EXECUTIVE SUMMARY

The Asian American Health Initiative (AAHI), a program under the Montgomery County, Maryland, Department of Health and Human Services, is proud to release its Fiscal Year 2010 Annual Report. Since its inception in FY05, AAHI has worked tirelessly to eliminate health disparities that exist between Asian Americans and their non-Asian counterparts in Montgomery County. This report documents those efforts in the context of wider Asian American health disparities and barriers to healthcare. By weaving together various programmatic achievements, AAHI hopes to shed light upon culturally- and linguistically-competent mechanisms to meet these challenges among a diverse constituency.

For nearly six years, AAHI has led community efforts to promote and improve health outcomes for Asian Americans in the County. As one of the fastest growing populations in Montgomery County, the Asian American community is a diverse subset of ethnicities, languages, religions, and cultures. AAHI works to improve the ability of Asian Americans to confidently access linguistically and culturally competent care, promote community empowerment and engagement, enhance data collection and reporting efforts, and strengthen partnerships and collaborations. As in past years, FY10 was challenging for public health and social service agencies reliant on government funding. AAHI persevered despite programmatic reductions and was able to make progress on major objectives both locally and beyond.

In FY10, AAHI is honored to share its accomplishments through the eyes of its community members and partners. The seven stories shared in this Annual Report are vignettes from those who were instrumental in furthering AAHI’s mission. Not only do the seven accounts provide insight to AAHI’s work in the community, but they illustrate the great accomplishments, opportunities and challenges in working together to build a healthy Montgomery County. Lastly, these narratives also serve as reminders that much work remains to be done to close the health disparities gap. AAHI continues to drive for quality and equitable healthcare for all Asian Americans.

Chun Man (Perry) Chan
AAHI Senior Program Coordinator

Harry Kwon, PhD, MPH, CHES
AAHI Steering Committee Chair

Meng K. Lee
AAHI Steering Committee Vice Chair

Chun Man (Perry) Chan
AAHI Senior Program Coordinator
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ABOUT AAHI

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Part of the Montgomery County, Maryland Department of Health and Human Services (MCDHHS), the Asian American Health Initiative was established in Fiscal Year 2005 with the support of the County Executive and County Council in direct response to the growing health needs of Asian Americans residing in the County. Since its inception, AAHI has worked to eliminate health disparities that exist between Asian Americans and their non-Asian counterparts. AAHI has strived to develop linguistically and culturally appropriate health programs that directly address the unique and unmet health care needs of Asian Americans in the County. AAHI has partnered with numerous community- and faith-based organizations to reach out to isolated Asian American communities.

AAHI’S MISSION
To identify the health care needs of Asian American communities, to develop culturally competent health care services, and to implement health programs that are accessible and available for all Asian Americans in Montgomery County.

THE ASIAN AMERICAN COMMUNITY
Asian Americans represent a culturally and linguistically diverse segment of Montgomery County’s population. Asian Americans are a highly heterogeneous community representing over 50 ethnicities and speaking over 100 different languages and dialects. Montgomery County is home to approximately 45 percent of all Asian Americans residing in Maryland. According to the U.S. Census Bureau, in 2006, about 13.3 percent of the County’s population identified as Asian American, totaling some 124,605 residents. Between 1990 and 2006, the Asian American population grew 62 percent in Montgomery County, the largest increase of any ethnic minority group. The rich and varied contributions of the Asian American community continue to be assets to the area.
FY 2010 AT A GLANCE

HEPATITIS B PILOT PROJECT

PATIENT NAVIGATOR PROGRAM

AAHI IN THE COMMUNITY

COMMUNITY STORYBOOK: 'Voices Among the Silent: Stories of Struggle and Strength from Asian Americans in Montgomery County, Maryland'

AAHI IN SOCIAL MEDIA

H1N1 OUTREACH PROJECT
ACCESS TO CULTURALLY & LINGUISTICALLY COMPETENT CARE
ACCESS TO CULTURALLY AND LINGUISTICALLY COMPETENT CARE

Given the diversity of Montgomery County residents, it is important to provide culturally and linguistically competent services tailored to the evolving demography. As determined in the Asian American Health Initiative’s 2008 countywide health needs assessment, many Asian Americans in the County express experiencing a range of challenges in accessing optimal health and human services due to insurance status, financial difficulties, transportation (particularly for seniors), language barriers, lack of Asian language providers, traditional cultural beliefs about health and medicine, and fears related to immigration status.

In FY2010, AAHI continued working diligently to improve access to quality healthcare for Asian Americans, particularly for the most vulnerable and underserved County residents. Through invaluable endeavors such as AAHI’s Health Promoters and Patient Navigator Programs, AAHI successfully connected residents to available health resources and services in the County.

While some residents may be apprehensive about seeking public assistance or may be unaware of existing local programs, AAHI builds upon its vast outreach to diverse segments of the Asian American community to support and link residents to appropriate healthcare. AAHI’s network of passionate community volunteers and supportive Steering Committee members also continue to serve as bridges of communication into the community.

Devoted to developing conditions that enable optimal health for Asian Americans in Montgomery County, AAHI cultivated and sustained partnerships to enhance the availability of free and/or low cost preventative screenings and vaccinations for the community. AAHI is committed to improving efficiency and seeking out cost-effective tools in order to enhance efforts to reach more portions of the Asian American community and to improve health access points for residents.
MRS. SANGHA: Patient Navigator Program Client

A little over two years ago, an enthused mother and wife packed her belongings to emigrate from India. Leaving behind everything that she knew, Mrs. Sangha arrived in the United States with her two young sons to join her husband who was working as a chef at an Indian restaurant in Montgomery County, Maryland. Like many who immigrate to the United States, they did not have much. They did not have health insurance, they had very little income, and they were figuring out how to survive in this country. Mrs. Sangha spent the majority of her time at home, caring for her school-bound sons and working husband.

Less than a year after her arrival, Mrs. Sangha’s husband fell ill with the H1N1 flu virus and was hospitalized. Mrs. Sangha felt lost and alone; she was unfamiliar with the U.S healthcare system and could not speak English well enough to understand what was happening to him. Opportunely, a family friend introduced Mrs. Sangha to AAHI’s Patient Navigator Program and the Hindi interpreter.

