
Project AsPIRE

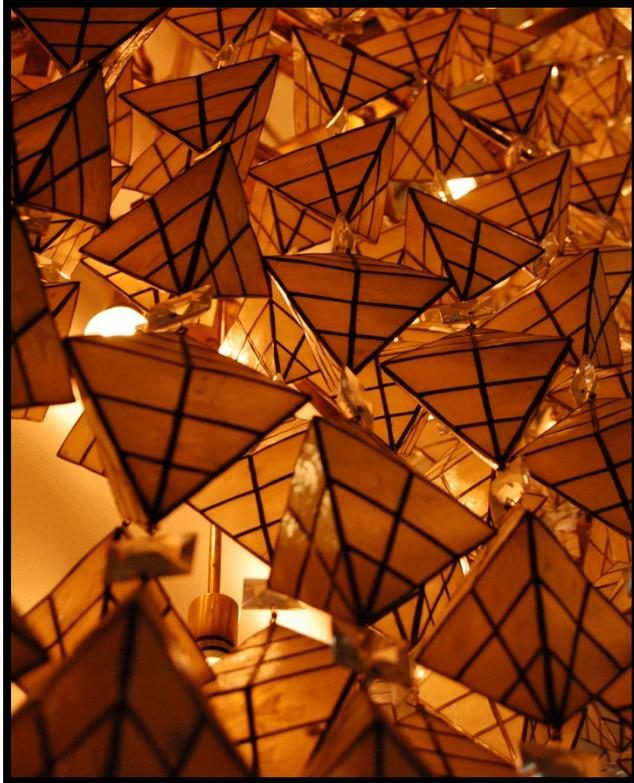
Asian American Partnerships in
Research and Empowerment



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Executive Summary



Health care represents one of the most basic and primary needs for any population. Accessing and utilizing health care within the United States can be a major challenge for new immigrants. Various factors including health insurance status, low income levels, immigration-related concerns, and lack of culturally tailored resources and services may hinder Filipino Americans from accessing needed health care services.

Within the Filipino American community of New York City, cardiovascular disease (CVD), particularly hypertension, represents a major concern. CVD is the leading cause of death among Filipino Americans (Huo & Lauderdale, 2009). Despite the high prevalence of CVD and hypertension, there are limited culturally and linguistically appropriate hypertension management and health education materials available which contributes to poor disease management in the community (Hong and Bayat, 1999; Abesamis-Mendoza, 2007; Smith et al., 2005).

Surprisingly, few initiatives have been developed to address this health disparity facing the Filipino community. Project AsPIRE was designed to meet this need and to help strengthen existing health care and community networks within the Filipino communities living in New York City (NYC). A partnership between the Kalusugan Coalition (KC) and the NYU Center for the Study of Asian American Health (CSAAH), a community health worker-led intervention program was

developed which was specifically designed to aid in CVD prevention and hypertension control within the Filipino community.

**59 year old female caregiver with hypertension. In 4 months, reduced:
BP: 140/83 → 126/80
Total Cholesterol: 212 mg/dL → 176 mg/dL**



"Joining Kalusugan and attending sessions on cardiovascular health has changed my life. I learned to exercise even when I am at work. I have gained many friends whom I can share my thoughts. I am stress-free and my blood pressure is stable."

A community based participatory research (CBPR) approach was utilized and community needs assessments were conducted to direct this intervention program. These steps were taken to ensure the program was informed by the community and that the community was an equal partner in decision making.

In order to test whether the community health worker (CHW) program intervention was effective in controlling hypertension within this Filipino

community, a randomized control study was conducted. The specific study goals of this 8 yearlong study included:

- a. Increased compliance with keeping health provider appointments;**
- b. Increased compliance with taking hypertension medication;**
- c. Reduction in mean systolic and diastolic blood pressure; and**
- d. Improved ability to control blood pressure.**

A total of 239 Filipino Americans who were diagnosed with hypertension and living in the metropolitan NYC area were invited and accepted participation in the study. Of these participants, 112 were randomly selected to receive the CHW intervention program and 127 participants were randomly selected to serve as controls. The intervention program participants received CHW led interactive workshops which used storytelling and other culturally tailored techniques. They also met regularly with CHWs, one-on-one, to address specific health issues, barriers to care, and to connect with culturally competent providers for needed medical services. Control participants received written materials on CVD prevention and hypertension control.

Compared with individuals in the control group, participants assigned to receive the intervention program demonstrated significant improvement in mean systolic



and diastolic blood pressure. They were also more likely to show controlled blood pressure after 8 months, as well as significantly improved medication adherence and appointment keeping.

Over the course of 8 years, Project AsPIRE demonstrated the critical need for culturally appropriate health care services and networks within the Filipino American communities of NYC. This CHW program, which was informed by the community and specifically tailored to meet its unique needs, was successful in improving multiple health outcomes of Filipinos with hypertension and adding to the body of public health literature on community-based disease management interventions for the Filipino American and other racial and ethnic minority communities (Ursua et al., 2013-2014).

The success of the Project AsPIRE CHW program has been leveraged to support additional opportunities to further address the health of the Filipino American community. Project AsPIRE was awarded a grant to expand the program through a train the trainer approach using webinars, online toolkits and social media to train 35 additional CHWs to deliver the program in cities across the US, including Jersey City, NJ, San Francisco, CA, and San Diego, CA. Outcomes from Project AsPIRE have also served as important resources to support policy and advocacy related activities on the role of CHWs as health professionals and as critical members of health care teams within the Patient Protection Affordable Care Act to improve access to and delivery of health care services for underserved populations.

We hope that Project AsPIRE will serve as a model for future CHW interventions in other underserved racial and ethnic minority communities.

50 year old female caregiver with hypertension and type 2 diabetes mellitus.

Reduced BP: 137/94 → 113/80

Weight loss: 135 lbs. → 129 lbs

Fasting Glucose: 160 mg/dL → 65 mg/dL



“The constant follow up by my CHW and the encouragement to continue doing exercises at least thirty minutes a day paid off. I've reduced my weight, my blood pressure is under control, and my doctor has told me that I don't need to see him as often now...I am so happy of the privilege to be a participant of this project.”

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