



AAHP SMILE baby looks adoringly at a SMILE nurse

**AAHP MONTHLY REPORT
March 2022**



I. INTRODUCTION

In early March, an accidental gas explosion caused a massive fire at a Silver Spring apartment complex, leaving 14 people hospitalized and displacing hundreds, including AAHP clients. Such tragic events affect the mental health of victims and underscore the important role AAHP plays in providing resources and support for Montgomery County's most vulnerable citizens. Staff were able to conduct individualized needs evaluations that included the physical health and emotional well-being of these residents.

In March, AAHP extended its community outreach to Paint Branch High School and Blake High School in an effort to increase and expand engagement to more young people, orienting them towards a lifestyle that promotes health and well-being. By targeting school-aged youth, AAHP can improve the health of Black/African American residents for the future; awareness about health promotion and disease prevention at a young age can help them achieve a lifetime of good health. Knowledge is power and knowing is the first step before taking action. Towards this objective, AAHP staff initiated a new partnership with students as part of a collaboration with the Washington Regional Transplant Community, an organization that promotes and advocates for live organ donation. This new effort was initiated with the support of a delegate from Maryland's 14th Congressional District. As part of that effort, Washington Regional Transplant Community has launched a scholarship program that recognizes students who produce the best videos about organ donations.

On Saturday, March 26th, AAHP participated in the Mount Calvary Baptist Church Sickle Cell Blood Drive by providing marketing materials on diabetes, hypertension, heart disease, HIV, and mental health.

On Sunday, March 27th, AAHP staff participated in Ethiopian Women's Day at Montgomery College's Takoma Park/ Silver Spring campus to celebrate Women's History Month.

On March 31st, AAHP staff participated in Wellness Night at Wheaton Woods Elementary School by conducting a session for families on the importance of health and healthy decisions. During that event, AAHP's weight management coordinator held a discussion about health literacy to approximately 35 elementary school students on food portion sizes, obesity, making healthy food choices, and the healthy eating plate. During the presentation, students discussed the healthy eating choices they make in their lives. The slides presentation contained more advanced information suited for parents. This event served as a reminder to respect and appreciate teachers who provided high-quality education in a virtual setting amidst the pandemic.

In March, AAHP welcomed a new Data Coordinator and a new Community Health Worker.

II. AAHP PROGRAM ACTIVITIES

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

With the easing of COVID-19-related restrictions, the SMILE nurses began organizing and conducting more in-person group meetings to supplement the virtual group meetings, bringing together expectant and postpartum mothers to share information, education, and mutual support. During those meetings, the nurses discussed and explained medical issues

related to pregnancy and childbirth and were available to answer any questions. These efforts resulted in the biweekly Mommy Chat, where mothers can express their concerns and learn more about opportunities to participate in training and learn about community resources. The Mommy Chat Groups held two sessions that covered car seat safety, infant and child development, mental health, and stress management, as well as educational opportunities available through Montgomery College. More mothers are continuously being encouraged to pursue higher education as a way of improving their economic and social circumstances.

On March 28th, AAHP staff organized an in-person birthday/graduation ceremony for the babies who reached their first birthday during March. This was a heartwarming event, during which mothers applauded the outstanding work of the nurses who worked with them over the past year or more. At least one mother explained that on learning of her pregnancy, her first instinct was to discontinue her college education. However, her AAHP nurse encouraged her to stay in school and now she is pleased to have obtained a nursing degree. As a result of a new partnership between AAHP and Montgomery College, more pregnant and postpartum mothers are being encouraged and assisted in pursuing higher education at Montgomery College. Importantly, this opportunity is extended to undocumented women, who may be eligible for scholarships at the college.

One of the SMILE nurses gave a riveting presentation to the County Council at the Lunch & Learn on March 16th. She described the impact of health disparities faced by Black/African American women in a presentation entitled *Women of Color: The Impact of Systemic Racism on Health and Well-Being*. She noted that in America, Black/African American women are more than three times more likely to experience maternal mortality. Food insecurities, housing issues, and lack of insurance all contribute to these disparities.

During March, the SMILE program continued to achieve outstanding results in most categories of program performance, recording 187 cases and exceeding the caseload in all previous months. This caseload included 117 mothers and 70 infants. Remarkably, ten of eleven newborns were delivered at term and were of normal weight at birth. One baby was delivered prematurely by C-section due to fetal distress. The baby was recorded as very low birth weight.

To assist new mothers in making the transition to motherhood, the staff made available resources such as car seats, cribs, and other items to all new mothers.

Participants in the SMILE program are assessed individually and categorized by medical and social risks to facilitate their management. At the end of March, medical high risk cases accounted for 19% of the caseload whereas social high risk was listed for 26% of the cases. High-risk medical conditions included mental challenges, gestational diabetes, pre-eclampsia, a history of multiple past miscarriages, and advanced maternal age. Frequently cited social needs include housing, help with food and utility bills, and transportation to medical appointments. Social risks also included problems with personal safety, low self-esteem, unemployment, low educational attainment, unclear immigration status, language barriers, inadequate family support, isolation, and disconnectedness. The nurses' efforts to mitigate these medical and social risks were effective. At the end of

March, the number of high medical risk cases decreased from 25 in February to 22 in March and the high social risk cases—that generally require intensive intervention from nurses, social workers, and community health workers—stood at 30 among the 117 mothers.

