



AFRICAN  
COMMUNITY  
HEALTH  
INITIATIVES

ANNUAL REPORT

2011

## *Building A Healthy Community*

Health care reform is high on the agenda for global health and the African Community Health Initiatives (ACHI) has been at the forefront in the community, eliminating health disparities experienced by African immigrants in Massachusetts. Despite profound changes in the number of people without health insurance in Massachusetts (dropping to only 2%) and the fact that HIV/AIDS is no longer among the top ten conditions for which people of African origin are hospitalized in Massachusetts<sup>1</sup>, the basic health issues in the African communities have not changed significantly from what they were in 2006, when the nonprofit ACHI started its bid to connect African immigrants to health and social services.

ACHI has made many strides in establishing cooperative agreements with area health and social service providers, increasing awareness of available health programs, and connecting people to care in the Massachusetts communities with high concentration of African immigrants. In fact, the number of people ACHI assisted in obtaining health and social services grew from fifteen (15) people per month in 2006 to more than one thousand (1,000) people per month in 2011. Similarly, the number of encounters per month increased in geometric progression to more than two thousand (2,000). Our efforts were hailed by the Commonwealth of Massachusetts Senate, the Governor, and the Secretary of the Executive Office of Health and Human Services, who together with one of our partners, Health Care For All, issued commendations for ACHI. From clients' testimonies, it is obvious that our efforts have been effective in achieving concrete results.

Our success stories have spread throughout the communities with high concentrations of African immigrants and, as a result, increased the need for our services. In 2011, we saw an increase in the number of people who needed our help due to several factors including new arrivals from Africa and people who found themselves newly unemployed. Our response was a holistic approach, providing various types of help beyond the connection to health and medical care, including housing, food, and employment assistance, and we achieved all these on a shoestring budget.

We are acutely aware of the increasing demands on us and realize that our ability to try to meet the needs of the many who reach out to us depends wholly on the continuing support from our generous funders and committed contributors. ACHI is grateful to all who have helped us accomplish the results that follow and we look forward to your continuing support. We encourage those who have yet to get involved to please do so because daunting as the task may seem, it pales in comparison with the accomplishments.

Sincerely,

Anne Medinus, PhD  
Chairperson

---

<sup>1</sup> Massachusetts Division of Health Care Finance and Policy FY 2010 Hospital Discharge Data

## ***TOWARDS A HEALTHY COMMUNITY***

ACHI's mission is to support and improve the health of Africans living in Massachusetts by promoting access to quality culturally competent health and social services through education, research and community partnerships.

Towards the fulfillment of this mission, we implement two main programs, the Early Intervention program, through which we identify and assess the needs of clients and connect them to medical care and social services; and a Health Ambassador program, through which we connect clients who have chronic diseases to more resources in their communities and increase their ability to effectively manage their conditions. The following are various ways we implement these programs:

### **Community Partnership**

- Identify providers and facilities serving people from Africa and establish relationships with them to facilitate referral of African immigrants for services.
- Collaborate with health services providers, such as Whittier Street Health Center, Dotwell, Cambridge Health Alliance, and Boston Medical Center to provide education and screening for health problems, including cholesterol, anemia, diabetes, high blood pressure, vision problems, dental problems, hearing problems, HIV/AIDS, and immunization services through Health Fairs as part of the early intervention program. Also provide chronic disease management through the ambassador program.
- Collaborate with other service organizations such as the Boston Housing Authority, SNAP, and the Irish International Immigration Center to provide housing, food stamps, immigration advice and education.

### **Research**

- Research health issues facing African immigrants in Massachusetts. This involves conducting needs assessments on an on-going basis and conducting research on diseases plaguing Africans.
- Collaborate with other research organizations such as Tufts Medical School and Northeastern University, and promote the use of health data in appropriate ways, with a view of improving the health of the African community in Massachusetts.

