breastfeeding indicators exceed the national rates reported by the Centers for Disease Control and Prevention (CDC). Comparative data presented by the CDC shows that 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. As shown in the graph presented below,

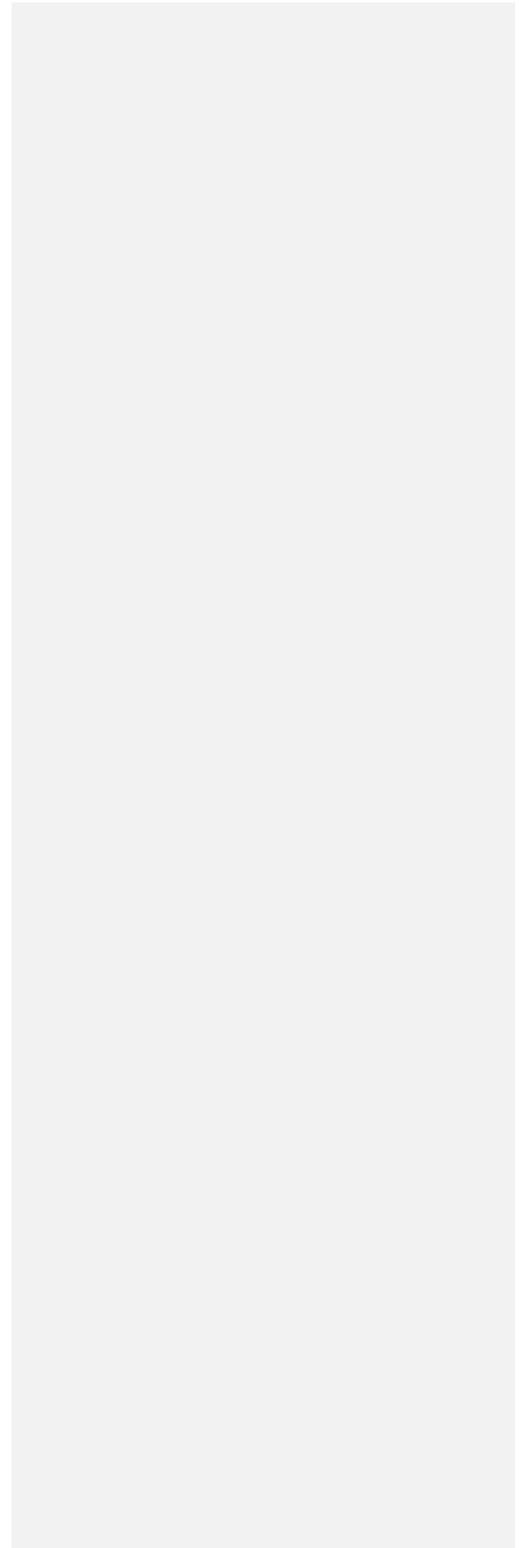
the ethnic origin representation of mothers participating in the SMILE program showed 60% African, 37% Black American, and 3% Caribbean.



During April, the nurses met weekly to review individual cases and plan for comprehensive home visits and staffing. Meetings emphasized best practices for managing difficult cases and these meetings included AAHP's social worker and clinical director. The nurse supervisor for SMILE resigned in April and an active search for a replacement has been initiated. In the interim, the clinical director continued providing leadership and supervision.

Because of the added economic strain caused by Covid 19 and related financial hardships, AAHP continued to help mothers get free diapers, car seats, cribs, breast pumps, supplies, health information, and equipment. In April, a graduate student intern from George Washington University conducted a webinar for pre-and post-partum mothers about the importance of managing finances during the pandemic. Her practicum presentation was entitled “Surviving Covid 19 Reasonably Under Budget” (SCRUB). The purpose of the webinar was to provide information to all SMILE participants about ways to manage financial matters and reduce stress caused by financial challenges that can affect mental health and well-being.

The table and charts below present an overview of the SMILE cumulative data for April 2021 as compared to the program performance in the calendar year 2019.



	PROFILES AND SERVICES	*Monthly Average of Calendar Year 2019	April 2021	Comments
1	<b>A) Currently Active Moms</b>	88	92	
2	Prenatal (still pregnant)	30	30	
3	Postpartum (Moms who have delivered)	57	62	
4	<b>B) All infants</b>	57	65	
5	Single Births	53	60	
6	Multiples	4	5	
7	<b>Case Load (A+B)</b>	147	157	
	<b>MOM'S ETHNICITY</b>			
8	African American Clients	39	34	
9	African Clients	46	55	
10	Caribbean Clients	3	3	
	<b>REFERRALS</b>			
11	HHS Prenatal Referrals Received	7	2	
12	Referrals from Other Sources	4	4	
13	<b>Total Prenatal Referrals</b>	11	6	
	<b>NEW ENROLLMENTS</b>			
14	Prenatal Moms Newly Enrolled During the Month	8	5	
15	Infants Newly Enrolled during the month	5	13	
16	<b>All New Enrollments for the month</b>	13	18	
	<b>DISCHARGES during the month</b>			
16	Prenatal Discharges	1	3	1)Early termination; 2) relocation out of County; 3) unable to reach a post-partum
17	Infant Discharges	5	7	
18	<b>Total Discharges</b>	6	10	
	<b>DELIVERIES during the month</b>			
19	Term Deliveries	5	11	
20	Preterm Deliveries	1	3	Placenta previa; 22 prematurity of twins
	<b>Total Deliveries</b>	6	12	
	<b>BIRTH OUTCOMES</b>			
22	% Healthy Birth Weight (% of Total Deliveries)	95%	75%	1 preterm baby
23	Number of Low Birth Weight	0	0	
24	Number of Very Low Birth Weight	0	0	
25	Infant Deaths (includes Stillbirths)	0	0	
26	Unfavorable Birth Outcomes (Congenital Anomaly, Fetal Demise, Miscarriage)	0	1	1 early termination due to trisomy 21
	<b>SERVICES</b>			
27	Total Home Visits	78	1	
28	Telephonic Consultations	8	243	It includes 14 consults by SW and 7 by CHW
29	Community Referrals Made	15	26	It includes 3 by CHW
30	Classes/Presentations Completed	4	17	
	<b>BREASTFEEDING MOMS</b>			
31	Percent Clients Breastfeeding Infants 0-3 months	92%	95%	

**Commented [WA1]:** Explain the number of attempt and means (phone, email, text home visit, follow-up with doctors, neighbor, emergency contact?)

