



## Centers for Disease Control and Prevention (CDC) FY 2002 and FY 2003 Implementation Plans for the White House Initiative on Asian Americans and Pacific Islanders (AAPI)

### Strategic Goal #5: Strengthen and sustain Asian-American and Pacific Islander community capacity.

#### Objective 1:

Increase availability of training opportunities that encourage laboratorians, Tuberculosis (TB) program coordinators, and other related health professionals to address TB and HIV laboratorian testing proficiency and capacity.

#### Strategies:

- Promote and promulgate a 2.5 day training in Hawaii for 10 people, 3 sites.
- Training would include acid-fast staining collection, preservation, packing and shipping of specimens, and an overview of methods used for mycobacterial culture and drug susceptibility testing.

**Time Frame:** July or August 2002 and 2003.

#### Performance Measures:

- (Short-term) Number of staff attended training from each site increased.
- (Long-term) number of sites shipping to reference lab in Berkeley and Hawaii and number of shipments per culture confirmed case methods improved.

#### Funding/Activity Type:

\$40,000, B/New

#### Lead Entity and Contact Person:

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**Objective 2:**

Resolve the problem surrounding the transshipment of infectious or diagnostic goods throughout the communities of FSM, RMI, American Samoa, Republic of Palau, Guam, CNMI and Hawaii to the mainland as necessary.

**Strategy:**

Set up meetings between CDC, project officers, program consultants, and medical officers in conjunction with various stakeholders in the Pacific Island Basin (PIB) such as the Pacific Basin Medical Association, the Pacific Islands Health Officers Association (PIHOA), WHO, selected principals from TB and HIV programs, representatives from airlines servicing the Pacific Islands Basin, representatives from the International Air Transport Association via live video conference or onsite.

**Time Frame:** March 2002 and 2003.

**Performance Measures:**

Shipping problems reduced or eliminated in PIB.

**Funding/Activity Type:**

N/A, B/New

**Lead Entity and Contact Person:**

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**Objective 3:**

Evaluate the impact of Hepatitis B immunization in AAPI children and their family members.

**Strategy:**

Begin Hepatitis B virus survey program in Georgia, involving 500 to 1,000 AAPI children and family members, and 1,000 to 3,000 AAPI first graders in Hawaii. The program is waiting for approval from the Institution Review Board.

**Time Frame:** September 2002 and 2003

**Performance Measures:**

Hepatitis B survey program implemented, outreach activities developed.

**Funding/Activity Type:**

\$250,000, B/Cont.

**Lead Entity and Contact Person:**

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**Objective 4:**

Provide funding for 34 state-based hepatitis coordinators; establish 5 new sites.

**Strategy:**

Recruit hepatitis coordinators.

**Time Frame:** September 2002 and 2003

**Performance Measures:**

- a. 39 hepatitis B coordinators recruited.
- b. 5 new sites established.

**Funding/Activity Type:**

\$3,000,000, A/Cont.

**Lead Entity and Contact Person:**

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**Objective 5:**

In collaboration with the Department of Interior, Office of Insular Affairs, provide funding for Hepatitis B research and implementation of Hepatitis B control programs to the U.S.-associated Pacific jurisdictions.

**Strategy:**

Sign memorandum of understanding with Office of Insular Affairs to provide 5 years funding for Hepatitis B research and implementation of Hepatitis B control programs.

**Time Frame:** September 2002 and 2003 (project period September 2002 to 2005).

**Performance Measure:**

Hepatitis B research funded, Hepatitis B control program implemented.

**Funding/Activity Type:**

None, B/Cont.

**Lead Entity and Contact Person:**

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**Objective 6:**

The Asian-Pacific Economic Cooperation (APEC) Telecommunications Network for emerging infectious disease continues to develop and enhance its communications technology-based approach to prevent emerging infectious diseases related to trade and travel within the 21 economies of the APEC consortium.

**Strategies:**

- a. Create and/or enhance working relationships among organizations responsible for trade, travel, and public health on the Pacific Rim.
- b. Extend the capacity of APEC's developing economies to use information technology and the Internet for alerts and surveillance information locally, nationally, and internationally.
- c. Provide health professionals with technical content, direction, and Internet-based resources for learning and technical content direction, and Internet-based resources for learning and teaching about emerging infectious diseases in Asia and Pacific regions.
- d. Bringing academic institutions closer together and creating a collaborative learning environment.

