

# CBG Program Final Report

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## I. INTRODUCTION/PURPOSE:

In studying social determinants that affected Asian American health disparities in a previous project, we learned that language and transportation stood out to be the most salient social determinants. Accordingly, the purpose of this project was to develop and facilitate support and resources impacting language and transportation to resolve some of the problems in these areas for diverse Asian ethnic groups.

For language concerns, we needed to train bilingual Community Health Workers (CHW) to directly teach health-related content, then offer English as a Second Language (ESL) as a long term educational mechanism to teach health-related content in English. For transportation concerns, the immediate objective was to offer community members transportation when needed during emergencies, and then build up an organized volunteer service system that would offer designated transportation help.

Our service was targeted to all Asian Americans in Michigan. However, due to the diverse Asian populations that speak different languages, it was only practical to focus on top populated ethnic groups in Southeast Michigan. These include: Asian Indians, Chinese, Filipinos, Koreans and Vietnamese.

The specific goals of this project were:

- Build capacity within the Asian American community to collaborate in improving community health and prevent diseases
- Recruit and train many bilingual health workers within each Asian ethnic group to be ready whenever there was a health issue to be cascaded to the entire Asian community
- Offer immigrants ESL and computer workshops to keep up with modern living in the current environment
- Provide education workshops on diet (especially acculturated to each Asian diet respectively), nutrition and exercises to directly improve their health

## II. INTENDED OUTCOMES:

- The community has a network that is capable of communicating/cascading important health information to Asian populations in their native languages (e.g., nutrition brochures, workshops delivered in Asian native languages)
- Each Asian community has a handful of trained bilingual Community Health Workers who had an understanding of health disparities within their community and could help their members
- There are culturally designed curricula for ESL and computer workshops for Asian immigrants that include health information in the content to allow participants learning more health info while learning a new modern-living skill

- There is a website that Asian Americans can obtain and share health information as well as health & health disparity data
- There are more resources within Asian community, even including potential emergency transportation
- There are some culturally designed health workshops to help community on healthy eating, exercising in their daily life and improve their health

### **III. INTERVENTION:**

There are many interventions designed for this program; to review them with the final results and evaluation metrics, this section is combined with the next 2 sections in a table under Sec V.

### **IV. EVALUATION METHOD:**

The program has been continuously evaluated based on both quantitative and qualitative metrics matched to the specific project objectives within a larger Logic Model framework looking at short and long-range goals. Quantitatively, community stakeholders, community participants, and community users of the various programs (see below) were constantly asked for their feedback before, during, and after a program has been initiated or administered. Such unfolding feedback has been used to not only gauge the success of a given program in the real world, but to also identify potential adjustments that may be needed to maintain the short and long range goals partnered with community stakeholders. For example, the 2010 Health and Healthcare Survey Report emerged from numerous conversations between community stakeholders and the Center to frame and design a quantitative survey that would offer an empirically based foundation to pursue subsequent projects for the Asian communities of Southeast Michigan. Quantitatively, multimethod approaches have been used to collect empirical data from the community for use in developing long-range goals as well as to evaluate the usefulness of various projects as administered in the real world. For example, the 2010 Health and Healthcare Survey Report was designed to assess health-related behaviors and needs of five linguistically and culturally distinct Asian communities in southeast Michigan. Results from a careful analysis of the data across the diverse communities helped to identify short-range goals (e.g., providing accessible health-related information to community members), as well as long range goals (e.g., developing programs that would help Asians learn and sustain capacities to seek out health information and foster better self-care).

The effectiveness of the partnership between the Asian Center-Southeast Michigan and community stakeholders was also evaluated based on both quantitative and qualitative metrics. During the last two years (Phase II), qualitative feedbacks from community stakeholders and Center staff members have been solicited by the external evaluator. The qualitative feedback was summarized, presented to the Director, and discussed with the Center staff and community stakeholders at subsequent meetings. Quantitatively, the external evaluator conducted annual evaluations that tapped into seven key dimensions among community stakeholders (viz., collaboration membership, collaboration structure, collaboration leadership, internal collaboration, collaboration effectiveness, collaboration sustainability, & overall collaboration partnership), and five key dimensions among Center staff (viz., general satisfaction, impact, trust, staff decision making, organization/structure). Results of these evaluations were summarized, presented to the Director, and discussed with the Center staff members and community stakeholders to identify any dynamic

challenges in collaborating to meet the needs of the Asian communities. Noteworthy, results of these annual evaluations consistently indicated very high scores on all of the twelve dimensions mentioned above.

