The Barbershop/Salon Health Outreach Program

More than just a hair cut!

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Eliminating Health Disparities Through Partnering With Families and Individuals
Webinar
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Disclosure

• Dr. Terri Richardson

• Dr. Richardson has no financial relationship with any manufacturer of pharmaceuticals, medical devices, or any other commercial medical products or services.
About Colorado Black Health Collaborative (CBHC)

A 501 C-3 organization that is committed to improving health and wellness in Colorado’s Black, African and African American communities. Founded in 2008.

Mission: To achieve health equity in Colorado’s Black community

Colorado Black Health Collaborative
"Help me and let me help you."
Learning Objectives

• To gain knowledge about an excellent mode of community outreach and service

• To learn about African American/Black health disparities as it relates to hypertension and diabetes

• To understand the benefits of starting a Barbershop/salon outreach program

• To learn how to start a healthful barbershop/salon program
Where Our Program Started
The Program

• **The Seed:** Dr. Conner, a CBHC member, heard about the model at an NMA convention in Dallas in 2008 and then started a program at his own barbershop in 2009

• Colorado Black Collaborative HAC suggested **partnership** to expand and enhance program

• **Created other partnerships:** AACE, AHA, ADA, and more

• **Volunteers:** Medical and non-medical

• CBHC Implemented the program, **February 2012**
Road to Improved Health

Represents an unparalleled opportunity to impact the health of our community.
The Why

- Excessive and premature cardiovascular death and disability exist among African Americans (AA)
- Need to eliminate CVD and stroke disparities
- AA men - 70% less likely to visit a doctor compared with women
- Victor, et al estimate that extending health care interventions to all of the approximately 18,000 Black barbershops in the U.S. could result in 800 fewer heart attacks, 550 fewer strokes, and 900 fewer deaths among African American men in the first year alone

Blood Pressure - African Americans

• Since the 1930’s, AA adults have higher blood pressure values than white adults
• Studies have shown that AA children at all ages have higher BP levels
• AA girls in particular, have significantly higher SBP than age matched white children starting before the age of 10 *

*Bogalusa Heart Study
HTN in African Americans

- AA have higher rates
- Earlier onset, more aggressive, more severe organ damage
- Higher risk of CKD and ESRD than whites
- Much greater risk of cardiovascular mortality
- AA men have the highest disability and death rates from high blood pressure, cardiovascular disease and diabetes than any other group
Challenges to HTN Control

• There are at least 4 components to the challenge of HTN control:
  – Access to care
  – Physician management
  – Patient adherence
  – Hypertension severity or physiological difference in response to treatment

David Satcher, MD, PhD

Diabetes and African Americans

• African American adults are **twice** as likely than non-Hispanic white adults to have been diagnosed with diabetes by a physician

• African American men were **2.7 times** as likely to start treatment for end-stage renal disease related to diabetes, as compared to non-Hispanic white men

• Diabetic African American **1.7 times** as likely as diabetic Whites to be hospitalized

• African Americans were **2.2 times** as likely as non-Hispanic Whites to die from diabetes
USPSTF Recommendations

• HTN
  – Grade: “A” Screening (To be offered as a priority)
  – High blood pressure (hypertension) is usually defined in adults as: systolic blood pressure (SBP) of 140 mm Hg or higher, or diastolic blood pressure (DBP) of 90 mm Hg or higher.

• Diabetes
  – Grade: B Screening (A priority screening)
  – Asymptomatic adults with sustained blood pressure greater than 135/80 mm Hg
  – Asymptomatic adults with sustained blood pressure 135/80 mm Hg or lower (No recommendation)
• The AA barbershop/salon are amazing cultural institutions!
• The barbershop, variously described as - “cultural thrift store of services and information, “AA men’s country club”, a man’s space, a gathering place, a safe house
• Barbershops/salons build on aspects of Black culture -communalism, oral tradition, verve, and movement
Place Matters

• Barbershops/salons (They may be combined) are effective locations for community based health interventions, health outreach

• Vehicles for health promotion

• **Focusing health outreach efforts in places outside the traditional clinical and community settings has shown promise in helping to reduce disparities**
Consider Demographics

- Metro Denver—11%
- Detroit—84.3%
- Baltimore—65.1%
- Memphis—64.1%
- New Orleans—61.2%
- Atlanta—54%

- Even larger potential impact considering the percentage of Black population
“By linking community health promotion to the healthcare system, this program could serve as a new model for HTN control and cardiovascular risk reduction in African American men on a nationwide scale.”

CBHC Barbershop/Salon Program

• The process:

  ✓ Free services
  ✓ 1-2 shops per session, 4 hour blocks
  ✓ 1-3 medical professionals, 1-2 non-medical volunteers
  ✓ Set up portable stations in the shop in a convenient location
  ✓ Screen and log results: logsheets, metric card
  ✓ Handouts, and giveaways if available (pedometers, bags etc.)
Community Partnerships

• The Colorado Black Health Collaborative
• Park Hill Seventh-day Adventist Church
• The American Diabetes Association
• The American Heart Association
• Kaiser Permanente African American Center of Excellence
• The Center For African American Health
• The Inner City Health Center
• Zion Baptist Church
• Regis University
$$ Costs$$

- Can cost pennies to millions depending on what you are trying to achieve and services rendered
- **Low cost efforts** - all volunteers, no paid staff, basic screening, education, referral, and in-kind support
- Potentially cost saving - early identification of high blood pressure and diabetes-- before complications occur
Blood Pressure Station Set-up
Glucose Station Set-up
Just a Prick of the Finger
Results to Date
Since February 2012- December 13, 2014

• 15 barbershops/salons
• Trained over 50 volunteers to date
• Logged 2,046 volunteer hours
• Screened and educated 2,258 participants
• Referred about 50 uninsured to safety net clinics
• Established service learning partnership with Regis University
• Volunteers from University of Colorado Nursing and medical programs.
• **Power Saturday**, 2014- 7 shops concurrently
PEARLS

• Partnerships/collaborations are important
• In-kind resources are essential
• Volunteers are priceless
• The community really appreciates and connects
• Shop owners - stylist and barbers are great advocates
• You can run a basic program with minimal funding, but to maximize the output and capture outcomes, $$ is needed
“This is great stuff. We are happy to be a part of this program as it so exemplifies the value of culturally appropriate outreach, access and early intervention for prevention of things that matter in health care. I just saw a new patient this week that you guys connected to care with uncontrolled hypertension and diabetes. He was so appreciative of the ability to gain access to care.”

Dr. Bob Cutillo, Inner City Health Clinic
Barbershop/Salon Toolkit!

Coming soon! Early 2015
Thanks for Visiting the Shop!

For more information

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