

## Student Leadership in Public Health Advocacy: Lessons Learned From the Hepatitis B Initiative

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Increasing hepatitis B vaccination rates for Asian Americans and Pacific Islanders is a priority. Laws requiring vaccination prior to school enrollment have helped, yet many youths remain unvaccinated.

The Hepatitis B Initiative (HBI), launched in 1997 and operated by public health and medical school students, provides free screenings and vaccinations to Boston's Asian American/Pacific Islander community, with a focus on youths.

By October 2002, 997 HBI patients from Boston's Chinatown had received free hepatitis B screenings. Of these, 384 patients (39%) were deemed susceptible to the hepatitis B virus and provided with free vaccination.

### ASIAN AMERICANS AND

Pacific Islanders are up to 13 times more likely to die from liver cancer than Whites; the risk is 6 times higher for Chinese Americans, 8 times higher for Korean Americans, and 13 times higher for Vietnamese Americans.<sup>1</sup> Fully 80% of liver cancer among Asian Americans/Pacific Islanders is caused by hepatitis B virus infection. Although Asian Americans/Pacific Islanders represent only 4% of the population, they account for 50% of the 1.25 million chronic hepatitis B cases in the United States.<sup>2</sup>

Higher immunization rates could reduce these numbers.<sup>3</sup> Laws requiring vaccination prior to school enrollment have helped, but many youths remain unvaccinated. Because high school students and young adults are at highest risk for hepatitis B virus infection, the National Task Force

on Hepatitis B: Focus on Asians and Pacific Islanders has stated that "catch-up" vaccinations for Asian American/Pacific Islander children should be a priority.<sup>2</sup>

Wishing to address this need, students from the Harvard School of Public Health and the Harvard Medical School founded the Hepatitis B Initiative (HBI) in 1997. Relying on student volunteers, the HBI provides free hepatitis B screenings and vaccinations to Boston's Asian American/Pacific Islander community, with a focus on youths. Student volunteers now come from such undergraduate and graduate schools as Boston University, Brown University, Cornell University, Harvard University, the Massachusetts Institute of Technology, Tufts University, and Wellesley College.

From January to December 1997, HBI volunteers conducted extensive interviews with community, medical, and government leaders, met with faculty advisors, conducted surveys of Asian American/Pacific Islander youths at local health fairs, researched model vaccination programs, and identified key business, government, and foundation contacts for resource development. The HBI's leadership used this information to refine the program's objectives and operations.

In January 1998, the HBI launched an awareness campaign in Boston's Chinatown to introduce the free services being offered (Figure 1). Developed with community participation, the campaign included storefront posters and pamphlets in Chinese, Vietnamese, and English (Figure 2); information kits for local newspapers and schools; talks at neighborhood council meetings; skits performed at health fairs; and appearances on local radio talk shows. Additional activities included staffing information tables at community festivals; sponsoring a raffle; conducting youth workshops to develop educational photovovelas<sup>4</sup>; and hosting a "guerrilla media" event at which youths made sidewalk chalk drawings to promote hepatitis B awareness.

In March 1998, Chinatown's South Cove Community Health Center opened its doors to HBI patients, providing screenings donated by the Beth Israel Deaconess Medical Center and vaccines donated by Merck and Co Inc. That fall, the HBI joined forces with the Sharewood Project, a free clinic in Chinatown where supervised medical students administer screenings and vaccines.

The HBI's services are organized to meet the needs of Chi-



**FIGURE 1—Hepatitis B Initiative (HBI) coordinators Sandy Wong (left) and Delia Kong (right) set up an information table in Boston's Chinatown with posters and banners advertising the HBI's clinic services.**

natown's residents, including many recent immigrants. Clinic walk-in times are set to accommodate restaurant workers who work evening and weekend hours. Student volunteers guide patients through the process, and bilingual services are provided. Intake is set up to minimize paperwork; the required forms are available in multiple languages. Local businesses provide incentives for clinic visitors such as T-shirts and gift certificates.

## DISCUSSION AND EVALUATION

By the end of October 2002, 997 HBI patients had received free screenings for hepatitis B virus. Of these, 384 patients (39%) were deemed susceptible

to hepatitis B virus and offered free vaccination; 371 of these patients (97%) received the first vaccine. By the end of November 2002, 305 of 363 eligible patients (84%) received the second shot and 199 of 334 eligible patients (59%) received the third shot. (Note that some patients became eligible for subsequent shots after November 2002).

At intake, patients reported how they had learned about the HBI. Cited most often was word of mouth from family and friends (40%), but the HBI's outreach campaign (16%), newspapers (15%), and referrals from health centers (15%) were also key sources.

In 1998, the HBI was awarded funding by the Centers for Medicare and Medicaid Services as an

Asian American/Pacific Islander initiative of the US Department of Health and Human Services. In 1999, the HBI received the Adult Immunization Achievement Award from the Centers for Disease Control and Prevention. In 2000, the surgeon general's Web site featured the HBI as a model program for eliminating health disparities (<http://www.surgeongeneral.gov/tour/hbi.htm>).

Initially, the HBI was launched on the strength of donations. Over time, the annual budget expanded to over \$25 000, with funding from the Centers for Medicare and Medicaid Services. To help ensure continuity, the HBI secured a central office in late 1999 and established an advisory board of community, government, and academic leaders.

The HBI's former student directors remain active as project advisors.

The HBI's experience provides several key lessons for student-run public health programs. First, a program like the HBI cannot succeed without strong and committed student leadership. To engineer smoother changes in student leadership, the HBI has a formal transition period for new leaders so that they can work alongside the current leadership to learn about their roles.