32	Overall Breastfeeding Percent	73%	100%
	<b>INSURANCE</b>		
33	Clients with Private Insurance**	24	29
34	Clients with Medicaid Insurance**	62	63
35	Clients without Insurance	n/a	0

*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 reference year
Untoward Outcome
Desired Outcome

## B. Chronic Disease Management and Prevention (CDMP) Programs

### 1. CDMP Virtual Health Education Webinar

#### Health Champions

In April, five clients made significant progress towards achieving their disease management goals and received special recognition. One client lost 25lbs. over three years of active participation in CDMP. Another client lost 10 lbs. and lowered her cholesterol by 108 points, and now has normal blood pressure. Another participant started using her improved biometric measurements as a testimony to draw others to join CDMP. Two participants in the DPP reversed their prediabetes state. AAHP received the following statements in emails from two of those who were recognized:

*“Sir/madam/all, I am full of joy to receive these much-needed things as a gift. I will try to keep it up. I am feeling more fit than I felt 16 years back. Thanks for the good work you are doing for us. You are inspiring us with your very nicely tailored talks. Please keep the good work going. Thanks, Yours”*

*“Great news...My doctor is very pleased with the healthy progress I'm making. Per her records, I have lost 25 pounds in the last three years and she is happy with the direction my A-1 C is heading. She recommends I follow a vegan diet to get to <= 5.6. My doctor would like to receive information about the Diabetes Prevention Program and share it with her patients. I have included her office address and phone number below (Physicians Associates)”.*

In April, the CDMP team continued its six weekly classes via virtual webinars with collaborative curricula designed to guide participants to a healthier lifestyle. The Yoga and Zumba classes provided up to 120 minutes (of the 150 minute per week goal) of physical activity; the Health and Nutrition class offered plant-based meals; the Kick

Start Your Health (KSYH) I and II classes focused on evidence-based topics to help participants improve their overall health and management of the chronic disease; and the Diabetes Prevention Program (DPP) guided a cohort of participants towards the reversal of their pre-diabetes state. The month’s focus was diabetes. The classes included live cooking demonstrations, health education presentations, and videos. The KSYH series included a live demonstration of self-testing of blood glucose and simulated injections of medication used to treat Type 2 Diabetes. KSYH II hosted a presentation titled: “Plant-Based Nutrition for Diabetes: An Introduction/Diabetes Basics” with a guest presenter. The excellent presentation further reinforced CDMP’s curriculum.

The themes of the month were: Diabetes Overview including definition, prevalence, risk factors, and complications; and Nutrition Labels: Restaurant menu review, monitoring, treatment, and fitness. Participants learned how to reduce risk factors for diabetes. AAHP had testimony from a consistent participant who met the goal of an A1C of 5.1! The CDMP team welcomed new participants and continued to promote lifestyle changes throughout the month.

In May, the AAHP CDMP team will emphasize evidence-based health education and lifestyle behavior changes that focus on cancer prevention. Three guest speakers have confirmed for May to address Stress Management, Surviving Breast Cancer, and Hearing Loss. They will offer support, guidance, and inspiration for everyone living with a challenging medical diagnosis.

Below please find AAHP’s monthly report for April 2021. The reporting format includes the following:

- The class and outreach activities are coordinated.
- The number of individuals - participants for class, duration of attendance, and topics covered.
- The number of individuals - participants provided individual or group education.

#### CDMP CLASS Activities

ACTIVITY	HOURS	DATA REQUESTED	TOPIC COVERED
Health and Fitness on-line Webinar  ZUMBA: April 6, 13, 20, 27  YOGA: April, 7,14,21,28	11am – 12pm  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 own home through movements.  <ul style="list-style-type: none"> <li>• <b>Zumba Highlight:</b> Focused on balance, movement, posture, toning, and cardio. This month light weights were added. This will help build bones and increase HDL levels.</li> </ul>

			<ul style="list-style-type: none"> <li>• <b>Yoga Highlights:</b> Focused on the five elements of Ayurvedic medicine. Based on Hindu philosophy, Ayurveda is known as the “Science of Life.” The yoga classes for April focused on helping participants understand that all things in nature are made up of five elements: air, water, ether, fire, and earth. Everything in life is made up of a combination of these elements, and we must keep these elements balanced to enjoy optimal health and wellness.</li> </ul> <p>In both classes, participants learned how fitness can prevent, manage, and reverse the risk of chronic diseases, such as hypertension and heart disease. Participants continued to maintain or improve in their HEDIS measures and make positive behavioral changes through increased levels of physical activity and the selection of a more nutritious diet.</p>
Kick Start Your Health I (Diabetes) April, 7,14,21,28	6 pm – 7 pm	Class and Height, Weight, BP, BMI, %BF, Blood pressure, cholesterol	This month’s class topic was diabetes and understanding, terminology, and how to reduce risk through education, nutrition, and diet. The instructor provided an on-screen demonstration of the ease and speed to self-monitor at home while reducing the pain associated with testing and injections. Participants continued to maintain or improve in their HEDIS measures and to make positive behavioral changes through increased levels of physical activity and the selection of a more nutritious diet.
Health and Nutrition VEGAN, Plant-Based April 8, 15, 22, 29	1pm - 3pm	Weight, BP, BMI, %BF, Glucose, Cholesterol screenings	Class topics were focused on helping participants make healthy eating choices and learning how food choices can reduce or increase the risk of chronic conditions. AAHP’s Food for Life nutritionist/chef continued to demonstrate plant-based diet/healthy cooking to improve pre-diabetes and diabetes outcomes. Cooking demonstrations and recipes were shared.  Participants continued to maintain or improve in their HEDIS measures and make positive behavioral changes through increased levels of physical activity and the selection of a more nutritious diet.

Kick Start Your Health II Online Webinar. Diabetes April 8, 15, 22, 29	6 pm – 7 pm	Weight, BP, BMI, %BF, Cholesterol screenings	This month's class topic was Diabetes and AAHP provided classes on obesity, fitness, and nutrition. A guest speaker provided studies showing how plant-based and vegan lifestyles impact diabetes and overall health. The class examined the nutrition label and the instructor demonstrated how to find the nutrition charts for restaurants and foods online. She also reviewed an example restaurant suggested by a participant. Participants continued to maintain or improve in their HEDIS measures and make positive behavioral changes through increased levels of physical activity and the selection of a more nutritious diet.
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**CDMP Virtual Webinar Attendance Metrics April 2021**

Date(s)	Health and Fitness 11 am – 12 pm				KSYH I 6pm – 7:15pm				Health and Nutrition 1pm – 2:15pm					KSYH II 6pm – 7:15pm			
	4/06 & 4/07	4/13 & 4/14	4/20 & 2/21	4/27 & 4/28	4/07	4/14	4/21	4/28	4/01	4/08	4/15	4/22	4/29	4/08	4/15	4/22	4/29
Class Size	37	39	37	45	10	17	12	13	27	28	33	31	37	11	15	16	13
<b>TOTAL</b>	158				52				156					55			
<b>Avg.</b>	40				13				31					14			
<b>Natl. Avg.</b>	4-6 (For classes that meet weekly)				4-6 (For classes that meet weekly)				4-6 (For classes that meet weekly)					4-6 (For classes that meet weekly)			

