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Introduction

“As a public health provider, we face the challenge of both educating our constituents and ensuring that they follow through to achieve the desired health outcomes. We understand the myriad factors that have made African Americans the sickest population with the lowest life expectancy. Because of this understanding, AAHP emphasizes engaged care, over episodic care, where each constituent develops a long-term plan for self-monitoring and self-care to reduce and mitigate sickness and disease.”

– George McFarland, MSW, AAHP’s Program Manager, has been an executive in the healthcare field for over 30 years.

Black Lives Have Always Mattered to the African American Health Program (AAHP). From its very inception at the 1998 symposium, “Healthy Communities Equal Healthy Babies,” addressing the alarming fact that the African American infant mortality rate in Montgomery County was four times that of white infants to the 2020 COVID-19 pandemic, where African Americans account for 41% of the COVID-19 deaths statewide yet are only 29% of the population, AAHP has maintained its focus on helping Montgomery County residents of African descent enjoy the same quality of health as the rest of the population.
To move closer to this vision, in FY20 the Department of Health and Human Services continued its contract with McFarland & Associates to administer public health programs to help black County residents reduce health disparities, avoid needless suffering, and live longer, healthier lives from pre-birth to old age. During an especially challenging year, AAHP’s Registered Nurses, Physicians, Nutritionists, Health Educators, and Community Health Workers implemented a dazzling array of community outreach, health screening, and health education programs; support groups; and nurse case management services with compassion, creativity, and cultural competence.

By bringing together community partners and resources in a collaborative and effective manner, AAHP maintained its vision on six major health areas: 1) maternal and infant health, 2) HIV/AIDS/STIs, 3) oral health, 4) diabetes and cardiovascular disease, 5) cancer, and 6) mental health, with the goal of raising awareness about key health disparities; integrating African American health concerns into existing services and programs; monitoring health status data for African Americans in the County; and implementing and evaluating strategies to achieve specific health objectives.

These collaborations held fast during the COVID-19 pandemic despite the need to take on a radically different look. The ability of AAHP leadership and staff to pivot despite this challenge is a testament to the commitment of every program stakeholder. AAHP may have been forced out on a limb but its staff and stakeholders remained rooted in the mission, vision and goals that have guided it for over 20 years.

Nonetheless, AAHP formed new partnerships with community organizations to increase community engagement and expand its reach. In addition to assisting with packaging and distributing boxes at food Grab-N-Go sites around the County, AAHP staff members gave away AAHP bags filled with health education materials and invited African American drivers and passengers to AAHP Chronic Disease Management Program classes. AAHP also supported several peaceful Black Lives Matter protests around the County by providing marchers not only with AAHP water bottles to help them combat the often 90 degree temperatures, but also with bottle neck tags printed with reminders of safe practices to prevent the spread of COVID-19. AAHP’s increased awareness and involvement in these partnerships resulted in more awareness and engagement by AAHP’s current and future clients. These outreach strategies often led to additional collaborations and demonstrated AAHP’s commitment to promoting the health and well-being of African American residents even in the most extraordinary circumstances.
The mural on the cover of the FY20 report was presented to AAHP by the WIGO (When I Get Out) program at the Montgomery County Jail in recognition of the program's public health outreach to those currently incarcerated, another public health crisis disproportionately affecting the African American community. It accurately depicts that like the base of the tree, AAHP's maternal and infant health remained the foundation for the other focus areas in FY20. But the branches spread out even further in FY20 and AAHP’s presence at Grab-N-Go’s, recreation centers, churches, senior centers, barber shops, senior residences, health fairs, college campuses, apartment complexes, and even the county jail was a reminder to African American residents throughout the County that from pre-birth to old age, AAHP had a clear vision of who they were and that their lives mattered too.
Focus Area Programs

“I truly believe that we make our moms and babies feel special. And we don’t stop there. If there are other family members that need something, we address that too because our client can’t be an effective mom if she’s stressed out about other members of the family.”

− Saundra Jackson, RN, certified in childbirth education and breastfeeding and AAHP’s first SMILE nurse case manager.

Maternal and Infant Health
AAHP’s SMILE (Starting More Infants Living Equally healthy) team began FY20 with a Lunch & Learn to bring together SMILE moms from various ethnic backgrounds and cultures to share the joys and challenges of parenting, coping skills, nutrition and food information, and the value of social support. The moms were encouraged to bring not only a family member or support person, but also a dish representing their country, tradition, or culture. The diverse group welcomed the opportunity to share unique cultural practices from across the African diaspora and the dishes also provided an opportunity for AAHP’s nutritionist to lead a discussion about the health benefits and risks of traditional foods. The workshop also included a variety of other health professionals, nurses, a social worker, a doula, and an insurance representative, who answered
questions throughout the workshop. Most of all, the workshop focused on the “protective factors,” such as the social and emotional competence of children, parental resilience, social connections, and parenting skills that have strengthened families and enabled parents to build communal support systems. In July 2019, the nurses, community health workers, and social worker conducted a total of 107 home visits. This number represented an increase of almost 25% over the monthly average of home visits conducted in 2018.

Eighteen prenatal mothers, four fathers, and three doulas-in-training attended the SMILE program's semi-annual childbirth and breastfeeding class in October 2019. This event to educate pregnant mothers and fathers on resources available to them to help ensure healthy births featured a lecture and discussion by Dr. Jeffery Johnson on fatherhood and the expanded role that fathers can play to ensure a healthy pregnancy, delivery, and infant development. The session was videotaped for potential inclusion in a library of resources for other current and future staff and clients. As a result of programs like these, 86% of mothers in the SMILE program breastfed for up to three months in FY20. According to the Centers for Disease Control and Prevention (CDC), this is a significantly higher percentage than the state average of 51.9% of mothers breastfeeding for this period. In fact, according to the CDC, the percentage of African American women who ever breastfed was 64.3%, and of that number, only 20% breastfed exclusively for six months after delivery.

In-house professional development to improve efficiency and effectiveness was a key focus for SMILE program nurse case managers in FY20. In December 2019, SMILE nurse case managers participated in a two-hour training class on “Maternal Mortality: A Crisis in the US” with Dr. Michelle Hawkins, DNP, MBA, MSN, RN who joined the AAHP staff as the SMILE program consultant. All participants agreed that the training increased their understanding of maternal mortality and introduced new approaches to prevention. Dr. Hawkins' second training session focused on the “Teach-Back” technique to improve patient engagement and communications. Central to this approach is that clients must be empowered to take control of their health and advocate for quality and effective healthcare. Nurses and other staff members in attendance found the session extremely useful. During weekly meetings, Dr. Hawkins also provided advice about how to use “SMART” goals to establish care plans for comprehensive home visits and led
in-depth reviews of difficult cases in consultation with the AAHP social worker, nurse supervisor, and clinical director.

In May 2020, as part of AAHP’s overall approach to continuous improvement, a new protocol for assessment was initiated to include psychosocial assessments by the social worker as part of a revised and expanded intake procedure. All initial full phone contacts included the completion of the Health-Related Social Needs screening tool developed by the Center for Medicare and Medicaid. During the month, the program recorded an increased emphasis on the need for crisis intervention and collaborative support from County caseworkers. Both prenatal and postnatal mothers continued to receive referrals for mental health support, food services, and housing support. Each SMILE mom continued to be evaluated for medical and social risk. High-risk medical conditions included gestational diabetes, pre-eclampsia, multiple past miscarriages, and advanced maternal age. Social risks included poor emotional well-being, unemployment, poor education, unclear immigration status, language barriers, and lack of family support.

Prenatal enrollees and postpartum moms were evaluated for depression using the Edinburgh Postnatal Depression Scale.

![Pregnancy Risk Categories in FY 20](image)

**Figure 3. FY20 Pregnancy Risk Assessment Monthly Distribution Average**

In FY20, SMILE program staff also used technology to increase efficiency and effectiveness. For example, SMILE’s nurse supervisor created a communications portal that allows nurse case managers to share important information with other members of the care team continuously and in real-time. And AAHP’s data coordinator created geographic maps that display the location of cases for each of the nurses spatially, potentially helping staff schedule visits in a way that could reduce travel time.

**FY20 Highlights**

In September, Maryland State District 20 Delegate Jheanelle Wilkins visited AAHP’s office to meet with SMILE nurse case managers about AAHP’s programs and services to reduce the high rate of infant and maternal mortality among African American women in the County. Delegate Wilkins had co-authored two bills on infant and maternal mortality that passed during the previous legislative session and was eager to learn more about the SMILE program and AAHP.
One impact of COVID-19 was an increase in the number of clients requesting support in reconnecting with their County caseworkers for various issues such as Medicaid renewal support, application assistance, and SNAP eligibility and benefits. The County’s directory of services was especially helpful in reconnecting clients with their assigned caseworkers during COVID-19 confinement. Through strategic teamwork, AAHP’s SMILE nurses, community health workers, and social workers conducted a combined 132 teleconsultations in June 2020.