Second, annual student recruitment and training are essential to renewing the program. Each year, there are 4 to 10 student leaders and about 50 volunteers. The HBI provides students with direct experience in program management, vaccination clinic management, coalition building, and communications. The HBI has created detailed protocols for volunteer recruiting and training sessions.

Third, community leaders may worry that a student-run program will be transient, or that students are seeking personal gain (e.g., résumé building). The HBI's leadership worked hard to dispel these concerns, but the only real answer was to develop a track record of continuous service.

Perhaps the most important lesson is this: With dedicated leadership in place, a student-run program can create an opportunity to bring together institutional partners who might not otherwise coordinate their efforts. Through its efforts, the HBI created a screening and vaccination service for Boston's Chinatown that otherwise would not have been available. Additional information about the HBI, as well as copies of brochures and other materials, can be found at

**预防乙型肝炎目前有一项安全且免费的疫苗注射!**

预防乙型肝炎疫苗, 接受安全的疫苗注射以保护自己; 您只需要三种疫苗即可预防乙型肝炎。

请向您的医生、护士、或医疗中心咨询乙型肝炎疫苗注射。

或: 我们免费提供乙型肝炎检测, 并提供免费的疫苗注射。

华人医疗中心  
SOUTHCOTE COMMUNITY HEALTH CTR.  
885 Washington Street  
每星期二至星期六上午九时到六时

SHAREWOOD CLINIC  
553 Tremont Street  
每星期二至六时到十时。

请参考地图



**乙型肝炎事实**

- 预防乙型肝炎, 请避免接触他人的血液。
- 安全性交, 请使用避孕套。
- 很多乙型肝炎患者并不知道他们是哪种感染上乙型肝炎病毒, 因此他们不知道有感染的危险, 您也应该尽快注射乙型肝炎疫苗以保护自己。

**波士頓乙型肝炎防治計劃**

www.hepbinitiative.org



波士頓乙型肝炎防治計劃 (HBI) 致力於波士頓地區乙型肝炎的傳染。本計劃受到 The Centers for Medicare and Medicaid Services 資助。

**乙型肝炎警告**

预防可怕的乙型肝炎, 维护您家庭和朋友的健康, 请速接种安全并且免费的疫苗注射!



您只需要三种便可获得终身保护!

保护您自己家人和朋友, 请接受安全并且免费的乙型肝炎疫苗。

**预防胜于治疗**

**什么是乙型肝炎?**

乙型肝炎是一种可怕的疾病, 美国每年有五十万以上的人感染乙型肝炎, 有一百万以上的人血液中含有病毒。乙型肝炎目前无法治愈, 但有安全而且免费的疫苗来预防!

**我们是如何患上乙型肝炎的呢?**

- 经由血液, 或伤口接触而感染
- 无保护性交, 经由鼻感染
- 共用牙刷或剃刀等个人卫生用品
- 穿耳洞, 针灸, 纹身或注射毒品时使用未消毒的针头
- 母亲分娩过程中传给婴儿
- 与有口腔溃疡的人分享口腔食物
- 乙型肝炎不会由咳嗽, 喷嚏或握手传播

**我的孩子应该做什么?**

确定自己是否已感染上乙型肝炎—接受乙型肝炎检测!

阻止自己患上乙型肝炎—接受乙型肝炎疫苗注射!

请向您的医生, 学校护士, 或医疗中心咨询乙型肝炎疫苗注射。

**乙型肝炎的传染率是爱滋病的100倍**

美国亚裔人口的患病率相当于全美人口平均患病率的25倍。

安全且有效的疫苗可轻而易举地预防乙型肝炎!

每年全美国有二十五万人感染上乙型肝炎, 其中大部分是青年人。

**以下哪位患了乙型肝炎?**

症状: 无

- 皮肤, 眼睛发黄
- 疲倦和易怒
- 发烧
- 恶心, 呕吐感
- 发冷
- 腹痛或不适
- 小便颜色变深
- 全身发痒

答案: 都可能!

以上四者都有可能患有乙型肝炎, 有些已感染的人不会有任何症状, 也不觉得自己有病, 但是他们可将体内的病毒传染给其他人, 使他人出现严重的肝炎症状。他们属于“带菌者”, 而且“带菌者”本人也可能可被发病。

FIGURE 2—Front (top) and back (bottom) of the Hepatitis B Initiative brochure in Chinese (also available in English and Vietnamese).

the project Web site (<http://www.hepbinitiative.org>).

**NEXT STEPS**

The HBI continues to face organizational challenges owing to annual turnover in student leadership. With only a 1-year term, student leaders must learn fairly quickly how to set realistic goals and timelines and how to delegate responsibilities. To facilitate the leadership transition, the HBI is working to create better systems for preserving organizational and personal contacts,

communicating lessons learned, and planning long-term goals.

As the HBI works to meet these and other challenges, the program is expanding to reach the Asian American/Pacific Islander community beyond Boston's Chinatown. ■

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**Contributors**

L.D. Hsu and W. DeJong wrote the first and final drafts of this report. R. Hsia, M. Chang, M. Ryou, and E. Yeh collaborated on the data analysis and edited several versions of the manuscript.

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**HIGHLIGHTS**

- The National Task Force on Hepatitis B: Focus on Asians and Pacific Islanders has stated that “catch-up” vaccinations for children of Asian American and Pacific Islander descent should be a priority.
- Boston-area public health and medical students established and operate the Hepatitis B Initiative (HBI), an award-winning program that unites public and private organizations in a coordinated effort to reduce hepatitis B viral infection, especially among Asian American/Pacific Islander youths.
- With dedicated leadership in place, a student-run program can present the opportunity to bring together institutional partners who might not otherwise coordinate their efforts and thereby help close an important gap in public health services.