Participants	Health & Fitness: Zumba/YOGA	KSYH I (Diabetes)	Health & Nutrition: Vegan	KSYH II (Diabetes-related)	Total
Male	14	8	1	3	41
Female	144	47	155	52	398
Total	158	52	156	55	421
% African American	100%	95%	98%	95%	97%
Health Profile					
Average Systolic		126.2 mmHg	124.8 mmHg	128.1 mmHg	
Average Diastolic		89.1 mmHg	78 mmHg	88.5 mmHg	
Average HbA1c		6.3 %	5.4 %	6.4 %	

**Commented [WA2]:** What efforts are underway to recruit Black male due to the mortality death and morbidity rates?

Average Glucose		119.2 mg/dL	98.8 mg/dL	98.8 mg/dL	
<b>Diabetes</b>					
<i>Pre-diabetes cases</i>	3	3	4	3	<b>13</b>
<i>Diabetes cases</i>	2	6	3	4	<b>14</b>
<b>Hypertension</b>					
<i>Pre-hypertension</i>	2	6	3	3	<b>14</b>
<i>Hypertension</i>	3	6	4	3	<b>16</b>
<i>Uncontrolled Hypertension</i>	0	0	1	1	<b>2</b>

## 2. Diabetes Prevention Program

In April, the DPP class, which meets on Tuesdays from 6:00 pm-7:00 pm, reached the milestone of 17 weeks of continuous education and support to people with prediabetes. Taught by AAHP's clinical director, the weekly presentations focused on the following four topics:

- Finding Support
- Eating Well Away from Home
- Staying Motivated
- Coping with Weight Loss Stall.

Participants attended sessions assiduously as evidenced by a high retention rate equaling 95%. AAHP staff called participants at the end of each week to check on their progress and to enter their daily weight and activity into the DPP Lifestyle Coach's Log.

Significantly, the six-month goals established for weight and physical activity at the beginning of the program were exceeded ahead of schedule. Furthermore, four of the 14 participants who attended at least 15 sessions have reversed their prediabetes state.

The DPP participant attendance and health data for April are presented in the tables below:

**April 2021 DPP Attendance**

Participants	6-Apr	13-Apr	20-Apr	27-Apr	Total
Male	3	3	3	3	<b>12</b>
Female	14	13	12	12	<b>60</b>
Total	17	16	13	13	<b>73</b>
% African American	100%	100%	100%	100%	<b>100%</b>

**Commented [WA3]:** What efforts are underway to recruit Black males as requested above?

**April 2021 DPP Health Metrics**

Health Profile	Baseline	Jan	Feb	Mar	Apr	May	Jun	Goal
Average Weight (lbs.)	213.3	213	211	209.2	205.7			206.9
Average Weekly Activity (Minutes)	140	175.3	183.2	197	212			200
Average HB A1C (%)	5.91%				5.8			5.60%
Average Glucose (mg/dL)		n/a						

Commented [WA4]: Provide for male vs female?

### 3. dMeetings

In April, AAHP added 25 new dMeetings participants. Most of the new participants came from a new partnership with Trinity University that formed after AAHP's data coordinator spoke to a university representative about the program. By the end of April 2021, dMeetings had enrolled a total of 143 participants for the fiscal year 2021, and 80 have earned certificates of completion.

dMeetings Enrollment and Completion by Month in Fiscal Year 2021

	20-Jul	20-Aug	20-Sep	20-Oct	20-Nov	20-Dec	21-Jan	21-Feb	21-Mar	21-Apr	Total
New Enrollments	8	23	10	10	23	9	8	3	24	25	143
Completion Certificates Awarded	4	15	3	4	18	5	5	3	9	14	80

### 4. Remote Patient Monitoring Program (RPM)

This month, the RPM team maintained a close engagement with the enrolled participants with phone calls reminding them to continue with their self-monitoring and measurements, to train them in the use of the application designed to access their data on the care portal and to support them in their health journey. One client dropped out of the weight monitoring component of the RPM but is still enrolled for blood pressure.

Commented [WA5]: State reason for drop out? What efforts was offered to prevent drop out, if any?

Active Days of RPM Participants

Number of Active Days	0 day	1 day	Up to 10 days	16-27 days
Number of Participants	0	0	4	25

### 5. Collaboration

In April, the clinical director presented a virtual seminar on the intersection of Diabetes and COVID-19 to the Washington Midtown Lions Club whose members reside mostly in Montgomery County. The session explored the significant contributing role of diabetes and obesity to the morbidity and mortality of COVID-19 among people of African descent. The presentation was well received by the seventeen members who attended. One member has since joined the CDMP.

Commented [WA6]: Is this organization based in Montgomery County or elsewhere. Please state and how many members are Montgomery County residents and representative of AAHP target populations.

## 6. Weight Management

Although the program focuses on achieving measurable and time-limited accomplishments based on personalized goals and objectives, the success of individuals drives AAHP's passion for working with those who seek support and assistance. One such case is illustrated below:

*"Client G.J. set the goal to get to 200 lbs. by May as her first of many milestones. On April 19, she weighed 203.5. I'm happy to report that on Monday, May 3<sup>rd</sup> she sent me a photograph confirming that she is 200.2 lbs. G.J. has been enrolled in the weight management program since October 26, 2020. She started our program weighing 233.0 pounds with a BMI of 32. As of May 3<sup>rd</sup>, she has a BMI of 27.6. She attributes her success to keeping only healthy food in the house and in one of our support group sessions she declared her "aha moment" as she excitedly said, "I'm creating NEW habits!" Along with having more energy and needing new belts, she is amazed that she "no longer WANTS the things that she thought she couldn't live without."*

The enrollment in the weight management program stands as follows:

	Enrollment	Discharged	Total Participants
<b>July</b>	2	0	2
<b>August</b>	5	0	7
<b>September</b>	4	0	11
<b>October</b>	9	0	20
<b>November</b>	3	2	21
<b>December</b>	0	1	20
<b>January</b>	3	0	23
<b>February</b>	0	1	22
<b>March</b>	5	2	25
<b>April</b>	3	2	26

The support group created for participants continues to meet on alternate Fridays from 12:30 pm to 1:15 pm. They met three times in April to discuss the following topics:

- Intermittent Fasting
- Staying Motivated
- Characteristics of the Blue Zones

The sessions averaged participation of 4.5 attendees who are engaged in robust discussions of these topics and determined to help each other overcome obstacles. The advice they shared included no longer buying snacks that trigger bingeing and putting snacks into single-serving containers. The group met also for a walk at Brookside Gardens on April 23. In the future, this type of walk in the park will become a regular intervention every two weeks.

