Asian American Health Initiative

Together To Build A Healthy Community

NON-TRADITIONAL PATHWAYS INTO THE HEALTH PROFESSIONS – Health Promoters Program

The Need for AAHI and Health Promoters

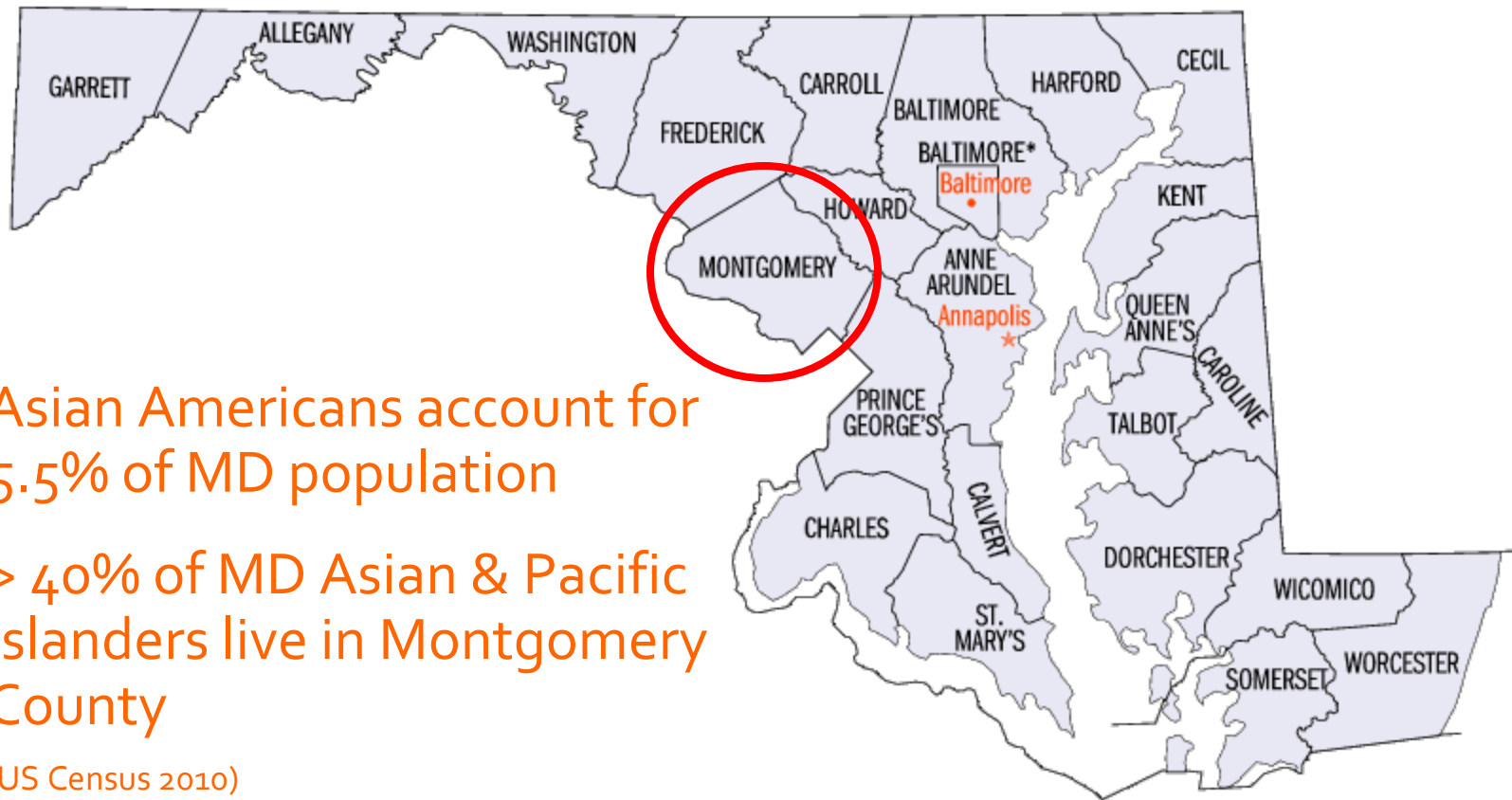- Rapid growth of Asian Americans in Montgomery County
- Widening of health disparities

