National Immunization Program

PROJECT TITLE

"Give Your Child A Shot At Life" Pre-school Immunization Project

Description of the Project

The principal goal of "Give Your Child A Shot At Life" is to target low immunization levels in constituent children so that they receive complete and timely vaccination by two years of age. Through its National Health Program, the Congress of National Black Churches (CNBC) provides technical assistance to clergy, auxiliary, and lay leadership within its affiliates and denomination churches. Training and technical assistance are designed to inform and enable Pastors along with the leaders of their various church auxiliaries and youth departments to provide the critical leadership needed to affect the vaccination status of their constituent preschoolers (birth to two years of age). CNBC represents eight historically black denominations which constitute 65,000 congregations and 19 million members. The Project sustained a network of 200 churches in each site during the first three years.

The project' principal goals to:

- Provide technical assistance to improve the organizational capacity of the member affiliates and their participating congregations to organize and engage their churches in the national immunization effort;

- Improve programmatic immunization efforts implemented by each of the affiliates and member congregations in previous years;

- Enhance and disseminating easily understandable information on church-based prevention efforts designed to reduce immunization rates among African-Americans;

Types of Services Provided

The CNBC has implemented program activities based on three concepts: sustainability, focused training, and coalition-building. The CNBC participates in selected national coalitions and conferences and distributes immunization education materials to

organizations and groups nationwide. At the local level, close collaboration between church members, health departments, and hospitals is a crucial component of this project as is continuous communication and training for

church volunteers.

Specific activities vary by geographic area. For example, the Los Angeles Affiliate conducts Immunization Caravans. Church Nurses Units and Health Ministries host church immunization screens, review the immunization records of church member children, provide referrals and assist program participants in understanding and interpreting their children's immunization records. Participants are also encouraged to keep their children's immunizations up to date.

The Atlanta Affiliate has identified "Youth Ambassadors for Health." This youth group has developed skits and rap songs to share the immunization message with their peers. These are used at vacation bible schools, youth groups, and schools. Youth also disseminate information door-to-door in the community.

The Washington, D.C. affiliate has implemented the "CNBC Adopt-A-Family" initiative. The purpose of "CNBC Adopt-A-Family" is two-fold: 1) to provide adequate and timely immunizations to children from birth to age two and 2) to provide other health and family services to families in the Washington Metropolitan Area. During the second year of the project the 1995 First Ladies Luncheon was held to kick off the implementation of "CNBC Adopt-A-Family." This program has been well received by the community. Two churches have been designated as immunization sites where monthly services are available with the assistance of local health departments. The Project recently expanded its activities into McDowell County, West Virginia. The CNBC also develops promotional and educational materials geared towards the church community.

From CNBC's National office, the Project Director and Expansion Coordinator provide technical assistance to the Health Education Coordinator at each site. The Health Education Coordinators then provide training on developing and implementing program activities in their affiliate churches and/or communities. The First Ladies (Pastors' wives) have been instrumental in conducting follow-up activities with participating community churches through a train-the-trainer model.

Project staff participate in immunization coalitions including the California Coalition for childhood Immunization, the South central Immunization coalition and the Washington, D.C. Immunization Coalition. Project staff continuously assist health departments nationwide to identify churches with whom they may partner to implement immunization activities in selected African-American communities.

Population Expertise

Leadership (clergy and church auxiliaries) of CNBC affiliates nationwide, to

influence vaccination coverage levels of constituent preschool children. Specific target geographic areas include Los Angeles, CA; Atlanta, GA; Washington, DC metropolitan area; Baltimore, MD; and McDowell County, WV.

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National Immunization Program

PROJECT TITLE

National Immunization Outreach Effort (NIOE)

Description of the Project

The principal goal of the National Medical Association's (NMA) National Immunization Outreach Effort (NIOE) is to ensure that children 19 to 35 months of age are adequately immunized against vaccine preventable diseases.

The project carries out the goal by encouraging physicians to decrease missed opportunities and contribute to increased immunization rates. The immunization project collaborates with established immunizations coalition/advisory groups in each of the target areas.

