



African American
Health Program

ANNUAL REPORT

Engaging Community. Addressing Disparities. Impacting Lives.



Fiscal Year 2014 (July 1, 2013-June 30, 2014)

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AAHP Overview

Funded in 1999 by the Montgomery County Department of Health and Human Services (DHHS), AAHP was created by community stakeholders and a core group of DHHS staff who recognized the need to address health disparities disproportionately affecting African Americans in the County.

AAHP is currently funded by the Montgomery County DHHS and administered by BETAH Associates, Inc. The program received additional funding from Holy Cross Hospital through the Minority Outreach and Technical Assistance (MOTA) award, which provides funding for AAHP Community Health Workers in their efforts to encourage improvement of the health care status of African Americans and individuals of African descent by facilitating health education, disease prevention and screening, and other outreach activities.

| | |
|-----------------|--|
| Vision | African Americans and people of African descent in Montgomery County will be as healthy and safe as the rest of the population. |
| Mission | Eliminate health disparities and improve the number and quality of years of life for African Americans and people of African descent in Montgomery County, MD. |
| Goals | 1) Raise awareness in the Montgomery County community about key health disparities. 2) Integrate African American health concerns into existing services and programs. 3) Monitor health status data for African Americans in Montgomery County. 4) Implement and evaluate strategies to achieve specific health objectives. |
| Strategy | Bring together community partners and resources in a collaborative and effective manner to support AAHP goals. |

AAHP focuses on six major health areas: infant mortality, STI/HIV and AIDS, diabetes, oral health, cardiovascular disease, and cancer. Staffed by registered nurses, health educators, and community outreach specialists, the program's services include outreach, health education and testing, support groups, and nurse case management.

AAHP operates in conjunction with a volunteer Executive Committee that provides strategic planning and advocates for increased funding. In addition to the Committee, a larger Executive Coalition of community representatives assists with event planning and encourages support of AAHP events. Smaller Collaboratives of individuals interested in specific AAHP focus areas round out the program's guiding groups. At the start of fiscal year 2014, AAHP had STI/HIV/AIDS and Infant Mortality Collaboratives. By the year's end, four additional groups were formed with community residents serving as chairs. The new Collaboratives focus on behavioral and mental health, men's health, diabetes, and cardiovascular health. In addition, the Diabetes Unit is guided by an advisory group, which is required for accreditation by the American Association of Diabetes Educators.

A Message from the AAHP Project Director and DHHS Program Manager

The African American Health Program (AAHP), now in its 15th year, continues to evolve with each new year. In fiscal year 2014, the program employed more pragmatic approaches and strategies to address health disparities among African Americans and people of African descent in Montgomery County. In doing so, we experienced a lot of “firsts” this year. In addition to program-level improvements such as our redesigned website, monthly e-newsletter, and social media sites, AAHP's units boasted a number of new activities.

The SMILE program hosted *Celebrate the Beauty & Benefits of Breastfeeding*, an innovative event to honor AAHP's commitment to breastfeeding and our clients who choose to breastfeed. The infant mortality unit ended the year planning the #IamBlackandIbreastfeed social media campaign, which included the production of an educational video to reach women in the County and across the nation.

This year also marked the implementation of a special youth-focused program, *Power Play!*, that aims to increase physical activity and obesity prevention awareness. The series was a joint effort between AAHP, White Oak Recreation Center, and the Presidential Active Lifestyle Award (PALA) group.

Also for the first time, the HIV unit facilitated a discussion with faith leaders in the County. The roundtable luncheon focused on unhealthy and risky behaviors, with an emphasis on how to start conversations about sensitive topics from the pulpit. The HIV unit also expanded its testing efforts through the addition of weekly testing at the People's Community Wellness Center and monthly testing on the Takoma Park campus of Montgomery College.

The Diabetes unit implemented changes to its classes and clubs, hosting condensed winter sessions with new partners and at new sites. We also increased outreach to the African community, which led to a gradual increase in attendance at the African Healthy Living Dining Club.

Also this fiscal year, AAHP held an inaugural celebration to acknowledge the services of its Community Health Workers, who contribute greatly to all AAHP units, and thus, their achievements. This year, they provided resources around the Affordable Care Act in addition to their typical outreach.