**Commented [WA7]:** Are the miles being tracked to show increase/decrease or level.

The electronic newsletter, Weight Management Memo, had an open rate of 55.8% in March, up from a 42% open rate in February. This vehicle was used to support our clients on their weight loss journeys. The program now has 26 participants enrolled and has touched 34 lives. The ethnic mix of the enrollees consists of 19 African Americans, five Africans, and two African Caribbeans. Twenty-two (22) females and four males (one male's goal is to gain five lbs. and to date, he has gained 2.9 lbs. while continuing to maintain a normal BMI). He stays with our program because he is trying to break his sugar addiction.

Sixteen (16) participants came from our CDMP classes; one (1) is a former postpartum SMILE client, five (5) participants came from our Food Bank recruitment efforts, one (1) came from a staff referral, and three (3) were referred by a current weight management client.

Since the start of the program, the results are as follows:

- 4 participants had a 0 to 1.0-lb. weight gain. (One joined the program in October 2020. The other three enrolled in April and have not lost weight at the time of this report.)
- 22 of the clients have lost weight ranging from 29.3 to 0.8 lbs.
- median weight loss is 8.0 lbs.
- average weight loss for those losing weight is 9.8 lbs.
- average weight loss for all clients enrolled through December is 9.4 lbs.

**Commented [WA8]:** Provide the breakdown of weight lost by gender?

For participants losing weight, the average weight loss for April was 2.0 lbs. down from March's average weight loss of 2.4 lbs. The program has recently moved participants who have been seen weekly for more than 12 weeks to biweekly. Three (3) of these clients, who were at risk for weight gain, were moved back to weekly sessions for four weeks. This is an important time in the program as AAHP wants to empower participants to take more ownership of their weight loss as they continue their journey. This also allows the AAHP program to make room for new participants.

All participants are appreciating the "AAHP Weight Management Inspirations" which are sent by email every weekday morning between 8:00 [am](#) and 9:00 am EST. Many participants are beginning to share their inspirations with the entire group. All participants are learning how to coach themselves and are learning how what they eat impacts their health and their weight.

## C. Social Work Services

### 1. Screenings/Assessments

In April, AAHP's mental health screening tools have completed a total of 15 times. The link has accessed a total of 17 times, with an 88% completion rate. All screenings were completed either via desktop or phone devices as Montgomery County residents are continuously encouraged to utilize the tool at home (11 screenings via desktop: 4 screenings via phone). The preliminary results are as followed:

- 4 Wellbeing Screening
- 1 Generalized Anxiety

- 2 HANDS Depression
- 3 Wide Range
- 1 Disordered Eating
- 1 Posttraumatic Stress Disorder
- 1 Bipolar
- 2 Adolescent Depression

## 2. Mental Health Support

In April, AAHP's social worker provided mental health support to six (6) County residents on an ongoing basis. Of these, four (4) clients are SMILE moms experiencing symptoms of poor stress management, depression, and/or anxiety. Clients were screened utilizing the online mental health screening tools. The additional two (2) were community-based referrals for general mental health resources. Social work also worked with providers at Pine Crest Elementary School to provide culturally competent mental health referrals for parents in need.

**Commented [WA9]:** Provide the number of parents in need. Any services to the children?

One client in particular (A.B.) reached out to request resources to address the emotional turmoil she had been experiencing while watching the Derek Chauvin trial. This client is a 56-year-old, single Black woman residing in a supported living program. She is a reformed addict who has been sober for nearly 30 years and has done well managing her diagnosed mental health disorders, which include PTSD and bipolar disorder. However, over the last six months, the client has reached out to social work on several occasions for emotional support and resources. The secondary trauma and fear experienced by watching the clips of Mr. Floyd's death, the details exposed during the trial, paired with the alleged follow-up comments made by a few of her housemates affected her emotional well-being and left her feeling bouts of isolation, depression, anger, and hopelessness. To help manage her emotions, AAHP social work connected her to the Peer Support Recovery network through The Tree of Hope Program (which are longstanding collaborators with AAHP). Social work has also encouraged this client to participate in town hall meetings to make her voice heard and concerns known. And most importantly, social work has made several attempts to connect this client to professional mental health support. Social work continues to provide mental health consults, education, and resources to this client as needed.

**Commented [WA10]:** Did the social try to redirect A.B. to reduce the amount of time spent looking at clips that are causing the trauma to reoccur?

### Presentations

During April, social work led and prepared to lead many virtual webinars and discussion groups on topics ranging from mental health, racial stress, and stress management. On April 24<sup>th</sup>, social work presented on The African American Woman & Stress with the National Council of Negro Women (Montgomery County, MD Section). The 57 attendees were provided with education on the health impacts of chronic stress, tools for management, and resources for additional support. During the presentation, the discussion included contributing factors to mental illness, risk factors, protective factors, racial bias in providing care, and other aspects of care affecting our community. Clients were receptive, inquisitive, and shared resources. This is significant for AAHP, as AAHP aims to further discuss mental health and reduce the stigma associated with the topic.

### **Collaborations**

AAHP's social worker and nurse case manager interviewed with the County Council's Office of Legislative Oversight to provide in-depth insight on social risk for women during COVID. AAHP provided them the information towards a project that is looking at the disparate impact of COVID on women (and within that, women of color and women in immigrant communities). AAHP reviewed and discussed four areas of impact on SMILE moms: employment, childcare, healthcare, and domestic violence.

**Commented [WA11]:** When did this occur and who did staff provide the information. What is the purpose of information and will information be posted or release to the public? If this occurs, it is best that I be notified.

### **Sexual Health**

The sexual health team continues to meet weekly to develop sexual health-based training and webinars. Social work continues outreach and communication with the team and collaborating agencies. In this month, the sexual health team has set dates for upcoming trivia. Dates have been set for May 12, May 15 & May 26. Event details have been shared with various partners and past collaborators, including all members of the ICAP (Interagency Coalition on Adolescent Pregnancy).

**Commented [WA12]:** What has been produced with the AID funds for FY21. Will this occur in FY 21?

### **SMILE**

Social Work received two (2) referrals from SMILE nurses for clients and completed a total of (15) telephonic visits with clients in April, and multiple attempts to two (2) unresponsive clients. Most consults involved issues with and/or lack of healthcare insurance. Additional calls were made based on follow-up support, mental health needs/intervention, and prenatal care appointment assistance. In April, SMILE encountered a few significantly high-risk cases that took time and diligence to address.