The patient navigator helped Mrs. Sangha and her husband communicate with the hospital staff to better understand his condition. Her husband was moved through two hospitals while battling for his life. Sadly, he succumbed to the illness a month later. Not too long after his passing, Mrs. Sangha herself was rushed to the emergency room where she was found to have internal bleeding due

AAHI’s Patient Navigator Program was established in 2008 to reduce gaps in accessing healthcare services for Asian Americans in the County by eliminating language and cultural barriers.

The program provides two main services: (1) a multi-lingual health information and referral telephone line; and (2) trained multi-lingual medical interpreters for on-site, face-to-face interpretation during medical appointments.

The Patient Navigator Program works to empower community members to understand and access the U.S. healthcare system. Patient navigators work to build client confidence as they are guided through the medical process to ensure quality patient care, increased patient satisfaction, and improved health status outcome. It has become an invaluable program for Montgomery County residents.
to a ruptured cyst. While in the ER, Mrs. Sangha had difficulty asking questions and understanding her diagnosis and treatment options—that is, until the patient navigator intervened.

As much as she needed to understand the medical information, the patient navigator also became her mentor to overcome her fears and apprehensions. “I speak very little English and am not yet familiar with the ways of America,” Mrs. Sangha relays in Hindi, “I did not even know how to use public transportation and felt extremely vulnerable. I felt like I could do nothing. I didn’t know how to get help or where to go before I discovered the Patient Navigator Program.” After this critical incident, Mrs. Sangha began a long process of overcoming her anxiety as a new American, taking charge of her own health and even obtaining a job. Though she makes very little, she has been afforded an opportunity to learn more English, become more independent, and can now support her family financially and emotionally.

Having been linked to AAHI’s Patient Navigator Program, Mrs. Sangha believes she has developed more control and confidence to access social services and health resources in the County. Mrs. Sangha has learned how to better access the U.S. healthcare system and in turn, feels more prepared to care for herself and her family. Since working with a patient navigator, she is better able to manage her illnesses and senses that her stress and mental health have improved. Mrs. Sangha believes that AAHI’s Patient Navigator Program has been extremely helpful and has restored hope and confidence to scores of people in the County that are in desperate situations due to language and cultural barriers. She hopes that more and more people learn about AAHI and the programs they have to offer.

Last year, Mrs. Sangha felt so strongly about the availability of quality resources for limited-English proficient residents, such as AAHI’s Patient Navigator Program, that she testified before the County Council to show her support. She feels that the program has been instrumental in helping her and many other individuals access appropriate and quality care. She only wishes she knew about the Patient Navigator Program earlier to help her husband and often wonders if that could have saved his life. Mrs. Sangha hopes to one day give back to the community and help those who are in need, as AAHI and the Patient Navigator Program have done for her and her family.
SHAHIN SEBASTIAN: Patient Navigator Program Manager

Language barriers, lack of insurance, cultural barriers, low income, near-constant isolation—Shahin Sebastian’s clients encounter these various challenges day in and day out. As program manager of the Patient Navigator Program, Shahin works with low-income and uninsured Asian American County residents to identify and overcome communication barriers in order to successfully access healthcare options in the County.

“Language is a far greater isolation mechanism than it is perceived; I’m glad AAHI is working towards bridging that gap,” says Shahin. She believes that AAHI provides a fundamental service that is lacking across much of the nation—trained medical interpreters. Overcoming language barriers has and continues to be a tremendous challenge, especially when trying to understand and access appropriate health services. Through Shahin’s work, she sees that some Asian American community members, particularly new Americans and those with limited English proficiency, have a tendency to isolate themselves from the outside world because they lack confidence in their ability to communicate. Additionally, she has observed that limited English proficiency has a

Collectively, four patient navigators cover a multitude of languages and dialects spoken by Asian Americans, including Chinese, Korean, Vietnamese, and Hindi. Patient navigators work diligently to lessen any fears clients may have when it comes to obtaining medical assistance.

However, while the Patient Navigator Program focuses on health, support from patient navigators often extends beyond the traditional healthcare realm.

Patient navigators witness firsthand the connection between health status and other determinants of health, including social support, housing, and transportation. They often work with clients to help them obtain food stamps, seek rental assistance, apply for financial aid programs, learn to use public transportation, seek employment, and connect with community centers.

In addition to tangible support, patient navigators often serve as emotional support systems through difficult times of treatments and decisions, as well as times of healing.
domino effect on employment, emotional and physical health, and inconsistent behavior with regard to seeking medical care.

Through her experiences, Shahin has noted that stigmas and misperceptions continue to exist within Asian American communities in relation to health. Culturally-rooted apprehensions about seeking public assistance and viewing illness as bad karma can delay or prevent individuals from seeking medical attention. These cultural perspectives may also limit knowledge and acceptance of valuable resources that are available. When Shahin is with a client and provider, she identifies these cultural differences and works attentively with both parties to create understanding and establish open dialogue and trust. She believes that, with honesty and open communication, patients will feel more comfortable being inquisitive about their own health, thus gaining a better understanding and sense of empowerment of their health status.

Shahin feels it is imperative that clients trust the person they are communicating with. She recognizes that trust is not only a key element, but the foundation when working with clients. “It becomes a circle of trust,” states Shahin, “We support our clients so they realize that they are not alone; we start to build trust in one another. This level of trust also needs to extend to the healthcare providers we encounter. The trust that is created helps the community member feel empowered, educated and confident in accessing and understanding the health care system and prioritizing their health needs and concerns.”

In a recent case, a patient came to Shahin after having difficulty with a local clinic due to a language barrier. The client felt that the clinic was not sensitive to his needs and performed a variety of diagnostic tests without considering his health concerns. This communication struggle continued for about a year until Shahin intervened. She worked with the client in building trust and investigated the difficulties he was facing. She was then able to convey the client’s needs with the clinic’s staff and clarify any miscommunication. Within no time, the client was linked to an appropriate healthcare regimen. Fortunately, this case was resolved without damaging consequences, but in the healthcare field, even the smallest of miscommunications can have severe repercussions on one’s health and well-being.

