

Local Agency Assists Refugees in Smoking Cessation

By Lloyd Asato

It was a Friday morning, and the process was taking much longer than usual. What usually took an hour or so was going into its third hour. The group patiently sat and listened to the instructions from the interpreter. She was explaining the forms they had to fill out and the process they would go through over the next six weeks. This was a new experience for them and for the staff of the Asian Pacific Community in Action (APCA), a community-based organization that provides health education and promotion services to Asian Americans & Native Hawaiian/Pacific Islanders (AA & NHPI) in the greater Phoenix Area.

The APCA staff was meeting in an apartment with a group of refugees from Burma/Union of Myanmar. They were taking part in their first Karen language tobacco quit class – a project put together in a couple of weeks by the APCA outreach staff.

Responding to a request by a community member, the APCA staff adapted the six-week Maricopa County Tobacco Use Prevention Program (MACTUPP) quit class for presentation in Karen language to the group. They have done successful quit classes and telephone support in other Asian languages, and that experience helped their Tobacco Cessation Specialists overcome numerous challenges.



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Smoking is widespread in Burma/Myanmar with some class participants reporting that they began smoking at 10 years-old. However, it was not until coming to live in Arizona that they encountered anti-tobacco messages, programs and social norms. Although community members report that smoking rates amongst this Asian subgroup are very high, specific data is not available. A 1988 study (Routtan and Littlefield) of Laotian refugee men in the U.S. reports tobacco use prevalence as high as 72% (Laos is a neighbor to Myanmar) (continued page 2).

Community Story

Health Disparities Legislative Update: U.S. Congress

By **Rosalinda Castaneda**

The new U.S. Congress – 111th - was scheduled to convene for the first session of the legislative branch on January 6, 2009. There were a number of bills introduced in the 110th that are expected to be carried over to the 111th. These bills have the potential to improve health outcomes and have an impact on health disparities. The following are brief summaries of important federal legislation that will likely be reintroduced in the 111th Congress.

H.R. 3269; SCHIP Reauthorization.

The State Children's Health Insurance Program (SCHIP) was created in 1997 to provide health coverage to children in families who were ineligible for Medicaid or did not have access to private health insurance. Since its inception, SCHIP has been shown to reduce the health care coverage gap for minority children and reduce disparities in access to health care services.

Originally authorized for 10 years, Congress granted a temporary extension of (continued page 5)

Arizona

Health Disparities Center

Mission:

To promote and protect the health and well being of the minority and vulnerable populations of Arizona by enhancing the capacity of the public health system to effectively serve minority populations and reduce health disparities.

Vision:

Health equity for all

We envision a state where each person has equal opportunity to prevent and overcome disease and live a longer, healthier life.

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The quit classes continued for six weeks. The APCA Tobacco Cessation Specialists partnered with a bilingual member of the Burmese community to conduct the classes and counseling. In the end, nine community members completed the program with seven reducing the amount they smoked and two quitting smoking altogether. Ongoing telephone counseling and support is proving to be a challenge as some community members do not have phones, and it is difficult and costly to arrange interpretation services.

On average, smoking rates for AA & NHPI are lower than rates for the general U.S. population. However, a closer examination of specific sub-group data by gender shows a much more complex story. The World Health Organization reports 65% of Tongan men smoke compared to 14% of Tongan women. In Maricopa County, data from a randomized telephone survey conducted by APCA indicate that 30% of Vietnamese men smoke, compared to 1% of women.

Unfortunately, the Arizona Youth Tobacco survey does not include a large enough sample of AA & NHPI middle school students to estimate smoking rates within this group. This lack of data is a barrier toward targeting, developing and evaluating intervention programs.

APCA's experience suggests a need for culturally competent linguistically appropriate health programming that meets the specific needs of the diverse community. In addition, there is an urgency to tell the whole story of AA & NHPI health challenges through the collection and reporting of comprehensive age, gender and sub-group-specific data. ♦

ADHS Launches Multivitamin Campaign

By **Zipaty Mendoza** and **Claudia Sloan**

The Arizona Department of Health Services in collaboration with several internal bureaus and divisions has developed a comprehensive campaign targeting Latinas aged 15 – 25 years. The secondary target population is all women of childbearing age. The title of the campaign is “Take Multivitamins” and the main message “Take your multivitamin everyday, it’s an expression of love for yourself.” The campaign’s primary goal is to increase awareness on the importance of consuming 400 micrograms of folic acid daily during reproductive years. The second goal is to increase the percentage of young Latinas who consume folic acid daily.



(Band members: in front: Isaac Garcia; in back from left to right: Ben Woodbury, Manuel Garcia, Dylan Standley and Alma Acosta.)