In March, 11 new prenatal cases and 11 postpartum mothers were screened for depression using the Edinburgh Postnatal Depression Scale. Ten mothers scored above the normal range and were referred to mental health providers for further evaluation and care.

Breastfeeding is always the preferred method recommended for all new AAHP mothers. At the end of March, the overall percentage of mothers breastfeeding for up to 12 months was 71%, and the percentage of mothers breastfeeding for up to six months was 78%. Both breastfeeding indicators far exceeded comparative data by the Centers for Disease Control and Prevention that indicated that only 20% of African American women breastfed exclusively for six months after delivery.

As presented in the graph below, the ethnic representation of mothers participating in the SMILE program showed the following distribution: 58% African, 40% Black American, and 2% Caribbean.

The nurses met weekly to review individual cases and plan teleconsultations and other procedures that included reviews of difficult cases in consultation with AAHP’s social worker, the nurse supervisor, the clinical director, and community health workers. All SMILE nurses attended the Fetal Infant Mortality Rate Community Action Team (FIMR/CAT) meeting on March 22nd. Other AAHP staff assisted and supported mothers and families by providing diapers, car seats, breast pumps, pack-and-play cribs, and other items to support the growth and development of healthy mothers, infants, and families.

The table and graphs below present an overview of the SMILE rolling three-month data which includes March 2022 in comparison to the program performance in the calendar year 2020.

PROFILES/SERVICES	*Monthly Average Calendar Year 2020	January 2022	February 2022	March 2022	Comments About February
<i>A) Currently Active Moms</i>	83	107	104	117	
Prenatal (still pregnant)	24	41	30	34	
Postpartum (Moms who have delivered)	58	66	74	83	
<i>B) All infants</i>	58	72	77	70	
Single Births	55	63	69	64	
Multiples	2	9	8	6	
Case Load (A+B)	140	179	181	187	
MOM’S ETHNICITY					
African American Clients	31	45	50	47	
African Clients	49	61	53	68	

Caribbean Clients	2	1	1	2	
REFERRALS					
HHS Prenatal Referrals Received	4	4	0	4	
Referrals from Other Sources	4	3	3	5	
Total Prenatal Referrals	8	7	3	9	
NEW ENROLLMENTS					
Prenatal Moms Newly Enrolled During the Month	7	6	1	11	
Infants Newly Enrolled during the month	5	6	11	11	
All New Enrollments for the month	12	12	12	22	
DISCHARGES					
Prenatal Discharges	1	0	0	3	
Infant Discharges	5	7	2	6	
Total Discharges	6	7	2	9	
DELIVERIES					
Term Deliveries	5	6	9	9	
Preterm Deliveries	1	0	1	2	
Total Deliveries	6	6	10	11	
BIRTH OUTCOMES					
% Healthy Birth Weight	95%	100%	90%		
Number of Low Birth Weight	1	0	1	1	C-section prematurity
Number of Very Low Birth Weight	1	0	0		
Infant Deaths (includes Stillbirths)	0	0	0		
Unfavorable Birth Outcomes	0	0	0		
(Congenital Anomaly, Fetal Demise, Miscarriage)	0	0	0	1	Miscarriage at 15 weeks
SERVICES					
Total Home Visits	17	3	0	0	
Telephonic Consultations	144	252	223	245	This includes 22 by CHW
Community Referrals Made	26	38	33	37	
BREASTFEEDING MOMS					
Breastfeeding 0-3 months	92%	79%	77%	71%	
Breastfeeding 0-6 months		72%	83%	79%	
Breastfeeding 0-12 months	73%	75%	74%	78%	
INSURANCE					
Clients with Private Insurance**	23	28	32	25	
Clients with Medicaid Insurance**	60	79	72	92	
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

