Impact of Hepatitis B on Native Hawaiian and Pacific Islander Communities

June 2, 2022 Hep B United Webinar







Webinar Agenda:

Welcome and Panelist Introductions

Nia Aitaoto

Presentation (10-12 mins): Overview of Hep B and NH/PI Communities and 2) Themes from Hep B Community Leader Focus Group

Mick Del Rosario

Presentation (10-12 mins): SF Hep B Free - Bay Area PILOT program

Kenson Alik

Presentation (10-12 mins): MELWP and #justB Story

Q&A

Closing Remarks

····· Hep B United ·····



Mission

Hep B United is a national coalition dedicated to reducing the health disparities associated with hepatitis B by increasing awareness, screening, vaccination, and linkage to care for high-risk communities across the United States.

- Founded in 2012 with support from the HHS Office of Minority Health
- Co-chaired by HBF and AAPCHO
- A "coalition of coalitions" model
- Over 50 members (national and local) in 24 states and 30 cities

Impact of Hepatitis B on Native Hawaiians and Pacific Islander Communities

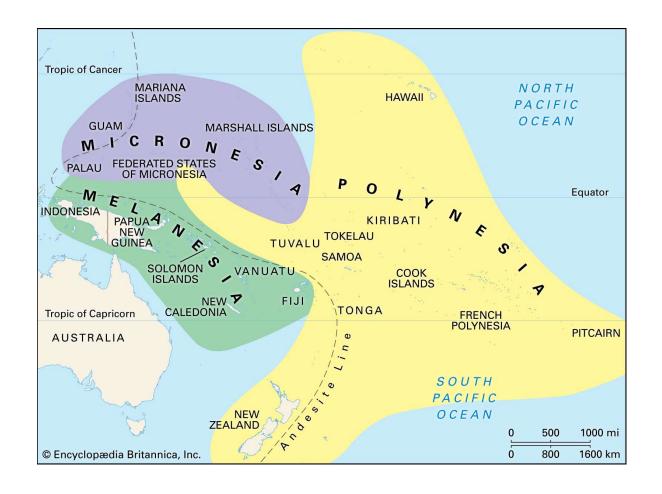


Nia Aitaoto PhD, MPH, MS

Lead Consultant

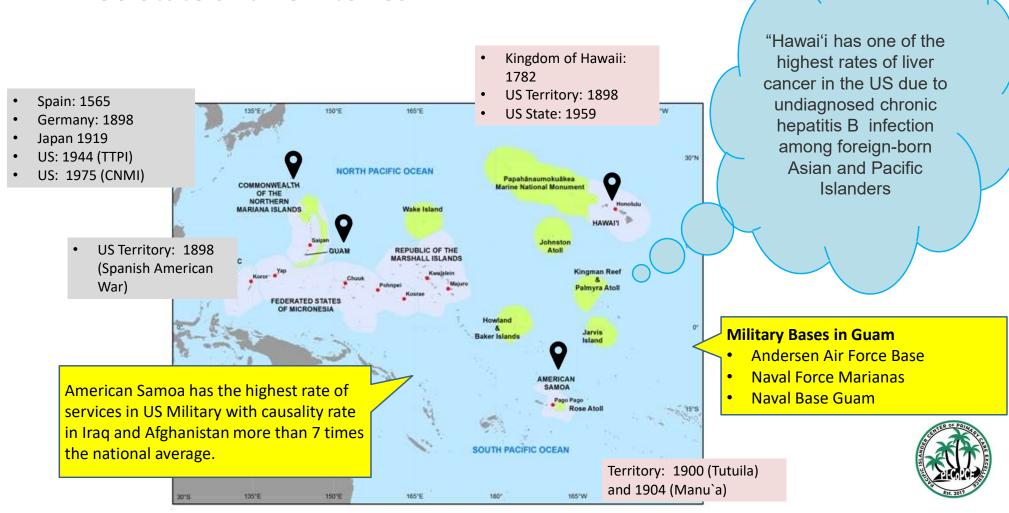
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Homeland: Native Hawaiian/Pacific Islanders (NH/PI)





