Weight Management participants are all smiles at the AAHP Walk on Saturday, October 23, 2021

AAHP MONTHLY REPORT
October 2021

African American Health Program

I. INTRODUCTION

October marked the beginning of the second quarter of the current contract extension between the Montgomery County Department of Health and Human Services (DHHS) and McFarland & Associates Inc. to implement programs and services for the African American Health Program (AAHP).

On October 28th, Montgomery County lifted the indoor mask mandate, due to the recent decrease in the rate of COVID-19 cases for seven consecutive days from "substantial" community transmission to "moderate." Also, booster vaccinations became available for County residents over age 65 and in other high-risk categories.

In October, after months of planning and preparation, AAHP conducted a series of breast cancer awareness events in observance of Breast Cancer Awareness Month. On Sunday, October 3rd, AAHP partnered with Harvest Intercontinental Church in Olney, Maryland, to host a breast cancer awareness event which included health education presentations, health screenings, and food and exercise demonstrations. To facilitate this event, AAHP partnered with breast cancer survivors, advocates, and other organizations, including *Touch4Life, 2for2Boobs, Living Beyond Breast Cancer, Warriors in Pink, Brothers Against Breast Cancer*, *Know Your Lemons,* and *Relay for Life*. These organizations strongly align with AAHP's mission to decrease the incidence of late-stage breast cancer, reduce health disparities, improve health outcomes, and save lives by educating and empowering women and men about the importance of early detection. This event was a major success due to the teamwork of AAHP staff and volunteers from both the church and the community at large. Participants were screened for blood pressure, blood glucose, body mass index (BMI), and mental health. Other organizations joined in to expand the range of screenings and consultations. Howard University's pharmacy students and other collaborating health and wellness providers conducted screening tests for Hepatitis B and C, HIV, and cholesterol. This event allowed the congregation and community members to obtain a comprehensive snapshot of their health and understand how chronic diseases can be prevented, managed, and controlled.

On Sunday, October 10th, AAHP continued its breast cancer campaign by holding a virtual panel discussion and food demonstration in partnership with Kingdom Fellowship A.M.E Church. The panelists were all breast cancer survivors, including AAHP's Kick Start Your Health instructor, a S.M.I.L.E nurse case manager, and a social worker, along with three other survivors including the founders of *Touch4Life*, *2For2Boobs*, and *My Style Matters*. The panelists gave impactful and personal testimonies about their journeys with their cancer diagnoses, treatment, and survival. Their lived experiences emphasized the importance of risk reduction and obtaining annual mammograms, and offered insights on the signs, symptoms, and variations of breast cancer.

In October, three AAHP staff members completed training to become navigators for the Kaiser Permanente Community Health Access Program (CHAP). Based on the completion of training and negotiations with the Kaiser Foundation, AAHP was awarded 25 slots to enroll County residents in a *no-cost comprehensive insurance program* funded by the Kaiser Foundation during the open enrollment period between November 1st, 2021, and December 15th, 2021. This will allow community residents who do not qualify for other health coverage, such as Medicaid or Medicare, an opportunity to obtain insurance with no monthly premium and with no out-of-pocket costs to cover a wide range of health care services including face-to-face visits with physicians, prescription refills, laboratory tests, mental health services, X-rays, and pharmacy services. This partnership with AAHP can potentially save residents hundreds of thousands of dollars and promote access to care for some of the County's most vulnerable residents.

In almost every category of service, participation in AAHP programs continued to rise, as well as the level of adherence to health promotion and wellness advice and counsel.

II. AAHP PROGRAM ACTIVITIES

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

October was an outstanding month for the SMILE program. The caseload reached 159 mothers and infants and recorded its best overall performance in four years on most indicators tracked from month to month. The caseload included 96 mothers, consisting of 36 prenatal and 60 post-partum cases. Six new healthy babies were born in October, and all were delivered at term and at normal weight. The nurses arranged for the distribution of car seats, cribs, and other supplies for all new mothers.

Regrettably, one mother experienced the unfortunate loss of her baby girl at 23 weeks due to a combination of stressful circumstances. In response to this loss, the program staff provided comfort and bereavement resources for the mother.

On the other hand, another mother gave birth to twins delivered by C-section at 27 weeks. In spite of their premature births, the twins reached expected milestones for their gestational age by October 5th and now weigh 14.4 lbs. and 14.1 lbs. Likewise, the AAHP triplets currently enrolled in the SMILE program are thriving nicely at 10 months.

At the end of October, the number of high-risk cases remained high, and out of 96 mothers, included 27 cases classified as high-risk because of medical issues, and 19 because of social issues. Fourteen cases presented with both high medical and social risks. The severity of these cases required an increased level of effort by staff to mitigate these risks. High-risk medical conditions included intellectual and 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 food and utility bills, and transportation to medical appointments. Social risks included concerns about personal safety, low self-esteem, unemployment, low educational attainment, unclear immigration status, language barriers, inadequate family support, isolation, and disconnectedness. Staff addressed these issues through appropriate referrals.