Types of Services Provided

In collaboration with NMA constituent and component societies and other national, state and local entities that focus on immunization issues, NIOE implements the following activities:

- Conducts or assists agencies that conduct provider immunization training sessions, and develops a provider "how to manual" on immunizing the urban and minority child.;
- Creates and distributes culturally sensitive educational materials and maintains a clearinghouse of appropriate materials developed by other organizations;
- Develops immunization checklist for NMA physicians to simplify the immunization assessment process;
- Develops linkages with established coalition/advisory groups who focus on urban and minority children;
- Recruits eligible physicians to participate in the Vaccines for Children Program; and,
- Solicits and publishes immunization articles in the NMA Scientific Journal and NMA Newsletter, and distributes an NIOE newsletter highting activities in geographic target areas.

Population Expertise

NIOE focuses upon member physicians who administer immunizations and NMA constituent and component societies to address the vaccination needs of children in Detroit, MI; Los Angeles, CA; St. Croix, VI; and Washington, D.C.

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The Healthy Start Initiative

The Healthy Start Initiative, which began as a demonstration program in 1991, has made achievement in the area of integrating the perinatal system of care for many communities with high infant mortality rates. These communities are predominantly African American and are rich in racial and ethnic diversity. Programs and strategies have been implemented, which address those diverse cultures and provide opportunities for women of childbearing age, pregnant women, their infants and their families to have access to comprehensive health and social support services which are critical to improved birth outcomes.

Achievements of the demonstration phase as reported by the Healthy Start projects include:

- Success in building community-based coalitions;
- Establishment of community-wide service system integration;
- Improved care coordination;
- Expanded level and range of services;
- Alleviation of barriers to care; and
- Promotion of healthy behaviors.

Within the next year, HRSA will complete a cross-site analysis that will chronicle some of the results at the community level. Measuring the impact of these programs has proven difficult, as researchers must rely heavily on providers to share data.

Despite the lack of systematic data on the impact of the program, anecdotal case studies clearly demonstrate the potential for improvement in the health of women and infants residing within these communities.

Positive program outcomes have resulted from reducing low birthweight through promotion of healthy behaviors such as prenatal care visit compliance, smoking cessation and substance abuse treatment. The ***Baltimore City Healthy Start*** program utilized a case management approach which utilized special teams for high-risk perinatal and substance abusing women. Each team consisted of a case manager and perinatal monitoring specialists who operated out of two local community centers, providing a variety of services to high-risk women, including education, peer support groups, nutrition and food preparation, life skills (including family planning), men's service, child care, and transportation. (Men's services are included because local officials found that males become more interested in caring for the mother and child if they are included in the program.)

The project reported a 56% lower very low birthweight rate among clients enrolled during pregnancy than those enrolled post-partum. Similarly, the low birthweight rate was 23% less. Subtance abusing clients enrolled during pregnancy had significantly

lower low birthweight and very low birthweight rates than substance abusing clients enrolled post-partum.

With the implementation of case management and home visiting, the ***Florida Panhandle Healthy Start*** reported a significant drop in the project area very low birthweight rate (2.4% in 1995 to 1.7% in 1996). Women of Hispanic origin in the project area experienced a drop in low birthweight rate (from 10.9% to 7.8%) and a dramatic fall in very low birthweight rates (from 3.3% to 1.9%) between 1994 and 1996. The rates for black women also fell from 3.2% to 2.2% between 1994 and 1996.

Boston Healthy Start provided GED/ESL and adult education services to pregnant and parenting women in the project area. The benefits offered by these programs are immense in non-English-speaking communities. The education and training have allowed project area women to obtain the skills necessary to access care and advocate for themselves, as well as to comprehend prenatal care, pediatric care, and parenting health education. The GED classes improve the employment potential of women without a high school degree, with the added benefit of building sufficient confidence for them to advocate for appropriate health services.

The ***Chicago Healthy Start*** project has realized and embraced the differences inherent in its project area. Its four Healthy Start Family Centers have involved the community in the design of each center's programs and in turn, created a sense of community ownership and responsibility. The Family Centers provide far more than increased capacity of the primary health care system. They are also vital links between community-based case management and their primary health care providers.