“This program is much needed,” says Shahin, “There is a gap in information between low-income, underinsured, uninsured and/or limited-English proficient individuals and the U.S. healthcare system. The Patient Navigator Program helps close that gap. In the long run, I believe it makes healthcare much more cost effective.”
### Patient Navigator Program

- **Total Client Encounters**: 7771
- **Total Calls Received**: 5000
- **Callers Linked to County Services**: 76%
- **Of Callers Had No Insurance**: 84%
- **On-Site Medical Interpreting Sessions**: 2329
- **Medical Interpreting Sessions by Phone**: 442

### Percentage of Calls by Language

<table>
<thead>
<tr>
<th>Language</th>
<th>Percentage</th>
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<td>Bengali</td>
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<td>Chinese</td>
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<tr>
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<td>Vietnamese</td>
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<tr>
<td>Others</td>
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</table>

### Total Calls by Category

- **Patient Navigation by Phone**: 5000
- **Patient Navigation by On-Site Medical**: 2329

### Percentages by Age Group

- **Patient Navigation by Phone**: 76%
- **Patient Navigation by On-Site Medical**: 76%
LINKAGE TO AFFORDABLE HEALTHCARE

In June of 2010, AAHI staff and patient navigators coordinated with Kaiser Permanente to host an open enrollment event for eligible Asian American community members.

The Kaiser Permanente Bridge Program, a low cost insurance plan, was largely popular with those self-employed, recently unemployed, low income working families whose employers do not provide healthcare benefits, and those who do not qualify for Medicaid or Medicare.
COMMUNITY MOBILIZATION AND EMPOWERMENT
COMMUNITY MOBILIZATION AND EMPOWERMENT

Particularly among minority populations, a comprehensive health promotion strategy assures that individuals increase their knowledge of health concerns impacting their respective communities and are aware of culturally and linguistically-appropriate local services. To ensure that public health information reaches intended audiences and to encourage utilization of health resources, the Asian American Health Initiative is dedicated to promoting health education using a community empowerment and engagement approach.

Education has been and continues to play a key role in addressing health challenges for Asian Americans in Montgomery County. Coupled with community-driven initiatives, AAHI works to mobilize and empower Asian American communities to define and advocate for their own health priorities.

In FY10, AAHI focused efforts to help facilitate the ability of Asian Americans to actively engage in bettering their own health and well-being. This year, AAHI’s health promotion undertakings encouraged residents not only to adopt healthier behaviors, but also to consider a holistic approach to health, including social and environmental factors.

With an organizational emphasis on health promotion and prevention, AAHI implemented projects designed to creatively disseminate important health information to the public. AAHI also supported community groups and leaders with technical assistance pivotal to strengthening their capacities to develop, implement, and assess inventive health programming for community benefit.
BETTY LUAN: Health Promoter

Betty Luan’s experience with the Health Promoter Program has been eye-opening and rewarding. She enjoys working with traditionally isolated populations and helping to develop awareness and trust with community members.

Betty and other health promoters participate in various trainings and educational sessions relating to the leading health concerns among Asian Americans, cultural competency and effective outreach strategies. Health promoters are also well trained to perform a number of health screenings (e.g. bone density, carbon monoxide). Annually, AAHI also organizes a comprehensive training retreat for health promoters to revisit and recommit their duties as community leaders. “I, myself, learn a lot. I get to meet and work with people who have the same passion for helping our community as I do. We all come from so many different backgrounds, languages, religions—we teach and learn from one another,” Betty expresses.

AAHI’s Health Promoter Program was developed to train and organize committed community members to address health issues of concern impacting Montgomery County’s Asian American population. Also known as “community health workers”, these lay individuals serve as gatekeepers to the numerous diverse Asian American populations in the County. Health promoters come from the community in which they outreach and encourage the overall well-being of their respective communities, groups who conventionally experience obstacles to adequate health resources and services. They are bilingual and bicultural active community members who help to bridge the information gap between their respective community and AAHI and other County entities.

Through their volunteerism, health promoters demonstrate a passion and commitment to improving the health of the Asian American community. To educate the diverse Asian American community, AAHI’s health promoters are trained to inform about health topics that deeply affect Asian Americans. As the eyes and ears of AAHI in the community, health promoters continually involve and inform AAHI on the needs of their communities so programs can be better tailored.
Through AAHI’s support and preparation, Betty feels she has been able to impact many lives. She and her fellow health promoters assist in planning and preparation for outreach events, including setting up free bone density screenings. “We remind people that the bone density screening machine is not diagnostic, however. It provides an assessment of a person’s risk of developing osteoporosis, which is a leading health concern among Asian Americans,” remarks Betty. After each screening, health promoters provide each community member one-on-one education on their individual risks, preventative measures and treatment options for osteoporosis. She and other health promoters hope these types of health promotion activities engage and empower community residents to be more aware of their own health and the health of their families and community.

As a health promoter, Betty wishes to strengthen collective community actions and enhance personal responsibility to take preventative measures to avert the onset or worsening of a health condition. “While this seems straightforward, it is often overwhelming for low-income families, and/or limited-English proficient individuals to achieve. That’s why I am a health promoter,” she stresses. Health promoters have influence and capacity to help increase awareness on key health issues to their respective communities. “We teach women how to perform breast self exams so they can teach their loved ones; we provide educational materials on hepatitis B in multiple languages in the hopes they’ll pass it along,” says Betty.

“Language and culture are huge barriers,” comments Betty, “There is a tremendous need for people who are familiar with a community’s customs and mode of communication. Asian Americans can be hesitant to ask for help, so they need people who understand them to help.

Betty also sees her role as a link to community leaders and partners. “I hope to empower people to advocate for their own health to decision-makers and get involved locally,” she says. Motivated volunteers like Betty are invaluable to both AAHI and the Asian American community.
With deep roots in the community, CCACC has intimate knowledge and trust with those they serve. Trust is a key element when working with diverse and often underserved communities. AAHI has had the privilege of working with CCACC on various collaborative efforts to empower the Chinese American community in defining their own health priorities and supporting them to take active steps to address health conditions that disproportionately affect the population.

