

ANNUAL REPORT FY2006

July 1, 2005 - June 30, 2006



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Latino Health Initiative of Montgomery County Annual Report FY2006

Message from the Latino Health Initiative Manager and Latino Health Steering Committee Co-Chairs

In 1782, the Continental Congress approved the motto *E pluribus unum* for the Great Seal of the United States, a motto that is now imprinted on all United States coinage. Translated from Latin, it means, "Out of many, one." It originally referred to the integration of the 13 independent colonies into one united country. Over the years, this motto has served as a reminder of the United States' bold attempt to make one unified nation of people from many different backgrounds and beliefs.

While "E pluribus unum" has been interpreted in countless ways given the historical complexity behind its meaning, we thought it might serve as a metaphor for what we have observed at the Latino Health Initiative. That is, the coming together of many disparate entities for a unified purpose and voice. Community-level individuals, grassroots organizations, private and public health institutions, elected officials, donors, partners, staff, and volunteers came together in such a way that our combined effect has been greater than could have been possible had we functioned independently.

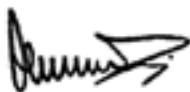
In November, 2005 the Latino Health Initiative (LHI), celebrated five very important years of providing leadership in promoting and advocating for the health of the Latino Community of Montgomery County. During the 5th Anniversary Reception that took place at the AFI Silver Theater, the LHI was highly praised by over 200 partners and supporters, including members of the County Executive's Office, County Council members, Senior Managers of the County's Department of Health and Human Services, Senior Executives from private entities, and prominent community leaders. This event was a testament to the numerous success of the LHI and how it has used creativity and leadership to work with other public and private partners, leverage additional resources by launching cutting-edge programs, and by dedicating countless hours to improving the health of Latinos in Montgomery County.

This Fiscal Year 2006 Annual Report captures highlights of the activities and accomplishments realized as a result of the synergy of a multitude of entities coming together and acting as one, in response to the changing demographic profile and needs of Montgomery County residents.

We hope you enjoy reading about the innovative program ideas for promoting health and wellness that the Latino Health Initiative put into action in Montgomery County this past year, the sixth year since the LHI's inception. These programs and activities successfully reached thousands of Latinos. We proudly and ambitiously look to our future goals and potential for accomplishments as we write the Blueprint for the Latino Health Initiative's second five years (2007-2011).



Sonia E. Mora
Manager



Fernanda Bianchi, PhD
Co-Chair



Diego Uriburu, MS
Co-Chair

Latino Health Initiative Background

The Latino Health Initiative (LHI) was founded in July 2000, with the goal of championing the health interests of Latino populations in Montgomery County, Maryland. Latino community leaders joined the County Executive and the Montgomery County Council to form the Latino Health Initiative as part of the County's Department of Health and Human Services. One of the reasons for forming the LHI was to develop and implement a plan of action that would be responsive to the health-related needs of Latinos in the County. This plan of action took the form of a document titled, *Blueprint for Latino Health in Montgomery County, Maryland, 2002-2006*, and continues to serve as the LHI's "big picture" compass by providing guidance on the overall strategic direction for our activities.

Since its genesis, the LHI has evolved into a vibrant organization, one well-connected to both the populations it serves and the organizations that offer service. The LHI is comprised of staff members from the Department of Health and Human Services and the Latino Health Steering Committee, a group of volunteer professionals who are affiliated with national, state, and local organizations. As a result of pioneering approaches to both defining and solving problems, the LHI has begun to make substantial improvements on individual lives and local systems. These outcomes are the result of the Latino Health Initiative's functions:

- ◆ Enhance coordination among existing health programs and services targeting Latinos;
- ◆ Provide technical assistance to programs and services serving Latinos;
- ◆ Develop and support models of programs and services to effectively serve Latinos; and
- ◆ Advocate for policies and practices that will effectively reach the County's Latino populations.

During FY06, the LHI's collaborations continued to grow in both breadth and depth. The number of volunteers included 16 Latino Health Steering Committee members, 22 Health Promoters, and dozens of community members. Our programs and activities had the support of a vast number of public and private organizations that have signed on as committed partners. The LHI is a moving force in the development of programs that address basic screening and prevention needs of Latino families, including the promotion of physical, mental and social wellness.

The Latino Health Initiative takes very seriously the program development process that any successful program must undertake. First, we take great care in understanding the needs and perceptions of our audience: Latinos in Montgomery County, many of whom are low-income, primarily Spanish-speaking, and recent immigrants. Second, we create a plan that serves as a foundation for our program. This plan may include activities, partnerships, and baseline surveys for outcome evaluation. Third, we develop and test messages and materials so that they are meaningful to our intended audience members. Fourth, we promote and implement the program. Last, we assess the effectiveness of our efforts and make refinements, specifically by asking program participants for their reactions. These stages constitute a circular process in which the last stage feeds back into the first stage as we work together in a continuous loop of planning, implementation, and improvement.



Latino Health Steering Committee of Montgomery County

The Latino Health Steering Committee was established as an independent group of volunteer professionals and community leaders willing to work with and for Latinos in Montgomery County, Maryland. The role of the Committee is to provide expert guidance and technical assistance in the conceptualization, design, development, and evaluation of targeted Latino health initiatives within the Department of Health and Human Services and to advocate on behalf of Latino communities. In sum, this group acts as the planning body for the LHI.

One area in which the Latino Health Steering Committee was heavily involved during FY06 was in its regular communication with the Montgomery County Board of Education on a wellness policy whose goal is to promote healthy eating and physical activity in the Montgomery County Public School System. The Latino Health Steering Committee painstakingly outlined in great detail how the County can modify environments in schools to make it easier for students to achieve changes in lifestyle habits, without burdening students themselves with all of the responsibility that such changes in behavior require. For example, the Latino Health Steering Committee proposed that health and physical education curricula include state-of-the-art and consistent nutrition information couched in a cultural context, and that the food service program include a component that teaches students about the nutritional value of foods and beverages. The Committee also recommended that an Office be designated that can be accountable for the oversight and successful outcomes of this Wellness Policy.

In FY06, the Latino Health Steering Committee chaired three workgroups: the Latino Data Workgroup, the Latino Health Professionals Workgroup, and the Ad-Hoc Latino Blueprint Workgroup.

During this time, the Latino Health Steering Committee also helped the County's Department of Health and Human Services secure over \$1,200,000 to support activities and programs whose common aim is to improve Latino health.