Asian American Community
State of Maryland

Asian Americans account for 5.5% of MD population

> 40% of MD Asian & Pacific Islanders live in Montgomery County

(US Census 2010)

2005-2007 American Community Survey, 3 year estimates

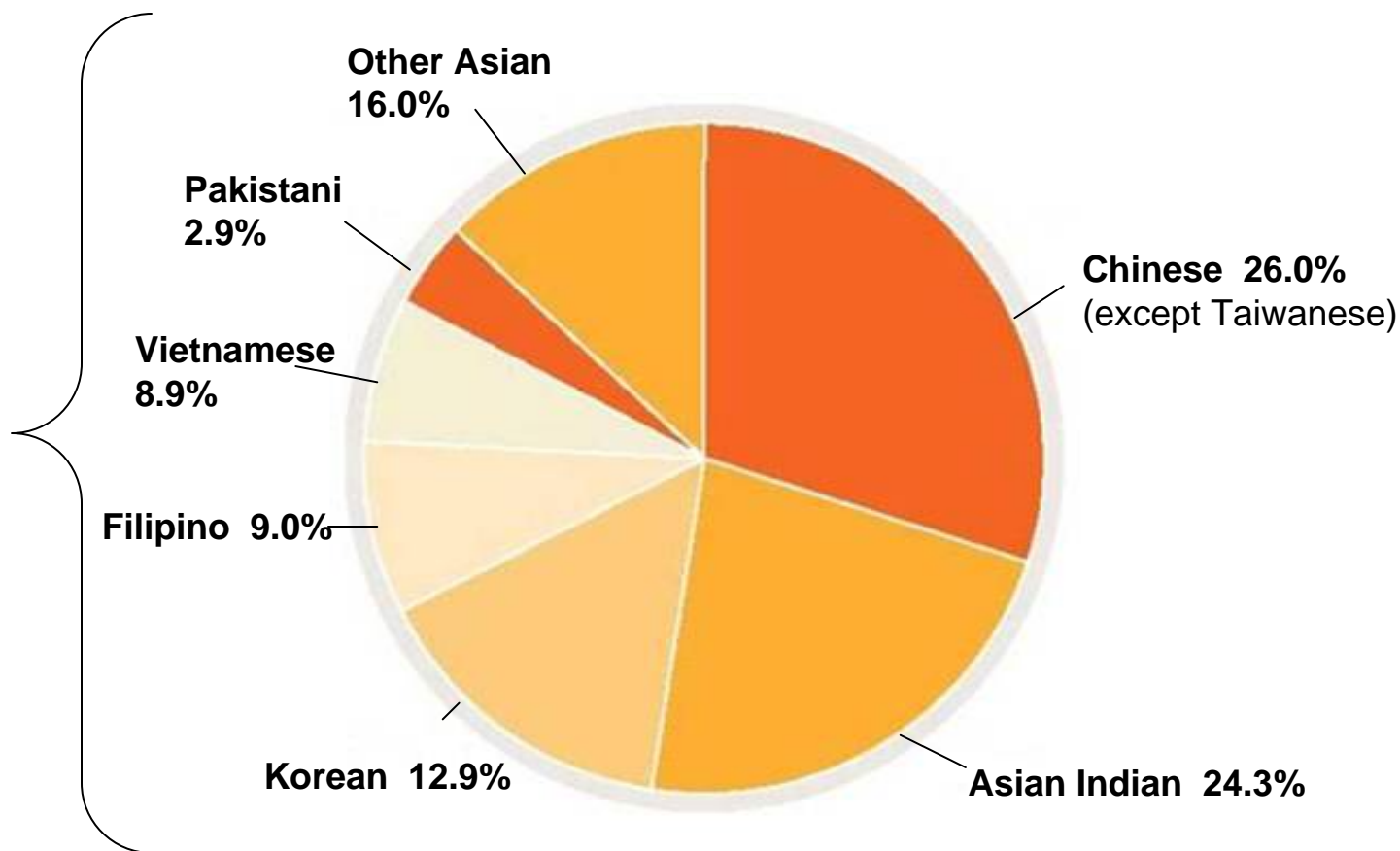Together To Build A Healthy Community

Asian American Community
Montgomery County, Maryland

13.9% of County residents identify as Asian American

(US Census 2010)

