



AAHP Conducting Health Screenings at Victory Heaven Senior Living on Wednesday, July 13, 2022

AAHP MONTHLY REPORT July 2022



I. INTRODUCTION

July marked the end of the 2022 fiscal contract year and ushered in the beginning of the 2023 fiscal year. July also recorded the seventh year that McFarland and Associates, Inc. has implemented the African American Health Program (AAHP) contract under the supervision of the Montgomery County's Department of Health and Human Services. At the beginning of the fiscal year, AAHP recorded two employment terminations due to one employee retiring and another resigning to begin employment elsewhere. July also recorded the hiring of two new nurses, a senior program manager, a certified diabetes educator and coach, a community health worker, and four graduate student interns who began training with AAHP. As AAHP continuously aims to strengthen its efforts towards reducing health disparities and ensuring that people of African descent live as healthy and as long as the rest of Montgomery County's population, AAHP is especially pleased to attract and recruit staff that can expand AAHP's collective professional skills, technical knowledge, and experience, the staff's cultural and linguistic diversity.

AAHP is fortunate and grateful for the assistance of a retired SMILE nurse who has been part of AAHP for over two decades. Not only has she helped with transitioning the new nurses into the AAHP family, but she has also provided invaluable insights on the best practices and strategies to support mothers and their families through pregnancy, childbirth, and the postpartum period.

July was also a period of introspection and review of recent progress, accomplishments, and opportunities toward expanding AAHP's reach and scope of services for the County. AAHP explored new methods of conducting virtual support groups to remove barriers to communication on issues relevant to specific populations and to build a greater sense of community and connection.

While the pandemic has introduced new challenges, it has also opened new doors, particularly regarding the use of digital technology to reach more County residents with greater frequency and consistency and AAHP's ability to monitor health outcomes using digital communications. Overall, AAHP has become much more proficient in using virtual technology in conducting health education sessions, recording those informational sessions, and making them available in real-time and at the convenience of participants. As a result, program services are less constrained by weather conditions, facility availability, and other factors that hinder participation.

AAHP continued to meet the demand for more community outreach services and events, presenting more opportunities to engage more personally with individual participants based on their specific health and social risk profiles. For example, the food distribution programs continue to take on added significance with rising inflation and the COVID-19 pandemic lasting longer than many had thought. These events also serve as an opportunity to recruit new participants into Chronic Disease Management Program (CDMP) classes. AAHP's objective remains to ensure that participants who engage with the program reduce their health risks in the short and long term.

July was Minority Mental Health Month; in observance, AAHP conducted an online seminar entitled "The Elephant in the Room" on July 28, 2022. This online seminar attracted 48 participants who were fully engaged and raised significant issues about the impact of racism on the mental and physical health of people of African descent. The discussion also stressed the resilience and determination of people of African descent who continue to thrive in the face of racism and discrimination.

II. AAHP PROGRAM ACTIVITIES

A. The SMILE Program

In July, two new nurses joined the SMILE team, bringing the nursing staff to capacity. At the end of July, the SMILE caseload included 112 mothers and 77 infants. Of the 112 mothers, 42 cases were prenatal, and 70 were postpartum. In July, only one infant was discharged from the program after turning one year-old. The SMILE program enrolled ten (10) new pregnant women. Seven (7) babies were born into the program in July. Six (6) of them were born healthy and at term. One baby was delivered prematurely but at an average weight. To support the mothers, newborns, and their families, AAHP staff arranged for the pickup and delivery of infant car seats, cribs, and other items.

Over the past six months, from January to June 2022, the SMILE program's emphasis on breastfeeding contributed to higher rates of breastfeeding than those recorded in national reports on breastfeeding among mothers of African descent. According to the 2020 CDC Breastfeeding Report Card, 58% of infants born in 2017 were breastfed at six months, and 35% were at 12 months.¹ The 2017 National Immunization Survey conducted by the CDC reported that 48% of Black/African American infants born in the United States were breastfed at six months, and 26% were at 12 months.² In comparison, the percentage of SMILE mothers breastfeeding for up to six months was approximately 84% (Fig. 1). About 70% for up to 12 months (Fig. 2). As demonstrated, promoting breastfeeding and providing mothers with support, information, and resources related to breastfeeding increases the number of mothers breastfeeding. The SMILE program also exceeded the Healthy People Goals for 2010 and 2020, which aimed for 50% and 34%, respectively, for mothers breastfeeding at six months and 25% and 34%, respectively, for mothers breastfeeding at 12 months.² The bar graphs below show the results of comparative achievements.