OBRA 89 mandated the implementation of toll-free information lines by each State under Title V funding. As part of the Healthy Start national public information and education campaign to increase public awareness of the problems of infant mortality and promote prenatal care and other healthy behaviors, in 1997, HRSA launched a new set of public service announcements (PSAs) via television, radio, print and other media. The PSAs also released two Healthy Start Prenatal Care call-for-action toll-free resource lines, one for English-speaking callers, and one for Spanish-speaking callers. The English language line would route the calls to the State maternal and child health offices or a local Healthy Start site. Spanish-speaking calls would reach the new National Hispanic Prenatal Hotline. For the period February 1997, frequency of calls ranged from 2400 to 4300 per month, combined English and Spanish lines. This demonstrated the concerns of the public and prenatal care.

Due to the success of the previously described grantees and others involved in the Demonstration Phase of the Healthy Start Initiative, there is currently a Replication Phase of the program in which an additional 55 communities have the opportunity of being mentored on adapting Healthy Start strategies for their communities and have access to useful materials available from the National Healthy Start Resource Center.

Centers for Disease Control and Prevention
Division of Cancer Prevention and Control

PROJECT TITLE

"Circle of Friends" -- The National Caucus and Center on Black Aged (*NCBA)*

Description of the Project

The *Circle of Friends* project, described as Women Telling Women About Health Issues, is a culturally appropriate breast and cervical cancer education and early detection program for low-income, mature African American women, especially those who live in public housing. This project is in its 6 year of continuing support and collaboration with the Centers for Disease Control and Prevention and has evolved from a developmental, education and outreach project into a second phase of successful replication and dissemination of their strategies.

The principle goals are to**:**

The goals have evolved from, "providing breast and cervical cancer information and opportunities for screening to low-income women, 50 years of age and older, living in public and assisted housing" to "engaging state and local health departments and representatives to replicate an expanded model and conduct outreach to the general population of African American women over 40 years of age to promote early detection of breast cancer."

The project carries out the goals by:

In the first phase of the project the grantee developed specialized processes for garnering support in the form of work agreements with National Partners, culturally relevant principles that guide the messages, resource materials and strategies for outreach, specialized outreach to recruit program participants, educational sessions, distribution of materials, and linking program participants to screening opportunities. The current methods for carrying out the program goals include: maintaining prior methods with added features to include professional education for representatives of the health departments regarding strategies to replicate the program and successful outreach for African American women; utilizing NCBA's employment program to work with the health departments; conducting national public awareness campaigns; utilizing media conferences, formal press packages, videos, advertisements, and promotional events.

Types of Services Provided

In the first five years, this project concentrated on conducting focus groups with the target population, a series of educational programs, Afro-centric designed low-literacy materials, a resource distribution campaign, outreach volunteer training, replication training for four State Health Departments and referring women for mammograms. The current project builds on the success of the original activities through replication/ dissemination strategies. Specifically, seeking to train staff from 20 State Health Departments and 40 local health organizations on successful outreach strategies for reaching the target populations and how to replicate the *Circle of Friends* program.

Population Expertise

Low-income, 40+ African American women, especially those who live in public and assisted housing.

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Centers for Disease Control and Prevention
Division of Cancer Prevention and Control

PROJECT TITLE

"The Witness Project" --Replication & Dissemination of Effective Breast & Cervical Cancer Health Education Intervention, University of Arkansas for Medical Sciences

Description of the Project

The Witness Project was designed in 1990 and is a community-based cancer education program designed to meet the specific cultural, educational, knowledge, and learning style levels of underserved African American women. Under the cooperative agreement with the Centers for Disease Control and Prevention, the Witness Project will replicate, disseminate, implement, and evaluate its model in institutions and communities over a 4 year period. Two sites were selected from 14 applications for piloting this replication project.

The principle goals are to:

The Witness Projects goals have not changed since 1990 and include, increasing awareness and early detection of breast and cervical cancer in the African American community.