Other Asian 16.0%

Pakistani 2.9%

Vietnamese 8.9%

Filipino 9.0%

Korean 12.9%

Chinese 26.0% (except Taiwanese)

Asian Indian 24.3%

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Asian American Community
Montgomery County, Maryland

Other Asian Subgroups	Percentage
Japanese	2.50%
Taiwanese	2.10%
Thai	1.50%
Sri Lankan	1.40%
Bangladeshi	1.30%
Cambodian	1.10%
Indonesian	1.00%
Nepalese	0.9%
Burmese	0.7%
Laotian	0.2%
Malaysian	0.1%
Other Asian*	3.3%

*Other Asian includes those Asian Americans who have not specified a subgroup and those who have specified more than one subgroup. 2010 U.S. Census Bureau
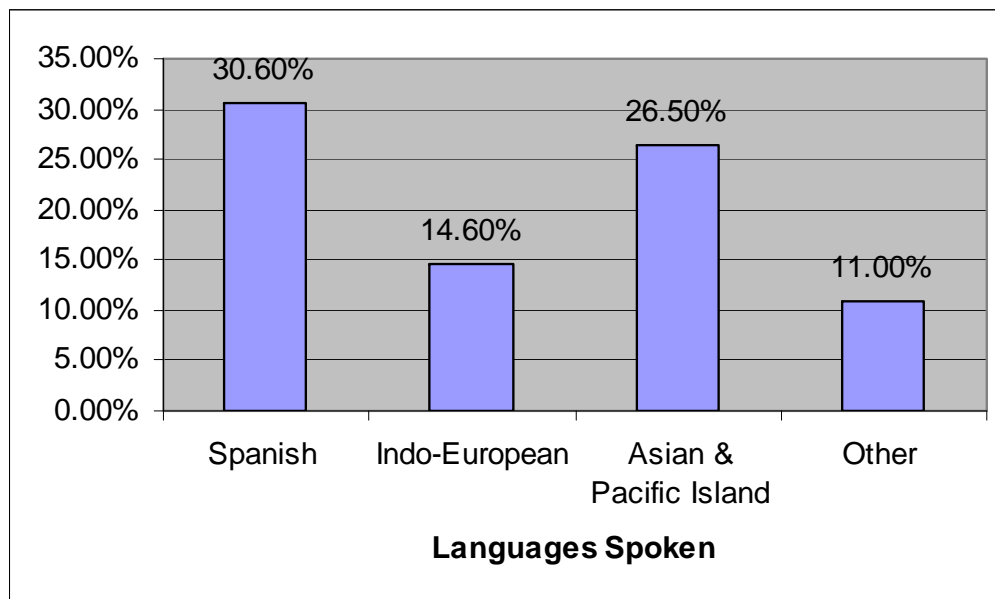
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Barriers to Accessing Healthcare

- Limited English proficiency
- Difficulties in understanding and navigating health care system
- Insurance status

Linguistic Isolation by Language Spoken in Montgomery County

2009 American Community Survey

Asian Americans and Health Disparities

- **Cancer is the leading cause of death for Asian Americans and Pacific Islanders.**

- 1 in 10 Asian Americans has chronic **Hepatitis B**, compared to 1 in 1000 Caucasian Americans

- **Asian Americans have a higher risk of developing Osteoporosis.**

- **Diabetes** **– 5th leading cause of death for Asian Americans**

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Asian American Health Initiative (AAHI)

- Established FY 2005 with support from County Executive, County Council members
- Montgomery County Department of Health and Human Services
- **Mission:** To identify the health care needs of Asian American communities, to develop culturally competent health care services, and to implement health education programs that are accessible and available for all Asian Americans in Montgomery County.

