Asian American Health Initiative

Conference Proceedings

Asian American Health Conference

Conference Date: 5.20.09

2009 ASIAN AMERICAN HEALTH CONFERENCE

A Time for Change

Transforming Opportunities into Action

contents

2 Acknowledgements

3 Executive Summary

5 Introduction

6 2009 Asian American Health Conference Overview

8 Agenda at a Glance

9 Conference Planning Process

10 Detailed Retrospective Session Summaries

30 Conference Highlights

32 Exhibitors

35 Annotated Evaluation

39 Analysis & Recommendations

46 Future Directions

52 Conclusion

acknowledgements

The Asian American Health Initiative (AAHI) would like to thank the Department of Health & Human Services of Montgomery County, Honorable Isiah Leggett (*Montgomery County Executive*), and members of the Montgomery County Council—Uma Ahluwalia (*Director, Montgomery County Department of Health & Human Services*), Betty Lam (*Chief, Office of Community Affairs*)— as well as the AAHI Steering Committee for their continued support. AAHI would also like to acknowledge the Conference Planning Advisory Group for providing guidance and directions in developing the Conference agenda and program.

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executive summary

The 2009 Asian American Health Conference, hosted by the Asian American Health Initiative (AAHI), was held on May 20, 2009 in Gaithersburg, MD, convening public health experts and practitioners in Montgomery County, the state of Maryland, and across the United States to explore the Conference theme: **A Time for Change–Transforming opportunities into action**. This gathering was meant to build off the momentum created by AAHI's 2006 Asian American Health Conference (**Commitment to Change- Exploring Health Disparities in the Asian American Community**) and recommendations from its community health needs assessment report (**Asian American Health Priorities: Strengths, Needs, and Opportunities for Action**). In addition to an expert array of conceptual and substantive presentations related to Asian American health, the 2009 Asian American Health Conference also facilitated AAHI's strategic planning process in defining its long-term strategic targets and future directions to explore or pursue for the betterment of the health of its constituent Asian American population.

Over 300 public health professionals, including health professionals, medical care providers, community health advocates, health educators, researchers, policymakers, grant makers, as well as community leaders and partners gathered for the day-long event. The Conference began with recognition of Asian Pacific Islander Heritage Month and acknowledgement of Conference planners, supporters, and advocates. The substantive part of the Conference included context-

setting overview sessions followed by a set of breakout sessions elucidating themes generated by the community health needs assessment, and concluded with two critical synthesis sessions, which included an interactive forum with participants and selected speakers. By in large, most attendees found the Conference to be of high quality, contain useful content, and were overall satisfied with the breadth and depth of Conference activities. An informal networking session followed the major Conference events, in which more acknowledgements were presented and attendees were able to share experiences and potential arenas of collaborations.

Analysis of the Conference content (overview presentations, breakout sessions, and Conference synthesis discussions) found that AAHI had made significant progress on each of the recommendations generated by the community needs assessment: (i) Increasing Knowledge and Raising Awareness of Health Promotion; (ii) Expanding Access to Quality Health Care Services, (iii) Broadening Partnerships and Collaborations; and (iv) Enhancing Data Collection and Reporting. However, there were also areas identified in which AAHI could make improvements toward accomplishing each of these recommended directions.

In addition, the Conference generated other suggestions that were not identified by the community health needs assessment. Areas where AAHI may expand or improve its efforts include more policy advocacy activities, dissemination of organization information to a wider and more diverse audience, more opportunities for professional development, and diversifying its own funding portfolio. All in all, the input, feedback, and recommendations generated by the Conference provided invaluable information which AAHI may be able to incorporate into its organizational activities to meet the specific health needs of the Asian American population in Montgomery County.

The 2009 Asian American Health Conference served as a pivotal event in AAHI's evolution as a leader organization in addressing and eliminating Asian American health disparities. The Conference provided a rich source of content, discourse, and feedback that AAHI can utilize—in conjunction with findings from the 2006 Conference and the community health needs assessment—to define feasible and prioritized targets in context of an overarching long-term strategic planning effort.

introduction

The purpose of these Conference Proceedings is to provide a comprehensive report on the 2009 Asian American Health Conference presented by the Asian American Health Initiative (AAHI) in Montgomery County, Maryland. Given the current public health discourse on health care reform and emphasis on eliminating health disparities, coupled with the relative lack of attention placed on the health of Asian Americans, AAHI's effort to convene a national audience of public health professionals came at a timely juncture towards creating an Asian American health agenda.

These Proceedings are divided into three sections. The first is a description, summary, and evaluation of the 2009 Asian American Health Conference, including a Conference overview and agenda, planning process, detailed session summaries, and an annotated summary of participant evaluations. This is followed by a section analyzing the content of the 2009 Asian American Health Conference (including placing the role of the Conference in context of AAHI's larger strategic planning process) and presenting findings and recommendations based on the recommendation outlined in its community health needs assessment, **Asian American Health Priorities: Strengths, Needs, and Opportunities for Action**. The final section discusses future directions that AAHI (as well as other Asian American health advocates) may want to explore or pursue in its larger strategic planning efforts, based on the current progress it has made thus far in its research, program planning, community outreach, and collaborative activities.

AAHI hopes that these Proceedings are useful for a diverse array of public health professionals committed to addressing issues of concern impacting Asian American communities and, ultimately, facilitate a working knowledge of AAHI's efforts to eliminate health disparities in this rapidly-growing yet understudied racial/ethnic minority population.

2009 asian american health conference overview

The Asian American community is growing rapidly and encompasses a wealth of cultures, religions, languages, and perspectives. Within these strengths lie the community's greatest challenge–securing culturally and linguistically competent health care that encompasses the diversity of Asian American populations and tackling debilitating health disparities. The Asian American Health Initiative (AAHI) identifies the health care needs of Asian American communities, develops culturally competent health care services and educational materials, and implements health programs that are accessible and available to all Asian Americans in Montgomery County.

At its 2006 Asian American Health Conference, AAHI explored the health disparities that permeate the Asian community and expressed its commitment to change. During this gathering, AAHI underscored the importance of health needs of the Asian American community being thrust to the forefront of the discourse on disparities, from the individual homes to health care settings to the community.

As part of this effort, in 2008, AAHI released the community health needs assessment, **Asian American Health Priorities: Strengths, Needs, and Opportunities for Action**. Based on analysis of study findings and four years' experience with serving the Asian American population of Montgomery County, AAHI embarked on a comprehensive strategic planning process to guide program development over the next five years. The community health needs assessment identified four major recommendations, encouraging AAHI to focus on both consolidating and enhancing AAHI's current programs and expanding AAHI programs to encompass new issues and reach new portions of the population.

To follow-up with this seminal report, AAHI convened the 2009 Asian American Health Conference, a powerful, one-day gathering of an expert group of researchers, leaders, and innovators underscoring the rationale and means to achieve health parity. Each major Conference theme was developed out of extensive discussion and analysis of community health needs assessment findings, and further explored during the overview panels, breakout sessions, and critical synthesis discussions during the 2009 Asian American Health Conference.

2009 asian american health conference overview

Over 300 participants, including health professionals, medical care providers, community health advocates, health educators, researchers, policymakers, grant makers, as well as community leaders and partners, gathered at the Hilton Hotel in Gaithersburg, MD on May 20, 2009 for a day of inspiring presentations and thought-provoking discussions. Attendees represented health organizations, academic institutions, advocacy groups, governmental entities, and community-based organizations interested in and committed to Asian American health issues from all across the United States.

The Conference began with a cultural performance embodying a celebration of national Asian Pacific Islander Heritage Month. This was followed by welcoming remarks by representatives of AAHI leadership as well as officials from the state of Maryland and Montgomery County. These organizational partners and stakeholders emphasized the importance of the 2009 Asian American Health Conference. This was followed by a substantive set of keynote and plenary presentations articulating the current health and political climate for health reform, the importance of utilizing various methods of assessment to accurately gauge Asian American community health assets and needs, and concluded with a current assessment of health status of Asian Americans nationally and in Montgomery County. The morning session culminated in a luncheon detailing the epidemiology and treatment options for addressing Hepatitis B among Asian Americans. The afternoon session was organized into breakout sessions underscoring the four major themes of the Conference. To ensure that valuable information was available to the broadest range of attendees, all presentations constituting each breakout session were conducted twice. The Conference themes were defined as follows:

Theme I: **Increasing Knowledge and Raising Awareness of Health Promotion**
Theme II: **Expanding Access to Quality Health Care Services**
Theme III: **Broadening Partnerships and Collaborations**
Theme IV: **Enhancing Data Collection and Reporting**

The 2009 Asian American Health Conference concluded with a presentation of future actions that may be used as a guide by diverse stakeholders as a result of the day's content, followed by an interactive panel allowing attendees to pose questions relevant to their organizations, populations of interest, and/or geographic constituencies. A final recognition of and gratitude towards all participants completed the Conference's substantive activities. However, Conference attendees were able to continue networking and sharing resources during an evening reception.