The project carries out the goals by:

Providing culturally appropriate role models who promote behaviors that detect cancer early. Working as teams in the community, the women provide educational messages and empowerment with African American churches and community groups to increase the practice of breast self-examination, clinical breast examination, mammography, and Pap test screening.

Types of Services Provided

The Witness Project will: 1) explain the Witness Project model, its goals and the background and research that supports it; 2) provide information about African American women and the cultural barriers and issues as they relate to the early detection of cancer; 3) define and guide the collaboration and staffing needs to implement their program; 4) explain the recruitment and selection of Witness Role Model and Lay Health Advisor team members; 5) provide guidelines, agendas, slides, curriculum, and resources for training team members; 6) provide resources for promoting and enhancing the program efforts, and for

troubleshooting as necessary; 8) provide videotapes that illustrate the spirt of the program and enhance the enthusiasm and probability of success; 9) provide technologies to link the network of Witness Project programs for the purpose of increasing communications and technical assistance; and 10) provide personal assistance and an *esprit de corp* from an experienced staff of leaders, trainers, and volunteers as necessary.

Population Expertise

African American women, especially those in small rural communities.

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National Center for Injury Prevention and Control
Center for Disease Control and Prevention

PROJECT TITLE

Richmond, Virginia--Richmond Youth Violence Prevention Program

Description of the Project

The Richmond Youth Violence Prevention Program is a 3-year school-based project to reduce aggressive behaviors among 6th grade students. The program consists of a 16-session curriculum that teaches students the use of alternative methods for dealing with violence and adaptive methods for dealing with anger. The program also has a peer mediation program that uses a problem-solving approach to reinforce the skills students learn in the curriculum. The intervention is administered by facilitators from the Richmond Community Services Board.

Evaluation of the Project

During the first year, the program was implemented in eight middle schools in the Richmond public school system and administered to approximately 1,800 students. Satisfaction and suggestions for change were elicited with surveys and focus groups of students, teachers, and facilitators. The revised program was implemented and evaluated in the second year with three schools. The program was initially evaluated using an index of aggression based upon self-reported behavior and attitudes toward the use of violence and nonviolent methods for dealing with conflict.

Pre- and post-intervention self-report data obtained from both RIPP participants and non participants indicate that the initial intervention (the 6th grade curriculum) achieved behavioral improvement in the target group. Self-reported quantitative data from the children participating in the RIPP program show significantly greater reductions in fight-related injuries requiring medical attention compared with non-participating children. Boys in RIPP also reported a lower frequency of threatening to hurt a teacher. RIPP participants reported significantly greater reductions in fight-related injuries that require medical treatment; significantly improvements in self-esteem, greater increases in their knowledge of the curriculum content, and increased use of violence prevention resources within their school. School disciplinary data showed differences between RIPP participants and non participants. Participants had fewer suspensions for fighting, bringing weapons to school, disruptive behavior, and

defiance of school authority.

Partners

Virginia Commonwealth University in collaboration with the Richmond Community Services Board (City of Richmond)

Target Group

Students in 6th grade

Setting

Schools

Contact Person

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PROJECT TITLE

Portland, Oregon--RMC Research Corporation

Description of the Project

Students were be provided with adult mentors and programs that included training in conflict resolution and social skills, peer education in violence prevention, recreational opportunities, and academic tutoring. Students spent at least 1 hour per month interacting with their mentor. Services were provided about 13 hours per week during the school year and 25 hours per week during the summer months. The training drew extensively upon unique African-American cultural foundations and experiences.

The proposed evaluation has two major goals: 1) to assess the sustained, long term effects of the SEI intervention, and; 2) to determine the most salient characteristics of students and program participation that are associated with the most positive and lasting effects of the SEI violence prevention program. Objectives for goal one address the impact of differences in program participation and different student characteristics on long-term effects. Goal two has five specific objectives pertaining to aspects of the family environment, the surrounding community, the school environment, peer-individual factors, and specific aspects of the SEI program most strongly associated with long-term, positive effects of the program.