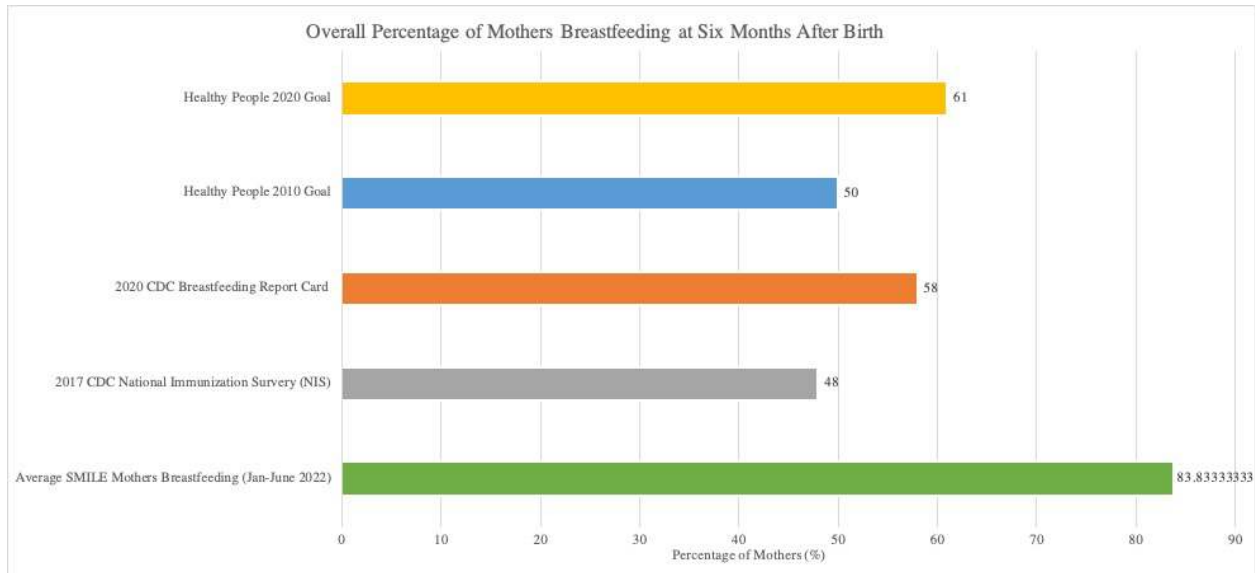


Figure 1: Comparing the national data of mothers breastfeeding at six months to the average percentage of mothers in the SMILE program breastfeeding for up to six months from January 2022 to June 2022.

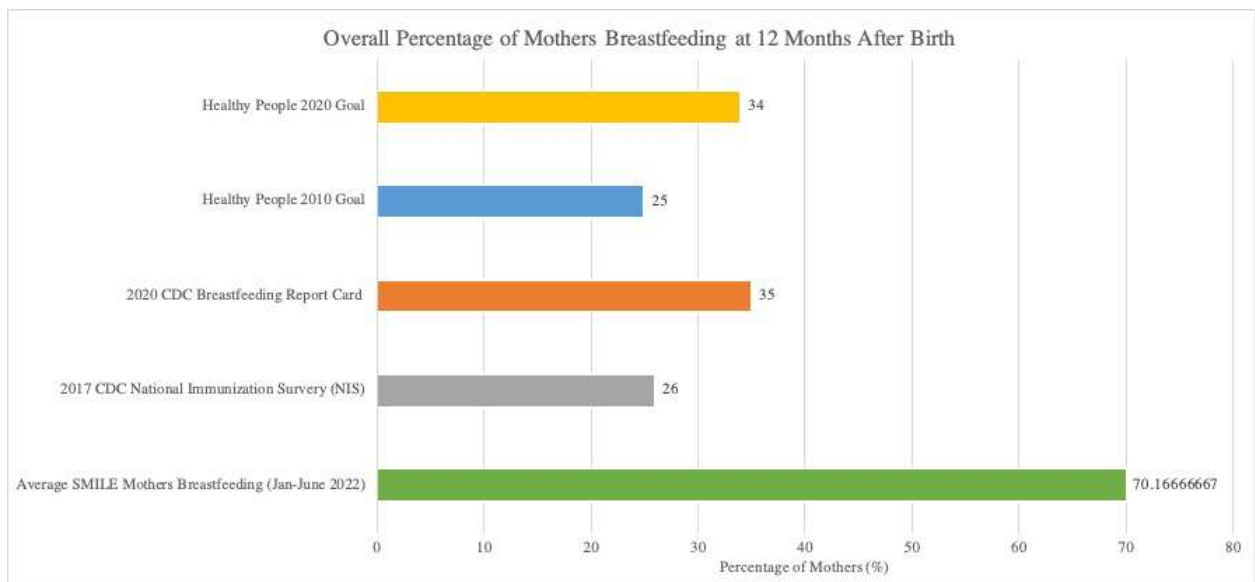


Figure 2: Comparing the national data of mothers breastfeeding at 12 months to the average percentage of mothers in the SMILE program breastfeeding for up to 12 months from January 2022 to June 2022.

The SMILE program also addresses the challenges mothers often face with prenatal and postpartum care, including breastfeeding. Both new SMILE nurses are certified to provide guidance and counseling on breastfeeding, which includes informing mothers about what to expect and possible complications while addressing their medical and social risks.² Over the past six months, the monthly average of mothers with high medical risk was approximately 26 percent. The monthly average of mothers with high social risk was 32 percent. The monthly average of mothers with high mixed risk, medical and social risk, was approximately 16 mothers (Fig. 3). Medical risk factors included gestational diabetes,

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

Mothers must concentrate on caring for themselves and their babies to reduce the risk of miscarriages, even though miscarriages are primarily unpreventable.³ According to the National Library of Medicine, approximately 10-25% of pregnancies result in a miscarriage, an unseen loss of a fetus before the 20th week of pregnancy.⁴ However, the actual percentage of miscarriages occurring is higher since miscarriages can happen before a person realizes they are pregnant.⁴ Although most occur due to abnormal fetal development, research is being conducted on the actual cause(s) of miscarriages as they are unknown.⁴ Mothers are at an increased risk if they have had two or more consecutive miscarriages, have invasive prenatal genetic tests done,³ have health problems and chronic diseases (thyroid issues, Polycystic Ovarian Syndrome, uncontrolled diabetes, obesity, etc.);⁵ and smoke, drink alcohol, or use drugs.³ A mother has a higher risk of miscarriage if they are older than 35 years old. At 35 years of age, a mother has a 20% risk of miscarriage, a 40% risk at 40 years, and an 85% risk at 45.³ Therefore, mothers should get regular prenatal care, take their daily multivitamins, reduce their caffeine intake to less than 200 mg, work to keep any chronic disease or health problem under control and avoid smoking, alcohol, and drug use.³

Ultimately, the peer and professional support from the nurses and social workers help minimize the number of risks a mother may experience due to systemic racism within the healthcare system.² Blacks/African Americans have continued to report negative experiences with the healthcare system and health care workers which fosters negative perceptions, skepticism, and distrust.