In addition to providing expert testimony at County and State forums, in FY06, 16 Latino Health Steering Committee members volunteered 1,680 hours to Latino Health Initiative programs, activities, and meetings. A roster of Steering Community members can be found at the end of this report.



Steering Committee members and DHHS staff at the annual LHI retreat



Asthma Program participants pose for a group shot after an educational session.

Asthma Management Pilot Program—FEATURED PROGRAM

Background

Asthma is a serious public health problem, one that disproportionately affects children, particularly Latinos. Appropriate asthma self-management, which includes routine check-ups and use of asthma management plans, may reduce the likelihood of asthma attacks and, in turn, the potential need for hospitalization. However, findings reported in the *2005 National Healthcare Disparities Report* point to the need to improve the way in which the health care system introduces and uses asthma self-management as an intervention, particularly among Latino, African American and poor children.

During Fiscal Year 2006 the Latino Health Initiative received a small grant from the Maryland Department of Health and Mental Hygiene to develop, implement, and evaluate an asthma management pilot project that would contribute to reducing emergency department visits and hospitalization rates among Latino children living in Montgomery County. The Asthma Management Pilot Program was designed by the Latino Health Initiative to increase understanding of asthma management among low-income Latino parents and caregivers of children with asthma and to develop and test culturally and linguistically appropriate interventions designed for this group. The desired outcome is empowered Latino families who appropriately use self-management measures for dealing with asthma in their children. A Community Advisory Board was established to guide program activities.

HIGHLIGHTS

The Asthma Management Pilot Program in FY06:

◆ **Recruited and trained program staff and asthma management coaches (“ConsEdus”)**

Recruitment

Since the literature review suggests that social support is an effective component of asthma interventions targeting Latino population, the Asthma Management Pilot Program included asthma management coaches (named “ConsEdus”) as an integral part of the intervention.

Program staff and a Community Advisory Committee determined that ideal candidates for *ConsEdus* should have certain characteristics such as cultural and linguistic competency, some medical background, ability to provide support, understanding the importance of maintaining confidentiality, and accept to work as volunteers. Eleven Latina women were selected to be trained as *ConsEdus* from a pool of foreign-trained nurses identified by the Latino Nurses Pilot Program.

Training

All prospective *ConsEdus* received an 8-hour training regarding basic asthma management, participatory education techniques, and supportive interventions for parents and caregivers of children with asthma. All *ConsEdus* signed a confidentiality agreement and the general volunteer registration form upon completion of the training.

◆ **Recruited parents and caregivers of children with asthma**

The LHI established a strong partnership with the Department of Health and Human Services’ School Health Services and the Linkages to Learning Program. Both of these entities played a key role

“Yo sabía manejar el asma de mi hijo de una forma distinta. Aunque recibía orientación de la doctora y me daba información, siempre fue muy rápido. Algunas veces no comprendía y como no leía la información que me daba, me equivocaba en el cuidado de mi hijo. Usted sabe: no es lo mismo aprender en inglés que en español. Con el programa de asma aprendí a ser constante en el uso del flujometro y a seguir el plan de acción. Como mi esposo me acompañó a las sesiones, él también aprendió como desenvolverse en el cuidado de mi hijo.

Ahora ambos cuidamos de él”.

“I knew how to care for my son’s asthma but in a different way. Although I received orientation and information from my child’s doctor, it was usually too fast. Sometimes I didn’t understand since I didn’t read the information that she gave me, so I used to make many mistakes. As you know, learning something in English is not the same as learning it in Spanish. In the asthma program I learned to be constant in the use of the peak flow meter and in following the action plan. Because my husband attended the educational sessions, he also learned how to care for our son.

Now I’m not the only one that takes care of my son.

My husband does too.”

—Rosario Placencia, Asthma Management Pilot Program participant

identifying 40 children with asthma attending elementary schools in the Up-County Region. Additionally, the LHI established partnerships with the Montgomery Housing Partnership and Amerigroup Corporation. These entities helped to identify 27 children with asthma attending elementary schools in the Down-County area. Through this collaborative effort, a total of 45 parents/caregivers of children with asthma were recruited to participate in group education sessions. Other methods of recruitment included the distribution of flyers and visits to PTA meetings.

◆ **Implemented asthma management group interventions**

A bilingual, bicultural educator led a total of 17 2-hour education group sessions in Spanish that were conducted at two sites: Summit Hall Elementary School (Gaithersburg) and Pembridge Square Community Center (Wheaton). Child care, refreshments and food were provided as incentives for parent participation.

Characteristics of participating parents and caregivers

A total of 45 individuals were contacted with 33 registering for the two groups. Twenty-three participants (21 women, 2 men; 20 parents, 3 caregivers) completed the training, and 29 children (20 boys, 9 girls) between 1-10 years participated in the Program.

Topics covered

The topics taught included: basic asthma concepts, developing and using an asthma management plan, managing asthma in home—including “green cleaning” materials and vacuum cleaning techniques—asthma medications and their use, folk and traditional medicines in asthma prevention and treatment, family responsibilities and support, and communicating with teachers, school nurses, and care providers.

Children with asthma participated in a number of activities such as learning games; viewing demonstrations of human lung models, completing together with parents parts of the booklet *Todo Sobre mi Asma (All About My Asthma)*, learning how to use a peak flow meter; and viewing age-appropriate videos.

The educational sessions evolved by gaining a support group mind set creating a significant rapport and *esprit de corps* among participants.

Follow-up social support interventions

Social support was provided through weekly follow-up calls by *ConsEdus*, the program coordinator, and group facilitator. The purpose of the calls was three-fold, to: 1) provide support and encouragement, 2) answer questions and address concerns, and 3) prevent attrition through the use of friendly and motivational reminders of upcoming sessions and the importance of regular attendance.

◆ **Evaluated the project**

The evaluation component assessed the effectiveness of the interventions and the concomitant support for asthma management in empowering parents to manage their children’s asthma. The instrument was administered to participants during the first and last group educational sessions. A total of 25 individuals completed the pre-test and 23 completed the post-test.

Asthma knowledge

Pre-test results showed that 52% of the questions on basic knowledge of asthma were answered correctly; post-test results indicated this percentage increased to 67.9% (a raise of 17.9%). Concerning the knowledge of asthma triggers, the increase of correct answers was 15.7% (from 67.2% to 82.9%).