Evaluation of the Project

Approximately 120 students from four schools (three middle and one high school) were enrolled in the program. Approximately 200 other students from the same school and with similar school performance, behavioral problems, and peer relationships served as the comparison group. Differences between groups have been assessed by comparing school records and self-reported information on key psychosocial factors and violence-related risk behaviors. Information on how the program is being conducted will be collected quarterly; data on how behavior has been affected is collected once yearly.

After two years, a 12% reduction in physical fighting and 21% reduction in weapon carrying was observed in the intervention group and no significant decreases in these behaviors were noted in the control group. The applicant proposes to continue to follow these two groups, re-using the previously administered instruments and previously deployed analytic strategy to compare risk and protective factors, health risk behaviors, and pro-social outcomes.

The initial evaluation also yielded some interesting and unexpected, interrelationships among risk and protective factors. Reported use of marijuana

increased significantly for both groups. As a result, illicit drug use has become a priority of the SEI program. An unexpected finding was that weapon carrying was higher in students who had their father living at home.

The applicant's evaluation plan includes both quantitative and qualitative methods in the data analyses. Process data collection will include interviews, student surveys, and case studies. Outcome data collection will assess the same battery of risk and protective factors, health risk behaviors, and pro-social measures using the same standardized instruments and methods as in the initial evaluation. The following additional data sources will be utilized: school records, the Gang Task Force (gang involvement information), juvenile justice records, and a survey of employers, universities, vocational schools, or other organizations where participants are located following high school.

Partners

Self Enhancement, Inc., and the Portland Public Schools.

Target group

Students in grade 7-9 from low-income, high-crime neighborhoods

Setting

Schools

Contact Person

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National Center for Chronic Disease Prevention and Health Promotion

Tobacco
PROJECT TITLE

Uptown Campaign

Description of the Project

The principal goals are to block the release of a cigarette aimed at the African American market.

The project carried out these goals by intense community organizing. In mid-December, 1989, members of Philadelphia's African American community were alerted to the arrival of Uptown, a mentholated cigarette brand targeted to African Americans, scheduled to be test marketed in the city starting on February 5, the beginning of 1990's Black History Month. On January 4, 1990, the local American Cancer Society's (ACS) Committee on Cancer and the Poor met to discuss possible strategies to address the imminent Uptown introduction. At this meeting the community determined that the ACS would not take the lead and that a coalition approach was preferred. The coalition was organized under the leadership of the local Committee to Prevent Cancer Among Blacks, headed by Reverend Jesse Brown.

Types of Services Provided

On January 11, 1990, the Coalition Against Uptown Cigarettes held its first meeting. The next day the Coalition's media committee held its first meeting. The Uptown Coalition worked strategically to mobilize the African American community, smokers and nonsmokers alike, to oppose the introduction of Uptown to the community. Specifically, the Coalition focused on getting African American smokers to refuse to participate in the planned test market. The Coalition did not polarize the community and made it impossible for the tobacco industry to form its usual alliances with smokers and business owners against individuals working for tobacco control.

In the week after the first Coalition meeting, the Uptown campaign received a great deal of local and national press. The Coalition held its second meeting on January 18. On the same day, Secretary of Health and Human Services Louis Sullivan spoke at the University of Pennsylvania Medical School and denounced the Uptown marketing campaign plans.
Consequently, RJR publicly announced the cancellation of test marketing of

Uptown in Philadelphia and later announced that it would not market Uptown anywhere in the country. Extensive media coverage of Uptown and the effects of targeted marketing continued after these announcements.

The Uptown Coalition success has served as a catalyst for communities around the country to mobilize against targeted marketing to African Americans by tobacco and alcohol companies. Lessons learned from the Uptown success played a role in the decision by the CDC to fund national organizations to mobilize communities and develop leadership around tobacco control. To this end, CDC recently funded nine organizations to conduct tobacco control activities.

Specific Target Population

Initially, African Americans in Philadelphia and then, African Americans throughout the country.

Contact information

Dr. Robert Robinson, Office of Smoking and Health, Centers for Disease Control and Prevention, (404) 488-5701.