Along with these new endeavors, we celebrated the continued success of the Health Freedom Walk. This year marked the 10th anniversary of AAHP's coordination of this County event, which is held in partnership with Health Freedom Walk, Inc. The event encourages healthy lifestyles while learning about the history of the Underground Railroad in Montgomery County.

We would like to take this opportunity to express our appreciation to the AAHP staff, Executive Committee, Executive Coalition, and Collaboratives as well as the DHHS staff and BETAH Associates, Inc. for their continued support of efforts to engage the community, address disparities, and impact the lives of residents. We acknowledge our community residents for the opportunity to share information and resources with them, and our partners for their steadfast support of all AAHP activities. We are proud to share our accomplishments with you in this annual report.

We look forward to year of continued engagement and even greater outcomes for those we serve.

Abimbola Idowu, MPA, DrPH
AAHP Project Director

Heather Ross, MS, CHES
DHHS Program Manager

From the AAHP Executive Committee

For over 15 years, the AAHP Executive Committee (EC), which is comprised of volunteers, has helped to ensure that the mission of the program is carried out. We work very closely with the County's Department of Health and Human Services (DHHS); monitor the health status data for African Americans and people of African descent in the county; and advocate for both resources and policy.

This year, the EC designated health, wellness, and prevention as areas of strategic importance. We viewed these areas as key to all of our programmatic priority areas and of utmost importance in how we align strategically to the County's Healthy Montgomery efforts and the State's Health Improvement Process. A significant step involved our advocacy for laying the groundwork to look at mental health as a cross-cutting approach linking it to each of AAHP's existing priority areas. We wanted to ensure future prevention and early intervention programs tailored to the targeted community the African American Health Program serves would be in place.

In addition, this year, the EC concentrated on its infrastructure so that our reach into the community could be expanded, as well as, benefit from additional community input, resources, and support for the AAHP program areas along with our operational and advocacy efforts. This resulted in the creation of the ancillary Executive Coalition, a dynamic and diverse group of volunteers from the community, as well as, service and community-based organizations.

With the Executive Coalition, we have seen an increase in membership and the spawning of a number of key committees that we call collaboratives. Previously, we had two such groups (Infant Mortality and STI/HIV/AIDS), which were originally called coalitions. Now, we've added collaboratives that also focus on Behavioral/Mental Health, Diabetes, and Black Male Health and Wellness. With the collaboratives, we are better able to team up, pool resources, and strategize on the best ways to address specific health disparities that affect our community. For example, during National Minority Health Month, with the support of the Executive Coalition and partnership of several community organizations, we joined together and successfully held AAHP Community Day, as a forum to showcase AAHP services and to inform, educate and empower African Americans and people of African descent in Montgomery County to prevent, address, and be aware of health issues that may affect them. We have also established workgroups that address operational matters, such as data, which is one of our highest priorities.

The AAHP EC is very supportive of numerous health-related organizations for which we designate representatives who help ensure that the concerns and interests of our community are known. The EC has been instrumental in assigning representatives who participate with Healthy Montgomery and several of its workgroups as well as the Commission on Health, the Commission on Aging, and the DHHS' Leadership Institute for Equity and Elimination of Disparities (LIEED).

The EC commends the efforts of all of our volunteers, organizations, and partners who have brought a new breadth and depth to our program. We feel that the measures that we've put in place are helping to facilitate our efforts in supporting the dedicated and talented AAHP program staff, as all of us work together to carry out AAHP's mission to eliminate the many health disparities that plague the community that we serve.

To you all, we extend a hearty thank you!

Sincerely,
Pat Grant, Chair
AAHP Executive Committee

Community DAY

April 19, 2014

The inaugural AAHP Community Day, which boasted the attendance of County Executive Ike Leggett, was a tremendous success. The brainchild of the Executive Committee, Department of Health and Human Services, and other agencies, Community Day was held to raise awareness of AAHP projects and services. The event's offerings included a men's wellness walk, a health information fair, and fun activities for kids.