### **Education**

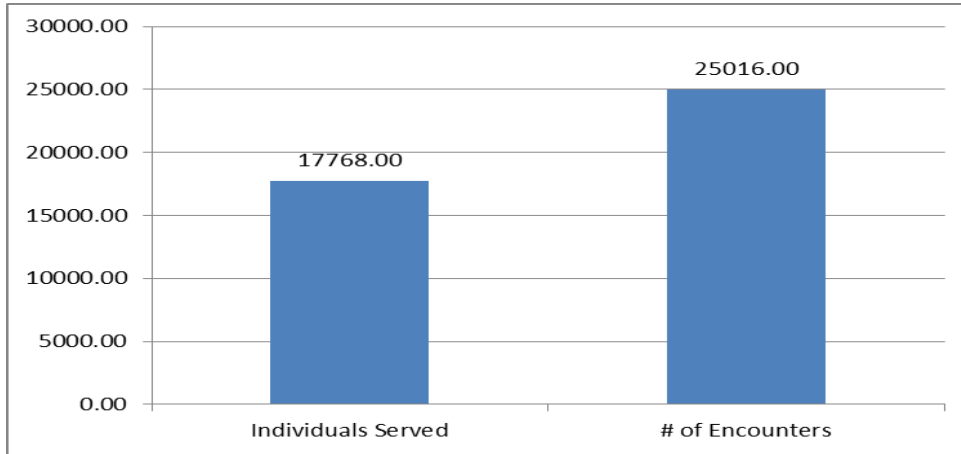
- Work with providers and institutions that serve people from Africa, such as the Boston Medical Center, to promote and improve cultural competence – a major component of both the early intervention and the health ambassador programs.
- Develop and implement innovative and culturally appropriate ways to encourage people from Africa to access and utilize health services in a timely manner.

### **Outreach**

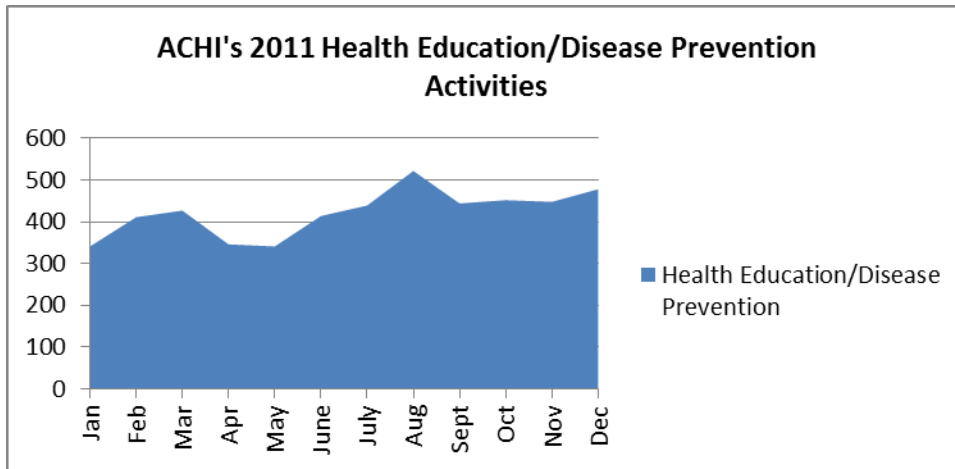
- Assist people who are uninsured to enroll in MassHealth and Commonwealth Care programs through the state's virtual gateway.
- Get involved in activities and events organized by groups and providers working with the African community, both as a way of evaluating their suitability to be part of the referral network, and as a way of facilitating greater contact between ACHI members and the community ACHI serves.
- Reach out to African immigrants, including those with Limited English Proficiency (LEP), determine their health and social services needs, break down the various barriers to enable them to receive the services they need, and refer them to the appropriate health and social service centers near their homes.
- Participate in African community activities and events to directly provide health education and screening services that are driven by epidemiological and other data.

### 2011 Contacts At A Glance

Through outreach, referrals and participation in community events, we made several contacts as shown below:



ACHI in collaboration with other health service providers, provided education and screening for health problems such as cholesterol, anemia, diabetes, high blood pressure, vision problems, dental problems, hearing problems, HIV/AIDS, and immunization services through Health Fairs as part of the early intervention program. In 2011, these activities peaked in the summer.