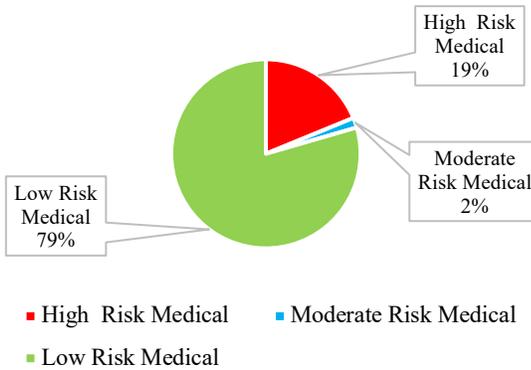
Level with reference year

The decrease from the reference year

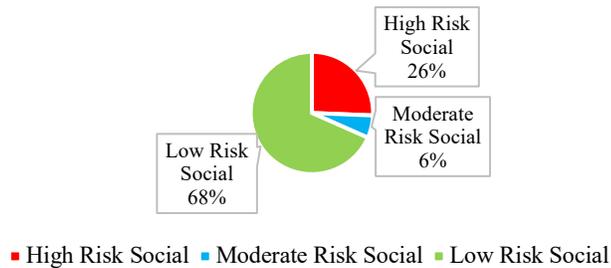
Untoward Outcome

Desired Outcome

Percent Medical Risk Categories March 2022

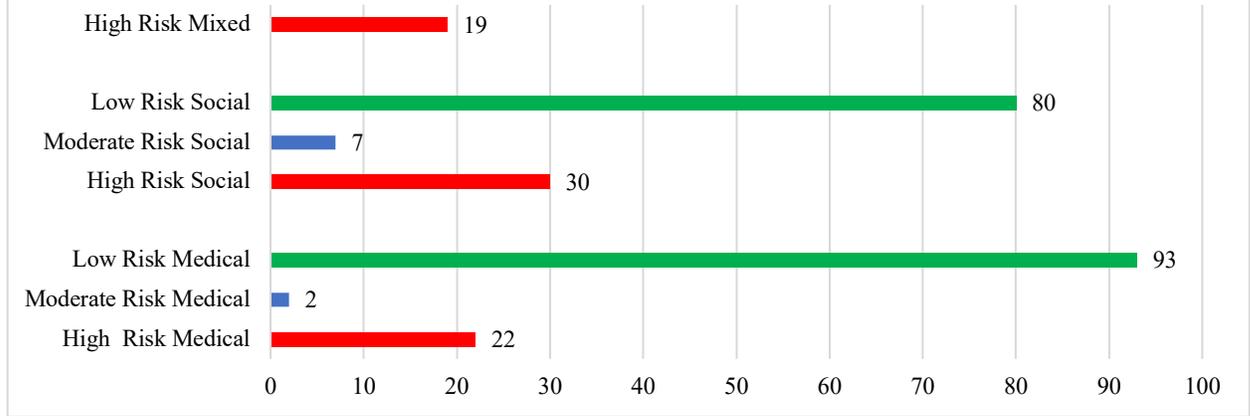


Percent Social Risk Categories March 2022



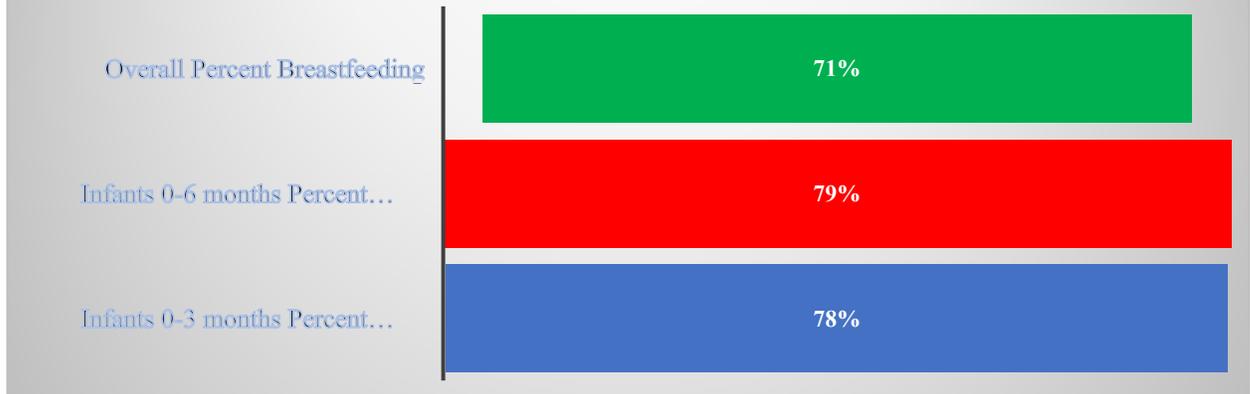
MOMS' RISK CATEGORIES, MARCH 2022

N=(117)

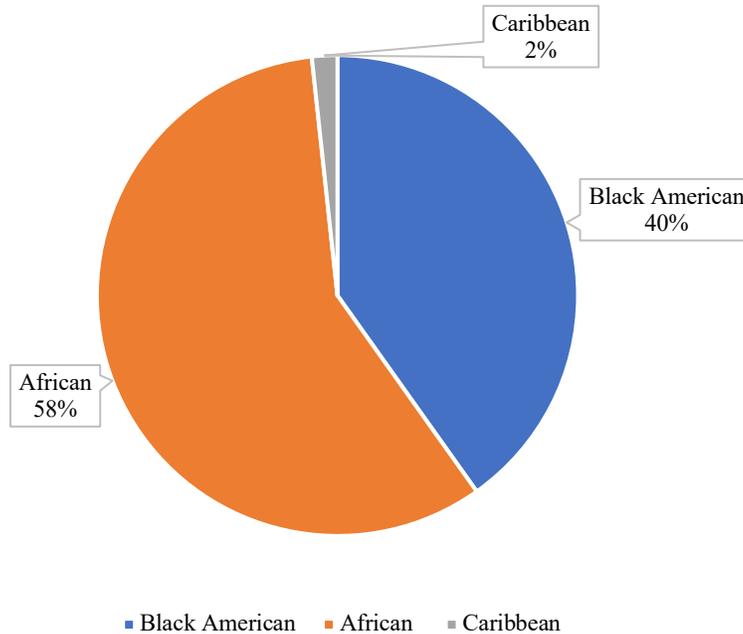


PERCENT OF MOMS BREASTFEEDING, MARCH 2022

N=(83)



MOMS' ORIGIN, MARCH 2022 N=(117)



1. Chronic Disease Management and Prevention (CDMP) Programs CDMP Virtual Health Education Webinars

In March 2022, the Chronic Disease Management and Prevention Program (CDMP) focused on chronic diseases that disproportionately affect people of African descent. The objective of these classes was to explain and clarify the relationship between specific brain-related health conditions and health and wellbeing. Class lectures and discussions emphasized the connection between physical and mental health and how it affects health. The focus of the presentations was on brain disorders. During the month, the staff initiated new outreach efforts to increase the number of participants attending classes. As a result, an evening session on March 21st recorded 50 attendants, a record for the class.