Success: By the Numbers

3,676 Unique
(unduplicated)
County
residents served
by the program

40/23 Pregnant women/fathers
who attended the Childbirth &
Breastfeeding Education Series

1,482 Home visits
conducted by the
SMILE nurses

40 French-
speaking
laborers
reached by
the Projet
Santé Pour
Tous (Health
for All Project)

333 Outreach
events hosted
or attended by
the program

75 New clients
receiving diabetes
self-management
counseling and
support

81 Ride On drivers
registered in Live
Fit, Drive Fit

100 Youth who participated in
the MoCo "Getting Real and
Going In" Teen Summits

440
County
residents
tested for
HIV

300+ Oral health
kits distributed

522 Individuals
screened for high
blood pressure

74
Inmates
educated
through
WIGO

20 Youth who
participated in
the Power
Play! 16-week
activity series

Primary Focus Areas and Services

Infant Mortality

- Nurse case management
- Home visitation
- Childbirth and breastfeeding classes

Diabetes

- Prevention and control classes
- Healthy Living Dining Clubs
- 1-on-1 counseling sessions

Heart Health

- Blood pressure screening
- Walks and symposiums
- Youth activity program

STI and HIV/AIDS

- Regular and special testing events
- Support groups
- Education series

Cancer

- Screening and service referrals
- African immigrant education

Oral Health

- Oral health kits
- Education as part of other AAHP classes
- Health fairs

Focus Area: Infant Mortality

AAHP Goal: Reduce the number of premature births and low birth weights among the Black community in the County.

The Disparity

According to Healthy Montgomery data for 2012, the rate of infant deaths per 1,000 live births was 5.1. The mortality rates for White and Latino infants were 4.2 and 4.3, respectively. For African Americans, it was 8.2 – nearly double the rate. Of babies born to Black women, 10.3% had low birth weight and 3% were born with very low birth weights. Among White women, 5.9% of babies had low birth weight and 0.9% had very low birth weights.

Our Work

The Start More Infants Living Equally healthy (SMILE) program addresses key factors such as a mother's stress, mental health, and health conditions like diabetes. Support is available to families from pregnancy to the baby's first birthday. Services are free to Black residents of the County regardless of socioeconomic status.

Core Services

- Nurse Case Management
- Home Visits
- Childbirth and Breastfeeding Classes (in partnership with Holy Cross Hospital)
- Manual Breast Pump Program
- Referrals to Additional Supports



Referrals

To SMILE: 127 (104 led to enrollment)

Nurse Case Management

Families served: 184

Home visits: 1,482

Total births: 97

Healthy birth weights: 80.4%

Childbirth and Breastfeeding Classes

Series held: 3 (6 hours each)

Pregnant women/fathers present: 40/23

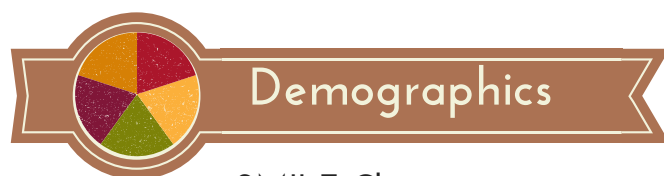
Vouchers: 28 car seats, 27 cribs

Breastfeeding

Moms who initiated breastfeeding: 54*

Breastfed for 6 months or longer: 31

Breastfed for 3-6 months: 5



SMILE Clients

African American: 66%

African: 28%

Caribbean: 4%

Private insurance holders: 11%

Pregnant Class Participants

African American: 62.5%

African: 20%

Caribbean: 12.5%

Focus Area: Diabetes

AAHP Goal: Support consumer prevention and management of diabetes, pre-diabetes, and associated health conditions.

The Disparity

According to the CDC's latest national statistics, more than 29 million people in the U.S. live with diabetes, and nearly 80 million more are at risk of developing type 2 diabetes. The disease disproportionately affects African Americans, who are 1.7 times more likely to have diabetes than non-Hispanic Whites. And, African Americans are more likely to develop related conditions such as diabetic retinopathy, kidney disease, and lower-limb amputations.

Our Work

The Diabetes Unit works to assist the community with diabetes prevention and management through a number of outreach initiatives. These efforts include education classes, testing, dining and activity clubs, self-management counseling, and other special initiatives throughout the County.