Several of these teleconsultations were conducted with the assistance of AAHP’s HIV/AIDS coordinator who also speaks French since a significant number of SMILE moms are African immigrants. A small percentage are also of Caribbean descent. The chart below depicts the average ethnicity breakdown by percentage of SMILE moms for FY20. The table at the top of the following page is the SMILE Performance Dashboard for FY20.

![Ethnicity Percentage for SMILE Clients FY20](image)

*Figure 4. Average SMILE Client Ethnicity Percentage for FY20*
### Table 1. FY20 SMILE Performance Dashboard

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<td>A) Currently Active Moms</td>
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<td>91</td>
<td>86</td>
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<td>76</td>
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<td>Prenatal (still pregnant)</td>
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<td>Postpartum (Moms who have delivered)</td>
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<td>62</td>
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<tr>
<td>B) All infants</td>
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<td>64</td>
<td>58</td>
<td>58</td>
<td>54</td>
<td>63</td>
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<td>% Healthy Birth Weight (% of Total Deliveries)</td>
<td>86%</td>
<td>91%</td>
<td>100%</td>
<td>75%</td>
<td>100%</td>
<td>100%</td>
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<td>75%</td>
<td>92%</td>
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<td>Infant Deaths (includes Stillbirths)</td>
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<td>Unfavorable Birth Outcomes (Congenital Anomaly, Fetal Demise, Miscarriage)</td>
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<td>Total Home Visits</td>
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<td>87</td>
<td>85</td>
<td>71</td>
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<td>59</td>
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**COVID-19 Response**

With the issuance of the telework directive by the Governor in March due to the COVID-19 pandemic, the SMILE program nurse case managers quickly began using FaceTime, Zoom, WhatsApp, Skype, and Google Duo to conduct home visits with mothers and infants enrolled in
the SMILE program. The visual features of these tools enabled the nurse case managers to maintain the level of consultation and advice outlined in the SMILE program’s Standard Operating Procedures while maintaining the physical distancing requirements necessitated by the pandemic.

As the Stay at Home Order continued through April, the SMILE staff continued to conduct prenatal and postnatal home visits virtually. Despite initial technical challenges, and the need to develop agility using a variety of virtual platforms, the SMILE team quickly developed the necessary competencies and strategies to maintain continuous communications for healthy pregnancies and to support mothers and their infants in their first year of life.

FY20 also marked the launch of “Wellness Wednesdays,” a collaboration between AAHP’s community health workers, SMILE nurse case managers, and social worker in response to requests from SMILE moms for a recurring forum to discuss the impacts of the COVID-19 quarantine, isolation and loneliness, and the importance of self-care to stay mentally healthy during the pandemic.

![Image: Wellness Wednesday Poster](Figure 5. SMILE program Wellness Wednesday Poster)
"When I was a SMILE mom in 2013, I had a wonderful nurse who provided the same kind of follow up we offer to our clients in the Chronic Disease Management Program. The same way we follow up with them about their blood pressure, blood glucose, and weight. The way we talk about cancer, heart health, diabetes, and dementia is the same way my SMILE nurse came twice a week to check on my premature baby and helped me, as a new immigrant to this country, with practical advice every step of the way."

− Grazzia Nkongolo, MD, Russian-trained physician who completed her practicum for the Master’s degree in Public Health program with AAHP in the summer of 2019 and joined the AAHP staff shortly after.

Heart Health, Diabetes and Cancer Prevention

Chronic Disease Management Program

In FY20, AAHP’s efforts to mitigate disproportionate African American rates of suffering and death from diabetes, hypertension, heart disease, cancer, Alzheimer’s disease, and dementia through education and support continued to center around the Chronic Disease and Management Program (CDMP) classes at the White Oak Recreation Center, Germantown Library, Leisure World, and, new in FY20, the Plum Gar Recreation Center. These classes, led by internist Dr. Ikenna Myers and a team of nurses, plant-based nutritionists, and other public health professionals, provide class participants with the health screenings, tools, information, and encouragement they need to make choices that lead to better physical and mental health. The
sessions focus on helping participants understand the pathology of disease, disease risk factors, the impact of disease on people of African descent and the role of medications, prevention methods, and food in improving health outcomes.

Table 2. CDMP Participation by Month and Location

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<tbody>
<tr>
<td>White Oak</td>
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<td>25</td>
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<td>63</td>
<td>47</td>
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<tr>
<td>Germantown</td>
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<td>Leisure World</td>
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<td>65</td>
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<td>Plum Gar Rec</td>
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<td>CDMP Virtual Webinar</td>
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<td>383</td>
<td>240</td>
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Presentations on diabetes continued to build on the accredited AADE 7 core curriculum: Introduction to Prediabetes and Diabetes, Healthy Eating, Being Active, Taking Medications, Monitoring, Problem Solving, Healthy Coping, and Reducing Risks. Classes also included tips for diabetes self-monitoring and care; discussions of barriers to care; as well as identification and facilitation of self-care, goal-setting, follow-up, outcomes measures, and the use of patient education resources. Participants who were diabetic or pre-diabetic received self-monitoring equipment, such as glucose meters, lancets and testing strips, and were instructed on how to properly use these devices and on other diabetes-related self-care techniques, such as how to check their feet for abnormalities and the importance of oral hygiene.

The heart health curriculum included Introduction to Hypertension and Heart Disease; Causes and Risk Factors for Hypertension and Heart Disease; Complications of Hypertension; the Link between Diabetes and Hypertension; Healthy Eating, Being Active, Taking Medications, Monitoring, Problem Solving, Healthy Coping, and Reducing Risks; and Stress Management. Participants with hypertension received hypertension self-management devices including blood pressure monitors and were taught how to properly use self-monitoring tools to detect, record, and manage high blood pressure.

In addition to presentations by AAHP’s internist, licensed clinical social worker, and nutritionists, FY20 guest lecturers included Drs. Terri and Rick Peters, D.Ph., PharmD, owners of Quality of Life Pharmacy & Health, the only minority-owned compounding pharmacy in the Mid-Atlantic region; Terrie Jones, RN, CDE on diabetes self-management; Victorianne Russell-Walton, a breast cancer advocate and survivor; Dorcas Lwanga, RDN, LPN, an Outpatient Oncology Dietitian at Washington Adventist Hospital, on how to distinguish between cancer-preventing and cancer-causing foods; and Dr. Lenore Coleman, PharmD, who provided educational instructions online and in one-on-one virtual Medication Therapy Management (MTM) sessions.
In November 2019, the CDMP team conducted three introductory classes at Plum Gar Recreation Center in Germantown in concert with existing programs like Bone Builders, Senior Fit, and Afro-American Family Night. These classes introduced AAHP to the surrounding community and generated support for holding daytime classes at the Center. The pastor of a nearby church, Community of Faith United Methodist, attended one of the introductory sessions and began promoting the classes and making referrals. Plum Gar was officially added as a CDMP class location in January 2020.

In December 2019, AAHP began offering body composition analysis screenings to CDMP class participants. Participants are assessed for body mass index (BMI), body fat mass (FM), free fat body mass (FF); basal metabolic rate (BMR); and total body water (TBW). These measurements provided a more precise measure of body fat and allowed for a more customized approach to weight management than BMI alone.

In FY20, the White Oak CDMP class, in particular, focused on the importance of plant-based cooking to achieve and maintain good health. In addition to an end of the year potluck, where participants prepared and shared healthy plant-based and vegetarian recipes and dishes, the last class of Black History Month was catered by NuVegan, a Black-owned vegan Soul Food restaurant and featured foods that mimicked a “traditional African American diet” like fried chicken, collard greens, and vegan non-dairy potato salad.

The White Oak and Germantown classes also joined together for a field trip to the Manna Food Market and Resource Center in White Oak. The field trip included a class on ‘Smart Shopping,’ where participants learned how to navigate grocery stores and assess products to find healthier choices, the difference between organic vs. non-organic, and ways to eat more nutritiously while saving money. Lastly, the class toured the Manna Food Bank and had the opportunity to sign up to receive fresh produce and other grocery items.
COVID-19 Response
In March 2020, the AAHP CDMP staff called CDMP class participants to let them know that, due to the coronavirus pandemic, virtual webinars would replace in-person classes. The staff also used these initial telephone calls to provide the most up-to-date information about effective strategies to prevent the spread of the virus, to discuss client needs, and to make referrals to County support resources, as needed. Once classes began online, participants used the chat function to participate in online quizzes and polls, as well as to interact with the presenters. Ms. Robina Barlow, Food for Life Instructor and Chef Bethlehem Yohannes, owner of Lemon Slice restaurant, continued to provide healthy cooking demonstrations from their homes. As an added value, the program increased its emphasis on case management by following up with each participant and reviewing their personal goals, as evidenced by their HEDIS numbers (Glucose, BP, Weight management, Cholesterol) over time. With the suspension of in-person classes, AAHP set up a new dedicated FedEx account so that CDMP participants could continue to receive diabetes and hypertension self-management supplies like glucose meters, lancets, testing strips, and blood pressure monitors to strengthen the program of self-monitoring. And to provide personalized consultations, the CDMP internist established office hours two days each week for telehealth visits.