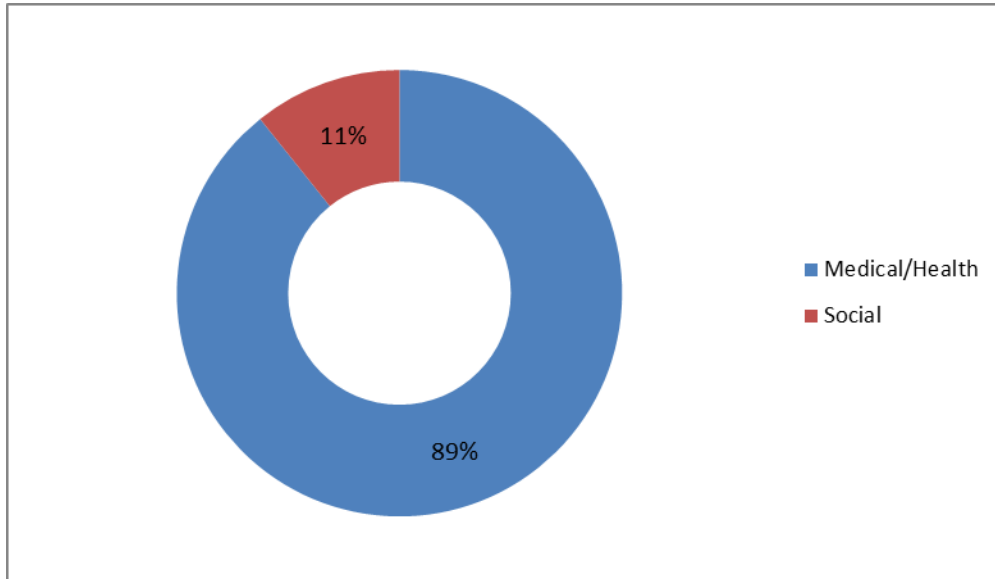


We participated in African Community activities and events to directly provide health education and screening services driven by epidemiological data while respectful of the needs of the African community in Massachusetts. ACHI provided chronic disease management through the ambassador program.

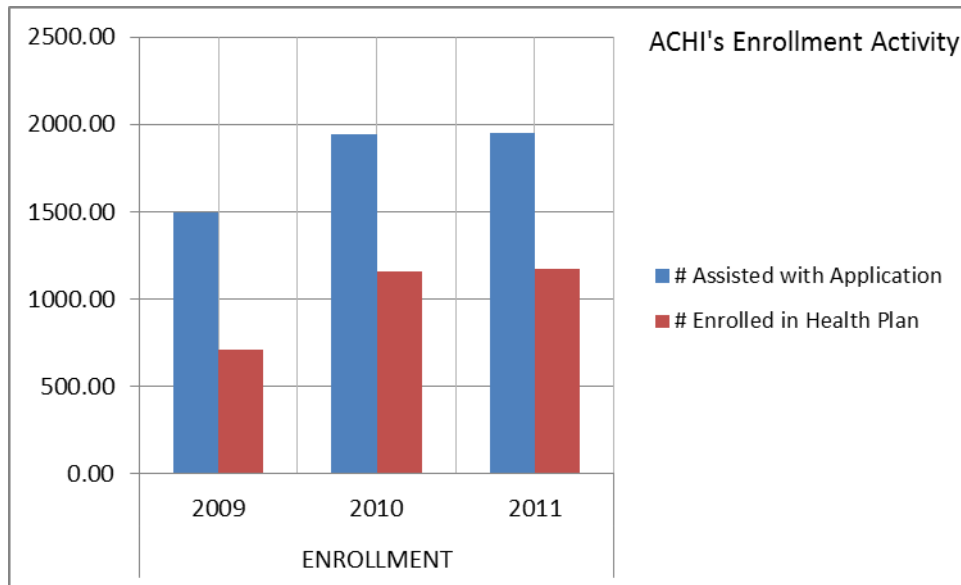
In collaboration with other service organizations, ACHI provided housing, food stamps, immigration advice and education.

**Services to Clients in 2011**

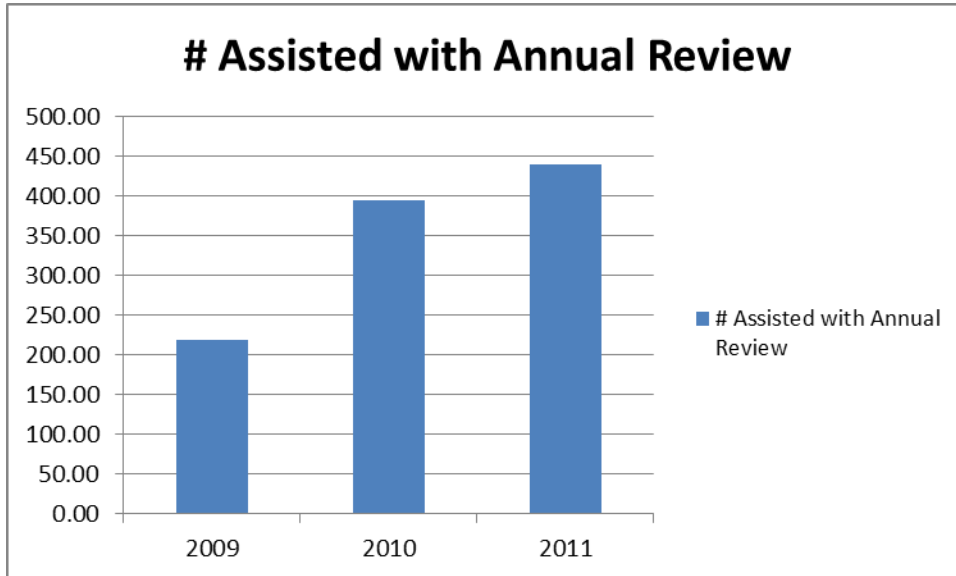
ACHI provided mostly medical/ health-related services.