To counter this problem, the SMILE program offers Mommy Chat, virtual group sessions which allow mothers to ask questions, obtain information, and learn more about prenatal and postpartum care from guest speakers. Overall, the Mommy Chat sessions allow mothers to share their concerns, especially about unequal treatments from healthcare providers² and provide them with a sense of community, encouragement, and support. The graph below presents a health risk trend over the most recent six-month period.

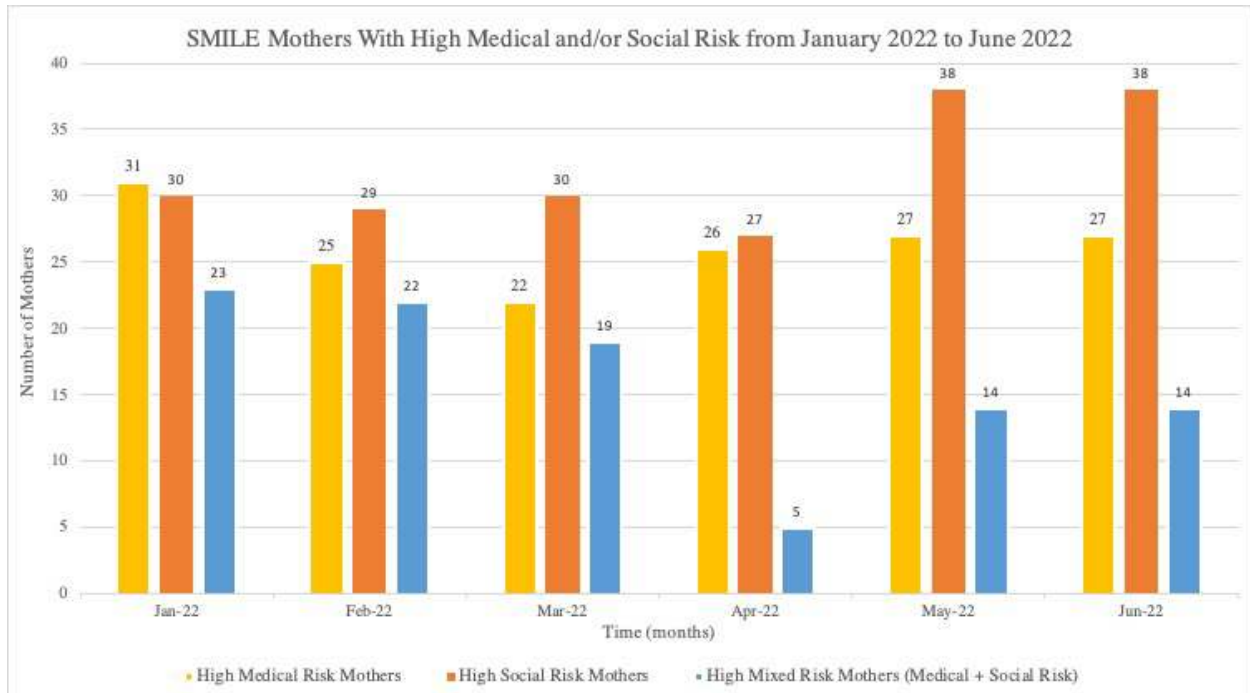


Figure 3: The number of mothers in the SMILE program with high medical and social risk from January to June 2022.

Both prenatal and postpartum mothers were screened for depression and referred to mental health providers for additional care if they scored above the normal range on the test. Over the past six months, from January to June 2022, 106 mothers were screened, and 52 were referred for further care (approximately 49%) (Fig. 4). This aligns with the Pregnancy Risk Assessment Monitoring System (PRAMS) survey conducted by the CDC, which stated that postpartum depression was higher for African Americans in 2009 and 2010 when compared to their white counterparts.⁶ Although current data cannot be found on the prevalence of postpartum depression in black people in the United States, PRAMS states that overall, 16% self-reported that they had depression three months before pregnancy; 15% self-reported that they were depressed during their pregnancy; and 13% self-reported that they had postpartum depression symptoms.⁷ Therefore, it is essential that SMILE mothers are screened for postpartum depression and get practical help to reduce the medical and social risks they face. If left untreated, postpartum depression could impact a child's behavioral, cognitive, and physical health.⁶

