

State Innovation Model

October 2015

SIM Consumer Advisory Board **Southeast Asian Listening Session**

Members of the Southeast Asian community in Connecticut face specific healthcare challenges, including high rates of diabetes and hypertension.

Additionally, those that fled from the regimes of Khmer Rouge and Pol Pot in the 1970s and 1980s and came to Connecticut have high rates of trauma, depression, and post-traumatic stress disorder.



These physical and mental healthcare needs are linked. Research shows that if you have post-traumatic stress disorder you are 60% more likely to develop type-two diabetes.

The SIM Consumer Advisory Board held the Southeast Asian Listening Session in the Elmwood Community Center in West Hartford this week. The room was filled with almost 150 advocates, community members, and healthcare leaders, with interpreters ensuring everyone could participate.

Sengly Kong, the Associate Director of Khmer Health Advocates, said that 50% of Cambodians have a chronic condition. There are 4,000 Cambodians in Connecticut.

Challenges to improved health include limited access to interpreter services, high drug costs, lack of transportation, and mental health services that are fragmented and not culturally tuned to the needs of Southeast Asian refugees.

Models in Connecticut and nationally show opportunities for addressing these needs. The Refugee Health Interpreter Services for the Alameda Health System in California uses a tele-conferencing system to quickly and cost-effectively provide interpretation services to the entire region. Sambo Ly B.S., the Director, says that they used to do in-person interpreting; requiring that patients wait 45 minutes to two hours while staff drove 25 miles to provide 15 minutes of interpretation. Now, with the installment of a monitor, they are able to address 700 requests a day.

Thomas Buckley, a professor at the UCONN School of Pharmacy, spoke about a model that pairs community health workers with pharmacists. The community health worker can gather information about the medications a person is taking prior to the visit, as well as screening for depression in a culturally-tuned way.

Addressing the health needs of the Southeast Asian community in Connecticut requires multiple strategies and ongoing engagement. The State Innovation Model is one lever that aims to improve health for all populations. One set of targeted SIM interventions that will impact the Southeast Asian community includes the Community & Clinical Integration Program (CCIP), and the Advanced Medical Home (AMH) Program.



A participant in the forum voices his concerns over lack of transportation, translation services from Vietnamese and Lao to English, and the high price of medications.

CCIP will offer technical assistance, and in some cases financial awards, to Advanced Networks and health centers to meet standards in identifying and providing comprehensive care management for individuals with complex needs; identifying health disparities among sub-populations and deploying an intervention; and better integrating behavioral healthcare into the primary care practice.

The AMH Program will offer support to primary care practices to meet medical home standards such as assessing the diversity of its population; assessing the language needs of its population; providing interpretation or bilingual services to meet the language needs of its population; and providing printed materials in the language of its population.

Special thank you to everyone who made this event possible:

SIM Consumer Advisory Board and SIM staff
Speakers: Megan Berthold, Thomas Buckley, D.J. Ida, Sengly Kong, Theanvy Kuoch, Sambo Ly, Richard A. Miller, Howard Phengsomehphone, Ban Tran, Victoria Veltri, Julie Wagner
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