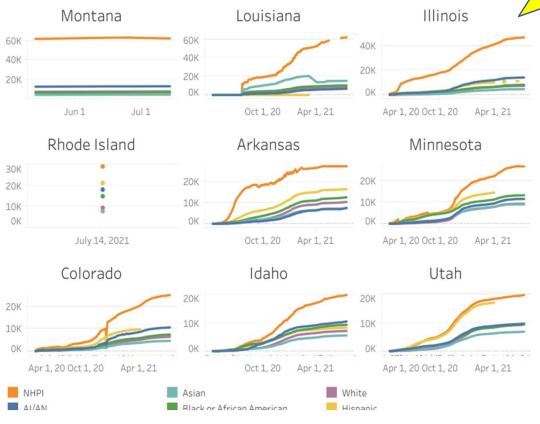
US State and Territories



Covid-19 NH/PI in the States

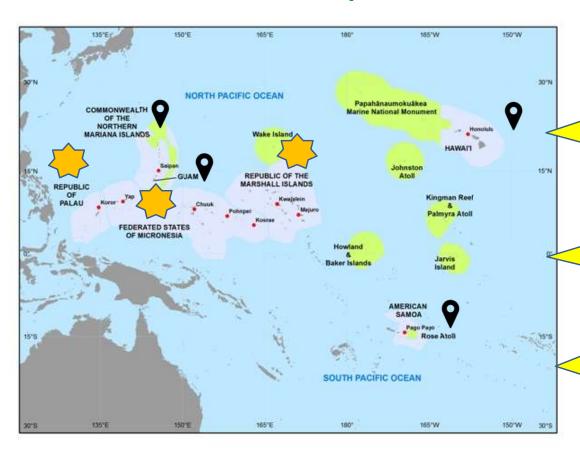
Sustainability: Data and Research Council and

Reliable and Timely Data: (1) meet with the health departments (CBO Leads) to disaggregate and release data; (2) build our capacity to collect, manage, analyze and disseminate data; and (3) Use data to advocate





US Compact of Free Association (COFA)



US Navy 1947

• Dept. of the Interior: 1951

COFA: 1986 (1994 Palau)

Between 1946 and 1958, the US detonated **67 nuclear** bombs on, in and above the Marshall Islands —exiling hundreds of people from their homes.

Military Bases

 US Army Garrison Kwajalein Atoll (USAKA) in the Republic of the Marshall Islands

FSM residents volunteer to serve in the U.S. Armed Forces at approximately double the per capita rate as Americans.



Hepatitis B in the WHO Western Pacific Region

Marshall Islands:	7.8%
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• Federated States of Micronesia: 3.5%

• Palau 2.9%

• Samoa 5.5%

• Tonga 14.8%

• Niue 11.9%

• Australia 0.9%

NH/PI Leaders Focus Group Results

- Lack of awareness and knowledge of Hepatitis B
 - Need for linguistically and culturally appropriate information and services
- Personal experience/connection but no further action community response
 - Stigma & Taboo
 - Connection to the homeland and other health conditions
 - Fatalism & Political Power
- Need for resources and competing priorities
- Need for NH/PI-specific data



Recommendations through Reflections

- Engage the community through various networks (local, state, region, national and international)
 - Linguistically and culturally appropriate information, outreach and services
 - Data, Advocacy and Policy
 - Resources
- Connection
 - Address Stigma & Fatalism
 - Homelands in the Pacific
 - Fatalism & Political Power



In CommUNITY!



SAN FRANCISCO HEP B FREE - BAY AREA

Pacific Islander Liver Outreach & Testing (PILOT) The Impact of Hepatitis B on Native Hawaiian and Pacific Islander Communities Webinar

Mick Del Rosario, Program Manager

June 2, 2022

Who are we? SF Hep B Free - Bay Area founded in Oct. 2017 as the official expansion of SF Hep B Free (2007) into other Bay Area counties.

First target: San Mateo County with over 200,000 PI & AA residents.

Partnerships with between nonprofits, government, healthcare, and advocacy groups. Mission: To increase awareness, prevention, screening, and treatment of Hepatitis B and related liver cancer.















What is PILOT?

The Pacific Islander Liver Outreach and Testing program (PILOT) aims to:

- provide community-based hepatitis B education, screening, and linkage to care to Bay Area Pacific Islander communities.
- partner with local Pacific Islander community leaders, where the program will make progress in the fight against hepatitis B and liver cancer.

Bay Area Demographics

There are approximately 2,000,000+ residents at risk!

That's about 40% of the population of Alameda, San Francisco, San Mateo, and Santa Clara counties combined!

Why?
The Bay Area is a culturally diverse population with many interracial marriages.

PI & AAs make up >20% of the population in many cities, and close to 50% in a few.

This disease affects *our* community!

