2006 API Health Policy Forum focused on cancer control

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Presentation objectives

- <u>Rationale</u>: Explain rationale for convening a health forum focused on APIs & cancer control;
- <u>Report</u>: consensus from Aug 23, 2006 forum of the six priority areas
- <u>Results:</u> follow-up & what's next

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<u>Rationale</u>

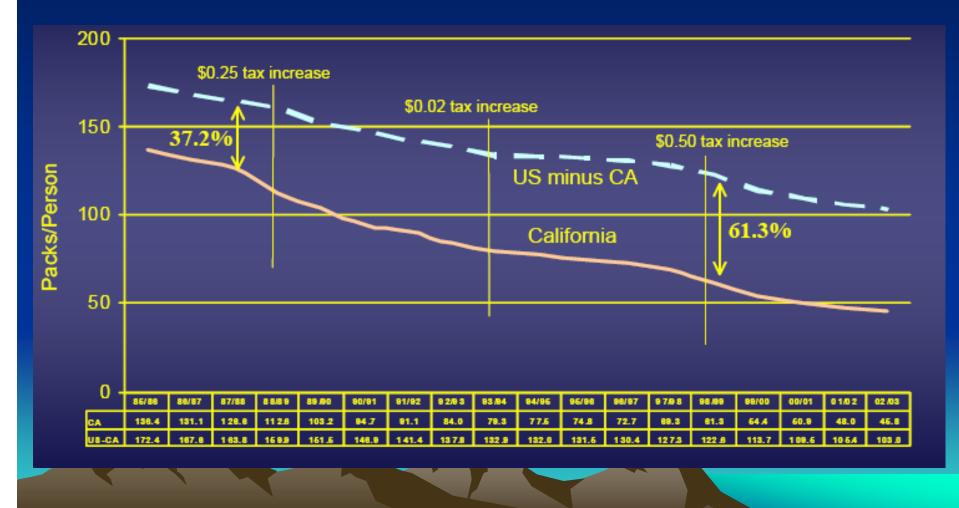
Policy is a powerful intervention tool.

 APIs have not benefited fully from the impact of policy advocacy.

 The cancer burden affecting APIs is unique, unusual, and unnecessary.

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California and Rest of U.S. Adult per Capita Cigarette Consumption, Packs Per Fiscal Year, 1985-86 - 2002-03



Source: California State Board of Equalization (packs sold) and California Department of Finance (population).



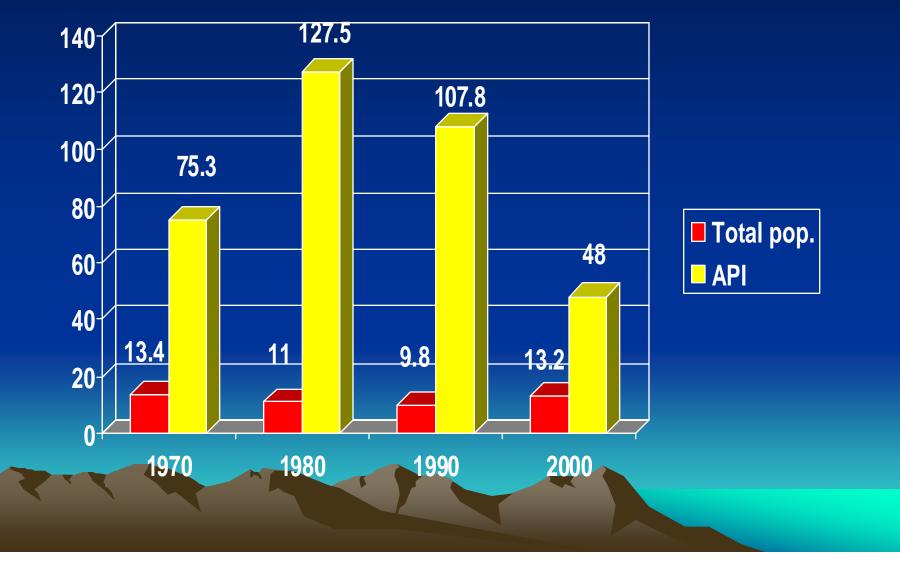
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The U.S. Associated Pacific

Six jurisdictions and Hawai`i are spread across 4.9 million square miles and include hundreds of islands and atolls



Percentage Increases since previous census: Total population v.s. "API"



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Unique Cancer Burden

 APIs are the first U.S. racial/ethnic group and the only one who experiences cancer as the leading cause of death.

 Leading cause of death for AAPIs is cancer for ages 25-64 (v.s. for only 45-64 for Whites)

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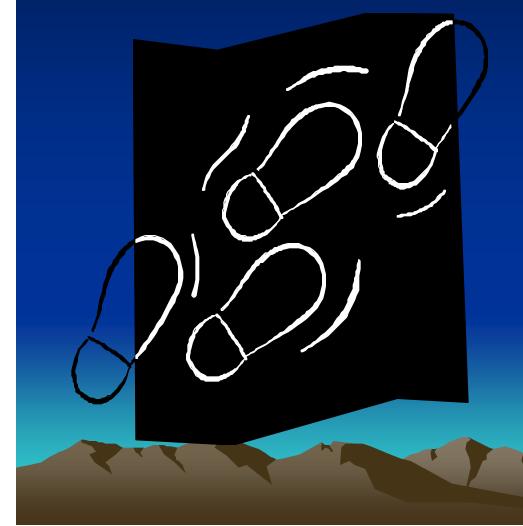
AANCART & WINCART's priority areas

- Advocate for increased funding for community-based participatory research
- Advocate for increased API data collection nationally, including data on lifestyle (e.g., dietary intake, exercise, smoking, etc.)
- Ensure that language access and quality of care is a priority.

- Conduct policy advocacy on health insurance reform (including Medicaid).
- Mobilize and educate communities on tobacco control policies.
- Advocate for support of legislation addressing Hepatitis B.

<u>Results</u>

- Monthly Community Advisory Councils for AANCART/ACS
- Policy Advocacy 101
- Policy triumphs



The longest journey begins with a single step.

Ancient Chinese Proverb