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AAHI Strategic Targets

- Enhance Access to Culturally & Linguistically Competent Care
- Promote Community Mobilization & Empowerment
- Strengthen Partnerships & Collaborations
- Enhance Data Collection & Reporting

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Health Promoters Program

Background

- Minority Communities Empowerment Project – Supported by DHMH's Minority Outreach and Technical Assistance (MOTA) Grant
- Partners
  - Holy Cross Hospital
  - Asian American Health Initiative
  - African American Heath Program
  - Community Ministries of Rockville
  - Maryland Commission on Indian Affairs

What is a Health Promoter?

- Commonly referred to as "community health workers"

- Lay person who is trained and expected to perform health promotion, education, and service delivery within a limited scope.

- Assist in reducing cultural and language barriers

- Actively reach out to the community for health promotion and education

Health Promoters in FY 11

- ❖ 31 health promoters
- ❖ 14 health promoters with 3+years of experience
- ❖ 16 ethnic community represented
- ❖ Speaking 16 languages/ dialects
  - ❖ Mandarin, Cantonese, Bangla, Hindi, Urdu, Punjabi, Korean, Japanese, Sinhalese, Tagalog, Khmer, Thai, Burmese, Gujarati.etc
- ❖ Trainings on different topics
  - ❖ Cancer, Hep B, Tobacco,, Advocacy, Leadership trainings, HIPPA, Social Media Training, Social Determinants & Health Disparities , health education, outreach tactics etc…

Why are they important?

- Health Promoters are community members themselves.

- Provide AAHI access to their own communities.

- Understand the needs and health concerns of their own communities.

- Speak with community members one-on-one at events and provide education.

- Advise AAHI staff about culturally sensitive issues that need to be addressed in certain settings.

- Help bridge the gap between patient and staff by providing interpretation services if needed, thus helping to eliminate language barriers.

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General Expectations

- Be dedicated to serving the community.

- One-year commitment (August 2010 – June 2011).

- Be willing to contribute at least 5-8 hours a month.

- Be willing to work evenings and weekends as needed.

- Be willing to provide basic translation and/ or interpretation services to the targeted population, both during and outside outreach events, as needed.

- Be able to conduct yourself in an appropriate and professional manner

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Health Promoters in Training

Health Promoters in Action

Health Promoter providing cancer education at New Covenant Fellowship Church

Health Promoter providing osteoporosis education at New Covenant Fellowship Church

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AAHI staff and health Promoters with County Executive, Isiah Leggett at a community resource fair.

AAHI Health Promoters at the Cambodian New Years providing outreach about AAHI.

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Health Promoters at Holy Cross Hospital's Cancer Screening Day

AAHI Health Promoter actively outreaching to the community at the Burmese Water Festival.

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AAHI Health Promoters conducting bone density screening at the Muslim Community Center in Silver Spring

AAHI Health Promoter conducting bone density screening at the Cambodian Temple in Silver Spring

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Accomplishments in FY11

- **77 outreach events**
- **14 ethnic communities reached**
- **4801 educational encounters**
- **7870 literature distributed**
- **342 health service referrals**
- **1688 health screenings performed**

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 Search "Asian American Health Initiative"

 www.twitter.com/AAHI_Info

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Maryland's Health Workforce
Non-traditional Pathways

How the Senior Community Service Employment Program (SCSEP) Creates a Route

October 4, 2011

Gloria Lawlah, Secretary
Maryland Department of Aging

The Purpose of the Senior Community Service Employment Program (SCSEP)

- To serve older workers with poor employment prospects
- To provide paid ($7.25/hr) hands-on job training through part-time work at community service agencies (Host Agencies)
- To assist with the transition of participants to unsubsidized employment
- To provide supportive services to assist participants to obtain and maintain employment

Senior Community Service Employment Program (SCSEP)