A total of 11 new prenatal cases and six postpartum mothers were screened for depression using the Edinburgh Postnatal Depression Scale. During October, seven mothers scored above the normal range and were referred to mental health providers for further evaluation and care.

At every encounter, the staff educated mothers on the benefits of breastfeeding and encouraged them to breastfeed their infants for as long as possible. At the end of October, the overall percentage of mothers breastfeeding for up to 12 months was 65%, and the percentage of mothers breastfeeding up to six months was 74%. Both breastfeeding indicators far exceeded comparative data presented by the Centers for Disease Control and Prevention that indicated that African American women who breastfed exclusively for six months after delivery was only 20%.

The SMILE nurses continued to play a pivotal and supportive role in almost all aspects of AAHP's services to mothers as well as community outreach to recruit, educate, and attract program participants. They provided health screenings at various events including the breast cancer events at Harvest Intercontinental Church, Kingdom Fellowship, and Leisure World. They helped prepare and distribute diaper bags at Kingdom Fellowship Church and participated in the diaper distribution events. These events were also effective ways to recruit new program participants.

As shown in the graph presented below, the ethnic origin representation of mothers participating in the SMILE program showed 59% African, 40 % Black American, and 1% Caribbean.

During October, the nurses met weekly to review individual cases and plan teleconsultations and staffing that included reviews of difficult cases in consultation with AAHP's social worker, the nurse supervisor, and the clinical director, and community health workers. The entire SMILE team attended the Fetal Infant Mortality Rate Community Action Team (FIMR/CAT) case review on October 26th. Other AAHP staff also assisted and supported mothers and families by providing diapers, car seats, breast pumps, pack-and-play cribs, and other items to support motherhood and parenting.

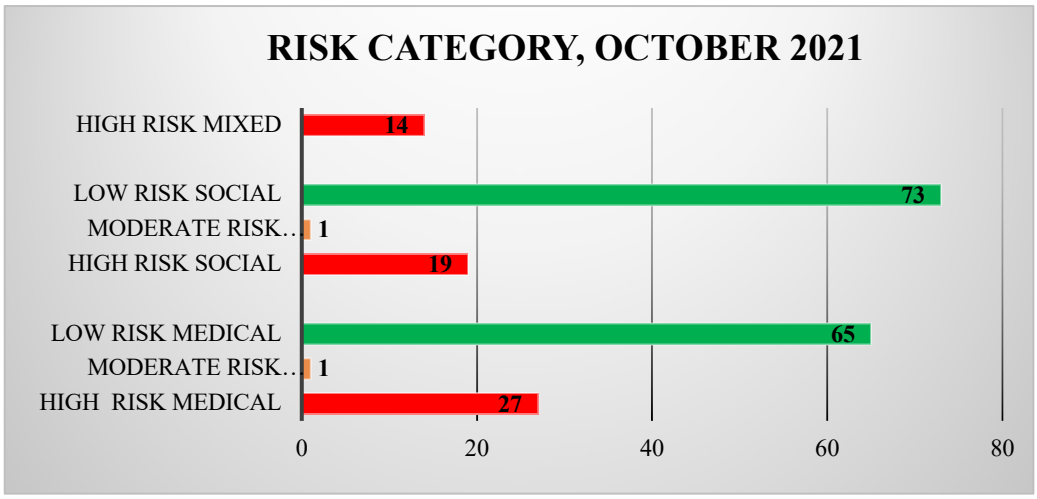
The table and charts below present an overview of the SMILE rolling three-month data which includes October 2021 in comparison to the program performance in the calendar year 2020.