Core Services

- Glucose and A1c Testing
- Prevention and Management Classes
- Healthy Living Dining Clubs
- One-on-One Management Counseling
- Live Fit, Drive Fit Program (for Ride On Transit Service Workers)



Education Classes

Series held: 4
Total hours of instruction: 424
Total participants: 42
Reported positive behavior change: 91%*

Dining Club Attendance

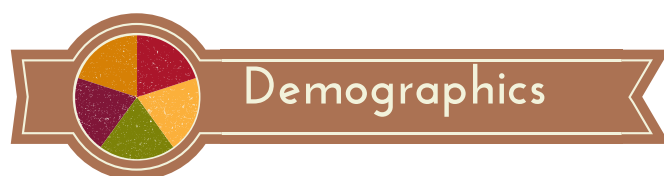
Healthy Living Clubs: 230
African Healthy Living Club: 86
Holiday Club Meeting: 37

Self-Management Counseling

New clients: 75
Existing (follow-up) clients: 60
1:1 teaching consultations: 92
Received help procuring supplies: 51
Received skill education: 122
Referred to medical care: 30
Counseling referrals received: 84

Ride On: Live Fit, Drive Fit

Drivers registered: 81



Education Classes

African American: 40.5%
African: 19%
Asian: 14%
Other: 26.5%
Male/Female: 28.5%/72.5%

Focus Area: Heart Health

AAHP Goal: Reduce or eliminate risk factors that predispose Black community members to cardiovascular disease.

The Disparity

Every year, 1 in 4 deaths is caused by heart disease. Hypertension, obesity, and diabetes are the most common conditions that increase risk. African Americans have the highest prevalence of high blood pressure in the world; more than 40 percent of the non-Hispanic Black population has hypertension. African Americans are also disproportionately affected by obesity, and are nearly twice as likely to have diabetes as non-Hispanic Whites.

Our Work

The Cardiovascular Unit works to educate and support the community by providing screening and outreach throughout the County. As part of these activities, the Unit coordinates and works with community partners to plan special screening and education events, including heart health fairs and walks.

Core Services

- Blood Pressure and Other Screening
- Health Freedom Walk
- Power Play! Physical Activity and Obesity Prevention Program for Youth (ages 10-13)
- Wellness Events and Health Fairs
- Referrals to Additional Supports

FY14

Blood Pressure Screening

Individuals screened: 522

Normal readings: 31%

Pre-hypertensive: 27%

Stage 1 hypertensive: 21%

Stage 2 hypertensive: 8%

Uncategorized: 13%*

10th Annual Health Freedom Walk
(in partnership with Health Freedom, Inc.)

Participants: ~170



Power Play! 16-Week Series

Participating youth: 20+



Special Events

Heart Health Fairs: 2 (Holy Cross and Washington Adventist Hospitals)

Focus Area: STI and HIV/AIDS

AAHP Goal: Prevent the spread of sexually-transmitted infections, and for those who have HIV, delay the onset of AIDS.

The Disparity

When compared with other races and ethnicities, African Americans account for a higher proportion of HIV infections at all stages of disease. In Maryland, HIV diagnoses disproportionately affect non-Hispanic Blacks, who represented 76.3% of new diagnoses in 2012. Further, over 70% of diagnoses reported for Montgomery County in 2011 were among Black residents, who represent less than 20% of the County population.

Our Work

The HIV Unit works to educate and support the community by providing regular testing throughout the County and hosting special events and education series for special at-risk audiences, including teens and detention center groups. In addition, the Unit offers resources, referrals, and networking opportunities to the community.

Core Services

- Regular HIV Testing
- Special Community Events and Testing
- MoCo Teen Summits
- Special Groups and Discussions
- When I Get Out (WIGO) Program
- Referrals to Additional Supports



HIV Testing

County residents tested: 440
Regular testing sites added: 2

WIGO (Boys Correctional Facility)

Inmate participants: 74
Units educated: 3
(Juvenile, Women, Crisis Center)

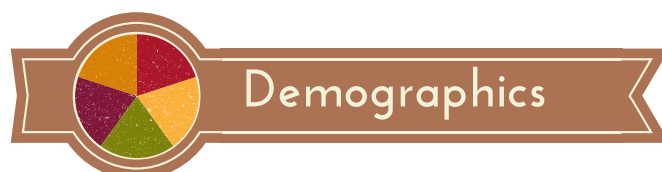
MoCo Teen Summits

Summits conducted: 2
(Gaithersburg and Mid-County)
Total participants: 100

Special Events

Roundtable to discuss risky behaviors and the role of faith in the community: 19 faith leaders and 2 radio personalities attended

Special outreach at event targeting men who have sex with men (in partnership with Health Departments of Montgomery and Prince George's Counties): 60 attendees



HIV Testing

African American: 32%
African: 31.8%
Caribbean: 1%
Other: 35.2%
Male/Female: 51%/49%

Focus Area: Cancer

AAHP Goal: Reduce controllable risks that increase the likelihood of cancer diagnoses and related health issues.