AGENDA AT A GLANCE

7:30 am	Registration and Continental Breakfast
8:30 am	Conference Opening
9:00 am	Welcoming Remarks
9:30 am	Keynote Address
10:10 am	Presentation: Assuring the Health of Asian Americans, Native Hawaiians, and Pacific Islanders
10:30 am	*Morning Break*
10:45 am	Plenary Session: Assessing the Needs and Guiding the Future
Noon	*Luncheon*
1:00 pm	Breakout Session 1
2:15 pm	Breakout Session 2
3:15 pm	*Afternoon Break*
3:30 pm	Call to Action
4:00 pm	Interactive Forum: "Together to Build a Healthy Community"
4:30 pm	Closing Remarks
5:00 pm	Networking Reception

conference planning process

detailed retrospective session summaries

Welcoming Remarks

9:00am–9:30am

This section summarizes the content and recommended future directions for taking action presented and discussed during the 2009 Asian American Health Conference. Summaries are organized by the various sessions comprising the Conference agenda.

Julie Bawa, MPH
Program Manager
Asian American Health Initiative

After calling the Conference to order, representatives of AAHI began the day by welcoming attendees to the day's events. Specifically, Ms. Bawa placed the Conference in context of AAHI's overall objectives and commented on its significant milestones thus far, including its inception in 2005 to enable the elimination of health disparities among Asian Americans in Montgomery County, the expansion of programmatic activities to achieve these goals, the initiation of a national discourse on Asian American health via its 2006 Asian American Health Conference and its 2008 needs assessment report, as well as AAHI's current strategic planning efforts to enhance and expand its current efforts, in collaboration with community and government partners. She elaborated on the importance of this Conference as a springboard to begin translating research into action and ended her remarks by thanking all Conference organizers, supporters, sponsors, and attendees.

Harry Kwon, PhD, MPH, CHES
Chair, Steering Committee
Asian American Health Initiative

Dr. Kwon echoed Ms. Bawa's sentiments of gratitude and elaborated on the Conference's agenda, including the rationale, objectives, and activities intended to facilitate the implementation of data findings into practical applications of reducing and eliminating disparities among Asian American populations locally, statewide, and across the United States. Dr. Kwon expressed his hope that the Conference would empower communities to take action on the health problems faced by Asian American communities on issues concerning health promotion, disease prevention, health access, partnerships and collaboration, and data collection. He concluded by calling on participants to remember Helen Keller's words - "Alone we can do so little; together we can do so much."

detailed retrospective session summaries

Following these opening remarks, a number of supporters from state and local government expressed their support and gratitude for AAHI's current success, future work, as well as planning and implementation of the 2009 Asian American Health Conference

Isiah "Ike" Leggett
Mongomery County Executive

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Director
Montgomery County Department of Health and Human Services

Carlessia Hussein
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Duchy Trachtenburg
Councilmember
Montgomery County Council

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AAHI was presented with three official commendations citing its commitment to achieve health and parity among Asian American populations in Montgomery County and the state of Maryland. They were delivered from the Delegate's Office from Legislative District 16 of Maryland, the Montgomery County Executive's Office, and from the Office of the Governor of Maryland.

Be it hereby known to all that sincerest congratulations are offered to the Asian American Health Initiative in recognition of addressing and identifying the health care needs of the Asian American community. AAHI's efforts to eliminate health disparities among vulnerable populations is an affirmation of their commitment to health parity.

Delegate Susan Lee (MD Legislative District 16)

The County Executive of Montgomery County, Maryland awards this certificate to Asian American Health Initiative (AAHI) in recognition and appreciation of your strong commitment to reducing health disparities and the widespread barriers that prevent Asian Americans from accessing quality health care services. We recognize AAHI's contributions to providing culturally and linguistically competent health care services and education programs as a vital component to the strength and character of Montgomery County.

Executive Isiah Leggett (Montgomery County)

Be it known: That on behalf of the citizens of this state, in recognition of a special tribute to honor the Asian American Health Initiative for its commitment in addressing and identifying the health care needs of the Asian American Community… in appreciation of your efforts to eliminate health disparities among vulnerable populations; and as the people of Maryland join in expressing our deep appreciation for your positive contribution to our state, we are pleased to confer upon you this governor's citation.

Governor Martin O'Malley (State of Maryland)

detailed retrospective session summaries

Keynote Address

9:30am–10:10am

Arthur Chen, MD
Chief Medical Officer
Alameda Alliance for Health

The Conference began with a keynote address by Dr. Arthur Chen. This presentation was framed in the context of political change and civic engagement and the potential role of health professionals/advocates in improving minority health within that framework. Dr. Chen discussed the historical commitments of government entities to various priorities over time (such as the military budget) and elaborated how public health—despite its paramount importance—has been allocated marginal levels of fiscal and human resources. He also discussed the intimate and complex associations between income levels, immigration, lack of insurance, levels of incarceration, and basic indicators of health (including demographic disparities). Dr. Chen concluded his address by encouraging attendees to take advantage of the momentum sparked by the current discourse on comprehensive health reform and to advocate for inclusion of and equity for our most disadvantaged populations, including the Asian American communities.

Presentation 1: Assuring the Health of Asian Americans, Native Hawaiians and Pacific Islanders

10:10am–10:30am

Marguerite Ro, DrPH
Deputy Director
Asian & Pacific Islander American Health Forum (APIAHF)

Dr. Marguerite Ro gave a presentation articulating the current state of Asian American health. She delivered a summary of the most pertinent health disparities affecting Asian American communities, including trend data for subgroups (e.g. youth, socioeconomic status, citizenship status, linguistic proficiency) as well as in various ethnic enclaves around the United States. These details were followed by a strategic plan for addressing such inequities using a policy advocacy framework. Dr. Ro articulated her organization's priorities for effecting policy change, including guaranteed affordable health care, guaranteed access to high quality care, health equity, healthy communities, and increasing leadership, civic engagement, and political will. After detailing specific aspects of each domain, she concluded her remarks with specific activities that attendees could undertake, including contacting key presidential officials to voice their concerns regarding Asian American health.

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Plenary Sessions: Assessing the Needs and Guiding the Future | 10:45am–12:00pm

After setting the contextual stage for the Conference by the morning's featured speakers, a plenary session was assembled to elucidate how these considerations can be utilized for practical applications. As enhanced data collection is paramount to understanding and improving the health of Asian Americans, the plenary speakers elaborated on such attributes. These included innovative approaches to collect and utilize local data for agenda setting and how utilization of needs assessment findings describing Montgomery County's unique Asian American health profile can lead to approaches addressing community health concerns and unequal burden of disease among this population.

Importance of Health Needs Assessment Study

Rod Lew, MPH
Founding Executive Director
Asian Pacific Partners for Empowerment, Advocacy, and Leadership (APPEAL)

A comprehensive presentation of issues related to data collection and community health assessments was given by Mr. Rod Lew. He began his talk by discussing the current challenges for collecting reliable and practical data related to Asian American populations, including disaggregation of subgroup health indicators and having sufficient population numbers to ensure accurate information about the least represented communities. As opposed to a large, population-based sampling, Mr. Lew advocated for the use of community-level assessments, which has provided meaningful data about tobacco use among Asian Americans, a growing health concern in these communities. He described the various methods of community assessments (qualitative interviews, quantitative surveys, participant observation) which, triangulated with other data sources, provide a baseline of information from which practitioners can intervene at both the local and national level. Mr. Lew also offered an alternative paradigm for an ecological approach to evaluating "community stages of readiness" for health improvement. He argued that local applications of community-based participatory research can yield sources of information that facilitate action, as opposed to having to wait for the complicated (and often incomplete) results of more nationally-driven surveillance methods. In addition to illustrating how specific health initiatives, including policy, have been implemented using community assessments, Mr. Lew concluded with a call to expand traditional surveillance measures to encompass more inclusive definitions of data and evaluation and consider the role of empowerment in eliminating health disparities and improving community health.

Asian American Health Priorities: Strengths, Needs, and Opportunities for Action

Sunmin Lee, ScD
Assistant Professor
Department of Epidemiology & Biostatistics
University of Maryland
School of Public Health

Transitioning from a conceptual overview and national-level information, Dr. Sunmin Lee introduced the findings from AAHI's Health Needs Assessment of Asian Americans residing in Maryland. This analysis served as one of the foundations for the implementation of the Conference. Dr. Lee began her discussion by describing the demographic characteristics of Asian Americans in Maryland, including acknowledgement of the state's underrepresented ethnic communities (Burmese, Cambodian, Indonesian, Nepali, Pakistani, Taiwanese, and Thai). This profile served as the rationale for investigating various health indicators to distill subgroup differences regarding specific community needs, barriers to health care utilization, sources of stress, and preferences regarding culturally and linguistically appropriate care. Dr. Lee stressed the unique determinants of health for underrepresented groups in order to ensure that those needs are understood and addressed. She ended her analysis by providing recommendations for public health researchers, practitioners, and policymakers to encourage organizational and community partnerships as well as leverage limited resources to maximize data collection and program planning. Ultimately, these synchronized efforts would facilitate increased health knowledge, expand community involvement, and result in prevention of disease and promotion of well-being among Asian American communities.

detailed retrospective session summaries

Introduction to Chronic Hepatitis B for Health Care Professionals (Independent Presentation)

12:00 pm–1:00 pm

Richard C. Liu, MPH
Hepatitis B- Physicians & Patients Advocacy Liaison
Bristol-Myers Squibb

During a voluntary luncheon provided by Bristol-Myers Squibb, attendees were able to view the numerous Conference exhibits and were able to network with colleagues while eating. In addition, Mr. Richard C. Liu gave a presentation (independent of the 2009 Asian American Health Conference) focusing on disease-state education related to Hepatitis B disparities among Asian Americans as well as potential responses health professionals, social service professionals, faith leaders, and community representatives may utilize to combat them.