Campaign components include radio and TV public service announcements (PSAs) which feature a local, young adult pop-rock band in both English and Spanish languages. March of Dimes will assist in disseminating the PSAs across the central and southern parts of the state. Those areas include four counties: Maricopa, Pima, Santa Cruz and Yuma. Additionally, the campaign includes bilingual brochures and posters featuring the youth band’s female vocalist, which will also be disseminated in these target areas.

Baseline surveys have already been conducted to assess the demographics, awareness, knowledge and behaviors relating to folic acid and multivitamins. A mid-year and final survey will be administered in order to evaluate the effectiveness of the campaign.

Community partners and/or organizations are highly encouraged to order and distribute the campaign materials. The campaign materials can be ordered, free of charge, at the campaign’s website (www.takemultivitamins.com). ♦

Conferencia Educates Hispanic/Latino on Diabetes

By **Patricia Harrmann** and **Carmen Ramirez**

Arizona Department of Health Services (ADHS) Diabetes Program partnered with the American Diabetes Association to implement the first ever *Conferencia* in Arizona on November 15, 2008 at South Mountain Community College in Phoenix. Over three hundred participants and volunteers were in attendance.

Educational *Conferencia: De la Cabeza a los Pies* (from Head to Toe) is the American Diabetes Association’s *Por Tu Familia* outreach effort. Diabetes education and optimum health messages were provided to the local Hispanic/Latino Community.

In addition to the educational sessions, *Conferencia* offered a health fair in the afternoon. Attendees were offered free diabetes risk assessments, blood glucose (continued page 4)



(*Conferencia* attendees line up to receive free blood glucose screenings provided by Mountain Park Community Center at Baseline.)

Conferencia educates Hispanic/Latinos on Diabetes - continued from page 3
screening, eye screening and flu shots. Information on medical resources was also provided.

Carmen Ramirez, the Community Program Coordinator for the Arizona Diabetes Program, served as the Chair of this event. She facilitated monthly planning meetings at ADHS with multiple partners.

Conferencia was a labor of love for the Planning Committee and the many volunteers representing various entities providing services to the Latino/Hispanic Community. The collaborating partners were: About Lifestyle, American Diabetes Association, Arizona Department of Health Services, Arizona Foundation for the Eye, Bayer Healthcare-Diabetes Care Division, Catholic Dioceses of Phoenix-Hispanic Ministry, Clinica Adelante, Inc., Concilio Latino de Salud, Inter-Tribal Council of Arizona, Mountain Park Community Health Center and South Mountain Community College. ♦

Establishment of a Center for African American Health in Arizona **Strengthening Health Outcomes and Prevention Efforts in Arizona African American Communities**

**By Beverlee Hall, Gloria Payne, RJ Shannon, Toni Means,
Sharon Jaycox, Patrice Caldwell, Jana Granillo and Brenda Robbins**

The Center for African American Health Arizona (CAAHAz) held its Grand Opening on December 5, 2008 at its temporary location at the City of Phoenix South Central Family Services Center. The City of Phoenix, through City Councilman Michael Johnson, provides free facility space and is commended for their support of the Center. More than 100 people attended the grand opening event including community stakeholders, clergy, doctors, and city, state, and county elected and appointed officials.

The establishment of the Center for African American Health Arizona is the culmination of work generated by the African American Legislative Health Committee (AALHC). Representative Cloves Campbell and Senator Leah Landrum Taylor have championed the cause of better health care for African Americans and continue working to serve the underserved in their districts.

The creation of the Center was initiated by Dr. Paul Underwood, cardiologist. The Center is modeled, with local variations, after the Center for African American Health in Colorado which works extensively with State and local health agencies, the CDC, and 72 faith based organizations to bring health promotion, education and services to African Americans in their state.

The goal of the Arizona Center for African American Health is to eliminate health care disparities among African American Arizonans to improve the health, lifestyle and behaviors of Arizona African



Americans to prevent chronic diseases. The Center will provide outcome data to maintain the momentum of clients, satisfy program goals and funding sources.

For additional information or if you're interested in volunteering or donating, please call at 602-506-6142. ♦



Health Disparities Legislative Update: U.S. Congress - continued from page 2

funding for the program in December 2007, after two presidential vetoes to pass a revised bill. The reauthorization maintained funding at the 2007 funding level, and six million children enrolled in the program were able to retain their health coverage. However, this current authorization is scheduled to expire on March 31, 2009. The SCHIP legislation, similar to the 2007 bill that was vetoed by President Bush, will be a top Congressional priority. The House has approved a bill renewing and expanding SCHIP to about four million additional children. Following the House, the Senate passed a comparable bill, and the only difference was that the House bill included a provision that would prevent new physician-owned hospitals from opening. The House will vote on the Senate bill and then send it to President Obama to sign into law.

H.R. 3014; Health Equity and Accountability Act of 2007.