**Time Frame:** September 2002 and 2003.

**Performance Measures:**

Communications technology-based approach to prevention of emerging infectious disease related to trade and travels developed and enhanced.

**Funding/Activity Type:**

None, B/Cont.

**Lead Entity and Contact Person:**

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**Objective 7:**

Establish and strengthen school health education programs that address youth risk behaviors that result in HIV infection, sexually transmitted disease, and unintended pregnancy.

**Strategy:**

Provide funding to state and territorial education agencies.

**Time Frame:** September 2002 and 2003.

**Performance Measures:**

- a. The Pacific Region HIV, STD, and unintended pregnancy prevention skills-based training to school health teachers, nurses, and school counselors continued and developed.
- b. The annual Pacific Region Trainer-of-Trainers HIV Conference held.
- c. The Hawaii Department of Education and Hawaii University, College of Education Summer Institute, a skills-based HIV/STDs prevention education curriculum, for teachers and school personnel continued.

- d. The Pacific Region entities program evaluation of the effectiveness of the Pacific Region HIV Prevention education programs conducted.
- e. Guam Department of Education, the parents of students at the middle school level, as well as from private organizations recruited. An at-risk prevention plan at the respective schools developed.
- f. In Hawaii, the AIDS Supplementary Guide at the HIV/STDs Summer Institute completed.
- g. In Hawaii, the project staff and Gay, Lesbian, Bi-sexual, Transgender (GLBT) youth services met and participated in committee meetings and Community Planning Groups (CPGs) meetings.
- h. Outreach assistance to targeted high-risk youth, especially youth prostitutes provided by Republic of Marshall Islands Ministry of Education.
- i. A grantee will coordinate and implement the piloting of Bringing Guam Into Your Classroom: learning Activities for the Health Education Curriculum at the middle school level coordinated and implemented. The grantee involvement with youth organizations to plan and implement a peer support group increased.

**Funding/Activity Type:**

\$650,000, B/Cont.

**Lead Entity and Contact Person:**

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**Objective 8:**

Develop strategies to eliminate health disparities among Asian Americans, Native Hawaiians and other Pacific Islanders.

**Strategy:**

Provide funding to community coalitions through REACH 2010 Demonstration Project (Three projects working with Asian American and Pacific Islander populations funded via competitive process).

**Time Frame:** September 2002 and 2003 (5 years project from 1999-2003).

**Performance Measures:**

Logic model outlines 5 phases data collection evaluated:

- a. Capacity building.
- b. Targeted action.
- c. Systems change and change among change agents.
- d. Widespread change in risk and protective behaviors.
- e. Changes in health disparity (morbidity/mortality) initiated.

**Funding/Activity Type:**

Each Project receives approximately \$1,000,000 annually, \$35,000,000 total base program budget, B/Cont.

**Lead Entity and Contact Person:**

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**Objective 9:**

Effective youth violence prevention.

**Strategy:**

National Academic Centers of Excellence on Youth Violence, University of Hawaii at Manoa, will promote disciplinary research, foster collaboration between researchers and communities, and empower communities to address youth violence.

**Time Frame:** September 2002 and 2003 (project period FY 01 to FY 05).

**Performance Measures:**

Communities empowered, scientific infrastructure built, application of effective youth violence interventions developed.

**Funding/Activity Type:**

N/A, A/Cont.

**Lead Entity and Contact Person:**

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**Objective 10:**

Provide resources for rape prevention and education programs to rape crisis centers, state and territory sexual assault coalitions, and other public and private nonprofit entities.

**Strategy:**

A nationwide grant program to provide:

- a. Education seminars.
- b. Operation of hotlines.
- c. Training programs for professionals.
- d. Preparation of informational material.
- e. Education and training programs for students and campus personnel designed to reduce the incidence of sexual assault at colleges and universities.
- f. Education and training to increase awareness of drugs to facilitate rapes or sexual assaults. and to increase awareness in underserved communities and awareness among individuals with assaults.

- g. Efforts to increase awareness of, or to help prevent, sexual assaults, including disabilities (Guam and Hawaii Department of Health).

