

**Md. Jalal Uddin**  
**Data 698: Project Proposal**

**Project Proposal:** Preventing Chronic Disease of South Asian Community through Engagement with Community and Faith-Based Organizations in New York City.

South Asian Community in New York City experience an enormous burden from certain chronic diseases, such as cardiovascular disease (CVD), hypertension, and diabetes. Specific South Asian subgroups also report poor nutritional practices, further elevating CVD risk. Studies have demonstrated low medication adherence in some of those subgroups, a critical component of diabetes and hypertension management. Each of these risk factors is further exacerbated by barriers to accessing culturally and linguistically appropriate care and tailored health information for the South Asian Community in New York City.

With support from the Centers for Disease Control, various community partners (United Sikhs, DREAM Coalition, Korean Community Services, and Kalusugan Coalition) and 12 faith-based organizations provided support to increase access to healthy food and beverage options and deliver culturally and linguistically appropriate health coaching for management and prevention of high blood pressure in Asian American communities. As part of this effort, an evidence-based program developed by the NYC Department of Health and Mental Hygiene, to screen, monitor, and provide counseling to people with high blood pressure. This program has been implemented in 120 faith-based, and community-based settings across New York City, but previously had not been adapted for or implemented in South Asian communities in New York City. The program has also provided culturally tailored and disseminated materials on hypertension and nutrition created by the New York City Department of Health and Mental Hygiene and the Centers for Disease Control Million Hearts initiative and distributed these materials in a variety of community venues such as health care settings, grocery stores, restaurants, and faith-based and community-based organizations.

Evidence shows that promoting systematic and sustainable linkages to culturally and linguistically tailored community and clinically based resources and improve access to environments supporting nutrition in communities' plays vital role to develop diabetes and hypertension prevention and management. For this purpose, I will engage mosques, social service agencies, and community-based primary care practice setting in Brooklyn, Bronx, Manhattan, and Queens Neighborhoods with substantial concentrations of South Asian Community to improve cardiovascular risk factors including obesity, hypertension control, and diabetes management and promote healthy eating.

For this purpose, I will contact CSAAH (Center for the study of Asian American Health) under the department of population health at NYU School of Medicine. CSAAH is working with 20 community-based primary care practice setting patients and with four faith-based organization to prevent, manage and control patient's diabetes and hypertension. All 20 community-based primary care practice setting and four religious organization are located in Brooklyn, Bronx, Manhattan, and Queens. The community-based primary care practice setting has more than 2000 hypertensive, and diabetes patients and more than 3000 congregants' members come during Friday prayer at all four-faith based organization. CSAAH involved with them since May 2015 and has been providing the following services. (1) Conduct culturally appropriate health education workshops on hypertension management with South Asian participants (2) implementing nutritional strategies, including education and changes to common food practices; and (3) provide individual counseling and support (4) assist participants with goal setting and lifestyle changes. Specifically, CSAAH is helping to improve blood pressure control and manage diabetes by promoting healthy eating using those approaches.

My project goal is to see providing support and resources on culturally and linguistically tailored education and also providing educational classes and material on nutrition plays any impact to prevent and control diabetes and hypertension management to the community and faith-based organization. I will collect the participant's baseline, midpoint, and endpoint survey to do statistical analysis to prove that culturally appropriate education workshop, individual counseling and support, goal setting and lifestyle changes

have a very positive impact on controlling and managing hypertension and diabetes. I will complete my analysis and research based on Python, SAS, SPSS and R statistical software.