- Federal Department of Labor grant to the Maryland Department of Aging

- Maryland Department of Aging grants cover 12 counties (Allegany, Calvert, Caroline, Cecil, Charles, Garrett, Harford, Kent, Queen Anne's, St. Mary's, Talbot, Washington) **and** Baltimore City

Recruitment of Eligible Participants

- <u>Age</u> - 55 years of Age or Older

- <u>Income</u> - Family income may not exceed 125% of the Federal Poverty Guidelines

- <u>Unemployed</u> - Participant must be unemployed at time of application and throughout program application

- <u>Residence</u> - Participants must reside in the State at time of initial enrollment in which the project is authorized (homeless persons can qualify)

Role of Host Agencies

- SCSEP is a training program designed to meet the needs of participants striving for economic security

- SCSEP is also designed **to help meet the unmet service needs in the community**
  - Host agencies provide the venue for achieving this goal while receiving person-power to help achieve their mission

Host Agency Criteria

- 501 (c)(3) private non-profit organization
OR
- Public agency

Host Agency Expectations

- Meaningful on-the-job training

- Support for participant's employment plan and job search

- Opportunity to help meet service needs in the community

Health Care Jobs in SCSEP

- Adult Day Care Center
  - Activities assistant
  - Kitchen/Meal aide
  - Registration
- Hospital
  - Infusion patient care
  - Medication assistant
  - Thrift shop staff

Health Care Jobs in SCSEP

Hospital (continued)

- Infection control cart assistant
- Admission packet preparation
- Customer service
- Gift shop staff

Contact Information

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Suburban Maryland Welcome Back Center

Montgomery County Department
of Health and Human Services

Sonia E. Mora, MPH

Background

The following factors converge to increase the demand for health services impacting the industry's ability to meet the needs of Maryland residents:

- Aging population and workforce of health professionals

- Lack of capacity of educational institutions

- Influx of cultural and language diversity

Background

- Despite the fact that many immigrants in Maryland are highly educated, well experienced health professionals, many of them are currently under-employed and are not utilizing their skilled-training and full intellectual potential.

- Greater workforce diversity may lead to improved public health.

Challenges faced by Foreign-Trained Health Professionals

- Limited English proficiency
- Unfamiliarity with licensure process
- Economic difficulties
- Lack of time to study and work at the same time
- Lack of confidence in personal ability
- Unfamiliarity with US health care system

Source:
"Status of Licensure of Foreign-Trained Latino Nursing Professionals in the State of Maryland." Latino Health Professions Workgroup. Latino Health Initiative, Montgomery County DHHS. Nov. 2004.

Suburban Maryland Welcome Back Center (WBC)

- An evidenced-based model that includes key elements of successful programs across the country.

- Seeks to diversify the health workforce and address the nursing and other shortages.

- Provides services to facilitate the Maryland licensure process for internationally-trained health professionals.

Steps to Obtain RN Licensure

In Maryland:

- Complete Credentials Evaluation

- Pass Oral English Test

- Pass the National Council of Licensure Exam (NCLEX-RN)

Model Components

- **Guidance and Support:**
  - Individualized Case Management to obtain licensure
  - Social Support and access to financial assistance

- **Academic Support:**
  - English for Speakers of Other Languages (ESOL) for healthcare professionals courses
  - Nurse refresher and board exam preparation courses

- **On the Job Practical Exposure to the US Healthcare System and Mentoring:**
  - Full-time "Nurse-in-Training" jobs at local hospitals

Partners and Supporters

Government:
- Maryland Department of Labor, Licensing and Regulation
- Montgomery County Department of Economic Development
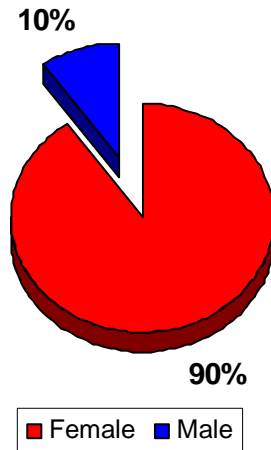- Montgomery Works One-Stop Workforce Center