“CCACC has seen a tremendous growth in the last 15 years because of the growing collaborations with local groups,” states Mr. Meng K. Lee, CCACC Board of Directors Chairperson. The mutual partnership between AAHI and CCACC allows both organizations to leverage their resources through collective teamwork and organization. “Working with others allows us to achieve what we cannot do on our own,” Mr. Lee adds.
To address the growing hepatitis B epidemic affecting the Asian American community, AAHI sought to work closely with the local community to raise awareness about the “silent killer.” Hepatitis B has been a priority area since AAHI’s inception, as an estimated 1 in 10 Asian Americans are living with hepatitis B. CCACC was AAHI’s main community-based partner in a pilot project to provide hepatitis B education, screening, and referral to vaccination or treatment to the Chinese American community in the County.

After months of planning, AAHI, CCACC and several other collaborators launched a comprehensive and engaging hepatitis B pilot project in January, 2010. Acknowledging the heavy burden of hepatitis B in the Chinese American community, CCACC worked closely with AAHI to plan, implement and evaluate the many phases of the pilot project. “CCACC was actively engaged in reaching out to our networks, mobilizing community efforts, delivering health education, conducting trainings and providing interpretation services,” Mr. Lee mentions.

First, an interactive educational session provided an overview of the disease, including risk factors, symptoms, transmission, prevention and treatment. Then, participants were offered hepatitis B screening via venipuncture. In the following weeks, participants received comprehensive, individualized follow-up consultations based on their screening results. Participants were provided referrals to appropriate vaccination or medical treatment options as needed.

The project was an important step in addressing the unmet need for culturally and linguistically competent hepatitis B services and healthcare providers for Asian Americans in the County. “This event was empowering for both us and the community we serve. Not only did we learn how to address the stigmas associated with hepatitis B, but we learned that we have to be extremely proactive with our own health,” reveals Mr. Lee.

Like the Chinese proverbs states, “I hear and I forget; I see and I remember; I do and I understand,” AAHI is committed to connecting with community members and groups to promote health education through the power of community engagement. “After working with AAHI to organize this project, I believe CCACC is more equipped and able to continue similar efforts to eliminate the burden of hepatitis B in our community. Now that we feel empowered, we hope to pay it forward through our future health events,” says Mr. Lee.
AAHI’s Health Promoter Program trains and coordinates bilingual and bicultural community volunteers who assist program staff to develop cultural awareness about health in the community, identify community partners, and provide language assistance during outreach events.

HEALTH PROMOTER PROGRAM

- **33 Health Promoters**
- **16 Languages and Dialects Spoken**
- **10 Communities Represented**
- **7 Trainings Attended**
- **560 Hours of Outreach**
- **17 New Health Promoters in FY10**
- **15 Health Promoters with 3+ Years in the Program**
AAHI believes community outreach is a pivotal component of implementing successful health promotion and education programs among Asian Americans, especially among underserved and isolated groups. Outreach efforts also connect eligible residents to free or low-cost health screenings and medical referrals in the area.

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<tr>
<td>EDUCATIONAL ENCOUNTERS</td>
<td>2473</td>
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<td>LITERATURE DISTRIBUTED</td>
<td>6825</td>
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<td>HEALTH SERVICE REFERRALS</td>
<td>119</td>
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<tr>
<td>HEALTH SCREENINGS PERFORMED</td>
<td>372</td>
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In January of 2010, AAHI, in partnership with the Chinese Culture and Community Service Center, piloted a hepatitis B project in the Chinese American community in Montgomery County. The project provided free hepatitis B education, screenings, and referrals to vaccination or treatment to County residents over the age of 18, regardless of income level or insurance status. Qualitative and quantitative data collection tools were developed to analyze and evaluate the project. A program evaluation report is currently under development to share important findings with the community.

**HEPATITIS B OUTREACH PILOT PROJECT**

| **Participants** | 121 |
| **OF HEPATITIS B INFECTED PARTICIPANTS CONNECTED TO FOLLOW-UP CARE** | 100% |
| **OF PARTICIPANTS ENCOURAGED FAMILY AND FRIENDS TO GET SCREENED** | 81% |
| **OF PARTICIPANTS REPORTED OVERALL SATISFACTION WITH THE PROJECT** | 97% |

*DATA FROM FINAL EVALUATION SURVEY CONDUCTED 6 MONTHS POST SCREENING AND EVALUATION DAY*
AAHI collaborated with Holy Cross Hospital to increase awareness about the H1N1 flu virus and provide information on local clinics offering vaccinations. The H1N1 Outreach Project served as an opportunity for AAHI to reach out to smaller, isolated Asian American communities on a time-sensitive public health concern. This project utilized the intimate knowledge of AAHI health promoters to help identify and outreach to County locations where diverse Asian American populations gather. Sites included places of worship, restaurants, salons, grocery stores and ethnic language schools, to name a few.

H1N1 OUTREACH PROJECT

| LOCATIONS REACHED | 87 |
| EDUCATIONAL ENCOUNTERS | 572 |
| LITERATURE DISTRIBUTED | 5735 |
AAHI educates the community about the importance of breast health in a culturally competent manner that reduces the stigmas and fears associated with breast cancer screenings. In partnership with Holy Cross Hospital and other community-based organizations, AAHI promotes the Komen Community Assisted Mammogram Program (KCAMP). Through the program, AAHI links eligible low-income and uninsured women to preventative breast cancer screenings and treatment in the area. By empowering women to take proactive steps against breast cancer, this program is extremely beneficial for underserved communities in the County.
PARTNERSHIPS AND COLLABORATION
PARTNERSHIPS AND COLLABORATION

AAHI has developed a robust base of partnerships and collaborations with Asian American community- and faith-based organizations throughout Montgomery County and at the state and national levels. Collaborative work is extremely important in building a healthy community, especially considering the overlap of social and economic factors that impact health and well-being. Meaningful partnerships impact all those involved. As part of a collective effort, partners learn from one another and share the responsibility of reaching a common goal. AAHI believes collaborations create ripple effects in the community, empowering organizations to make a positive impact in underserved communities.

