BEAT IT
Becoming Empowered Africans Through Improved Treatment of Diabetes, Hepatitis B, & HIV/AIDS

Helping African Immigrants Live Longer and Stronger
Emeobong E. Martin

The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

No relationships to disclose
Center on Health Disparities at Adventist HealthCare

- Faith-based, non-profit health system
- Mission to promote health equity within our facilities and in the community
- Bridge partnerships to eliminate health disparities
- Promote the health of our community
African Immigrant Population

Washington DC Metro Area:

• About 11% of total immigrant population; 60% in Montgomery and Prince George’s counties
• Generally college-educated, English proficient, high income, low poverty, in relatively good health*; however...
• Others face serious barriers to finding sufficient employment, housing, and access to healthcare.
African Immigrants In Montgomery County, Maryland
U.S. Census, 2010

Cameroonian, 26%
Liberian, 9%
Ghanaian, 9%
Sierra Leonean, 10%
Ethiopian, 28%
Nigerian, 10%
Kenyan, 8%
African Immigrant Health Issues

Chronic & Infectious Diseases

- High rate of HIV/AIDS and hepatitis B
- High prevalence of diabetes

Barriers to Care

- Limited English proficiency
- Unemployment/Uninsured
- Cultural differences
- Religious beliefs
- Immigrant status
- Lack of resources/support
PROJECT BEAT IT

Becoming Empowered Africans Through Improved Treatment of Diabetes, Hepatitis B, & HIV/AIDS
Scope of Work

• Develop a culturally competent curriculum for health care providers to utilize when providing care and support to African patients with type 2 diabetes, hepatitis B, and HIV/AIDS.

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• Develop a health education module to increase health knowledge and promote successful disease management among African immigrants.
Project Timeline

**Phase I: Development**
- Months 1-8
  - Convene Advisory Committee
  - Develop and conduct four focus groups
  - Develop curricula for providers and consumers
  - Develop Pre and Post knowledge assessment
  - Finalize outcome measures
  - Identify hospitals/clinics and consumers to receive training
  - Begin outreach/recruitment for Phase 2
  - Develop an evaluation plan

**Phase II: Implementation**
- Months 9-12
  - Deliver three trainings per month: two for providers and one for consumers (total of twelve training sessions)

**Phase III: Evaluation**
- Months 13-20
  - Number of trainings, number of attendees at each training, number of consumers who adhere to medication and/or treatment recommendations *
  - Number of consumers who visit hospitals/clinics (planned and unplanned) within 4 months of training
  - Number of participants satisfied with curriculum
  - Items from pre and post test
  - Other measures as decided during phase one
Desired Outcomes

Provider Outcomes
- Increased awareness and knowledge of culturally competent intake/discharge procedures among clinicians (pre-/post-tests)
- Improved intake/discharge procedures for medical staff treating African immigrants with disease conditions (e.g., four month follow-up satisfaction survey)

Patient/Consumer Outcomes
- Increased awareness and knowledge of health conditions and treatments among consumers (pre-/post-tests)
- Increased medication and treatment adherence among African immigrants with disease conditions (patient surveys, follow-up visits)
- Reduced number of patients who visit hospitals/clinics (planned and unplanned) within 4 months of training
How Do We “BEAT IT!”?

Community Engagement
Advisory Board

- Twenty seven members
- Diverse disciplines: medicine, nursing, social work, pharmacy, nutrition, health education
- Engaged with African immigrant community
- Members of the African community
Advisory Board (cont’d)

• Quarterly in-person meetings
  – Project overview
  – Progress reports
  – Curriculum review
  – Participant recruitment

• Teleconferences
  – Content expertise
  – Dissemination strategies
Focus Groups

- Providers & Consumers
- Segmented by curriculum
- 8-10 participants
- General feedback on curriculum
Community Engagement

Outcomes

• Development of an additional curriculum for providers
• Adaptation to resource guide
• Modification of curriculum delivery
• Improved recruitment strategies
Progress Report Summary

- **Scheduled** 12 training sessions for providers and consumers
- Hosted 13 training sessions for healthcare providers at four community locations and online
- Hosted two in-person and one web-based training for consumers
- Built numerous partnerships with African community
- Project presentations at two national meetings
Improving the Health of a People, One Person at a Time
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Call us: 800-444-6472
Visit our website: http://minorityhealth.hhs.gov
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