Self-efficacy

The parent or caregiver perceptions of their ability to manage their child's asthma increased in their sense of self-efficacy). Before the educational intervention, many parents and caregivers were unsure about their ability to manage their child's asthma. After the intervention, the percentage of parents who felt fairly or very sure about managing their child's condition increased to 42 percent (see Table 1).

Table 1.
Pre- and post-test results for,
"How sure are you about managing your child's asthma?"

% Answering	Pre-test	Post-test	Difference
Fairly/very sure	62%	88%	+26 percentage points (a 42% increase)
Not sure	26%	11%	-15 percentage points (a 58% decrease)

Treatment Plan

Before the educational group sessions, only 64% of participating parents reported their child had an asthma treatment plan, 48% stated a plan is useful, and 30% said it was easy to understand. After the intervention, 100% completed a treatment plan and 85% mentioned it is useful and 76% said it was easy to understand

Other Findings

During the sessions participants reported a number of barriers to accessing health care. The most frequently mentioned were language barriers; lack of money and health insurance; poor doctor/patient relations; lack of knowledge; and inconvenient hours. The staff noted that participants were not familiar with the concept of "chronic disease" and the need for regular medical care.

In its second year, the project exceeded all proposed outcomes (see Table 2).

Table 2.
Year 2 Outcomes

Performance measure	Target	Achieved
Participants recruited for education interventions	30	45
Proportion of participants who completed the group sessions	60%	70%
Proportion of participants who developed an asthma management plan	60%	100%
Proportion of participants reporting currently using a plan	60%	85%
Increase in parents' knowledge	30%	36.7%

“Le hablé a mi familia sobre el cáncer de colon. Mi hermana se hizo una colonoscopia y se sintió aliviada porque el doctor encontró unos pólipos y los retiró. Soy testigo de cómo la prevención sí funciona”.



“I talked to my family about colon cancer. My sister had a colonoscopy and she was relieved because the doctor found some polyps and took them out. I am a witness that, yes, prevention can work.”

—Mercedes Munguia, Community Ministries of Rockville Health Promoter

Cancer Prevention and Control Program

The Cancer Prevention and Control Program was established in May of 2001 through a grant provided by the State of Maryland Cigarette Restitution Funds. The program seeks to reduce the incidence and mortality rates of colorectal, breast, and cervical cancers among Latinos living in Montgomery County through a collaborative effort between the LHI, Community Ministries of Rockville (CMR) and CASA of Maryland.

Drawing on Latino communities’ assets, the program utilized trained lay health promoters to provide culturally and linguistically competent education and referrals to cancer screening services for low-income, uninsured Latinos residing in the County. Spanish-language educational materials developed by the program supported health promoters’ efforts, and limited yet effective mass media interventions complemented their outreach. Partnerships with County, State, and private agencies provided opportunities to share lessons learned and expand capacities to better serve Latinos.

In FY06, the Latino Cancer Program, conducted activities promoting basic knowledge of cancer, prevention, screening tests, and referrals related to colorectal, breast, and cervical cancers. The program also partnered with George Washington University’s “Mammovan” and the Women’s Cancer Control Program to provide free mammograms and Pap tests to low-income and uninsured women living in Montgomery County.

HIGHLIGHTS

In FY06, the Cancer Prevention and Control Program:

- ◆ Conducted over 47 hours of training with 20 Health Promoters. Topics for the sessions included breast and cervical cancers, education and outreach strategies, and leadership.
- ◆ Provided 321 free mammograms in 13 different Latino neighborhoods throughout the County.

Table 3. Program Statistics

Cancer Prevention & Control Program Activity	# Services Rendered FY06
Health Promoters trained	20
Referrals to Pap smear tests	26
Colonoscopies performed*	9
Mammograms performed	321
Persons educated by overall program efforts	456
Cancer newsletter and other materials distributed	560

*Due to a backlog in colonoscopy services, there was no space available for colonoscopies in FY06 and no more referrals were possible. This shortage of space for colonoscopies required that the program focus its outreach efforts on breast and cervical cancers.

From 2001 to 2006 one of the program's aims was to increase the involvement and capacity of local Latino community-based organizations and entities serving Latinos to work in cancer prevention and control. One of the most important accomplishments of the program was to increase participating community-based organizations' capacity and commitment to work in cancer prevention and control. As a result of this achievement, Community Ministries of Rockville and CASA of Maryland will manage the cancer program, and the Latino Health Initiative will cease having an active role in FY07.

Vías de La Salud Health Promoters Program

The *Vías de La Salud* Program seeks to train grassroots community members as volunteer Health Promoters who, in turn, educate and inform the community about health programs and facilitate community members' access to these programs. Promoters also plan and conduct health promotion and education activities and interventions in homes, churches, schools, neighborhoods, and community centers both at group and individual levels.

Health Promoters have volunteered their time to this program, the average number of years serving as a health promoter is six with a very low turnover rate.

HIGHLIGHTS

In FY06, the *Vías de La Salud* Program:

- ◆ Engaged 22 Health Promoters who volunteered a total of 2,074 hours of service and touched the lives of almost 3,000 Latinos living in Montgomery County. Health Promoters, acting individually or in teams, provided information, instruction, guidance, and other forms of support to 1,322 Latinos attending community group activities, 392 Latinos in extended sessions with individuals in various settings, and 1,204 Latinos at health fairs.
- ◆ Made a total of 560 referrals to the Maryland Children's Health Program, distributed 229 program applications and instructed 70 families on how to complete them properly.
- ◆ Distributed 18 Care for Kids and Health Choice applications and obtained follow-up information from 64 Latino families.
- ◆ Participated in 21 health fairs and community events throughout Montgomery County.
- ◆ Reached 449 individuals through group and individual education and training activities addressing tobacco prevention, physical activity, and nutrition.
- ◆ Conducted seven monthly *Pláticas de Salud* (informal talks about health) at Amherst Square Community Center in Wheaton, in collaboration with the Montgomery Housing Partnership. Topics and activities

Health Promoters
leading a walking session.



“El programa de actividad física me ha cambiado la vida, tanto a mí como a mi familia. Todo lo que cocino y comemos es más saludable; a mí en particular me ha elevado la autoestima, me siento muy bien”.



“The physical activity program has changed my life — my own as well as my family’s. Everything I cook, and that we eat, is healthier. For me, in particular, the program has boosted my self-esteem. I feel very good.”

—Doris Armas, Health Promoter, Latino Health Initiative

reflected areas for which families have indicated interest such as key questions to ask at the next doctor’s visit, healthy cooking demonstrations, and the benefits of physical activity, among others. In FY06, 105 adults and 26 children benefited from the *pláticas*.