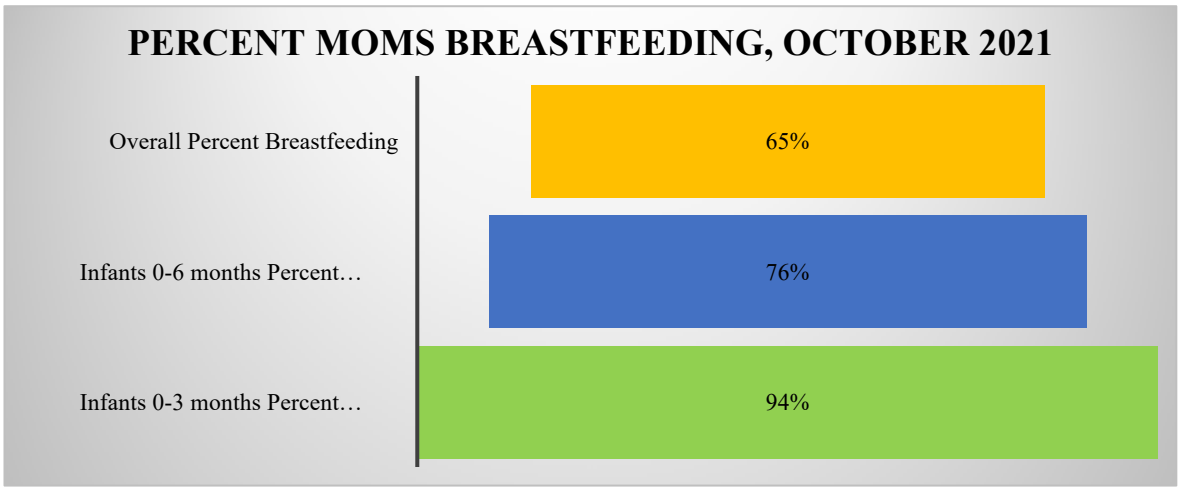
PROFILES/SERVICES	***Monthly Average Calendar Year 2020**	**August 2021**	**October 2021**	**October 2021**	**Comments Pertaining to October**
A) Currently Active Moms	**83**	90	90	96	
Prenatal (still pregnant)	**24**	29	35	36	
Postpartum (Moms who have delivered)	**58**	61	55	60	
B) All infants	**58**	62	57	63	
Single Births	**55**	57	52	56	
Multiples	**2**	5	5	7	
Case Load (A+B)	**140**	**152**	**147**	**159**	
MOM'S ETHNICITY					
African American Clients	**31**	30	34	38	
African Clients	**49**	56	55	57	
Caribbean Clients	**2**	4	1	1	
REFERRALS					
HHS Prenatal Referrals Received	**4**	3	3	5	

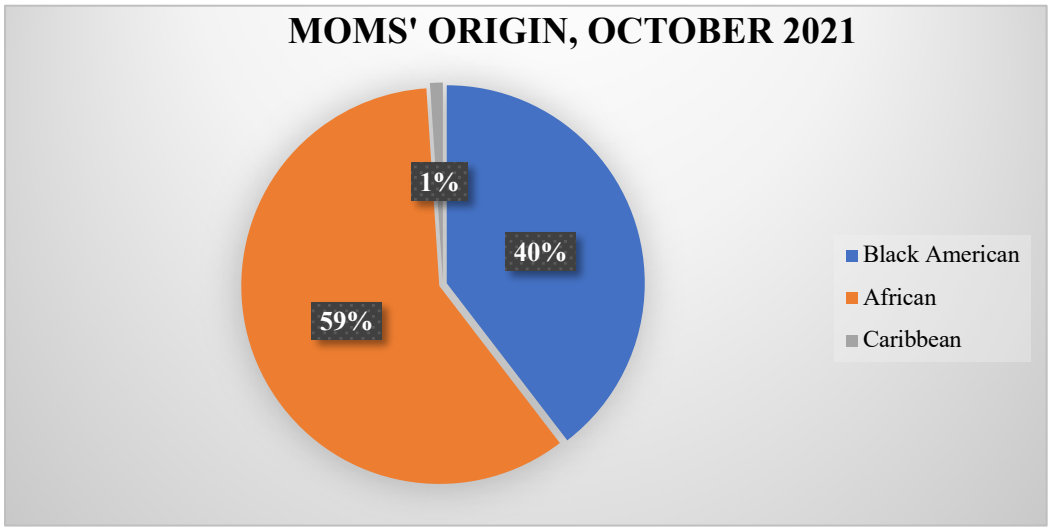
Referrals from Other Sources	**4**	6	6	7	
Total Prenatal Referrals	**8**	**9**	**9**	**12**	
NEW ENROLLMENTS					
Prenatal Moms Newly Enrolled During the Month	**7**	9	9	11	
Infants Newly Enrolled during the month	**5**	2	4	8	
All New Enrollments for the month	**12**	**11**	**13**	**19**	
DISCHARGES					
Prenatal Discharges	**1**	1	12	0	
Infant Discharges	**5**	8	5	5	
Total Discharges	**6**	9	7	5	
DELIVERIES					
Term Deliveries	**5**	2	4	6	
Preterm Deliveries	**1**	0	0	0	
Total Deliveries	**6**	2	4	6	
BIRTH OUTCOMES					
% Healthy Birth Weight	**95%**	100%	100%	100%	
Number of Low Birth Weight	**1**	0	0	0	
Number of Very Low Birth Weight	**1**	1	0	0	
Infant Deaths (includes Stillbirths)	**0**	0	0	0	
Unfavorable Birth Outcomes	**0**	0	0	0	
(Congenital Anomaly, Fetal Demise, Miscarriage)	**0**	0	0	1	Fetal loss at 23 weeks due to stress
SERVICES					
Total Home Visits	**17**	7	1	2	
Telephonic Consultations	**144**	208	191	201	
Community Referrals Made	**26**	48	61	76	
Classes/Presentations Completed	**9**	10	5	10	
BREASTFEEDING MOMS					
Breastfeeding 0-3 months	**92%**	85%	88%	94%	
Breastfeeding 0-6 months		82%	74%	76%	
Breastfeeding 0-12 months	**73%**	65%	61%	68%	
INSURANCE					