Academic Sector:
- Montgomery College

Private Sector:
- Holy Cross Hospital
- Washington Adventist Hospital
- Shady Grove Adventist Hospital
- Prince George's County Economic Development Corporation

Demographics on Center participants

Participants' Gender (n=102)
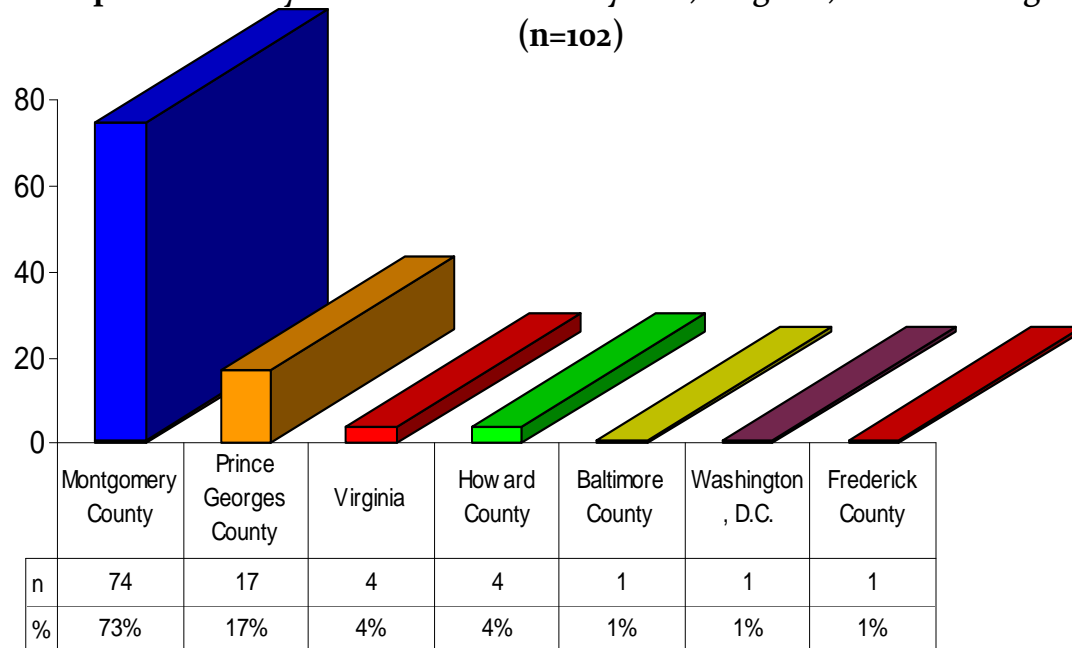
- 10% Male
- 90% Female

Legend: ■ Female ■ Male

Participants' Continent of Origin (n=102)

- 53% Latin America and Caribbean
- 29% Africa
- 14% Asia
- 4% Europe

Legend: ■ Latin America and Caribbean ■ Aftrica ■ Asia ■ Europe
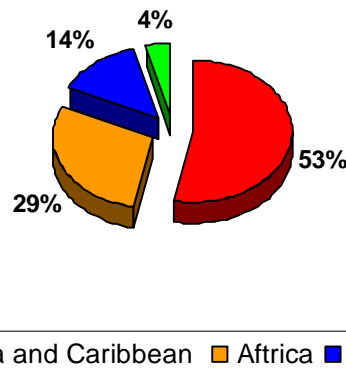
Demographics on Center participants

Participants' County of Residence in Maryland, Virginia, and Washington DC
(n=102)

	Montgomery County	Prince Georges County	Virginia	Howard County	Baltimore County	Washington, D.C.	Frederick County
n	74	17	4	4	1	1	1
%	73%	17%	4%	4%	1%	1%	1%

Valuable Nursing Work Experience – Close to 60% of the participants have more than 6 years of work experience abroad as nurses.

