



National Cambodian American Diabetes Project  
 CHW New Mexico Meeting  
 April 25-29, 2006

Meeting Schedule:

*Tuesday, April 25, 2006*

7:00pm Greet and meet Dinner in Albuquerque, New Mexico

*Wednesday, April 26, 2006*

7:00am Meet in lobby to leave to Old Laguna

9:00-10:00am Introductions – Mary Raje, RN, M.S.

10:15-1:00pm Meeting with the Laguna Health and Wisdom Program for Elders

1:00-1:30pm Tour of St. Joseph Evangelization Center

2:00-4:00pm Meeting with Acoma Community Health Representatives,  
 of the Diabetes Program and Behavioral Health Program

*Thursday, April 27, 2006*

9:30-11:30am Meeting with Laguna Community Health Representatives and  
 the Behavioral Health Program

11:30-12:00pm Tour of Laguna Wellness Center

12:00pm Leave for Santa Fe

5:30-7:30pm Conference Reception – Association of American Indian Physicians

*Friday, April 28, 2006*

8:00-4:00pm All-day Cross-cultural conference

Hosted by the Association of American Indian Physicians

12:00-1:30pm Wrap-up Lunch with NCADP staff members

*Saturday, April 29, 2006*

9:00am Depart Santa Fe, New Mexico

Attendees:

<b>Attendee</b>	<b>NCADP Role</b>
Dany Man	CHW, California site
Siv-Heng Ung	CHW, Oregon site
Sophy Sengphet	CHW, Connecticut site
Kathy Reun	CHW, Illinois site
Theanvy Kuoch	Project Director
Mary Scully	Director of Programs
Heang Tan	Project Coordinator
Lara Watkins	Evaluation Associate

Site liaison: Mary Raje, a public health nurse with the Indian Health Service worked on the Reservations in New Mexico and Arizona for more than 20 years, served as a



vital resource in establishing meetings with Native American CHW programs addressing diabetes.

### Community Health Worker Reflections:

CHWs provided feedback on the meeting through the completion of activity 15. This activity specifically solicited lessons learned, challenges, reflections, and advice on the meeting. In the following summary, their thoughts are compiled with the observations of the evaluation associate.

#### **1.) Team building within a national project**

CHWs emphasized the importance of connecting with similar minded colleagues from around the country. They stressed the overall CHW traits of positive attitude, willingness to learn, and desire to help others. The time traveling within New Mexico was important for the development of the project, as it allowed for the CHWs to informally interact, strengthening collegial relationships for project staff.

#### **2.) Learning from Native American experts who have extensive experience addressing diabetes within their communities using a Community Health Worker model**

NCADP staff spoke with community health representatives at the Laguna and Acoma pueblos. In addition, they attended an elders' meeting, interacting with participants and gaining an understanding of the important role of the elders in addressing community issues. They also visited various health facilities on the reservations.

#### **3.) Learning more about diabetes**

The CHWs also mentioned that they learned more about diabetes through their interactions with community health representatives on the reservations and the presenters at the cross-cultural medicine conference.

#### **4.) Strengthening relationships with NDEP partners**

NCADP project staff attended the cross-cultural medicine conference sponsored by the Association of American Indian Physicians and plan to collaborate on a traditional healing conference in the future.

Margaret Knight the Executive Director of the American Indian Physicians Association invited Theanvy Kuoch to present the Cambodian genocide at the traditional healing meeting. Arrangements were made to possibly include Cambodian traditional healing at a future conference.

#### **5.) Improving culturally appropriate, health communication**

Universally, the CHWs emphasized the perfect location of the meeting. They felt that the physical environment was similar to Cambodia and therefore appropriate for their meeting. The cultural environment was also central to the learning process. The CHWs found that Native American and Cambodian traditional



healing practices have much in common. One CHW specifically mentioned that the cross-cultural medicine conference's presentation on traditional healing would be helpful in her communications within the Cambodian community.

### Important Concepts Emphasized

The following outline highlights the key concepts emphasized in the Laguna and Acoma CHW programs in New Mexico.

1. **Elders** play a major role in the community, providing direction and support for community members. Their role includes:
  - a. Educating younger community members about their culture.
  - b. Acting as advisors
  - c. Providing support to families
  - d. Promoting the use of traditional healing concepts in the development of programs
  
2. **Community health workers** are the link between professional health care providers and community members. They serve as:
  - a. Medical interpreter
  - b. Cultural liaison
  - c. Health care navigator - walks a community member through the health care system
  - d. Case manager - ensures that the community member has access to available services (assesses needs, assists with access, finds resources, maintains records, assists with paperwork)
  - e. Health monitor – checks and monitors specific health indicators
  - f. Compliance monitor (follow-up appointments, medications, healthy living plans)
  - g. Health educator
  
3. **Community health workers**
  - a. Assure that there are no closed doors to health care
  - b. Share responsibility for well being of their community
    - i. CHWs are responsible for the well being of the community member not for a specific task. There is no such thing as “its not my job”
  - c. Provide leadership in a health specialty
  - d. Provide guidance as a health generalist
  - e. Support the use of indigenous healing methods
  
4. **Traditional healers** provide important care in a manner that complements Western Medicine.
  - a. Address the spiritual belief system of the client
  - b. Offer traditional or alternative methods for solving many health problems
  - c. Link the client to their ancestors, which can be a source of support and understanding.
  - d. Use holistic ideas and attitudes to facilitate healing
    - i. Sense of inclusiveness - everyone belongs
    - ii. Sense of pride - our beliefs are powerful and good
    - iii. Focus on healing rather than loss



- iv. Focus on survivorship rather than victimization.
- v. Spirituality can offer ways to deal with loss

Integration into the National Cambodian Diabetes Project:

- 1. Improvement of CHW curriculum
  - a. The Acoma tribe shared their 3-week intensive curriculum.
  - b. Discussion on sending Cambodian CHWs to the Indian Health Services (IHS) 3-week intensive certification program.
  - c. Adapt existing CHW models – investment in the growth of CHWs versatility

Action plan:

- Train NCADP CHW in diabetes education and encourage training in mental health, emergency care, etc. Two of the four CHWs are becoming certified in CPR.
- Partner with NAAPIMHA and write grant proposal to adapt a CHW certification program for Cambodians.

- 2. Partnership building – Native Americans
  - a. Similarities in trauma history, social economic status, and health problems.
  - b. Both communities acknowledge serious psychological distress as having a profound effect on health outcomes. Both communities integrate psychological and physical health concerns.
  - c. Both communities use the same community mobilization model to provide education, care, etc.
  - d. Action plan: Continue working relationships with these communities.
    - i. Theanvy Kuoch made a brief presentation about cultural similarities at AAIP's cross cultural medicine conference.
    - ii. Collaborate with AAIP in bringing in Cambodian traditional healers to AAPI's future conferences.
    - iii. Share resources with Acoma and Laguna communities to expand on NCADP efforts.
- 3. Development of National Elders Wisdom Council
  - a. To serve as advisory board for NCADP
  - b. Look to elders and traditional healers to determine program priorities.

