Welcome

- Sam Mukherjee called the meeting to order at 6:23pm and initiated the introductions of new members, and current members.
- Sam states that in the last year, there have been five new Committee members. Sam welcomes Mayur Mody as a new Committee member who is from the National Council of Asian Indian Associations (NCAIA).
- Perry Chan acknowledges that Sierra Jue-Leong is the new Program Specialist at AAHI. She has been with AAHI for three weeks and her duties will be to help with evaluation and reporting.
- Perry also introduces Tae Hyun Kim to the Committee. He supports AAHI’s ABCS heart health outreach efforts.

Approval of Agenda

Agenda approved.
Approval of April 16, 2013 Minutes

- Wilbur Friedman comments that the verb motion is a noun and that the correct word is move. He suggest that the minutes should be is revised, and remove the word motion and replace it with move or moves. The error is on page 1, and throughout the paper.
- Sam acknowledges Wilbur and realizes that this is more of an announcement then a motion for the recording of the last minutes.
- Sovan Tun comments on the attendance roster and said he was marked down as being in the meeting when he was not.
- Sunmin Lee also comments on the attendance and stated that she was present last meeting and was marked down as not present.
- Nerita Estampador moves to approve the minutes.
- Wilbur seconds.

AAHI Program Updates

Updates from Program Manager

Outreach Activity
Perry reports AAHI’s outreach numbers for FY13 as of June 17, 2013
- 52 outreach events
- 288 small business outreach sections
- 9000 literature in various languages
- 853 basic screening
- 738 referrals to health and human services in the County

ECHO Workshop on the Affordable Care Act
- Perry reports that the ECHO workshop held last month was very successful and would like to thank Sam and Wilbur for their support at the workshop.
  - 53 participants attended
  - 27 organizations represented
- The attendees are very diverse from different communities, including:
  - Faith-based organizations
  - Community-based organizations
  - Chair of African American Health Program Executive Committee
  - Colleagues from the Latino Health Initiative
- Perry shares a handout containing the evaluation from workshop participants. Many attendees reported that the Affordable Care Act was “good” or “excellent” topic and that many felt more knowledge about the ACA after attending the workshop.
- Perry asks for the Committee’s suggestions in selecting two or three potential topics for the next ECHO workshop.
  - Sam informs that Perry will send out an email to the Committee inviting potential topics for the next workshop.

Recognition of Lyme Disease
• Sam expresses how Lyme Disease does not only pertain to the Asian population. AAHI took the lead and we had several supporters from the Jewish community, African American community, and many others. Sam gives Perry the Proclamation Letter.
• Sam shares the County’s informational brochure on Lyme Disease and explains that the information should be updated with more useful information. Sam has been getting calls from organizations asking to speak about awareness and prevention on Lyme Disease. He inquires if the Committee can request that the Public Health Department to update the brochures and use the material as a help guide.
  o Betty states that she can show it to Public Health but Public Health does not have a Health promotion Unit anymore. Betty said she can show it to Dr. Tilman.
• Michael mentions all this recognition could not be possible without Sam.
• Sam acknowledges and says this is a joint effort.

**ABCS Heart Health Project**
• The ABCS project focuses on four areas, referred to “ABCS”:
  o Appropriate use of aspirin
  o Blood pressure control
  o Cholesterol management
  o Smoking cessation
• Perry elaborates on the heart health outreach efforts:
  o 744 educational encounters
  o 31 referrals
  o 28 individuals successfully scheduled an appointment with the clinic
• Perry adds that Tae works on this project by educating Asian Americans community and referring them to Montgomery Cares clinics to get screened. The goal is to link uninsured residents who may be at high risk for heart disease.
• Nerita Estampador notes that follow-up calls to the clinic to check on the status of the referred clients may be helpful in knowing the success rate
  o Perry explains that he is able to provide the data on the success rate because of Tae’s position.
• Mayur Mody mentions the community members referred to the ABCS program do not know why they are being contacted.
  o Perry points out that it might be because the clinic staff is not the one at the outreach events. Perry adds that Tae is able to develop trust with the community members he refers to the clinic during outreach events.
• Sam asks if they get anything other than verbal advice.
  o Perry explains that during general outreach, community members are educated and referred to different resources. Due to limited resources, community members do not receive follow-up nor client care coordination services.
  o Perry informs that the ABCS grant will end in October, and Tae is helping 15 hours a week.