- ◆ Trained 8 Health Promoters during a 2½ hour session on ways to deliver clear and succinct health messages via radio. This group of trained Health Promoters had the opportunity to present on local Spanish-language radio stations reaching thousands of individuals with key health messages.
- ◆ Planned and conducted outreach activities in 8 sites across Montgomery County in celebration of the Great American Smoke-out where 15 Health Promoters distributed anti-smoking messages to over 200 individuals highlighting the importance of a smoke-free life and ways to protect children from second-hand smoke.
- ◆ Led six 8-week long *caminatas* (walking sessions) in multiple neighborhoods and schools during each of the four seasons in 2006. Four Health Promoters formed six teams and motivated walking teams composed of 12-18 participants each. During the walks, participants discussed the health benefits of incorporating regular physical activity into one’s daily routine. A total of 96 Latino women, men, and children completed the eight sessions.
- ◆ Established an agreement with the Primary Health Coalition Care for Kids Program to share and document data on the children who apply for the program and those who are approved. This agreement to be fully implemented in FY07, will provide valuable evaluation data that will allow for an increase access to needed care by families and enhance recognition of the key role our health promoters play in increasing access to services.

Evaluation

In FY06, Health Promoters became actively involved in the development of reliable performance indicators of their community activities and interventions, and in possible ways to measure the impact of their efforts. They diligently recorded their efforts on monthly activities reports.

A complete and detailed report on the FY06 mission, objectives, results, and outcomes of the *Vías de La Salud* Program is available upon request (*2006—Program Performance Evaluation Report*).

Latino Youth Wellness Program

Established in December 2003 and implemented by Identity, Inc., the Latino Youth Wellness Program engages youth and families in a holistic approach to wellness, addressing mental, physical, social, environmental, and emotional issues in a culturally and linguistically competent manner. This program promotes awareness of teen-related health issues, seeks to increase participants’ responsibility of their own health and overall well-being, and encourages them to consider health-related careers.

In FY06, the Latino Youth Wellness Program collaborated with the Dennis Avenue HIV Clinic, the Gilcrest Center (for HIV counseling, testing, and referrals), the YMCA/YFS (for educational and mental health services), and the Office of the Public Defender (for legal services). Also unique to FY06, Identity began providing on-site mental health services and replicated the Latino Youth Wellness Program in Up-County.

The program also addresses issues dealing with separation and reunification (of parents from/with children), communication between parents and children, trust building, sexuality, substance abuse, HIV, gangs, navigating the school system, and parental involvement in school.

HIGHLIGHTS

In FY06, the Latino Youth Wellness Program:

- ◆ Provided over 437 hours of training to Latino teens and their parents on various health issues such as physical fitness, communication skills building, reproductive health, substance abuse prevention, and mental health.
- ◆ Provided professional support to 139 families (556 participants) living in Wheaton and Gaithersburg through 6,952 contacts, which included 778 face-to-face case management interventions and 221 referrals to child protective services, mental health services, medical services, legal services, and the crisis center, among others (See Table 4).

Table 4. The Latino Youth Wellness Program: Number of Contacts FY06

Intervention Type	# contacts	# hours
Group Level Interventions	261	437
–Youth training component	148	296
–Fitness component	85	85
–Parent component	28	56
Individual Level Interventions	6,691	2,340
– Counseling sessions (face-to-face)	778	389
– Counseling sessions with Identity’s Clinical Social Worker, Down-County	430	430
– Counseling sessions with Identity’s Clinical Social Worker, Up-County	250	250
– Home visits	728	182
– Indirect individual interventions (phone calls)	4,505	1,089

- ◆ Provided 2,777 service hours to participating families (20 hours average per family).
- ◆ Partnered with George Washington University’s Department of Psychology in the design and conduct of an evaluation which included administering several instruments such as monthly progress reports, curriculum tracking forms, module pre- and post-tests, positive youth development baseline, exit surveys, parent surveys, and satisfaction exit surveys (See Tables 5 and 6).

Table 5. The Latino Youth Wellness Program: Outcomes FY06

The Latino Wellness Program Objective	Expected Outcome	Outcome Achieved	Percent of Expectation Exceeded
Number of families served	75	139	+85%
Number of wellness plans completed	75	121	+61%
Number of group training hours with youth	20	296	+1,380%
Number of group training hours with parents	20	56	+180%
Number of counseling sessions conducted	200	1,458	+629%
Number of referrals provided to health and human services	200	221	+9.5%
Number of of community advisory board group meetings	4	4	Expectation met
Percentage changes in health behaviors	22%	29.5%	+7.5 percentage points

“Me siento más libre de decir lo que pienso y de hablar con mis padres”.



“I am more confident to speak my mind and talk to my parents.”

—Latino Youth Wellness Program
Participant
Gaithersburg Middle School



Participants of the Latino Youth Wellness Program during a regular session.

Table 6. The Latino Youth Wellness Program: Indicators FY06

Indicator	Pre-test result	Post-test result	Amount Improved
Report of low level of self-esteem	19.8%	12.7%	-7.1 percentage points
Report of being depressed	16.2%	12.6%	-3.6 percentage points
Report of low expectations for the future	11.8%	2.0%	-9.8 percentage points
Report of knowledge on proper use of condoms	77.9%	100%	+22.1 percentage points

The results of Identity’s 2006 Needs Assessment Survey reveal the positive effects of the Latino Youth Wellness Program’s holistic approach to health. As a result of participating in the Latino Youth Wellness Program, youth reported increased sense of confidence in the future, improved their self-confidence, and enhanced communication with their parents regarding difficult subjects such as separation. Participants also reported a decrease in their substance use, increased confidence in their ability to use refusal tactics, increased negative perception of peer use of substances and involvement in gangs, a decrease in perception that gangs help solve problems, and reduction in the willingness to join a gang.

With regards to health practices, youth participating in the program increased their physical activity, increased their knowledge and enhanced their attitudes about healthy eating and increased healthy changes towards healthy attitudes. The assessment also indicated that parents who participated in the LYWP reported that their relationship with their children had improved. In addition, a large portion of the parents reported dedicating more time to their children.

Program evaluation results also indicate that 94% of youth and 96% of parents expressed being satisfied with the program.