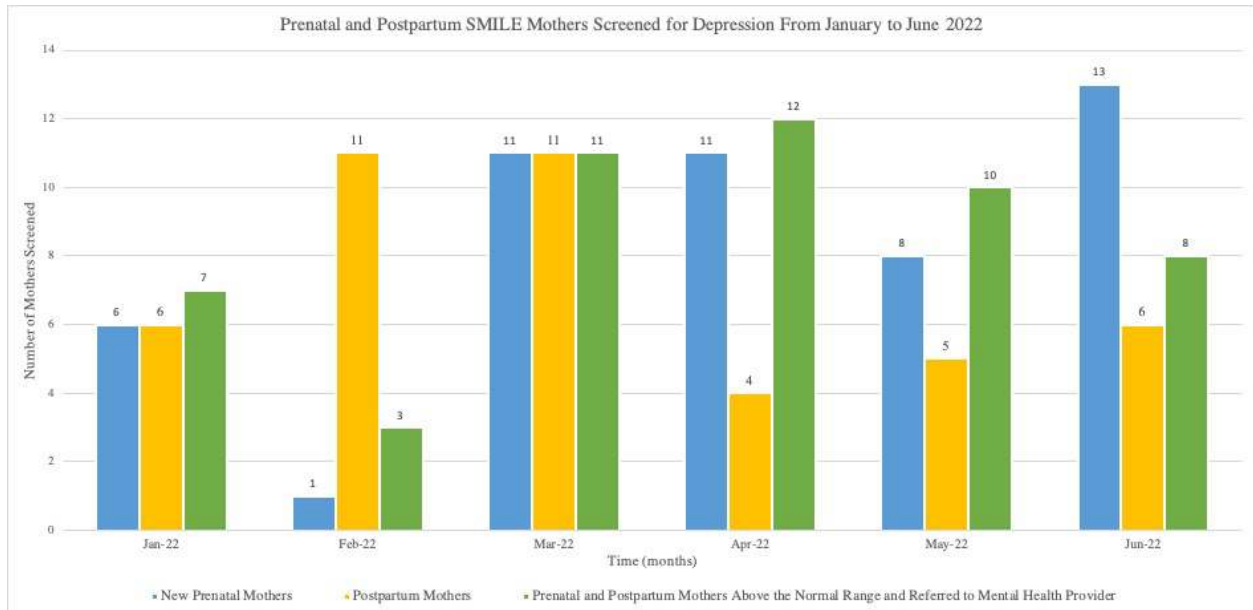
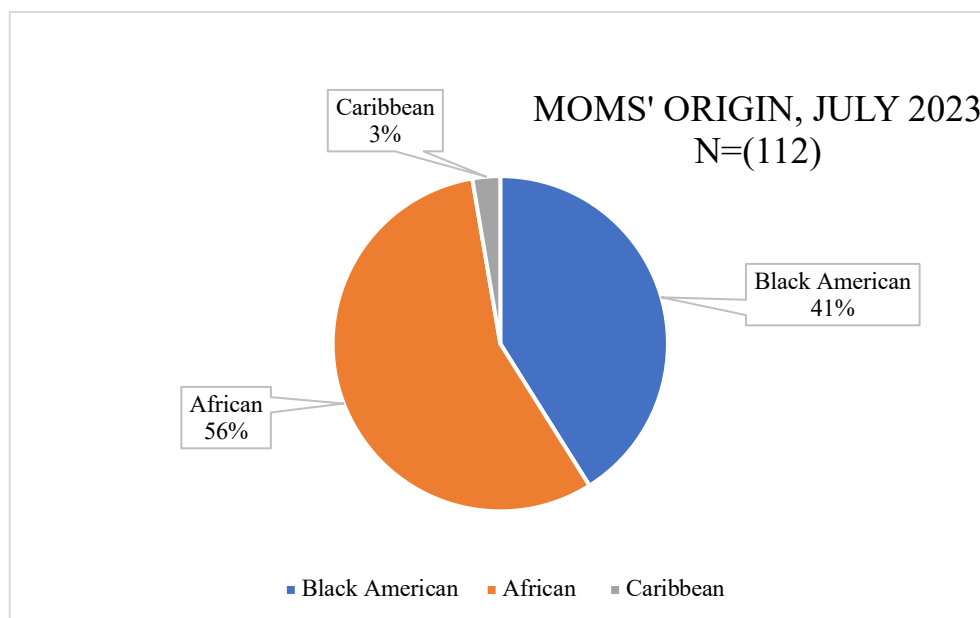


Figure 4: The number of prenatal and postpartum mothers in the SMILE program screened for depression from January to June 2022.

As demonstrated by the trends, the SMILE program's efforts have been highly influential in working toward helping mothers with prenatal and postpartum care. The program has exceeded past and current goals and national data as they reduce the medical and social risk factors for Black/African American mothers. The ethnic representation of mothers participating in the SMILE program showed the following distribution: 52% African, 44% Black American, and 4% Caribbean.



Collaborative planning continued to play a vital role in supervision and case management. The nurses met weekly to review individual cases, plan teleconsultations, implement procedures conduct reviews of complicated cases in concert with AAHP's social worker, the nurse supervisor, the clinical director, and community health workers. Other AAHP staff assisted mothers and families by providing diapers, car seats, breast pumps, pack-and-play cribs, and other items to support the growth and development of healthy mothers, infants, and families.

In July, a pharmacist and MPH candidate at the University of Maryland interning at AAHP gave a presentation on taking medications during pregnancy. Also, a doctoral student in nursing, also at the University of Maryland spoke to the mothers about her research on inherent risks of pregnancy to Black/African American women. Perhaps most importantly, the mothers were given a platform to share their concerns, especially about unequal treatments from healthcare providers, and provided them with a sense of community, encouragement, and support.

The table below presents an overview of the SMILE rolling three-month data starting in May 2022 through July 2022 in comparison to the program performance in the calendar year 2020.

PROFILES/SERVICES	*Monthly Average Calendar Year 2020	May 2022	June 2022	July 2022	Comments About July
<i>A) Currently Active Moms</i>	83	110	107	112	
Prenatal (still pregnant)	24	33	39	42	
Postpartum (Moms who have delivered)	58	77	68	70	
<i>B) All infants</i>	58	83	74	77	
Single Births	55	77	68	67	
Multiples	2	8	8	10	
Case Load (A+B)	140	193	181	189	
MOM'S ETHNICITY					
African American Clients	31	41	47	46	
African Clients	49	67	56	63	
Caribbean Clients	2	2	4	3	
REFERRALS					
HHS Prenatal Referrals Received	4	3	2	1	
Referrals from Other Sources	4	5	12	9	
Total Prenatal Referrals	8	8	14	10	
NEW ENROLLMENTS					
Prenatal Moms Newly Enrolled During the Month	7	8	13	10	

Infants Newly Enrolled during the month	5	4	9	7	
Newly Enrolled Post-Partum Moms					
All New Enrollments for the month	12	12	22	17	
DISCHARGES					
Prenatal Discharges	1	0	0	0	
Infant Discharges	5	14	8	1	
Total Discharges	6	14	8	1	
DELIVERIES					
Term Deliveries	5	2	9	6	
Preterm Deliveries	1	2	0	1	
Total Deliveries	6	4	9	7	
BIRTH OUTCOMES					
% Healthy Birth Weight	95%	50%	78%	100%	
Number of Low Birth Weight	1	0	2	0	
Number of Very Low Birth Weight	1	2	0	0	
Infant Deaths (includes Stillbirths)	0	0	0	0	
Unfavorable Birth Outcomes (Congenital Anomaly, Fetal Demise, Miscarriage)	0	1	0	0	
SERVICES					
Total Home Visits	17	0	0	0	
Telephonic Consultations	144	182	184	189	
Community Referrals Made	26	15	16	15	
BREASTFEEDING MOMS					
Breastfeeding 0-3 months	92%	100%	100%	76%	
Breastfeeding 0-6 months		90%	90%	60%	
Breastfeeding 0-12 months	73%	65%	65%	56%	
INSURANCE					
Clients with Private Insurance**	23	27	31	27	
Clients with Medicaid Insurance**	60	83	74	80	
Clients without Insurance	n/a	0	2		