## V. PROJECT RESULTS:

The following table summarizes Section III, partial IV and V of each intervention respectively:

|                   |  |
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| <b>Project #1</b> | <b>2010 Health &amp; Healthcare Survey Report</b>  |
| Purpose           | To understand Asian Americans health & healthcare matters by:<br>1. Finish the survey statistical analyses<br>2. Publish a final report of combined races and each ethnic group respectively   |
| Result            | Task completed. The report was sent to each ethnic group to study their community social determinants.   |
| Evaluation        | This is a big task statistically. Data and report are well organized, and systemically presented to easily understand. However, the implication from the result (of each category) still contains a lot of information that can be further studied and analyzed.   |
| <b>Project #2</b> | <b>Website Construction &amp; Maintenance</b>  |
| Purpose           | 1. To offer health information online and in Asian languages<br>2. To share study data<br>3. To post programs schedule   |
| Result            | The site is up and running, more information is loaded up every year.  |
| Evaluation        | Website is well designed, contains a lot of Asian Americans health information. However, the Asian language sites have not been able to get populated yet, due to lack of resources handling the needed translation.   |
| <b>Project #3</b> | <b>Transportation</b>  |
| Purpose           | To offer transportation in emergency, and for participants of educational programs at the Asian Center – SE MI   |
| Result            | 1. Procured a van for the Center to offer transportation. The fund is mostly from another program (hepatitis B program) that needs to use the van more often.<br>2. Offered service to emergency a few times; mostly was used for Center business, e.g., transport large items for health fairs, food expo and mobile clinic etc, and also long distance meetings for staff. |
| Evaluation        | Usage of the vehicle with respect to the programs  |
| <b>Project #4</b> | <b>English as a 2<sup>nd</sup> language (ESL) for Asian Americans</b>  |
| Purpose           | To offer immigrants a practical English class that is designed to:<br>1. Include input from Asian immigrants their daily language needs<br>2. Fit in the Asian culture and be useful to daily life for Asian immigrants<br>3. Teach by bilingual instructors   |
| Result            | Offered 9 classes and about 100 students   |
| Evaluation        | 3.9 out of 5 as the average class evaluation by participants   |
| <b>Project #5</b> | <b>Computer Workshops</b>  |
| Purpose           | To offer Asian American immigrants to learn basic computer skills in their native language with corresponding English search engine, translation and health information sites (can be in English and their native language)  |
| Result            | Offer 10 classes and about 120 students  |
| Evaluation        | 4.2 out of 5 as the average class evaluation b participants  |
| <b>Project #6</b> | <b>Healthy Asian Recipe Contest</b>  |

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| Purpose           | To offer the community diet and nutrition seminars; and bring to their attention the diet impact to health and start healthy eating practice by participating in the recipe contest.   |
| Result            | 1. Conducted diet and nutrition workshops including nutrition label readings.<br>2. Conducted the first ever “Healthy Asian Recipe Contest”.   |
| Evaluation        | About 300 people attended the 6 nutrition workshops. About 60 recipes were submitted for the contest, and 20 finalists participated in the Food Expo. A Healthy Asian Recipe book (collected from the 20 finalists) was produced to pass out to community.   |
| <b>Project #7</b> | <b>Healthy Asian Food Expo</b>   |
| Purpose           | To offer an opportunity for Asian Americans to engage on healthy eating by various healthy Asian food, exercise and health education programs  |
| Result            | 1. The 20 finalist of the “Healthy Asian Recipes” could showcase their award-winning dish<br>2. About 50 non- or for-profit organizations and 200+ volunteer servers participated in the Expo<br>3. About 450 community people attended  |
| Evaluation        | 1. All CBG partner organizations had a wonderful working experience with this project<br>2. All vendors and other organizations had good experiences too<br>3. Participants all enjoyed and thought it was a worthy event  |
| <b>Project #8</b> | <b>Open Tai-Chi Class</b>  |
| Purpose           | To offer a popular Tai-Chi workshop to all Asian Americans   |
| Result            | 1. The Taiji Star Club has agreed to teach this workshop every Saturday from 7:30-8:30 am. They usually have a master with a few assistants to give more personal attention during the workshops.<br>2. There had been 60-70 participants attended 80-90% of the workshops weekly. It was one of the more loved exercise classes.<br>3. The class would continue till the end of the year, even after the grant ended. Part of the participants donated \$1/week to keep the workshop going. |
| Evaluation        | From the overwhelmingly enthusiastic participants, this workshop is well-liked. About \$14-16/week was collected at the workshop, and it is enough to sustain the workshop till the end of the year. The workshop is well liked.   |
| <b>Project #9</b> | <b>Evidence Based Health Promotion Workshops</b>   |
| Purpose           | To offer various health educational/ disease self management programs  |
| Result            | Two leader training workshops were completed using the CBG funding. This was necessary in order to have our own leaders to teach the workshops. There were 5 workshops (of different topics) conducted under AAA1B funding in 2013.  |
| Evaluation        | This support is necessary in order to be self-sustainable to offer different health promotion workshops.   |