Pilot Program for Licensure of Foreign-Trained Nursing Professionals— Building on Our Community’s Assets

The Pilot Program for Licensure of Foreign-Trained Nursing Professionals (“Nurses Pilot Program”) seeks to increase the number of Latino health professionals in the County’s health-related workforce—one of the priorities outlined in the *Blueprint for Latino Health in Montgomery County, Maryland 2002-2006*.

The Nurses Pilot Program is a multi-institutional collaboration spearheaded by the LHI, with the support of the Workforce Investment Board and Montgomery Works One Stop Workforce Center, the Career Transition Center, Inc., Montgomery College, Holy Cross Hospital, Washington Adventist Hospital, and the Welcome Back Initiative in San Francisco, California. The program provides a comprehensive, integrated, and coordinated approach for effectively addressing the needs, and decreasing the challenges and barriers Latino nurses encounter in Maryland while trying to obtain a nursing license. The program incorporates four components: support and guidance, academics, practical exposure to the United States health care system, and mentoring.

The LHI provides overall coordination for the implementation of the Nurses Pilot Program model and each partner organization is responsible for a specific component. While program participants prepare to obtain the Maryland RN (Registered Nurse) license, Montgomery Works One Stop Workforce Center and the Career Transition Center help participants who are eligible to take advantage of services including use of funds to cover expenses related to job training and job development. Montgomery College provides English as a Second Language (ESL) instruction and Nursing review related courses. Holy Cross Hospital and Washington Adventist Hospital direct program participants to hospital jobs whose purpose is to provide mentorship and practical exposure to the United States health care system. The Welcome Back Initiative provides technical assistance to the Latino Health Initiative. In addition, the LHI establishes linkages with the Maryland Board of Nursing, the authority that grants RN licenses, and other institutions involved in the RN licensing process.

The Nurses Pilot Program started in September 2005. The implementation of program activities with a cohort of 25 participants began in January 2006. The pilot effort for the Latino nurses in the County is a unique program not only for Montgomery County, but also has the potential to be modeled nationwide. Even though this program only had nine months (out of a 12-month fiscal year) for full implementation, we were extremely successful in exceeding our set goals, and establishing a model program. The program is widely considered to be innovative and “the future” of workforce development opportunities in the health profession for immigrant populations.

HIGHLIGHTS

In FY06, the LHI Nurses Pilot Program:

- ◆ Conducted a labor-intensive recruitment process that culminated in the selection of a cohort of 25 program participants.
- ◆ Brought together 11 individuals from partner institutions who, among with LHI staff developed a two-year implementation plan.
- ◆ Conducted 26 hours of group orientation sessions to provide on-going guidance and support to participants. Topics addressed during the sessions included a general overview of the program, participant commitments and responsibilities, services and activities available through partner organizations, guidance with nursing licensure process, the hiring process at Holy Cross Hospital, and referral to support services.
- ◆ Successfully leveraged \$10,587 in financial assistance for 13 nurses through the Career Transition Center including reimbursement for tuition and books for ESL courses and nursing reviews, and fees required during the certification process.
- ◆ Provided 95 hours of individualized case management, guidance, and support to all program participants to assure needs and concerns were addressed timely and effectively.
- ◆ Facilitated enrollment of all participants in academic instruction, including 21 participants in ESL instruction at Montgomery College and three participants in Nursing Board Exam (NCLEX) preparation.
- ◆ Partnered with Holy Cross Hospital to create a new position of Nurse-in-Training for program participants. This position offers full-time benefits including health insurance, college tuition reimbursement, and stipends to cover expenses associated with studying and nursing license examination fees.
- ◆ Secured employment at Holy Cross Hospital as Nurse-in-Training for seven program participants.

“Quiero dar las gracias a toda la Iniciativa de Salud y al Comité Directivo de la Iniciativa por permitirme participar en el programa piloto de enfermeras, por toda la ayuda económica y por toda la orientación recibida”.



“I would like to thank the Latino Health Initiative (LHI) and the Latino Health Steering Committee for allowing my participation into the Nurses Pilot Program, for all the financial support and the orientation that I received.”

—Gloria Robles, Nurses Pilot Program Participant

Nurses Pilot Program
 Participants after one of
 the regular support and
 guidance meetings held at
 the Latino Health Initiative.



Table 8. Nurses Pilot Program Statistics

Number of nurses recruited	25
Percentage of participants retained	96
Percentage of participants satisfied with the program	85
Percentage of nurses retained who initiated paperwork for credential evaluation	100

System Navigator & Interpreter Program

The System Navigator & Interpreter Program, was established by the LHI in 2003 and contracted to CASA of Maryland to provide culturally and linguistically appropriate resources and professional medical interpretation to facilitate low-income, uninsured Latinos access to health care.

Bilingual and bicultural staff manage a bilingual health information telephone line that provides guidance to community members about health and human services in the County and ways to access these services. In addition, bilingual and bicultural medical interpreters work directly with community members and community providers to ensure services are provided in an effective and efficient manner.

HIGHLIGHTS

In FY06, the System Navigator & Interpreter Program:

- ◆ Provided 2,840 community members health information and referrals via the bilingual health information line. A total of 4,431 referrals were made to health and human services.
- ◆ Completed 2,145 medical interpretations. Interpretation services were provided, on a per request basis, to Mercy Health Clinic, Project Access, Mobile Medical Care, Spanish Catholic Center, Holy Cross Hospital Health Center, the Montgomery County Cancer Crusade and other DHHS agencies in Montgomery County.
- ◆ Increased the number of interpretations by 25% from FY05.
- ◆ Developed a protocol for training staff to serve on the bilingual health information line. The protocol outlines ways to correctly operate the telephone system and communicate with clients, and instructs on proper reporting. It also includes frequently asked questions as well as a list of contact information and resources.
- ◆ Offered a minimum of 25 hours of training for each new staff member.
- ◆ Increased the interpreter pool by four new interpreters; and trained two new individuals to become medical interpreters. This brought the total pool of available interpreters to 16.
- ◆ Enhanced and expanded the program's database.

