In June 2007, the research team conducted two focus groups with a diverse group of Taiwanese community members. The purpose of the focus groups was to identify and learn about the most important health issues affecting this community and hear their recommendations. The first focus group was conducted with 12 community members (five male and seven female) who had migrated to the United States before 1980, mostly as students. This group was very diverse in terms of age range: two participants were in their 30s, two were in their 40s, three were in their 50s, three were in their 60s, and two were over 65 years of age. This group was highly educated; one participant had a Bachelor’s degree, five had a Master’s degree, and five had a doctoral degree (PhD or M.D.). It is important to note that most members of this group had relatively high family income and all had health insurance.

The second focus group was composed mainly of physicians and community leaders active in health-related activities in the community. A total of 12 community members participated (ten males and two females). Most of them migrated before 1980 as students. This group was relatively older than the first focus group. Most participants were over 65 years of age; four were in their 60s and only one was in his 50s. This group was highly educated. Eight had either a PhD or M.D. degree, one had a Bachelor’s degree, and three had high school diplomas. All participants had health insurance. Despite the privileged position of most participants in both focus groups, they all spoke about occupational health problems and health care access barriers that low-income Taiwanese and students face.
1 | HEALTH CONDITIONS

a. General Health Issues
The Taiwanese group participants identified several health concerns for their community: arthritis, cancer, cholesterol, dental hygiene, diabetes, heart disease, stroke, and hypertension. Colon, nasal pharyngeal, stomach, esophageal, prostate, liver, and lung cancers were among the major concerns of the Taiwanese community. Participants reported that nasal pharyngeal cancer was more prevalent among Taiwanese when compared to other Asian and non-Asian groups. However, the risk factors for this rare cancer were not completely known, although some studies suggest it may relate to diet. One participant pointed out that the Taiwanese community has more cases of colon cancer compared to non-Asian Americans because they do not participate in colon cancer screenings. Hepatitis B was mentioned only as a concern for people in Taiwan, but not for those individuals who have immigrated to the United States. A sedentary lifestyle and unhealthy diet were identified as possible causes behind many of the health problems. The group mentioned that sometimes there are signs that something is physically wrong, but people are not aware of them. They did suggest that more health education and information about screening programs may remedy this problem.

b. Mental Health Issues
According to the group, mental health was identified as a priority. Potential contributors are cultural adjustments (particularly for new immigrants), stigma, neglect, and denial. Immigrants must adjust to their new surroundings and the American lifestyle, and this acculturation process may cause stress for some individuals in their personal, family, and social lives. Depression was mentioned as a specific type of mental health concern. Mental health issues are not openly shared within the community. Some individuals deny that they have a problem, but those who think they may need help seek it from friends and not from mental health professionals. The negative stigma within the Taiwanese community associated with mental health, as well as the lack of available linguistically-trained mental health professionals, pose a barrier to seeking mental health care.

Mental health concerns for seniors include depression and isolation. Because of a lack of transportation and the language barrier, seniors cannot easily venture out of the house to interact with other people. This isolation from the community may result in the individual feeling depressed or lonely. To address this issue the Taiwanese community created the Taiwanese American Senior Society that aims to develop health, education, and recreational programs to engage the seniors in the community.

Stress and depression are also suffered by youth in the Taiwanese community. However, because of the parents’ lack of knowledge of how to identify and address mental health issues, these concerns sometimes go unnoticed or unaddressed. For recent immigrants, the accul-
turation process is a source of stress. The younger generation also experiences pressure from parents to strive for certain career paths and fulfill high expectations. The younger generation may choose to pursue a degree to satisfy their parents, but not necessarily enjoy the subject matter themselves. Stress also results from the younger generation trying to have a balance between the Taiwanese and American cultural values within their lives.

c. Vulnerable Groups

Seniors: Caregiving for seniors was identified as a concern for the general senior population. Seniors are usually looked after by their family members during the later stages of life, as opposed to a nursing home. Failure of a family to take care of its senior members is seen as shameful and a sign of poor family values. The lack of transportation and the language barrier prevent many seniors from interacting with the community and participating in the small number of senior activities that exist. Osteoporosis is a concern for the female seniors in the community because they do not exercise daily or have a high enough intake of calcium.

Children and Adolescents: Sexual health related concerns, such as teenage pregnancy and sexually transmitted infections, were not considered a major issue for the younger generation. It was unclear if substance abuse with drugs and alcohol was a problem within this specific subgroup; some thought it was a problem and others thought that it currently is not a problem but could develop into one in the future. There were also mixed sentiments to whether or not obesity was a concern for the younger generation. Some participants said that it was a problem in the United States because the youth have adopted a more American diet which has more fat and caloric content. However, other participants mentioned that there was not an obesity issue because the children have received good education at home and are discouraged from eating fast food by their parents.

