



Capacity-Building in HIV/AIDS
for Medical Providers (CHAMPs)

HIV/AIDS Activities in Community Health Centers Serving Asian Americans, Pacific Islanders and Native Hawaiians



Association of Asian Pacific Community Health Organizations



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This program was supported by a grant from the Office of Minority Health/ Office of Public Health and Science/Office of the Secretary at the Department of Health and Human Services through grant #US2-MP5004-05.

This is Part Two of a Three-Part Series

SUGGESTED CITATION:

Association of Asian Pacific Community Health Organizations (AAPCHO). HIV/AIDS Activities in Community Health Centers Serving Asian Americans, Pacific Islanders and Native Hawaiians. December 2001

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I. BACKGROUND

Instrument

A two-part pen and paper survey was mailed to a sample of 23 Community Health Centers in the United States and in the U. S. Jurisdictions in the Pacific Basin.

This document addresses the first part of the survey, where we ask health education departments to describe current and past HIV/AIDS activities focusing on Asian Americans, Pacific Islanders and Native Hawaiians (AAPI). A ten-page questionnaire (62 items) was developed, including questions to identify the needs unique to community health centers serving Asian Americans, Pacific Islanders and Native Hawaiians.

A draft of the instrument was pilot-tested for content validity with members of the Capacity-Building in HIV/AIDS for Medical Providers (CHAMPs) Advisory Committee and Resource Persons (n=14) who are made up of researchers, evaluators, program administrators, clinicians, and community leaders. It was revised several times and tested with health education managers (n=5) for succinctness and brevity. The final version incorporated feedback from all testers.

Sample

Thirteen AAPCHO member centers, four U.S. affiliated Pacific Island community health centers and six community health centers in the U.S. serving more than 2,000 AAPI clients in 1998 were sent questionnaires. A total of 23 questionnaire packets were sent out to potential respondents throughout the U.S. and the U.S. jurisdictions.

Results

The community health centers responded to the survey. The details and findings are the subjects of this report. Their responses are presented in table form.

Table A provides an overview of the responding agencies. Table B provides a fiscal picture of the agency, including their HIV and AIDS budget, their source of funding, related experience in the area of HIV, and if there are HIV/AIDS dedicated staff.

Table C outlines HIV services and the languages served in responding health centers. Table D highlights counseling and testing program activities. Table E provides testing data for the year prior to the study. Table F captures health centers' community resource networks and the integration of HIV programs into other services. Table G provides an overview of the respondent's' participation in HIV policy recommending bodies, their accomplishments, and needs.



II. TABLES

Table A: Organizational Information

COMMUNITY HEALTH CENTER	AAPI POPULATION SERVED	PREDOMINATE AAPI ETHNIC GROUPS SERVED	CATCHMENT AREAS
Asian Health Services	26,460	Chinese, Vietnamese, Korean, Cambodian, Lao	Chinatown Oakland, Alameda county
Asian Pacific Health Care Venture	3,706	Thai, Cambodian, Filipino	Hollywood, North Hollywood, Echo Park, Silver Lake, Downtown Los Angeles
Charles B. Wang Community Health Center	18,000+	Chinese, Malaysian, Vietnamese	5 boroughs of New York City metropolitan area. Patients may also come from upstate New York & Connecticut
Family Health Center	1,229	Vietnamese, Cambodian	City of Worcester, MA and neighboring towns within 10 mile radius
International Community Health Services	7,294	Chinese, Vietnamese, Filipino	International District, Rainier Valley, Columbia City, neighborhoods with more than 30% of AAPI population
Kalihi Palama Health Center	40,000	Filipino, Native Hawaiian, Vietnamese, Micronesian	All of Oahu, mostly the Kalihi area
Kokua Kalihi Valley Health Center	4,104	Filipino, Samoan, Native Hawaiian, Laotian	Kalihi Valley area
Southern Region Community Health Center	12,696	Chamorro, Filipino, Chuukese	The southern villages of Guam such as Piti, Agat, Santa Rita, Yona, Inarajan, Umatac, Talofofo, Merizo
Waianae Coast Comprehensive Health Center	15,840	Native Hawaiian, Caucasian, Filipino	Waianae, Nankul, Malii, Makaha, Kapolei, Waianae coast
Waimanalo Health Center	35,000	Native Hawaiian, Caucasian, Filipino	Waimanalo, Kaneohe, Kailua, Windward coast of Oahu



