2011-2012 Legacy Projects

The grantees for the final round of the Legacy Projects (LP) have been selected and is currently underway. Each LP will receive $20,000 to implement their projects. The funded projects are as follows:

**Columbia College**

Will build upon the success of the "29203-Community Empowerment Coalition to Prevent Diabetes Complications" LP funded for the 2010-2011 cycle that brought together a diverse group of community partners to address the impact of obesity, hypertension, nutrition, and other factors which lead to type 2 Diabetes, in the Eau Claire community of Richland County, SC with the addition of **Actions 2 Win** Program. They will train community members to take ownership, develop and deliver each aspect of the project --walking programs and recreational activities, community gardens and nutritional programs and to share the results of these programs with other communities in the Columbia Metro Area.

**North Carolina Public Health Foundation**

The 2009-2010 LP "**Project DIRECT Legacy for Men**" in Hyde County, NC and will include the following new interventions:

1) Develop collaborative relationships with local and regional health and service agencies, 2) Conduct Chronic Disease Self-Management Program (CDSMP) and Diabetes Self-Management Program (DSMP) workshops in two of the surrounding four counties (Beaufort, Dare, Tyrrell, Washington), 3) Provide new training to Outreach Workers on cardiovascular disease risks, symptoms and
treatment, 4) Collect data on blood pressure, weight, and height and waist circumference for interested and consenting participants, and 5) Collect pre and post self-efficacy levels for CDSMP and DSMP workshop participants.

Elizabeth City State University

Will expand their 2010-2011 LP - Faith Leaders for Health Living with the Steps of Faith: a patient and family focused diabetes intervention and peer education program in Pasquotank County, NC. Steps of Faith will facilitate and increase the probability of enduring lifestyle modifications and behavioral changes by using a strategy that will filter through conventional options to identify and describe suitably specific diabetes prevention and management intervention action plan for each participant. The program will prepare participants to become peer and family educators and lifestyle change facilitators and will consider various personal and family elements such as family size, demographics, income, community and personal resources when attempting to develop participants-specific action plans as these important elements are believed to be potent modifiers of successful adoption and implementation of any behavioral and lifestyle changing intervention strategies.

Caffee, Caffee and Associates PHF, Inc

The "Mississippi Achieving Health Equity" (MAHE) will build upon the funding from their Mississippi REHDAI (Racial and Ethnic Health Disparities Action Institute) Project and will increase diabetes awareness, prevention and control in African American churches in North and South Mississippi with the implementation the American Diabetes Association’s Project Power training modules (Fit for the Master’s Use, O’ Taste and See, A Clean Heart, Train up a Child, and Living with Diabetes session). MAHE will enroll six churches to participate through public service announcements, word of mouth, and flyers. Interested churches must meet five criteria to participate in the program: 1) have the support of the Pastor and church leadership, 2) participate in all project components and evaluation for the duration of the project (at least one year), 3) designate an Ambassador/Co-Ambassador to coordinate the activities, 4) enroll at least 10 participants from the church and surrounding community, and 5) follow-up regularly with MAHE on the outcomes of their activities.

Once the churches have been enrolled, the selected Ambassadors at each church will be trained to implement the POWER Project, and to plan and facilitate the workshops. MAHE and partners will work with the Ambassadors to develop and order necessary materials (including a pre-test and intake form) and evaluation forms that are culturally appropriate for the participants (i.e. seniors, gestational diabetics, middle-age, youth, etc).
Elizabeth City ministers offer help fighting diabetes
By Jeff Hampton
Published ©December 12, 2011 in The Virginian Pilot

Some 35 people wearing sweats and T-shirts shook their stuff to blasting, beating music Dec. 4 with Pastor Larry Brown and his wife in the lead, sweating along with the rest. Each Sunday, about an hour after the worshipping ends at Faith & Victory Christian Center, the workouts begin. The program is a way for Larry and Gloria Brown to help their congregation improve their chances of avoiding the disease.