In FY2010, AAHI continued to build public-private partnerships with local initiatives, the health care delivery system, the business sector, and social welfare agencies. Such endeavors not only facilitate mutual understanding of each group’s respective constituents, but can increase resource-sharing, minimize duplication of services and improve efficiency and utilization of health resources for all. This year, AAHI also provided consultation to assist partners with incorporating a comprehensive vision of health and well-being into their organization mission. AAHI looks forward to strengthening existing collaborations and forging new opportunities in the future.
As Vice President of Community Health at Holy Cross Hospital, Wendy Friar, RN, MS, oversees the hospital’s community health and wellness education programs. To provide quality health education to benefit the local community, the hospital relies heavily on collaborations with health-related groups representing various communities and faiths from the public, private, and non-profit sectors.

In collaboration with Holy Cross Hospital, Community Ministries of Rockville, CASA de Maryland, the African American Health Program, and the Maryland Commission on Indian Affairs, AAHI participates in the Minority Empowerment Communities Project (MCEP) to build capacity in racial and ethnic communities through empowerment and education.

“Everyone brings value to these efforts. There is no way one organization can do it all,” states Ms. Friar, “We want to co-lead,
working with our partners to collectively achieve our respective missions and goals.” Ms. Friar repeatedly emphasizes the importance of partnerships and collaborations as she feels that there is great strength in numbers to support vulnerable communities. “It sweetens the pot when you work together,” she points out, “We have learned so much together, we have seen such progress to where we are now.”

AAHI and other partnering organizations share important cultural values and intimate knowledge of the health challenges faced by their respective communities. In turn, Holy Cross Hospital imparts the tools and resources for successfully reaching out to these populations. “It’s the blend of cultures and expertise that makes things happen,” explains Ms. Friar, “We all come from different places, the richness that people bring from experience is highly motivating.”

By working with AAHI and other groups on the breast health and mammogram assistance program, Holy Cross Hospital also gains insight into the cultural stigmas associated with preventative care and breast cancer. “It takes a whole team to make it happen. We all bring different perspectives and resources to the table and then we complement one another,” says Ms. Friar.

Together, AAHI and other partners collaboratively plan and host health fairs, workshops, and conferences throughout the year. “These collaborative projects are rooted in community engagement and teamwork,” Ms. Friar describes, “The learning and relationships that we’ve built with AAHI and other partners are important. We wouldn’t have this kind of intimacy and understanding with other groups if not for these opportunities.”

The partnership of AAHI and Holy Cross on these programs has been an invaluable experience for both parties. “Working with AAHI has opened a whole new world for us. AAHI has brought ideas of social media and technology paired with cultural pieces and education on the diversity of the Asian American communities,” she says.

Through fruitful, meaningful partnerships, organizations are able to build their capacity for outreach and education, which then builds the community’s capacity and engagement. When organizations come together with a foundation of trust and a vision for a healthier community, the possibilities are endless.
In FY10, AAHI launched an e-newsletter, planned to enhance its multilingual website, and ventured into the world of social media.

AAHI uses these platforms to share educational materials and to regularly update its partners and community with upcoming events, photos, local workshop information, training opportunities and other relevant and helpful information.

The e-newsletter sends regular updates to a listserv of over 1,000 subscribers. The website and social media allow AAHI to network with and reach out to a variety of individuals and organizations.
WORKGROUP PARTICIPATION

- Healthy Montgomery Community Health Improvement Process
- Hepatitis B-Free DC Network- Co-Chair
- Maryland Asian American Cancer Program, Johns Hopkins Bloomberg School of Public Health and University of Maryland School of Public Health- Community Advisory Board Member
- Montgomery County Cancer Coalition
- Montgomery County DHHS Health Equity Initiative
- Montgomery County Tobacco Free Coalition
- National Institutes of Health, National Institute of Arthritis and Musculoskeletal and Skin Disease - Multicultural Outreach Workgroup
PARTNERSHIPS AND COLLABORATION

LOCALLY, STATE AND NATIONAL COLLABORATORS

- African American Health Program
- African Women’s Cancer Awareness Association
- American Cancer Society
- Asian American Anti-Tobacco Foundation
- Asian American Lead
- Asian Indians for Community Service
- Asian Pacific Islander Caucus for Public Health in official relations with the American Public Health Association
- Asian Pacific Partners for Empowerment and Leadership
- Bethany Presbyterian Church
- Boat People, SOS
- Burma American Buddhist Association
- Cambodian Buddhist Society
- Casa de Maryland
- CCACC Pan Asian Volunteer Health Clinic
- Chinese American Senior Services Association
- Chinese Bible Church of Maryland
- Chinese Culture and Community Service Center, Inc
- Cigarette Restitution Fund Program
- Circle of Rights
- Community Ministries of Rockville
- Cross Cultural Infotech
- Crusader Lutheran Church
- Ebenezer Korean Church
- G.O.S.P.E.L. Program
- Gaithersburg Chinese Alliance Church
- Global Mission Church
- Guru Nanak Foundation of America
- Hepatitis B - Patient Advocacy Liaison Program, Bristol-Myers Squibb
- Hepatitis B Initiative-DC
- Hepatitis B Taskforce
- Holy Cross Hospital
- International Buddhist Center
- Islamic Center of Maryland
- Korean Community Services Center of Greater Washington
- Korean Presbyterian Church
- Latino Health Initiative
- Long Branch Senior Center
- Maryland Commission on Indian Affairs
- Maryland Department of Health and Mental Hygiene, Center for Health Promotion Maryland Department of Health and Mental Hygiene, Office of Minority Health and Health Disparities
- Maryland Vietnamese Mutual Association
- Mobile Medical Clinic
- Montgomery College
- Montgomery County Gastroenterology
- Montgomery County Office of Human Rights
- Montgomery County Office of Community Partnerships
- Montgomery General Hospital
- Muslim Community Center
- NIH, National Cancer Institute
- NIH, National Institute of Arthritis and Musculoskeletal and Skin Diseases
- New Covenant Fellowship Church
- Nueva Vida
- Organization of Chinese Americans- DC Chapter
- Our Lady of Vietnam Church
- People’s Community Wellness Center
- Primary Care Coalition of Montgomery County
- Shady Grove Hospital
- St. Rose of Lima Church
- Suburban Hospital
- Tzu Chi Foundation
- U.S. Census Bureau
- University of Maryland School of Public Health
- Viet Nam Medical Assistance Program
- Washington Adventist Hospital
- Washington Japanese Alliance Church
- Washington Kali Temple
- Wat Thai Washington, DC
- Woman’s Cancer Control Program
DATA COLLECTION AND REPORTING
DATA COLLECTION AND REPORTING

Disaggregated data is essential to illustrate the state and welfare of Asian Americans and subgroup communities. Routine data collection and reporting may improve the visibility of important health issues impacting Asian Americans and can help health care professionals, providers and policymakers prioritize these issues in the programming and decision-making processes.

