

Montgomery County - DHHS
Asian American Health Initiative (AAHI) Steering Committee Meeting
July 19, 2011

<u>Steering Committee</u>	<u>Present</u>	<u>Steering Committee</u>	<u>Present</u>
Sam Mukherjee (Chair)	X	Karen Kar-Yee Ho (Vice Chair)	X
Anis Ahmed		Ji-Young Cho	
Nerita Estampador	X	Wilbur Friedman	X
Harry Kwon	X	MunSu (Moses) Kwon	
Meng Lee		Sunmin Lee	
Michael Lin	X	Betty Luan (HP Liaison)	
Wendy Shiau	X	Sovan Tun	
<u>AAHI Staff</u>	<u>Present</u>		
Perry Chan	X		
Betty Lam	X		
Jamie Lok Weng	X		
Sanjana Quasem	X		
Atyya Chaudhry			

Welcome/Introductions

Wilbur Friedman, chair of nomination committee, welcomed everyone and introduced Sam Mukherjee and Karen Ho as Steering Committee chair and vice chair, respectively. Sam Mukherjee thanked everyone for voting and expressed hope that someone from the next generation would be chair in the coming year.

Approval of March and May 2011 minutes

- Wilbur Friedman asked to clarify Hoarding and SMASH-B from the March 2011 minutes
- Harry Kwon mentioned that Eduardo’s name was incorrectly spelled in the March 2011 minutes, and that there will be a change in the steering committee leadership of the LHI soon.
- Nerita Estampador raised a question about attendance, wondering if there could be a way to mention that absences are excused;
 - Sam Mukherjee suggested that only emergency, foreign travel and sickness be excused, and that Perry will have to send out a meeting schedule ahead of time.
 - Wilbur Friedman noted that a County policy may dictate that a certain number of absences will result in revocation of membership in the Steering Committee
 - Harry brought up that the by-laws should provide more information on this subject
 - Michael Lin recalled that there is a State guideline, but was not sure about at the County level.
 - Sam Mukherjee resolved to let the guidelines be consulted later.

Reflection of FY11 Retreat by SC Members

Wilbur Friedman noted that the expertise gained here will belong to DHHS in how anyone who has problems can come to the DHHS and the DHHS will be able to deal sufficiently with their problems.

Harry Kwon thanked the AAHI staff for facilitating the event; he enjoyed the teambuilding exercise and thought it was helpful. He also believes that the advocacy exercise was good as well, even though there was not enough time. Harry Kwon brought up the breakfast held by George Leventhal, where Steering Committee members speak about the two priorities/policies from their program. Last year MK Lee spoke of mental health. The previous year, Harry spoke about Hepatitis B.

Wendy Shiau spoke appreciatively of how everyone in the group could work as a team, despite coming from a variety of backgrounds.

Nerita Estampador noted the sense of camaraderie at the retreat. She noted that CVD, hypertension and diabetes were important concerns for Asian Americans, and wondered where she could get the statistics on mortality for different ethnicities of Asians.

- Perry Chan responded that AAHI could find this information.
- Harry Kwon mentioned that it is difficult to find data at a local level, especially for heart disease.
- Karen Ho mentioned that the Healthy Montgomery website may prove helpful

Jamie Weng expressed that she thought the retreat went well.

Michael Lin was not present at the meeting, but noted that he enjoyed the company of the group.

Karen Ho was also out of town, but participated in the retreat via conference call. She believed that having a good facilitator was a key to the retreat's success. She found the retreat very informative.

Sanjana Quasem thought the retreat went well. Sam Mukherjee thanked her for her choice of food.

Betty Lam believed the retreat went well.

Perry Chan thought the retreat gave the new members an exposure on advocacy.

Messages from the Chair and Vice Chair

Sam Mukherjee had very positive reflections on the retreat; he believed that the subtle teaching was a good approach. He believed Uma's presence was very good. He liked that the presentation began with integration, noting how important integration is. He also liked how the second topic was social justice and how it relates to health. He appreciated the broader vision for why sickness exists and how to address it.

- Sam Mukherjee noted that equity was defined as a consistent pattern of fairness

- Sam Mukherjee listed some social determinants of health, and brought up the point of affordable housing as a key to health.
- Sam Mukherjee suggested that everyone identify their strengths to see what everyone can contribute.

Karen Ho presented a skills matrix for the SC members to fill out to assess the skills and background of the SC members.

Sam Mukherjee drew a diagram where community participation and delivery of county service feed into equity and social justice, which in turn feeds into policy planning and decision making.

- He noted that there are a great many people involved.
- The SC is involved at the Community Participation part, in how it engages the community and politicians.
- He suggested that as a group, the SC can invite some politicians to educate politicians and independent advocates (community and politicians fall under community participation).

Karen Ho said that the program committee may be reactivated. Sam Mukherjee added that everyone should be engaged in something.