A recent case the SMILE team has been working nearly daily on involves a mom who is in a constant state of distress and crisis. This is mainly due to a current rodent infestation in the home, combined with another social risk. This issue has led to great difficulty managing her emotions and mental health care. Additionally, the SMILE team believes this stress may put her at greater health risk, especially while in her postpartum period. The five young children living in the home have also been affected by the living conditions. This client has thrown away furniture due to its destruction by the mice and her children have awakened with mice in their beds, are fearful to enter the kitchen or use the appliances, and have observed mice in all parts of the home. These extreme conditions have been debilitating for this family and have been described by a client as "unlivable." The client reports little to no sleep most nights and suffers from anxiety, sadness, and feelings of helplessness. SMILE is concerned about the client's resilience and ability to cope at this time. Child Welfare was also notified of these concerns and has been involved in the past.

In addition to this current concern, the client has a history of depression and trauma. This is a prime example of how environmental and social conditions can have a direct impact on mental wellbeing, self-care application, and health outcomes.

### **SMILE Monthly Newsletter:**

This month's SMILE newsletter focused on "How to Be a Resilient Parent." This topic was chosen based on requested discussion between SMILE moms & SMILE nurses and/or social workers.

The analytics for last month's newsletter on the topic of "Postpartum Anxiety" conclude that SMILE wellness newsletters continue to trend above the national average open rate for e-newsletters. Last month's newsletter was sent to 100 participants, with an open rate of 45% (average industry open rate = 21%).

**Mental health** – see report above for an overview. Three (3) referrals were made to various agency for mental health care including Everymind, Innovative Clinical Solutions, & All-Day Medical Care

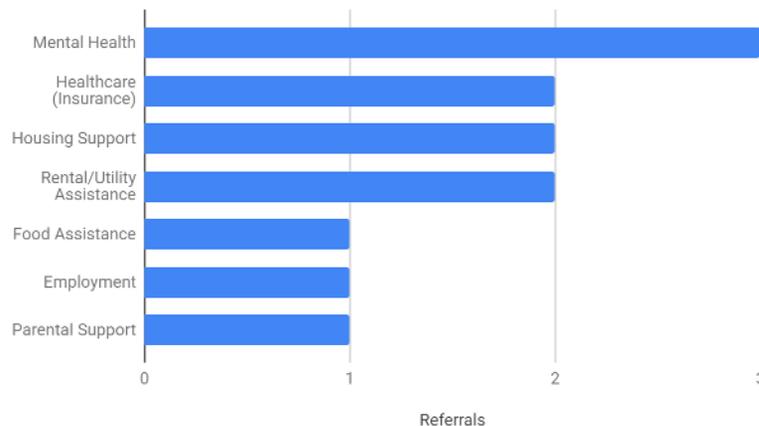
**Healthcare (insurance)** - Social work has worked with two (2) clients in establishing care in April.

**Housing Support** - Provided support to two (2) clients for housing support including establishing case management to prevent homelessness and assistance with a security deposit.

**Employment** – Referred to work source Montgomery for resources and assistance

**Parental Support** – Referred to Healthy Families (Family Services) for in-home support

Referrals vs.



#### D. HIV/STI/AIDS

##### 1. Sexual Health Program for Young and Young Adults:

Over the past six months, a team of AAHP staff has worked collaboratively to develop an innovative educational program to teach young people about the importance of sexual health to overall health, and steps they can take to protect their health today and

in the future. To educate and inform, the team has created Kahoot a game to capture their attention while acquiring knowledge and skill to promote sexual and emotional health. For several weeks the team has developed and tested the use of the game to educate and inform young people and made appropriate revisions as required and recommended.

May 12<sup>th</sup> and 15<sup>th</sup> have been chosen for the go-live implementation. A flyer has been developed to recruit participants through several organizations including the Patcha Foundation, King and Priests Church, Allen Chapel, and the African Affairs Advisory Group to launch the educational curriculum. The target age group for the game is between the ages of 13 and 20 years old. The flyer will be distributed throughout Montgomery County in East County, White Oak, and Dennis Ave Health Center.

Members of AAHP’s sexual health team will host the game. Over two days, six (6) sessions will be conducted with each session lasting 20-25 minutes and include 25 participants. The objective is to educate, inform and increase the awareness of between 100 and 130 youth about sexual health and wellness.

**a. Collaboration with Dr. Kathrine Kelly at the Homeless Shelters in Montgomery County (KCM)**

HIV screening was an important component of AAHP’s program services in April. Each participant was screened for HIV infection, Blood Pressure, Glucose, A1C in all three (3) shelters.

Participants with elevated results were referred to Dr. Kelly. Some participants were reluctant to get tested monthly due to fear of COVID. The goal for the coming month is to identify alternative testing sites to boost the outcomes. Snacks and refreshments from Manna Food were given weekly as incentives for the clients. AAHP distributed health information pamphlets on sexual health for adults, teens, and LGBTQ populations; diabetes; weight management; mental health; nutrition; smoking; and cancer.

The chart below lists the specific location, dates, and number of persons screened.

Sites	Date	Number Screened
Progress Place	April 7	9
Men Shelter, Crabbs Branch	April 14	5
Men Shelter, Taft Court	April 21	12
Men Shelter, Piney Branch	April 28	10
<b>Total screened</b>		<b>36</b>

**b. HIV Testing at the Health Department-Dennis Ave**

Six (6) were tested for HIV at the Health Center this month, including three (3) African Americans (2 males & 1 female), two (2) Caucasians, and one (1) Latino. All results were negative. Clients were referred for STD testing after their HIV testing.

**A total of 42 HIV Screenings for April.**

- 36 in all shelters
- 6 at the Health Department

(Please see the Statistical Report below)

HIV TESTING REPORT		Apr-21		
<b>African American</b>				
	<b>Age Group</b>	<b>Male</b>	<b>Female</b>	
	1947 -1969	6	1	
	1970 -1989	17	2	
	1990+	12	1	
Total		<b>35</b>	<b>4</b>	<b>39</b>
<b>All Others</b>				
		<b>Male</b>	<b>Female</b>	
	1947 -1969	1	0	
	1970 -1989	2	0	
	1990+	0	0	
Total		3	0	3
<b>GRAND TOTAL</b>				<b>42</b>

**c. Collaboration with Montgomery County Ending HIV Epidemic Initiative (EHE)**

Four meetings were held in April with AAHP staff attending three. On April 10, National Youth HIV/AIDS Awareness Day, EHE honored the importance of adolescent sexual health, with two training sessions in partnership with the UMD AETC.