Unfortunately, there continues to be a scarcity of data representing the dozens of Asian American subgroups locally and beyond. In order to monitor the health status of Asian American residents in Montgomery County, the Asian American Health Initiative is committed to addressing these data gaps.

In FY10, AAHI continued to collect data that has local impacts and support the improvement and usability of disaggregated data collection reflecting the local health profile of Asian American residents in the County. To delve deeper into the health concerns of the community, AAHI continues to work alongside its partners to gather data through outreach events, health screenings, and other programmatic efforts.

The data collected and reported serves to tailor, evaluate, and monitor the progress and impact of AAHI programs and initiatives. AAHI also ensured widespread dissemination of important information to stakeholders and partners through its website, newsletter, local community meetings, professional conferences and academic settings.
Dr. Sunmin Lee is a member of AAHI’s Steering Committee and chairs the Committee’s Data Workgroup. She has worked with AAHI to support data collection efforts in the community, specifically as the principal investigator of AAHI’s 2008 health needs assessment report, *Asian American Health Priorities: Strengths, Needs, and Opportunities for Action*.

The 2008 health needs assessment was the first of its kind to understand and illustrate the health needs of 13 Asian American subgroups in Montgomery County. The report provides insight on the health needs of the community and proposes recommendations to improve the health and well-being of Asian Americans.

As an assistant professor in the University of Maryland School of Public Health’s Department of Epidemiology and Biostatistics, Dr. Lee recognizes the importance of having local data available for furthering research and programming initiatives to better serve the Asian American community. Generally, health data for Asian Americans is compiled in aggregate form.
“When data from all Asian subpopulations are lumped together, it often masks what the reality is. The term ‘Asian American’ includes dozens of nationalities each with its own distinct languages, religions, and ways of life,” explains Dr. Lee.

She provides an example to illustrate this point: smoking tends to be low among the Asian American population as a whole when compared to other racial classifications. However, if you look at certain subgroups, some have higher smoking rates than the national average, such as Vietnamese Americans. Because their smoking rates are constantly averaged with other Asian American groups, it is not deemed a health issue. As a result, statisticians, policymakers and health care providers often do not prioritize smoking as a health behavior impacting certain Asian American subgroups. Thus, fewer resources are allocated towards eliminating the disparity. A similar trend applies to other health conditions including cervical cancer, diabetes, and hepatitis B.

“Additionally, some national surveys tend to be only available in English, failing to capture data on all the Asian American communities and/or individuals that have limited-English proficiency,” remarks Dr. Lee. Overall, national efforts are also very limited when it comes to capturing data on each Asian American sub-community. Lack of disaggregated data on each unique Asian American subgroup may lead to inaccurate interpretations.

With the support of its Steering Committee and partners, AAHI diligently works towards eliminating health disparities by enhancing data collection strategies and reporting information to multiple stakeholders. AAHI prioritizes efforts to continually assess and identify health priorities and outcomes, and determine how to effectively and efficiently allocate resources. “It is imperative that local efforts and national studies continue to include under-represented groups.” Dr. Lee comments.

She also serves as the AAHI Steering Committee representative on the Healthy Montgomery Steering Committee to provide guidance and support in the community health improvement process. Healthy Montgomery is a collaborative effort with public agencies, hospitals, foundations, and non-profit organizations, to establish an ongoing, sustainable method for better understanding and addressing health disparities and related health issues at the County level. “Much work remains in data collection and dissemination efforts for the Asian American community. With the continued work of AAHI, there is hope that everyone’s voice will be heard,” says Dr. Lee.
DATA COLLECTION AND REPORTING

HEPATITIS B PILOT PROJECT EVALUATION REPORT
In FY10, AAHI piloted a hepatitis B education, screening, and referral to vaccination or treatment project in the Chinese American community in Montgomery County. Qualitative and quantitative data collection tools were developed to analyze and evaluate the project. An evaluation report is under development to share important findings with the community.

STORYBOOK PROJECT DEVELOPMENT
As a continuation of the 2008 health needs assessment, AAHI began development on a project to collect personal stories from the Asian American community to illustrate the true “stories behind the statistics.” The launch of “Voices Among the Silent: Stories of Struggle and Strength from Asian Americans in Montgomery County, Maryland” is slated for late 2010.

STRATEGIC PLAN 2011-2015 DEVELOPMENT
In FY10, AAHI began formulating a strategic plan to define and guide the program’s development between 2011 and 2015. The anticipated release is in early 2011.

HEALTHY MONTGOMERY
AAHI participates in the Healthy Montgomery community health improvement process. The mission of Healthy Montgomery is to achieve optimal health and well-being for Montgomery County residents through a consensus-driven approach that identifies and addresses key priority areas that improve the health and well-being of the community.
PROFESSIONAL PRESENTATIONS

OCTOBER 2009
New York University, Center for the Study of Asian American Health 5th Annual Asian American Health Conference: Reinvesting in Our Communities for Health Equity
Presentations:
1. Translating Findings from Needs Assessment to Action: A 5 Year Strategic Plan
2. Patient Navigation Program: Health Services for All

OCTOBER 2009
International Medical Interpreters Conference
Presentation: Medical Interpreting in Mental Health

OCTOBER 2009
Linkages-To-Learning Meeting
Presentation: Introduction to Health Among Asian Americans in Montgomery County

NOVEMBER 2009
American Public Health Association 137th Annual Meeting & Exposition
Presentation: A Model to Help Eliminate Health Disparities among Diverse Asian Americans

DECEMBER 2009
Montgomery General Hospital
Presentation: Health and Health Care Disparities for Asian American, Latino, and African American Communities in Montgomery County

DECEMBER 2009
Morgan State University School of Community Health and Policy
Presentation: Asian American Health Disparities

JUNE 2010
Holy Cross Hospital, Cancer: It Does Not Discriminate Conference
Presentation: Patient Navigation: The ABCs of Communication
PROFESSIONAL DEVELOPMENT

Professional development encompasses a variety of facilitated learning opportunities, ranging from college degrees to formal coursework, conferences and hands-on learning settings.