Table B: CHC and HIV Budget

COMMUNITY HEALTH CENTER	CHC ANNUAL BUDGET	HIV/AIDS PREVENTION BUDGET	HIV/AIDS CARE & TREATMENT BUDGET	SOURCES OF HIV/AIDS FUNDING	HIV/AIDS EXPERIENCE	DEDICATED STAFF TO HIV/AIDS
Asian Health Services	\$10,000,000	\$300,000	no info provided	federal, county	12 years	4
Asian Pacific Health Care Venture	\$3.8,000,000	6%	0	county, city	no info provided	2
Charles B. Wang Community Health Center	\$10,000,000	HIV counseling & testing as part of prenatal care assistance program. Percentage of budget under grant in the amount of \$78,000 from CDC every year from 1997 to 2000 for adolescent education & outreach. Funding discontinued on June 2000.	unknown	CDC funded	10+ years	1
Family Health Center	\$10,000,000	\$600,000	no info provided	federal, state	10 years	3.5
International Community Health Services	\$7,000,000	\$119,000	\$4,900	county, foundation	1.5 years	2
Kalihi Palama Health Center	\$6,452,000	no info provided	no info provided	federal, state, Hawaii Immigrant Health Initiative (IHI) /insurance	6.5 years	1
Kokua Kalihi Valley Health Center	\$4,000,000	0	no info provided	no info provided	no info provided	no info provided
Southern Region Community Health Center	\$1,167,248	\$25,679	\$35,017	federal	19 years	no info provided
Waianae Coast Comprehensive Health Center	\$18,000,000	<1%	<1%	federal, state	15 years	0.02
Waimanalo Health Center	\$2,100,000	no info provided	<1%	federal, state	7 years	2



Table C: HIV Activities

COMMUNITY HEALTH CENTER	ASIAN LANGUAGES PROVIDED	PREDOMINANT TARGETED POPULATION	HIV PREVENTION SERVICES & ACTIVITIES	CARE & SUPPORT SERVICES
Asian Health Services	Cantonese, Mandarin, Vietnamese	MSM, immigrant women, commercial sex workers, youth	written materials, street outreach, high school outreach, sexual health education, condom distribution, needle exchange/harm reduction	medical
Asian Pacific Health Care Venture	Japanese, Korean, Tagalog, Thai, Vietnamese	youth, recent immigrants, commercial sex workers	media/public information, written materials, bar outreach, junior/middle/high school outreach, sexual health education	program at start-up phase
Charles B. Wang Community Health Center	Cantonese, Mandarin, Vietnamese (with translation)	pregnant women, general community, youth	media/public outreach campaign, HIV/AIDS radio call-in program, written materials, street outreach, junior/middle/high school outreach	case management, partner counseling & notification and referral services
Family Health Center	Vietnamese	IDU, sex with infected partner, pregnant women	written materials, condom distribution, drug & alcohol treatment, risk reduction counseling, prevention case management, one-on-one counseling	early intervention services, dental care, case management
International Community Health Services	Cambodian/ Khmer, Cantonese, Japanese, Korean, Laotian, Mandarin	MSM, youth, women	written materials, junior/middle/high school outreach, alternative high school outreach, sexual health education, condom distribution	case management, language interpretation, food, clothing, financial
Kalihi Palama Health Center	English, Hawaiian, Ilocano, Indonesian, Japanese, Korean	pregnant women, heterosexual women, teens	media/public information campaign, HIV/AIDS information hotline, written materials, street outreach, junior/middle/high school outreach	early intervention services, mental health service referrals

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Table C: HIV Activities (continued)...