> **"Well organized, excellent presentation of materials, good subject matter. Keynote address was fantastic."**

detailed retrospective session summaries

Breakout Sessions

1:00 pm–2:00 pm (Session 1)
2:15 pm–3:15 pm (Session 2)

The afternoon began with four concurrent breakout sessions. Each session represented one of the major Conference themes, which originated from the strategic targets developed from AAHI's Needs Assessment. These breakout sessions consisted of expert presenters who were able to elucidate the definition of the designated theme. Through their professional experiences and capacities, each speaker offered practical applications of the designated theme among different Asian populations and various health issues throughout the United States. In recognition of the multifaceted nature of each theme, each breakout session was repeated twice to ensure that participants were able to take advantage of attending more than one session, which may have been of equal utility to them and their representative organizations, and not being forced to arbitrarily choose one over another. In this regard, the 2009 Asian American Health Conference was unique in responding to the appeal of multiple breakout sessions to a diverse array of attendees, as indicated during the registration process.

Theme I: Increasing Knowledge and Raising Awareness of Health Promotion

Lack of knowledge or awareness continues to exist regarding the diseases and conditions that disproportionately affect Asian Americans. Obtaining current and accurate information on the health risks affecting Asian Americans, and on available resources for health promotion, prevention of illness, and disease treatment, is critical. Furthermore, this information needs to be effectively disseminated to members of the Asian American community.

MODERATOR

Wendy Friar, RN, MS
Vice President
Community Health
Holy Cross Hospital

Henrietta Ho-Asjoe, MPS
Administrator and Director
Community Development
Center for the Study of Asian American Health (CSAAH)
New York University

Consistent with this theme's focus, Ms. Henrietta Ho-Asjoe presented a conceptual overview of health promotion. This was followed by specific illustrations of the topic in practice, such as her organization's efforts in capacity building, community action, delivery of health care services, and impact policy. The majority of Ms. Ho-Asjoe's presentation focused on the creation of a cardiovascular intervention among New York City's Chinese American population. Using a collaborative model, she detailed how social campaigns and media alliances raised awareness and facilitated the successful implementation of dietary and physical fitness interventions, in hopes of reducing the risk of heart disease among this Asian American subgroup.

detailed retrospective session summaries

Jing Zhang, PhD
Program Director
Community Health
Asian Human Services

Similarly, Dr. Jing Zhang provided four practical applications of increasing knowledge among the Asian American population in Illinois, after a brief description of the state's Asian demographic profile. Specifically, she discussed an osteoporosis program, an HIV awareness campaign, a tobacco cessation program, and a community-based needs assessment leading to the creation of a family health center. Each example illustrated how increased knowledge led to both individual and community-level changes which positively impacted the health of Asian Americans in Illinois.

Swaran Dhawan, AGSW, LCSW-C
Board Chair
Counselors Helping (South) Asian Indians, Inc. (CHAI)

Regarding raising awareness of stigmatized health conditions, Ms. Swaran Dhawan discussed issues of mental health and domestic violence impacting the South Asian community in the Baltimore/Washington, DC area. After a detailed summary of the definition and demographic characteristics of South Asian Americans, she highlighted the key mental health issues in this population, based on the types of referrals fielded by her organization (coupled with epidemiological data). She concluded her presentation by discussing how popular and ethnic media can not only stigmatize certain forms of identity and health conditions, but can also serve as a conduit for bringing "hidden" issues into the mainstream for acknowledgement and treatment. Ms. Dhawan added that support and discussion groups are also an effective means of increasing knowledge and dispelling myths, as demonstrated by a successful women's wellness group in the Baltimore/Washington, DC area.

Theme II: Expanding Access to Quality Health Care Services

Our health care delivery systems and the third payer reimbursement programs are complex. Seeking health care services, and obtaining reimbursement, can be a daunting task, especially for populations who are unaccustomed to the health care system and who may use professional health services primarily for acute care needs. Concerted efforts are needed to maximize access to existing health care and to ensure receipts of appropriate health care services. These efforts include minimizing barriers to care, providing access to culturally and linguistically appropriate resources, and enhancing health literacy.

MODERATOR

Marcos Pesquera, RPh, MPH
Executive Director
Center on Health Disparities
Adventist HealthCare Inc.

Deeanna Laurie Jang, JD
Policy Director
Asian & Pacific Islander American Health Forum (APIAHF)

Ms. Deeanna Jang introduced this theme by discussing her organization's priorities regarding expansion of health care coverage and provision of linguistically appropriate services. After detailing subgroup disparities of health care access by Asian American subgroup, immigration status, and insurance coverage, Ms. Jang articulated the need for qualified interpretive services, coupled with expanded access to uninsured communities. She also stressed the need for further data collection that might uncover other barriers to receiving quality care by Asian American subgroups. She ended her presentation by highlighting current policy initiatives which have increased access to care, such as the children's health insurance reauthorization, American Recovery & Reinvestment Act, and the President's budget prioritizing health care reform. Ms. Jang urged attendees to follow-up on specific opportunities which have the potential to expand access further by addressing certain disparities and create new service delivery organizations in areas with significant Asian American populations.

Amy Shek, MS
Site Administrator
Charles B. Wang Community Health Center

Describing an organizational approach to the designated theme, Ms. Amy Shek described the history and purpose of a federally-funded community health center aiming to increase access to health services for the Asian American community in New York City. After describing the demographic characteristics of Asian Americans in this metropolis, including the percentage of uninsured, Ms. Shek discussed how the delivery of free services in her organization aimed to address more glaring disparities among the Asian American community in New York City (including primary care, dental care, and programs for women and youth). In addition to service delivery, she articulated the role of health education in reducing the need for treatment for various health conditions. Moreover, she underscored the importance of a team-oriented approach to care delivery in expanding coverage of primary services and increased quality of both preventive and treatment options for the Asian American community.

Shahin Sebastian, MS
Program Manager
Patient Navigators Program
Cross Cultural Infotech

Ms. Shahin Sebastian discussed a programmatic approach to increasing the quality of care for Asian American populations in Montgomery County. After summarizing the objectives and description of her organization's multilingual health information and referral telephone line and trained multilingual medical interpretation program, she detailed how the design of these specific activities target certain issues regarding community knowledge of existing resources and ability to receive in-language services. In addition to providing important data, Ms. Sebastian detailed three case-studies which demonstrated the powerful impact of having "navigators" assist in care seeking, referrals, diagnosis, financial resolutions, and individual satisfaction. In addition, she underscored the importance of nesting such programs within culturally-valued entities (e.g. faith-based organizations, community centers, local clinics) so that these resources may be identified and accessed by Asian American community members who may need them most.

Theme III: Broadening Partnerships and Collaborations

There are many Asian community-based and faith-based organizations nationally that provide cultural insight and direct access to specific Asian American populations. Collaborating with these organizations is essential to engage in program planning and implementation efforts to meet the health education needs of these populations. These collaborations also serve to promote community empowerment and community-government partnerships, and thus provide valuable opportunities for addressing health disparities in the current environment of limited fiscal resources.

MODERATOR

David K. Lee, JD
Executive Director
Governor's Office on
Asian American Affairs

MODERATOR

Lily Qi, MBA, MA
Community Liaison
Montgomery County Office of
Community Partnerships

Arnab Mukherjea, DrPH(c), MPH
Chair of Scientific Programs
Asian Pacific Islander Caucus for Public Health (API Caucus)

Within the framework of identifying and leveraging partnerships at the local and national level, Mr. Arnab Mukherjea detailed the existence and evolution of the oldest national Asian American health organization in the United States. Specifically, he elaborated on the historical development of this organization, the role prominent Asian American health leaders have played within the organization, and current efforts geared toward strengthening existing partnerships and broadening collaborative efforts. In addition to describing how the Caucus has achieved many such objectives (recognition of emerging leaders, facilitating networking and development sessions, increased dissemination of data pertaining to Asian American health), Mr. Mukherjea discussed the need for committed individuals to be aware of Asian health research and initiatives outside of their geographic, population, and/or condition-specific silos. In concluding, he summarized current activities designed to continue increasing collaborations among Asian American health organizations/leaders and urged attendees to get involved in these efforts to ultimately improve community health prospects.

detailed retrospective session summaries

Jeffrey Caballero, MPH
Executive Director
Association of Asian Pacific Community Health Organizations (AAPCHO)

Mr. Caballero organized his comments around a health disparity of great concern among Asian American communities, Hepatitis B. After presenting the basic epidemiology of the condition as well as current efforts to combat rising rates, he discussed the evolution of a national taskforce which examined the unique distribution and advancement of Hepatitis B among Asians. Mr. Caballero described the specific components of the taskforce partnership, including the inclusion and role of federal entities, community-based organizations, and public health experts. After summarizing the structure and function of the collaboration, he concluded with current initiatives and activities in which attendees can be involved in reducing the rates of this disparity among Asians nationally and globally.