An unexpected benefit of the transition to virtual webinars was that the classes became more widely accessible because they were no longer bound by location. As a result, the CDMP began offering four weekly classes at different times of the day covering evidence-based topics to help participants improve their overall health and/or manage chronic diseases. And as the pandemic moved into the summer months, the classes broadened their offerings to add fitness instruction to the health education presentations and plant-based cooking demonstrations. Now two of the weekly webinars would focus on one of four chronic conditions that disproportionately affect people of African descent: diabetes, hypertension, Alzheimer’s Disease and dementia, and cancer with topics alternating monthly while the other two would concentrate...
on fitness and nutrition, devoting more time to exercise as a critical component in maintaining health and have included yoga instruction and guided Zumba.

**Figure 9. FY20 CDMP Class Participation by Month**

**DMeetings**

In FY20, AAHP continued to offer dMeetings, a comprehensive, self-directed, online course on diabetes management that enables County residents to access diabetes educational training at their convenience. Through videos, conference calls, and one-on-one consultations, dMeetings participants have the opportunity to develop their own personalized diabetes self-management plan. In January of 2020 AAHP’s registered dietitian retired and leadership of the program was assumed by a member of the AAHP CDMP team who is also a physician. This change resulted in an exponential growth in the program as depicted in the chart below.

**Figure 10. dMeetings Participation and Completion FY19 vs FY20 Comparison**
“I found that the younger population, for example college students, is more receptive to being tested for HIV. For outreach to other populations, you have to combine HIV testing with other health screenings like BMI, blood pressure, and blood glucose. So I teamed up with the CDMP nurses to do both. Then we started partnering with organizations like Manna Food to provide lunches at the homeless shelters, and for World AIDS Day, we even offered hepatitis B testing and partnered with the Prevention of Blindness Society to offer vision testing and free glasses.”

- Aissata Bah, HIV/AIDS coordinator for AAHP prior to joining the Centers for Disease Control and Prevention in March 2020.

HIV/AIDS/STI

Although the incidence and prevalence of HIV infections have steadily declined over the last five years, Montgomery County continues to record high levels of sexually transmitted diseases (STIs), particularly among people of African descent. In addition, the rate of HIV infection among immigrants and heterosexual women of African descent remains alarmingly high. To address these concerns, in FY20, AAHP’s HIV/AIDS coordinators continued to offer weekly walk-in testing at the Department of Health and Human Services’ Dennis Avenue clinic in Silver Spring as well as on-campus testing and counseling services for Montgomery College students at all three campuses (Germantown, Rockville, and Takoma Park) and for homeless persons at Progress Place in Silver Spring and the annual Homeless Resource Fair in Gaithersburg.
In August 2019, members of the state office of HIV and AIDS met with the AAHP staff to describe their plan to eliminate the health disparity around HIV and AIDS between people of African descent and other Montgomery County residents. Special emphasis was placed on the proper use of condoms by black County residents, who have disproportionately higher rates of infection, to prevent the spread of STIs. As a result of this meeting, AAHP’s HIV/AIDS coordinators were provided with free condoms from the state for distribution at testing events.

On December 1st, AAHP organized and conducted a World AIDS Day event at the Silver Spring Civic Center. Focused on building partnerships for improving sexual health, the event featured a host of presenters, partners, health providers, and panelists who discussed the needs of special populations, such as African immigrants and LBGTQ individuals, who are disproportionately affected by HIV and AIDS. AAHP’s CDMP nutritionist also provided a cooking demonstration on how to prepare foods that promote health and wellness.

In January 2020, the HIV coordinator organized a joint meeting between AAHP staff and Us Helping Us, a DC-based nonprofit organization, funded by the federal and DC governments, foundations, and pharmaceutical companies to educate black residents on how to prevent and treat sexually transmitted diseases. Us Helping Us committed to joining AAHP in a collaborative effort to expand free HIV and STI testing at Montgomery College campuses using their mobile testing van. This is particularly important since Montgomery County experienced a significant increase in STIs in FY20, indicating a rise in unprotected sex.

In February 2020, AAHP’s HIV coordinator and its social worker established a new program to educate young people between the ages of 13 and 24 on sexual health and how to prevent sexually transmittable diseases. The initial session was conducted at Georgian Court Apartments, a Housing Opportunities Commission (HOC)-managed housing unit in Silver Spring. The training focused on providing accurate information about ways to avoid transmission, as well as discussions about the importance of maintaining high self-esteem, developing refusal skills, and ways to mitigate bullying, peer pressure, and other factors that lead to poor decisions about sex.
In early March of 2020, the incumbent AAHP HIV/AIDS coordinator resigned to take a position with the Centers for Disease Control and Prevention as a part of their coronavirus team. Fortunately, AAHP was able to immediately fill the position with an experienced and certified HIV tester and counselor who was already a member of the AAHP staff.

In FY20, AAHP began offering a wider spectrum of screenings like blood pressure, body mass index, cholesterol, blood glucose, and A1c tests at community HIV screening events to reduce the stigma associated with HIV testing while emphasizing the importance of knowing one’s HIV status. This change at sites like Progress Place, which provides food and shelter for homeless people in the County, revealed that many of the participants had chronic conditions like uncontrolled and untreated high blood pressure. It may have also led to one of the high water marks for AAHP with regard to HIV testing.

In October 2019, the AAHP HIV/AIDS coordinator screened and counseled 102 residents for HIV. This total represents the highest number of HIV tests ever conducted by AAHP in a single month. The unprecedented increase in testing is likely attributable to the intense outreach efforts at more and different locations throughout Montgomery County, including Montgomery County colleges, residential complexes, and churches, but it may also be the result of integrating HIV testing into the battery of other routine health screenings and diminishing the stigma associated with HIV testing.

COVID-19 Response
In April, all HIV testing and counseling services were suspended due to the coronavirus pandemic and the community education and outreach classes on sexual health scheduled for April, May, and June for youth at HOC properties were suspended until the Stay at Home Order is lifted by the County Executive.
### Table 3. FY20 HIV Testing Data

#### African-Americans

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#### All Others

<table>
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<th>Female</th>
<th>Total</th>
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</thead>
<tbody>
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<td>1990+</td>
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<tr>
<td><strong>Total</strong></td>
<td>53</td>
<td>36</td>
<td>89</td>
</tr>
</tbody>
</table>

**GRAND TOTAL** | 203 | 149 | 352
Cross Cutting Focus Area Programs

“Working as a team, with everyone looking through a different lens, allows us to provide optimal care. For example, I enjoy seeing how our moms thrive when I educate them about dental care, something you and I may take for granted like seeing a dentist every six months. But if you don’t know, you don’t know. Like how mouth infections can lead to preterm labor.”

– Charlene Day, MSN, CNS, who joined AAHP as a SMILE nurse case manager in 2019, brings 20 years of hospital experience specializing in maternal and child health and labor and delivery.

Oral Health

Like mental health, oral health cuts across all of the remaining AAHP focus areas and is an important topic in the Chronic Disease Management and Prevention classes, the When I Get Out (WIGO) program for the incarcerated, and even the SMILE program. In the case of the first two, it is the connection between diabetes, heart disease and oral health and in the latter, the connection between poor dental hygiene and preterm labor. Good oral health that begins shortly after birth continues to pay dividends throughout life.

The January Health Notes online newsletter featured a video, “Mighty Mouth” that explained the link between diabetes and oral health. In other webinars and lectures in FY20, AAHP’s oral health consultant, Dr. Joseph Latta, who has more than 40 years of experience in the practice of oral
health, stressed the importance of good oral health to total health. Dr. Latta contends that everything about health starts at the oral cavity and taking good care of our teeth and gums is the least expensive healthy behavior we can adopt with the biggest health return on investment.

Of all preventable health disparities that exist among people of African descent, oral health disparities tend to be greatest. To reduce this disparity in Montgomery County, AAHP has offered special educational sessions focused on educating pregnant women and new mothers about the actions they can take to promote better oral health for themselves, their infants, and other members of their families. Poor oral health not only causes tooth decay, the most common chronic infectious disease in children, but also results in the early loss of primary teeth and crowding of permanent teeth. At the other end of the lifespan spectrum, a recent research conducted over 18 years with 8,275 participants found that having periodontal or gum disease is associated with mild cognitive impairment and dementia.