Demographics on Center participants

Participants' Years of Nursing Degree (n=102)

- 2 to 3 years
- 4 to 5 years
- 6 or more years

6%
45%
49%
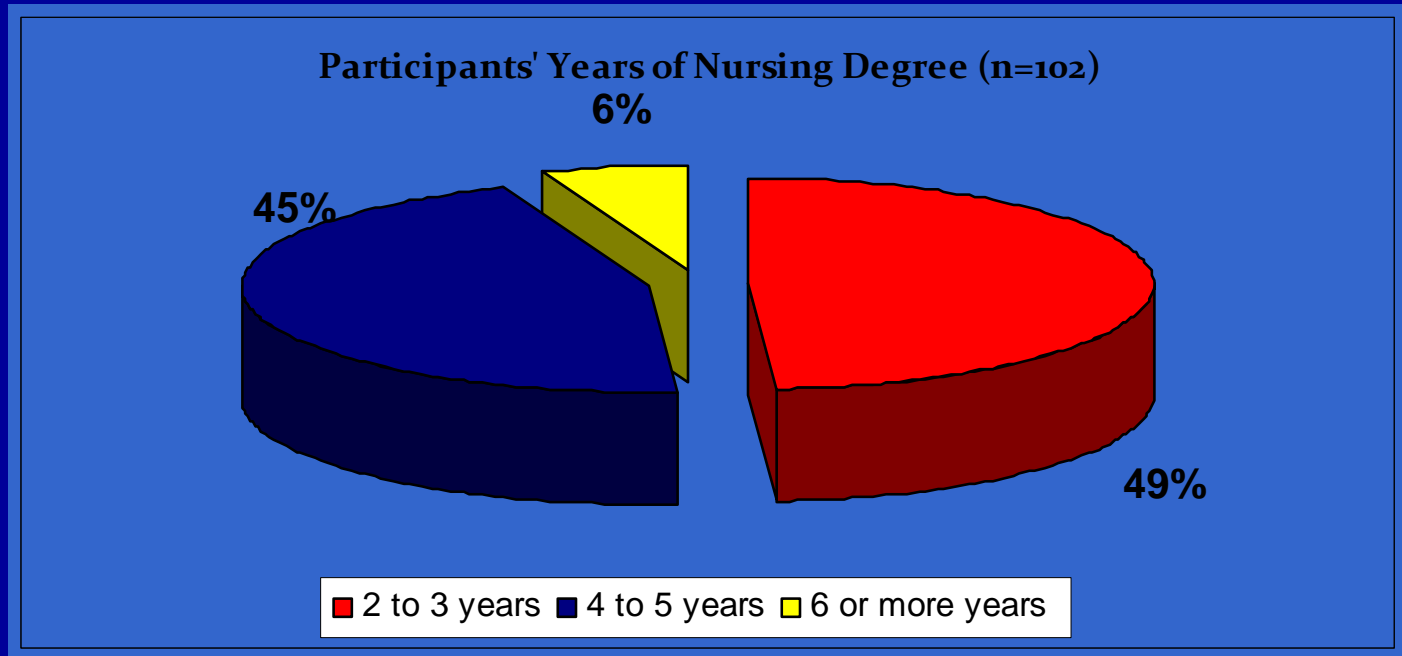
Strong Academic Credentials – 55% of the participants have more than 4 years of nursing training equivalent to a Bachelors' degree or above.

Selected Outcomes:
March 2006 - August 2011
(n= 102 participants)

- **Average increase in wages**
 (From $8.83/Hr at the time participants entered
 the program to $29.09/Hr at the time hired as
RNs)   **229%**

- **Total of Licenses obtained**   **67**
   including 31 RNs

- **Participants Retained**   **98%**

Achievements

- Migration Policy Institute *E Pluribus Unum Prizes* for exceptional immigrant integration 2011

- Governor O'Malley's Maryland Council for New Americans Best Practice Model (2009).

- National Associations of Counties *Achievement Award- "Best of Category"* (2008)

- Montgomery County Dept of Economic Development *Workforce Leadership Award* (2008).

WBC Model Highlights

- It is cost-effective
- Builds on the assets of foreign-trained health professionals
- Addresses workforce shortages
- Increases economic self-sufficiency
- Improves health outcomes through the delivery of culturally and linguistically appropriate health services.

Center Participants and Staff