Noilyn Abesamis-Mendoza, MPH
Program Manager: Health Policy
Coalition for Asian American Children & Families (CACF)

Using a more grounded illustration, Ms. Noilyn Abesamis-Mendoza discussed two programs intended to increase collaborative efforts to improve Asian American health in New York City. She detailed the components of a community partnership grants program which not only strengthened community capacity, but also organized local groups to be able to leverage shared resources at the national level and contribute to a comprehensive health agenda for Asian Americans nationwide. Ms. Abesamis-Mendoza's second example summarized how the grantee in New York City created partnerships around increasing health access for local Asian American communities. She concluded her session by citing existing evaluations of the program and discussed the great potential for replicating this model nationally for addressing critical health issues of concern for Asian Americans.

Theme IV: Enhancing Data Collection and Reporting

Obtaining, analyzing, and monitoring health and related data on an ongoing basis is essential to provide an evidence base for making informed decisions about how best to direct available resources to meet the needs of Asian American populations. Data collection is also essential to allow health organizations and professionals to stay in the forefront of emerging health issues, and to tailor, evaluate, and monitor the progress of existing and new programs and initiatives. Routine data reporting heightens the visibility of important health issues of the Asian American community, and helps the public, health care providers, policy makers, and other stakeholders prioritize these issues in decision making.

MODERATOR

Paul Han, MD, MA, MPH
Former Vice Chair
Steering Committee
Asian American Health Initiative

Kenneth Chu, PhD
Branch Chief
Disparities Research Branch
Center to Reduce Cancer Health Disparities
National Cancer Institute (NCI)

Illustrating a grounded example of this theme, Dr. Kenneth Chu discussed the challenges in collecting data about specific cancers impacting various Asian American subgroups. He began by discussing the non-timely collection of data (every ten years) and the inability to analyze trend data given the lag between collection periods. By illustrating the use of local and regional datasets, Dr. Chu articulated how more regular collection of site-specific cancer data can inform intervention efforts to target cancer disparities among specific Asian subgroups before they become extreme. In addition, having enhanced measures of stages of diagnosis (as opposed to solely mortality data) would inform timely treatment options, as demonstrated by his discussion of colorectal cancer survival rates among Asian American subgroups. He concluded by stressing the need to triangulate various existing datasets to inform an agenda for Asian cancer control and prevention.

detailed retrospective session summaries

Beverly J. Quan Gor, EdD, RD, LD, CDE
Postdoctoral Fellow
Center for Research on Minority Health (CRMH)
Department of Health Disparities Research
University of Texas M.D. Anderson Cancer Center

Building off of the suggestion for utilizing local data, Dr. Beverly Gor began her discussion by presenting the unique demographic profile of Asian Americans in Houston. Given the lack of consistent and adequate data about Asian Americans in this population, she outlined the methodology of data collection, including sampling strategy, survey development and translation, and implementation in the field. After detailing differences between the local Houston and national Asian populations, she concluded with the unique lessons learned in implementing a population-based survey in local and understudied Asian American populations, such as outreach, choice of instrument(s), modes of surveillance, and analytical paradigms.

Ernest Moy, MD, MPH
Medical Officer
Center for Quality Improvement & Patient Safety
Agency for Healthcare Research & Quality (AHRQ)

Dr. Ernest Moy summarized the existing reports on disparities published by his government organization and delineated the similarities and differences between health quality and disparities. After presenting a comprehensive description and illustration of the multifaceted determinants of health disparities, Dr. Moy concluded by recommending how quality improvement indicators, provided by federal datasets and reports, can be used to support local communities and program planning for actions that may reduce and eliminate disparities among diverse populations, including Asian Americans.

Call to Action

3:30 pm–4:00 pm

Following the afternoon breakout sessions, attendees reconvened to hear a "Call to Action" by Mr. Gem Daus. The purpose of this presentation was to synthesize the day's content to provide insight on how to move forward in improving the health of Asian Americans in Montgomery County, the state of Maryland, and across the United States.

Gem Daus, MA
Adjunct Professor
Asian American Studies Program
University of Maryland

Mr. Daus began his comments by describing labels ascribed to Asian Americans, its historical underpinnings, and the potential benefits and consequences of this ascription. He reminded attendees that, although deemed a successful group, Asians are still considered minority members of the mainstream American community. As such, Mr. Daus stressed the need for ensuring that Asian perspectives and interests are represented in decision-making environments, including those pertaining to health. He cited instances—both positive and negative—in which voices representative of minority communities have made an impact on national, state, and local policy. Mr. Daus concluded his presentation by highlighting a local, timely, and relevant example of a successful collaborative effort to reverse budget cuts impacting minority health programs, including AAHI. Using this as inspiration, he urged attendees to work collaboratively to improve minority health, cooperating with partners in other ethnic groups and Asian communities across the state and country.

> **"It was very effective to have speakers present on both national level data as well as local level data. The moderator asked an excellent question to the panelists to determine what the reciprocal value of each had on one another."**

Arthur Chen, MD
Chief Medical Officer
Alameda Alliance for Health

Marguerite Ro, DrPH
Deputy Director
Asian & Pacific Islander American Health Forum (APIAHF)

Rod Lew, MPH
Founding Executive Director
Asian Pacific Partners for Empowerment, Advocacy, and Leadership (APPEAL)

Jeffrey Caballero, MPH
Executive Director
Association of Asian Pacific Community Health Organizations (AAPCHO)

Interactive Forum: Together to Build a Health Community

4:00 pm–4:30 pm

To complement the didactic Conference presentations, Dr. Art Chen, Dr. Marguerite Ro, Mr. Rod Lew, and Mr. Jeffrey Caballero were invited to field questions regarding the state of Asian American health, how to strengthen current efforts and initiatives, and areas of future exploration to ultimately improve the health of Asian Americans in Montgomery County, the state of Maryland, and in the United States.

The purpose of this interactive forum was to give agency to Conference participants through the medium of a moderated community dialogue, with the following four objectives:

- Integrate what was learned from the Conference proceedings into local, grassroots approaches
- Explore strategies in health promotion, health access, collaboration, and data collection that can be implemented on an organizational level
- Discuss how key stakeholders can facilitate the implementation of recommendations at national, state, and local levels

Audience members posing questions and/or comments included policymakers, program directors and managers, health advocates, researchers, health educators, public health students, government officials, and other community members/stakeholders.

A comprehensive analysis of this forum will be presented in the final section of the Conference Proceedings.

Closing Remarks

4:30 pm–5:00 pm

Paul Han, MD, MA, MPH
Former Vice Chair
Steering Committee
Asian American Health Initiative

At the conclusion of the Conference, Dr. Paul Han thanked all Conference organizers, speakers, and attendees for participating in a productive and inspiring event. Specific words of acknowledgement were given to AAHI staff in recognizing their incredible efforts in implementing such a tremendous and successful effort atop their organizational responsibilities. Dr. Han remarked that, as a newcomer to the Asian American health advocacy movement, he was awed by the substantial amount of expertise and knowledge that was shared in one setting. He concluded by detailing his own reflections of the day's activities and how he can expand his own personal journey to be involved and proactive, ultimately realizing that sustained change begins with dedicated and passionate advocates for positive change.

detailed retrospective session summaries

Networking Reception | Co-sponsored by the Asian Pacific Islander Caucus for Public Health

5:00 pm–7:00 pm

After the Conference ended, participants were invited to a Networking Reception to build upon the relationships initiated during the day's events. The purpose of this informal gathering was to initiate and expand professional networks in order to exchange ideas, detail relevant activities in progress, and discuss potential collaborative opportunities. AAHI staff members were recognized for accomplishing a successful Conference and a special acknowledgement (in the form of a plaque) was given to each AAHI Steering Committee member for their contributions in advising, assisting, and advocating for the elements that facilitated the Conference planning process. Ms. Julie Bawa received a special commendation for her tireless efforts, dedication, and commitment to ensure that AAHI remains a pivotal resource for improving health prospects of Asian Americans in Montgomery County and beyond. Upon expressing her gratitude for this recognition, she reflected on her own journey as a member of the Asian American community and her personal and professional experiences in interacting with the public health system. She concluded by expressing her pride with AAHI's progress thus far and the potential that the organization has to make a significant impact in eliminating Asian American health disparities, in conjunction with the communities to which it is committed. The formal remarks ended with Dr. Sam Mukherjee of AAHI's Steering Committee reflecting on the amazing evolution of AAHI from its inception, the incredible challenges of forming an identity, determining a philosophical and programmatic approach, and securing resources to accomplish its goals, as well as the specific successes and its previous and current endeavors. Dr. Mukherjee concluded the Conference with a passionate plea to attendees to keep supporting one another as individuals and organizations and to inspire others to join in a progressive public health movement that enables the elimination of health disparities among Asian Americans and minority populations in Montgomery County, the state of Maryland, and throughout the United States.

conference highlights

Honorable "Ike" Leggett and Marguerite Ro of APIAHF turn their attention to greetings from Conference hosts.