The oral health message from AAHP continues to emphasize the importance of brushing one’s teeth at least twice a day focusing on the gum line and flossing between teeth at least once daily.
"The reality is that the need for adequate and responsive social services and support is intertwined into every single focus area addressed by AAHP. This includes care management, crisis intervention, conflict resolution and de-escalation, program innovation, and community outreach. For example, there’s a lot of hands on collaboration with the SMILE nurses to fill in service gaps and with other mental health providers, like the ASPIRE “Healthy Mothers, Healthy Babies” program. While the CDMP classes are a different level of engagement. The participants take notes and call afterwards to verify what you said. And because of COVID-19, we’re seeing how resilient people are. But at the same time, people are much less interested in attending a Zoom class on meditation if they can’t put food on the table or pay the rent.”

− Shauniqua Key, LMSW, licensed clinical social worker who joined AAHP in 2018 and administers psychosocial assessments and provides mental health support and resources to AAHP clients and staff.

Mental Health
In FY20, AAHP continued to integrate mental health services into nearly every other AAHP program to reduce the impact of mental and emotional distress on the health and well-being of people of African descent. From youth empowerment workshops, to SMILE moms’ Wellness Wednesdays to Brother2Brother men’s forums, to Chronic Disease Management classes, to church-based health screening events, AAHP’s licensed clinical social worker collaborated with nurses and community health workers to help black Montgomery County residents of all ages understand the important connection between mental and physical health.
In FY20, AAHP’s social worker and SMILE nurses joined with ASPIRE Counseling’s “Healthy Mom Healthy Babies” Program Manager to identify areas in the County with the greatest need, the intersectionality of black mental health and infant/maternal health, barriers to service that affect the black clients of both organizations, and ways to support each other in breaking through these barriers. This partnership has not only provided additional mental health resources to AAHP clients, it has also prompted ASPIRE to diversify their practitioners. Also in FY20, during Mental Health Awareness Month, AAHP’s social worker conducted virtual discussions and presentations on the history and importance of psychosocial assessments with clients. Even though every SMILE mom takes the Edinburgh mental health screening twice during her enrollment in the program, based on these presentations, the AAHP clinical staff agreed to implement uniform psychosocial evaluations as a standard procedure for enrollment in the SMILE program. Now under the new protocol, the social worker completes the Health-Related Social Needs screening tool developed by the Center for Medicare and Medicaid as part of an expanded intake procedure for new SMILE clients.

To address the mental health challenges faced by African American adolescents, AAHP collaborated with the non-profit youth empowerment organization, Sweets Girlz, Inc., to offer a teen health and wellness workshop at the East County Community Center. Discussion topics included self-esteem, self-mastery, self-care, and healthy relationships. The social worker also continued to build on a partnership with the local chapter of the Soroptimist International of the Americas’ “Dream It, Be It” program at the Watkins Mill High School in Gaithersburg. This program consistently provides 20-25 high school-aged girls with an opportunity to learn life skills, socialize, and engage in healthy coping strategies during their school lunch hour.

To expand AAHP’s behavioral health services support for the young adult population, the social worker partnered with AAHP’s HIV Coordinator to provide mental health screenings to the HIV/STI testing and counseling services offered to students at the three Montgomery College campuses. Students worried about their drinking habits took advantage of the Alcohol Misuse Screening. Others were screened for and counseled on their risk for generalized anxiety and depression. In addition to the screenings, the social worker educated students about stress reduction, coping skills, and provided contact information for local mental health providers.

AAHP’s social worker also made several mental health presentations for the online Chronic Disease Management Program classes. The first, entitled Mental Health 101, provided general information on mental health and mental illness but also included a discussion on risk factors, protective factors, racial bias in providing care, and other aspects of care affecting people of

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Figure 14. AAHP-Sweets Girlz Workshop Flyer
A presentation, entitled “Food & Mood,” showed how mental health affects eating habits and the tendency towards the overconsumption of certain foods. To encourage healthier eating habits, a food and mood log was distributed. Another presentation focused on stress management and educated attendees on the health risks associated with chronic stress and offered tips and tools to mitigate the risk.

As part of her outreach to the County’s older adult population in FY20, AAHP’s social worker collaborated with the Healthy Temple Ministries at the Mt. Jezreel Baptist Church in Silver Spring to revise the continuation of the "Tuesday Tea." With an average of 17+ participants per week in the 8-week series, AAHP staff and providers monitored participants’ weight, blood pressure, and glucose and many participants saw significant improvements in these values and their overall wellbeing. This series not only provided the participants with useful health education, but it also improved socialization and decreased isolation (based on primary observation and verbal feedback) through AAHP-facilitated team building activities like team "health jeopardy," chair volleyball, and walking groups. Although the COVID-19 pandemic halted in-person activities, AAHP continues to engage with Tuesday Tea participants via phone check-ins and email follow-ups.

FY20 Highlights
The collaboration between AAHP’s Social Worker and the SMILE nurse case managers is more than just a traditional handoff of a referral. They work as a compassionate team to support and fulfill client-centered goals. A perfect example in FY20 was the SMILE client who was awarded a regional scholarship through Soroptomist Inc. AAHP’s partnership with local branches of Soroptomist, Inc. through the "Dream It, Be It" program, enabled AAHP to connect SMILE clients who expressed education fulfillment as a goal to scholarship opportunities. With the AAHP social worker’s help completing scholarship applications and providing reference letters, a deserving SMILE mom was awarded a regional scholarship to continue her education. She was invited to a gala to receive this award and thanked the AAHP team for their commitment to fulfilling her dreams.

COVID-19 Response
From the beginning of the COVID-19 shutdown, AAHP experienced a substantial increase in calls from worried clients afraid for the health of their families, their own health status, finances/employment, food insecurity, and housing instability. Parents also expressed concerns about keeping their school-aged children occupied while at home. Recognizing that the COVID-19 pandemic was also an unprecedented threat to the mental health of African Americans in the County, especially given the stress of the prolonged stay at home order, AAHP’s mental health focus shifted to meeting the new and emerging economic, social and mental health needs precipitated by the virus and the stay at home order.

In response, AAHP’s social worker collaborated more closely with the SMILE nurses and community health workers to incorporate mental health screening instruments, including the PHQ-2 (depression screening) and the GAD-2 (anxiety screening) questionnaire that can be completed in a minute or less, into their client engagements while providing referrals to local support resources such as MANNA Food, Catholic Charities, and various County HELP programs.

AAHP’s COVID-19-Engagement project included questions about how former clients were prepared to handle the crisis emotionally and their access to coping mechanisms. Many respondents were happy and relieved that AAHP reached out to them during a period of high anxiety. Twenty-five percent (25%) reported symptoms of stress and anxiety. A significant portion
of referrals involved former SMILE mothers who were struggling with a variety of concerns exacerbated by COVID-19, such as housing, domestic violence, fear, depression, and anxiety.

The stress of the COVID-19 quarantine precipitated an increase in the incidents of domestic violence. As a result, AAHP’s social worker also provided crisis support and counseling to several SMILE clients who were victims of domestic violence, including providing around-the-clock counseling and emotional support; developing safety plans; collaborating with local authorities and agencies to ensure the safety and protection of clients and their children; assisting clients with relocation; and ensuring a seamless hand-off to resources like the Montgomery County Crisis Center, Abused Persons Program, and the Family Justice Center. The Social Worker’s involvement with Montgomery County’s domestic violence network provided AAHP with an opportunity to collaborate and participate with other resource providers in events like the “Purple Table Talk” (a young adult discussion on domestic violence) at the Allen Chapel Church in Colesville and the Domestic Violence Coordinating Council’s “Choose Respect Montgomery” festival.

Finally, like the internist leading the CDMP classes, AAHP’s social worker also established office hours to provide one-on-one counseling to clients and referrals as needed. The pie chart below depicts the total mental health screenings for FY20 by type.

![Figure 15. FY20 Mental Health Screenings](attachment:image.png)
Targeted Community Programs

“Today, Black men live the shortest and sickest lives. We can all do more to change these facts.”

− George McFarland, MSW, AAHP’s Program Manager and executive in the healthcare field for over 30 years

Men’s Health

Brother2Brother

“There is quite a bit of denial among black men regarding the state of their health. But the friendships, partnerships, support networks, and teamwork that come out of these [B2B] forums enable us to link these men to service providers, often saving them from the brink of a health disaster. And when the group organizers ask us to return for a repeat performance, I know we are hitting the right note.”

− Nkossi Dambita, MD MPH, MS, public health physician trained in epidemiology and the Clinical Director for the African American Health Program.