*Averages are rounded up to the next integer

** A client may have multiple insurances

Increase above reference year

Level with reference year

The decrease from the reference year

Untoward Outcome

Desired Outcome

B. Chronic Disease Management and Prevention (CDMP) Programs

1. CDMP Virtual Health Education Webinars

In July, the CDMP team conducted seven weekly classes and one hybrid event at Leisure World to guide participants to adopt healthy lifestyles. Additionally, Yoga and Zumba classes provided up to 45 minutes each of physical activity. The Health and Nutrition class offered nutrition guidance and demonstrations on making plant-based and vegan meals and smoothies. In July, the Health and Nutrition/Food for Life Classes finished the series on the African American Culinary Heritage (AACH) Program with topics on diabetes and weight management. They included a module on Food and Mood, which drew attention to the association between mental health and diet. The classes had topical videos, discussions, quizzes, and other handouts. The topics presented included: Making it Work for You (a healthful diet); A Healthy Heart; Understanding Type 2 Diabetes; Designing a Diet for Maximum Weight Control; Foods and Mood; The Glycemic Index and Diabetes Care, Head to Toe.

The Kick Start Your Health (KSYH) I and II July classes focused solely on diabetes and offered evidence-based education to help participants better understand diabetes and its complications, management, and prevention.

The Diabetes Prevention Program (DPP) held four virtual sessions. Four individuals reversed their prediabetes status in July.

August's CDMP classes will focus on Heart Health with a particular emphasis on hypertension, hyperlipidemia, and cardiac diseases.

The table below presents a description of:

- The class and outreach activities.
- The number of participants attending classes, duration of attendance, and topics covered.
- The number of participants for individual or group education.

CDMP CLASS Activities

ACTIVITY	HOURS	DATA REQUESTED	TOPIC COVERED
Health and Fitness online Webinar YOGA: Wednesdays		Class and Height, Weight, BMI, % BF, Glucose,	July's classes included guided virtual yoga and Zumba exercises led by trained exercise professionals and AAHP staff.

<p>7/06; 7/13; 7/20; 7/27</p> <p>ZUMBA: Fridays</p> <p>7/01; 7/8; 7/15; 7/22; 7/29</p>	<p>10 am – 11 am</p> <p>10 am – 11 am</p>	<p>Cholesterol Screenings</p>	<ul style="list-style-type: none"> • Zumba Highlight: class content emphasized balance, movement, posture, toning, and cardio. • Yoga Highlights: Focused on purposeful movement and stretching. <p>In both classes, participants learned how fitness could 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 understand how adopting exercise and good nutrition influences health improvements.</p>
<p>Kick Start Your Health I (Diabetes) July Wednesdays</p> <p>7/06; 7/13; 7/20; 7/27</p>	<p>6 pm – 7 pm</p>	<p>Class and Height, Weight, BP, BMI, %BF, Blood pressure, cholesterol</p>	<p>July's classes emphasized diabetes and understanding, terminology, and how to reduce risk with evidenced-based education, nutrition, and diet. Participants were encouraged to discuss their health screening results with their primary care providers. In most instances, participants continued to maintain or improve their HEDIS measures and make positive behavioral changes resulting from improvements in exercise and nutrition.</p>
<p>Health and Nutrition VEGAN, Plant-Based July Thursdays</p> <p>7/7; 7/14; 7/21; 7/28</p>	<p>1pm - 3pm</p>	<p>Weight, BP, BMI, %BF, Glucose, and Cholesterol screenings</p>	<p>Class discussions emphasized the importance of making healthy eating choices and understanding the association between food choices and their risk for chronic conditions. AAHP's Food for Life Instructor demonstrated how eating a plant-based diet, and healthy cooking reduces the risk of prediabetes and diabetes. She also emphasized food that supports the fight against allergies. Cooking demonstrations and recipes, including smoothies, were shared.</p>

			Participants continued to maintain or improve their HEDIS measures and make positive behavioral changes in favor of more exercise and a more nutritious diet.
Kick Start Your Health II Online Webinar. Diabetes Thursdays 7/7; 7/21; 7/28	6 pm – 7 pm	Weight, BP, BMI, %BF, Cholesterol screenings	July's class was diabetes and discussed obesity, fitness, nutrition, and insulin therapy. Class content included an explanation of the glycemic index. Participants continued to maintain or improve HEDIS measures and to make positive behavioral changes such as eating more nutritious foods and exercising at least 30 minutes a day.

CDMP Monthly Average Virtual Webinar Attendance for July 2022

	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)	7/1	7/06 & 7/08	7/13 & 7/15	7/20 & 7/22	7/27 & 7/29	7/06	7/13	7/20	7/27	7/07	7/11 & 7/14	7/21	7/25 & 7/28	7/07	7/14	7/21	7/28
Class Size	6	21	24	19	31	13	16	9	12	18	44	24	32	11	11	12	18
TOTAL	101					49				80				54			
Avg.	20					12				20				14			
Natl. Avg.	(For classes that meet weekly)					4-6 (For courses 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	5	1	4	1	11
Female	96	49	114	51	310
Total	101	50	118	52	321
% African American	100%	100%	96%	100%	

2. Diabetes Prevention Program

July's DPP classes included four sessions that covered the importance of becoming more active, eating to achieve your health goal, having a positive approach to eating, and two special presentations by a licensed and certified nutritionist about eating to prevent and control diabetes. Four (4) participants have reversed their prediabetes status. The class attendance data is presented below.