Evaluation

The System Navigator & Interpreter Program conducted the following evaluation activities in FY06:

- ◆ Administered customer satisfaction surveys on an ongoing basis. Every month, the Night Information Specialist calls 30 clients who used the hotline and 30 clients who used interpretation services. These clients are chosen randomly from the list of individuals who used services during the previous month. Through an electronic survey, as well as assistance and feedback by CASA and referral providers, customer satisfaction is assessed. Results are discussed with staff during weekly meetings for the purpose of improving client needs.
- ◆ Evaluated interpreters on a periodic basis to document competency and professionalism of interpreters and satisfaction with the service. Health providers regularly complete a survey. Survey results for FY06 showed satisfaction with all interpreters from the current pool, with one exception. Staff members engaged in intense coaching of this interpreter to correct concerns.
- ◆ Evaluated the Bilingual Health Information Line and Interpreters Program. A report completed in August, 2006, by an outside consultant showed over 97% satisfaction with both services.
- ◆ Gathered feedback from the community on the accessibility of, and satisfaction with, services via multiple mechanisms which included feed back from community members served at CASA sites, regular meetings with interpreters, bimonthly meeting with Mobile Medical Care to discuss interactions among interpreter and medical providers.

Table 9. System Navigator & Interpreter Program Statistics—FY06

Program Objective	Expected Outcome	Outcome Achieved	Percent of Expectation Exceeded
Percentage of individuals who accessed services as a result of contacting the bilingual information line	60%	88%	+27%
Percentage of clients satisfied with referrals and interpreter services	85%	97%	+14%
Number of one-on-one referrals provided by the bilingual information line	4300	4431	+3%
Number of medical interpreter services provided	2000	2304	+1%

“Estoy realmente agradecido y sé que puedo contar con sus servicios. He estado trabajando por muchísimo tiempo y en un trabajo tan exigente físicamente que me lastimé la espalda y estaba sufriendo terriblemente. Llamé al Centro de Información y fui derivado a una clínica de cuidados primarios, en la cual pude obtener una cita con un especialista. Fui operado y me recuperé por completo. A lo largo de todo este proceso, de las citas con mi doctor e incluso el día de la cirugía, estuve acompañada por un intérprete provisto por este programa. ¡Gracias!”

“I am very grateful and know that I can count on your services. I had been working for so long and in such a physically demanding job that I hurt my back and was suffering a lot. I called the Information Line and was referred to a primary care clinic from which I was able to obtain a referral to a specialist. I underwent surgery and have completely recovered. Throughout this entire process, through all my doctor’s appointments, and even on the day of my surgery, I was accompanied by an interpreter arranged by the program. Thank you!”

—Edson Orellana, System Navigator & Interpreter Program Participant

Special Projects: LHI Makes History

Emergency Preparedness

The Emergency Preparedness Assessment was initiated as a result of a collaboration between the Advanced Practice Center for Public Health Emergency Preparedness and Response Program, and the Latino Health Initiative.

The purpose of this assessment was to increase the Latino community's understanding of issues related to emergency preparedness.

HIGHLIGHTS

In FY06, the LHI:

- ◆ Conducted a qualitative study to identify public emergency knowledge and perceptions of risks for Latin American immigrants, and their sources and preferences for receiving emergency preparedness information. The program conducted six focus groups with Latino community members including community health workers. Highlights from this research include:
 - Participants had difficulty defining "emergency."
 - Perceived personal emergency risks included immigration problems, crime, personal insecurity, gangs, home and traffic accidents, home fires, environmental problems, and snipers.
 - The vast majority of participants had not received information on emergency preparedness and did not have a personal/home emergency plan.
 - Clear, prioritized messages on emergencies and emergency preparedness for Latino communities need to relate to situations that Latino people face in both the United States and home countries of origin.
 - Well-informed Latino and Spanish-speaking first responders are needed.
- ◆ Developed a plan to address emergency preparedness among Latino communities in the County.
- ◆ Developed a Spanish-language curriculum on emergency preparedness to be used as a training guide by Health Promoters who will be engaging in community outreach activities.

Mini-Med School

In collaboration with the University of Maryland School of Medicine the LHI sponsored the first ever Mini-Med School for Spanish-speaking individuals. The Mini-Med School, a health education and disease prevention course, started six years ago. With a plan to address health disparities across the state, the university spread the program to the Eastern Shore and rural communities in Western Maryland. Offered as a public service by the University of Maryland School of Medicine, Mini-Med School is a series of tuition-free classes designed to help participants improve their health and well being. Mini-Med School lectures are presented by faculty physicians in medical school classrooms. This project is open to everyone.

"Quiero dar las gracias a los organizadores de Mini-Med porque me ayudaron a conocer más sobre temas de salud que desconocía. Estoy muy satisfecha porque esto me ha ayudado a cuidar mejor de mi salud y la de mi familia."

"I would like to thank the organizers of Mini-Med because they helped me to know more about the different topics related to health that I was not aware of. I am very satisfied because this helped me to take better care of my health and my family."

—María Gumusio, Mini-Med Participant

In November 2005, the first Spanish-language Mini-Med School was held at University of Maryland Shady Grove Campus. This highly successful program consisted of five three-hour long state-of-the-art educational sessions given by culturally and linguistically competent medical specialists on conditions that affect Latinos. The program consistently brought together more than three hundred Latinos every week, including several health promoters from different public and private programs in the County. Due to the active role of the Latino Health Initiative in this project, the program graduated the largest class in its history!

Montgomery County Latino Cancer Survey

The State health agencies in Maryland do not have much cancer-related data with respect to Latinos at the state and local level. Moreover, the cancer screening prevalence for Latinos is generally lower than estimates for the entire Montgomery County population age 40 and older. For both of these reasons, the Latino Health Initiative in FY06 administered the Montgomery County Latino Cancer Survey to assess cancer-related knowledge, attitudes, and practices of Latinos residing in Montgomery County.

For the first time in the history of the State of Maryland, the DHMH conducted a cancer survey on a specific Latino population. The DHMH and the University of Maryland chose to partner with LHI for conducting this project because of our reputation for high-quality work and our experience

In FY05, the Latino Health Initiative set the groundwork for the Montgomery County Latino Cancer Survey by assuring the survey was culturally and linguistically appropriate, providing technical support to the University of Maryland during the Institutional Review Board submission and approvals process, pre-tested the survey instrument, and developing the sampling methodology,

During FY06, the LHI implemented a quality control plan and a chain of custody to manage data collection and conducted the survey in Latino households in the Up, Mid, and Lower areas of the County.

Even though the original plan had allotted three months to conduct the data collection phase, the LHI exceeded this goal by completing the survey in one month. The survey was complex and highly technical, and both the University and the State were very pleased with the quality of the work of the LHI. Interviewers administered the survey in Spanish or English, according to the respondent's preference. Each interview lasted an average of 30 minutes.

