

ASIAN & PACIFIC ISLANDER
AMERICAN HEALTH FORUM

HIGHLIGHTS OF THE 2008–2012 POLICY AGENDA

The Asian and Pacific Islander American Health Forum (APIAHF) is excited to introduce our *2008 to 2012 Policy Agenda: Advocating for the Health of Asian Americans, Native Hawaiians and Pacific Islanders*. APIAHF works to improve the health and well-being of Asian American, Native Hawaiian, and Pacific Islander communities through policy, programs, and research. With a philosophy of coalition-building and capacity-building in local communities, we work with community-based organizations, public health leaders, and policymakers to ensure that the specific needs of our communities are addressed at national, state, and local levels. From 2008 to 2012, we plan to address the following five policy priorities:

1. EXPANDING ACCESS TO HEALTH CARE FOR UNINSURED AND UNDERINSURED ASIAN AMERICANS, NATIVE HAWAIIANS, AND PACIFIC ISLANDERS

- Champion universal health coverage that meets the needs of Asian Americans, Native Hawaiians, and Pacific Islanders.
- Support the reauthorization of SCHIP with full funding to cover all eligible children and outreach and education targeted to immigrant communities, utilizing community health workers and language interpretation and translation services.
- Eliminate barriers to enrollment by repealing the proof of citizenship requirements in the Deficit Reduction Act of 2005; supporting the passage of the Legal Immigrant Child Health Improvement Act (ICHIA); and removing limitations in current law that disqualify citizens of the Republic of the Marshall Islands (RMI), the Federated States of Micronesia (FSM), and the Republic of Palau from eligibility from Medicaid, SCHIP and other public benefits programs.

2. IMPROVING QUALITY OF HEALTH CARE BY PROMOTING CULTURAL AND LINGUISTIC COMPETENCY

- Increase funding and support for health interpretation and translation, including grants to improve access to language services for limited-English proficient (LEP) individuals and federal reimbursement of language services through the Medicare, Medicaid and SCHIP programs.
- Support the collection of data on race, ethnicity, and primary language.
- Support efforts to link cultural and linguistic competence to quality improvement initiatives.

3. ENSURING A DIVERSE AND CULTURALLY COMPETENT HEALTHCARE WORKFORCE

- At the very minimum, disaggregate health professions data on Native Hawaiians and Pacific Islanders from data on Asian Americans.
- Support the collection and analysis of health professions data by Asian American and Pacific Islander subgroups.



- Adopt a standard definition of “underrepresented minorities” that considers the inclusion of Asian American and Pacific Islander subgroups that are underrepresented in specific health professions.
- Reauthorize and increase funding for programs that support diversity in the healthcare workforce, such as the Health Careers Opportunity Program and the Program of Excellence in Health Professions Education for Underrepresented Minorities.
- Support workforce development and training programs that increase the availability and competence of health care interpreters and bilingual and bicultural health professionals.
- Develop and evaluate curriculum in health professions programs that increases awareness of the impact of culture and language on health, health behaviors, diagnoses, and treatment.

4. INCREASING RESEARCH AND IMPROVING DATA COLLECTION OF HEALTH AND HEALTH CARE NEEDS OF ASIAN AMERICANS, NATIVE HAWAIIANS, AND PACIFIC ISLANDERS

- Protect and fully fund the National Center on Health Statistics and the U.S. Census Bureau and ensure that 2010 Census efforts include a strong language assistance plan and community partnership and outreach programs.
- Work with federal and state agencies to enforce the Office of Management and Budget’s Standards on Collecting, Maintaining and Presenting Federal Data on Race and Ethnicity, and to improve their collection and reporting of Asian American and Pacific Islander data.
- Establish a health survey with sufficient sample size to improve our understanding of the unmet health and health care needs of Native Hawaiians and Pacific Islanders.
- Support planning, prioritization, and collaboration among government agencies, researchers, and Asian American and Pacific Islander community members to improve health surveys and initiate new research.
- Strengthen the role of community-based organizations in community-based participatory research, as well as funding for community based participatory research.

5. INCREASING INVESTMENT IN COMMUNITY-BASED HEALTH PROMOTION PROGRAMS

- Increase funding for the Office of Minority Health which conducts and supports health promotion and disease prevention programs that help reduce the high rates of death and disease in communities of color.
- Support funds for outreach, including support for the Community Health Workers Act of 2007.
- Codify the CDC’s Racial and Ethnic Approaches to Community Health (REACH) program which supports communities in reducing health and health care disparities.
- Reauthorize and fully fund the Family Violence Prevention Services Act. Grants help address the needs of underserved populations including underserved racial and ethnic minorities and those with limited English proficiency.
- Fully fund the Ryan White HIV/AIDS Treatment and Modernization Act of 2006; the Minority AIDS Initiative; and interpretation and translation services for LEP persons living with HIV/AIDS.
- Support investments in community-based organizations that address chronic disease prevention, interventions, treatment, and survivorship.