The incidence of diagnosed adult diabetes is 13.4 percent among blacks, compared with 6.4 percent among whites, according to a 2006 national study from the Centers for Disease Control and Prevention. By far, Southeastern states have the highest occurrence - including northeastern North Carolina and parts of southeastern Virginia, according to CDC maps.

But few blacks volunteer for clinical studies on diabetes, and in general blacks are not heeding warnings about the disease, said Dr. Anthony Emekalam, an assistant professor of pharmacy at Elizabeth City State University. "Why?" Emekalam asked. "Studies show that African Americans do not trust the health care system. Who do they trust? You'll find that they trust their pastors. How about using pastors as a channel to reach them?" Reasons for the mistrust go back generations, to a time when blacks were sometimes the subjects of medical experiments, he said.

Last year, Emekalam received a $27,000 grant from the Medical University of South Carolina, paid for by the CDC. He is getting another $20,000 grant this year. Ministers who become part of his program receive training in diet, exercise and blood screening, among other things. They lead the effort, not Emekalam, the professor said. Members get reminders in the church bulletin - and from the pulpit, as well. Church socials feature less fatty foods and more vegetables.

"This has been an eye-opener," Brown said. "They have shown me so much." Tyrone Heckstall, 50, was a borderline diabetic with high blood pressure when he heard Brown speak on the threat of diabetes. He went to his doctor, cut back on pies and potato salad, ate more vegetables and began working out, including attending the dance/exercise sessions at church. Heckstall said he lost 45 pounds and no longer needs to take blood pressure pills.

“I feel great,” he said, sweat dripping from his forehead from a recent Sunday workout. “As a church family, we’ve got to look out for each other.”

Shortly after the vigorous warm-ups, Pastor Lin Bennett from New Calvary Missionary Baptist Church arrived to lead the group in a professional workout. Bennett also leads workout sessions at the YMCA. In minutes, different music rocked from the large speakers as Bennett called out moves.

Most participants were middle-age and many were overweight, but they pushed themselves through, smiling through the grunts. "You’ve got to have fun with it,” Brown said, puffing.

Emekalam is seeking another grant for 2012 and plans to recruit a few more ministers to the effort.

"You don’t have to move a mountain,” Emekalam said. "We can’t expect to erase it overnight."

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The REACH Office will be closed Dec. 21st thru Jan. 2nd

We will reopen Tuesday, January 3, 2012
Save the Date

THE 10th ANNUAL DIABETES/HEART DISEASE & STROKE WINTER SYMPOSIUM

EVIDENCE-BASED MANAGEMENT:
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(803) 545-4487  frostss@dhec.sc.gov

**This Symposium is intended for Health Care Professionals and Community Leaders**
“Diabesity” as Francine R. Kaufman M.D of the Los Angeles children hospital calls it, is becoming the 21st century’s black plague. The term is a combination of the words obesity and diabetes. African Americans have the highest incidences of obesity among most races. Increased obesity rates bring increased diabetes rates. If the African American community could gain control of the obesity epidemic we may be able to prevent other diseases.

Eating is one of life’s greatest pleasures. The taste, smell, the texture and how it makes us feel can be a great source of satisfaction for us all. However, this very thing that is so pleasurable can be a danger to us if not kept in its proper place. We can enjoy food but the primary job for food is to nourish our bodies. When we don’t have the right balance of foods and don’t have adequate exercise we end up with “obesity”. With proper diet and exercise we can avoid obesity and the complications associated with it.

One of the most effective strategies in solving this overweight and obesity epidemic in the African-American community is for us to begin to understand not only how the community perceives (values, beliefs, and attitudes) overweight and obesity but also how to develop interventions from the community’s “cultural” base of orientation to the issues of food choice, overweight, obesity, health, and fitness. By investigating these two key issues, it will allow us to better educate and demonstrate the direct connection between food choices and obesity.

A few key things to focus on in preventing obesity are to exercise regularly. According to the American Sports Medicine College, it is recommended that a minimum of 30 minutes of physical activity be performed every day. By increasing your physical activity one can lower their chances of developing several chronic diseases and prolong life. It is also important to supplement exercise with healthy snacks and food. This can be difficult especially in the African American community because of the “soul food” tradition. Soul food is normally high in fat, sugar, and salt that contribute to weight gain and high blood pressure. It is vital that when looking for healthy foods to eat, one chooses a variety of fruits and vegetables to get the correct amount of nutrients and balance. The most important step in preventing obesity is to be consistent. If one is consistently exercising and eating a healthy balanced diet then they will see results in their health and their overall well being.