COMMUNITY HEALTH CENTER	ASIAN LANGUAGES PROVIDED	PREDOMINANT TARGETED POPULATION	HIV PREVENTION SERVICES & ACTIVITIES	CARE & SUPPORT SERVICES
Kokua Kalihi Valley Health Center	English (including pidgin), Ilocano, Tagalog, Visayan, Chinese (4 dialects), Marshallese, Thai, Vietnamese, Japanese, Samoan, Laotian, Micronesian (2 dialects)	No specific targeted group; sometimes receive requests from schools, churches and other community groups; HIV/AIDS is included in our STD prevention education	junior/middle school outreach, one-on-one counseling, STD prevention & treatment, HIV blood drawing testing, HIV testing for pregnant women	currently no HIV+ clients; sometimes provide translation services for Samoan HIV+ clients at other agencies.
Southern Region Community Health Center	English	pregnant women, MSM, heterosexual men & women	media/public information campaign, HIV/AIDS information hotline, written materials, high school outreach, condom distribution, risk reduction counseling	HIV/AIDS treatment advocacy, partner counseling and referral services, service referrals
Waianae Coast Comprehensive	English, Hawaiian pidgin	Native Hawaiian heterosexuals, general community, rural residence	written materials, street outreach, junior/middle/high school Health Center outreach, sexual health education, condom distribution	medical intervention, case management & substance abuse
Waimanalo Health Center	Tagalog	teens, pregnant women, Native Hawaiian transgenders	media/public information campaign, written materials, bar outreach, junior/middle/high school outreach, sexual health education	case by case basis



Table D: HIV Counseling and Testing Program

COMMUNITY HEALTH CENTER	HIV TESTING	CERTIFICATION OF COUNSELORS	LOCATION OF TESTING	HIV COUNSELING	TYPES OF TESTING
Asian Health Services	yes	yes, state certified	on-site, mobile unit	yes	anonymous/ confidential
Asian Pacific Health Care Venture	yes	yes, state & county certified	on-site, dance clubs, bars, other CBOs, gay pool parties, gay clubs, ethnic festivals	yes	anonymous/ confidential
Charles B. Wang Community Health Center	yes	yes, state certified	on-site, off-site mobile unit (collaboration with NYC DOH)	yes	confidential
Family Health Center	yes	yes, state certified	on-site	yes	anonymous/ confidential
International Community Health Services	yes	yes, county certified	on-site, community venues, ethnic festivals	yes	anonymous/ confidential
Kalihi Palama Health Center	yes	on-site, state certified	on-site, public sex environments (i.e. parks, bathrooms)	yes	confidential
Kokua Kalihi Valley Health Center	yes	yes, state certified	on-site	yes	anonymous/ confidential, confidential
Southern Region Community Health Center	yes	no, however, we are interested in receiving training for HIV certified counselors	on-site	yes	anonymous/ confidential
Waianae Coast Comprehensive Health Center	yes	yes	on-site, community venues: beach, park, school, public sex environments (i.e. parks, bathrooms)	yes	anonymous/ confidential, confidential
Waimanalo Health Center	yes	yes, state certified	on-site	yes	anonymous/ confidential, confidential



Table E: HIV Testing Data

COMMUNITY HEALTH CENTER	FEMALES TESTED IN THE LAST YEAR	FEMALES TESTED POSITIVE	MALES TESTED IN THE LAST YEAR	MALES TESTED POSITIVE	FEMALE YOUTH TESTED IN THE LAST YEAR	FEMALE YOUTH TESTED POSITIVE	MALE YOUTH TESTED IN THE LAST YEAR	MALE YOUTH TESTED POSITIVE	PREGNANT WOMEN TESTED IN THE LAST YEAR	PREGNANT WOMEN TESTED POSITIVE
Asian Health Services	20-30	no info provided	20-30	no info provided	15-20	no info provided	15-20	no info provided	no info provided	no info provided
Asian Pacific Health Care Venture	179	0	130	0	no data provided	no data provided	no data provided	no data provided	31	no data provided
Charles B. Wang Community Health Center	1071	1	17	0	230	0	4	0	812	1
Family Health Center	0	no info provided	0	no info provided	no info provided	no info provided	no info provided	no info provided	no info provided	no info provided
International Community Health Services	10	0	10	1	10	0	10	0	0	0
Kalihi Palama Health Center	216	0	10	0	20	0	5	0	180	0
Kokua Kalihi Valley Health Center	84	1	10	0	50	0	8	0	48	0
Southern Region Community Health Center	194	no info provided	10	no info provided	116	no info provided	6	no info provided	153	no info provided
Waianae Coast Comprehensive Health Center	37	0	6	2	5	0	2	0	0	0
Waimanalo Health Center	120	0	38	0	60	0	19	0	91	0