On April 20<sup>th</sup>, 2021, in honor of National Youth HIV/AIDS Awareness Day, a panel of local experts, including Montgomery County’s health officer discussed:

- HIV & STI epidemiology among adolescents in Montgomery County
- Limitations of analyzing sexual health through a lens of disease and pregnancy prevention.
- Common barriers teens encounter in accessing sexual health information and resources.
- Envisioning a healthier future for Montgomery County Youth.

On April 29<sup>th</sup>, 2021, a meeting was held on Creating Sex Positive Spaces for Adolescents and Young Adults. Trainers from STAR TRACK shared useful

information for healthcare and social service providers about creating safe, affirming spaces and services to promote sexual health for all young people, with specific considerations for LGBTQ youth of color, and those most often marginalized from the healthcare and social services landscape. The training will cover, among other topics:

- How to identify and break down power dynamics, cultural barriers, and stigmas that foster mistrust between adults and teens
- How to open a basic dialogue with young people about sex

**d. New Initiative:**

AAHP is planning HIV Testing and other screenings at Hampshire Tower in the coming months in collaboration with Patcha Foundation. AAHP will meet with the property manager in May to see how to bring testing to the community.

**e. Planning for Community Day Event 2021**

AAHP staff participated in the taping of the “We Are the African American Health Program” team video. Video shoots took place while testing at one of the Men’s shelters in Rockville. Pictures were taken at the Dennis Avenue Health Center to show the community one of AAHP’s screening sites.

**f. Supply Inventory and Office and Community Day Giveaway Order**

During April following supplies were purchased [to meet unmet needs.](#)

- 100 HIV INSTI Kits
- 1 HIV Controls Kits
- 1000 Condoms
- Pack and Play, Car Seats.

Deleted: or requested

Deleted: :

	Peoples Community Church	East County	Progress Place	Men Shelters
<b>Apr-21</b>				
Water Bottles	60	75	30	50
Stress Ball	25	20	0	0
AAHP Lunch Bag	50	50	30	50
Mental Health Screening Card	40	100	30	15
AAHP Know your Number Card	60	75	30	50
Condoms	100	150	100	250
Smile Brochure	50	50	10	0
PrEP is for you Pamphlet	50	20	15	50
HIV treatment Work Cards	25	50	0	50
Diabetes	40	50	8	50
STD Facts for teen Pamphlet	40	25	30	20
Colorectal Cancer Booklet	10	5	0	10
Mammogram Booklet	20	15	0	0

AAHP Bookmark	50	50	10	10
Cancer Pamphlets (Men)	5	10	0	10
Cancer Pamphlets Women	11	10	0	0
AIDS Ending the Epidemic	30	50	20	50
HIV- Get Tested	40	30	30	20
Cholesterol Pamphlets	15	10	0	0
Youth and Sexual	40	50	30	20
Weight Management	40	50	30	10
Holy Cross Plastic Bags	30	30	0	0
AAHP Card	40	50	0	15
African American Bags Given	50	55	25	43
Others (Hispanics, Asians, Caucasian)	10	20	5	7
<b>Total of number bags given:</b>	<b>60</b>	<b>75</b>	<b>30</b>	<b>50</b>
<b>Grand Total</b>				

## Planning and Administrative Activities

### A. Meetings

AAHP staff continued to facilitate the monthly AAHP Executive Committee and Executive Coalition meetings by setting up Zoom logins for meetings. Also, AAHP staff completed and submitted a draft copy of the March minutes for review. Also, members of the AAHP leadership and key staff participated in the ongoing weekly meetings of the Community Day Planning Committee, The Executive Committee, and the April Community Coalition Meeting held on the 8<sup>th</sup> of April.

### B. Videoconferencing System Use and Training

AAHP staff continued to send weekly reminders to CDMP participants (with all the Zoom links) and text messages using the Flock Note app on the day of the CDMP classes and after the class, sent emails to thank all attendees, provide resources based on their needs during the session, and include a video recording for those who missed the session. AAHP staff continued to host short sessions after each CDMP class to welcome new members and answer any questions; provide next steps to facilitate discussion; walk through the chat features, and to resource navigation, outreach, referral, and data collection to ease communication and initiate follow up. Educational materials were emailed, the zoom Share Screen and chat box features were explained, announcements were made, and class participants were encouraged to register for the next classes.

### III. APPENDIX A – Social Media Report

AAHP Health Notes - Distributed: April 26, 4:15pm

#### April Campaign Metrics

	March	April
General List Recipients:	1622	1623
Successful deliveries:	1258	1250
Open rate:	19.6%	24%
Click rate	9%	8%
Unsubscribed because of this message	2	1

AAHP’s April Health Notes was titled “Spring Tings” and began with a feature article on National Minority Health Month, which encouraged readers to get informed about protecting themselves against COVID-19 by getting “vaccine-ready.” In observance of STI Awareness Month, the following article offered five lesser-known but important facts about STIs. A banner notified readers that April 10 was National Youth HIV/AIDS Awareness Day and prompted them to learn more about the efforts to educate young people to end the HIV epidemic. The next article outlined the health risks of simultaneously drinking alcohol and smoking as they pertain to oral cancer, which affects Black men disproportionately. The changing of the seasons and the beginning of Springtime warranted the offering of a few tips for readers to take advantage of new opportunities for renewal. The health hint advised readers to use nontoxic products when Spring cleaning. The featured video was W. Kamau Bell’s advertisement for the video series, “the Conversation,” which seeks to educate African Americans about the COVID-19 vaccines with questions answered by African American doctors. The featured recipe was the Spring Asparagus Salad with Olives, Lemon, and Couscous.

April’s Health Notes was opened by 301 readers. The open rate of 24% was higher than last month’s open rate of 19%, on par with AAHP’s average and 4% higher than the industry average. April’s click rates of 8% were 1% lower than last month’s and slightly lower than the industry average. The bounce rate also remained the same. There were two unsubscribes.

#### Facebook

AAHP’s Facebook page’s performance in April was similar to March’s performance. The number of followers and post likes increased significantly while the number of posts and comments was slightly reduced. The post featuring an AAHP partner, the Pro Bono Counseling Center received the most engagement.

#### Facebook Metrics – April 2021

	Followers	Posts	Likes/Love	Comments	Shares
Total	733	28	61	0	9
Change from last month	+28	-4	+20	-2	+2

### Twitter

While this month Twitter's performance was similar to last month's, the number of profile visits and mentions increased significantly.