**Time Frame:** September 2002 and 2003.

**Performance Measures:**

- a. Educational seminars held.
- b. Operation of hotlines established.
- c. Training programs for professionals conducted.
- d. Informational material prepared.
- e. Education and training programs for students conducted, and the incidence of sexual assault at colleges and universities reduced.
- f. Awareness about drugs to facilitate rapes or sexual assaults increased.
- g. Awareness about prevent sexual assault in underserved communities and individuals with disabilities increased.

**Funding/Activity Type:**

N/A, B/Cont.

**Lead Entity and Contact Person:**

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**Objective 11:**

Develop, implement, and evaluate System-Based Diabetes Prevention and Control Programs (DCPs).

**Strategy:**

Conduct DCPs in AAPI communities in the U.S.-associated Pacific Island jurisdictions and in states that have significant numbers of AAPIs.

**Time Frame:** September 2002 and 2003.

**Performance Measures:**

- a. Prevention, intervention, and control strategies to improve access to and quality of care for AAPIs and all racial/ethnic populations with diabetes implemented and evaluated.
- b. Death, disability, and costs related to diabetes and its complications reduced.

**Funding/Activity Type:**

\$\$335,162 to Hawaii Department of Health, \$62,424 to American Samoa, \$117,464 to Guam, \$76,500 to RMI, \$71,786 to FSM, \$88,434 to CNMI, \$59,763 to Republic of Palau, B/cont.

**Lead Entity and Contact Person:**

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**Objective 12:**

Maintain a Regional Center to foster community involvement and action to address the burden of diabetes in the Pacific Basins.

**Strategy:**

Utilize and build upon CDC's highly successful "Diabetes Today" community planning model.

**Time Frame:** September 2002 and 2003.

**Performance Measures:**

Provide community training 2 to 3 times per year.

**Funding/Activity Type:**

\$500,000 to Papa Ola Lokahi Diabetes Training Center.

**Lead Entity and Contact Person:**

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**Objective 13:**

Through the National Diabetes Education Program (NDEP), develop program to reduce morbidity and premature mortality due to diabetes.

**Strategies:**

- a. Fund two national organizations representing AAPI populations to address the NDEP, and to facilitate delivery of culturally appropriate NDEP prevention and control messages through community-based delivery channels and interventions.
- b. Target NDEP awareness campaigns for AAPI populations, translate campaign materials into 11 AAPI languages, distribute media kit containing a press release, diabetes facts, information including live read radio scripts, print ads about the NDEP.
- c. Conduct activities to tailor NDEP messages to be culturally and linguistically relevant to the AAPI populations through the Community Intervention Workgroup with an active AAPI subgroup.

**Time Frame:** September 2002 and 2003.

**Performance Measures:**

- a. Two national organizations representing AAPI populations to address the NDEP, and to facilitate delivery of culturally appropriate NDEP prevention and control messages through community-based delivery channels and interventions funded.
- b. Target NDEP awareness campaigns for AAPI populations developed.



- c. Campaign materials in 11 AAPI languages translated.
- d. Media kit containing a press release, diabetes facts, information including live read radio scripts, and print ads about the NDEP distributed.
- e. Activities to tailor NDEP messages to be culturally and linguistically relevant to the AAPI populations through the community intervention workgroup with an active AAPI subgroup conducted.

**Funding/Activity Type:**

\$273,000 to the Association of Asian Pacific Community Health Center (AAPCHO), and \$251,420 to the National Asian Women's Health Association, B/Cont.

**Lead Entity and Contact Person:**

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**Objective 14:**

Initiative to mobilize for the prevention and control of tobacco use through the National Tobacco Prevention and Control Program.

**Strategies:**

Provide funding to 50 states, seven territories, and the District of Columbia:

- a. Provide resources, training, program guidance, information, and education.
- b. Implement state and local tobacco prevention and control initiatives.
- c. Provide additional funding to 11 national organizations that reach and serve specific racial/ethnic populations at high risk of using tobacco.
- d. Build culturally appropriate tobacco control programs.

**Time Frame:** September 2002 and 2003.

**Performance Measures:**

- a. Resources, training, program guidance, information, and education provided.
- b. State and local tobacco prevention and control initiatives implemented.
- c. Additional funding to 11 national organizations that reach and serve specific racial/ethnic populations at high risk of using tobacco provided.
- d. Culturally appropriate tobacco control programs initiated.

**Funding/Activity Type:**

September 2002.

**Lead Entity and Contact Person:**

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