Clients with Private Insurance**	**23**	29	30	28	
Clients with Medicaid Insurance**	**60**	61	60	68	
Clients without Insurance	**n/a**	0	0	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 Webinars

In October the CDMP classes focused on cancer as a leading cause of morbidity and mortality for people of African descent throughout the nation and the County. In response to the ongoing and increasing demand for education about health and wellness, AAHP invited two distinguished guest lecturers to join the CDMP faculty. These guest lecturers included a former fellow at the National Institutes of Health who worked under Dr. Fauci, who presented the latest advancements on COVID-19 research, epidemiology, vaccination and therapeutics. The second guest lecturer is a third-year psychiatry resident who spoke about Body and Mind. Both presenters were effective and discussed these important topics from the racial and cultural perspective of Blacks/African Americans.

On October 21st, a hybrid of in-person and virtual educational sessions for residents of Leisure World included in-person health screenings and a cooking demonstration combined with a virtual lecture and discussion led by a CDMP faculty. Thirty-two people attended the in-person session, and 18 others joined virtually. In October, the CDMP team conducted six virtual class webinars with collaborative curricula designed to promote the benefits of adopting a healthier lifestyle.

Yoga and Zumba classes provided up to 120 minutes (of the 150 minute per week goal) of physical activity and the Health and Nutrition class offered recipes and cooking demonstrations of plant-based meals. The Kick Start Your Health (KSYH) I and II classes presented evidence-based education to help participants improve their health and manage chronic diseases. Class instructions included cooking demonstrations, recipe sharing, and presentations on cancer prevention and management. The KSYH series included an overview of cancer-related medical terms, screening recommendations, and an in-depth discussion of specific cancers (lung, breast, colon, colorectal, and prostate). The CDMP instructor shared information about her challenges and triumphs with a cancer diagnosis. She supported the core teaching of

the CDMP curriculum that emphasized prevention, healthy eating, exercise, and screening.

Participants learned the actions they can take individually and collectively to reduce their risk for and manage certain cancer types. The CDMP team welcomed new participants and continued to guide discussions about lifestyle and behavioral changes. Even though cancer is often perceived as a death sentence and therefore difficult to discuss, the total number of participants in classes steadily climbed over the course of the semester.

November's CDMP classes will focus on Diabetes and Alzheimer's Disease.

Below please find the CDMP monthly report for October 2021.

CDMP CLASS Activities

ACTIVITY	HOURS	DATA REQUESTED	TOPIC COVERED
Health and Fitness on-line Webinar ZUMBA: October 4, 11, 18, 25 YOGA: October, 6,13,20,27	11am – 12pm	Class and Height, Weight, BP, BMI, % BF, Glucose, Cholesterol Screenings	These classes included online, guided exercise, including yoga and Zumba by trained exercise professionals and AAHP staff. Zumba classes emphasized balance, movement, posture, toning, and cardio. Yoga exercises highlighted the five elements of Ayurvedic medicine. Based on Hindu philosophy, Ayurveda is known as the "Science of Life." The yoga classes emphasized the parallels between elements in nature such as air, water, ether, fire, and earth and the significance of maintaining harmonic balance. Knowledge and skills included information to 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 including exercise and a more nutritious diet.
Kick Start Your Health I (Diabetes) October, 6,13,20,27	6 pm – 7 pm	Class and Height, Weight, BP, BMI, %BF, Blood pressure, cholesterol	October's class included cancer terminology and how nutrition and diet can reduce cancer risk. Participants maintained and improved their HEDIS measures through nutritious diets and exercises.
Health and Nutrition Plant-Based food October 7, 14, 21, 28	1pm - 3pm	Weight, BP, BMI, %BF, Glucose, Cholesterol screenings	Class topics included the selection of healthy eating choices and the link between nutrition and chronic health conditions. AAHP's Food for Life nutritionist demonstrated the benefits of plant-based diet/healthy cooking to improve pre-diabetes and diabetes outcomes. Cooking demonstrations and recipes, including

			smoothies, were demonstrated and described.
Kick Start Your Health II Online Webinar. Diabetes October 7, 14, 21, 28	6 pm – 7 pm	Weight, BP, BMI, %BF, Cholesterol screenings	Each class focused on cancer weight management through improvements in fitness and nutrition. Participants continued to maintain or improve in their HEDIS measures and make positive behavioral changes.