The Kick Start Your Health (KSYH) I and II classes included lectures and class discussions to help participants improve their health, manage chronic diseases, and understand emerging health-related trends that affect people of African descent locally and nationally. Discussions in March covered dementia, Alzheimer's Disease, sleep disorders, depression, anxiety, and autoimmune diseases such as lupus. The KSYH series included an overview of the pathologies, screening recommendations, and an in-depth discussion of symptoms and health-seeking behavior. The lectures and discussions emphasized self-care and collective support after diagnosis. The Health & Nutrition education highlighted the significance of food as medicine. In this

connection, class content showcased the benefits of plant-based meals and featured cooking demonstrations. Topics included foods for the brain, lupus, teen cooking, and the body in balance.

To increase the community's awareness of CDMP classes, AAHP's Data Coordinator created a class summary guide that describes all classes and clarifies instructions on how to register for each class. This document will be distributed at upcoming community events. A new major objective established for the classes is to expand available education and information outreach targeted to younger County residents to prevent avoidable chronic diseases. To facilitate this, several AAHP Community Health Workers met with staff at Paint Branch High School to initiate a new collaboration with the school's staff and advertise the availability of AAHP program services. At that meeting, they discussed AAHP's goal to increase the participation of high school students in prevention programs and services offered by AAHP and expand opportunities for high school students to volunteer to participate with AAHP and NASA scientists in a new organizational collaboration that combines space, science, and health.

In March, as in other months, Yoga and Zumba classes provided up to 120 minutes (of the 150 minute per week goal recommended by CDC) of physical activity to further reinforce the core teaching of the CDMP curriculum that emphasizes prevention, healthy eating, exercise, and screenings. Increasingly, all classes focus on the importance of group interaction and the sharing of personal experiences to inspire and encourage behavioral health and lifestyle change.

In March, AAHP continued recruitment and implementation of a diabetes prevention program modeled after the CDC's Diabetes Prevention Program (DPP). The DPP helps participants prevent diabetes or delay its onset with a year-long program of lifestyle change focused on eating habits and physical activity.

During March AAHP's weight management program continued to be an integral part of program services to manage and control chronic diseases. Services included a combination of activities involving monitoring, exercise, support group meetings, and coaching as central features for chronic disease prevention, control, and management.

March Health Champion:

M.K. has been actively engaged in the African American Health Program through the Remote Patient Monitoring Program and our CDMP classes. MK has been consistent with her readings and has been receptive to the health education and counseling. Her hard work paid off with a substantial reduction in her blood pressure readings over this past month. Her average systolic blood pressure measurement decreased by 24mmHg and the diastolic by 18mmHg. She has been remarkable with her dedication and motivation to improve her health. AAHP applauds this deserving champion.

The tables below lists activities, hours when classes were conducted, data collected, and services provided.

CDMP CLASS Activities

ACTIVITY	HOURS	DATA REQUESTED	TOPIC COVERED
<p>Health and Fitness online Webinar</p> <p>YOGA: March 2nd 9th, 16th, 23rd, 30th</p> <p>ZUMBA: March 7th, 14th, 21st, 28th</p>	<p>10 am – 11 pm</p> <p>11 am – 12 pm</p>	<p>Class and Height, Weight, BP, BMI, %BF, Glucose, Cholesterol Screenings</p>	<p>Classes were led by professionally guided exercises, including yoga and Zumba by trained instructors. Zumba instructions included an emphasis on balance, movement, posture, toning, and cardio. Yoga content included the five elements of Ayurvedic medicine. Based on Hindu philosophy, Ayurveda is known as the “Science of Life.” The classes were designed to help participants understand that all things in nature are made up of five elements: air, water, ether, fire, and earth which contribute to optimal health and wellness.</p> <p>In both classes, participants learned how fitness can prevent, manage, and reverse the risk of chronic diseases, such as hypertension and heart disease. Participants continued to maintain or improve their HEDIS measures and make positive behavioral changes linked to exercise and nutrition.</p>
<p>Kick Start Your Health I (COVID & CANCER)</p> <p>March 2nd 9th, 16th, 23rd, 30th</p>	<p>6 pm – 7:15 pm</p>	<p>Class and Height, Weight, BP, BMI, %BF, Blood pressure, cholesterol</p>	<p>Class lectures and discussions covered issues related to brain and inflammatory diseases, and how to reduce risk through education, nutrition, and diet. Participants continued to maintain or improve their HEDIS measures and exercise more and maintain a more nutritious diet.</p>
<p>Health and Nutrition (Plant-Based food)</p> <p>March 3rd, 10th, 17th, 24th, 31st</p>	<p>1pm - 3pm</p>	<p>Weight, BP, BMI, %BF, Glucose, Cholesterol screenings</p>	<p>Class topics were designed to assist participants to make healthy eating choices and understand how food choices can reduce or increase the risk of chronic conditions. AAHP’s Food for Life nutritionist/chef presented cooking demonstrations and recipes.</p>