Black men are just as affected by diabetes, cardiovascular diseases, cancer, depression, and HIV/STI as anyone else in the African American community. The big difference is that they are the
worst affected by these maladies, in addition to contending with male-specific issues such as erectile dysfunction, benign enlargement of prostate, and testicular and prostate cancers. AAHP understands that many of the risks for these health challenges can be mitigated by adopting a healthy lifestyle that emphasizes regular exercise, a healthy diet, stress reduction, not smoking, and limiting substance use. This message permeates all the various community interventions and health promotion activities undertaken by AAHP. One third of the participants in the weekly Chronic Disease Management classes are men. A similar proportion of individuals seeking HIV testing are men. AAHP even sought and got the participation of fathers in childbirth classes in October and May to emphasize the role of fatherhood and a healthy relationship in ensuring a favorable pregnancy outcome and subsequent development of a baby.

In addition to these universal themes, in FY20, AAHP conducted Brother2Brother (B2B) sessions at The People’s Community Baptist Church in Silver Spring in collaboration with the church’s Men’s Ministry and Washington Adventist Health. Fourteen men attended the evening session focused on prostate health. A radiation oncologist from the hospital provided a comprehensive and culturally appropriate presentation about the pathology, epidemiology and treatment of prostate cancer. All participants completed a prostate cancer risk assessment. Individuals scoring 8 or higher on the screening tests were advised to schedule an appointment for further testing with any of the urologists on a list provided by the hospital. Fifty-one percent (51%) of the men treated for prostate cancer at Washington Adventist Health are African American.

The agenda for Brother2Brother forums is designed to be flexible to respond to the current needs of participants and co-sponsors. They provide an outlet for strong emotions and feelings of powerlessness in the face of issues like the COVID-19 pandemic, stay at home orders, racial injustice, or the murder of George Floyd.

**COVID-19 Response**

On April 15, 2020 AAHP’s clinical director collaborated again with The People’s Community Baptist Church to conduct a virtual B2B session to involve Black men across Montgomery.
County in a discussion on emotional resilience due to the anxiety and related issues associated with COVID-19.

In June 2020, to address the physical and mental health concerns raised by the killing of George Floyd and the disproportionate impact of the COVID-19 pandemic on black and brown communities, AAHP’s Clinical Director once again collaborated with The People's Community Baptist Church and Dr. Kenyatta Gilbert, Associate Professor at the Howard University School of Divinity, to convene two evenings of virtual prayer and reflections using Zoom. These meetings provided a safe space for the men to share thoughts and feelings about the two crises and provide spiritual and mental health guidance on how best to cope with the uncertainty and anxiety caused by these crises.

AAHP’s Clinical Director also presented “A Primer on the COVID-19 Pandemic” at the 22nd International Fatherhood Conference, convened virtually on June 10 and 11. The presentation covered the pathogenesis, epidemiology, impact of COVID-19 as well as recommended preventive measures. Two hundred people from 37 states participated.

**The Barber Shop Initiative**

“I became the barbers’ surrogate mom and once I received that title, I knew I was in with them. Since COVID-19, I’ve been calling regularly to make sure they have access to healthy food via the Grab N Go’s and all the other resources supplied by the County. I made sure that all of the self-employed barbers were aware of, applied for, and received unemployment benefits. Now they even call to check on me.”

− Juliette Williams, who brings extensive experience in recruitment, community outreach, and volunteer coordination and training to the AAHP staff.

In FY20, as part of its community outreach strategy, AAHP began visiting two barbershops in the White Oak Shopping Center in Silver Spring to provide health education services to the barbers and their customers with a goal of helping both groups lower their body weight, blood pressure, and glucose levels. Health passports were used to track and record baseline and subsequent changes in biometric values for an average of 23 individuals. In response to the specific health challenges discovered through the needs assessment process, AAHP community health workers added additional referral information related to smoking cessation and substance abuse. To assist with the process of significant lifestyle changes in nutrition and weight management, personalized nutrition assessments and counseling was added to ongoing discussions about strategies to manage weight by reducing calories and beginning a targeted exercise program.

**COVID-19 Response**

When their shops closed due to the stay at home order, AAHP’s community health workers focused on making sure the barbers were aware of and applied for County support services offered during the pandemic. This included information about food distribution sites, unemployment benefits, COVID-19 testing sites, and mental health counseling.
“Ultimately, our obligation is to communicate with black seniors by meeting them where they already live, play, gather, and worship and inject health information into an existing, ongoing conversation. Merely having a website is not outreach because many seniors choose not to consume their information in that way. We have to meet them where they are.”

- Elisse Barnes, JD, PhD, AAHP’s first Aging Community Liaison

Healthy Aging
Aging Subcommittee Programs
FY20 was the first full year of AAHP's programs and services focused on eliminating health disparities and increasing the length and quality of life for Black Montgomery County residents aged 55 and over. AAHP sought to accomplish this goal by providing these older adults with the access, information, resources, and tools for healthy aging through partnerships with community senior service providers, including County agencies, religious organizations, County senior centers, senior residences, advocacy groups, and other public health organizations.

To involve black seniors in the implementation of these programs, in August, a volunteer “rush” event was held at the Silver Spring Civic Center for the individuals who had expressed an interest in joining the Aging Subcommittee on nearly 400 Aging Community surveys. One-third of the 75 seniors on the list attended the meeting and learned more about AAHP as well as senior programs.
In September, AAHP began providing monthly blood pressure and blood glucose screenings for the nearly 200 black seniors of the Generation One ministry who gather weekly at The People’s Community Baptist Church in Silver Spring for fellowship, food, and faith. AAHP also facilitated the provision of flu shots and health provider presentations for the group on topics like “The Vocabulary of Heart Health” and “Understanding Your Feet.”

For two weeks in September, in recognition of Fall Prevention Awareness Day, AAHP also teamed up with the Montgomery County Fire and Rescue Service (MCFRS) to perform home safety inspections to reduce the risk of injury from falls and fires in the homes of African American seniors. This effort brought together MCFRS and AAHP staff and senior volunteers to schedule and complete visits to 43 homes where 47 seniors had their blood glucose and blood pressure checked, Files of Life and Know Your Numbers cards completed, and their homes inspected by MCFRS personnel who replaced decades-old smoke detectors and batteries, installed carbon monoxide detectors, and counseled residents on home fire safety. The average age of the homeowner was 76; the oldest was 96 years old and the youngest was 60. In May of 2020, members of the AAHP aging subcommittee participated in another bone health related event, the first American Bone Health-sponsored Freedom from Fracture webinar specifically focused on bone health in the African American community. This webinar was led by bone health educator, Ama Lee, who is also a member of the AAHP aging subcommittee.

In October, the AAHP Aging Information Exchange Summit, sponsored by the aging subcommittee, took place at the Silver Spring Civic Center. Nearly 20 Montgomery County government and private senior service providers exhibited and joined with keynote speaker Deputy Director of the National Institute on Aging Dr. Marie Bernard; County Executive Marc Elrich; Director of the Montgomery County Department of Health and Human Services (DHHS) Dr. Raymond Crowel; Chief, DHHS Office of Community Affairs, Betty Lam; and DHHS Acting Chief, Aging and Disability Services, Odile Brunetto to offer over 75 African American seniors the latest research and information about a variety of topics including transportation, villages, recreation department senior centers, online senior resources, Medicare gap insurance coverage, nutrition, bone health, and in-home care. Aging subcommittee co-chair James Stowe, director of the County Office of Human Rights, served as the master of ceremonies and Ms. Lee led participants in bone strengthening exercises. The half-day conference received favorable local press coverage: [https://www.localdvm.com/news/i-270/african-american-health-summit-highlights-disparities-in-montgomery-county](https://www.localdvm.com/news/i-270/african-american-health-summit-highlights-disparities-in-montgomery-county).
Also in October, the Aging Community Liaison served as a panelist with Dr. Brunetto for the Older Adult Ministries’ convocation and luncheon for the DC Baptist Convention, which was held at the Clifton Park Baptist Church in Silver Spring. The Aging Community Liaison spoke about AAHP initiatives like the senior home safety inspections and the partnerships AAHP has forged with churches, senior residences, and senior service providers to ensure that the County’s African American seniors are better informed about DHHS-supported public health programs for the County’s aging population.

In December, the 2020 File of Life campaign began at the Generation One ministry lunch and the White Oak CDMP class where over 200 Files of Life were distributed and completed by African American seniors with the assistance of AAHP staff in a single day. The goal of this effort is to ensure that more African American seniors have completed Files of Life on their home refrigerators and in their pockets and purses to provide medical personnel with the information they need to save their lives if they cannot speak for themselves in a medical emergency. In early 2020, AAHP began partnering with WISH (Wellness and Independence for Seniors at Home) to bring File of Life campaign events to African American older adults in senior residences including Victory Forest, The Charterhouse, and The Bonifant.
AAHP also strengthened its relationship with the Montgomery County Commission on Aging (COA) by ensuring that at least one commissioner would attend the AAHP aging subcommittee meetings co-chaired by AAHP founding and Executive Committee member Arthur Williams. The Aging Community Liaison was also formally designated as the AAHP liaison to the Commission and was selected to facilitate the Health and Wellness breakout session at the 2020 COA Public Policy Forum on March 18, 2020 which was postponed due to the coronavirus pandemic.