Additionally, the LHI's Latino Data Workgroup provided hundreds of hours of in-kind support to this project and over 120 hours of in-kind technical support to the University of Maryland to develop the final report. With the preliminary results from the survey the LHI developed a document with strategies for enhancing current efforts on cancer prevention and education for Latinos. The final report for the survey will be finalized and released in FY07.

Community Planning

Latino Data Workgroup

Established in 2002, the Latino Data Workgroup is composed of volunteer professionals who work in the federal government, academia, and the private sector. Workgroup members' main focus is to develop and implement an action plan that will enhance the current system for collecting, analyzing, and reporting health data

"The Montgomery County Latino Cancer Survey was a collaborative effort of State and Local government, an academic institution, and the local community. In projects such as this, it is important to involve members of the community early in the planning stages. The contributions of the Latino Health Initiative in the planning and execution of the project were vital to its success."

—Marsha Bienia, MBA

Director, Center for Cancer Surveillance and Control, Maryland Department of Health and Mental Hygiene

“... the Primary Care Coalition is very pleased to have such a close, positive, constructive, and forward thinking relationship with the Latino Health Initiative..., we have valued the opportunity to share ideas and information on multiple topics related to health care quality, safety, availability, and access.”

—Tom Lewis, Primary Care Coalition,
Chief Information Officer



Latino data workgroup members in a working session

on Latinos in Montgomery County. Lack of accurate racial and ethnic health data hinders efforts to close gaps in health care disparities. Improving the scope, accuracy, and use of data-collection efforts for Latinos will enable more appropriate identification of the health needs of the County’s Latino populations. This will permit rational prioritizing, planning, monitoring, and evaluation of health interventions.

HIGHLIGHTS

In FY06, the Latino Data Workgroup:

- ◆ Offered over 120 hours of in-kind technical support to the Montgomery County Latino Cancer Survey to assure the release of a final report that is relevant to the needs of Latino communities in Montgomery County.
- ◆ Provided technical assistance to the Primary Care Coalition (PCC) in reference to its new management information system, specifically focusing on data storage, access, confidentiality and quality control issues. PCC is a non-profit organization established to increase access to health care for low-income, uninsured County residents.
- ◆ Developed and edited the text of *How to Deal with Latino Data: A Guide for Montgomery County Service Providers* (“Latino Data Guide”). The *Latino Data Guide* is meant to be used by professionals in the fields of medicine and public health, Latino community service providers, County government officials, researchers, statisticians, epidemiologists, and evaluators. The *Latino Data Guide* will be published and disseminated in FY07. The overall purpose of the *Latino Data Guide* is to help entities that serve the needs of Montgomery County Latinos improve data collection, analyses, and reporting efforts. Other purposes of the *Latino Data Guide* are to:
 - Enhance the data operations infrastructure in Montgomery County so that Latino data can be reflected accurately.
 - Provide information related to Latino demographics, disease prevalence among Latino populations, changes in demographics and disease prevalence over time, health outcomes, and health needs to organizations, agencies, and individuals serving Latinos in Montgomery County.
 - Assist entities in creating benchmarks for measuring successes in quality data collection.
 - Tailor health and social services to the local needs of Latino populations in Montgomery County. (For example, Salvadorans constitute the largest Latino subgroup in Montgomery County; health education materials should be written with Salvadoran history, culture, and idioms in mind.)
 - Be a model for other jurisdictions in the greater Washington, DC area, as well as in other parts of the country.

Ad-Hoc Latino Blueprint Workgroup

Looking Ahead—the Next 5-Year Plan

The Ad-Hoc Latino Blueprint Workgroup seeks to review and update the priority issues and recommendations established in the original Blueprint document through a community participatory process.

In FY06, the Workgroup initiated work on the *2007-2011 Blueprint*. The revised *Blueprint* will be used as a policy document to present to County public members, providers, and policymakers. The intention is to use the Blueprint as a basis for the continued development of responsive and sensitive medical care and public health systems that consciously and systematically address the basic needs of Latino communities. It can also serve as a program guide for future Latino Health Steering Committee and Latino Health Initiative program activities.

Capacity Building

Training and Technical Assistance

In FY06, Latino Health Initiative staff provided over 300 hours of technical assistance to community-based organizations and other entities working on cancer prevention and control efforts, including tobacco use prevention.

HIGHLIGHTS

In FY06, the Latino Health Initiative engaged in the following training and technical assistance activities:

- ◆ Gave support and assistance on tobacco use prevention and outreach to the Community Ministries of Rockville and CASA of Maryland Health Promoter Programs. Nearly 20 health promoters attended trainings.
- ◆ Assisted in the development, implementation, and evaluation of three training sessions for 20 health promoters. Session topics included breast and cervical cancers, education and outreach strategies, and leadership.
- ◆ Provided technical assistance the development and implementation of strategies to increase access to cancer screening services through participation in the Minority Outreach and Technical Assistance Grant, a partnership that involves Holy Cross Hospital, the African-American Health Program, the Asian-American Cancer Program, CASA of Maryland, Community Ministries of Rockville, and the LHI.

“The Latino Health Initiative has been a valued collaborative partner in the Minority Office and Technical Assistance (MOTA) grant. They have contributed to the success of organizational and community capacity building in cancer control and prevention in Montgomery County.”

—Wendy W. Friar, RN, MS
Director, Community Health, Holy Cross Hospital



Latino Health Initiative staff participated in ongoing efforts to develop culturally appropriate and linguistically accurate health education materials.



Community Information & Education

Latino Health Initiative in the Media

Latino Health Initiative staff participated in ongoing media activities to inform the public about the Latino Health Initiative and health-related services and programs available in Montgomery County especially for Latino populations.

HIGHLIGHTS

In FY06, the Latino Health Initiative:

- ◆ Continued its collaborative relationship with Montgomery Cable Channel 21 with the goal of informing Spanish-speaking Latinos about health-related topics. Specifically through *Revista Semanal*, a Spanish-language television show, Latino Health Initiative staff participated in seven TV shows, and delivered information on obesity, physical activity and nutrition, cancer screening, access to care issues, and Latino Health Initiative's services and programs. Through this effort thousands of Latinos received critical health information.
- ◆ Published, "Delivering effective asthma management interventions for Latino populations," in the Maryland Department of Health and Mental Hygiene's electronic newsletter *Perinatal Network* (Fall 2005).
- ◆ Was interviewed by Pete Thomson of the American Medical Student Association's *New Physician* newsletter. The November 2005 "Defeating disparity—Barriers to equal care persist for Latinos" article included excerpts from this interview.
- ◆ Received mention in Liza Gutierrez's *Gazette Community News* article titled, "Reaching Latinos is a prescription for better health" (January 11, 2006, Page A-12).