Dr. Arthur Chen takes part in a ritualistic feeding of the lion as part of Asian Pacific American Heritage Month.

Staff and volunteers prepare to welcome participants to the 2009 Asian American Health Conference.

Dr. Sunmin Lee shares the findings of the recent AAHI Needs Assessment Report with public health leaders and educators.

AAHI Steering Committee members receive recognition for contributions to the Asian American community.

conference highlights

Conference-goers listen attentively to the Interactive Forum.

Conference participants pose questions during the interactive forum "Together to Build a Healthy Community".

Networking reception provides opportunity to foster collaboration

Leaders in minority health take time to pose for a picture.

Conference participant peruses the Program Book.

Future leaders in public health discuss the day's events with an AAHI Steering Committee member and health promoter.

exhibitors

APIAHF
ASIAN & PACIFIC ISLANDER AMERICAN HEALTH FORUM
apiahf.org

Mona Bormet
mbormet@apiahf.org
1828 L St. NW, Suite 802
Washington, DC 20036
202.466.3770

AAHI shares multilingual health education materials with Conference participants.

APA LRC
apalrc.org

Pooja Regmi
pooja.regmi@apalrc.org
11141 Georgia Ave., Suite 515
Silver Spring, MD 20902
301.942.2223

Representatives from Montgomery and Prince George's County exchange ideas about local efforts.

apamsa.org

Shelly Choo
president@apamsa.org
1620 McElderry St., Reed Hall 6d2
Baltimore, MD 21205
443.415.1787

ASIAN PACIFIC ISLANDER CAUCUS
apicaucus.org

Arnab Mukherjea
program@apicaucus.org
PO Box 95
Berkeley, CA, 94701
510.397.0827

DHMH, Office of Minority Health and Health Disparities, supports local efforts to reach health equity among minority populations.

Maryland Insurance Administration

mdinsurance.state.md.us

James Mobley
jmobley@mdInsurance.state.md.us
525 St. Paul Place, Baltimore.
MD 21201
410.468.2024

Conference participants visit the hall of exhibitors outside the Conference ballroom.

Minority Health and Health Disparities
Maryland Department of Health and Mental Hygiene

mdhealthdisparities.org

Carlessia Hussein, RN, DrPH
healthdisparities@dhmh.state.md.us
201 West Preston St., Room 500,
Baltimore. MD 21201
410.767.7117

NIAMS representative Mimi Lising educates participants on causes, treatment, and prevention of arthritis.

montgomerycountymd.gov/hhs

Luis Martinez
luis.martinez@montgomerycountymd.gov
401 Hungerford Drive, 5th floor
Rockville, MD 20850
240.777.1864

Board Chair of Counselors Helping (South) Asians/Indians Inc. (CHAI) Swaran Dhawan reveals startling data on mental health, a taboo topic in many Asian communities.

NIAMS
National Institute of Arthritis and Musculoskeletal and Skin Diseases
NATIONAL INSTITUTES OF HEALTH

www.niams.nih.gov

Sara Rosario Wilson
srosario@mail.nih.gov
31 Center Drive, Building 31, Suite 4C02
Bethesda, MD 20892
301.496.8190

Suburban Hospital

suburbanhospital.org

Patricia Rios
prios@suburbanhospital.org
8600 Old Georgetown Rd.
Bethesda, MD 20814
301.896.2849

Patricia Rios of Suburban Hospital shares information about community outreach services with a Conference attendee.

PG County Health Department

fha.state.md.us/cancer/crf_cpest.cfm

Sherry Strother, RN
sastrother@co.pg.md.us
1801 McCormick Drive, Suite 260
Largo, MD 20774
301.883.3524

A County employee learns about services provided by SAMSHA (Substance Abuse & Mental Health Services Administration)

www.samhsa.gov

Trina Dutta
trina.dutta@samhsa.hhs.gov
1 Chock Cherry Rd, Suite 6-1076
Rockville, MD 20857
240.276.1944

U.S. Census Bureau

census.gov

Zhi Zhang
zhi.zhang@census.gov
1234 Market St., Suite 340
Philadelphia, PA 19107
301.968.5514

U.S. Census Bureau partners with AAHI to ensure Asian American participation in the 2010 census.

annotated evaluation

In summary, attendees stated they were overwhelmingly pleased with the overall content, format, and pace of the Conference. The speakers setting the context for the Conference were also received well. Similarly, the Conference's breakout sessions were evaluated positively, both in terms of meeting the objectives of each of the major Conference themes and caliber of speakers representing expertise in each of the breakout sessions.

The following tables summarize the evaluation of the overall Conference and its four major themes. For ease of interpretation, full evaluation survey questions follow each table.

	Overall Satisfaction	Speaker Satisfaction	Conference Material Satisfaction	Overall Format Satisfaction
Excellent	74%	71%	82%	71%
Good	24%	27%	18%	27%
Fair	2%	2%	0%	2%
Poor	0%	0%	0%	0%
Total	*100%*	*100%*	*100%*	*100%*

Overall Satisfaction: *Please rate your overall satisfaction with the Conference*
Speaker Satisfaction: *How satisfied were you with the speakers/presenters?*
Conference Material Satisfaction: *How satisfied were you with the Conference materials?*
Overall Format Satisfaction: *Please rate your overall satisfaction with the format of the Conference (morning sessions, breaks, luncheon, breakouts, etc).*

	Overall				Objective			
	Theme I	Theme II	Theme III	Theme IV	Theme I	Theme II	Theme III	Theme: IV
Excellent	57%	84%	68%	74%	50%	87%	46%	81%
Good	41%	16%	29%	26%	38%	13%	42%	19%
Fair	2%	0%	3%	0%	12%	0%	5%	0%
Poor	0%	0%	0%	0%	0%	0%	7%	0%
Total	*100%*	*100%*	*100%*	*100%*	*100%*	*100%*	*100%*	*100%*

Overall: *Please rate your overall satisfaction*
Overall Theme Satisfaction *For each theme, please rate the quality of the session you attended*
Theme Objective Satisfaction: *For each theme, please rate how effectively the presentations met the theme objective.*

Similarly, all breakout session speakers were received well by Conference attendees, both in terms of presentation quality and relevant content. To illustrate, at least **95% of all attendees rated each speaker as either "excellent" or "good",** with very few receiving any evaluations of "fair" or "poor".

annotated evaluation

Qualitatively, the attendees reported comments consistent with their quantitative evaluations. For instance, in response to what they liked best about the Conference (including reactions to the interactive forum and the Conference serving as a blueprint for transforming opportunities into action), the following quotes illustrate the various components of the event that they found successful

"Well organized, excellent presentation of materials, good subject matter. Keynote address was fantastic."

"The educational luncheon and round table set up. The presenters were 'reality' based. There was a good balance of research and application examples."

"Spiral booklet had almost all of the presentations in order by theme. Conference design/size was large enough to include national speakers and organizations but small enough to have an intimate feel. Thank you for lunch. It helped foster communication between participants."

"It was beneficial that it was free to register. Diversity of topics and session. The engaging, inspiring, approachable individuals present at Conference and speaking."

"(The interactive forum) got us to think about how we will take lessons learned from Conference back home to apply to our own settings; motivated/inspired to mobilize communities to partner with other communities of color to have voice & take action."

"Advocate (for) leaders within my organization; the importance of pursuing RFPs/grant requests that deal with diseases and health issues that impact Asian American populations."

"(The Conference served as a blueprint in that it provided) new and improved ways to reach out to the API community and being made aware of culturally sensitive information. P.S. Fantastic job everyone! I am so glad to come and look forward to the next!"

"The interactive forum reinforced my desire to assist in moving healthcare issues forward for all minority populations. All minority populations have common ground needing to be addressed to improve the health of all."

"Loving the questions and answers I heard in the Interactive forum. I would really take in the strategies suggested for specifically targeting at youth group."

