

## **IMPROVING PATIENT OUTREACH THROUGH ETHNIC MEDIA**

### **SESSION 1**

#### **OVERVIEW**

Dean Schillinger, Director of the Center for Vulnerable Populations of UCSF and Associate Professor of Clinical Medicine at UCSF, facilitated an enriching discussion with a room full of ethnic media journalists as well as 15 immigrant leaders (including a diverse group of ESL learners from City College of San Francisco) and their instructors. Altogether, approximately 45 people attended this session on the role of ethnic media in improving outreach to immigrant communities in the Bay Area.

#### **SESSION DESCRIPTION**

Dean started the discussion by posing the following guiding questions to the group: *What are the important healthcare concerns in immigrant communities? Additionally, what role do ethnic media play in disseminating healthcare information, and how can this source be harnessed?*

Participants first heard several immigrant leaders tell their stories on healthcare concerns within their communities. Below are a few of their comments:

Thuy Doan, who immigrated from Vietnam and is the Director of the Vietnamese Community Center in San Francisco, mentioned to the group that about 60 percent of Asians read the newspaper in their native language. He spoke about the Vietnamese community's traumatic arrival in the U.S. and their struggle with raising children in a new culture without being provided information in Vietnamese. He mentioned that a lack of translated information in Vietnamese results in healthcare being inaccessible to certain communities through the media channels. "I hope it may change in the future with the new generation," he concluded.

Thanyia Choto, a learner from Thailand who has been in the U.S. less than a year, spoke of the difficulty of dealing with the American healthcare system as a new immigrant. "When you come to another country, you don't know the language. Nobody helps you," she said. Thanyia added that she would like the media to publicize more information on making and attending medical appointments.

A representative from the Afghan Elderly Association mentioned the problem of diabetes for many in the Afghani community after coming to the U.S. She explained that in Afghanistan, people walked quite a bit and made their food from scratch. However, upon arriving in the U.S., immigrants often use a car, might feel confined to their homes, or are exposed to unhealthy foods. For this reason, she encouraged the media to send their viewers and listeners a healthier message in order to prevent illness and disease.

(A full list of all immigrant leaders and learners in attendance at this session is provided below).

Dean then asked ethnic media journalists to share their own experiences with how healthcare concerns have shaped their writing. Below are a few comments made by journalists:

Sandy Close, founder of New America Media, mentioned the importance of ethnic media in getting the word out to immigrant communities about starting a conversation about death and dying. She further explained that the commitment of ethnic media journalists to act as the voice of immigrants is both inspiring and has room for improvement.

Regina Reyes, the North America Bureau Chief with ABS-CBN International -The Filipino Channel, spoke of the problems her community faces with heart disease and obesity. She relayed a sense of obligation and responsibility in providing information as well as making the Filipino community aware of the issues.

Rosalina Contreras-Rosado who writes for a weekly Spanish-language paper El Bohemio News, discussed the issues surrounding making doctor's appointments within the Latino community. She mentioned a lack of money and a reluctance to hear bad news that often prevents immigrants from seeing the doctor. Because of this, she spoke of the need to keep Latino newspapers alive as it is the only source of healthcare information for those who are unable to speak English.

*(A full list of all ethnic media journalists in attendance at this session is provided below).*

Jon Funabiki, a professor at San Francisco State University in the Journalism Department, ended the session by thanking all participants and stressing the urgency in using ethnic media outlets to relay basic healthcare information to immigrant communities. Excerpts from his insightful commentary are included below:

“There are many reasons why a gathering like the one we have here today shouldn't happen. There's no reason for us to come together. After all, we are separated from each other by many differences. Look around. Most visibly, we can all see that we represent quite a diverse group of ethnic backgrounds and cultures. Many languages are spoken. There are generational differences. Most importantly, we come from entirely different sectors. Some of us are doctors, nurses and other professionals in the health care sector. Others come from the university. Some are English-as-a-Second Language instructors or students. Still others come from journalism and media. In fact, why would doctors, who value highly the pledge of confidentiality that they give to patients, want to meet with journalists, whose main purpose is to expose everything?

But as people spoke, it became clear that there are some powerful, overriding reasons that we do come together. All of us are interested in issues of health—our own health, the health of our family members, co-workers and friends. We all seem to believe that when people are healthy, our communities are stronger.

