AANCART: The National Center for Reducing Asian American Cancer Health Disparities

Outreach Core Accomplishments in the First 6 Months

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Background

AANCART has created a regional network model that facilitates awareness and outreach activities tailored to specific Asian American subgroups, and encourages the development of targeted research and training opportunities to reduce cancer health disparities in these communities.

To present a successful model that addresses cancer health disparities and leverages resources through multi-site community collaborations and partnerships with organizations, leaders, and individuals serving specific Asian American communities.

Methods

Through its 10 years of trusted community partnerships, AANCART will expand its capacity to reach out to distinct Asian American ethnic groups (Chinese, Filipino, Hmong, Korean, and Vietnamese) including children, adults, and seniors by:

- Establishing the AANCART Community Outreach Directors’ Group
- Conducting needs assessments to guide the Center’s health education and health promotion activities
- Establishing an inventory and maintaining an ongoing database of educational resources and materials relevant to reducing the Asian American cancer burden
- Collecting and maintaining data on the needs and resources for the populations and communities we serve

Implications

Building upon a decade of community trust, collaborations, and partnerships, AANCART’s outreach core is creating and increasing access to culturally appropriate, linguistically-specific, and evidence-based materials designed to increase knowledge about and use of beneficial procedures to reduce cancer disparities and related co-morbid conditions among Asian Americans.

Implications

- Leveraging resources by developing new partnerships and strengthening existing collaboration among academia and community entities
- Conducting health promotion and educational activities to increase awareness, access, and use of beneficial biomedical and behavioral procedures including clinical trial recruitment and biobanking
- Performing evaluations based on established indicators on an on-going basis throughout the duration of the grant period
- Disseminating information and findings to communities, researchers, providers, and decision-makers
- Supporting community partners’ projects to address cancer disparities
- Participating in the National Cancer Institute’s National Outreach Network

Next Steps

Based on key informant and focus group interviews, AANCART’s outreach core will be focusing on designing a culturally appropriate educational outreach campaign to increase awareness of clinical trials in AANCART’s target populations.

Highlighted Example of Outreach Effort Utilizing Community-Based Participatory Research Approach

Innovative Faith-Based Education on Advance Directives in Asian American (Chinese and Vietnamese Americans) Communities

(Grant #: 1R21 MD006024-01; PI: Angela Sun, PhD, MPH; Subcontract PI: Cuylyn Bui, MD, MPH; Co-Investigators: Steve McPhee, MD, Janice Tson, PhD, Tung Nguyen, MD)

Background/Rationale

Asian Americans have low rates of Advance Directives (AD) utilization. No published studies have addressed advance care planning among Asian Americans. Evidence shows a community-based approach through faith communities can lead to higher use of ADs in African and Hispanic Americans and non-Hispanic Whites.

Theory of Reasoned Action (TRA) is Chosen to Guide the Intervention

- Allows examination of social influence in AD completion as being applied in research promoting health behavior change via faith-based programs
- Has been applied across various cultures, including Asian, that place importance on collectivism and family values in decision-making

Conceptual model of AD completion, informed by TRA

Beliefs and Evaluation about the Behavior

- Spiritual and cultural beliefs toward AD
- Positive and negative evaluations of completing AD

Opinions of Referent Others and Motivation to Comply

- Perceived social acceptability of church leaders, congregation members, family, friends, experts for AD completion
- Motivation to comply with these referents

Study Design

- Literature Review
- Intervention Design
- Intervention Implementation
- Intervention Evaluation
- 3-Month Post Intervention Evaluation

Study Findings

- Qualitative Findings
  - Assessment: Demographic and Background Information
  - Assessment: Spirituality and Religious Preferences
  - Assessment: AD Knowledge
  - Assessment: Attitude Towards AD
  - Assessment: Subjective Norms
  - Assessment: Intention and Behavior related to AD completion

- Literature Review
  - Review of literature on AD completion

- Intervention Design
  - Design of faith-based intervention

- Intervention Implementation
  - Implementation of faith-based intervention

- Intervention Evaluation
  - Evaluation of faith-based intervention

- 3-Month Post Intervention Evaluation
  - Evaluation of faith-based intervention 3 months post-implementation

Conducted:

- 8 Key Informant Interviews
- 4 Focus Groups
- 2 Pilot Tests of Church-Wide Baseline Survey

Next Steps:

- Continue to collect church-wide baseline surveys
- Focus on strengthening collaboration among all academic, community, and faith-based partners
- Develop, Implement, and Evaluation of Intervention
- Data entry, management, and analysis, and report compilation

Implications:

- Better understand the barriers and potential facilitators of advance care planning for Chinese- and Vietnamese-Americans
- Assess AD use among Chinese- and Vietnamese-Americans prior to intervention
- Develop, implement, and evaluate an intervention that addresses rate of AD completion among Asian Americans
- Contribute to the limited literature on faith-based approaches to address health and health disparities among Asian Americans.

Acknowledgements:

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Community Outreach Directors’ Group

Center’s Outreach Program Directors’ Group Chair

Angela Sun, PhD, MPH

Executive Director, Chinese Community Health Resource Center (CCHRRC)

Director, Chinese Community Health Resource Center (CCHRRC)

May Sung, MPH

Vice President for Health Promotions, American Cancer Society

Chinese Population

Site: San Francisco, CCHRRC

Joyce Cheng, MS, Outreach Director

Asian American Population

Site: Sacramento, UC Davis

Julie Dang, MPH, CHES, Outreach Director

Filipino Population

Site: Sacramento, Hmong Women’s Heritage Association

Charlene Cuaresma, MPH, Outreach Director

Hmong Population

Site: Sacramento, Hmong Women’s Heritage Association

Penny Lo, BS, Outreach Director

Korean Population

Site: Los Angeles, UCLA

Parichart Wichanson-Sabado, MPH, Outreach Director

Site: San Francisco

Thoa Nguyen, Community Member

Examples of Disseminated Educational Materials

Church Partners and Research Team

Church Partners and Research Team

Research Team

www.cchrchealth.org

Progress To-Date (Year 1)

- Obtained IRB Approval
- Held 11 Research Core Team Meetings
- Held 5 Community Partner Meetings with ongoing communication between academia and community partners

Collective 52 Church-Wide Baseline Surveys

(Aim to collect at least 200 surveys in 4 churches)

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