



### Seminar A

## Patient Engagement: Strategies to Improve Health among Ethnical Minority Patients in Hong Kong



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Dr. William Wong is an untiring educator and advocate in Family Medicine and Primary Care. He was the Director of GP & Primary Care Education at The University of Melbourne (2007–2010), and Advisory Professor of Fudan University, China. With over 150 peer-reviewed publications, his contributions to infectious diseases, health promotion and health equity have led to international recognition. He advised WHO West Pacific Office on sexual health issues which resulted in a number of international guidelines. He was the founder and now Emeritus Advisor to the WONCA Health Equity Special Interest Group. He was PI of 24 competitive research grants (awarded >HK\$30million) and several commissioned projects by NIH, Hong Kong SAR and Australian governments.



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Dr. Catherine Chen obtained her PhD in Medicine from HKU in 2002 and joined HKCFP in 2004. She became a member of Royal College of Physician of United Kingdom in 2007 and a fellow of HKAM (Family Medicine) in 2011. She now works as Consultant in the Hospital Authority and is Honorary Clinical Associate Professor of JC School of Public Health & Primary care of CUHK. With her special interest in primary care research, Dr. Chen was the winner of Best Research Paper Award at Hong Kong Primary Care Conference in 2013 and 2015 and Best Research Paper Award of HKCFP in 2016.

Hong Kong is “Asia’s World City” with vibrant culture mix and diversity. According to census in 2011, about 5% of the local inhabitants are from ethnic minorities groups, particularly South Asia. Yau Ma Tei Jockey Club (YMYJC) GOPC at Central Kowloon is where most of the South Asian minorities including Indians, Nepalese, and Pakistanis, reside. Previous studies have shown that chronic disease, i.e. diabetes (DM) and hypertension (HT), affect certain EMGs differently. Differences in health care systems, limited access to health services, and social deprivation can further compound the risk of developing diabetes and its complications. A clinical audit on chronic disease control (DM and HT) among EMG patients was carried out in YMTJC GOPC in 2013-15. Compared with Chinese DM and HT patients, EMGs patients were much younger but more obese. Deficiencies existed in the comprehensive management of chronic diseases, particularly the glycemic and blood pressure control. A series of improvement strategies promoting the care for EMG patients etc. had been implemented since 2014, including internet resources for health information in multi-languages; standardization and alignment of interpreter services; training and collaboration with NGOs; ethnical diet counselling and set up of chronic disease evening clinic to cater for patients who could not attend regular daytime FU due to working necessities etc. Through a team approach including enhanced culturally competent health promotion and culturally tailored health care interventions, their chronic disease control has been significantly improved.

A cross-sectional survey comprising of 6 domains such as health status, health-seeking behaviour, social experiences targeted at adult African asylum seekers and refugees (ASRs) living in Hong Kong was conducted through three local non-governmental organisations to identify the health practices, problems and needs of African ASRs in Hong Kong to inform policy and programming using the WHO’s social determinants of health framework. We contend that the host government has a moral and ethical obligation to attend to health needs of ASRs. Based on our findings, we would recommend changes to current policies to allow refugees the right to work and improving access to healthcare for ASRs in Hong Kong.