Class Attendance in March 2022

	Health and Fitness 11 am – 12 pm					KSYH I 6pm – 7:15pm					Health and Nutrition 1pm – 2:15pm/6pm - 7:30pm					KSYH II 6pm – 7:15pm					
Dates	3/02 & 3/04	3/09 & 3/11	3/16 & 3/18	3/23 & 3/25	3/30	3/02	3/09	3/16	3/23	3/30	3/03	3/10	3/17	3/21 Eve	3/24	3/31	3/03	3/10	3/17	3/24	3/31
Class Size	31	28	30	24	14	12	16	9	15	9	23	22	29	50	25	25	17	12	14	14	19
TOTAL	127					61					174					76					
Avg.	25.4					12.2					29					15.2					
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 and Fitness: Zumba/YOGA	KSYH I (Diabetes)	Health and Nutrition: Vegan	KSYH I (Diabetes-related)	Total
Male	10	1	3	4	18
Female	117	60	171	72	420
Total	127	61	174	76	438
% African American	100%	98%	98%	100%	

2. Diabetes Prevention Program

In March, the DPP class held five sessions and covered the following topics: getting active; tracking your activity; eating well; tracking your food, and getting more active. The attendance data is presented below.

Participants	3/1	3/8	3/15	3/22	3/29	Total
Male	2	1	2	1	2	8
Female	9	8	11	8	11	47
Total	11	9	13	9	13	55
% African American	100%	100%	100%	100%		

3. dMeetings

In March, AAHP added 16 new dMeetings participants, and six were awarded completion certificates. From April 2021 to now, dMeetings has enrolled a total of 177 participants and 62 have completed the curriculum.

Twelve-Month Rolling dMeetings Enrollment and Completion by Month

	4/21	5/21	6/21	7/21	8/21	9/21	10/21	11/21	12/21	1/22	2/22	3/22	Total
New Enrollments	25	37	4	4	17	10	2	12	22	19	9	16	177
Completion Certificates Awarded	14	15	1	1	1	4	0	4	8	6	2	6	62

4. Remote Patient Monitoring Program (RPM)

In March, AAHP's Remote Patient Monitoring Program (RPMP) included 19 participants who all had stable metrics. Adherence to a program requirement of a minimum of 15 daily measurements during the month was 89%.

PM Days of Active Participation

Number of active days	0 Days	0-5 Days	5-10 Days	10-15 Days	16-27 Days
Number of participants	0	0	0	2	17

Cohort Average Biometrics in March	
Women's Weight	173.9 lbs.
Men's Weight	294.2 lbs.
Systolic BP	134.3 mmHg
Diastolic BP	73.3 mmHg
Glucose	179.6 lbs.

5. Weight Management Program (WMP)

March's Weight Management classes organized two in-the-park walks. The first walk was held on March 5th at Fairland Park in Burtonsville and included 19 participants. The second walk, with 20 participants, took place at Wheaton Regional Park in Silver Spring. Weight Management Program (WMP) continued to design creative exercises and informational resources and activities to promote the retention of participants. Each exercise event lasted approximately two hours with allotted time for a cool down and stretching period before and after. Modifications were made during the instructional class for individuals and the walks included slow and medium-paced walking groups. Both exercise events, as well as other community outreach events, serve to recruit new participants into the program. In March, the program enrolled three new participants. The total enrollment of WMP members for March was 34.

The table below shows the breakdown of participants across seven months starting in September 2021 and continuing through March 2022.

WMP Enrollment

	Previously Enrolled Clients	Discharged Clients	New Clients	Total Clients
September	19	4	6	21
October	19	0	5	24
November	24	2	4	26
December	26	2	1	25
January	26	1	3	29
February	29	0	3	32
March	32	0	2	34

Upon enrollment, participants received 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 recorded. The plan is to re-evaluate participants at 3 months intervals for 9 months. Other interventions consist of:

- Meal plan individualized for breakfast, lunch, and dinner.
- Exercise plan for beginners and advanced persons to work for specific muscle groups.
- Monthly reports from weekly call logs with a summary wrap-up of progress.
- Monthly support group meetings to discuss perceptual change behaviors and intentional change behaviors.
- Total daily intake charts with a breakdown of required daily caloric intake to lose one pound per week. This analysis also included a specific breakdown of carbs at 40%, protein at 30%, and fat at 30% daily. For March, WMP members received screening tests for glucose, A1C, cholesterol, and blood pressure. Also, measurements of weight, BMI, water and body fat percentage, protein, visceral fat, and bone mass were used to determine the recommended healthy weight, daily caloric intake, and breakdown of the suggested amount of daily macronutrient percentages for each participant.

Following health screenings, WMP members were given weight management kits that included a tape measure and BMI tracker, food and exercise journal, gallon size water bottles, portion control containers, and three sets of exercise bands to assist in their weight management goals and encourage healthy lifestyles rather than focusing merely on diet and exercise.

