



# WAYNE STATE UNIVERSITY

# Importance of HeartB Health Education to African American Adults

Julie Gleason-Comstock, PhD, MCHES, Ghadir Mozeb, BSPH  
Sadia Yasmin, BS, Sahla Syeda, Cardell Louis, MD

Funding: Detroit Medical Center Foundation;  
Wayne State University Cardiovascular Research Institute

Acknowledgements: Community Health Awareness Group, Inc. (CHAG) Community Health Workers and Advisory Group, and in respectful memory and celebration of Silas Norman, Jr., MD and his leadership with the WSU SOM and CHAG Board of Directors.



# Background

- Heart disease accounted for 31.6% of reported deaths in the City of Detroit. High blood pressure, a major risk factor, is higher among Detroit residents (42.9%) than the national average.
- Community health workers (CHW) are recognized for successful public health interventions nationally, there are few studies using a Community Advisory Group (CAG) to guide heart health outreach and follow-up by trained CHW in urban African-American communities.



# Objective

The primary objective is to describe implementation and follow-up of a CHW-led outreach heart health intervention for urban African American adults with guidance by a CAG.



# Method

- A one-group quasi-experimental (pre-posttest) study design.
- Short-term program outcomes were presented in a Logic Model and assessed at enrollment (baseline) and follow-up (six-month) visits.
- The intervention entailed:
  1. CHW training
  2. An outreach intervention implemented by CHW using evidence-based CDC and NHLBI resources
  3. Six-month follow-up survey to evaluate program outcomes and participant satisfaction.



# Method (Cont.)

- CHW training was conducted by WSU researchers from the Department of Family Medicine & Public Health Sciences and College of Nursing. A community nurse worked with the CHW in clinical assessment of BP readings.
- Participants were asked to score the importance of their participation in ten *HeartB* intervention activities on a scale of (1) Very important to (5) Not important.



# Results

Data were summarized using counts and percentages for categorical variables and mean and standard deviation for continuous variables.

- CHW recruited 100 participants from community-based organizations (48%), churches (40%) and home /community visits (12%) from 27 zipcodes throughout the City of Detroit.
- Majority (95%) of participants African American; 55% female, 39% male and 6% transgender, with Mean age of 44.57 years (SD=15.9).



## Results (Cont.)

- At six-month follow-up, slightly more participants (n=77, 80.2%) had a BP>120/80 mmHg at six months than at baseline.
- Analysis for all three genders showed perception of the three most important activities to be “Creating a plan to reduce my risk for heart disease” (M=1.93, SD=0.86), “Learning my heart age” (M=1.91, SD=1.06) and “Getting my BP checked” (M=1.48, SD=0.63)





# Recommendations & Public Health Implications

**Recommendations:** The CAG recommended expanding the intervention to 12 months and incorporating telehealth with home BP monitors to facilitate more frequent monitoring.

**Public Health Implications:** The limited intervention duration of 6 months did not provide the opportunity to meet longer term objectives such as better control of high BP and discussing risk reduction strategies with participants' primary care providers.

