This document is a report on the HSS Asian Community Bone Health Initiative (ACBHI) and its outcomes from 2018. The program's interventions are informed by evidence-based/promising practices in bringing the use of adult learning theories into the Health in Adolescents program. The program's core objectives include:

- Enhancing sexual decision making and communication with partners and health care practitioners.
- Decreasing musculoskeletal pain, stiffness, fatigue, and falls.
- Improving balance and health-related behaviors.
- Providing free or low-cost access to high-quality education and information.
- Enhancing bone health in underserved communities who traditionally lack access to such resources.
- Serving children living in underserved communities.
- Assisting with pilot testing of the final survey.

The program's outcomes were measured through various methods, including:

- Percent of participants who decreased average screen time.
- Number of participants that attended exercise lectures.
- Number of male patients with SLE who report knowledge of SLE, including diagnosis, treatment, and management.
- Number of males with SLE who participate in the Health in Adolescents program.
- Cross marketing efforts.
- Program challenges encountered in 2018.
- Language barrier at Mott Street Senior Center.
- Program challenges encountered in 2019.
- Program challenges encountered in 2020.
- Program challenges encountered in 2021.

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In 2018, we initiated partnership with Neighborhood Association, Carter Burden Foundation, COHME, Charles B Wang Neighborhood Association, and Manhattan Hospital and Asian Health and Social Nurse Service of New York. Their roles include: recruiting participants in the community to attend educational sessions; marketing educational lectures and programs; promoting educational materials; providing venue and related logistics for lectures; providing media capture of Community Education Institute; and digital format (Informational) evaluations (Informational).

The results below highlight the impact of the Community Task Force:

• The Annual VOICES 60+ Holiday Educational Event will occur in December 2018
• Hosted the LANtern's Annual Luncheon for 51 Asian lupus patients and families
• Expanded LANtern's geographic reach to the Asian communities outside of Manhattan: 3
• Conducted three professional education programs in collaboration with community partners
• Sustained relationships with four existing partners to continue program collaborations
• Conducted four focus groups reaching 28 participants
• Facilitated 12 support and education programs reaching 150 participants
• Promoting of educational programs to target underserved older adults living in the community. The program's reach to diverse Asian ethnic groups in NYC.

The main program challenge experienced in 2018 was internal and external leadership changes which has allowed us to develop new educational sessions, expand the program's geographic reach in NYC, and promotion channels significantly enhanced beyond Chinese to other Asian ethnic populations. This was done through increased partnerships with local community organizations and collaboration with new local and national professional organizations.

Outcome Measures:

• The Chronic Disease Self-Management Program - The chronic disease self-management program is designed to improve health outcomes in people with chronic conditions. It was conducted at the Hospital for Special Surgery and the local community settings. The program focuses on strategies for managing chronic conditions and improving health outcomes.

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The results below highlight the impact of the NCEOP:

• Increased knowledge, and self-management skills
• Participant satisfaction
• Number of participants that attended educational programs
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The results below highlight the impact of the community education programs:

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<table>
<thead>
<tr>
<th>Strategy</th>
<th>Description</th>
<th>Materials/Activities</th>
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<tr>
<td>1. Increase awareness of pain and stress from low-income population</td>
<td>Increase participants awareness of pain and stress</td>
<td>• Phone delivered mindfulness training • Yoga and meditation workshops • Educational workshops on chronic disease management techniques</td>
<td>• % of participants who report increased self-efficacy to managing pain and stress; During each of the next three years, the following outcome measures will be assessed: % of participants who demonstrate knowledge/material comprehension about pain and stress management techniques</td>
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<td>2. Increase knowledge of pain-management and coping strategies around managing pain and stress</td>
<td>Increase knowledge of pain-management and coping techniques such as yoga, meditation and exercise.</td>
<td>• Increased mindfulness • Increased relaxation • Improved state of mind • Increased calmness • Improved adherence</td>
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The results below highlight major themes identified during the debrief session:

- 100% of participants reported that the techniques helped to manage their stress.
- 96% of participants reported that the techniques helped to manage their pain.
- 35.9% of participants reported using the techniques 5 or more times in place of medication.
- 90% of participants reported increased self-efficacy to manage pain and stress.
- 96% of participants reported increased knowledge/material comprehension about pain and stress management techniques.
- 97% of participants were satisfied with the program.

The results below highlight the impact of the PSM series:

- 42 conference calls on mindful breathing techniques, reaching 120 community members.
- Seven mind-body workshops at the Rheumatology Clinic, reaching 14 participants
- Seven educational workshops, reaching 59 community members.
- One educational lecture, reaching 17 community members.

In 2018, the Pain and Stress Management (PSM) Series implemented:

- Combining the monthly meditation workshops in both the orthopedic and rheumatology clinics allowed us to increase the frequency of the program.
- Program attendance and retention among patients. We addressed this by adding workshops in the rheumatology clinic in lieu of increasing weekly conference calls.
- Participant recruitment. We decided to expand the projected conference calls. After assessing the needs of our patients, we decided to expand the program by increasing on-site in person workshops in lieu of monthly conference calls.
- Program challenges encountered in 2018 included:
  - Program structure affected program implementation, thereby reducing the number of on-site workshops.
  - Change in program structure affected program delivery, which negatively impacted program attendance and retention among patients.
  - Participant recruitment. We addressed this by adding workshops in the rheumatology clinic in lieu of monthly conference calls.
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In 2018, we initiated internal partnerships with the hospital’s Ambulatory Care Center, Rheumatology Clinic and the Department of Rheumatology and Social Work to develop educational programming, location to host meditation workshops, and facilitate participant recruitment.

Our partnerships with the hospital’s Ambulatory Care Center (ACC) and the HSS’ Ambulatory Care Center, Rheumatology Clinic and the Department of Rheumatology and Social Work provided us with subject matter experts. These partnerships provided expert guidance and information exchange for implementing educational programs. Additionally, our partnerships with the hospital’s Ambulatory Care Center (ACC) and the HSS’ Ambulatory Care Center, Rheumatology Clinic and the Department of Rheumatology and Social Work allowed us to increase the frequency of the program.

We also implemented text message reminders as an opportunity to attend workshops frequently (i.e. at least once a month) and improve attendance and retention among patients. We also added workshops in the rheumatology clinic which provided participants the opportunity to attend workshops frequently (i.e. at least once a month) and improve attendance and retention among patients.

In addition, community settings and management in both clinical and chronic disease preventive care environments, including Adult Learning Theory, will allow for increased mindfulness and anxiety levels in patients with stress, pain and anxiety symptoms.

In addition, the program also utilizes principles based on the Adult Learning Theory. For instance, the PSM series, which is comprised of self-directed learning, adult learning, and experiential learning, and the use of interactive media, such as videos and audio-visual aids, can be effective in improving mindfulness and anxiety levels in patients with chronic pain and anxiety symptoms.

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