Results achieved in March are presented below:

	Weight Loss	Weight Gain	Maintained
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	Male	Female	Male	Female	Female	Male
0 lb.					5	1
1 lb.	1	7		1		
2 lbs.		6		1		
3 lbs.				1		
4 lbs.		4	2			
10 lbs.			1			
13 lbs.			1			
18 lbs.	1					

B. AAHP’s Social Work Services

In March, 80 mental health Wellness Screenings were conducted. The screenings were administered using three computer tablets and at community events conducted at the County’s homeless shelters and the Red Cross blood drive held at Mt. Calvary Baptist Church in Rockville, Maryland. As new restrictions on in-person events decrease, AAHP anticipates a related increase in monthly mental health screenings in the coming months. As the COVID-19 virus continues, the impact on mental stress is being amplified in the range of mental health-related issues emerging and being brought to the social worker for support and assistance. Participants are more willing to screen for well-being rather than other issues that may be more stigmatizing such as general anxiety and depression.

In March, the following screenings were administered:

TYPES OF SCREENINGS	NUMBER
Wide Screen	11
Wellbeing	51
CD-GAD Generalized Anxiety	6
Audit Alcohol	5
Eating Disorder	2
MDQ Bipolar Hands	2
BSAD Adolescent Depression	1
Opioid Misuse	1

During March, AAHP social worker continued to organize and provide education, training, and support to mothers and families to prevent and mitigate some of the problems and challenges faced by families in their lives. Some of the events conducted in March included a lecture and demonstration on car seats that was held on March 5th. A separate lecture was conducted on infant and toddler interaction and services offered by the County on March 12th. Because new mothers face a wide variety of stressors that impact their health and well-being, on March 19th, AAHP’s social worker conducted a session on managing stress and reducing the impact of worrying as a behavioral response to stress. Many of the SMILE mothers are underemployed or unemployed and to improve their employability, sessions were conducted on ways to enroll in college courses and apply for scholarships with support from Montgomery College.

During March, AAHP’s social worker responded to several requests for speaker engagements about services available to the community. During March the speaking engagements included:

- 3/1: Caribbean Advisory Group of Montgomery County – Presentation on Domestic Violence
- 3/10: Executive Committee Meeting – Social Work and Mental Health at AAHP
- 3/22: Morgan State School of Social Work – Social Worker gave a presentation on AAHP and the role of the social worker. Social Worker is attempting to find a student intern.
- 3/31: Met with a representative from Howard University School of Social Work. Social Worker aims to recruit a social work intern to work at AAHP.

C. Mental Health Services

In March, AAHP’s social worker continued to address a wide range of social and psychological problems referred for support and assistance. An increasing number of referrals involve residents who are undocumented and have a broader array of other problems including grief, postpartum depression, mental and physical abuse, schizophrenia, inability to follow medical advice and professional guidance, depression, low self-esteem, unemployment and underemployment, insecurity, stress and anxiety, homelessness, lack of family and community support, lack of income, victims, and perpetrators of violence and emotional abuse.

D. HIV/AIDS Prevention & Education

In March, health screenings continued to be a significant intervention aimed at helping residents understand their health risk profile and providing counseling and referral services when indicated. The table below presents a listing of sites where screenings were conducted, the dates when screenings were conducted and the number of individuals whose measurements were outside of the normal range.

Sites	Date	HIV Number Screened	HIV Results Negative	Normal Blood Pressure	Elevated Blood Pressure	Normal Blood sugar	Elevated Blood Sugar	A1C Normal	A1C Pre-Diabetic	A1C Diabetic
Women Shelter-Taft Ct	March 16	13	13	10	3	11	2	4	8	1
Progress Place	March 9	22	22	16	6	13	9	6	12	4

In summary, a total of **35** screenings were conducted for HIV, Blood Pressure, Glucose, and A1C in the shelters, and elevated readings were referred to a physician and the Dennis Avenue STI clinic when indicated.

During March, members of AAHP staff conducted an initial tour of the new men’s shelter in Rockville to devise a plan to conduct health screenings at this new facility in April. The facility has resources sufficient to provide shelter for up to 200. It is anticipated that this

facility could eventually serve as an educational site for conducting Brother 2 Brother health events whereby men can talk about issues that uniquely affect men and provide information on ways to stay healthy and avoid preventable sickness and disease.

Also, the HIV navigator continues to contribute information pamphlets and other health-related materials designed to prevent the spread of infections. Information dissemination included pamphlets on sexual health for adults, teens, LGBTQ populations; diabetes; weight management; mental health; nutrition; smoking; and cancer.

A total of 35 HIV Testings were conducted in March.

The information below provides a listing of the number of persons tested, their gender, ethnicity, and age ranges.