Projet Santé Pour Tous
Laborers reached: 40

The Disparity

Approximately 40.8% of people in the U.S. will be diagnosed with all cancer sites at some point during their lifetime. According to the Office of Minority Health, African Americans have the highest mortality rate of any racial or ethnic group for all types of cancers combined and for most major cancers. Death rates for all major causes of cancer are higher for African Americans than for whites, contributing to a lower life expectancy for the Black community.

Our Work

The Cancer Unit conducts outreach and education on a consistent basis throughout the County, including events held by other AAHP Units. Special presentations and demonstrations are facilitated upon request. While all types of cancer are addressed by the Unit, emphasis is placed on breast, prostate, and oral cancers.

Core Services

- Health Presentations
- Distribution of health and hygiene resources
- Projet Santé Pour Tous (Education for French-speaking African Immigrants)
- Referrals to Cancer Screenings and Additional Supports



Breast self-exam (BSE) skill demonstrations (shown above) were provided to MobileMed clients and at health fairs throughout the fiscal year.



Focus Area: Oral Health

AAHP Goal: Promote healthy oral behaviors and reduce oral conditions that can lead to more serious health conditions.



The Disparity

According to the Office on Minority Health, African Americans have higher levels of gingivitis and periodontal loss of attachment than Whites. Black adults are more likely to have missing teeth, and African American children are more likely to have teeth extracted than their White counterparts. African American males have the highest incidence rate of oral cavity and pharyngeal cancers in the nation compared with women and other racial and ethnic groups.

Our Work

The Oral Health Unit conducts outreach and education on a consistent basis throughout the County, including resource dissemination at events of other AAHP Units. Special presentations are facilitated upon request. Whenever possible, oral health and hygiene are included as curriculum topics for AAHP classes.

Core Services

- Health Presentations
- Distribution of health and hygiene resources
- Oral Health Campaign Care Kits
- Referrals to Additional Supports

Oral Health Kits and Outreach

Mouth and toothbrush models were displayed at all general outreach events. Proper brushing and flossing demonstrations were also provided. On average, at least 20 oral health kits were distributed at each event, totaling more than 300 kits for the fiscal year.

New Outreach Bookmark



Community Health Workers Program

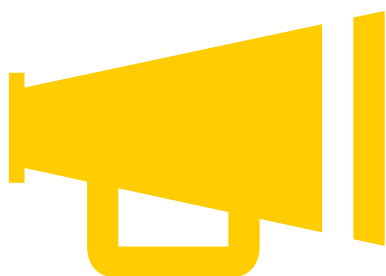


The Community Health Workers Program works to educate the community in a number of AAHP's key focus areas, including cardiovascular health, cancer, and oral health.



Fiscal year 2014 marked the first time that AAHP celebrated and acknowledged the services of Community Health Workers, also known as health promoters, with a special event, "Health Promoter Appreciation Night." The highlight of the evening was a special appearance by Montgomery County Department of Health and Human Services Director Uma Ahluwalia who offered praise and presented recognition certificates. The guest speaker was Ms. Dwyan Monroe from the Public Health Network in Washington, DC.

AAHP also witnessed increased participation of Community Health Workers in creating and implementing presentations at community events during the year.



**Community Health Workers
represented AAHP at 116 events
this fiscal year!**

AAHP 2.0



Keeping up with modern trends in health promotion and outreach, AAHP focused on enhancing its online presence during fiscal year 2014. In addition to launching all-new social media accounts on Twitter, Facebook, and YouTube, the program redesigned its website (onehealthylife.org) and created a mobile platform for smartphone and tablet users.