Introduced in 2007 by Representative Hilda Solis (D-California), this bill is designed to expand access to health care to the underserved and uninsured, and reduce health disparities in vulnerable communities. This bill would ensure accountability by requiring each federal health agency to develop and carry out a national strategic plan to eliminate disparities and improve the health of minority populations. Specifically, the bill is intended to address issues related to language access, workforce diversity, data collection and access to preventive and primary health services in community and rural health centers.

In June 2008, a hearing was held in the House Energy and Commerce Sub-committee on Health, which for the bill's 114 cosponsors, signified progress towards addressing ongoing health inequalities. This was the last legislative action taken on the bill. Should the bill re-emerge in 2009, it will need to get approved in both the Senate and House before getting signed into law by the President.

H.R. 1328; Indian Health Care Improvement Act.

The federal Indian Health Care Improvement

Act (IHCIA) was approved by Congress in 1976, and has since served as the framework for administering the health services provided to American Indians and Alaska Natives. Renewed every 5-7 years, the last version expired in 2001. Reauthorization proposals have been introduced in each successive Congress and none have passed – the IHCIA was last reauthorized in 1992. While the bill has not been renewed, Congress has continued to fund a number of programs under the IHCIA including health services.

H.R. 1328, a bill to amend and reauthorize IHCIA, aims to modernize and improve Indian health care services and delivery, and facilitate greater decision-making regarding program operations and priorities at the local tribal level. The bill would also expand coverage for qualified American Indians and Alaska Natives in the State Children's Health Insurance Program and provide greater opportunities to access Medicare and Medicaid. IHCIA is vital federal legislation that authorizes appropriations for Indian Health Service and efforts to pass H.R. 1328 are certain to continue during the 111th Congress.

To track the status of these bills go to the following websites and type in the bill number:

<http://www.thomas.gov> or
<http://www.govtrack.us/>. ♦

References:

American Public Health Association. *Reauthorization of the State Children's Health Insurance Program (SCHIP): A Key Step to Covering All Kids*. <http://www.apha.org>

Congresswoman Hilda L. Solis. *Legislation H.R. 3014 Health Equity and Accountability Act of 2007*.
http://solis.house.gov/apps/list/hearing/ca32_solis/wida3/soon.shtml

Committee on Energy and Commerce. *Subcommittee on Health Addresses Minority Health Disparities*.
<http://energycommerce.house.gov>

Families USA. *SCHIP and Children's Health Coverage: Leveling the Playing Field for Minority Children*.
<http://www.familiesusa.org>

National Indian Health Board. *IHCIA Reauthorization*. <http://www.nihb.org/staticpages/index.php?page=2005051811243947>

The Henry J. Kaiser Family Foundation. *House Democrats Plan to Vote on Stand-Alone SCHIP Reauthorization Bill*.
<http://www.health08.org/news.cfm>

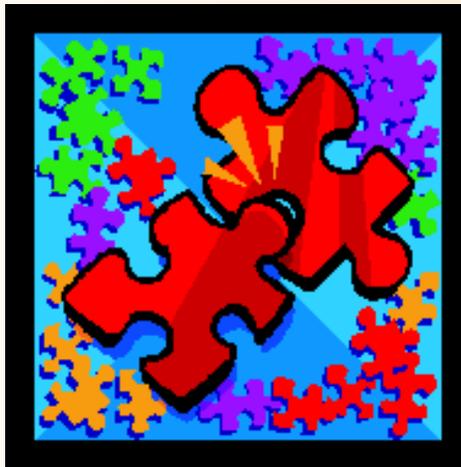
The Library of Congress Thomas. <http://www.thomas.gov>

Emergency Preparedness: A CLAS Action

By Jana Granillo

One of the fundamental strategies to providing culturally competent care is having a diverse workforce that mirrors the demographic composition. Building a diverse volunteer workforce is part of capacity building for emergency planning. Given an event, a volunteer workforce may have a role in the response effort.

An event could include a pandemic illness, flood, fire, power outage, national security, etc. that goes beyond the capacity of first responders. Katrina taught us many lessons about vulnerable populations who are now included in the planning (*preparedness*), response and recovery activities. The Public Health role includes providing support such as medical care for medical needs of victims of major disasters or public health emergencies.



Work is already being done in the counties to identify vulnerable populations, conduct outreach education and revise communication strategies given an emergency event. The work of Arizona's volunteer coordinator will ultimately enhance a network of health care and community volunteers that are diverse. These volunteers strengthen emergency preparedness access to care for vulnerable populations through recruiting and bridging communities.

For more information about the volunteering given an event, contact Antonio Hernandez at antonio.hernandez@azdhs.gov or visit <http://www.azdhs.gov/volunteer> and <http://www.medicalreservecorps.gov/StateCoordinators.asp#>.