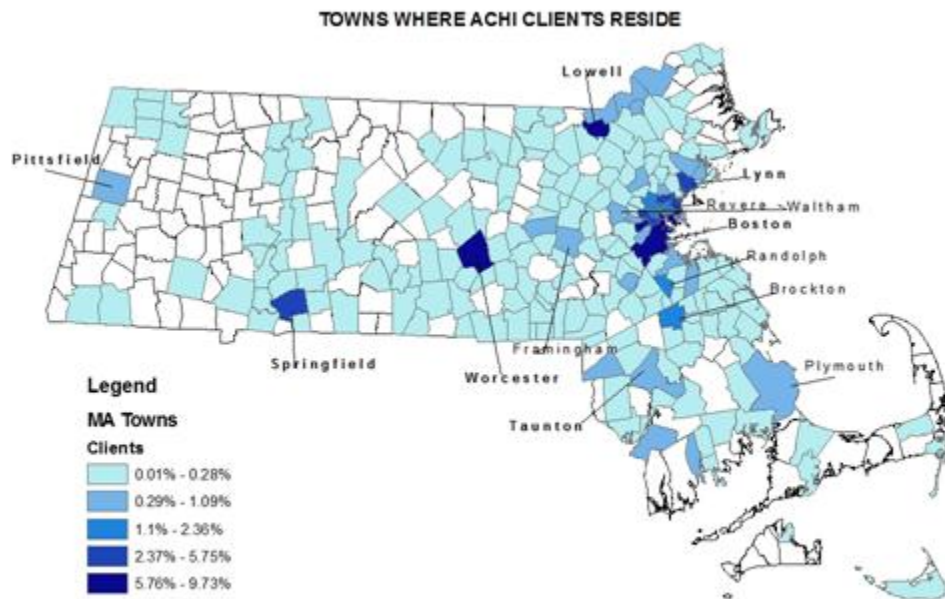
ACHI assisted people who were uninsured to enroll in MassHealth and Commonwealth Care programs through the state's virtual gateway. The number of people helped grew significantly, from the years 2009 to 2011.



We also ensured that those we helped to enroll in health plans maintained coverage through the annual reviews. The number of people helped to maintain coverage also grew from the years 2009 to 2011.



The scope of ACHI's activities is statewide as can be seen in the map below:



## ***Testimonials from clients of ACHI***

Lidwine Mapaga of Gabon said: “I called ACHI when I needed them to assist me. I was pregnant. When I had my baby, I called them and they sent one of them to assist me. They were with me in the hospital. They came to my house, they helped me with MassHealth. Every time I had a letter from MassHealth or the hospital they were always there to help show me how to fill out the forms..... I can recommend ACHI to anyone.”

Michael Mugume from Uganda said: “Well, I think ACHI has helped the less privileged people to be able to afford some of the basic medical insurance coverage costs and services that they would not have been able to attain on their own. I had a minor surgery under my arm in Lowell General. After sometime, I got a bill from the hospital and ACHI took care of the whole process so that I did not have to pay.”

Kwasi Kwaa, whose relationship with ACHI was set in motion when both he and his brother were in urgent need of oral health services and ACHI’s Program Director, Sr. Elizabeth accompanied both Kwasi and his brother to the office of Dr. Joseph Norr, one of ACHI’s health care partners and they received dental services on a pro-bono basis. He says: “ACHI helped me a lot because I had a lot of dental issues and if it wasn’t for ACHI, I wouldn’t have gotten any services. I visited Dr. Norr and he’s been able to help me out a lot...I don’t have any dental issues because he helped me out with that problem...The ACHI program has been a big help...Not having insurance in general is a scary thing, but enrolling into Health Safety Net has relieved many of my financial burdens.”