Most importantly, there is another value—social justice and equity—that brings us together. Almost everyone here talked about the need to “close gaps,” to make society more equitable and to make the system more just. This idea was articulated most clearly by Chauncey Bailey, (Senior Writer for The Globe and co-founder of Our-TV) who talked about the history of racism, inequity and violence suffered by the African American community....In one way or another, just about everybody in the room said that we should value each life equally.

I want to try to summarize some of the main ideas or messages that I heard from the people who spoke today.

The first is **URGENCY**. There is a great urgency to take action now. People not only are suffering, but they are dying. We talked about how different ethnic groups face special problems with diseases such as diabetes and heart disease. Thanyia Choto told us about how some people delay their medicines because of the high costs. Worse, some people end up in the emergency room because they don't know how to navigate the medical system to get services from doctors. In addition to health, there are economic consequences: many people don't have health insurance or they lose pay when they are sick.

The second issue of concern to the people in this room has to do with **TRAUMA**, **DISCRIMINATION** and **FEAR**. Immigrants and people of color must cope with a myriad of problems that increase stress and interfere with health care. As Norberto Siclla noted, some people are afraid to seek services because they are undocumented and fear the police and immigration service. Others still suffer from a kind of post-traumatic stress syndrome because they came to the U.S. as refugees. And in the post-9-11 era, many people, especially those of Middle Eastern descent, face discrimination.

There also are a whole series of issues that stem from **CULTURE** and **LANGUAGE**. The language barrier stands out, of course. We learned that some immigrants substitute home remedies imported from Latin America for medicines or have particular cultural attitudes that keep them from seeking therapy for mental and emotional health problems.

Switching to the media, and in particular the ethnic media, we learned that we have **GREAT EXPECTATIONS** for the media. Thuy Doan talked a lot about this when he said that Asian immigrants rely heavily on the ethnic news media for information, especially news about their home countries. The ethnic news media could play a pivotal role in providing health information to communities. We heard a great story from Viji Sundaram (Healthcare Editor for NAM) about how the India West newspaper stimulated the community to rally behind a woman who suffered from domestic violence.

However, even though they are growing, many of the ethnic news media outlets are **FRAGILE**. Many of the ethnic news media are not much more than "mom and pop" operations; the staffs are small and poorly trained. They are struggling to stay alive as businesses. (Vietnamese immigrants remember that the newspapers in Vietnam were heavily controlled by the government.)

Finally, we learned from the journalists that there is a **DESIRE** to do more about health. Regina Reyes of ABS-CBN/The Filipino Channel said that her station has assigned a reporter to cover health, but that reporter has to cover other stories as well. There is a need to build capacity—that is to help journalists to do a better job in covering health. This may come about from training or perhaps from developing partnerships between the ethnic news media and health organizations."

## **REACTIONS**

When asked what steps they will take to follow up on today's discussion, participants wrote the following comments:

"Read more about various Asian groups in American and immigration histories and experiences."

"Continue doing what I do with more emphasis on educating my consumers."

"Follow up on how ethnic media can serve as a resource for private practice ethnic physicians."

"Support ethnic media."

### **Thank you to session speakers and participants**

**Sandy Close, New America Media (facilitator)**

**Dean Schillinger, UCSF/Center for Vulnerable Populations (facilitator)**

**Jon Funabiki, Department of Journalism, SFSU (discussant)**

**Camilla Bixler, CCSF/ESL Instructor (organizer of panelists)**

**Janice Huang, MATESOL student (volunteer)**

### **Immigrant Leaders / ESL Learners**

**Khloud Alaydi, CCSF**

**Nerlyne Casimer, JVS**

**Betty Chen, CCSF**

**Thaniya Choto, CCSF**

**Maria Fernanda Cooperstein, CCSF**

**Elbia Jimenez, CCSF**

**Sui Ha Li, CCSF**

**Nadine Philip, JVS**

**Tatiana Rogut, CCSF**

**Christie Shew, CCSF**

**Norberto Siella, CCSF**

**Mai Tran, CCSF**

**Bei Wang, CCSF**

**David Xiao, CCSF**

### **Physicians and Public Health Experts**

**Kirsten Bibbins-Domingo, San Francisco General Hospital, UCSF**

**Ellen Goldstein, UCSF Clinical Translational Science Institute-Community Engagement Program**

**Margaret Handley, Family & Community Medicine, UCSF**

**Rena Pasick, Community Education & Outreach, UCSF Comprehensive Cancer Center**

**Dean Schillinger, UCSF/Center for Vulnerable Populations**

### **Representatives from New America Media**

**Chauncey Bailey, Senior Writer, The Globe / Co-founder of Our-TV**

**Eugenia Chien, Chinese language media monitor for NAM**

**Regina Reyes**, North America News Bureau Chief, ABS-CBN/The Filipino Channel TV  
**Viji Sundaram**, former News Editor India West, current Health Care Editor for NAM  
**Alex Zevelyov**, Anchor, Russian Voice Radio, San Francisco