Women: Breast cancer, cervical cancer, and osteoporosis were mentioned as important health concerns within the female Taiwanese community. Breast cancer among this population seems to be diagnosed late, and its diagnosis is increasing among the younger generation. In general, Taiwanese women do not access preventive services or go to the gynecologist regularly. One participant attributed the lack of getting mammograms to the actual discomfort experienced during the procedure. One participant who is a gynecologist mentioned that after childbirth many Taiwanese women will not visit their gynecologists again. The concern with osteoporosis is attributed to the lack of physical activity and calcium intake among the women. Domestic violence is not seen as a concern for the Taiwanese community. The community will speak about it if the abuse is physical, but not if it is sexual.
2 | HEALTH SERVICE UTILIZATION

a. Access Barriers
The Taiwanese community, compared to other minority Asian communities in Montgomery County, has a great deal of social capital such as professional associations, community centers, and community outreach programs. However, participants stated that many Taiwanese face barriers when seeking health care. The main barrier to access health services is lack of health insurance. Language and lack of transportation were mentioned as important problems, particularly for seniors who depend on their children to take them to medical appointments and offer translation services. The Taiwanese community has addressed this issue by offering medical terminology courses to the community. Some participants mentioned that it was hard for them to find a good general physician as well as specialist they could trust.

Above all, health insurance was singled out as the main barrier to access care. Students, restaurant workers, low income Taiwanese, retirees without Medicare, as well as family members who come to visit for an extended period of time may lack health insurance and this could affect their health. Those who lack health insurance utilize other forms of medical care. Many go to community clinics or Taiwanese physicians who charge less and others go directly to the emergency room in hospitals. Some decide to undergo expensive medical and dental procedures in Taiwan or get their medications from Taiwan. Many participants acknowledged that traditional medicine, such as tiger balm and Chinese medicine, was part of their health care routine. However, they explained that they would not use this medicine to delay treatment or replace Western medicine.

b. Preventive Services
Participants showed great concern for preventive medicine and timely screenings, and expressed willingness to have frequent medical checkups. However, they reported that preventive medicine was not available for those without health insurance. This segment of the Taiwanese community would most likely not visit a physician until they are very sick. Some participants, who are physicians, mentioned that they do not see many patients getting routine colonoscopies, prostate cancer screenings, blood sugar tests, mammograms, or pap smears.

c. Physician Preference
Participants expressed mixed information regarding Taiwanese preference for a physician. Many mentioned that Taiwanese would rather go to a Taiwanese physician, particularly if they were not comfortable communicating in English. Others might prefer going to someone outside the community for medical care.
3 | RECOMMENDATIONS

a. Health Education

The Taiwanese community is very well organized and has established active community associations. The Tzu-Chi Buddhism Compassion Society and Taiwanese Presbyterian Church, among others, organize health-related activities, such as screenings, discussions about health topics, and courses on medical terminology. They have recently launched a new program (Taiwanese American Senior Society) to address senior issues, promote social relations among seniors, and improve their well-being. Participants expressed great interest in working with the County in conducting health-related activities. They expressed the need for additional funding, specific for the Taiwanese community, to support some of their health programs, including senior programs and transportation.

They are also very interested in obtaining health information about a variety of issues, mainly preventive health care. Some of the most relevant issues they suggest are: lifestyle modification, such as nutrition and physical activity; importance of screenings and preventive medicine; importance of seeking care for mental health issues; symptoms of chronic illnesses; and selecting an appropriate doctor. At the time of the second focus group, the community was organizing a discussion about hypertension and how to prevent it.

b. Disseminating Health-related Information

Some participants, who are also community leaders, expressed concern about how to effectively disseminate information to the Taiwanese community. They have used newspaper ads in the past to draw people to their health-related activities but this has proven more effective in drawing people from other Asian communities than for the Taiwanese community itself. They suggested several other sources where information can be disseminated, such as via professional and community associations, namely, Taiwanese North America Association, Taiwanese American Association, North American Taiwanese Medical Society, and Taiwanese American Senior Society. Participants suggested that the County can contact the community leaders and directors of these organizations and they can disseminate the information through their community. Other media channels mentioned are The Gazette newspaper and the music radio station 90.0 FM.

c. Improve Access to Health Services

Participants suggested several ways in which access to health care could be facilitated. First of all, access to low-cost health insurance and low-cost health care were strongly recommended. The Taiwanese communities organize a number of health-related activities. They suggested that increased funding from the County targeted to their organization would help them organize more activities to educate the community and improve their quality of life. Although they provide limited transportation to medical facilities, they would like the County to support them
in continuing to provide transportation that would facilitate the community’s access to health care. Participants also mentioned holding health fairs and providing community clinics with nighttime service hours as other ways to improve access to care.

**SUMMARY**

Consistent with other Asian groups, Taiwanese participants reported arthritis, cancer, cholesterol, dental hygiene, diabetes, heart disease, stroke, hypertension, and some cancers as the health issues of greatest concern. According to the group, mental health was identified as a priority among seniors and adolescents. Adjustment to the new culture, lack of transportation and language skills, and social isolation might be to blame for depression and stress as expressed by these two groups. Participants showed great concern for preventive medicine and timely screenings, and expressed willingness to have frequent medical checkups. However, lack of health insurance, language barriers, and transportation to medical facilities were mentioned as the main barriers to seek both curative as well as preventive health care for low income individuals, students, seniors, and visitors from Taiwan. The Taiwanese community is strongly organized and holds their own health-related activities to support senior health, prevention care, screenings, and health education. However, they expressed a need for additional funding support to keep their programs running, and would like to be informed of any future funding opportunities for health projects from the County to help improve this and other Asian communities alike. The Taiwanese American community, similar to other Asian American communities, would like to participate in and have equal access and contribution to County-supported programs, including public health programs and funding opportunities.