There were also a number of positive reactions pertaining to the sharing of resources from different communities (locally and nationally), having many stakeholders and partnerships committed to Asian American health present at one venue for networking, and being able to access data and information about relevant health research, models, programs, and initiatives not available elsewhere.

annotated evaluation

Similar sentiments were conveyed regarding the utility and applicability of the content presented in the breakout sessions, which were designed to explore each Conference theme in-depth. For instance, individuals found specific aspects of each breakout session to be valuable or relevance of the specific theme useful for a variety of reasons, as demonstrated by the following comments

"(Most valuable was) the discussion and personal stories of people in our heterogeneous community and the different way in which we perceive our healthcare system. It helped to see the several community organizations that are sensitive to the Asian American & Pacific Islander community."

"I found that most people of all racial/ethnic groups will do better/have better health outcomes if the staff of the healthcare facility looks like, speaks like, and understands the culture of the patients. This needs to be incorporated into healthcare reform!"

"I really enjoyed Ms. Shek's personal story. It is the stories as hers that remind us of the barriers. This story has even more impact b/c she is educated and is a professional today. She has a deeper passion and understanding b/c of her experience as an uninsured teenager. "

"It was very effective to have speakers present on both national level data as well as local level data. The moderator asked an excellent question to the panelists to determine what the reciprocal value of each had on one another."

"Ms. Zhang's was most relevant, as this is a concern in my outreach work. I felt it was important for her to point out that Asian Americans are often perceived as owning businesses, having financial security, and pursuing higher education-but many are low income and this group is not recognized...etc."

"(The theme) explained how these models worked to coordinate the various health programs avail to uninsured/low income patients. Many times, it's assured that patients know how to navigate and obtain care."

"I am working as a summer intern at the Office of Minority Health and helping develop a new campaign called National Partnership for Action to End Health Disparities. Thus, I wanted to learn how partnerships have been forged within this community to better prepare ourselves to make partnerships with all minority communities, organizations, and federal agencies."

annotated evaluation

Despite the tremendous number of positive evaluations, there were certain aspects of the Conference that attendees felt could be improved. As with any major gathering, participants provided both substantive and logistical comments about such elements

Many local attendees were encouraged by how each Conference theme presented models of health research and program planning in other local communities and at the state and national level, which have components that are replicable in Montgomery County and elsewhere. In addition, participants found presentations that dealt with sharing of data that illustrated various disparities present among Asian subgroups in the United States and culturally-appropriate outreach to reach affected populations to be especially invaluable.

"I would like more tangible/doable examples of actions projects to start ideas for our local communities."

"Abstracts of presentations were not available ahead of the Conference in order to help determine which thematic breakouts to go to. Not enough breakout presentation time. Speakers in the breakouts I attended were cut short even though they were not long winded."

"Though the content was excellent, logistically more effort is needed in ensuring attendees are in their sessions promptly to reduce distractions, outside hallway noise that filters in the rooms, latecomers, etc."

"The interactive forum could have been longer. You can start a list serve of interested stakeholders so ideas can be exchanged and the dialogue continued after the Conference."

Some attendees expressed concern that certain political ideologies were espoused as fact or, at the very least, assumed to be agreed upon by a preponderance of audience members. The feedback associated with these sentiments underscored the need to objectively present information without political bias or, when needed, to provide a counterpoint to ensure a balance of viewpoints.

Despite some minor shortcomings, the overwhelming majority of attendees expressed tremendous satisfaction with the format, thematic framework, substantive presentations, and networking opportunities presented at the 2009 Asian American Health Conference. Equally as important was the general sentiment that lessons gleaned from the Conference could be applied to Asian populations in Montgomery County, other parts of Maryland, and across the United States.

Role of Conference

The 2009 Asian American Heath Conference provided an opportunity to share general information and network. AAHI paid special attention to the specific recommendations generated by the community health needs assessment by designating Conference themes highlighting experts who could substantively present on the substantive and practical aspects of each as well as models of "promising practices". These presentations, organized into Breakout Sessions, enabled AAHI representatives and stakeholders as well as Conference attendees to gain exposure and nuanced articulation of the context, significance, and application of these themes in real-world settings. Moreover, this convening was not simply a didactic presentation of health information relevant to Asian Americans, but concluded with a critical synthesis and discussion of these targets in context of progressing AAHI's five-year strategic goals.

The Conference utilized two avenues to explore how AAHI can further its efforts to make progress on its strategic targets and advance its strategic planning efforts. The first of these was "A Call to Action", in which the Conference was placed in a larger historical and social context. The second was an interactive forum in which participants were invited to comment on various thematic and practical components regarding Conference content and/or inquire about specific issues concerning them or their organizations. During the interactive forum, several Conference speakers were selected to respond to these audience remarks and questions. The discourse from these sessions was analyzed for specific content and insight related to critically defining AAHI's priority targets in context of informing AAHI's long-term strategic planning efforts. Rather than summarize these critical synthesis sessions chronologically, this section will analyze their content in context of AAHI's Conference themes and long-term strategic plan. Within the

framework of addressing Asian American health disparities, special emphasis will be placed on three overarching advisory domains:

- **How can AAHI make further progress on recommendations outlined in its community health needs assessment?**
- **What other directions/approaches can AAHI pursue?**
- **What role or initiatives can AAHI Conference participants undertake?**

Theme I: Increasing Knowledge and Raising Awareness of Health Promotion

AAHI has made significant progress in its efforts to achieve the objectives outlined in its first strategic target. These include a health education initiative incorporating outreach activities and media campaigns. More pragmatically, AAHI has adopted a "Health Promoters" program, which utilizes the knowledge and experience of community members to develop relationships with its constituency, liaise with community- and faith-based organizations, and reduce communication barriers related to language and culture. The sum of these health promotion activities is designed to reduce disparities related to hepatitis B, cancer, osteoporosis, diabetes, and tobacco. Future priorities include targeting disproportionate burdens of tuberculosis, mental health conditions, and lack of emergency preparedness among Asian Americans in Montgomery County.

Based on the respondent comments during the two critical synthesis sessions, a few topics arose for consideration in improving AAHI's progress with respect to this Conference theme. Firstly, AAHI needs to ensure that the organizational vernacular assumed by its leadership and staff —with respect to health conditions and program planning—are shared by stakeholders pursuing similar efforts across the state and around the country. Using standardized language facilitates the role of coalition-building and advocacy at the national level; therefore, it is imperative that AAHI program staff is aware of parallel initiatives in progress targeting Asians throughout the United States and utilize terminology commonly recognized by health professionals. On a related note, AAHI also needs to be sensitive to the unique needs and experiences articulated by Asian Americans in Montgomery County. Being able to understand

the perspective of community members is paramount to improving language access and cultural competency, two of AAHI's main organizational goals. In this regard, AAHI should acknowledge that community identification is not simply denoted by racial/ethnic background and other variables of commonality (e.g. neighborhood, generational status) may serve as an equal or improved method of generating community-based assessments. AAHI staff and stakeholders should also reflect on their own personal experiences as a foundation for understanding the complexities of community experiences.

On a more conceptual level, AAHI also should be cognizant of the role that media has played in shaping community knowledge, attitudes, and beliefs regarding health. As the portrayal of Asian Americans as a disadvantaged minority population has often been misconstrued (e.g. ascription of "model minority" status, lack of acknowledgement of institutional barriers to health services, assumption of passive and/or compliant participation in political system), AAHI needs to recognize these impediments to health promotion and incorporate counter-efforts to ensure that community members are receiving accurate and timely information. As such, AAHI should be proactive in staying current with information commonly referenced by Asian American communities (e.g. ethnic media, mainstream periodicals, popular media, historical portrayals) to determine how and directly address (mis)representations which may impact its efforts in developing health promotion initiatives. In addition to continuing its outreach and education efforts targeting certain population subgroups (adolescents, seniors, small businesses), further areas of exploration may include newer web-based modes of communication that reach certain segments of the population, such as social networking websites and health information blogs. These activities should enhance AAHI's current progress with respect to this strategic target and facilitate expansion of such efforts through increased resources and legislative priority.

> **"[The interactive forum] got us to think about how we will take lessons learned from Conference back home to apply to our own settings; motivated/inspired to mobilize communities to partner with other communities of color to have voice & take action."**

Theme II: Expanding Access to Quality Health Care Services

The crux of AAHI's activities related to this target surrounds its innovative Patient Navigator Program. Using certified medical interpreters, this program assists patients with all aspects of their interface with the medical system. In addition, health information is provided in-language via a referral line to facilitate dissemination of relevant and accurate resources available to Asian Americans in Montgomery County. As AAHI is not a health care delivery system, the bulk of its efforts are limited to community capacity building and increasing its network of education and service referrals.