**Health Promoter End of FY13 Celebration**
• There will be a celebration to thank the health promoters and Perry opens the invitation to the Committee on Thursday, June 27 from 6pm-8pm at EOB.
• Sam urges the Committee to attend the celebration.

Local Resources
• Perry draws the Committee’s attention to the Lung Cancer Screening event for the Asian Pacific Islander community at Shady Grove Adventist Hospital (on the blue handout).

Other Program Updates
• Sanjana Quasem will leave AAHI in mid-August to attend University of Maryland to pursue her Master’s degree.
• Sam said it is sad and happy to see Sanjana leave extends his well wishes to her and her future endeavors.

Advocacy and Budget Session
• Sam says this has been a tough budget session. He mentions that $100,000 has been allocated for the new Institute. He also thanks the Committee and Wilbur for attending meetings and showing their support.
• Advocacy efforts need to be doubled; the committee has reformed and refined. Sam mentions that this has been the best CE advisory meeting and Diane Vu is doing her best. The proposal everyone accepted for a “Comprehensive Advocacy Committee.” He says that “we must learn how to make a noise” if you compare our advocacy with other minority groups, who know how to advocate effectively.
• Stan Tsai said we must know the costs for AAHI’s activities and other communities and work together to let the County Executive know. He mentions we need to develop a system to help get more funding for our community.
• Wilbur mentions that the County budget increased 4.1%. He asks Betty about the percentage pertaining to budget increase for AAHI.
  o Each of the three initiatives received an estimated $35,000-$40,000 increase, in addition to the $100,000 towards the new institute.
  o Betty and Perry said they will tell him the percentage soon.
• Stan asks if there is any update around the hepatitis B vaccination projects.
  o Perry states that no formal paper has been processed, but as stated on the County Council webpage, $40,000 will be added towards AAHI’s hepatitis B vaccine program.
  o Perry has been communicating with partners in hopes to leverage resources and have the greatest impact from the $40,000.

Liaison Updates

Healthy Montgomery
• Sam states that we need more participation and that we have a good representative from the Committee who can speak up and report back.
• Perry says the discussion was around the HMSC membership and data needs from the minority health programs.
• Wendy Shiau is currently out of the country and was not present at the last meeting.

Commission on Health
• Harry updates the Committee that his term on the Commission on Health is ending this week that Dr. Ashraf Sufi will take on the role of the new liaison.

CE Asian American Advisory Committee
• Sam explains that the Committee is reorganizing itself. Business Committee and the Affordable Care Act all had problems.

Recruitment Drive
• There will be two more Committee members very soon. One will be from the Sri Lankan community, joining in the fall, and the other one is Dr. Liu Kim that works for Baxter Pharmacy Company.
• Perry expresses that will seek further guidance to avoid commercial endorsement.

Governor’s Commission
• Anis Ahmed is not present. There is no update to report.

Initiative of Steering Committee Members and Relationship with AAHI Program Activities
• Sam emphasizes the need for the Committee to resume attending the Health Promoter Program trainings and outreach events. He mentions the Committee’s support should go beyond the bi-monthly meeting discussions.