- *14 African American Male
- *11 African American Female
- *1 Caucasian Female
- *1 Hispanic Female
- *2 Asian Female
- *2 Caucasian Male
- *4 Hispanic Male

(Please see the Statistical Report below)

HIV TESTING REPORT		Mar-22		
African- American				
	Age Group	Male	Female	
	1947 -1969	4	3	
	1970 -1989	8	7	
	1990+	2	2	
Total		14	12	26
All Others				
		Male	Female	
	1947 -1969	3	0	
	1970 -1989	2	2	
	1990+	1	1	
Total		6	3	9
GRAND TOTAL				35

AAHP’s health navigator also serves as the principal interpreter for many French-speaking SMILE clients for whom English is not their first language. She served as a significant link for ensuring meaningful communication between the nurses and their clients who happen to be either pregnant or postpartum SMILE enrollees. During March she conducted 16

zoom visits in collaboration with SMILE nurses and conducted 22 calls to check on expecting mothers, moms, and babies to see how well they were doing. She worked intensely with two clients to get Medicaid/WIC for their babies and assisted mothers with Maternity Partnership applications for undocumented applicants who became eligible for health benefits during pregnancy and after labor.

1. In-Office Health Screening/Office Training

- Screened three (3) participants and two (2) staff members this month on Blood Pressure, Blood Glucose, Cholesterol, and A1C.
- trained staff on administrative duties and how to conduct health screenings

2. Office Supplies Inventory, Community Day

- HIV/Sexual Health Pamphlets
- 100 HIV INSTI Kits
- 2000 Condoms
- Office Supplies
- Upcoming Community Day Giveaways
- AAHP Events Giveaways

III. Administrative support and assistance

In March, AAHP's leadership team and staff continued to work closely the County's interim designees during the absence of the contract's DHHS program manager. The Executive Committee, the Executive Coalition, and its leadership discussed potential challenges and opportunities to improve program operations and implementation of services. To facilitate ongoing communications, AAHP staff assumed primary responsibility for arranging and managing virtual meetings for the Executive Committee on March 3rd and the Executive Coalition on March 10th.

In March, the latest version of the AAHP Computer Management Information System (CMIS) was installed on the DHHS's community server. The latest version of the CMIS includes updates to the system in development since October 2022. The ability to create ad hoc reports, improved usability, expanded text space for nurses to add client narratives, additional documents for the AAHP social worker, and new features that allow the SMILE nurse supervisor to review and evaluate patient progress have all been successfully added to the CMIS. All regression tests of the update have been completed and the SMILE team coordinates with the software developer to ensure that the update functions as intended.

Additionally, an information security consultant is conducting a risk assessment and meeting with staff members to ensure the protection of all AAHP devices and private health information. The software developer for the CMIS continues to make modifications designed to improve the functionality and accuracy of data collection, storage, and reporting.

In March, AAHP staff members began meeting with members of the Executive Coalition in preparation for Community Day, which will take place on May 7th, 2022.

APPENDIX A – Media Report

AAHP Health Notes - Distributed: February 16th 2022 at 6:10 pm EST

Campaign Metrics

	February	March
General List Recipients:	1609	1605
Successful deliveries:	1204	1201
Open rate:	30.3%	36.6
Click rate	.7%	2.6

AAHP’s March 2022 Health Notes was entitled “The Heart-Brain Connection” and was distributed on Wednesday, February 16th, 2022. The newsletter opened with an article commemorating Colorectal Cancer Awareness Month, which outlined advancements in the battle against colorectal cancer and recommended that Americans, especially African Americans and those with a high risk for colorectal cancer, begin colorectal cancer screenings at the age of 45. The following article, “How You Will Defeat Hypertension” discussed the frustrations of managing hypertension and how those frustrations can be overcome. “Minding Your Brain Health part 3” continued the series on brain health and explained how healthy habits and brain-training games like crossword puzzles can help to prevent or delay cognitive decline, including Alzheimer’s Disease (AD) and other forms of dementia. The Health Hint informed readers of the link between obesity and COVID-19 infection, hospitalization, serious long-term illness, and death and invited them to join the weight management program. The featured video from TED-Ex explains how the foods we eat impact the health of our gut. The featured recipe was Cassoulet Vert.

March’s Health Notes was sent to 1,605 subscribers, which is four less subscribers than in the previous month. Of those 1,605 subscribers, 404 opened the email, which is 39 more people than last month and represents an open rate of 36.6%, which is the second month in a row of a new record high and more than 6% higher than last month’s open rate of 30%. March’s click rate of 2.6% was two times higher than last month’s rate of .7%, on par with AAHP’s average click rate of 2%, and lower than the industry average of 4%. The number of successful deliveries decreased by three and there were no unsubscribers.

Facebook

AAHP’s Facebook page’s performance in March recorded slight decreases. The number of followers increased slightly while the number of posts, reactions, shares, and comments reduced were reduced.

Facebook Metrics – March 2022

	Followers	Posts	Likes/Love	Comments	Shares
Total	745	19	11	0	10
Change from last month	+2	-5	-3	same	-6

Twitter

AAHP's Twitter profile's performance in March decreased from February's performance in most metrics. The number of mentions increased significantly and seven new followers were added.

Twitter Metrics – March 2022

	Followers	New Followers	Tweets	Profile Visits	Mentions	Tweet Impressions	Retweets	Likes
Total	430	7	10	49	17	2375	6	7
Change from last month		-5	-23	-1314	+9	-2309	-15	-20

Instagram

AAHP's Instagram's performance in March decreased compared to February's performance. Numbers decreased on all metrics, but seven new followers were added.