Mary Nimely, a 76 year old energetically recalls sister Elizabeth of ACHI: “She helps me to stay in contact with the hospital and get my medication from the pharmacy. She carried me to the hospital for my surgery. She is always standing by me, anything I want, she gets it for me, and anywhere I want to go, she carries me.”

Temitope Ojo of Mount Holyoke College who majors in Bio-chemistry and minors in Anthropology, said: “As an intern, I got a taste of performing a daily routine of administrative tasks. I was entrusted with important projects and responsibilities; this boosted my confidence in my professional abilities. During my time at ACHI, I got an interesting glimpse into the area of health advocacy, especially over the state health re-form. It was unsettling to know how easily some of our clients could lose basic health services. Working with ACHI was phenomenal! The vision of ACHI to create a healthier African community in Massachusetts is attainable and noble.”

***ACHI's outreach, research, health education and prevention, and enrollment activities were greatly enhanced by our collaboration with the following PARTNERS:***

---

*Action for Boston Community Development (ABCD), Boston City Mayor's Office, Boston Housing Authority, Boston Medical Center, Boston Public Health Commission, Brockton Neighborhood Health Center, Cambridge Health Alliance, Cathedral Cares, Catholic Charities, Dotwell (collaboration of Dorchester House Multi-Service Center & Codman Square Health Center), Global Africa Independent Network (GAIN TV), Health Care For All, Irish International Immigration Center, Lowell Community Health Center, Lynn Community Health Center, Mass General Hospital-Chelsea, Neighborhood Health Plan, Dr. Joseph Norr (Dentist), Northeastern University's Project Health Moves, SNAP Program, South Africa Partners, Tufts University School of Medicine's Sharewood Project, United Nations Association of Greater, Boston, Whittier Street Health Center.*

---

### ***Board of Directors***

Anne Medinus, PhD  
Chairperson

Wilner Borgella, Esq  
Treasurer

Georgina Waweru  
Secretary

Getachew Habte-Yimer,  
MA

Salamatu Mambula, PhD

Tony Amoah, MA

Abiodun Shobowale, MA

Teye Adusu, DVM

### ***2011 Staff***

Elizabeth Metebaghafoh  
Program Director

Daniel Abire, Health  
System Navigator

Joseph Adetowubo, Health  
System Navigator

### ***2011 Interns***

Dr. Temitope Akinmejiwa  
Danielle Joyce  
Nonye Brown-West



***African Community Health  
Initiatives, Inc.***

*Statement of Operations Fiscal  
year Ended June 30, 2011\**

<b>Revenue</b>	<b>Dollars \$</b>
Grants and contracts	71,210
Total Revenue	71,210
<b>Expenses</b>	
Payroll & related expenses	46,272
Payroll Expenses	1,666
Accounting	1,500
Contracts	24,821
Insurance	1,319
Bank Charges	1,981
Communication & outreach	1,135
Office supplies and expenses	3,030
Conference and meeting	2,200
Transportation	560
Telephone	4,614
Postage	254
License & permit	200
Depreciation	635
Total Expenses	90,188
Decrease in net assets	(18,978)
Net assets, beginning of year	42,939
Net assets, end of year	23,961

**Please note that the above financial information is for Fiscal Year 2011 (July 1, 2010 to June 30, 2011), while the annual report is for Calendar Year 2011 (1/1/ 2011 to 12/ 31/ 2011).**

***GRANTS AND DONATIONS***

ACHI has been sponsored by both organizations and individuals through grants and donations that are highly appreciated.

GRANTS

Up to \$50,000:

Commonwealth of Massachusetts Office of Medicaid

\$25,000 and more:

Blue Cross Blue Shield of Massachusetts Foundation

DONATIONS

Mrs. Marylou Rizzo

Ms. Ruth Hines

Ms. Beverly R. Johnston

Representative Jim Cantwell

Mr. Thomas P. O'Neill, III

Ms. Kim N. Smith

Past Year's Donors

Ms. Loretta Okoye

Ms. Lisa Montuori-Trimble

Ms. Ruth Hines

Ms. Alma Morrison

Mr. James Oyedele

**Office space provided by Whittier Street Health Center**

*Thank you*

---

*African Community Health Initiatives, Inc.*

---

P.O. Box 120094, Boston, MA 02112

Tel: 617 989 3034 [achi\\_org@yahoo.com](mailto:achi_org@yahoo.com)

[www.AfricanCommunityHealthInitiatives.org](http://www.AfricanCommunityHealthInitiatives.org)