CITY	% pop
DALY CITY	58%
FOSTER CITY	45%
MILLBRAE	43%
SAN FRANCISCO	37%
SOUTH SAN FRANCISCO	37%
HILLSBOROUGH	28%
SAN BRUNO	25%
BURLINGAME	20%
BELMONT	20%
PACIFICA	19%
SAN MATEO	19%





Partnering with PI Community & Allies

- Health Navigators were recruited through Taulama for Tongans
 & provided advice on best approaching the PI community
- . Insight and advice from staff at San Mateo County Health
- . Joined Unite California network to provide program participants additional health & social services if needed









PILOT Challenges & Pivots

- Concern of COVID-19 & in-person workshops
 - Solution: Hosting Zoom workshops as an alternative and holding in-person as an option
- No way to track participants getting tested if online workshop
 - Solution: Partnered with Unite Us to track patients who gets tested through participating providers
- Navigators' availability are limited to only evenings due to fulltime jobs during the day
 - Solution: Going to events already scheduled in the community and presenting



March 23, 2022 - Radio Tonga Program

Radio Tonga (also known by call letters A3Z) is Tonga's main commercial radio station.

PILOT was invited by program host Leafa Taumoepeau

Featured Health Navigators

Educated listeners about hepatitis B, the disparity omongst PI community,





Workshop in Hayward, CA - May 4, 2022

Workshop held at the Church of Jesus Christ of Latter-day Saints in Hayward

Educated 18 attendees

One attendee told the story of his cousin losing their life from hepatitis B

Attendees were shocked about the statistics that especially affects the PI community

Filled out pre and post-workshop surveys to gauge initial and after knowledge on hepatitis B





Findings So Far

- . Pacific Islander disaggregation in data is needed
- . Churches are a strong partner in educating their members of their community
- PI community wants a holistic approach to care and services

Additional Information



- . YouTube
- Facebook
- . Website
- . <u>Donate!</u>
- More information:
 - 2018 SF News Article
 - · 2020 Online Gala
 - 2010 Which One Deserves to Die Campaign
 - . CDC video resources

Contact Info

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Mick Del Rosario, Program Manager mick.delrosario@sfhepbfree-bayarea.org (415) 200-8174 SAN FRANCISCO HEP B FREE - BAY AREA

JOIN THE FIGHT AGAINST HEPATIS B

Thank you for listening!

Micronesian Education

FOR LIVER WELLNESS PROGRAM



Kenson Alik, Director MELWP kenalik01@gmail.com



OUR PROCESS

How Did We Get Here?

On World Hepatitis Day, July 28 2019, we partnered with the Hawai'i Department of Health and the Hawai'i Health & Harm Reduction Center to host the first meeting to develop Hawai'i's Hepatitis Elimination Plan. It was attended by 45 stakeholders including patients, consumers, medical and social service providers, policymakers, among others. The meeting was also attended by Lieutenant Governor Josh Green, who proclaimed hepatitis elimination an important priority for Hawai'i.

Over the following 12 months, we talked story with over 160 individual stakeholders in more than 24 formal meetings, multiple online surveys, and many more informal conversations to create the structure of this plan, establish its scope (viral hepatitis A, B, and C), and identify elimination priorities, strategic directions, and examples of micro-elimination opportunities.



WHAT DOES MICRO-ELIMINATION MEAN?

Micro-elimination means that we will work on many different, innovative, community-driven projects at the same time. This allows us to tailor hepatitis elimination to the needs of each community and to change direction quickly if things aren't working.**



After an intensive year of discussion, we collectively identified five priority areas to eliminate hepatitis in Hawai'i. For each of these areas, we developed Strategic Directions that would help guide us over the next ten years, but still give us enough flexibility to adapt to changing resources and challenges (e.g., 2020 COVID-19 pandemic). Finally, we have highlighted some possible or existing micro-elimination opportunities to move step-wise in each direction.

WILL THIS BE A COMPLETE LIST OF OPPORTUNITIES?

Not at all! The micro-elimination opportunities we list below represent only a fraction of the ideas we came up with. We decided to highlight a few that we thought were important and exciting. Since opportunities and resources may change over time, let's stay nimble!



PRIORITY AREA 4





STRATEGIC DIRECTIONS



SHARED LEADERSHIP

By 2030, create and maintain opportunities for those most affected by viral hepatitis— especially people who inject drugs, are immigrants or migrants; are houseless; are LGBTQ+; have been incarcerated; live in rural areas—to have policy and leadership roles.



PEOPLE FIRST

By 2030, implement intentional mechanism of engagement and feedback to ensure that Micro-Elimination projects address the needs of those most affected by viral hepatitis.



STIGMA REDUCTION

By 2030, develop and support efforts that change community norms around perception of viral hepatitis, especially regarding stigma of affected populations.



DATA EVALUATION

By 2030, integrate equity into evaluation metrics for all Priority Areas and Micro-Elimination projects via the Data Workgroup.

