



# PACIFIC HEALTH GATHERING 2017

## WORLD CAFÉ DISCUSSION RESULTS

University of Hawaii JABSOM &  
University of Arkansas for Medical Sciences  
Honolulu, Hawaii  
October 3-5, 2017

# World Café

- Opportunity for community leaders, patients, providers, researchers, etc. to meet and get to know each other.
- Opportunity for conference participants to confirm and discuss the three Pacific Health Priorities.
- Priorities were selected based on results from 2016 Gathering.



# Priorities

1. Diabetes Prevention
2. Pathways to Health Careers
3. Veterans Health
4. Pacific Islander Health



# Diabetes PREVENTION

## Health Literacy, Communication and Education

- a. Best Practices: Word of mouth (avenue to dissemination)
- b. Need: translated and culturally relevant materials; tailor CDC materials; dissemination and access to materials; centralize database (International Native PI Repository) for translated and “work in progress” materials; and health curriculum tailored for PI in schools
- c. Ideas: Difficulty in communicating with PI can offer an opportunity to understand their values; work with the PI definition of health (use this definition to frame prevention messages); and move from disease messaging to health and wellness messaging

## Different cultures (not just ethnic/racial culture)

- a. Culture of collaboration: health programs (Oral Health, TB, etc.); groups of people (artists, faith leaders, etc.); and generations (elders, working adults, young adults, youth, children, etc.)
- b. Economic status (ex. “Middle class can’t afford to be healthy”)
- c. Geo-political: beyond the US Pacific – ex. French Polynesia also have issues with diabetes and diabetes prevention.



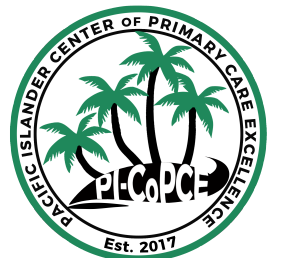
# Diabetes PREVENTION

## Ways of thinking

- a. Values: Understanding the “WHY” will affect change
- b. Attitude: diabetes is “normal”; disdain; and problem is too big
- c. Cultural identity: need to link with healthier behaviors
- d. Health Focus: what happened in the past and needed outcomes (future) but not managing current stresses and situations

## Research

- a. Holistic approach (not just diet and exercise)
- b. Helicopter studies don't affect lasting change because healthy lifestyle are not incorporated into the everyday living of PI
- c. Do research that benefits the people NOT just for the sake of science
- d. Policy Research: Taxes (sugar, sin, etc.); Regulation on imported food/drinks, etc.



# Diabetes PREVENTION

## Collective Work

- a. Advocacy: Educating elected officials on prevention; Continuous conversation with elected officials and change agents; and Structural Changes informed by evidence/best practices.
- b. Networks of champions: focus on 1 or 2 priorities around research, policy change, information dissemination, etc.
- c. Environment: Work with communities to identify root causes of negative health outcomes
- d. Training our own people to be part of the workforce
- e. Promote our HEALTHY traditions and use them in innovative ways!



# Veterans Health

## Needs

- a. Understanding what benefit is available for veterans and active duty
  - Information and education on pathways to US citizenship
- b. Accessing health benefits and services
  - ex. PTSD services
  - VA clinic availability for COFA migrants (Pay their own way to VA clinic)
- c. Accurate count of PI veterans for planning and advocacy purposes
- d. Information Sharing
- e. Upper-level voices from Pacificans



# Veterans Health

## Ideas!

- a. Organize veterans at the local level
- b. Create a group (national level) with representation from the local level to look at Pacifican veterans issues.
  - This group can also facilitate community inputs and information; dissemination of information
  - Collaborate with HHS and DOD
- c. Plan for outreach (including citizenship clinics), lobbying, etc.
- d. Partnerships: Community Health Centers, Veteran Service Academies, SAMHSA, etc.





# Pathway to Health

## Need

- a. More PI students going into health careers
- b. Program to encourage students to continue to college (undergraduate and graduate studies)
  - Ex. Pasefika Passion Pipeline (Hawaii) to transition from HS to college
  - Need programs to transition from college to graduate studies AND college to career

## Barriers

- a. Family obligations (students taking off from school to fulfill family obligations)
- b. Tuition and Financial Aids
- c. Documentation (prove citizenship)
- d. Preparation (math and science)



# Pathway to Health

## Moving forward!

- a. Improve Support system: Family support, good counselors, community support, etc.
- b. Set up a mentoring program or system for HS, college and early career: encourage, support, guide, etc.
- c. Tutoring programs: High School and College (undergraduate and graduate)
- d. Pipeline Programs tailored for Pacific Islanders



# Pacific Islander Health

## Needs

- a. Local centers to help PI with socio-economic needs
- b. Community and Families to be passionate about their health
- c. Medicaid: involvement of PI elderly and low income
- d. Health Funding allocation
- e. Address Social Determinants of Health

## Barriers

- a. Funding (barrier between funder and community)
- b. Equitable access: clinical and education
- c. Low numbers of PI in health workforce and leadership positions
- d. Cultural Competency (all sides and levels)
- e. Understanding of what is threatening our health (including nuclear war, climate change, etc.)
- f. Discrimination and Racism



# Pacific Islander Health

## Ideas!

- a. Educate ourselves and others on different PI subgroup and diversity among groups
- b. PI engagement in developing Policies and Laws that dictates health
- c. Advocate for cultural approaches
- d. Community Mobilization – need a MOVEMENT or multiple movements
- e. Work with government agencies to bridge the gap
- f. More GATHERINGS to “update and adapt”



# Moving Forward...

- Frame the agenda for the **2018 Gathering – Salt Lake City, Utah**
- World Café 2018 at the Gathering
- Forming work groups and joining existing work groups.
- Open to ideas...