**COVID-19 Response**
With the cancellation of all in-person events in March of 2020 due to the pandemic (including the first File of Life Completion event to be co-sponsored by United Healthcare at a WISH senior
housing building), the aging community liaison developed email and texting protocols to disseminate health information to black seniors through senior ministry and senior residence points of contact, as well as the 75 volunteers in the Aging Subcommittee database.

Email messages included links to videos and webinars on COVID-19 and older adults, information about the extended Medicare benefits for telehealth, grocery store senior shopping hours, technology support, food distribution sites, COVID-19 testing sites and insurance reimbursement, rental assistance, unemployment insurance, and AAHP Chronic Disease Management Program classes. Through the senior points of contact and volunteer database these emails were shared with over 400 African American seniors on a weekly basis.

White Oak Bid Whist Club

"With the Bid Whist group, I had to bake a pound cake to get in, but I knew I had arrived when someone said, 'Go get yourself a plate.' Their doctors thought it was great that there was a program checking their blood pressure, blood glucose, and following up to make sure they were taking their medication between office visits. The group could not stop talking about how we genuinely cared about their health and wellbeing."

− Juliette Williams, who brings extensive experience in recruitment, community outreach, and volunteer coordination and training to the AAHP staff.

The Bid Whist Club is an excellent example of AAHP meeting seniors where they gather and play. For several years, a group of 16-20 black seniors has been meeting every Tuesday from 11am to 2pm at the White Oak Senior Center in Silver Spring to eat lunch, play bid whist and talk trash. In FY20, the first of three AAHP staff members began joining the group to share health information and provide health screenings between games. Because the card players were a well-established, close knit group, it took time, repeat visits, and finding the right AAHP staff member to build trust. But in the months prior to the March closure of all Montgomery County Recreation Department senior centers due to the COVID-19 pandemic, AAHP was welcomed in to provide between doctor visit health screenings to Bid Whist Club members.

COVID-19 Response
A member of the Chronic Disease Management Program team continues to call Bid Whist Club members to follow up on their blood glucose and blood pressure levels and ensure that they have information about food distribution and COVID-19 testing sites.
“The last time we were at the Montgomery County jail we weren’t allowed in because it was the same day the Governor halted all visits to correctional facilities due to COVID-19. But what we'd seen inside was a microcosm of what we see on the outside. The level of knowledge is so poor and the degree of neglect so high regarding the transmission of STIs, attention to oral health, prevention of hypertension and diabetes that if we can raise their level of awareness and have them reflect on their past behavior, they can come out better than when they went in.”

− Nkossi Dambita, MD, public health physician trained in epidemiology and Clinical Director for the African American Health Program.

The Incarcerated

Young Black men are disproportionately represented in the correctional system. In FY20, AAHP continued to bring lifesaving health information to the incarcerated in Montgomery County, through its partnership with the “When I Get Out” (WIGO) program. These sessions provided inmates with critical education on diabetes prevention and management, oral health, and HIV/STI prevention to help them and their families live healthy and productive lives when they return to society.

On September 20th, AAHP’s clinical director staff conducted health and wellness education for men at the Montgomery County Correctional Facility in Boyds, MD. The inmates were attentive
and eager to learn how to prevent diabetes, cardiovascular diseases, HIV, and other STIs and gain new knowledge about good oral hygiene.

On December 6th, and December 13th, 2019, AAHP’s Clinical Director conducted two classes for men and women on sexual health, HIV/AIDS/STIs, and wellness at the County’s Detention Center in Rockville. At these two sessions 17 men and 20 women completed the course and earned certificates of completion.

FY20 Highlights
To express their appreciation, the coordinators for the WIGO program visited a morning standup meeting on July 11th to present AAHP with a mural painted by the WIGO program participants at the Montgomery County Correctional Facility at Boyds. The mural, featured on the cover of this FY20 AAHP Annual Report, depicts AAHP programs as a tree of life for Black residents of Montgomery County with a mother, father, and baby at the base of the tree to represent the origins of the program in the black family and maternal and infant health, i.e., the SMILE program, and the other focus areas and programs that have grown from this foundation over the years, as the leaves.

COVID-19 Response
On March 13, 2020 the Montgomery County Department of Correction and Rehabilitation suspended outside programs and visits for inmates due to the coronavirus pandemic. This included the Correctional Facility in Boyds, MD and the Detention Center in Rockville, MD.
Technology-Centered Programs

“COVID-19 definitely accelerated AAHP’s development and use of technology as well as our teamwork skills, which is a good thing. Now I’m involved in a little bit of everything to determine how we can use technology to help the staff and improve programs. For example, the advantage of moving to online meetings has been the confidence we’ve gained in reaching people. The downside, in addition to not being able to do in-person screenings, is that everyone has a story, like what prevents them from going to the doctor to get health screenings, and you can’t really capture that in a quantitative system.

– Brandon Estime, who joined the program as an intern and now serves as AAHP’s data management coordinator analyzing health screening data to identify trends and coordinating health outreach events.

Management Information System

The development and implementation of the AAHP Management Information System (AAHPMIS) was both a challenge and an opportunity and a great deal of time and work was devoted to it in FY20. The AAHP staff played a significant role in both the design of the data entry screens and identifying the reports to be generated by the system when it was fully functional. AAHP staff and consultants helped customize the system to meet the specific requirements of the program and AAHP’s data coordinator played a major role in testing the system and communicating changes and refinements recommended by the nurses and chronic disease staff to the developer.
Configuring the system to communicate with the DHHS information systems servers was a major impediment that required a great deal of coordination and communication between department officials and the consultant and programmer for Cygnus Consulting. The death of the principal architect for the system in February left a big void in its implementation. But despite this serious setback, after months of hard work, the system passed all of the tests and was finally ready for launch in March. Throughout the long development process, AAHP continued to believe that the AAHPMIS would yield significant improvements in its ability to record, store, retrieve, and report information at both the client and program performance level during the FY20 program year.

AAHP staff began entering live data into the system in March and as a series of minor technical problems emerged, the new programmer continued to work with the staff to make software fixes. Changes involved improvements in the ability to save data entry updates between the various pregnancy trimesters and the capacity to track who made the most recent changes to the nurse’s files. In April, almost all of the errors and problems were corrected and almost all of the staff began entering live data. To facilitate the ongoing refinement of the system, a new contract was established with the programmer to make changes to the system as requested.

**Newsletter**

*Health Notes* is AAHP’s monthly, online health newsletter that features health observances, health tips, news, healthy recipes, videos, and information on health issues that disproportionately affect Black Americans. *Health Notes* is available on the AAHP website and is emailed to AAHP’s mailing list. It also serves as the primary promotional apparatus for publicizing upcoming AAHP events, complete with links to register.

**Featured Topics by Month in FY20**

- July 2019 – Minority Mental Health Month
- August 2019 – Lifelong Benefits of Breastfeeding
- September 2019 – Infant Mortality Awareness Month
- October 2019 – Breast Cancer Awareness Month
- November 2019 – Diabetes Awareness Month
- December 2019 – Self-care to Maintain Holiday Health
- January 2020 – To A Healthy 2020
- February 2020 – #OurHearts Fight Heart Disease
- March 2020 – National Nutrition Month
- April 2020 – Health is Wealth
- May 2020 – Women’s Health Month
- June 2020 – Men’s Health Month
Health Notes added 489 new subscribers in FY20, representing a 35% increase from the previous fiscal year. A majority of the new subscribers were acquired from sign-up sheets at AAHP events, while another significant portion signed up on AAHP’s website. The FY20 open rate of 23% was on par with AAHP’s average and 8% higher than the industry average. The following graphic outlines the AAHP Health Note’s metrics for FY20.

**Figure 20. FY20 Health Notes Metrics**

**Social Media**

In FY20, AAHP continued to use social media to promote the lifesaving, quality of life improving information and programs offered to the African American community in Montgomery County. Facebook, Instagram, and Twitter continued to play a vital role in sharing AAHP’s health education programs, services, and events. Throughout the program year, the size of the audience and number of engagements with AAHP posts grew. In FY20, AAHP continued to use Eventbrite, an events management platform, to both promote AAHP events and streamline the RSVP process. Increased social media traffic on Facebook proved that using Eventbrite to promote events and to register participants was successful.