For more Emergency Preparedness diversity news, check out the National Resource Center

CLAS Standards

on Advancing Emergency Preparedness for Culturally Diverse Communities from Drexel University, Center for Health Equality at

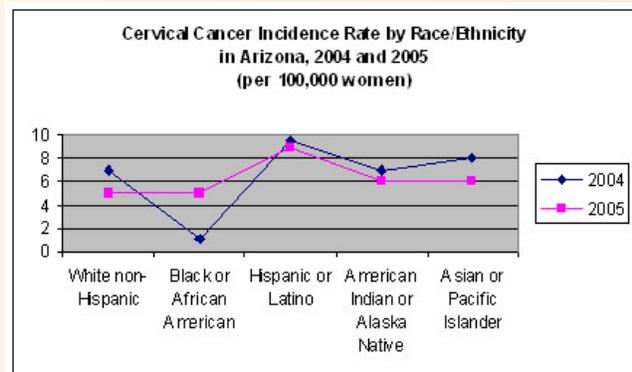
www.DiversityPreparedness.Org E-Newsletter. ♦

Data Speak

Cervical Cancer by Race/Ethnicity in Arizona

According to the Centers for Disease Control and Prevention (CDC), recent trends show that cervical cancer incidence and mortality rates are considerably higher among Hispanic and African-American women in the U.S., although rates among women in some racial and ethnic populations continue to decrease significantly.

In Arizona, the cervical cancer incidence rate (per 100,000 women) reduced from 2004 to 2005 among White non-Hispanic, Hispanic, American Indian and Asian Pacific Islander women; however, in the same time period, the rate increased from 1 to 5 among African-American/Black women. Regarding the cervical cancer death rate, Asian Pacific Islanders had the highest number: 4.6 per 100,000 women, followed by White Hispanics, with 4.1; American Indians, with 3.4; Non-Hispanic Whites, with 2 and African-American/Blacks, with 1.4 in 2005. ♦



References:

- ♦ <http://www.cdc.gov/cancer/cervical/statistics/race.htm>
- ♦ <http://www.azdhs.gov/plan/report/dhsag/index.htm>

Funding Opportunities:

[Office on Violence Against Women: OVW FY 2009 Grants to Enhance Culturally and Linguistically Specific Services for Victims of Domestic Violence, Dating Violence, Sexual Assault and Stalking Program](#)

Deadline: March 14, 2009

Award ceiling: \$300,000

[National Institutes of Health: Supported Centers for Population Health and Health Disparities \(CPHHD\) \(P50\) \(RFA-CA-09-001\)](#)

Deadline: Letters of Intent Receipt Date: April 29, 2009; Application Receipt Date: May 29, 2009

[Saucony Run For Good Foundation: Children's Running Programs](#)

Deadline: June 13, 2009

Amount: up to \$10,000 each

Publications of Interests:

[Arizona Special Needs Population Toolkit](#)

The toolkit focuses on providing information to assist with and support the efforts of local jurisdictions in emergency planning for vulnerable populations.

[Key Considerations for Opening Doors – Developing Community Health Worker Education Programs](#)

It's a guide for developing community health worker educational programs.

[Integrating Immigrant Families in Emergency Response, Relief and Rebuilding Efforts](#)

The report mainly focuses on how to address language barriers in emergency preparedness for Limited English Proficient (LEP) communities. The report also includes lists of sources for LEP preparedness, which service providers will find helpful.

[Multicultural Health Care: A Quality Improvement Guide](#)

The aim of the Guide is to serve as a resource for those wanting to undertake quality improvement initiatives to improve culturally and linguistically appropriate services and to reduce disparities in care.

Events of Interest:

[Third National Summit on Eliminating Racial and Ethnic Disparities in Health](#)

Dates: February 25 – 27, 2009

Location: Gaylord National Resort and Conference Center, National Harbor, Maryland

[SIRC 7th Annual Research Conference: Culture Counts! Preventing and Reducing Health Disparities](#)

Date: March 20, 2009

Location: Phoenix, AZ

[Indian Health Summit – Celebrating the Tapestry of Health and Wellness: Sharing Wisdom and Showcasing Innovation](#)

Dates: July 7-9, 2009

Location: Denver, CO

For more information about funding opportunities, publications of interest and events of interest, please visit www.azminorityhealth.gov. ♦

Editor's Note:

The *AHDConnection* is published quarterly on January 31, April 30, July 31 and October 31. We are looking for community stories and other leads that are related to efforts to reduce health disparities in Arizona. Because of space limitation, each community story should not be more than 500 words. Ideas for community stories are also welcome. Our deadline is the 15th of month prior to the publication date. Please email articles or ideas to the editor at hong.chartrand@azdhs.gov.

We would like to get feedback, suggestions, ideas, news or events from you as well. Thank you very much. ♦