	Health and Fitness 11 am – 12 pm				**KSYH I 6pm – 7:15pm**				**Health and Nutrition 1pm – 2:15pm**				**KSYH II 6pm – 7:15pm**			
Date(s)	10/04 10/06	10/11 10/13	10/18 10/20	10/25 10/27	10/06	10/13	10/20	10/27	10/07	10/14	10/21	10/28	10/07	10/14	10/21	10/28
Class Size	32	29	18	24	10	13	12	13	21	25	50	24	10	9	14	16
TOTAL	**103**				**48**				**120**							
Avg.	*26*				*12*				*29*				*12*			
Natl. Avg.	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	5	1	4	4	**14**
Female	98	47	106	45	**296**
Total	103	48	100	50	**310**
% African American					

2. **Diabetes Prevention Program**

In October, the DPP class continued the maintenance phase of the curriculum and met on October 14th and 28th, from 6:00pm-7:00pm. AAHP's clinical director led the bi-weekly presentations. AAHP's retired County registered dietician volunteered as a special guest lecturer on October 12th to educate the team on understanding food labels as a strategy for improving nutrition. During the sessions, participation in classes remained high at 95% because of the diligent efforts of AAHP staff who called participants at the end of each week to check on participant progress and to record weight and activity minutes for a subsequent entry into the DPP Lifestyle Coach's Log. **To date, seven participants have reversed prediabetes but continued to participate in the maintenance sessions**.

The DPP participant attendance and health metrics for October are presented in the tables below:

October 2021 DPP Attendance

Participants	Oct 12	Oct 26	Total
Male	2	2	**4**
Female	12	11	**23**
Total	13	13	**27**
% African American	100%	100%	**100%**

Health Metrics	Baseline	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Goal To Reach in December
Average Weight (lbs.)	213.3	213	211	209.2	205.7	203.4	203.1	203	204	205	202	200
Average Weekly Activity (Minutes)	140	175.3	183.2	197	212	211	217	215	220	225	230	230
Average HB A1C (%)	5.91%				5.8		5.7					5.60%

3. **dMeetings**

dMeetings Enrollment and Completion by Month in Fiscal Year 2021

	11/20	12/20	1/21	2/21	3/21	4/21	5/21	6/21	7/21	8/21	9/21	10/21	Total
New Enrollments	23	9	8	3	24	25	37	4	4	17	10	2	166
Completion Certificates Awarded	18	5	5	3	9	14	15	1	1	1	4	0	76

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

In October, the CDMP continued to monitor clients' biometric values and provide guidance and counseling on measurements outside of the normal ranges. One client who dropped out of the program returned in October due to being overwhelmed by self-monitoring weight and blood pressure autonomously. The table below demonstrates the high level of adherence shown by most participants. Almost 80% of participants readings between 16 and 27 days during the month.

RPM Days of Active Participation

Number of Active Days	0 days	1 day	2- 10 days	Up to 10 days	16–27 days
Number of Participants	0	0	1	5	19

Cohort Average Biometrics in October	
Women's Weight	179.2 lbs.
Men's Weight	285.2 lbs.

Systolic BP	131.8 mmHg
Diastolic BP	73.8 mmHg
Glucose	179.2 lbs.

5. Weight Management Program

In October, the weight management program hosted two AAHP walks. The first walk was on Saturday, October 9th, 2021, at the Woodlawn Manor Cultural Park (Harriet Tubman Underground Railroad Trail) in Sandy Spring, MD. Twenty-seven participants attended the walk. The second walk was held on Saturday, October 23rd, 2021, at the Sligo Creek Trail in Silver Spring, MD with 24 attendees walking with the group.

Each walk lasted approximately one hour and included slow and medium-pace walkers. These walks and other community events serve to recruit new enrollees into the program. In October, the program enrolled five recruits. The total enrollment of walkers for October was 24. The table below shows the breakdown.

WMP Enrollment

	Previously Enrolled Clients	Discharged Clients	New Clients	Total Clients
October	19	4	6	21
October	19	0	5	24

Upon joining the program, all participants receive individualized health screenings for A1c, cholesterol, glucose, weight, BMI, body fat, water percentage, muscle mass, lean body mass, bone mass, protein, visceral fat, and blood pressure. The baseline values are stored and serve as a basis for goal setting. The plan is to re-evaluate each participant at three-month intervals during a nine-month period. Other interventions consist of developing:

- individualized meal plans for breakfast, lunch, and dinner.
- exercise plans for beginners, and advanced plans to emphasize specific muscle groups.
- monthly reports from weekly call logs with a summary of progress.
- monthly support group meetings to discuss perceptual and behavioral changes.
- daily intake charts with a breakdown of required daily caloric intake to lose one pound per week. (Analysis also included a specific breakdown of carbs: 40%, protein 30%, and fat 30% daily).

Below is a table of the weight gain and loss for October.

Reported Weight Gain/Loss

	Weight Loss		**Weight Gain**	
	Male	Female	Male	Female

0 lb.	1	4		
2 lbs.		4		2
3 lbs.	1	3		
4 lbs.	1	3	4	
5 lbs.		2		
6 lbs.		1		

C. AAHP's Social Worker Services

1. Screenings/Assessments

In October, 124 mental health screenings were completed at various health and wellness events around the County in addition to screenings completed online. The screenings provide the social worker with the opportunity to engage participants in personal discussions about their mental health status and share with them mental health resources they can access. Twice during October, AAHP's social worker assessed individuals for self-harm for suicide potential. In both instances, she provided access to information on crisis management and suicide prevention. In reviewing the overall screening results for October, most screenings consisted of Well-Being and Wide-emotional screening tests. Other mental health screenings were for problems related to gambling, alcohol abuse, eating disorders, substance abuse and bipolar disorder. The most prevalent screens were for Black/African American females between the ages of 55 to 74. Every month the staff continues to learn more about how to recruit and motivate participants to screen for mental health issues. Some of the recurring challenges involve the use of computerized tablets, difficulty reading the questions, or language barriers.