Obesity in the African American community is a completely preventable disease. It is up to the community and us to encourage African-Americans to pursue healthier lifestyles. With planning, African-American families can begin passing down the traditions of family fitness and health, rather than obesity and preventable diseases.

Lenise Bennett is a Physical Education major with a concentration on Health Promotions and a minor in Biology at the College of Charleston. She is currently working as a volunteer for REACH where one of her projects is to develop an obesity prevention program for staff.
New Promotion

Harlyn Hardin

On September 1, 2011, Harlyn Hardin, 2009-2010 Legacy Project recipient and former Director of Programs for Nashville, Memphis, and Louisville, Tennessee at the American Diabetes Association (ADA) was promoted to Director of Program Implementation and Outreach of Mid Markets East and West of the ADA. She has been with the ADA for ten years where her responsibilities have included raising diabetes awareness in racial and ethnic minority and underserved communities, developing and sustaining community partnerships, organizing local planning groups and committees, securing funds through grants and corporate donations, and coordinating diabetes awareness programs in churches and communities. In her new position, she will guide and enhance efforts to further implement important community programs across the country.

Stop Slow Go

For the second year, The Charleston Trident Urban League in partnership with REACH, has developed a youth-oriented bus banner for Diabetes Awareness month in November. The banner was developed with assistance from a summer participant in the Urban League’s Youth Leadership Development Institute. The Institute provides leadership development, job shadowing, and employment opportunities for about 50 youths ages 14 to 19 in Charleston, Berkeley, and Dorchester Counties and 400 youth statewide.

The campaign is set to run through January 2012 and will be followed up with a Play Date project to promote physical activity among youth in the Charleston area.
Good 4 You Recipes

Pecan-Crusted Chicken


Nutritional Facts: 1 chicken breast half equals Calories 214, Protein 24g, Carbohydrates 5g, Fiber 1g, Cholesterol 63mg, Total fat 10g, Saturated 2g, Sodium 252mg.

Diabetic Exchanges: 3 lean meat, 1-1/2 fat

Ingredients

- 8 boneless skinless chicken breast halves (partially flattened)
- 1/2 cup finely chopped pecans
- 2 tablespoons sesame seeds
- 1/4 cup low fat milk
- 1/2 cup all-purpose flour
- 2 tablespoons canola oil
- 1-1/2 teaspoons paprika
- 1 teaspoon salt
- 1-1/2 teaspoons pepper

Instructions

- Place milk in a shallow bowl. In another shallow bowl, combine the flour, pecans, sesame seeds, paprika, pepper and salt. Dip chicken in milk, then coat in flour mixture.
- In a large nonstick skillet, brown chicken in oil on both sides. Transfer to a 15-in. x 10-in. x 1-in. baking pan coated with cooking spray. Bake, uncovered, at 350° for 15-20 minutes or until no longer pink.

Cook’s Tip

Do not overcook and it will be super moist and juicy. If cooking for one or two people, save the pecan flour mixture for a later day.

Recipe published April/May 2008, p. 66
New Location for Partners Meeting
Until further notice, we will hold all meetings (in our building) in Harborview Office Towers - Suite 910. Please RSVP for the next meeting so that we can reserve parking with MUSC Parking Management.

Harborview Office Towers
19 Hagood Avenue, Suite 910
Charleston, SC 29425

Parking is Free for 90 minutes

The Harborview Office Towers is located behind the Spring Street McDonalds

ABOUT US:
SEA-CEED (the Southeastern African American Center of Excellence in the Elimination of Disparities in Diabetes) is funded by the Racial Ethnic Approaches to Community Health across the United States (REACH U.S.) grant from the Centers for Disease Control and Prevention (CDC) to decrease disparities for African Americans at risk for and with diabetes.

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