Participants	7/5	7/12	7/19	7/26	Total
<i>Male</i>	1	2	2	1	6
<i>Female</i>	7	7	10	9	33
<i>Total</i>	8	9	12	10	39
<i>% African American</i>	100%	100%	100%	100%	

3. Remote Patient Monitoring Program (RPM)

In July, AAHP's Remote Patient Monitoring Program (RPMP) included 14 participants who all recorded stable metrics. Adherence to a program requirement of a minimum of sixteen daily measurements during the month was 89%. The table below shows the number of days when participants recorded their measurements.

Number of active days	0 Days	0-5 Days	5-10 Days	10-15 Days	16-27 Days
Number of participants	0	0	1	2	14

Average values for July RPM data (electronic data from RPM devices)		Change From Last Month
Women's Weight	173.5 lbs.	4.0% Increase in Weight
Men's Weight	277.8 lbs.	1.2% Increase in Weight
Systolic BP	132.7 mmHg	3.3% Decrease in Systolic BP
Diastolic BP	68.6 mmHg	.73% Increase in Diastolic BP

4. meetings

In July, AAHP added four new meeting participants, and two completion certificates were awarded. From August 2021 to July 2022, meetings enrolled 181 participants, and 54 completed the curriculum.

Twelve-Month Rolling meetings Enrollment and Completion

	8/21	9/21	10/21	11/21	12/21	1/22	2/22	3/22	4/22	5/22	6/22	7/22	Total
New Enrollments	17	10	2	12	22	19	9	16	24	32	14	4	181

Completion Certificates Awarded	1	4	0	4	8	6	2	6	12	7	2	2	54
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5. Weight Management Program

In July, the Weight Management Program hosted two outdoor walking events. On Saturday, July 16, 2022, the WMP hosted a walk at Woodlawn Manor Cultural Park on 16501 Norwood Rd. in Sandy Springs. Eleven participants walked 2.4 miles of the trail, and there were 11 attendees in total.

Each exercise event lasted approximately one hour and a half, with allotted time for stretching and cooling down before and after each walk. Modifications were made during the individual instructional class, and the walks included slow and medium-paced walking groups. Exercise and other community outreach events provided opportunities to recruit new enrollees into the program.

In July, the program enrolled two recruits. One person was recruited from a screening event held at a local church, and the second person was recruited from a previous walk. Unfortunately, one person was moved to inactive status from the weight management program for being unresponsive for three consecutive months. The total enrollment of WMP members for the month was 39. One participant reached her five lbs. weight loss goal. There was a total of seven (7) people who were *unresponsive* with no update on their weight status, and six participants maintained their weight without loss or gain. During the month, the WMP received a referral from a SMILE nurse about a client who will enroll in August.

WMP Enrollment

	Previously Enrolled Clients	Discharged Clients	New Clients	Total Clients
September	19	4	6	21
October	19	0	5	24
November	24	2	4	26
December	26	2	1	25
January	26	1	3	29
February	29	0	3	32
March	32	0	2	35
April	35	0	1	36

May	36	0	1	37
June	37	0	1	38
July	38	1	2	39

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

Reported Weight Gain/Loss

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

6. Community Outreach Screenings and HIV Testing

The CDMP team has been intensely active in both the breadth and quality of its activities in Montgomery County during July. The month concluded with participation in the celebration of the 60th anniversary of the independence of Jamaica at the Seventh Day Adventist Center in Takoma Park. A record number of screenings and touches resulted from these efforts. The table below summarizes the outcomes of these activities:

Sites	Date	Number Screened/ Information Dissemination	Normal Blood Pressure	Elevated Blood Pressure	Normal Blood sugar	Elevated Blood Sugar	A1C Normal	Total Cholesterol Normal
Women Shelter-C.B	July 13	21	17	4	12	9	5	2
Active Senior-Gtn	July 13	28	24	4	16	8	6	5
Leisure World	July 14	32	23	2	14	4	8	7
Women Shelter-Taft	July 20	18	14	4	11	7	4	3
Active Senior	July 27	31	26	5	19	8	15	14
Men Shelter Nebel St.	July 27	35	25	10	23	12	8	11

Jamaican Celebration	July 31	75	0	0	0	0	0	0
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A total of 165 people across the County were screened for Blood Pressure, Cholesterol, Glucose, A1C, and weight. Individuals with abnormal values were referred for further evaluation and the CDMP program for health education.

In addition, 74 HIV tests were done, all yielding negative results.

Ethnicity	Number
African American Male	23
African American Female	29
Caucasian Male	7
Caucasian Female	6
Hispanic/Latino Male	5
Hispanic/ Latino Female	4

HIV TESTING REPORT		Jul-22		
Black/African American				
	Age Group	Male	Female	
	1947 -1969	7	12	
	1970 -1989	10	9	
	1990+	6	8	
Total		23	29	52
All Others				
		Male	Female	
	1947 -1969	4	3	
	1970 -1989	6	5	
	1990+	2	2	
Total		12	10	22
GRAND TOTAL				74

C. Mental Health/Social Work

In July 206, mental health assessment screenings were conducted at various events around the County. The screenings were administered using newly purchased computer tablets to access mental health screenings online. Screenings were in-person at homeless shelters, community events, churches, senior housing, and virtual presentations. While conducting screenings, AAHP's Social Worker provided counsel, advice, and information about the importance of good mental health to overall health to combat the stigma surrounding

mental health. Significant challenges remain for non-English-speaking residents and residents with literacy and visual impairments in accessing the system.

