

What is New in Health Care Among the APIA?

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Did you know that Asian Pacific and Islanders Americans (APIA) represent only 4% of the US population? Did you know that their death rates for Cancer and hepatitis B are upward of 50% of the total number of cases in the general population? Did you know that this shocking death rate could be drastically reduced if more preventive screening and immunization can be made available to the new immigrants and their families?

At the Fifth Annual Senator Raymond M. Murphy Health Conference in Ann Arbor and in Detroit, on September 15, 17 and 18. Health disparities issues among minority population will be the subject of discussion during the 3-day conference. Policies for governmental action will be proposed on the Policy day at the Michigan League, Ann Arbor Michigan. Community health topics and free health screening are offered on September 17 and 18 at the Unity Baptist Church on 7500 Tireman Street, Detroit.

In addition to economic and educational disparities among the various minority groups in the U.S., health care is also known to be severely lagging behind for Blacks, Hispanics, Asians and Native Americans. Health providers have been challenged to create innovative health systems to improve the quality of care for the most disadvantaged population.

What is needed is for the health care system in the US to adopt a health delivery system which is culturally friendly and more efficient in serving the health care needs of the minorities population and in particular the Asian population.

Health care specialists have agreed that elements of what culturally competent care consists of have been identified as:

- The Caring concept for each of the particular culture must be clearly defined
- Providers must deliver culturally sensitive programs and services
- Providers must become knowledgeable of the cultural characteristics of the population they work with
- Providers must be able to determine the needs and problems of the target population using cultural skills

Even though the facts of high death rates for Hepatitis B and Cancer among Asians has been published in the health statistics kept by the US government, not enough is being done on the national level to deal with these problems. However worthy programs that have been reported are:

- The Hepatitis B Initiative in Boston. The Program was launched and operated by Harvard medical students in 1997. By 2004 other Boston area students joined in and together they have reached over 1000 Boston Chinatown area residents. Of these 40% are deemed susceptible for hepatitis B. The report indicates that over 40% of the recipients learned about the program through friends.

- A Chinese Dementia Specialist Education program, reported in 2002 Home Health Care Quarterly, utilized the well-established community health “Train the trainer” approach. This method was found to be particularly suitable for the delivery of culturally competent care. Program was launched in the greater Boston area in 2000. The program trained bilingual health care providers fluent in English, Mandarin and Cantonese to identify, assess and serve people with dementia and their families.
- In Michigan, we have Dr. Mei-Yu Yu’s Healthy Asian American Project. Dr. Yu addressed the problem of breast cancer and cervical cancer in Michigan Asian women. She found out that the death rate for these two types of cancer was far greater among Asian women as compared to Caucasian women. She too used a “train the trainer” approach as a strategy to reach out to the Asian community. Her program was named the Lay Health Advisors (LAH) program. The program will be launched on September 25, 2004 and will be publicized in area Asian language papers.

The Senator Raymond M. Murphy Health Conference is an annual event and you can click on www.aahi.org for more information.

For comment or information about this article, you can e-mail me at marieweng@comcast.net