Specifically, internships can contribute to the positive development of future public health professionals by providing firsthand experience in a real-world setting. Students who complete internships are exposed to an array of opportunities, ranging from personal and professional skill development to networking and the application of theory to practice.

Taking advantage of an internship as a student provides an opportunity to explore a field of study and garner practical work skills.
Prior to starting her freshman year of college, Deborah Ngan interned with the Asian American Health Initiative. Filled with enthusiasm and a willingness to learn, Deborah had the opportunity to conduct health education outreach in the community and to work on a variety of health-related projects and programs. Through her involvement, Deborah believes she gained a better understanding of the healthcare needs and health disparities faced by Asian Americans in Montgomery County. She witnessed how AAHI’s programs are not only designed to fit the language and culture of each community, but are also designed to empower the communities.

“As interns, we worked side by side with the AAHI staff. We contributed to numerous projects of public health importance and were also given the opportunity to lead a culminating project,” comments Deborah. She and other interns also performed outreach to the local community as part of the AAHI Internship Program. One of her most memorable events was the Kaiser Permanente Bridge Program Open House. She and the intern team assisted AAHI and

The goal of the Asian American Health Initiative’s Internship Program is to provide students and recent graduates with hands-on experience and insight into the dynamics of community health.

The AAHI Internship Program presents students with a multifaceted opportunity to learn about public health from a local perspective. From skills trainings to participating in local professional development workshops to supporting outreach activities, AAHI provides a dynamic and comprehensive program.

AAHI highly values the internship experience for growing young professionals and presents them various opportunities to obtain skills and knowledge for development and career enhancement. AAHI creates an environment whereby interns can work directly with diverse, underrepresented and underserved communities, advancing a more culturally competent work force.

In the unique and evolving nature of public and community health, AAHI fosters an environment for professional growth, skill development, and health-related trainings that aim to empower interns and give them tools of success in the future.
the Patient Navigator Program in the planning and execution of the open house enrollment event for eligible Asian Americans at AAHI’s office in Rockville.

The Kaiser Permanente Bridge Program was a subsidized health insurance program for eligible individuals and families. AAHI coordinated interpreters and Kaiser Permanente enrolled participants. This event had a profound impact on Deborah. “Seeing the faces of people as they were told they could obtain health insurance coverage was unforgettable. I used to take having health insurance for granted; now I don’t. Through my internship, I really felt like I helped make a difference in the community,” she says. It was indeed a remarkable event for AAHI staff and interns alike.

In addition, Deborah had opportunities to participate in public health leadership and educational events such as trainings, webinars, and conferences. One such event was Maryland Department of Health and Mental Hygiene’s (DHMH) Annual Health Disparities Bazaar. The conference provided a platform for health-related organizations to gather and discuss the impact of health disparities on their respective communities. AAHI exhibited with a poster presentation. “It was an honor to be at such an event,” Deborah said, “It was a great chance to build my networking and public speaking skills, especially when addressing established healthcare professionals.”

She believes that her AAHI internship was extremely educational, gratifying and life-changing. “The internship allowed me to develop my research, writing, and presentation skills, both in a professional setting and out in the community. I think it will really help me when I start college in the fall and think about my future career in biology, or maybe even public health!” exclaims Deborah.

AAHI actively strives to empower its interns and help them sharpen skills to tackle any field of study, not just health. Interns are outfitted with the necessary tools and resources to reach out to the community and provide education and information on resources and services pertaining to health. “My advice for a future intern is to take advantage of all the opportunities you are given during the internship,” Deborah expresses.

AAHI has made tremendous strides working with the community, building partnerships and empowering Asian Americans to proactively work towards good health and wellbeing. With the support of its interns and volunteers, AAHI has a stronger team to fulfill its mission for a healthier community.
Sau Kuen Lesley Fung, MS  
George Washington University, School of Public Health and Health Services, Master of Public Health student
- Conducted formative research towards the design and implementation of an effective hepatitis B screening program for Chinese Americans in Montgomery County
- Lesley’s AAHI project was awarded the “Excellence in Culminating Experience Award for Health Promotion” by her graduate program department.

Josephine Tong  
Walt Whitman High School, Montgomery County Public Schools, Superintendent’s Leadership Program
- Assisted with outreach planning and program implementation

Trang Vuong  
University of Maryland College Park, Biological Science
- Created hepatitis B educational materials for the hepatitis B pilot project
- Initiated the AAHI blog to communicate with volunteers and partners

Stephanie Wong, MA  
George Mason University, Clinical Psychology, Doctoral student
- Researched and developed informational resources and articles on a range of mental health issues
SPRING 2010 INTERNS

Atyya Chaudhry  
*University of Maryland College Park, School of Public Health*

Sanjana Quasem  
*University of Maryland College Park, School of Public Health*
- Assisted with the planning and implementation of the H1N1 Outreach Project
- Developed AAHI social media and health communication tools

Kristina Yee  
*University of Maryland College Park, School of Public Health*
- Assisted with the implementation of the hepatitis B pilot project

SUMMER 2010 INTERNS

Shazra Azeez  
*University of Maryland College, Park School of Public Health*

Arina Kadam  
*University of Maryland College, Park School of Public Health*

Deborah Ngan  
*Magruder High School*
- Completed a PhotoVoice project to highlight the variety of linguistically tailored resources and services provided by the County. PhotoVoice is an emerging participatory tool in the field of public health to empower communities to share ideas and concerns
AAHI STAFF PROFESSIONAL DEVELOPMENT

- May 2010, AAHI staff was invited to attend the National Council of Asian Pacific Islander Physicians (NCAPIP) 2nd Annual National Conference in Crystal City, Virginia. The conference theme was Moving Forward on Health Reform: Building Partnerships, Achieving Health Equity.