Table F: HIV / AIDS Program Integration

COMMUNITY HEALTH CENTER	INTEGRATION OF HIV/AIDS PROGRAM	INTERNAL & EXTERNAL REFERRALS FOR HIV POSITIVE CLIENTS
Asian Health Services	no info provided	Case manager at another ASO address the following needs: housing, medical, insurance, substance use, partner notification. We have no current infrastructure (other than medical) that specializes with HIV+ patients.
Asian Pacific Health Care Venture	yes, through primary care. Our intake and provider screen their risk for HIV and refer for other services. However, it has its own department and different filing system.	conduct initial counseling and refer to outside resources, such as the AIDS Foundation, for treatment.
Charles B.Wang Health Center Community	yes, through our prenatal care assistance program. All pregnant women were tested and counseled. Education on HIV prevention has been provided to all adolescent, female, and adult patients.	patients who are HIV+ will be referred to social workers who will complete the psycho-social assessment. Patients will be referred to local providers who are experts in delivering health care and counseling services to HIV+ patients. Social workers will continue to coordinate with patients' providers and outside resources to ensure that patients' needs are being met.
Family Health Center	yes, HIV health educators who provide education regarding risks/prevention, work cooperatively with the medical HIV team. We meet together monthly to discuss both program and client needs.	counselors, referred to primary care, internally or to their own provider
International Community Health Services	yes, training for service providers and other staff	HIV+ clients from clinic sites are referred to HIV program coordinators who function as case managers and client advocates. Clients are referred to mainstream AIDS appropriate services based on need, such as housing.
Kalihi Palama Health Center	yes, if doctors see patients and think they need to be tested, they will refer them that day for testing. If they have no insurance they are offered free testing.	social workers, as soon as possible to internal medicine & social worker, then may be referred to HIV specialty clinics.
Kokua Kalihi Valley Health Center	yes, STD prevention services, family planning & prenatal	counselors
Southern Region Community Health Center	yes, family planning, adolescent health, prenatal care	Internal medicine MDs. Referred to the Bureau of Communicable Disease Control STD/HIV program for contact surveillance, follow up, and treatment. Medications are obtained through the HIV program. The HIV program provides referrals to other organizations such as the Coral Life Foundation, Medicaid, Medically Indigent Program and Medical Social Worker for Assistance with health insurance coverage and other financial social needs.
Waianae Coast Comprehensive Health Center	yes, Women, Infant, Children program (WIC)	depending upon clients' needs, typically an application for State Health Care is submitted and referrals are made to PLP and/or Behavioral Health provider. Because of the lack of staff, a referral is typically made to a local ASO.
Waimanalo Health Center	yes, teen physical exams, all family planning/prenatal, STD, sport physical exams	internal medicine MDs, infectious disease specialist with HIV practice; try to secure Medicaid, QUEST insurance coverage



Table G: CHC Accomplishments and Needs

COMMUNITY HEALTH CENTER	REPRESENTATION IN HIV PLANNING BOARDS	ACCOMPLISHMENTS	NEEDS
Asian Health Services	Frequently involved in HIV prevention council of CDC or local board of CHC; to a great extent involved in HIV/AIDS Title II Consortia planning group for city/county; not at all involved in Ryan White CARE council.	AHS has made extraordinary stride in delivering services to women in massage parlors and other underground economies (sewing factories and nail salons); AHS is frequently doing its best in providing HIV testing and counseling for the communities they serve.	More outreach and off-site testing in order to achieve higher patient return rates; More coordination between HIV prevention services and HIV-related medical services.
Asian Pacific Health Care Venture	Involved in HIV prevention council of CDC or local board of CHC; involved in HIV/AIDS Title II Consortia planning group for city/county; often involved in Ryan White CARE council.	Teen theater combining youth leadership activity, after school and peer leader/health education programs; HIV testing on 400 people annually; theater participants perform and educate audience on HIV prevention as well as function as informal peer leaders in their school and community; APHCV often provides HIV testing and counseling for communities they serve; there is improved coordination between HIV prevention services and HIV-related medical services.	Case management services to HIV+ clients.
Charles B. Wang Community Health Center	Rarely involved in HIV prevention council of CDC or local board of CHC; to a great extent involved in HIV/AIDS Title II Consortia planning group as well as the Chinese-American Planning Council; not at all involved in Ryan White CARE council.	Service referrals for patients with HIV/AIDS so they can receive information on services and resources available; screened almost 100% of prenatal patients; incorporated HIV prevention education into routine Internal Medicine/Adolescent/OB/GYN screening tools; public awareness campaign on HIV/AIDS prevention (radio programs, news articles); HIV/AIDS prevention education targeted at adolescents and youth immigrants, increasing awareness and enhancing risk reduction behavior; CHC is doing its best in providing HIV testing and counseling for the communities they serve; there is frequent coordination between HIV prevention services and HIV-related medical services.	Case support and educational services for adolescents at risk for HIV/AIDS.
Family Health Center	Somewhat involved in HIV prevention council of CDC or local board of CHC; somewhat involved in HIV/AIDS Title II Consortia planning group for city/county; somewhat involved in Ryan White CARE council.	Increased consumer participation in health center affairs; medical adherence support; more urgent care and dental care available; FHC is doing its best in providing HIV testing and counseling for the communities they serve; there is increasing coordination between HIV prevention services and HIV-related medical services.	Transportation for patient testing; educational and support groups.