#### Twitter Metrics – April 2021

	Followers	New Followers	Tweets	Profile Visits	Retweets	Mentions	Tweet Impressions
Total		3	31	469	5	21	3269
Change from last month	370	-4	-1	-107	-6	+5	-2711

### Instagram

AAHP's Instagram channel continued to perform well, with slightly lower numbers compared to March. The number of impressions increased dramatically. The post featuring an AAHP partner, the Pro Bono Counseling Center received the most engagement

#### Instagram Metrics – December '20

	Followers	Posts	Post Likes	Engagement Rate	Impressions	Reach
Total	<b>192</b>	29	112	2.2%	975	31
Change from last month	+9		-32	-.5%	-168	-3.5

#### IV. APPENDIX B - Health Notes



THE NEWSLETTER OF THE AFRICAN AMERICAN HEALTH PROGRAM | APRIL 2021

www.aahpmontgomerycounty.org



**NATIONAL  
MINORITY  
HEALTH  
MONTH**

**#VaccineReady | April 2021**

April is National Minority Health Month. This year's theme is #VaccineReady and will focus on encouraging Black/African Americans to get vaccinated against COVID-19. As we work to bring this pandemic to an end, more Black/African Americans getting vaccinated counts as a critical measure to reduce the disproportionate impact of COVID-19 within the Black Diaspora communities nationwide.

According to data from Montgomery County Department of Health and Human Services, in Montgomery County, Black/African Americans contributed to 17.7% of COVID deaths, while making up 19% of the total population. While these numbers do indicate a disproportionately lower death rate, Black/African Americans residents have a lower vaccination rate as well. As we see the light at the end of the tunnel, it's important to remember that pandemic is not yet over, so we must maintain due diligence and use every tool at our disposal to preserve our health.

During this Minority Health Month, AAHP encourages residents to:

- Get the facts about COVID-19 vaccines.
- Share accurate vaccine information.
- Get vaccinated when the time comes.
- Practice COVID-19 safety measures, including:
  - Wearing a mask to protect yourself and others.
  - Washing your hands often with soap and water for at least 20 seconds.
  - Staying at least six feet from people outside your household.
  - Avoiding crowds.

Find more COVID-19-related resources on AAHP's website [here](#).

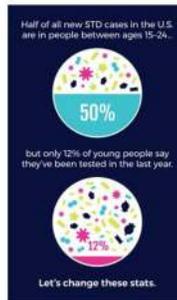
Source:  
[www.montgomerycountymd.gov/covid19/data/case-counts](http://www.montgomerycountymd.gov/covid19/data/case-counts)  
[www.montgomerycountymd.gov/covid19/vaccine/](http://www.montgomerycountymd.gov/covid19/vaccine/)



April is STI Awareness Month. The Centers for Disease Control estimates that nearly 20 million people contract an STI each year. Many STIs could be prevented with clearer understanding of sexual health risks and mitigating those risks with appropriate and healthy sexual behavior.

Did you know the following facts about STIs?

1. **STIs can affect female fertility.** Untreated gonorrhea and syphilis can lead to Pelvic Inflammatory Disease (PID), which can cause permanent damage to a female's reproductive system, leading to infertility. According to the Center for American Progress, 24,000 women in the U.S. are diagnosed with infertility caused by untreated STIs each year.
2. **It's possible to test negative for an STI and actually have it.** Each STI has an incubation period, which is the time between contracting the STI and when your body has produced antibodies (your body's natural immune defenses) to fight the STI. To get more accurate results, test after the incubation period has ended.
3. **Men and women are not affected by STIs equally.** Compared with a man's reproductive anatomy and environment, a woman's reproductive anatomy and environment enables viruses and bacteria to enter the body and thrive easier. Furthermore, women experience more long-term complications from untreated STIs, including infertility and the possibility of transmitting an STI to her infant during childbirth.
4. **Condoms don't prevent all STIs equally.** While condoms, when used consistently and correctly, are highly effective in preventing HIV, which is transmitted via body fluids, they are less effective in preventing genital ulcer diseases like herpes, syphilis, and HPV (human papilloma virus) which can be transmitted via skin-to-skin contact from areas condoms don't cover.
5. **Some people with HIV cannot transmit it to others.** Antiretroviral treatments can reduce a person's viral load so that they are undetectable, meaning the levels of HIV in that person's body are too low to be detected. A person with an undetectable viral load has zero risk of transmitting HIV to others.



**Sources:**

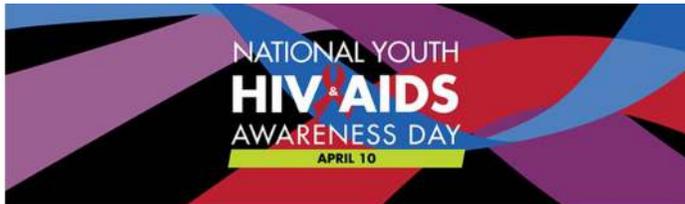
[www.healthypeople.gov/2020](http://www.healthypeople.gov/2020)

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

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

[www.cdc.gov/std/health-disparities/stds-women-042011.pdf](http://www.cdc.gov/std/health-disparities/stds-women-042011.pdf)

[www.healthline.com](http://www.healthline.com)

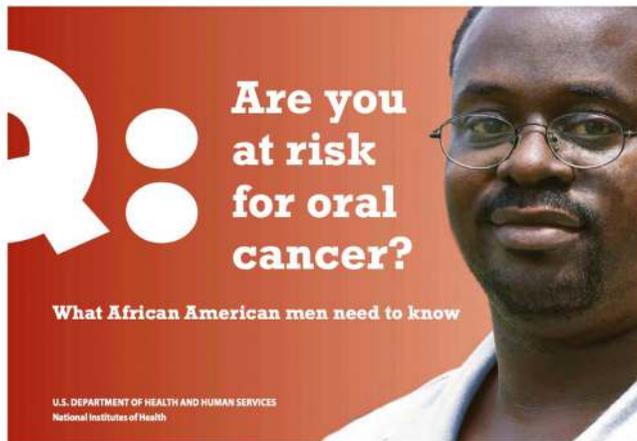


One in five new HIV diagnoses occurs in young people ages 13-24. Learn why investing in youth health and education is critical to ending HIV: [go.usa.gov](http://go.usa.gov).



Drinking alcohol and smoking cigarettes at the same time can work as a one-two punch towards the development of oral and pharyngeal cancer (cancer of the mouth, throat, tonsils, and tongue). Alcohol dehydrates cell walls, making it easier for the carcinogens in tobacco to penetrate mouth tissue. This process explains why alcoholism is the second biggest risk factor in developing oral cancer behind smoking.

More than 51,000 people are diagnosed with oral cancer each year and one person dies from it every hour. Many people who survive oral cancer suffer from long-term health problems such as severe facial disfigurements and difficulties eating and speaking. Unfortunately, African American men face higher risk of oral cancer compared to other demographics. Learn more by clicking on the picture below.