Need for Data Collection
• Sam notes that there is a need to collect data to show the health needs of Asians.
• Michael Lin mentions that at the last meeting, the Committee member align themselves in five service areas. He suggests that each group select one or two topics to focus on.
  o Sam notes that Healthy Montgomery does not conduct surveys.
  o Sunmin adds that unless we do new data collection in Montgomery County, an option is to collect data from other regions, assuming that it is similar across all Asian groups. She can provide data showing where Asians lack in terms of health and where they need services. She points out that funding and resources are needed in order to do data collection in the first place.
• Betty states that although Healthy Montgomery does not collect new data because of limited resources, there is still a commitment to look at what the data needs of the population.
• Nerita suggests asking Behavioral Health for their data on Asian clients in terms the number of referrals and how many are accessing resources.
Michael points out that we can pull national or statewide data. Due to limited funding, he suggests that a survey of individual case may be strong enough to prove that there is a need.

Sovan notes the existing 2008 UMD study should still be valid.

Sunmin explains that in the needs assessment, mental health was one of the key areas of need among other health issues, but it was not survey-based/qualitative data, so there is no prevalence or percentage of those who have mental health problems. She points out that there be underreporting might be an issue—many Asians already do not seek mental health assistance since there are no bilingual or bicultural services available. She agrees with Michael’s approach about highlighting a few case stories because of limited resources.

Harry suggests that AAHI should include data collection in the FY14 budget. He believes that good “hard numbers” would be beneficial to have in the long run.

MK Lee asks what AAHI’s role would be in this process.

Perry mentions that AAHI can provide technical assistance to mental health professionals in how to serve the Asian population better.

Sam notes that the leadership institute can help with this.

Nerita suggests having Dr. Jimenez to come and speak to the Committee on her experience in working with her mental health clients.

Sam recalls that Wilbur suggests having the former Director of the Mental Health Association to speak.

**Data Advisory Committee**

- Sam requests that Sunmin to lead the Committee.
  - Sovan seconds.
  - Perry to touch base with Sunmin about the program’s data needs.
- Sunmin, Stan, and Wilbur form the Data Advisory Committee.

**Program Advisory Committee**

- Sam mentions that Committee can provide technical assistance and advise around the five different service areas.
- Sunmin notes that there are certain health disparities within the Asian population, including hepatitis B and colorectal cancer that need more attention.
  - Michael shares that the Asian & Pacific Islander American Health Forum (APIAHF) should have a lot of research and data on Asian health disparities.
  - There is a discussion among the Committee on the different health disparities in the Asian community, the need for health promotion, and referral protocol.
  - Sunmin will share a database of CBOs who provide free, bilingual mental health counseling
  - Youryun Lee has information and data from her clinic in Virginia.
- We will revisit the function of the Program Advisory Committee at next meeting.

**More active participation in Healthy Montgomery**

- Sam will follow up with Wendy.
Follow up of the MHIP process

Leadership Institute for Equity and the Elimination of Health Disparities (LIEED)

- Betty states that through the new institute, the three minority health initiatives will work with the HHS to help the existing programs be more cultural and linguistically accessible to better serve the diverse communities, including emerging populations.
  - Betty adds that with the money we should take a programmatic approach and test out the recommended functions and see if this is what the institute can do.
  - Perry said one or two projects will be selected to test and that we need to be mindful of how wide we want to conduct the project. Based on the Committee’s discussion, Perry feels that mental health should be one of the potential projects to look into.
  - Perry to resend the executive summary to refresh the Committee on the process.

Input and Updates from CBOs and Members

- Sunmin shares that there will be a lay health worker training on June 29, 2013 from 10am-5pm at the UMD College Park Campus. Sunmin will forward the flyer to Perry to disseminate to the Committee.
- Wilbur and Stan inform that OCA National Conference is from July 18-20.

Steering Committee Retreat

Potential Dates: Aug 24/Aug31/Sep14

- Perry has been in contact with the previous facilitator at the last retreat. He asks for the Committee’s preference on the date and location.
- Based on the availability of the Committee members, the retreat will take place on August 24 in the building next door (1301 Piccard in Rockville). Perry will follow-up with the facilitator.
- Since the retreat is on August 24, there is no meeting on August 20.

Next Meeting

- The next meeting is schedule for September 14, 2013. The location is TBA.

Adjourn: 8:11pm