National Heart, Lung, and Blood Institute

Association of Black Cardiologists (ABC)
National Medical Association (NMA)
National Black Nurses' Association (NBNA)

PROJECT TITLE

The National Physicians' Network

Description of the Project

The National Physicians' Network is a national strategy designed to mobilize, train, and equip physicians and other health providers who provide care to African Americans to become more actively involved in prevention, and education activities in the African American community. Since 1995, a total of 140 physicians have been trained and are presently part of the network. Based on the lessons learned to date, the Web-based activities will help to ensure more immediate access to updated information in the prevention, diagnosis, treatment, and management of cardiovascular and pulmonary disease in African Americans. The Web site will provide a series of self-study continuing education programs for health care providers and electronic versions of the NHLBI's patient/public education publications. In addition, the National Physicians' Network will use the Web site to facilitate activities and stimulate communication among Network members.

Specific Target Population

Health professionals and the African American community

Public Health Impact

The Web-based continuing education and training for health professionals will provide state-of-the-art information in the clinical management and treatment of heart, lung, and blood diseases. In addition, it will help facilitate patients/public education opportunities regarding prevention and control of heart disease, stroke, and asthma. The Web site will also provide a mechanism to strengthen and maintain the Physicians' Network through an incentive system (continuing education credits) as well as networking opportunities among health professionals.

TIME PERIOD

September 1998 - September 2000

BUDGET

$200,000 FY 98

Contact Person

Glen Bennett, M.P.H., National Heart, Lung, and Blood Institute, (301) 496-0554

National Heart, Lung, and Blood Institute

PROJECT TITLE

Historically Black Colleges and Universities (HBCUs) Professional and Community Education Outreach

Description of the Project

To increase knowledge, skills, and practice behavior of health professionals who provide care to African American patients, the NHLBI and the NIH, ORMH sponsored forums in collaboration with two HBCUs and the Harlem Hospital. The forums aimed to: 1) share the latest research and treatment information to prevent and control cardiovascular (CVD) risk factors; 2) forge linkages and partnerships among medical and public health organizations, community coalitions, churches, and social and civic organizations to undertake activities; 3) promote the adoption and maintenance of health lifestyle behaviors; and 4) stimulate environmental change activities on HBCU campuses as well as the surrounding community to improve cardiovascular health of African Americans.

Types of Services Provided

Forum at Howard University. "Forum on the Status of CHD in Black Americans: A Blueprint of Forging Linkages to Improve Medical Management and to Enhance Public Health Action" was held at Howard University in Washington, D.C. The forum was held in conjunction with the NHBPEP Coordinating Committee composed of organizations such as the American Medical Association, the American Public Health Association, and the American Heart Association, providing opportunities for establishing linkages with majority organizations. The ABC, NMA, and National Black Nurses' Association are represented on the NHBPEP Coordinating Committee as well.

Proceedings of the Howard University forum were published in the Journal of the National Medical Association and distributed to more than 32,000 physicians and other health care providers who serve the African American population.

Forum at Meharry Medical College. "Issues of the Heart: Prevention, Management, and Control of Cardiovascular Risk Factors in African Americans" focused on CVD prevention and control in African Americans. The Meharry Medical College, Tennessee State Health Department, and representatives from local coalitions and nonprofit groups within the greater Nashville area were cosponsors of the forum. The forum provided opportunities to stimulate CVD activities on several HBCU campuses (Tennessee State

University and Fisk University) and promote linkages with church-based groups and community coalitions. Proceedings from this forum were published in the Journal of Health Care for the Poor and Underserved and has been distributed widely to NHLBI constituents, HBCUs and other professional groups.

Forum at Harlem Hosptial. A forum was conducted at Harlem Hospital that focused on both CVD and asthma among African Americans, a major problem in the New York City area. The goal of the forum was to: 1) bring together experts from a variety of disciplines and perspectives to discuss multiple approaches to promote cardiopulmonary health; 2) heighten awareness in the African American community about the major burden of CVD, stroke, and pulmonary conditions such as asthma; and 3) forge linkages to initiate steps to increase activities to improve prevention, detection, and treatment of cardiopulmonary disease and its contributing risk factors. The forum provided opportunities for interactive sharing of the latest guidelines to help health professionals enhance their practice management skills related to the prevention and control of CVD risk factors and the effective management of asthma in inner-city and high-risk populations.