Latino Health Initiative Spanish-language Education Materials

Latino Health Initiative staff participated in ongoing efforts to develop culturally appropriate and linguistically accurate health education materials.

HIGHLIGHTS

In FY06, the Latino Health Initiative:

- ◆ Produced one publication on physical activity and updated two more on cancer and tobacco education. This was a labor-intensive process that produced state-of-the-art education information to a population that does not normally receive culturally and linguistically appropriate information to take care of their health. Hundreds of these items were distributed by our health promoters and staff as part of our outreach efforts and in response to requests from other programs. This demand from others for LHI materials is indicative of the quality and usefulness of these materials.
- ◆ Developed a total of three culturally and linguistically appropriate curricula of the following topics: physical fitness, asthma management, and emergency preparedness.

Latino Health Initiative Recognition Awards & Presentations

Latino Health Initiative programs received several prestigious awards and staff made many presentations at the national, state, and local level.

HIGHLIGHTS

In FY06, the Latino Health Initiative received the following awards:

- ◆ The Cancer Prevention and Control Program received the NACo Achievement Award at the Annual Montgomery County's Best Honor Awards Presentation ceremony (March 2006). The awards are presented annually to honor programs that make Montgomery County one of the premier local governments in the United States.
- ◆ The *Vías de La Salud* Health Promoters Program received Honorable Mention for the Partnership Award at the Employee Recognition Spring 2006 Ceremony.
- ◆ In May 2006, Sonia Mora, Manager of the Latino Health Initiative received an award from the Maryland Special Population Cancer Research Network at the University of Maryland for her contributions to the reduction of health disparities.

In FY06, the Latino Health Initiative made presentations at the following conferences and meetings:

- ◆ The Cancer Prevention and Control Program participated as an exhibitor during the 12th Maryland State Council on Cancer Conference at the Department of Health and Mental Hygiene (November 2005).
- ◆ The Nurses Pilot Program made a presentation titled, "Innovative Strategies: Incorporating Latino Foreign-Trained Nursing Professionals into the Health Workforce," during a panel at the Meeting the Demand for Health Care Professionals: Workshop for Solutions in Montgomery County (October 2005). Staff members described the pilot program for licensure of foreign-trained nursing professionals.
- ◆ The *Vías de La Salud* Health Promoters Program and Latino Health Initiative staff participated in the Hispanic/Latino Roundtable's planning committee hosted by the Department of Health and Mental Hygiene. Seven Health Promoters contributed to the roundtable, three providing personal testimonies on access to care.
- ◆ Sonia Mora, Manager of the Latino Health Initiative served in the Blue Ribbon Panel to advise Adventist HealthCare on the critical initial decision points associated with the creation of the Maryland Center on Health Disparities.

Funds Received & Used

Fiscal Year 2006 (July 1, 2005–June 30, 2006) was a year of financial success and growth for the Latino Health Initiative. The Latino Health Initiative grew from a Fiscal Year 2005 core budget of \$700,000 to a Fiscal Year 2006 core budget of \$900,000—a 29% increase in one fiscal year.

In FY06, expenses for core appropriated funds were captured in two broad categories:

1. 78% of the budget: Contracts and Programs. Included contractors, demonstration programs, and special projects (e.g., Latino Youth Wellness Program, System Navigator & Interpreter Program, Latino Data Workgroup, Nurses Pilot Program, and consultants).
2. 22% of the budget: Administrative. Included personnel, who manage the contracts and run the programs and operational costs such as development and training, support of the Latino Health Steering Committee, interpretation services, office equipment, supplies, printing, and other costs.

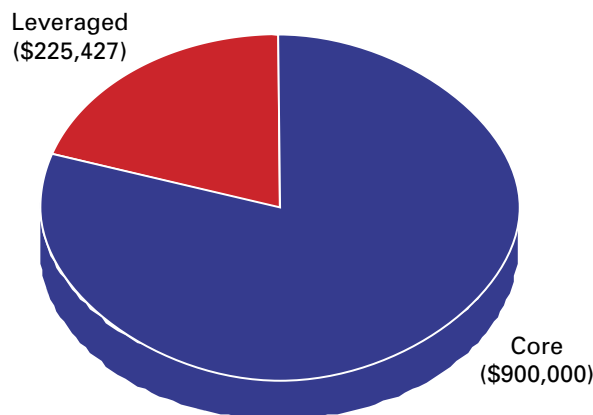
Because of its expertise and credibility to Latino communities, the Latino Health Initiative leveraged an additional \$225,427 from private and public entities.

FY06 Funds Leveraged by the LHI

Funding Source	Amount
George Washington University Mammovan	\$55,000
Montgomery County Latino Cancer Survey (Maryland Department of Health and Mental Hygiene)	\$44,024
Cancer Prevention and Control Program (Cigarette Restitution Funds)	\$40,120
Health Promoters Program, Vías de La Salud (Montgomery County)	\$34,000
Nurses Pilot Program (Montgomery Works One Stop Workforce Center & Holy Cross Hospital)	\$28,087
Asthma Management Pilot Program (Maryland Department of Health & Mental Hygiene)	\$20,000
Minority Outreach and Technical Assistance (Cigarette Restitution Funds)	\$4,196
TOTAL	\$225,427

In FY06, the Latino Health Initiative’s grand total budget was \$1,125,427.

LHI Total Budget: Core vs. Leveraged \$



ACKNOWLEDGEMENTS

We thank our constituents, donors, and partners for assuring a successful Fiscal Year 2006.

Serving Latino communities in Montgomery County continues to be a united effort of public and private sector groups and resources. Accomplishments over our six year history are clearly the results of these partnerships and collaborations.

We acknowledge all those who have been vital contributors to the productive past of the Latino Health Initiative, as well as those who will continue as critical enablers of an effective and meaningful Latino Health Initiative future.

Special thanks are due to the Montgomery County Department of Health and Human Services and the Latino Health Steering Committee. We received essential leadership from the Montgomery County Council, including Mr. George Leventhal, Council President, and from Mr. Doug Duncan, former County Executive, and look forward to the vision of the new Montgomery County Executive, Mr. Ike Leggett, over the coming year.

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