

Asian Americans and Public Health

Keywords

Heterogeneity, Traditional Cultural Values, Language Barrier, Model Minority Myth

Description

This issue brief discusses the impact of insufficient data on diverse Asian American subgroups, the difficulties of obtaining access to the healthcare system, and the effect of traditional cultural values.

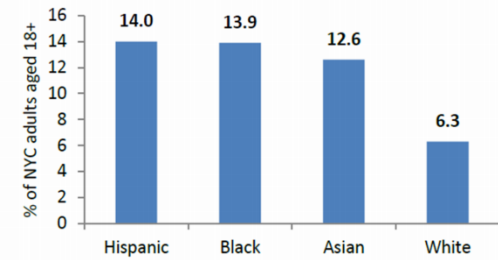
Key Points

- The consolidation of Asian American subgroups in data obscures subgroups that are at a significantly higher risk for certain diseases.
- Because the Asian American and Pacific Islander populations are small and relatively new—but quickly growing populations, there is little comprehensive and long term data on the prevalence of many diseases and other healthcare related information.
- Immigrant and poorer sectors of the Asian American population experience large difficulties obtaining healthcare—this will, hopefully, be ameliorated by the Affordable Care Act.
- Language Barriers and cultural differences causes Asian Americans to be less reliant and trusting of Western doctors.
- Cultural norms can prevent many Asian Americans for seeking help for what might be considered shameful—ex HIV/AIDS, mental health issues, and physical abuse.

Issue Brief

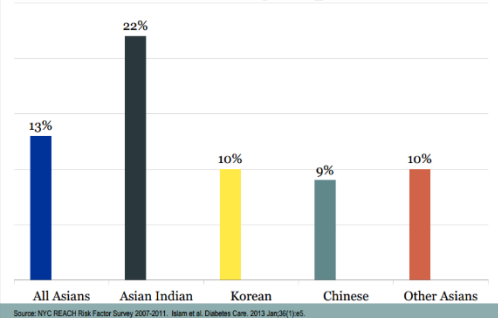
Asian Americans are

Prevalence of diabetes by race/ethnicity among New York City adults



Source: NYC Community Health Survey, 2011

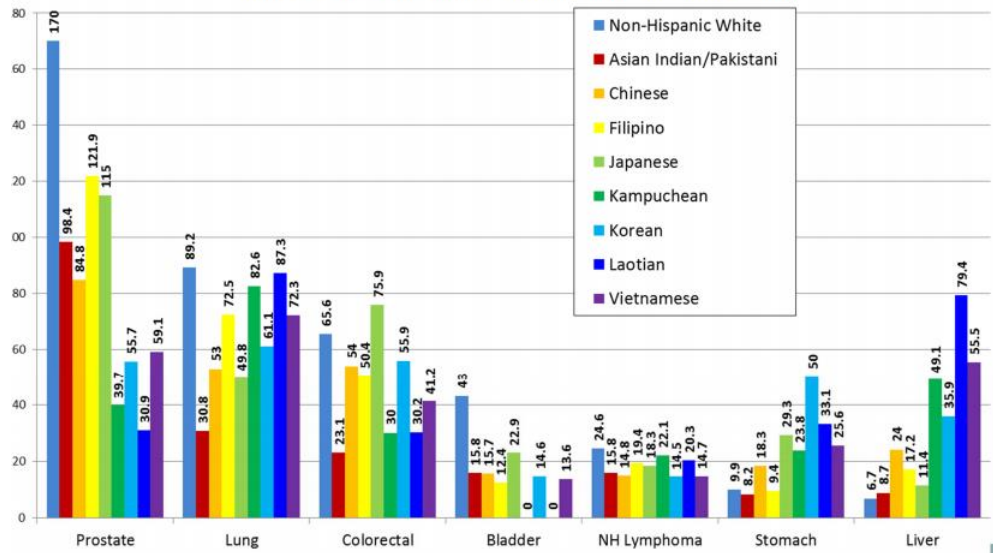
Diabetes Prevalence in NYC by Asian Subgroup



Source: NYC REACH Risk Factor Survey 2007-2011. Isom et al. Diabetes Care. 2013 Jan;36(1):e5.