Sources:

[American Association of Oral and Maxillofacial Surgeons](#)  
[The Oral Cancer Foundation](#)

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Spring has sprung! Better weather and blossoming flowers inspire us to take advantage of the new possibilities in our midst. Celebrate springtime by focusing on new health promoting habits that can serve you well in the year ahead, such as:

**Eating more greens.** Consider leafy greens for every meal, even breakfast. Sauteed spinach or kale pair wonderfully with scrambled eggs or an omelet. A handful of spring mix can easily go inside your favorite breakfast smoothie. For lunch, eat sandwiches with romaine lettuce instead of bread. Dinner salads are always a classic.

**Infuse your water.** Drinking a big glass of lemon water upon waking up can start your day off just right. You can also include sprigs of mint, basil, or other herbs for variety. Cucumbers, strawberries, and citrus fruits are also popular choices in water. A few tea bags in a gallon jug of water can offer even more variety.

**Stretch!** Implement stretching into your morning and nighttime routines. No matter your age or fitness level, stretching can improve your flexibility, posture, and overall health. Stretching also helps with stress relief. For more guidance on the best ways to stretch, join AAHP's yoga classes on Wednesdays at 10am. Learn more [here](#).

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## Health Hint

For Spring cleaning, choose non-toxic products instead of conventional cleaning products for safety and health. Conventional cleaning products that contain chemicals such as bleach and ammonia can cause allergies, chemical burns, and rashes, and can be unsafe for pets and children if they accidentally ingest them. You can actually make your own cleaning products using ingredients like vinegar and lemon juice.

Source:

[www.thespruce.com](http://www.thespruce.com)  
[www.care.com](http://www.care.com)

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## Featured Video

The anchor video for THE CONVERSATION features W. Kamau Bell in conversation with health care workers addressing some of the most common questions and concerns Black people have about COVID-19 vaccines:

WE@COVID | BCAP

# THE CONVERSATION

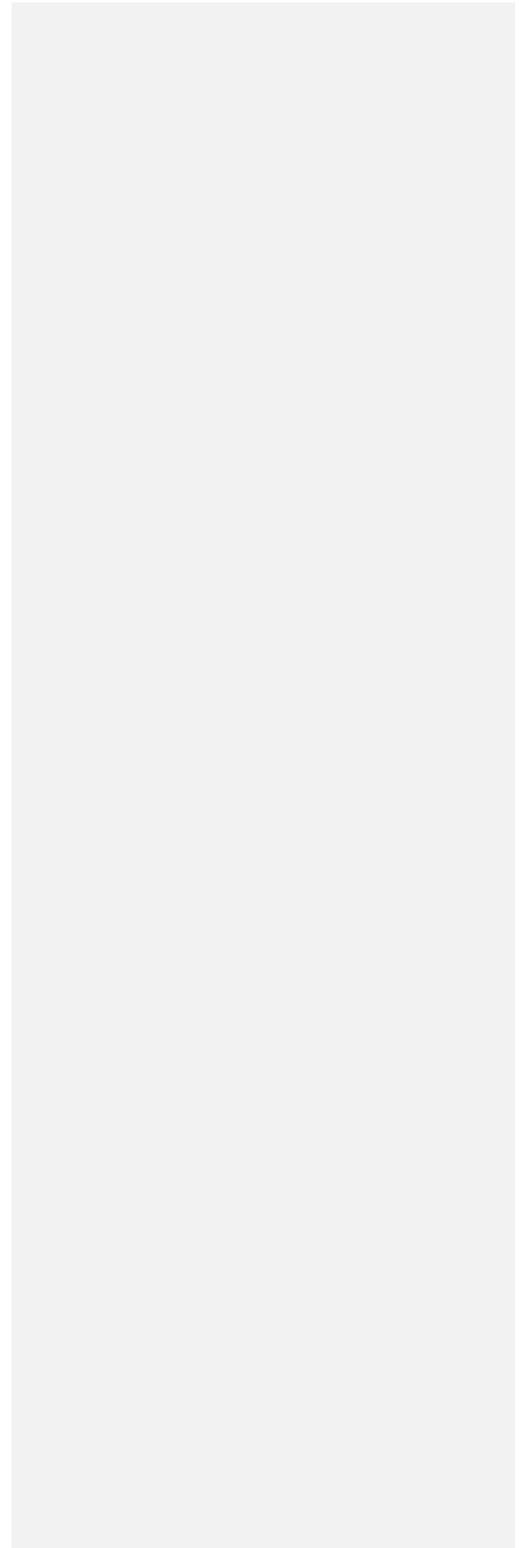
BETWEEN US, ABOUT US.™



W. Kamau Bell talks with Black health care workers about the COVID Vaccines



Featured Recipe: Spring Asparagus Salad with Olives, Lemon and Couscous



**Ingredients:**

- 1-2 bunches asparagus, trimmed
- 1-2 tablespoons olive oil
- Salt and pepper to taste
- 1 ½ cups dry Israeli couscous (uncooked) or use orzo, quinoa, or regular couscous (about 4 cups cooked)
- ½ cup kalamata olives (pitted, sliced)
- ½ cup feta cheese (optional)
- ½ cup toasted pine nuts (optional, sub slivered almonds)
- ½ cup dill or Italian parsley, chopped
- 2 tablespoons tarragon (optional)
- 3 scallions, sliced at a diagonal
- Zest from one lemon (divided)

**Dressing:**

- ½ cup olive oil
- 3 tablespoons whole grain mustard
- 2 tablespoon red wine vinegar
- 2 tablespoon lemon juice
- 1 teaspoon salt
- 1 teaspoon pepper

**Instructions:**

1. Preheat the oven to 425 F.
2. Trim the tough ends of the asparagus off. Lay them on a baking sheet and drizzle with 1-2 teaspoons of olive oil, then sprinkle with a generous pinch of salt and cracked pepper, and half of the lemon zest. Roast in the oven until just tender, about 20-25 minutes. Cut into bite size pieces.
3. Bring a large pot of salted water to a boil. Add Israeli couscous, and cook until al dente.
4. Make the dressing. In a small bowl, stir all ingredients together.
5. Drain couscous, and place in a large bowl. Toss it with the dressing, olives, asparagus, feta, pine nuts, fresh herbs, scallions and remaining lemon zest.
6. Taste and adjust salt and lemon to your liking.
7. Serve warm, or chill and serve as a salad.
8. If serving chilled, taste the salad once more before serving and adjust salt, lemon and olive oil one more time as the couscous may soak up some of the flavorful dressing.

Source: [www.feastingathome.com/spring-asparagus-salad](http://www.feastingathome.com/spring-asparagus-salad)

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



The African American Health Program is funded and administered by the Montgomery County Department of Health and Human Services and implemented by McFarland & Associates, Inc.

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