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Table G: CHC Accomplishments and Needs (continued)...

COMMUNITY HEALTH CENTER	REPRESENTATION IN HIV PLANNING BOARDS	ACCOMPLISHMENTS	NEEDS
International Community Health Services	Somewhat involved in HIV prevention council of CDC or local board of CHC; somewhat involved in HIV/AIDS Title II Consortia planning group for city/county; rarely involved in Ryan White CARE council. Hard to find HIV+ AAPI's and individuals to work in community advocacy arena. HIV program staff members do not have time to participate in HIV planning council activities.	HIV prevention services targeting youth program activities involve interactive and youth- appealing components, like games; youth participation in peer education model activity; MSM prevention working in conjunction with social groups that provide networking and social activities; integration of a grass roots AIDS service model into clinic setting; ICHS is somewhat doing its best in providing HIV testing and counseling for the communities they serve; there is some coordination between HIV prevention services and HIV-related medical services.	HIV prevention for high risk AAPI's.
Kalihi Palama Health Center	Rarely involved in HIV prevention council of CDC or local board of CHC; rarely involved in HIV/AIDS Title II Consortia planning group for city/county; rarely involved in Ryan White CARE council.	Education on safe behavior; testing for individuals at risk; referral and treatment for those who are HIV+; increased education on HIV; in school there is increased education to the point of better prevention of HIV; KPHC is doing its best in providing HIV testing and counseling for the communities they serve; there is frequent coordination between HIV prevention services and HIV-related medical services.	More outreach and education; programs targeting teens, especially gay, lesbian, bisexual, and transgender individuals.
Kokua Kalihi Valley Health Center	Rarely involved in HIV/AIDS Title II Consortia planning group for city/county; not involved in Ryan White CARE council.	Educational presentations to schools; continued availability to the community to provide prevention educational presentations despite lack of HIV/AIDS funding.	N/A

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Table G: CHC Accomplishments and Needs (continued) ...

COMMUNITY HEALTH CENTER	REPRESENTATION IN HIV PLANNING BOARDS	ACCOMPLISHMENTS	NEEDS
Southern Region Community Health Center	Often involved in HIV prevention council of CDC or local board of CHC; often involved in HIV/AIDS Title II Consortia planning group for city/county; frequently involved in Ryan White CARE council.	Partner counseling and referral services; aggressive contact surveillance and follow-up on partners via Guam's CDC and STD/HIV program; collaboration with Guam's CDC STD/HIV program to develop a memorandum of understanding to provide STD screening, counseling, testing, and treatment services for adolescents and adults qualifying for comprehensive STD prevention systems (CSPS) program; recent implementation of a primary care information system (Health Pro) providing clinical tracking and referral tracking for patients, including those with HIV; SRCHC is somewhat doing its best in providing HIV testing and counseling for the communities they serve; there is often coordination between HIV prevention services and HIV-related medical services.	Orasure HIV testing; expansion of pharmacy service to include dispensing of drugs for HIV+ patients.
Waianae Coast Comprehensive Health Center	Not at all involved in HIV prevention council of CDC or local board of CHC; often involved in HIV/AIDS Title II Consortia planning group for city/county; not at all involved in Ryan White Care council.	Effective prevention programs providing tools that increase knowledge and change behavior; preventive health and health education programs; provide services to local schools, churches, transitional housing, public sex environments (such as parks and beaches); fliers to promote programs to community members participating in health fairs; annually celebrating World AIDS Day; WCCHC is doing its best in providing frequent HIV testing and counseling for the communities they serve; there is some coordination between HIV prevention services and HIV-related medical services.	HIV support groups; free confidential "other" STD testing.
Waimanalo Health Center	Not at all involved in HIV prevention council of CDC or local board of CHC; not at all involved in Ryan White CARE council.	Provision of confidential, anonymous, and free testing; increased prenatal HIV testing up to 100%; health education for teens; training of outreach workers in HIV counseling; frequent coordination between HIV prevention services and HIV-related medical services; WHC is somewhat doing its best in providing HIV testing and counseling for the communities they serve.	Funding to support staff training in HIV counseling and testing.