The following screenings were conducted in October:

- 32 Wide Screen
- 60 Wellbeing Screening
- 5 CD-GAD Generalized Anxiety
- 6 Audit Alcohol
- Brief Gambling Screen
- 7 eating disorder
- MDQ Bipolar
- 9 Hands
- 15 Audit Alcohol

2. Mental Health Support to SMILE

In October, as in previous months, the range of social and psychological problems the SMILE program referred to the social worker continued to increase and included domestic violence, need for food and clothing, eviction, homelessness, financial distress, and immigration issues. Resources provided included grief counseling services, physicians' referrals, health insurance, and information about refugee status.

D. HIV/AIDS Screening and Testing

1. HIV Testing

During October HIV testing was conducted at the following sites:

Sites	Date	Number Screened
Progress Place	October 27	14 HIV 14 Blood Pressure 14 Blood Glucose
Hampshire Tower Apartments	October 30	10 HIV 21 Blood Pressure 21 Blood Glucose 7 A1C 5 Cholesterol

All participants with elevated results were referred to the County's consultant for medical affairs and all persons screened were referred to the Dennis Avenue Health Center for STI testing. All persons screened were given health advice, counsel, and brochures on sexual health for adults, teens, and the LGBTQ population; diabetes; weight management; mental health; nutrition; smoking; and cancer.

A total of 24 HIV tests were conducted in October, all with negative results. Please see the statistical report below for details.

HIV TESTING REPORT		Oct-21		
African-American				
	Age Group	Male	Female	
	1947 -1969	7	0	
	1970 -1989	3	2	
	1990+	3	2	
Total		**13**	**4**	**17**
All Others				
	Age Group	Male	Female	
	1947 -1969	4	0	
	1970 -1989	3	0	
	1990+	0	0	
Total		7	0	7
GRAND TOTAL				**24**

2. **World AIDS Day Preparation**
   In preparation for World AIDS Day, AAHP's HIV navigator met with a representative from the County Ending HIV Epidemic program to discuss collaborative plans for the

observance on December 1st, 2021. A follow-up meeting is scheduled for Wednesday, November 10th at 3:00pm to decide the venue and organizational logistics.

II. Administrative and Logistical Support

During October, AAHP staff members worked very closely with members of the AAHP Executive Committee to support the virtual facilitation of the monthly meeting held on October 2nd and the monthly AAHP Coalition Meeting held on October 7th, 2021. A copy of the Executive Committee September minutes was prepared in advance of the October meeting and submitted for review and comments. The program director and the clinical director participated in both meetings and made a presentation on the status of AAHP. All members of the AAHP staff completed the monthly mandatory security training required by all employees and contractors who access the County computer facilities and resources.

Additionally, staff participated in several educational and training opportunities aimed at enhancing the knowledge and skills needed to expand competencies in service delivery. Training included:

- 10/9 - Understanding the intersection of HIV, Older Adults, and Domestic Violence
- 10/21 - Let's Talk HIV/Shameless Sexual Health
- 10/24 - Rapid HIV & HCV Testing
- 10/28 - Utilizing Validation, Therapeutic Fibbing & Other Strategies in Dementia Care
- 10/28 - CHAP orientation

APPENDIX A – Media Report

AAHP Health Notes - Distributed: October 15th, 2021, 6:15pm

August Campaign Metrics

	September	October
General List Recipients:	1618	1617
Successful deliveries:	1223	1221
Open rate:	19.5%	21%
Click rate	4.2%	.7%

AAHP's October Health Notes was entitled "Seasons" and was distributed on October 11th, 2021. This newsletter celebrated the change of seasons and explored how readers can prepare to be healthy during the holidays. In observance of Breast Cancer Awareness Month, the feature article discussed breast cancer, how it can be prevented, and how it impacts Black/African American women. The article invited readers to attend AAHP's upcoming breast cancer awareness events, with details on speakers, presentations, and offerings. The following article discussed Seasonal Affective Disorder (SAD), a depression that occurs with the change of seasons. Because SAD should be taken seriously and not shrugged off as a case of the winter blues, readers were encouraged to seek guidance and treatment if they displayed symptoms. "It's Sugar Season" offered tips on resisting the temptation to over-indulge in sweet treats during the holiday season. The Health Hint reminded readers that sharing and volunteering are good for health, which has been confirmed by scientific research. The featured video, presented by TED-Ed, shows how sugar affects the brain. The featured recipe was pumpkin quinoa chili.