- June 2010, Perry Chan received a professional scholarship to attend the Asian Pacific Partners for Empowerment, Advocacy and Leadership (APPEAL) Conference in San Francisco, California. The theme of the conference was Sharing Strategies for Sustainable Change: Tobacco and Food Justice for Native Hawaiians, Pacific Islanders and Asian Americans (NHPIs and AAs).
AAHI STEERING COMMITTEE

In FY10, the AAHI Steering Committee was comprised of 12 professionally and ethnically diverse stakeholders from the local community who advocate, advise, and assist AAHI with its efforts to eliminate health disparities in Montgomery County. The dedicated members of the Steering Committee provide a wealth of expertise and intimate knowledge of their respective communities.

STEERING COMMITTEE ACCOMPLISHMENTS

• Volunteered more than 570 hours in support of AAHI’s programmatic efforts
• Advocated on behalf of AAHI to support programming that directly and indirectly addresses Asian American health disparities
• Advised AAHI and coordinated training opportunities on data collection
• Assisted AAHI in the planning phase of the hepatitis B pilot program
• Provided advice in the development of AAHI’s community storybook project
• Offered expertise and guidance in the development of AAHI’s Strategic Plan 2011-2015
• Forged new partnerships and opportunities for collaboration through networking efforts
• Provided support to County-wide initiatives such as the Healthy Montgomery community health improvement process
• Served as liaison between AAHI and Asian American advocacy groups, including the Asian American Advisory Group to the County Executive and the Maryland Governor’s Commission on Asian Pacific American Affairs
• Collaborated with leadership of the African American Health Program and Latino Health Initiative to advocate for funding for activities and programs that address minority health inequities
• Completed day-long annual training related to their roles as advocates and advisors for AAHI
• Met with Montgomery County Council members and County Executive to share AAHI accomplishments throughout the year

Chair: Harry Kwon, PhD, MPH, CHES
Montgomery County Resident

Vice Chair: Meng K. Lee
Chinese Culture and Community Service Center, Inc.

Members:
Anis Ahmed
Bangladeshi Community
Montgomery County Government
Hoan Dang
Maryland Vietnamese Mutual Association
Nerita Estampador-Ulep, MD, FAAP
Montgomery County Government
Wilbur Friedman, JD
Organization of Chinese Americans- DC Chapter
Lewis Hsu, MD, PhD
Montgomery County Resident
Michael C. Lin, PhD
Asian American Political Alliance
Alvin Madarang, MD
Philippine Medical Association
Sam Mukherjee, PhD
Asian Indians for Community Service, Inc.
Anthony Tran, MPH, MT
Montgomery County Resident
Sovan Tun, PhD
Cambodian Buddhist Society, Inc.
HOW TO GET INVOLVED

HEALTH PROMOTERS
Applications for the Health Promoter Program are accepted on a rolling basis. Health promoters are trained by AAHI in areas of health education, health resources, and County and AAHI services. Health promoters, in turn, educate and connect their communities to these sources. For more information about the program, or to apply, visit the AAHI website www.AAHIinfo.org to download an application form.

VOLUNTEERS
Volunteers have the opportunity to assist with health fairs and outreach events. Participation ranges from translation and cultural competency support to event planning and implementation. AAHI is continually searching for dedicated volunteers. Please contact AAHI staff if you are interested.

COMMUNITY PARTNERS
AAHI has long-standing partnerships with many community- and faith-based organizations. With these organizations, AAHI plans health events and participates in cultural festivities. If you are interested in partnering with AAHI, please contact AAHI staff.

INTERNS
AAHI seeks interns during the summer, fall, and spring semesters. Interns have a multifaceted opportunity to assist staff with research, develop educational materials, and implement outreach programs. Interns gain hands-on experience in the areas of public and community health. If you are a current student or recent graduate interested in a meaningful internship at AAHI, visit the AAHI website for details and to download an application form.

STEERING COMMITTEE MEMBERS
The AAHI Steering Committee is comprised of a professionally and ethnically diverse group of stakeholders from the local community who advocate, advise, and assist AAHI with its efforts to attain health parity in Montgomery County. The dedicated members of the Committee provide a wealth of expertise and intimate knowledge of their respective communities. AAHI is currently recruiting additional members who can actively support the organization to achieve its mission and goals. If interested, please download an application form from the AAHI website.
ACKNOWLEDGEMENTS

AAHI would like to express its deep appreciation to the County Executive, members of the Montgomery County Council, the Department of Health and Human Services, the AAHI Steering Committee, community partners, staff, and volunteers for their unwavering support during the 2010 fiscal year.

AAHI STAFF
Chun Man (Perry) Chan
Senior Program Coordinator

Atyya Chaudhry
Program Coordinator

Sanjana Quasem
Program Coordinator

Jamie Lok Weng, MPH, CHES
Program Specialist

SPECIAL THANKS
Betty H. Lam
Chief, Office of Community Affairs
Montgomery County Department of Health and Human Services

Craig Lassner, MPP
Project Consultant

CONTRIBUTOR
Nitasha Chaudhary, MPH

DESIGN
Ann Bevans Collective

CONTACT INFORMATION
Asian American Health Initiative
Montgomery County, Maryland
Department of Health and Human Services
1335 Piccard Drive, Lower Level
Rockville, MD 20850
Telephone: (240) 777-4517
Fax: (240) 777-4564
Website: www.AAHinfo.org
General Information: info@aahiinfo.org

AAHI would also like to recognize the significant contributions of Ms. Julie Bawa, outgoing AAHI program manager. Since joining the MC DHHS in 2002, Ms. Bawa spearheaded many departmental efforts around serving the Asian American residents in the County, including the inception of AAHI in 2005.

Under Ms. Bawa’s leadership, AAHI developed culturally and linguistically appropriate health programs and completed the first health needs assessment of 13 Asian American subgroups within the County.

The AAHI staff, Steering Committee, and partners extend their heartfelt gratitude for her pioneering vision, support, and dedication to the health and well-being of Asian Americans in Montgomery County.