AAHP’s primary social media channels experienced tremendous growth in terms of content published, engagement, and outcomes. Each channel boasted a 15% to 16% growth in followers in FY20. Facebook continued to dominate AAHP’s social media efforts, with the following notable achievements, compared to FY19:

- 61% more posts
- 53% increase in shares
- 92% increase in reactions (post likes, loves, or shares)

As the COVID-19 pandemic gripped Montgomery County, AAHP’s social media channels became an even more important source of information to its stakeholders. By actively sharing information from local, state, and federal entities on testing, prevention, and current restrictions, AAHP helped Black Montgomery County residents stay vigilant and informed.

**Figure 21. Example of Health Notes newsletter**
In FY20, AAHP’s social media channels expanded its creative reach even further, making use of native tools like Instagram carousels (posts with continuous pages of graphics), and Instagram’s Linkin.bio feature. With Linkin.bio, visitors were able to click a link within AAHP’s Instagram profile to access custom pages, such as AAHP’s website and links to CDMP classes on Zoom.

AAHP’s social media channels were boosted by engaging with partners who often shared and promoted AAHP’s content and events. Such partners included Fit Fathers, the National Council of Negro Women, and County Councilmember Craig Rice.
AAHP is here for you. Although in-person classes and services have been suspended or postponed, we are committed to providing many of the same invaluable guidance and services over the phone or online.

- Chronic Disease Prevention Classes will be held online at their regularly scheduled time. Call AAHP at (240) 777-1833 for more information or to register.
- For diabetes education, join dMeetings, AAHP’s online course on diabetes management: 
  http://aahpmontgomerycounty.org/dmeetings/
- Take a mental health screening here to access relevant professional counseling and services: 
  http://aahpmontgomerycounty.org/mentalhealth/
- For mental health support, email AAHP’s social worker at skey@mcfarlandassociate.com.
- Nurse and social work telephonic support services and resources are available for expectant mothers and mothers of infants.
- Brother 2 Brother Talks will be online, with the first to be held tomorrow evening.
- Access AAHP’s resources for seniors for information concerning COVID-19 can be found here:  

Please feel free to contact us at (240) 777-1833 with any questions, concerns, or suggestions you may have.

**Figure 23. Example of AAHP Instagram Post**
Website
In the first week of January of 2020, AAHP launched a new and updated website, which featured a new Senior’s Corner, an enhanced Tools and Resources page, and a new health sciences resources page with RSS feeds from various health organizations. Additional improvements included design enhancements to add visual appeal and movement and optimizations to speed up the website. Moving to another software platform offered more flexibility and made it easier to implement changes, including the ability to be viewed clearly on both desktop and mobile devices. In addition, the new platform provided greater functionality and features. The new site host also includes protections and improvements to reduce spam, increase all metrics, and cater to older site visitors.

In April, a coronavirus page was added to provide site visitors with easy access to the latest news and health information on COVID-19, including food and housing resources and support for individuals who may face particular challenges related to COVID-19, like seniors and vulnerable populations.
Teleconferencing and Videoconferencing

Perhaps the most obvious and significant differences between FY19 and FY20 is AAHP’s use of teleconferencing and videoconferencing technology to connect not only with its program participants, but also with every other stakeholder in the AAHP community, including staff, committee and subcommittee members, volunteers, and community partners due to the coronavirus pandemic. Executive committee, event planning committee, executive coalition, and subcommittee meetings also moved to video- or tele- conferencing platforms to maintain physical distancing requirements during the pandemic.

In March, after state and local telework orders were issued, the daily morning standup meeting that is the traditional start of each working day for AAHP staff was transformed into a daily Microsoft Team videoconference. All available AAHP staff continued to provide a description of work completed the previous day and work anticipated during the current day. But now a recording was available to the staff for download on Microsoft Stream shortly after the close of the meeting. These recordings proved to be a valuable source of archival information to generate monthly reports and track the progress of new projects and collaborations.

Other videoconferencing platforms like FaceTime, Skype, Zoom, WhatsApp, and Google Duo also emerged as important communications tools to effectively connect AAHP program participants with health and wellness resources and education while practicing physical distancing to prevent the spread of the coronavirus. The CDMP classes moved to Zoom within a week of the COVID-19 shutdown issued by the Governor. SMILE nurses began using FaceTime, Duo, Skype, and WhatsApp to meet with pregnant moms as well as new moms and their babies. The Aging subcommittee meetings were held via Free Conference call. AAHP staff facilitated videoconferencing for AAHP Executive Committee and Executive Coalition meetings.
In April, a new cell phone use policy was implemented in compliance with regulations issued by the Montgomery County Department of Health and Human Services. Cell phones were purchased and distributed to AAHP staff who were in regular contact with clients and stakeholders who could potentially share personal health information. In addition, to ensure HIPAA compliance with encrypted communication, each of these staff members was assigned an 8x8 telephone number that allowed for encryption.

**COVID-19 Response**

As early as April, federal, state, and County data began to show that people of African ancestry were disproportionately represented in the rates of COVID-19 infection, hospitalization, and death. Montgomery County had the second-highest incidence and prevalence of coronavirus cases in the State. As the month progressed, more information became available connecting underlying chronic diseases to susceptibility to COVID-19 infection and mortality.

AAHP staff, with the support and guidance of the AAHP Executive Committee and County program manager, developed and implemented the COVID-19 Engagement project to expand and restart communications between AAHP and the thousands of Black Montgomery County residents who had previously participated in AAHP educational sessions, health screenings, workshops, and SMILE program services. The project sought to ensure that all current and former clients were adequately equipped with the knowledge, strategies, and resources to ameliorate the disproportionate impact of COVID-19 on the physical and mental health of Black people in Montgomery County during the pandemic, including County resources to provide assistance with food, testing, housing, and other necessities.

Initially, four registered community health nurses were hired to make daily telephone calls to current and former clients. Communication scripts, questionnaires, and data-gathering templates were developed to record, report, and analyze performance data. Staff was trained in the use of new data collection instruments and data-gathering procedures to assess the health and social risks of contracting COVID-19. Special education services emphasized the most effective ways to reduce the potential for contracting or spreading the virus and offered resources available within the County to mitigate the myriad issues created by the Stay at Home Order. The overwhelming majority of participants (90%) had not been tested for COVID-19. Of 48 tests administered to survey participants or members of their household, nine (9) were positive. This is a positivity rate
of nearly 19%. A high percentage of survey participants (>80%) observed social distancing and other precautions recommended by public health experts.

When the project concluded at the end of June, seven part-time nurses, five AAHP staff members, and five student interns had worked on the project and called 2,064 former AAHP contacts. Of those reached, 427 individuals or 42% completed a survey that lasted an average of 25 minutes. Telephone surveys generally achieve a participation level from 7% to 13%, even with incentives so this was a much higher level of participation than most national telephone surveys, including those conducted by Pew Research and the CDC’s Behavioral Risk Factors Surveillance Survey. Ultimately, the COVID-19 Engagement project and other technology-centered community outreach activities proved effective in increasing referrals to both the SMILE and the CDMP programs and continuing AAHP’s support to Black Montgomery County residents of all ages.
Public Health Education & Professional Development Programs

“What we provide for our volunteers and interns is an opportunity to bring what they read about public health to life. We bring them into a collective conversation about how to make cultural competence more than just words. They experience real-world engagement with people from different races, cultures, genders, and ages across the lifespan and explore questions like, 'how do you reshape the practice of public health in a time of social distancing due to a pandemic?' Perhaps most importantly, they get an opportunity to discover what they’re good at in the real world. Something you can only learn by doing.”

– George McFarland, MSW, AAHP’s Program Manager and an executive in the healthcare field for over 30 years.

Public Health Education
The African American Health Program treasures the opportunity to help train the next generation of public health community leaders and to provide them with the experience necessary to be culturally competent practitioners. At the same time, students and interns are instrumental in extending the reach of AAHP staff by providing support for a myriad of tasks and activities. The
names, institutions, and degree programs of some students who interned with AAHP in FY20 are listed below.