Micronesian Education for Liver Wellness Program (MELWP)

How can we take care of our own communities?



https://www.hepfreehawaii.org/micronesian-education-program

Language Barriers

- Provide In-Language Materials
- Culturally appropriate education
- Speakers speak their language
- Partners with Office of Language Access/ translated brochures/card/and basic info when visiting the offices or clinics



Lack of Health Insurance

- Provide resources and referred to service provider (We Are Oceania/ Legal Aide Society of Hawaii)
- Assist with application process for health insurance Medicaid and State
- COVID 19 Task Force, Vaccination Information



Lack of Education

- Address education and knowledge of hepatitis B and liver cancer
- Monthly Talk Story
- Convenient and accessible outreach activities (churches, group/family gathering, community/sport events
- Food and Gift Cards/Prizes for games



Lack of Access

- Individual Hep B Action Coordination (IHAC)
- Monthly follow up calls
- Local and national advocacy



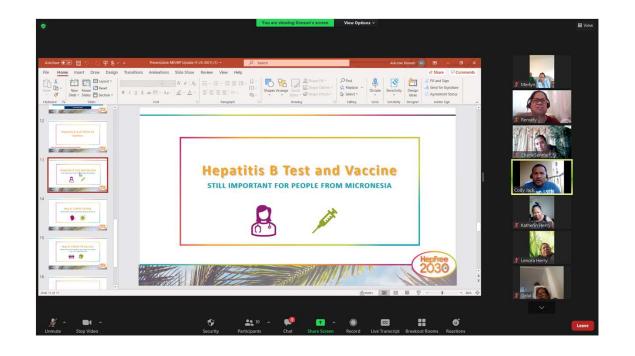
COVID-19 Challenges

- Patients stopped seeing healthcare providers/specialists
- Lack knowledge of using technology to attend telemedicine appointments
- Lack of internet access at home
- Expired prescription



COVID-19 Remedies

- Outreach/Care coordination/IHAC.
- Help them set up appt with PCP/specialist
- Ensure they pick up their meds
- Call them every month to follow up



Successes



Since May 2015

- More than 70 sessions
- Reaching over 1100 people on multiple islands

• During the COVID-19 pandemic

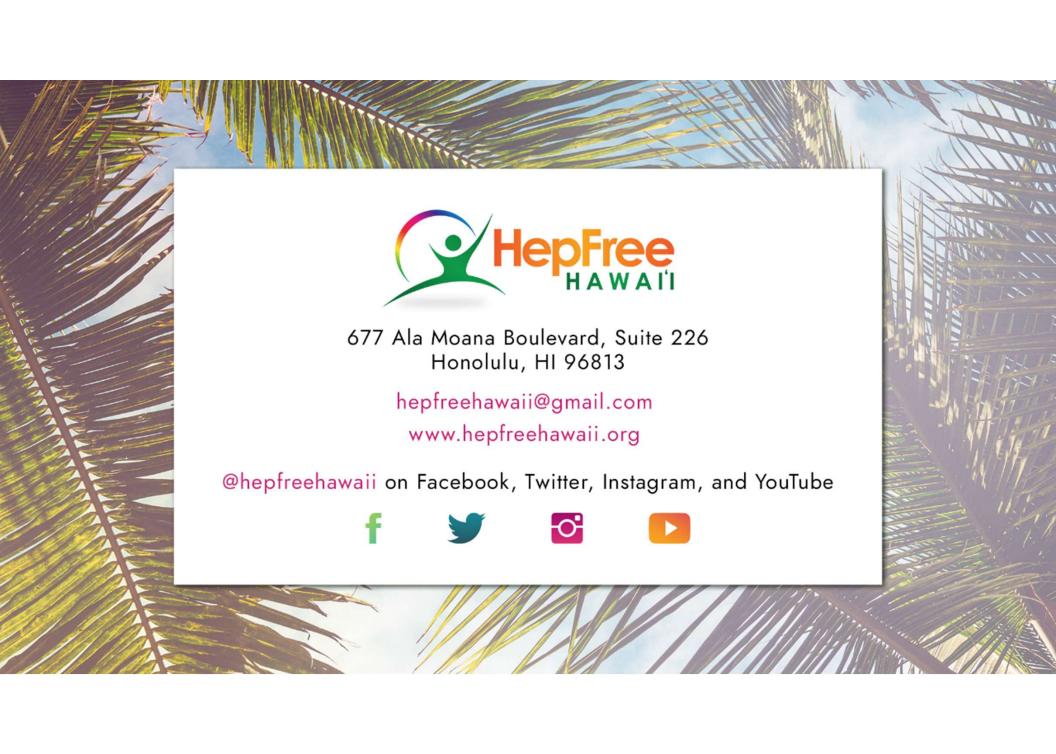
- Monthly (or more) virtual and/or inperson sessions
- Reaching over 300 people

Kommol, Kinisou, Mahalo!

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Thank you!

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