Instagram Metrics – March 2022

	Followers	Posts	Post Likes	LinkedIn bio clicks	Impressions
Total	255	15	41	0	652
Change from last month	+7	-9	-11	-4	-326

APPENDIX B – March 2022 Health Notes



www.aahpmontgomerycounty.org



This Colorectal Cancer Awareness Month, let's celebrate the many new and exciting advancements in the battle against colorectal cancer, the third-deadliest cancer in the U.S. For colorectal cancer specifically and cancer in general, cancer rates are declining and late-stage cancer survival rates are steadily increasing. Recent advancements in surgical techniques include "minimally invasive surgery" which can remove polyps or cancerous tissue with less pain and shorter recovery time. Targeted therapy has been combined with or used instead of chemotherapy in recent years. Unlike chemotherapy, which kills cancer cells as well as the healthy cells surrounding them, targeted therapy only kills cancerous cells. Vaccines to prevent colorectal cancer are currently in clinical trials.

While these advances in preventing and treating colorectal cancer offer glimmers of hope, there is still much to be done. Unfortunately, over the past thirty years, the rate of colorectal cancer has doubled in adults under 50. Research indicates that obesity, sedentary behavior, poor diet, and other environmental factors contribute to this dramatic increase. Many younger adults are years away from their first colonoscopy, which hinders early detection and treatment for those who will eventually be diagnosed. A study by the American Cancer Society found that adults under 55 are 58% more likely than older adults to be diagnosed with late-stage colorectal cancer.

To help reduce the impact of this highly preventable disease, **all Americans should begin colorectal cancer screenings (colonoscopy) at the age of 45, especially African Americans and those with a high risk for colorectal cancer.** This Colorectal Cancer Month, AAHP strongly encourages you to make sure your screenings are up to date and hopes you spread the word about colorectal cancer screenings to those around you.

Sources:

www.cancer.gov

www.cancer.gov/types/colorectal/research

www.healthline.com

www.cancer.org



Keeping your blood pressure in check can seem like a puzzle with too many pieces. Sometimes it's a game of trial and error to find the right medication. Frustration and anxiety can set in as your doctor increases, changes, and supplements your medications. Be sure to tell your doctors exactly what is going on with you as you experience each modification. You will need a reliable blood pressure monitor at home to take and record several daily blood pressure readings. Share these records with your doctor when appropriate.

While you may know that you should eat an abundance of heart-healthy foods and avoid junk food, and that you should get 150 minutes of exercise weekly, following through is another matter. Seek guidance online. Check out the [DASH](#) eating plan to help you. Join AAHP's Health and Fitness classes for guided Zumba and yoga classes online (check the calendar [here](#)). Find ways to keep your stressors at a minimum and stay positive.

For inspiration to "get down with your blood pressure," watch this spirited dance video from the American Heart Association:



Sources:
www.health.harvard.edu
www.mayoclinic.org

Minding Your Brain Health

PART 3



Cognitive decline is bound to show up in all of us sooner or later, especially if we are blessed with longevity. The goal is for this to happen later rather than sooner. Healthy habits, such as eating nutrient-rich foods, staying physically active, engaging in positive relationships, managing stress in productive ways, and living a full and active life can help to prevent or delay cognitive decline, including Alzheimer's Disease (AD) and other forms of dementia.

A well-stimulated brain is more resilient against cognitive decline. "Brain training" games like crossword puzzles and Sudoku have been used to improve memory, thinking and problem-solving in people showing signs of cognitive decline. Learning a new language or musical instrument can have a similar effect. In one study, older adults with no previous musical experience improved their communication skills and processing speeds after a few months of weekly piano lessons.

If cognitive decline progresses to AD, fewer options are available other than treatment and management of symptoms with medication. The newest medication, aducanumab, slows the progression of the disease by reducing amyloid (abnormal tissue) deposits in the brain. Other drugs target behavioral symptoms, allowing patients to live with greater independence, dignity, and quality of life.

Sources:

<https://www.nia.nih.gov/health/how-alzheimers-disease-treated>

<https://www.alzheimers.org.uk/about-dementia/risk-factors-and-prevention/brain-training>

Health Hint

Did you know that being overweight or obese increases the risk of infection, hospitalization, serious long-term illness, and death from COVID-19? This is because obesity decreases lung capacity and impairs the immune system.

If you want to get healthier, lose weight, and improve your chances against COVID-19, sign up for AAHP's Weight Management Program. To learn more, call (240) 777-1833 or click [here](#).

Featured Video

Our gut bacteria can break down foods that our bodies can't digest, create essential nutrients, manage our immune system, and protect us from infection. This fun, animated video from TED-Ed explains how the foods we eat impact the health of our gut:



Featured Recipe: Cassoulet Vert



Ingredients

- white beans (canned or dry), such as cannellini beans, white beans, or navy beans
- lacinato kale
- Italian parsley or basil
- lemon
- ¼ cup nuts (optional)
- salt and pepper
- Optional Toppings: poached egg, bread crumbs or croutons, shaved cheese, avocado

Instructions

1. Cook a pound of dry white beans or use three 14-ounce cans of white beans. You'll need 4½ -5 cups of cooked white beans.
2. While this is cooking, make the lemony kale pesto by mixing the kale, herbs, lemon, and nuts in a blender.
3. When the white beans are done, simply mix the two together. Taste and adjust salt and pepper. Add any of the toppings.

Source: www.feastingathome.com

African American Health Program
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