<table>
<thead>
<tr>
<th>Student</th>
<th>Institution</th>
<th>Degree</th>
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<tbody>
<tr>
<td>Joyce Kwadey</td>
<td>Purdue University Global</td>
<td>Master’s degree in Public Health</td>
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<tr>
<td>Leonetta Biddle</td>
<td>Walden University</td>
<td>Master’s degree in Public Health</td>
</tr>
<tr>
<td>Derrick Ngu</td>
<td>Western Governors University</td>
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</tr>
<tr>
<td>Vincent Ezulike</td>
<td>Western Governors University</td>
<td>Registered Nursing</td>
</tr>
<tr>
<td>Grazzia Nkongolo</td>
<td>George Washington University</td>
<td>Master’s degree in Public Health</td>
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<tr>
<td>Felix Gouanette</td>
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<tr>
<td>Regina Carpenter</td>
<td>George Washington University</td>
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<tr>
<td>Dylan Owens</td>
<td>George Washington University</td>
<td>Master’s degree in Public Health</td>
</tr>
<tr>
<td>Kidus Adal</td>
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<td>Bachelor of Science in Community Health</td>
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<tr>
<td>Samantha Apoh</td>
<td>Liberty University</td>
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<tr>
<td>Kiarah Pryce</td>
<td>George Washington University</td>
<td>Master’s degree in Public Health</td>
</tr>
<tr>
<td>Dr. Joseph Dumbaya</td>
<td>A.T. Still University</td>
<td>Master’s degree in Public Health</td>
</tr>
</tbody>
</table>

Staff Professional Development

In FY20, the AAHP staff also continued to pursue certifications and educational opportunities to ensure that AAHP served black Montgomery County residents using public health best practices. Two community health workers participated in a comprehensive certification and credentialing training program by the National Center for Healthcare Capacity Building on ways to implement comprehensive prevention care, behavioral health, and social service delivery models for underserved communities. AAHP’s Clinical Director, data coordinator, and a student intern, who subsequently became a member of the AAHP CDMP team and now leads the dMeetings program, completed the two-day Maryland State training and certification on HIV Testing and Counseling. This meant that by the end of 2019, more than half of the AAHP staff was certified by the State to conduct HIV testing and counseling services. In May 2020, the new HIV coordinator participated in a two-day, HIV Case Management Series hosted by the MidAtlantic AIDS Education and Training Center.

COVID-19 Response

When the COVID-19 pandemic resulted in the cancellation of in-person learning opportunities, AAHP staff began making intensive use of webinars to gain the knowledge and skills to meet the COVID-19 moment. Community health workers and nurses participated in numerous webinars conducted by organizations such as the Institute for Public Health Innovation, the National Institute for Health Care Management, the American Public Health Association, EveryMind, the Alliance for Health Policy, the National Coalition on Mental Health and Aging, and the Administration for Community Living on a variety of COVID-19 related topics like “Managing Stress & Anxiety during COVID-19,” “Combating Social Isolation for Seniors during the COVID-19 Pandemic,” “COVID-19 and Nursing Home Care,” “Trends in Community Responses to COVID-19,” “Caregiving in the Times of COVID-19,” “Racism: The Underlying Condition,” “Outreach Safety During a Pandemic,” and “Best Practices for Supporting your Clients during COVID-19.”
Community Partners

In FY20, AAHP collaborated with a wide array of Community Partners, including County agencies, other public health organizations, hospitals, churches, physicians, nonprofits, associations, businesses, and educational institutions.

Adventist Health Care Center for Health Equity & Wellness
Adventist Hospital
Aetna's Community Development Department
Alpha Phi Alpha Fraternity
American Bone Health
American Diversity Group
Anthem Health
Asbury Methodist Village
ASPIRE
Black Women's Health Imperative
Bones N Balance
Clinical Solutions, Inc.
Colesville United Methodist Church
Cygnus Research Corporation
Delta Sigma Theta Sorority, Inc.
The Fatherhood Initiative
First Baptist Church of KenGar
Generation Hope
Howard University Cancer Center
Howard University School of Divinity
Kelly Collaborative Medicine, LLC
Kingdom Fellowship AME (KFAME) Church
Kings & Priest International Church
Know Your Lemons
Lee’s Little Leapers
Leisure World Association of African American Culture
Manna Food
Maryland State Office on HIV & AIDS
MobileMed
Montgomery College
Montgomery County Collaboration Council for Children, Youth & Families
Montgomery County Department of Recreation
Montgomery County Fire & Rescue Service
Montgomery County Domestic Violence Coordinating Council
Montgomery County Food Council
Montgomery County Housing Opportunities Commission
Montgomery County NAACP
Montgomery County Office on Aging & Disabilities
Montgomery County Office of Community & Family Engagement
Montgomery County Public Schools
Montgomery County School Health Services
Mt. Calvary Baptist Church
Mt. Jezeel Baptist Church
My Active Senior
NAACP Montgomery County Branch Parents’ Council
National Center for Health Care Capacity Building
The People’s Community Baptist Church
Plum Gar Recreation Center
The Prevention of Blindness Society of Metropolitan Washington
Progress Place
Quality of Life Pharmacy & Health, Inc.
ResCare
Rockville Senior Center
Soroptimist International of the Americas
Sweets Girlz
Temporary Assistance for Needy Families
University of Maryland School of Public Health & Kinesiology
Us Helping Us
United Healthcare
Upcounty Prevention Network
Washington Adventist Hospital Outpatient Cancer Education Program
WISH (Wellness & Independence for Seniors at Home)
White Oak Recreation Center
<table>
<thead>
<tr>
<th>Count</th>
<th>Description</th>
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<tbody>
<tr>
<td>56</td>
<td>Residents who received blood pressure monitors</td>
</tr>
<tr>
<td>885</td>
<td>Residents who were taught how to use a blood pressure monitor</td>
</tr>
<tr>
<td>91</td>
<td>Residents who received glucose meters</td>
</tr>
<tr>
<td>388</td>
<td>Residents who were taught how to use glucose meters</td>
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<tr>
<td>37</td>
<td>Residents who were referred to and received 1:1 nutritional counseling</td>
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<tr>
<td>18</td>
<td>Residents who were referred to and received 1:1 medication counseling from a pharmacist</td>
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<tr>
<td>19</td>
<td>Residents who were referred to a primary care physician</td>
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<tr>
<td>1759</td>
<td>Pre-diabetic and diabetic residents who received diabetes self-management education services</td>
</tr>
<tr>
<td>1759</td>
<td>Hypertensive residents who received blood pressure management education services</td>
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<tr>
<td>188</td>
<td>Community events</td>
</tr>
<tr>
<td>2696</td>
<td>Residents reached by components or annually</td>
</tr>
<tr>
<td>18</td>
<td>New Initiatives Undertaken</td>
</tr>
<tr>
<td>.8</td>
<td>Average A1C decrease for program participants</td>
</tr>
</tbody>
</table>
AAHP FY20 in Review Timeline

July 11, 2019: WIGO (When I Get Out) program coordinators from the Montgomery County Correctional Facility present AAHP with a mural depicting AAHP programs in appreciation from WIGO program participants.

September 12, 2019: State Delegate Jheanelle Wilkins visits AAHP to learn more about the SMILE program.

September 18, 2019: AAHP begins offering monthly screenings and health education presentations to nearly 200 African American seniors in the Generation One ministry at The People’s Community Baptist Church.

September 16-24, 2019: AAHP and Montgomery County Fire and Rescue Service provide home fire and fall risk safety prevention inspections to older African American homeowners in recognition of Falls Prevention Awareness Day.

October 10, 2019: The AAHP Aging Subcommittee hosts the first Aging Information Exchange Summit at the Silver Spring Civic Center.

October 2019: The AAHP HIV/AIDS coordinator screens and counsels 102 residents for HIV; the highest number of HIV tests ever conducted by AAHP in a single month.

December 1, 2019: AAHP holds World AIDS Day event at the Silver Spring Civic Center.

December 14, 2019: AAHP moves from 14015 New Hampshire Ave, Silver Spring, MD to 1401 Rockville Pike, Rockville, MD.

March 5, 2020: Governor Hogan confirms the first coronavirus cases in Montgomery County, declares a state of emergency, and issues a catastrophic health emergency proclamation to control the spread of COVID-19.

March 13, 2020: Governor Hogan closes schools, senior centers, prohibits gatherings of more than 250 people, orders non-essential state employees to telework if possible, suspends all visits to state prisons.

March 30, 2020: Governor Hogan issues stay at home order for all Maryland residents. No Maryland resident is to leave their home unless it is for an essential job or for an essential reason, such as obtaining food or medicine, seeking urgent medical attention, or for other necessary purposes.

March 2020: The AAHP Chronic Disease Management Program (CDMP) staff begins conducting virtual webinars to replace in-person classes at the White Oak Recreation Center, the Germantown Library, Leisure World, and Plum Gar Recreation Center.

April 2020: The SMILE staff conducts its first virtual class on preterm labor for prenatal moms.

April 2020: AAHP begins the COVID-19 Engagement Project by assigning four registered community health nurses to call over 2,000 former AAHP clients to assess their health needs and provide counseling and guidance on services available to promote health and well-being during the pandemic.


May 6, 2020: AAHP holds its first “Wellness Wednesday” for SMILE program moms.

May 25, 2020: George Floyd is murdered by Minneapolis police sparking nationwide protests.

June 30, 2020: AAHP concludes COVID-19 Engagement Project. Seven part-time nurses and five AAHP staff members and interns reconnected with 427 former AAHP clients.