Specific Target Population

Health professionals, medical students as well as the black community

Collaborating Agencies/Organizations

Office of Research on Minority Health (ORMH), National Institutes of Health (NIH)
Association of Black Cardiologists (ABC)
National Medical Association (NMA)
Howard University
Meharry Medical College
Tennessee State Health Department
Harlem Hospital
Columbia University
National High Blood Pressure Education Program (NHBPEP) Coordinating Committee

Public Health Impact

The forums drew a large number of health professionals, program planners, community leaders, and students involved in providing health care and/or health information to African Americans as well as underserved populations. The provided opportunities to educate health professionals on the latest treatment and management of diseases that impact on the African American community. The forum also provided an opportunity to dialogue and network with other

multidisciplinary groups in an effort to find solutions to public health problems affecting the community.

TIME PERIOD

March 1995 - October 1997

BUDGET

$195,600 FYs 95-97

Contact Person

Matilda Alvarado, R.N., M.S.N., National Heart, Lung, and Blood Institute, (301) 496-1051

National Heart, Lung, and Blood Institute

PROJECT TITLE

Working with Religious Congregations: A Guide for Health Professionals

Description of the Project

NHLBI has a long history of promoting CVD health education programs in churches. The church serves as an important avenue to reach special populations who may have fewer contacts with the health care system than the general population. Therefore, church sites offer unique opportunities to conduct a variety of heart-health activities including screening for hypertension, counseling for reduction of saturated fat, cholesterol, and sodium, staying physically active, quitting smoking, and limiting the use of alcohol.

In 1987, *Churches As an Avenue to High Blood Pressure Control*, was developed by the NHLBI to provide information on the development and implementation of high blood pressure programs. In 1997, *Working with Religious Congregations: A Guide for Health Professionals* was developed in collaboration with the State health departments that had participated in the NHLBI Stroke Belt Projects. The guide is designed to help professionals in health agencies reach out to religious congregations and work with them to implement programs to reduce the risk of CVD. This guide provides information about how to: contact and recruit congregation members, train volunteer teams within congregations, implement effective CVD prevention programs, sustain momentum for continued activity, and monitor and evaluate congregation-based programs. In addition to this guide, the CHD and Blacks, east-to-read set of booklets and recipe book are also being distributed to religious groups.

Public Health Impact

Church-based programs are important for reaching populations who have less access to the medical care system. The guide is designed to help congregations get their programs started. Such programs can help to raise community awareness about CVD and associated risk factors and stimulate action to change lifestyles behavior community wide.

Collaboration Organizations

State Health Departments
Private Sector Organizations

Specific Target Population

African Americans

TIME PERIOD

1994 - 1997

BUDGET

$53,000 FYs 95-97

Contact Person

Glen Bennett, M.P.H., National Heart, Lung, and Blood Institute, (301) 496-0554

National Center for Chronic Disease Prevention and Health Promotion

PROJECT TITLE

Uptown Campaign

Description of the Project

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Types of Services Provided

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Specific Target Population

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Contact Person

Dr. Robert Robinson, Office of Smoking and Health, Centers for Disease Control and Prevention, (404) 488-5701

Administration on Aging

PROJECT TITLE

A Church-based Health Promotion Project for Elderly Blacks

Description of the Project

This project is designed to enhance the well-being of black elders who reside in Tallahassee, Florida through the development of church-based health promotion programs. These programs will provide various health services, such as health education and physical fitness initiatives. Currently, two black churches have been selected as project sites to serve approximately 5400 elderly persons.

The goals are to:

Conduct a needs assessment survey that will identify and prioritize health risk factors among the black aged.

Increase the awareness of health risks, and increase participation in health promotion activities.

Train local church leaders in the development of new church-based health programs; and

Evaluate the effectiveness of health promotion programs by analyzing pre and post test results to health improvement and healthy lifestyles.

Florida A&M University, aging and health care networks, and local churches are working cooperatively on this project. This collaborative working relationship is coordinated through the Community Health Advisory Council and Church Committee, which are products of this project.