Health care service systems targeting Asian Americans specifically are oftentimes difficult to find, even in ethnic enclaves. Therefore, to improve on this strategic target, AAHI should plan on adding more accessible and culturally-appropriate health programming to Asian Americans in Montgomery County, such as early screening for chronic and infectious diseases. Equally important, AAHI should assume an advocacy role to drive internal (countywide) systemic change so that existing services are known by and available to a larger proportion of Asian Americans in its target geographic population. In addition, AAHI should identify other minority-focused health organizations which may have similar rates of disparities and/or common experiences with the mainstream health system. As resources become scarcer and harder to secure, collaborating with organizations offering services or programs of value to the Asian American population becomes paramount to achieving this target. AAHI may want to consider exploring links with other patient navigator programs to expand its network of referral resources as well as ensure that Asian American health concerns are incorporated in more established health access/quality programs demonstrating promise or success in their respective target groups. A more thorough analysis of collaborative and partnership strategies will be detailed in the subsequent section.

Theme III: Broadening Partnerships and Collaborations

AAHI has demonstrated significant success in pursuing and developing meaningful collaborations with a multitude of organizations at a variety of levels. These include partnerships with government entities at the federal (U.S. Department of Health & Human Services), state (Maryland Office of Minority Health & Health Disparities, Maryland State Office of Health and Mental Hygiene), and local (Montgomery County Department of Health & Human Services) arenas. In addition, AAHI has a vast portfolio of collaborative initiatives with minority health organizations, Asian American health-oriented groups, community-based organizations, service providers, and other stakeholders with a vested interest in improving the health and well-being of Asian Americans and other minority groups, both locally and nationally. Illustrative of this capacity, AAHI—in conjunction with Montgomery County's other minority health initiatives—was instrumental in mobilizing community members to protest, and ultimately reverse, significant proposed cuts to programs impacting minority health in the County. Similarly, AAHI's two major Conferences serve as an example of its ability to mobilize its diverse partners in sharing information and resources to achieve common goals and objectives it has with programmatically aligned groups.

The bulk of the discussion in the critical synthesis sessions encompassed furthering progress on this strategic target. There was a relative consensus that AAHI and other publicly-funded initiatives need to consistently keep government officials abreast of their progress and results, even in times when resources are not limited and crises imminent. Accordingly, AAHI should provide ongoing reports of its activities, especially during "non-critical" or "non-mandatory" reporting periods, to effectively utilize its political representatives. Similarly, representatives of AAHI leadership need to make proactive efforts to develop relationships with potential allies, ensure that advocacy efforts continue even after short-term political objectives (e.g. funding, resources, recognition) are met, hold government entities accountable to their stated priorities, and recognize positive outcomes and successes from these representatives of power when they meet AAHI's requests/demands. Such multifaceted and reciprocal relationships with local, state, and federal government entities should result in policy changes which are sustained over time. Similarly, AAHI should recognize and include community stakeholders demonstrating interest

in pursuing a common health agenda. One highlighted group demonstrating potential for collaboration were students at all levels of the academic spectrum. As AAHI offers valuable exposure and training opportunities in understanding and addressing Asian American health issues, taking advantage of student enthusiasm, passion, and inquisitiveness would facilitate the development of a new generation of health practitioners committed to Asian American health while procuring additional human resources for AAHI's organizational activities. Students may also provide novel perspectives and approaches to a range of emerging issues relevant to Asian American health.

In the current climate of health care reform, AAHI was advised to seek out non-health related partners with potentially overlapping interests. In addition to AAHI's current collaborative activities with small businesses, other partners may include youth programs, faith-based organizations, employment training programs, and other social welfare entities. Moreover, AAHI was also encouraged to seek out "strange bedfellows", such as financial corporations, insurance agencies, and biotechnology or pharmaceutical companies, to understand multiple and varied perspectives on issues related to Asian American health. Understanding the complex relationships between performance, compensation, accountability, and (de)regulation may provide insight into structural influences on health and what aspects may be incorporated into AAHI's program planning and organizational objectives. Developing a large and diverse portfolio of partnerships and coalitions would enable AAHI to explore promising practices, successful models of leadership, and historical efforts either impeding or promoting health. Ultimately, such relationships would enable AAHI to take a leadership role in effecting change at the individual, community, and systemic level.

> **"It was beneficial that it was free to register. [I appreciated the] Diversity of topics and session [as well as] the engaging, inspiring, approachable individuals present at Conference and speaking."**

Theme IV: Enhancing Data Collection and Reporting

AAHI embarked on an ambitious strategy of data collection in its 2005 and 2007 needs assessments of Asian Americans in Montgomery County. These two studies, conducted in conjunction with the University of Maryland, elucidated health issues concerning 13 Asian American subgroups, including certain smaller and more isolated populations. The findings from these studies provided critical information for program planning and policy-level interventions. Internally, AAHI was able to use these results to modify its own systemic and interventional approaches to better serve its target population.

AAHI should continue its local data collection efforts to monitor trends among its target communities and identify emerging issues of concern for Asian American health prospects. In alignment with Conference presenter recommendations, AAHI should also facilitate triangulation of other local data collection efforts among Asian American populations to build sufficient sample sizes for population-based analysis. Based on the findings on its two needs assessments, AAHI may want to consider participating in public comment forums facilitated by federal surveillance agencies (e.g. U.S. Department of Health & Human Services, Centers for Disease Control and Prevention, National Institutes of Health) to inform national and state surveillance systems as well as federal recommendation documents, such as Healthy People 2020. Increasing the base of data pertaining to Asian American health indicators should facilitate the implementation of a national health agenda which recognizes regional demographic differences among Asian American populations in the United States.

future directions

Background

The execution of the 2009 Asian American Health Conference was part of a larger Strategic Planning process undertaken by the Asian American Health Initiative (AAHI). AAHI initiated this process during its inception in 2004, as an initiative under Montgomery County DHHS aiming to address the health needs of the Asian American community in Montgomery County and reduce the widening disparities among this minority community. In its initial year of existence, AAHI implemented a number of public health programs targeting disparities in cancer, osteoporosis, hepatitis B, diabetes and tobacco use among Asian Americans through its Health Promoters Program. It also embarked on an ambitious research endeavor, completing a comprehensive health needs assessment of diverse and understudied Asian American subgroups in Montgomery County. Similarly, AAHI continuously collects internal program data to monitor its impacts on its target population and make corrections as inefficiencies are identified. In addition, it developed community-based programs—the Patient Navigator Program—designed to facilitate navigation of the complex healthcare system by Asian American patients and the adoption of health promoting activities by community members. Consistent with its vision to enhance and expand health information of relevance for Asian Americans, AAHI created a dynamic multilingual website disseminating culturally-appropriate resources as well as national demographic data and health statistics pertaining to Asian Americans locally and nationally. AAHI continues to enhance its efforts for increased data collection for this understudied population, develop innovative programs to improve the health of its constituent Asian American subgroups, and keep abreast of existing and novel approaches to further its organizational mission and goals.

The latter effort began with the 2006 Asian American Health Conference, in which AAHI convened researchers, practitioners, and experts from across the United States. The purpose of this gathering was to explore disparities impacting Asian Americans, both nationally and in ethnic enclaves around the country.

future directions

Using the invaluable information generated from this Conference, AAHI—in collaboration with the University of Maryland School of Public Health and community partners across Maryland—produced a groundbreaking report titled "Asian American Health Priorities". This assessment documented the current disparities present among Asian Americans in Montgomery County and delineated opportunities and recommendations to eliminate these inequities and improve community health. Specifically, the report informed four strategic targets that AAHI could aim for, between 2010–2014, to achieve tangible outcomes in accomplishing its goals and overarching mission of improving Asian American health in a collaborative fashion. These targets were incorporated into a larger long-term Strategic Plan. Other components include an enhancement of AAHI's existing health programs (including increased access), development of new initiatives addressing emerging health issues, increased outreach to significantly underrepresented Asian American subgroups, and pursuit of beneficial and large-scale collaborations (local, statewide, and national) facilitating health improvement for all Asian Americans. These programmatic activities were designed to permeate all four strategic targets described in these Proceedings and expanded upon in AAHI's Strategic Plan documents.

> **"I found that most people of all racial/ethnic groups will do better/have better health outcomes if the staff of the healthcare facility looks like, speaks like, and understands the culture of the patients. This needs to be incorporated into healthcare reform!"**

future directions

Other areas of exploration for AAHI to pursue

The four strategic targets that AAHI has defined for itself are appropriate, tangible, and relevant for pursuing its long-term objectives in context of improving the health and well-being of Asian Americans in Montgomery County, the state of Maryland, and across the United States. Through the medium of dedicated Conference themes, these strategic targets were examined critically and thoroughly, resulting in a number of tenable steps that AAHI can accomplish over the next five years.

In addition to the analytic discourse pertaining to these themes, other areas of exploration were also elucidated by Conference participants. AAHI may want to consider the following efforts in conjunction with its activities related to its self-defined strategic targets.