October's Health Notes performed slightly lower than in August. The open rate of 21% was slightly higher than last month's open rate of 19.5%. October's click rate of .9% was also substantially lower than last month's click rate of 4.2%. The number of successful deliveries decreased by two, which was partially due to the three unsubscribers.

Facebook

AAHP's Facebook page's performance in October improved from last month. Numbers increased on all metrics, except the number of comments, which decreased by one. Most notably, seven new followers were added.

Facebook Metrics – October 2021

	Followers	Posts	Likes/Love	Comments	Shares
Total	**727**	29	23	0	13
Change from last month	+7	+5	+1	-1	+4

Twitter

AAHP's Twitter profile recorded a respectable increase in profile visits and retweets and a decrease in impressions and mentions. The audience grew by seven followers, two more than last month.

Twitter Metrics – October 2021

	Followers	New Followers	Tweets	Profile Visits	Mentions	Tweet Impressions	Retweets	Likes
Total	**401**	7	25	661	9	3523	15	12
Change from last month		+2	+9	+218	-3	-1026	+6	n/a

Instagram

AAHP's Instagram's performance in October was similar to its performance in September, with a slight increase in all metrics, except the number of impressions. Most notably, seven new followers were added.

Instagram Metrics – October 2021

	Followers	Posts	Post Likes	LinkedIn bio clicks	Impressions
Total	**226**	25	78	1	976
Change from last month	+7	+3	+4	0	-89

APPENDIX B – October Heath Notes

www.aahpmontgomerycounty.org

October is Breast Cancer Awareness Month. During this special observance, AAHP joins organizations and people worldwide to raise awareness of breast cancer and to show support for people impacted by it. In the U.S., about one in every eight women born today will get breast cancer at some point in their lifetime. Every year, more than 200,000 American women are diagnosed with breast cancer and more than 40,000 will die from it. (Men also get breast cancer but make up less than 1% of breast cancer cases.) Between 2014 and 2018, Black/African American women were equally likely to be diagnosed with breast cancer as non-Hispanic White women but were almost 40% more likely to die from breast cancer. AAHP's work to empower Black/African American women with education on how to prevent and defeat breast cancer is critical to fulfilling its mission of reducing health disparities.

While some risk factors, such as age, family history, and having dense breasts are outside of one's control, an overall healthy lifestyle can help reduce breast cancer risk. Healthy lifestyle behaviors include limiting alcohol intake, not smoking, maintaining a healthy weight, eating a nutrient-rich diet, exercising, getting enough sleep, and breastfeeding. By contrast, unhealthy lifestyle behaviors increase your breast cancer risk. Additional risks include taking hormone replacement therapy after menopause for more than five years and taking certain forms of oral contraceptive pills.

The good news is that early-stage breast cancer is almost always curable. Because women who get mammograms on a regular basis are more likely to detect breast cancer early, less likely to need a mastectomy (removal of one's breast) or chemotherapy, and more likely to be cured, AAHP partners with numerous organizations to help provide and promote mammograms for Black/African American women in Montgomery County.

Black/African American women have a greater risk before age 40 year than White women. If there is history of breast cancer in your family, speak with your doctor if you are less than 40 about when to begin and how often to get mammograms. If you are a woman between the ages of 50 and 74, schedule a mammogram at least every two years. If you have a history of breast cancer in your family, do not wait, discuss your options with your doctor.

On October 3rd, AAHP kicked off Breast Cancer Awareness Month by partnering with Harvest Intercontinental Church in Olney for a breast cancer awareness event and health fair. AAHP provided a myriad of health screenings, including blood pressure, blood glucose, A1C, BMI, and wellness checks. AAHP also brought along a group of advocates from local breast cancer organizations, including *Touch 4 Life, Inc, 2 For 2 Boobs, Inc, Living Beyond Breast Cancer*, and *Brothers Against Breast Cancer.* With missions to save black lives from breast cancer by educating, engaging and empowering, and goals to decrease the incidence of late-stage breast cancer diagnoses, these organizations were perfect partners to increase the level of understanding in the community about the importance of early detection. Other event activities included a healthy cooking demonstration with Mrs. Robina Barlow, line dancing with Ms. Miejo Dambita, prize raffles, and more! See AAHP's website for pictures.

On October 10th, AAHP continued its breast cancer awareness campaign by partnering with Kingdom Fellowship A.M.E. Church for a Virtual Panel Discussion. The keynote speaker for this event was AAHP's consultant, Dr. Nancie Richberg, the "Kick Start Your Health" instructor, as well as a breast cancer survivor. Other thriving survivors included AAHP staff members Serena Holtz and Wanda Smith, as well as Laura Crandon with *Touch 4 Life, Inc,* Tallulah Anderson with *2 For 2 Boobs,* and Tiah Tomlin with *My Style Matters, Inc.* The presentations were followed by a Q&A Session and healthy cooking demonstration with Mrs. Robina Barlow, who spoke on the relationship between food and breast cancer risk, survival, and recovery. These events helped to increase our community's knowledge about the importance of self-breast examinations and mammography for early detection, as well as the importance of early detection in saving lives.