Target Group

African American Elderly

Contact Person

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Administration of Aging

PROJECT TITLE

Health Promotion Among Minority Elderly In Southwest Mississippi

Description of the Project

The purpose of this project is to improve the quality of health promotion behaviors among minority elderly in Southwest Mississippi. The project provides services to blacks 65 years and older who reside in the Adams County area of Mississippi.

The goals are to:

Deliver health screening, health education, and health counseling to minority elderly at four rural citizen sites in Adams County, Mississippi with the assistance of a mobile nursing center and rural transportation network;

Provide supportive health education for families and/or caregivers of minority elderly;

Establish supportive health referral mechanisms and resource system; and

Collect, analyze and interpret data from minority elderly in a 13-county target area that will identify perception of their health status, health beliefs, and self-care practices.

Alcorn State University, a land grant institution, is conducting this project in collaboration with Area and State Agencies on Aging through its Division of Nursing, using interdisciplinary project staff.

Target Group

African American Elderly

Contact Person

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Administration on Aging

PROJECT TITLE

Health Promotion for Minority Elderly

Description of the Project

This program serves as the focus for health promotion activities which are designed for minority elderly residing in Southeastern Virginia.

The goals are to:

Develop, implement and evaluate, through an established research process, a health promotion model which is aimed at minority elders;
Design, utilize and disseminate learning modules, which relate to health promotion and risk reduction strategies, that can be used by health care providers to encourage good health practices among minority elderly;
Provide affordable primary health care services to minority elderly residing in underserved and unserved urban and rural communities in Virginia, with the assistance of a mobile van; and
Design and disseminate health promotion education materials to minority elderly.

This project is a collaborative effort which includes Hampton University School of Nursing faculty, students, health care resources, and minority elderly volunteers.

Target Group

Minority Elderly

Contact Person

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Administration on Aging

PROJECT TITLE

Health Promotion/Disease Prevention for Low-Income Elderly Blacks

Description of the Project

The purpose of this project is to encourage the reduction of risk factors associated with disability and death from preventable diseases. This health promotion and disease prevention model accomplishes this objective through the use of lay people who serves as peer counselors. The target population is low-income elderly blacks living in inner-cities and rural areas in Georgia.

The goals are to:

Identify strategies, which are culturally sensitive and educationally appropriate for the target group, that encourage the reduction of risk factors;

Generate and disseminate health education materials, concentrating on those inner-city areas where the health problems of low-income black elderly are identified as most severe; and

Develop a comprehensive training curriculum for peer counselors, which will serve as a model program that can be replicated in similar communities in other states.

This project is a collaborative effort involving the Morehouse School of Medicine, Area Agencies on Aging, volunteer community groups, Fort Valley State College, and the Cooperative Extension Service of the U.S. Department of Agriculture.

Target Group

African American Elderly

Contact Person

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Administration on Aging

PROJECT TITLE

Health Education Maintenance Program

Description of the Project

The primary objective of this project is to improve the health status of minority elderly, using an interdisciplinary educational model. A total of five educational sessions have been designed to stimulate and motivate more minority elders and their service providers to take better care of themselves, in order to control diseases and other debilitating conditions. Educational intervention is directed at a target population that frequent senior citizen programs located in urban and rural areas, minority elderly 60 years of age and above, and their service providers. A special effort is being made to recruit male participants through churches, barber shops, and neighborhood organizations in five different cities/counties in the Baltimore Metropolitan Area.

The goals are to:

Administer a "Health Style Self Test," which addresses such issues as stress control, nutrition, exercise and fitness, to each participant at the outset of each of the five sessions;

Engage the project's Advisory board, which consists of an interdisciplinary team of health professionals and consumer members, in the approval of the curriculum and monitoring of session activities;

Use Lay Trainers for the coordination and administration of the project sessions; and

Utilize students as assistance to Lay Trainers in the administration of the project sessions.

This project is being conducted with the cooperation of the National Caucus and Center on the Black Aged, various Baltimore social services agencies, and agencies in Anne Arundel and Prince Georges Counties.

Target Group

African American Elderly

Contact Person

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