In July, the following screenings were offered to the public:

- Wide Screen - Thirty (35) individuals took the Wide Screen, a combination of questions asked in all screenings: 74% showed signs consistent with other disorders.
- Wellbeing Screening - One hundred (100) individuals took the Well Being screening: 5% had severe symptoms, 15% had mild symptoms, and 72% had minimal symptoms. This is a widespread screening that is routinely chosen. The questions are light and non-intimidating. Sometimes the social worker offers this screening to encourage individuals to embrace mental health and its importance to complete wellness.
- CD-GAD Generalized Anxiety – In thirty-two individuals taking the screening, 41% are reported to have anxiety symptoms.
- Audit Alcohol - Of the 16 individuals taking the Audit Alcohol screening, 100% of respondents did not have symptoms consistent with alcohol dependence. However, 6% of individuals report that they have been treated in the past.
- Eating Disorder - Four individuals took the eating disorder: 25% are at risk, and 50% may be at risk for eating disorders.
- PTSD - Four (4) individuals took the PTSD screening, and three have symptoms suggestive of PTSD symptoms.
- Adolescent Depression - One (1) individual took the BSAD Adolescent Depression, and the screening a 100 % concordance with the symptoms of depression. One (1) individual took the BSAD Adolescent Depression, and the screening a 100 % concordance with the symptoms of depression.

Additional screens were :

- Psychosis
- 14 Hands -Depression
- 3 Bipolar

Screenings were administered to individuals ages 18 through 85+. Results indicate the highest number of respondents were between 55-64 and included 23% of all participants. Participants were predominantly women at 59%. Also, single individuals represented 56% of those screened. Blacks/African Americans represented 67% of those taking the screening. Sixty (67) individuals were asked if they thought about ending their life. 17% said they thought about ending their life all the time. Of the 17% of individuals with suicidal ideation, 63% said they would not seek help.

III. Administration

During July, a great deal of attention and time was devoted to onboarding new personnel and arranging for them to get security badges, computers, computer access, email addresses, and training needed to access the Rockville office. The latest hires and interns are as follows:

- A student intern from Blair High School started the week of July 5 and is projected to work with the team for the entire month of July.
- A new CHW started on July 5.

- An intern from George Washington University has begun reviewing data and conducting preliminary analysis to produce data-driven insights about program services.
- Another intern from George Washington University was approved to start this month. She will review relevant scholarly publications to help enhance future chronic disease management services.
- A new SMILE nurse started on July 5. She has a background in maternal and child health, inpatient pediatrics, and a specialization in lactation. She is also a doula.
- A CDMP and McFarland wellness nurse started on July 18. She has a background in pediatric type 1 diabetes disease management.
- A new Diabetes Management Specialist started on July 25. She is a health professional and master's certified health education specialist with expertise in chronic disease management.

During July, the AAHP staff began evaluating the use of a new text message digital platform to find additional strategies and approaches to engage and communicate in ways that may be less intrusive and more effective in driving higher program participation. As part of the pilot test, the staff completed training conducted by Marchex Sonar representatives on July 7, 2022. The training was designed to understand better how to use this platform for mass communication. A follow-up meeting with staff occurred on July 8, and the team began to conduct a setup platform for application during the second week of July. The goal is to have better outcomes for outreach and build a system that allows more communication with patients, thus producing better results in reach, attendance, and engagement.

APPENDIX A – Media Report

AAHP Health Notes - Distributed: Wednesday, July 20 at 3:30pm

Campaign Metrics

	June	July
General List Recipients:	7,570	7,540
Successful deliveries:	7,018	6,965
Open rate:	28.1%	26.7%
Click rate	.3%	.3%

AAHP's July 2022 Health Notes entitled "Be the Change" was sent on Wednesday, July 20 at 3:30pm. The feature article focused on National Minority Mental Health Month and discussed how the stigma of mental health prevents individuals from getting treatment. The article also mentioned how celebrities being open and honest about their mental health status helps to reduce the stigma of mental illness. A quote from Bebe Moore Campbell, who initiated Minority Mental Health month, was included. The following article offered five pointers to caregivers on how to preserve their mental health and maintain balance in their lives as they juggle competing responsibilities. Stacey Gantz, AAHP's Weight Management Program coordinator, wrote an article introducing herself and the goals and offerings of the WMP and invited readers to sign up. The Health Hint informed readers that obesity increases the risk for dementia, as indicated by research. The Featured Video was presented by PBS Nova and explained how social, economic, and environmental stress affects the reproductive health of Black/African American women. The featured recipe was zucchini pizza boats.

Of the 6,965 people who received July 2022 Health Notes, 1,860 people opened the newsletter, which is 110 fewer people than last month and represents an open rate of 26.7%, which is slightly lower than last month's open rate of 28. July's click rate of .3% was the same as last month's click rate and lower than AAHP's average click rate of 2%, and lower than the industry average of 4%. The number of successful deliveries decreased by 53 and there were 9 unsubscribers, which is expected with the dramatic increase of new addresses within the past few months.

Facebook

AAHP's Facebook page's performance in July showed dramatic increases in all metrics, especially in the number of posts. Three new followers were added in July.

Facebook Metrics – July 2022

	Followers	Posts	Likes/Love	Comments	Shares
Total	757	44	35	5	20
Change from last month	+3	+29	+19	+2	+5

Twitter

AAHP's Twitter performance in July increased dramatically with all metrics. Most notably, the number of profile visits came close to 1,000 from less than 100 last month. Five new followers were added.

Twitter Metrics – July 2022

	Followers	New Followers	Tweets	Profile Visits	Mentions	Tweet Impressions	Retweets	Likes
Total	437	5	46	921	7	3,838	24	25
Change from last month		+4	+37	+845	+6	+1,897	+19	+15

Instagram

AAHP's Instagram performance in June showed increases in all metrics. Most notably the number of impressions more than doubled. Eight new followers was added.