Policy advocacy

Governmental representatives, organizational leaders, and community members all stressed the pivotal importance of educating policymakers and advocating for systemic changes which improve the health of Asian American and other minority populations. Given that AAHI is predominantly funded by public resources, it has a responsibility to ensure that these funds are used effectively and that public representatives are held accountable to their constituencies. Accordingly, AAHI representatives should make concerted efforts to keep policymakers abreast of their activities, progress, and successes. This may be undertaken in the form of letter writing campaigns, publishing policy briefs, attending public hearings or county-level meetings, and providing progress reports even when they are not mandatory. In addition, efforts made by policymakers which facilitate AAHI's mission and objectives should be applauded and publicly recognized.

Policy advocacy efforts, however, need to also be implemented by individuals without direct vested interests (e.g. publicly-funded groups such as AAHI) in certain initiatives. Therefore, AAHI needs to play a role in educating and mobilizing community members to advocate on its behalf. Paramount to this effort is increasing community awareness of AAHI's existence, purpose, and activities pivotal to improving the health of its constituent Asian American population on an ongoing basis. This may be conducted in the form of community forums, participation in cultural activities of importance, and inclusion of forms of media utilized by Asian Americans. Successful awareness-raising activities may lead to increased involvement of community members in AAHI's health activities as well as raise visibility in environments which require advocacy by constituent organizations and individuals alike.

future directions

Dissemination of Organizational Information

As a relative newcomer to the Asian American health movement, AAHI's efforts are oftentimes surpassed by the activities of more established organizations (with greater resources) with similar mission and objectives. Therefore, AAHI needs to ensure that information related to its organizational activities is disseminated to a wide array of audiences. In alignment with collaborative/partnership objectives, successful and widespread diffusion of AAHI's programs and successes will facilitate collaborative efforts by a diverse array of stakeholders. In addition to delivering relevant information to ethnic media (e.g. publications, and television/radio programs), AAHI may want to provide a regularly-published newsletter/update to a mailing list of organizational stakeholders, partners, and constituencies, to ensure that information reaches community members who may not be familiar with web-based technologies or electronic media. Conversely, AAHI should consider posting relevant announcements and messaging to active public health blogs and/or listservs for those who primarily receive their information online. Finally, as recognition by professional communities often predicates funding, AAHI should attempt to publish various forms of its program planning (e.g. philosophy, methodologies, evaluation strategies and outcomes, policy changes, sustainability efforts) in academic and other peer-reviewed journals and publications. Recognition of AAHI in more objectively-oriented publications will demonstrate to potential funders and allies of its intrinsic value in the Asian American health movement. Having a diversified approach in disseminating AAHI's activities should result in systemic changes and increased resources which facilitate the accomplishment of its objectives and sustainable programmatic activities.

Professional Development

AAHI provides a unique opportunity in professional development for passionate and dedicated individuals who otherwise may not have substantial practical experience in the field of Asian American health. These include students, career changers, or health professionals who have substantive expertise in other health-related disciplines (e.g. medicine, business, law, social welfare). In addition to bolstering its own human resources, taking advantage of such enthusiasm would facilitate the training of more professionals able to contribute to a progressive Asian American health agenda. As such, AAHI should consider creating formal volunteer or internship opportunities—possibly in conjunction with local community-based

organizations, colleges/universities, professional groups, and cultural associations—which facilitate the development of young professionals by providing relevant practical experiences. The efforts would provide valuable exposure to current issues and challenges faced by health practitioners in improving the health and well-being of Asian American populations.

Diversifying Funding Sources

AAHI is fortunate to have committed public representatives that advocate for its existence and expansion in addressing important health issues impacting Asian Americans in Montgomery County. To this end, AAHI maintains its core operating expenses and programmatic support from public funding. Such resource streams should be sustained, and even expanded, to ensure parity with other minority health initiatives in the County and to make certain that the health of constituent Asian Americans is protected and improved. To date, such financial and human resources have been sufficient to maintain its current health programs and activities, but increased allocations would result in increased quality and efficiency.

However, in an environment of limited public resources, coupled with AAHI's need to expand its approaches to meet current and emerging Asian American health needs, AAHI should consider investigating other sources of support to increase organizational efforts in research, program planning, community outreach, and coalition-based activities. Potential funding sources include entities (foundations, federal/state government departments, community-based organizations) which may provide categorical funding for certain activities aligned with AAHI's strategic planning targets. Securing activity-specific resources (enhanced data collection efforts, improved/increased community-based programming, wider outreach activities, and collaborative initiatives throughout the state and nation) may allow AAHI to achieve its longer-term objectives (including more staff) and increase its visibility among Asian American and public health organizations across the United States. Although diversifying sources of funding may also mitigate future budgetary cuts, securing such resources should not serve as a substitute for core operating and infrastructural support provided by public funds at the County level.

future directions

Action steps that may be pursued by non-AAHI representatives

Although AAHI plays an integral role, the onus for addressing and reducing health disparities faced by Asian American populations in Montgomery County is not solely under its purview. Other representative and stakeholder groups also have a responsibility to ensure the health of Asian American and other minority populations. This Conference demonstrated current efforts that various entities have undertaken locally, statewide, and nationally and articulated recommendations that stakeholders can undertake in creating an integrated and comprehensive health agenda for Asian Americans. Many of these comments and suggestions have been elaborated upon in the previous sections of these Conference Proceedings. In summary, public officials and agencies have a legislated responsibility to protect and improve the health of their constituent populations. As such, elected officials serving in densely-populated Asian American communities must make concerted efforts to understand and address issues related to health at the policy levels (through town hall meetings and public comment venues), and be praised and/or held accountable for their actions. Similarly, community-based organizations need to be informed of current approaches to improving public health, design and implement strategies that address unique health issues of its target population, collaborate with stakeholders at all levels to achieve common goals, and optimize community interaction to understand the nuanced needs of the communities they serve. Those assuming roles in academia and/or professional associations need to be inclusive of various organizations and programs that impact their surrounding communities, and ensure that their representatives and/or efforts are included in various mechanisms of disseminating health information (e.g. Conferences, publications, academically-sponsored lectures and forums). Finally, individuals interested in assuming professional and/or leadership capacities should seek diverse opportunities which elucidate the complexities of understanding and improving Asian American health prospects.

conclusion

The 2009 Asian American Health Conference came at a juncture where AAHI had made tremendous progress on its organizational identity and objectives, but concurrently needed to determine the future directions of program planning and evaluation that it needed to undertake. The logical mechanism to accomplish this goal was to convene expert researchers and practitioners and solicit their experiences, lessons learned, and recommendations on how to effect change that positively impacts the health and well-being of Asian Americans. Of equal importance was the need to ensure that the dissemination of this information was not solely limited to AAHI staff and stakeholders, but that it was distributed to wide and diverse audiences who have vested interests and commitments to improving Asian American health. Accordingly, Conference planners undertook an ambitious and successful outreach effort while recruiting speakers and presenters who were able to deliver practical and timely knowledge on efforts pertaining to Asian American health. The Conference began by setting the context for the Conference theme of change and current state of Asian American health, elaborated on AAHI's current efforts in understanding and addressing local health disparities, and explored AAHI's four strategic targets in the form of Conference themes with a diverse array of presenters speaking to each. These sessions were followed by critical synthesis sessions—commentary from a local professor followed by an interactive forum for participants to pose questions and remarks—which allowed AAHI staff and stakeholders to hear critical analysis of various aspects related to AAHI's mission and improving Asian American health.

conclusion

The aim of these Conference Proceedings is to comprehensively detail AAHI's activities surrounding the context, planning, events, and determination of future directions of exploration and implementation. Specifically, this document details the Conference planning process, an overview and synopsis of the day's agenda as well as detailed session summaries of the various Conference sessions. In addition, they include the evaluations submitted by participants, including quantitative statistics and qualitative comments detailing the strengths and shortcomings of the Conference activities as well as the value added for each respondent in their own personal and professional goals. These Proceedings conclude with an analysis of the critical synthesis session in determining future directions AAHI can pursue to further its progress on its strategic targets and other areas it may explore to accomplish longer-term objectives and goals.

The Conference provided a wealth of meaningful information and insight in setting the stage for AAHI's future activities. In context of its strategic targets, the event provided tangible action steps, which can be incorporated in conjunction with its current efforts, to further progress on each one. In addition, other potential directions that AAHI may pursue, not explicitly included in its current strategic plan, to further its organizational objectives were alluded to throughout the Conference by speakers and attendees. These recommendations were analyzed and are described in these Conference Proceedings.

At a critical moment in history where health reform headlines the discourse on public health, health care, and health workforce shortages, this Conference provided a timely environment where individuals, organizations, policymakers, and health practitioners were able to convene to discuss common goals, promising practices, and future directions for improving Asian American health prospects. Equally as important was the ability to reflect on the progress of the Asian American health movement thus far, and discuss where milestones have been accomplished as well as setbacks that have occurred. All in all, the Conference provided a meaningful discussion where stakeholders of all levels were able to share their experiences and knowledge and examine areas where AAHI and other committed entities can work collaboratively to ensure that organizational objectives are met. Ultimately, these efforts will enhance the ability of practitioners to identify and addressing emerging health concerns and ensure the health and well-being of Asian Americans throughout the United States.

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