## VI. EMERGING EVIDENCE OF INTERVENTION EFFECTIVENESS:

- The website has been functional, there have been many inquiry about health information and resources of the Asian community; average about one web inquiry per week
- The feedback from the ESL, computer and other health related workshops has been very positive. The seniors appreciated the opportunity, and many still have contact with their teachers and asked for supports on many subjects, and wanted to learn American culture

- The healthy recipe contest and Asian Food Expo were well-received by the community include the events sponsors that some participants kept asking when the next one is and they are ready to join again
- The open tai-chi workshop is especially popular among Chinese group that the group wants to continue even after the funding ended. They plan to continue with students put in donation every week in order to self sustainable.
- Most of the communities have their annual health fairs for underserved, there are more such services now after the survey
- The ESL curricula is specially designed for senior immigrants, it can be shared with other communities (non-Asian) who could use it for their needs
- Food expo might be a good event for community at large because everyone enjoys good food, and currently there is a obesity epidemic, healthy food expo is a fun way to educate the public

## **VII. RECOMMENDATIONS/LESSONS LEARNED:**

- Do not charge Asian seniors for workshops, they lived very frugally all their life, would not change at this later time in their life regardless of their current economic condition.
- Activities involving food and party can attract more Asians. Among our programs, the feedback from the nutrition seminar, recipe contest and food expo was the most positive.
- Asian groups still have a singular vision, namely, taking care of their own group only, not able to see the entire Asian group as an entity. The coalition idea brought in by Asian Center – SE MI provided an opportunity among them to practice collaboration and network building for the greater good.
- An organization usually has their own mission, vision and guiding principles; if a program offered to them was not relevant to one of their missions, they usually would not be interested in attending. The challenge for the greater coalition has been to present a program that met every partner's mission. While working with 5 partners, we learned to make a program flexible to offer acculturation to the partner's need. This is a skill project managers have to learn in order to achieve our mission all the time.
- Brain storming is a process that can build bridge among partners. When participants "created" a program together, the buy-in to the program is much higher and easier. Focus group offers the same benefit.

## **VIII. SUSTAINABILITY PLAN:**

- a. Fundraising – will be handled annually
- b. New grants application –on going
- c. Collaboration with other organizations – already happened  
(currently: PMCH @UMHS, Farmington Hills senior center, Washtenaw Community and Economic Development)

- d. Low maintenance programs (ESL & Computer) – program would be continuing, and the curricula has been shared with other such services
- e. Volunteers in-kind service – this has been the operation mode at the agent and its partners
- f. Share programs with others (ESL)

**IX. SUCCESS STORY:**

This was submitted separately to MDCH.

**X. POLICY IMPLICATIONS:**

To the State of Michigan:

- Dedicate a centralized state agent who can oversee, within MDCH, health disparity concerns, health needs, and health risks of the diverse Asian American communities across Michigan
- Lobby to State for more funding to support MDCH in their mission to reduce health disparities across all segments of Michigan residents

To the Asian American Community

- Collaborate with other Asian community organizations to work together and form partnership or coalition for the good of their community and broaden services
- Train bilingual Community Health Workers (about 80-90)
- Continue offering annual health fairs to underserved people (either no insurance or no/limited English capability)
- Offer a website that can provide Asian American health information
- Offered mobile clinic for those who cannot come to us for hepatitis B screening, we go to their locations