Instagram Metrics – July 2022

	Followers	Posts	Post Likes	LinkedIn bio clicks	Impressions
Total	265	32	64	1	651
Change from last month	+8	+20	+24	+1	+258

APPENDIX B – July 2022 Health Notes



www.aahpmontgomerycounty.org



Every July, AAHP observes Minority Mental Health Month with the Department of Health and Human Services to raise awareness and support Blacks/African Americans living with mental health conditions. Blacks/African Americans are 20% more likely than White Americans to report significant emotional distress and are less likely to receive treatment or therapy. The stigma of mental illness and lack of access to care result in countless Blacks/African Americans suffering from mental illnesses and having no idea where to turn or what resources are available to them.

Fortunately, the stigma is decreasing as more and more people understand that having a mental illness doesn't make a person less deserving of love and respect. As more celebrities and influencers (such as actress [Taraji P. Henson](#), actress [Jennifer Lewis](#) and rapper [Kid Cudi](#)) go public with their own stories of mental health challenges, we'll continue to see even more progress toward destigmatizing mental illness and more people will get the help they need.

We can each help by being compassionate and supportive of those who have been impacted by mental illness (including yourself). When someone makes a disrespectful remark regarding mental illness, or people with mental illnesses, let them know that their comments add to stigma and make it harder for people with mental health conditions to get help. Remind them that they wouldn't disrespect or make fun of someone with a chronic disease like cancer or diabetes, so they shouldn't do so with mental illness. As we fight to end the stigma surrounding mental illness, one of the best ways we can help is by being mindful about how we talk about it.



"Once my loved ones accepted the diagnosis, healing began for the entire family, but it took too long. It took years. Can't we, as a nation, begin to speed up that process? We need a national campaign to destigmatize mental illness, especially one targeted toward African Americans...It's not shameful to have a mental illness. Get treatment. Recovery is possible."

—Bebe Moore Campbell, author of *Your Blues Ain't Like Mine*, and *72 Hour Hold*, on her experience with a family member who suffered from bipolar disorder

Sources:
www.nami.org
www.nami.org/Bebe-Moore-Campbell

Notes for Caregivers



According to the National Alliance for Caregiving, more than 40 million Americans provide care to an elderly or disabled person every year. Taking care of a loved one can be difficult, especially when you have other time-consuming responsibilities, such as managing your relationship with your spouse, looking after your children, or building your career. You may feel overwhelmed and frustrated at times, and you may even neglect yourself. It's harder to care for others if you do not maintain your own physical, emotional, and mental health and happiness, so consider these strategies for help:

1. Assess your level of self-care and identify places where you may need improvement. Are you eating well? Are you sleeping enough? Are you exercising regularly? These habits are essential for good health and mental wellbeing and will help keep your body running at its best.
2. Have a plan in place for when you start to feel burned out. Your plan can include taking a break to relax, asking for help, or treating yourself to an activity you enjoy.
3. Learn how to recognize and cope with negative feelings and be honest about what you feel. Recognize that these are common human emotions, and it is okay to have them. Forgive yourself and move on.
4. Build a personal support system which may include family, friends, religious groups, organizations and anyone who makes you laugh, stay grounded, provides valuable information and/or advice, or just listens when you need to vent. Having a strong support network helps us feel loved and cared for, which can help reduce stress.
5. Recognize the role and importance of humor and laughter. Humor and laughter can take negatives and turn them into positives, so look for humor in all things, good and bad.

Find more tips and resources at Johns Hopkins Medicine's Family Caregiver Toolkit [here](#).

Source: www.hopkinsmedicine.org

A Message from AAHP's Weight Management Program

AAHP offers a weight management program to help you achieve your goals regardless of your starting point! If your goal is weight maintenance, loss, or gain, we can assist in tailoring a program to your specific needs. The weight management program provides:

- one-on-one coaching sessions
- group activities, including support groups and bi-weekly fitness walks
- health and fitness instruction
- assistance with designing meal plans focused on balancing macronutrients in your diet,
- various levels of exercise routines



We strive to meet you where you are to help you stay healthy and "live your best life". The AAHP program is very collaborative between the client and program coordinators. We consider all program participants "family" with whom we work together, judgement-free, to support individual goals and overall fitness and healthy lifestyles that align with and can be incorporated into your daily routines.

AAHP's main objective is to help identify sustainable effective tools and habits that promote overall fitness and wellness and reduce the risk of chronic disease. We want to inspire and encourage daily movement for a permanent lifestyle change.

Stacy Gantz directs the AAHP Weight Management Program. Her theoretical and practical training are in exercise science, physical therapy, and public health. Primarily, however, she is excited to work with program participants to adopt the discipline, knowledge, and motivation to maintain the desired weight consistently for years to come.

To learn more about or register for the Weight Management Program, please contact Stacy Gantz at 301-233-9612 or sgantz@mcfarlandassociate.com.

Health Hint

Did you know that obesity can increase the risk of developing dementia? A recent study found that people with a BMI that put them in the "overweight" or "obese" category were more likely to get dementia. This result confirms previous research.

Source: [National Institute on Aging](#)

Featured Video

Wanda Barfield of the [Center for Disease Control Division of Reproductive Health](#) explains how social, economic, and environmental stress affects the reproductive health of Black/African American women in this video from PBS Nova:



Featured Recipe: Zucchini Pizza Boats



Ingredients

- Zucchini squash
- Pizza sauce (you can also use pesto or alfredo sauce)
- Mushrooms
- Onions
- Red, yellow, and or green pepper
- Mozzarella cheese (you can also use cheddar or ricotta)
- Basil (optional)
- Red chili flakes (optional)
- Olive, avocado, or canola oil
- Ground meat
- Fennel seeds
- Garlic powder or finely minced garlic
- Italian seasoning (or oregano and basil instead)
- Salt to taste

Instructions

1. Cook the turkey sausage.
2. Scoop the flesh out of the zucchini.
3. Add the pizza sauce and toppings.
4. Bake for 15 minutes.
5. Serve and enjoy!

Source: www.thegirlonbloor.com