Minority Health Initiatives- Proposed six-month assessment process

Betty Lam noted that Uma went and talked to all three steering committee groups to mention the six-month assessment process. Betty said that the process was created with the help of an outside consultant, that the process is meant to engage both internal and external stakeholders. Uma has looked over the process, and now it is presented to the SCs. There are four steps to the process:

1. Engaging in a literature review and best practice research to see how other areas in the country are addressing health disparity issues. Betty believes information can be obtained from the DHMH's Office of Minority Health.
2. Internal stakeholders engagement: includes 2 sets. (1) Engage the service chiefs and their senior staff for the 5 service areas of HHS. There will be a facilitator for the discussion; the three programs will present their work to the service chiefs, which offers an opportunity for the minority health programs to (re)introduce their work to the service chiefs and see how the minority health programs can augment the work of the service areas. (2) Engage the minority health program staffs to see what the challenges and gaps are. Facilitators from outside of HHS will help during this time.
3. External engagement: Present plans to SCs to see concerns and ask SC to present two people to serve on the Assessment Team (a combined group with representation from the three minority health SCs). Betty Lam noted that concerns can be emailed to Perry Chan or Sam Mukherjee.
4. Develop a rationale for the future structure, function, roles, services and programs of the Minority Health Initiatives to maximize DHHS' impact.

Michael Lin asked about if the assessment is to find a way to make the process more efficient. Betty Lam noted that the budget has decreased, but the assessment project is not driven by budget. She recognized the importance of targeted programs for minorities, but stated that there

is potential for better integration, racial and ethnic targeted policies throughout the programs. Betty mentioned that the King County equity program was not limited to one budget or one office, but was integrated into all the departments, which increased its effectiveness. Karen Ho agreed how having all departments aware of minority needs is more effective than one office of minority health.

Betty mentioned the King County visit as inspiring to many of the people who attended the breakfast, and suggested that the Equity Initiative is part of a larger concept, following King County's precedent.

- Sam Mukherjee marveled at how King County approached the issue from the standpoint of creating opportunity rather than eliminating barriers. He also pointed out that they did not focus on a race or ethnic group.
- Wendy Shiau liked how King County decided to use everyone's resources to help everyone meet their potential rather than becoming a crutch.
- Nerita Estampador remarked that this approach is similar to how Asians often pool their resources to try to become independent (e.g. living together in one house until they have enough money to move out), but there is a mindset and system that prevents them from becoming independent.
- Sam Mukherjee mentioned the example of the Pima Indians who lost their water and experienced a sharp rise in diabetes. Perry mentioned that AAHI has a copy of the DVD (Unnatural Causes) if anyone wishes to borrow it.

Harry Kwon raised a concern about if the assessment is only for the HHS and there is no central authority. He noted that job creation and transportation are not on the table at the moment. He promised to email a WHO publication.

Sam Mukherjee voiced doubt that addressing all the social determinants of health can not be done at a macro level, because there is not enough money.

Perry expressed hope that there could be more data collection on the Asian American community.

AAHI Program Updates

Perry provided AAHI program updates on outreach and education and data.

Outreach and Education

- Perry informed Steering Committee members of the Health Education Workshop where 32 members of the Cambodian Buddhist Temple were able to receive health education.
- AAHI held an End of Fiscal Year Health Promoter Celebration and Betty Lam presented awards to thank the Health Promoters for their service. There are 6 new Health Promoters, who have been trained and are ready to go out into the community.

Data

- Perry Chan stated that AAHI assisted Healthy Montgomery to host two community conversations in the Chinese and Vietnamese communities.

Liaison Reports

Chip/Healthy Montgomery

- Perry Chan stated that Sunmin Lee represented the AAHI steering committee in the last Healthy Montgomery meeting. The main theme of the last meeting was the community conversations.
- Perry said Healthy Montgomery is planning a retreat type meeting to prioritize the indicators from the community conversations.

Asian American Advisory Committee

- Sam mentioned that the Asian American Advisory Committee round table meeting went well. He hoped that the delegates to the meeting will be able to meet with the SC
 - The Asian American Advisory Committee round table meeting had 2 segments.
 - The first one was on faith-based organizations and outreach.
 - The second was just a political one
- Sam thought the political segment (second segment) was especially revealing.

Commission on Health

- Harry noted that the next meeting is in a few days, and that the focus is on obesity. He mentioned that the Commission on Health has a new chair and vice chair.
 - The new chair is Marcos Pesquera, the Executive Director for the Center for Health Disparities.
 - The new vice chair is Richard Takamoto, the Director of Research at Kaiser Permanente in the Mid-Atlantic region.
 - Their term starts on Thursday, July 21, 2011.
- Harry added that he already sent them a notice introducing Sam and Karen as the new leadership for AAHI Steering Committee.

Future meeting: dates and location

Sam Mukherjee suggested that Perry Chan send the program schedule to everyone, and he emphasized that all SC members must involve themselves in AAHI programs. Harry Kwon said that this is a great idea, speaking of a Hepatitis B event he attended.

Sam stated that he may need to call a special meeting in August in order for the SC and Reverend Tim Warner to be introduced.

Sam added that the Steering Committee will continue the bi-monthly meeting pattern.

Adjourn Time: 8:03 p.m.