Most Commonly Diagnosed Cancers in Selected U.S. Asian Men, 1998-2002

Per 100,000. Age adjusted to the 2000 U.S. population



Source: http://webdoc.nyunc.org/nyunc_d6/files/asian-health2/CSAAH_AANHPI%20Data%20Slides_0.pdf

frequently thought of as the “model minority” because of their financial and educational success. This myth, however, belies many of the issues facing the growing Asian population today. One of these key issues is public health. When looking at the statistics it seems that Asians are one of the healthiest racial groups in America—they have the highest life expectancy, the lowest smoking rates, the smallest percentage of cancer deaths and one of the lowest diabetes rates. Looking at the prevalence smoking for example, in New York City 11% of Asians smoke which is lower than for Whites, Blacks and Hispanics, 16%, 12%, 16% respectively. When we look at the individual subgroups we see that the prevalence of smoking in Koreans is 23%, and in just Korean males is 35%. These numbers are significantly higher than average but they are hidden by the rest of the Asian populations’ extremely low numbers. This is partially due to different cultural views on smoking in different Asian ethnicities. Diabetes is another example where the rarity of it in most Asian American groups disguises the fact that Indians have a very high chance of diabetes. The reason why these discrepancies are important and have an effect on the health of Asian Americans is because doctors are less likely to look for certain diseases because of the general belief that Asians do not frequently get one disease or another and they miss the fact that some Asian ethnicities are actually high risk groups. This slows the diagnosis process and possible aspects of prevention of diseases, to which, one ethnicity might be particularly prone. Additionally because the Asian population is only about 5% and much of this

population is relatively new, there simply isn't as extensive research into the impact of many diseases on Asian Americans.

The Asian American population is comprised of a large immigrant population which increases the difficulty of access to the Health Care system. It is especially difficult for the children, who are citizens, of undocumented immigrants to get healthcare. As a result Asian Americans have the highest percentage of underinsured children of any other racial group. According to the White House, under the Affordable Care Act 97,000 Asian American young adults have gained coverage. Another aspect of the Affordable Care Act was to increase the number of local health centers that are more racially and ethnically diversified. This would help surmount the linguistic and cultural barriers to health care. Studies have shown that Asians are the most likely to distrust their doctor and feel as though their doctor did not meet their needs. Part of this is because of the difficulty of communication and a lack of understanding for specific cultural values.

The cultural values play a significant role in how Asian Americans participate in the health care system. In a study, it was shown that Asian Americans were most likely to agree with the statement "It is better to take care of your own health than to go to a doctor." Additionally the role of shame for certain diseases like HIV/AIDS has prevented proper care. Asian Americans are the only racial group for which the prevalence of HIV/AIDS has increased in over the last 5 years. This is because many do not report it because of the shame tied to this disease and because those who are the highest risk--those who do

drugs and participate in unsafe sex--are afraid to get help and information. Similarly there is a significant stigma against mental health issues, particularly for the Chinese, that prevent those who need help from getting it. Another cultural issue for Asian Americans is that the tradition of male dominance and

Table 1. Racial and ethnic differences in site of usual source of care and attitudes towards healthcare

	AA's	Asians	Hispanics	Whites	P Value
Site of Usual Source of Care					
Doctor's office or private clinic	66.4	74.2	59.7	81.1	0.000
Community health center or other public clinic	12.1	11.6	23.4	9.3	
Hospital outpatient department	8.9	7.1	3.2	3.0	
Hospital emergency department or no usual source of care	12.6	7.1	13.7	6.6	
Attitudes toward Healthcare (Percentage that Strongly Agrees)					
My health depends on how well I take care of myself	84.5	79.3	82.8	81.1	0.011
Staying healthy is a matter of luck	24.2	19.5	25.9	11.9	0.000
I leave decision about my health to my doctor	37.8	30.6	41.0	31.0	0.000
It's better to take care of your own health than to go to the doctor	15.7	36.5	31.7	18.1	0.000
Discrimination					
Believes there is racial or ethnic bias in delivery of medical treatment	22.2	20.2	22.5	8.6	0.000
Number of observations	1,031	614	1,142	3,447	

AA: African Americans; Source: Calculation from the Commonwealth Fund Survey of Disparities in Quality of Health Care: 2001; The four racial/ethnic subgroups were mutually exclusive. Hispanics who were also Whites, African Americans or Asians were counted in the Hispanic category.

patriarchy with most Asian cultures increases the rate of domestic abuse. Although it is difficult to find statistics on this issue, the National Asian Pacific American Women's Forum have shown that in the studies that have been done Asian American Women are overrepresented among domestic violence

homicides. Indeed these cultural norms discourage women from seeking help and causes communities to deny the existence of abuse within them.

Asian Americans are in many respects one of the healthiest races but, there are significant health disparities that are hidden behind these positive numbers. Asian Americans attitudes toward health care are representative of the many barriers that prevent Asians from obtaining quality health care. Whether this is denial of problems, Language barriers, or distrust in Western medicine, as the Asian American population continues to rapidly increase it will become increasingly important to address all of these issues.

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