III. FINDINGS AND IDENTIFIED NEEDS

Findings

- All responding community health centers provide services to ethnically diverse and multilingual populations.
- Most receive some level of federal government support for HIV related services.
- Many have a small number of dedicated HIV and AIDS staff.
- A number of centers provide prevention and care services targeted to high-risk populations.
- Most utilize media, community outreach, sexual health education, counseling and testing as prevention service activities.
- All community health centers provide HIV counseling and testing services either on site, off site, or at mobile units. Most have state certified counselors. Most provide anonymous/confidential testing.
- More females than males are tested in these health centers. Among these women, a majority are pregnant women.
- Testing services are primarily integrated in prenatal care, Sexually Transmitted Diseases, and family planning programs.
- Many of the responding centers refer out for case management and treatment services.
- Very few of the responding centers are represented in their local Prevention Planning Councils and Ryan White Care Council.
- Among the accomplishments reported were: effective outreach and testing services, their ability to provide language specific and culturally appropriate services, and ongoing community education efforts.

Identified Needs

- Coordination between clinical services (testing and medical services) county health department analysis and reporting of data, and county health department tracking of HIV+ patients.
- Increased availability of social and other support services for their patient populations.
- Increased funding support for staff training on HIV.
- Increased funding support for HIV prevention focused on teens and youth, lesbian, gay, bisexual, and transgender AAPIs.



IV. D I S C U S S I O N / R E C O M M E N D A T I O N S

*I*n an effort to raise the unique needs of HIV/AIDS programs of community health centers serving Asian Americans, Native Hawaiians, and Pacific Islanders to the forefront, it is important that policy makers and health officials are aware of the pressing needs of AAPI communities. It is imperative to recognize that HIV/AIDS is becoming increasingly prevalent in AAPI communities and that programs should be designed to be culturally and linguistically relevant to the populations being served and targeted. When HIV prevention and care priorities are developed, issues specific to AAPI populations should be included and there should be AAPI representation on HIV planning bodies to ensure that AAPI needs are being voiced and addressed. By attempting to understand and integrate cultural and linguistic needs into HIV/AIDS programs, we can better determine the scope of HIV/AIDS in AAPI communities and how best to combat those issues and decrease the number of cases.



V. ABBREVIATIONS

AIDS:	acquired immunodeficiency syndrome
AHS:	Asian Health Services
APHCV:	Asian Pacific Health Care Venture
AAPI:	Asian Americans & Pacific Islanders
AAPCHO:	Association of Asian Pacific Community Health Organizations
ASO:	AIDS service organization
CHC:	Charles B. Wang Community Health Center
CDC:	Centers for Disease Control and Prevention
CHAMPs:	Capacity building in HIV/AIDS for Medical Providers
FHC:	Family Health Center
HIV:	Human immunodeficiency virus
HIV+:	individual infected with HIV
ICHS:	International Community Health Services
IDU:	Injection drug user
KPHC:	Kalihi Palama Health Center
KKV:	Kokua Kalihi Valley Health Center
MD:	Medical Doctor
MSM:	Men who have sex with men
NYC DOH:	New York City Department of Health
SRCHC:	Southern Region Community Health Center
STD:	Sexually Transmitted Disease
WIC:	Women, Infant and Children Program
WCCHC:	Waianae Coast Comprehensive Health Center
WHC:	Waimanalo Health Center



Association of Pacific Community Health Organizations

2002