

PINOY PCOR BALITA

A quarterly publication of the "Mag-PCOR Muna Tayo" and Filipino American Research (FAR) Hub projects



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Call to Action: Community Engagement to Address Asian American Health Disparities

M. Danet Lapiz-Bluhm, PhD, RN, MSCI, ANEF, FAAN

The Asian American Pacific Islander (AAPI) Heritage Month celebration in May 2024 calls us to take a closer look of the health of Asian Americans. AAPIs are the fastest growing racial group in the U.S. In the 2020 Census, Asian Americans account for more than 24 million the nation's population, which represents people with roots to more than 30 countries, each with its own unique history, culture and language.

Due to limited available research and aggregation of Asian American ethnic groups, not much is known about each Asian subgroup. However, from the limited data, substantial health disparities exist within the specific AAPI subgroups. Some examples are listed below.

- Least likely to report having a personal doctor (19.4% Asian vs 12.9% of whites). Cambodians and Vietnamese are three times more likely to skip doctor visits due to cost compared to all Asians or U.S. residents.
- Less likely to have blood pressure monitoring and pap smears. Only 60.5% of Vietnamese women reported receiving a pap test in the past three years compared to 86.2% of all women in California.
- Poorer quality care. Native Hawaiians and other Pacific Islanders report having poorer quality care, receiving less prenatal care in the first trimester.
- Higher disease incidence. Breast cancer incidence among AAPI women increased from 87.0 to 97.8 cases per 100,000 women from 1990 to 2001, a growth rate that has increased faster than any other racial/ethnic group.

A 2020 study (Adia et al) based on the 2011-2017 California Health Interview Survey reported that although Asians appeared healthier than did non-Hispanic Whites on most indicators, every Asian subgroup had at least 1 disparity disguised by the grouping. Filipinos had the most disparities, with higher prevalence of fair or poor health, being obese or overweight, and having high blood pressure, diabetes, or asthma compared with non-Hispanic Whites.

These statistics have not gotten better with time. In more recent community health screenings, about 70% of Filipinos have high blood pressure and many report having diabetes or family members with diabetes.

Community engagement has consistently been shown to help communities address health disparities. The above AAPI statistics highlight the need for continued community engagement among Asian American populations. For Pinoys, our existing Filipino American Patient-Centered Outcomes Research Nasyon (FAPCORN) networks can help our communities address prioritized health issues. Let's continue to engage other Pinoys while potentially leading the way for other AAPI communities.



**"In a gentle way,
you can shake
the world."**

GHANDI

**"No Notes. You speak from
deep in your heart. It's
easy."**

MANNY PACQUIAO

***"I always try to start out with some type of goal.
Then I work backward and think of what I need
to do to get there, and give myself smaller goals
that are more immediate."***

KRISTI YAMAGUCHI

Healthy Eating and Living Spiritually (HEALS) + CAREMINDr

Deanna Garcia

Healthy Eating and Living Spiritually (HEALS) is a faith-based, multi-level, efficacy-tested, and culturally tailored behavioral lifestyle program modified from previous studies (i.e., the DASH and PREMIER) and has been tested and produced promising results in several African American communities with respect to blood pressure control.

The HEALS Program is planned as a hypertension (HTN) intervention among the Filipino faith-based communities in South Texas. We recently piloted this study in collaboration with partners, Dr. Cynthia Romero and Dr. Sunita Dodani, from Eastern Virginia Medical School (EVMS) and University of Illinois at Chicago, respectively. The intervention proposal included HEALS Med-Tech which consist of:

- a) HEALS;
- b) Med-component includes medication compliance and social support provided by patient's primary care provider (PCP) team member; and
- c) Tech-component through a CAREMINDr App provides an interactive telehealth platform through mobile phone.

We piloted the CAREMINDr App among Filipino stakeholder representatives in both Virginia and Texas. The stakeholders include registered nurses, HTN patients, family members, insurance payor, hospital systems, physicians, religious, businesses, and community organizations.

The CAREMINDr App was perceived positively as a tool to track blood pressure, allowing patients to share their HTN journey with their healthcare provider. One participant shared how the tracked data was useful, *"My blood pressure was under control except for one instance. Because of this, my healthcare provider took out one of my blood pressure medications."* It was deemed acceptable and useful towards better HTN control among Filipinos.

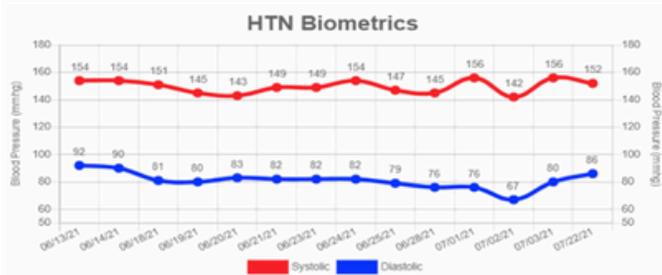
CAREMINDr Journey - Encounter Summary

Office:	App Code: mgdemo				
Pt#: DEMORS-JV	Birth: 1970	Gender: FEMALE	T-Code: G9DBH5		
Journey: Hypertension with daily blood pressure					
Low Emerg	Low Crit	Low Warn	High Warn	High Crit	High Emerg
85/50	90/60	95/65	140/90	145/95	180/120

SENT-IN BY USER ON: 8:01 pm 07/22/21 (PDT)

What is your systolic blood pressure (top number) today? **152**

What is your diastolic blood pressure (bottom number) today? **86**



COMMUNITY LEADER HIGHLIGHTS

Deanna Garcia

Filipino American Research (FAR) Hub is proud to highlight our esteemed collaborator who is the Principal Investigator of HEALS states project proposal (see left) which aims to target Filipinos in South Texas and Eastern Virginia leveraging the Filipino American Patient-Centered Outcomes Research Naylor (FAPCORN) network.



Sunita Dodani, MD, FCPS, MSc, PhD, FAHA
Clinical Professor of Medicine

Dr. Dodani has served as an executive leader for more than 20 years with vast experience in research management and creating innovative models of health promotion. In her current position as Clinical Professor of Medicine, she is dedicated to improving the quality of health care in Greater Peoria, Illinois, and striving to improve population health, reduce disparities, and create high-performing, sustainable health systems through the use of health care analytics tools.

Dr. Dodani is an NIH-funded outcome implementation scientist and has developed several cardiovascular disease prevention programs for diverse races and ethnic communities. Prior to her appointment at UICOMP in August 2023, she was a Professor of Medicine at Eastern Virginia Medical School (EVMS) and also held a secondary appointment as a Professor of Epidemiology in the School of Health Professions at EVMS.

Additionally, Dr. Dodani was the Founding Director of the EVMS-Sentara Healthcare Analytics and Delivery Science Institute (HADSII), which is a leading research institution focused on improving patient outcomes through the use of data analytics and innovative health promotion models.

Dr. Dodani is nationally and internationally known for her mentoring skills and has helped to develop more than 100 physician-scientists.

Thank you Dr. Dodani for sharing your expertise and skill to the Patient Centered-Outcomes Naylor Network!



CONTACT US:

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