



HIV/AIDS in the Asian Communities

On October 21 2011, Asian Health Social Service Council (AHSSC) held its monthly session at APICHA located at 400 Broadway in Manhattan. The title of the presentation was "HIV/AIDS in the Asian Communities." There were three Key Note Speakers followed by a Round Table Discussion.

Dr. Robert Murayama, Chief Medical Officer at APICHA, presented the evolution of APICHA and the type of health services provided by his team. He then presented the general medical information related to HIV/AIDS including the risks and benefits of HIV medication. Dr. Murayama discussed the benefits which were to preserve immune function, decrease opportunistic infections, decrease mortality, prevent vertical transmission and to benefit public health. The risks included toxicity of medications, drug resistance, drug interactions, high cost and inconvenience.

In addition, Dr. Murayama discussed when it would be time to start medication. Some criteria including the following: CD4 is less than 500, symptomatic HIV infection/AIDS defining illness, hepatitis B virus co-infection, hepatitis C virus co-infection, renal disease and pregnancy to prevent peri-natal transmission. With the advance of medical knowledge and technology, there was a "cocktail" regimen



prescribed prior to 2004. A new pill was developed in July 2006 which made it easy for patients to comply with treatment. Dr. Murayama presented a list of USA preferred regimen for HIV/AIDS patients and the treatment goals for these patients.

Dr. Murayama stated that because of the widespread cultural practice of showing a perfect family image to the rest of the world, people in API communities do not want to talk about HIV or get tested. From 2001-2008, APIs adults were the only racial/ethnic group with a statistically significant increase in HIV diagnoses: 4.4%. Moreover, AAPIs have been steadily increasing in the US from 1% of the population in 1970 to 5% in 2008. This proportion is expected to nearly double to 9% by 2050.

“Social Services Provided to HIV/AIDS Clients in the Asian Community.”

Mandy Choy, LMSC, Director of Client Services/Senior Case Manager of CPC HIV/AIDS Services, presented the social services provided by her organization.

She discussed the challenges faced by her clients which included language barrier, stigma, denial, cultural interpretations of illness, aging and childbearing (decision to have children). In addition, there are other challenges faced by those who are undocumented. There can be employment/financial difficulties, ineligibility for financial benefits, lack of family support, legal aspects such as orders of deportation, immigration reform, gay marriage in NY and advanced directives along with uncertainty about the future.

Mandy suggested the following interventions when dealing with this population: address overall well-being of clients (physical, psychological), be aware of clients' preferences and to identify pros and cons of receiving care from providers of particular cultural backgrounds, encourage clients to initiate communication with providers, educate providers about Chinese tradition, provide supportive counseling, prevention education and HIV testing referrals for uninfected partners, pursue interventions consistent with problem conception (for example, religious counseling), provide legal referrals, and provide client empowerment such as support group, volunteer and advocacy opportunities.

Last but not least, Suki Terada Ports, Director of Family Health Project, walked us through the history of HIV/AIDS and how the exclusion of “non-white” or “colored” affected individuals was eventually resolved. She discussed at length the stereotypes of Asians as well as the importance of advocacy.

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importance of advocacy.

Suki shared valuable professional experiences and personal insights on the various challenges and obstacles APIs face on a daily basis simply from the unfortunate but often real notion that APIs are often not perceived as “Americans”. Furthermore, She stated that service providers must not ignore the conflict and strives in the historic backdrop between the different ethnic groups when we enter conversations about the very sensitive topic of HIV/AIDS. In addition, Suki highlighted how APIs are typically stereotyped as the “Model Minority” which in fact could stand in the way of APIs receiving the much needed services and support. Finally, above all what APIs impacted by HIV/AIDs need most is to have their voices heard. Suki charged all of us to “Speak up” especially to policymakers and founders who ought to start paying attention.

Round Table Discussion

The round table discussion was lead by Dr. Loan Mai who presented the UCSF API Prevention Fact Sheet from 2007 which explained the APIs’ HIV needs. She noted that APIs have significantly lower rates of HIV testing than the rest of the population, despite reporting similar rates of risk behaviors, and often delay seeking HIV treatments. It was also noted that API women employed in massage parlors often engage in activities that put them at risk for HIV infection. Stigma around HIV, homosexuality, sex work, drug use, should be addressed as well. The group shared the challenges faced when the topic of sex needs to be discussed with clients. It was agreed upon that HIV testing should be made readily available and be discussed by health providers as part of the annual/regular testing.

Next Monthly Meeting

End-of-Life Care

- Date:** 11/18/11 (Friday)
- Place:** Charles B. Wang Community Health Center
168 Centre Street, 3rd Floor, NYC 10013, 212-966-0461
- 9:00** Coffee/Networking
- 9:25** Welcome Remarks - John Tsoi, President of AHSSC
Maggie Wong, CBWCHC
- 9:30** Introduction and case sharing -
Kieu-Loan Mai, Ph.D., Research Consultant and Psychologist
- 10:00** Panel Discussion:
Approaches in overcoming barriers to end-of -life care (VNSNY)
Maria Lee, MD, Site Dir., Mount Sinai Chelsea-Village House Call Program
Gui Loo, VNSNY Hospice Care Licensed Social Worker
- 10:20** End of life care for patients with cancer or chronic disease (MJHS)
Lily Wong, RN, BSN, Dir., of Special Projects for Asian Program, MJHS
- 10:40** Group Discussion:
Patient and family perspectives to end-of-life care and provider engagement
Successful cases / Patient's testimonial
- 11:00** Closing Statement