Sources:
www.cancer.org
www.minorityhealth.hhs.gov
National Cancer Institute
www.cityofhope.org

Seasonal affective disorder (SAD) is a type of depression associated with the changes in the seasons. For most people, SAD occurs from fall until spring. While the exact cause of SAD is undetermined, many hypotheses exist. It's possible that the decreased amount of sunshine in fall and winter contributes to the disruption of a person's circadian rhythms (internal clock) as well as a decrease in serotonin, a "happy hormone."

SAD shouldn't be brushed off as a simple case of the "winter blues" or a seasonal funk that one must simply get over. Not only is SAD associated with low energy, sleeping problems, sluggishness, agitation, difficulty concentrating, and feelings of hopelessness or guilt, SAD can also lead to substance abuse, eating disorders, and suicidal thoughts and behaviors. That's why it's important to take signs and symptoms of SAD seriously. People with SAD should seek treatment just as they would for any other health issue.

If you think you are suffering from SAD, you may wish to consult AAHP's mental health screening tool for further understanding of your condition and resources that can help you.

Source:
National Institutes of Health
www.mayoclinic.org

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There they are…sweet treats! You know you shouldn't give in to the temptation, but sometimes you can't help yourself. With the start of Halloween and continuing with the holidays on to New Year's Eve, you might find yourself eating more than a few mini candy bars or one too many slices of cake. It's no secret that sugar can be addictive, but it's possible to overcome the downward spiral of sugar addiction by learning how to enjoy them while limiting the amount you eat. These pointers may assist you in mentally preparing for the upcoming Sugar Season:

1. Strategize your indulgences. It may be unrealistic to say no to every single sweet treat that passes your way. You may want to focus on a few select treats or special days that may really be worth the indulgence. For example, you might swear off all sugary treats except your mother's pound cake.
2. Savor and appreciate the foods you eat. Whether it's a delicious baked treat or a healthy vegetarian meal, enjoy the flavors and textures you experience. Make a mental note of how much you are consuming and how it will impact your health. Mindfulness often leads to good decision-making and can help you resist temptation.
3. Show up to events full or partially full. When you eat a healthy meal or snack before a special event, you're less likely to indulge at the event.
4. Satisfy yourself with fruit. Fresh fruit can be an excellent choice when you're wrestling with a sugar craving. And dipping your fruit in a bit of melted antioxidant-rich dark chocolate can make you feel like you're having an actual dessert.
5. Stay the course. Your commitment to your health should still stand even after a slip-up. The key is to get back up on the horse and return to your low-sugar lifestyle as soon as possible. Most likely, you will find it gets easier and easier to resist unhealthy foods.

Sources:
www.healthline.com
www.psychologytoday.com
www.superhealthykids.com

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www.healthline.com
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Health Hint

As we begin the season of giving and sharing, remember that giving is also good for the giver. Volunteering your time or donating your resources can give you a warm feeling and may also reduce your blood pressure, improve your self-esteem, and decrease your depression and stress levels, which ultimately increases your longevity and wellbeing.

Source: The Cleveland Clinic

Featured Video

TED-Ed presents this powerful video about how sugar affects the brain:

Featured Recipe: Pumpkin Quinoa Chili

Ingredients

- 1 cup cooked quinoa (about ⅓ cup raw)
- 1 cup cooked, mashed pumpkin
- 1 tablespoon extra-virgin olive oil
- 1 medium onion, chopped
- 2 cloves garlic, chopped
- 1 tablespoon ground ancho chiles
- 1 teaspoon ground cumin
- 1 tablespoon pie spice blend
- 1 orange bell pepper, chopped
- 2 ribs celery, chopped
- 2 cups vegetable stock
- 14.5 ounces fire roasted diced tomatoes
- 1 ½ cups cooked chickpeas (or one can, drained)
- 1 teaspoon salt
- ¾ ounce unsweetened chocolate, chopped
- cilantro

Instructions

1. Measure the quinoa and pumpkin and reserve.
2. In a large pot, heat the olive oil and add the onion. Saute for about 10 minutes, then add the garlic. Stir for a couple of minutes, then add the ancho powder, cumin, pie spice, and quinoa. Stir until fragrant.
3. Add the peppers, celery, stock, tomatoes, and pumpkin, and stir to mix. Add the chickpeas and salt and bring to a simmer. Cooker until thickened, about 10 minutes.
4. Add the chocolate and let it sit on the hot chili until melted. Stir in and cook a little longer to blend the flavors. This will actually be better the next day.
5. Serve garnished with cilantro.

Nutrition: calories - 260, fat - 7g; saturated fat - 2g; sodium - 690mg; carbohydrate - 40g; fiber - 8g; protein - 9g

Source: www.oldwayspt.org

African American Health Program
(240) 777-1833 | www.aahpmontgomerycounty.org

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