Electronic newsletters were distributed on a monthly basis, each highlighting a unique health observance, upcoming AAHP events, and other inclusions of interest. The distribution list continues to grow, topping 600 recipients by the year's end. Following is a list of the primary topic addressed by each issue.

July: Minority Mental Health Awareness Month
August: Breastfeeding Awareness Month
September: Infant Mortality Awareness Month
October: Breast Cancer Awareness Month
November: American Diabetes Month
December: World AIDS Day

January: Healthy Living in the New Year
February: American Heart Month
March: Nutrition Month
April: Minority Health Month
May: Women's Health Week
June: HIV Testing Day

Getting Social



TWITTER

126 Followers



FACEBOOK

77 Page Likes



YOUTUBE

448 Views

and counting...

The AAHP Team



In addition to the following staff, health promoters, and various steering committees, AAHP receives support from a host of individual community members, representatives from local organizations, and established community partners.

AAHP Staff

Abimbola Idowu, DrPH, Project Director

Xerxeser Kayode, BSN, Deputy Project Director

Tannyka Coleman, RN, BSN, CM/DN, Nurse Case Manager

Denise Dixon, MS, HIV Coordinator, Outreach Specialist

Diane Herron, Outreach Specialist

Saundra Jackson, RN, BSN, CBE, Nurse Case Manager

Msache Mwaluko, Outreach Coordinator

Elna S. Narula, RN, BSN, Certified Diabetes Educator

Nia M. J. Williams-Myles, RN, MSNEdu., MPH, Senior Nurse Case Manager

DHHS Staff

Heather Ross, MS, CHES, AAHP Program Manager

Linda Goldsholl, MS, RD, AAHP Diabetes Program Manager

Anita Mwalui, BS, MPH, AAHP Community Networking Coordinator

Health Promoters (with languages spoken)

Jolene Ayers-Ogunjirin (ASL)

Tim Baldauf-Lenschen (German)

Karen Blanton

Doumo Serges Doumo (French)

Yordit Gabremariam (Amharic)

Juliet Hope (KSL)

Nancy Margai

Viviane Makou (French)

Vienna Mbagaya

Patricia Morris

Enyeribe Nwokekeh (Ibo)

Melanie Reynolds, RN

Evelyn Tandau (KSW)

Juliette Traore (French)

The AAHP Team *continued*

Executive Committee

Pat Grant, MS, Chair
Beatrice Miller, RN, MS, Vice Chair
Marilyn Gaston, MD, MPH
Michelle Hawkins, DNP, MSN, MBA, RN
Patricia Horton, RN, MBA*
Arva Jackson, MSW*
Art Williams, MS*
Jacquelyn Williams, MPH

**AAHP founding member*

Executive Coalition Chairs/Liaisons

Akua Asare, Co-Chair, Behavioral/Mental Health Collaborative
Porlan Cunningham, Chair, Community Day Planning Committee
Kristal Dail, Chair, Diabetes Collaborative
Terrence Dupree, Co-Chair, Black Males Health and Wellness Collaborative
Janell Mayo Duncan, Alt. Representative, DHHS LIEED
Marilyn Gaston, Vice Chair, Data Workgroup; Vice Chair, Cardiovascular Collaborative
Pat Grant, Primary Representative, DHHS LIEED; Alt. Liaison to Healthy Montgomery
Michelle Hawkins, Liaison to Commission on Health
Patricia Horton, Chair, Cardiovascular Collaborative
Arva Jackson, Chair, Infant Mortality Collaborative; Liaison to Commission on Aging; Alt. Representative, DHHS LIEED
Laura Jenkins, Representative to Healthy Montgomery Data/Evaluation Workgroup
Billie Joseph, Chair, Communications Committee
Teresa King, Co-Chair, Behavioral/Mental Health Collaborative
Beatrice Miller, Liaison to Healthy Montgomery
Anthony Morrison, Co-Chair, Black Males Health and Wellness Collaborative
Cheryl Spann, Chair, STI/HIV/AIDS Collaborative
Dawn Valentine, Representative to Healthy Montgomery Data/Evaluation Workgroup
Art Williams, Primary Representative, DHHS LIEED
Jacquelyn Williams, Chair, Data Workgroup; Representative to Healthy Montgomery Obesity Workgroup; Alt. Representative, DHHS LIEED

The Executive Coalition is comprised of many individual volunteer-community representatives, as well as several volunteers from local service and community-based organizations, AAHP partner organizations, local churches, and a host of other interested parties.