## **IMPROVING PATIENT OUTREACH THROUGH ETHNIC MEDIA**

### **SESSION 2**

#### **OVERVIEW**

Roughly 40 people attended this session, which focused on brainstorming about the possibilities of ethnic media collaborations to further the dissemination of healthcare information to immigrant communities. Attendees included medical staff, ESL instructors, immigrant leaders (including a diverse group of ESL learners from City College of San Francisco), ethnic media representatives, and community workers.

#### **SESSION DESCRIPTION**

The session focused on group work and strategic thinking to answer some of the issues that were brought up by immigrant leaders and ethnic media journalists during the first half of *Improving Patient Outreach through Ethnic Media*. Dean Schillinger gave the following assignment to participants:

*Each group will be given \$100,000 from the Ford Foundation. How would you use this money by working together with healthcare professionals, ESL instructors, ESL learners, and ethnic media journalists? What strategic plan would you come up with to improve healthcare in the communities?*

After discussing the task within four separate groups, participants reassembled and shared the following ideas with all attendees:

- 1) The first group brought up the point that there is a lot that can be done with no money as in changing the way people look at the issues and their work as well as who they choose to collaborate with. They had several thoughtful ideas for how the money could be spent:
  - Pay community leaders to participate in gathering information about different communities and how they access healthcare materials
  - Pressure radio and television to send listeners and viewers healthier messages that don't include McDonald's
  - Develop radio's outreach to immigrant communities
  - Conduct a readership survey to discover community needs and address basic and immediate concerns such as guaranteeing clean and well lit streets and parks
- 2) The next group chose to create an entire organization that would serve as a health information clearinghouse. Partners would include ethnic media journalists, local businesses, and educational and public health institutions. The clearinghouse would have advocates to enter immigrant communities and provide information in understandable English and the language of that group. Peer to peer stories would also be shared within

the organization and journalists who could write about the issues. Additionally, libraries as well as universities would partner with the clearinghouse, and their resources could be used as well.

- 3) This group decided to spend the money on a health information projection group that would collaborate with experts in healthcare and the media. The group would produce community-identified health stories and would get community leaders as well as celebrities to tell these stories. Possible topics for these stories include where to go for help, how to make use of interpreters, how to negotiate the healthcare system, as well as information on cancer, nutrition, or disease prevention. The need to actively bring the information to the community was addressed, and the group decided to do this through the internet, public access television as well as cable, radio, advertisements, podcasts and ethnic media journalists who found these issues important.
- 4) The last group decided to have either a written column similar to the style of Ann Landers or a news spot on television. The idea behind this would be to have immigrant leaders generate stories about health concerns. Adult ESL learners and immigrant classrooms would be financially supported to come up with these stories. Additionally, money would be given to ethnic media journalists to edit these stories and make them media friendly. Healthcare professionals who could respond to the issues raised by the stories would also be encouraged to participate.

After the groups shared their ideas, the issue of sustaining these projects was discussed, and corporate sponsorship was encouraged. Attendees were thanked for generating such useful ideas, and participants agreed that their time was well spent brainstorming.

### **REACTIONS**

Participants made the following comments when asked how they would follow up on the day's discussion:

"Continue to improve my English and if I have time, I will help people in need about health."

"I will try to implement more multimedia sources into my outreach efforts. I also think about having members of a given ethnic/cultural community speak about resources available."

"I will continue to pursue health issues and concerns in our news coverage and news program, with focus on providing information on health care access, delivery of services to immigrant communities and outreach efforts to the underprivileged communities among Filipinos."

"Design lessons on health literacy for classes on all levels. Turn students into teachers in their community."

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**Jon Funabiki, Department of Journalism, SFSU (discussant)**  
**Camilla Bixler, CCSF/ESL Instructor (organizer of panelists)**  
**Henry Cordeiro, SFSU Alumni (volunteer)**

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