Our Community Partners

African Affairs Advisory Group
African American Advisory Group
Adventist Healthcare
Advocates for Youth
Alpha Kappa Alpha Sorority, Inc. (Gaithersburg-Xi Sigma Omega Chapter)
Alpha Phi Alpha Fraternity, Inc., Montgomery County Chapter
Asian American Health Initiative
Black Ministers Conference of Montgomery County
Boy and Girl Scouts of Troops 96 and 6260
Caribbean Affairs Advisory Group
CASA de Maryland
Celebrate Recovery, Church of the Redeemer
CHEER
Daisy Baby Boutique
DC Family Alliance, Inc.
Delta Sigma Theta Sorority, Inc. (Montgomery Alumnae Chapter)
DIVAS MPH
Fit Solution
GapBuster Learning Center, Inc.
GOALS, Inc.
Good Hope Union United Methodist Church
Goshen United Methodist Church
Gwendolyn E. Coffield Community Center
Health Freedom, Inc.
HealthBeam Outreach, Inc.
Heart to Hand, Inc.
Holy Cross Hospital Community Health Department
Journeys Treatment Center
Kaiser Permanente African American Professionals Association
Latino Health Initiative
Lincoln Park Community Center
Lincoln Park Historical Society
Marilyn J. Praisner Community Center
Medical Nutrition Consultant, LLC
Mobile Med
Montgomery Cares
Mid-County Community Center
Montgomery College – Germantown Student Life Services Department
Montgomery College–Takoma Park AIDS Resource Center



Our Community Partners *continued*

Montgomery College -Takoma Park Nursing Department
Montgomery College - Takoma Park Student Life Department
Montgomery County Cancer Crusade
Montgomery County Department of Health and Human Services Adult Behavioral Services
Montgomery County Department of Health and Human Services STD Clinic
Montgomery County Department of Parks
Montgomery County Department of Recreation
Montgomery County Office of Minority Health Resource Center
Montgomery County Mental Health Association
Montgomery County Pan-Hellenic Council
Mt. Calvary Baptist Church
NAACP, Montgomery County Chapter
National Council of Negro Women, Montgomery County, MD
Phi Beta Sigma Fraternity, Inc., Sigma Sigma Sigma Chapter
Progress Place Resource Center
RaC3, Inc.
Radio One, Inc.
Rockville Pregnancy Center
RTIP Foundation
RVI Motion Media
Safe Kids Car Seat Program
Sasha Bruce Youthwork, Inc.
Shady Grove Fertility Center
Southern Christian Leadership Conference
Street Wize Foundation
St. Andrew's Lutheran Church
Suburban Hospital
Sudden Infant Death Syndrome Mid-Atlantic
Takoma Park CO-OP
Teen and Young Adult (TAYA) Health Connection
The People's Community Baptist Church
The People's Community Wellness Center
U.S. Office of Minority Health Resource Center
Victory Christian Church
Walgreens
Walter Reed Army Medical Center
Wheaton Public Library
Zeta Phi Beta Sorority, Eta Pi Zeta Chapter



Community Referrals

In addition to collaborating with community partners, AAHP refers clients to a number of other community supports. The following resources are those to which SMILE participants were referred for further assistance.



A Wider Circle
Baby's Bounty
Birthright
Caring Connection
Catholic Charities
Child Care Connection
Child Welfare Services
Community Clinic, Inc.
Cribs for Kids
Depression Services
Doula Services
Food and Friends
Gaithersburg HELP
Health Insurance
Holiday Giving Project
Housing Opportunities Commission

Infants and Toddlers Program
Infants at Risk
Interfaith Works
Job Training
Manna Food
Medela
Mission of Luv
MHIP
Responsible Fathers Program
Rockville Pregnancy Center
Service Eligibility Unit
Shady Grove Pregnancy Center
TAYA Clinic
WIC Services
Wider Circle Furniture



African American Health Program

14015 New Hampshire Avenue
Silver Spring, MD 20904
p: 240.777.1833
f: 301.421.5975

onehealthylife.org

