

## **Asian Americans and Pacific Islanders: Health Disparities**

*Note: The information on groups presented under Asian Americans and Pacific Islanders does not focus on Koreans and Japanese living in the US, since these subgroups are relatively small.*

The available demographic and health data on Asian Americans and Pacific Islanders (AAPIs) are usually of limited value because of the attempt to encompass the broad AAPI group, in spite of the enormous diversity among the peoples included. Without disaggregating the data, it is impossible to detect the great variations in income, education, and health status among AAPI populations, hiding serious socioeconomic and health problems both within and between subgroups.

Health indicators for AAPIs overall suggest that this population is one of the healthiest in the US. However, there is great diversity within this group, and marked health disparities exist for specific segments. Women of Vietnamese origin, for example, suffer from cervical cancer at nearly five times the rate for white women. New cases of hepatitis and tuberculosis are also higher in AAPIs living in the US than in whites. (US DHHS, 2000).

### **Underlying Causes of Health Disparities: Income and Education**

Inequalities in income and education underlie many health disparities in the US. Income and education are intrinsically related and often serve as proxy measures for each other. In general, population groups that suffer the worst health status are also those that have the highest poverty rates and the least education. Disparities in income and education levels are associated with differences in the occurrence of death and illness, including heart disease, diabetes, obesity, elevated blood lead level, and low birth weight. Higher incomes permit increased access to medical care, enable people to afford better housing and live in safer neighborhoods, and increase the opportunity to engage in health-promoting behaviors. (US DHHS, 2000).

Health disparities are believed to be the result of the complex interaction among genetic variations, environmental factors, and specific health behaviors. This section of the Provider's Guide presents information on the traditional health practices and beliefs as well as the health status of different AAPI subgroups:

- **General Information on Asian Americans and Pacific Islanders**

## **General Information on Asian Americans and Pacific Islanders**

Although AAPIs are sometimes seen as constituting a homogeneous ethnic category, the failure to make distinctions among specific ethnic groups can lead to faulty conclusions about important health needs among AAPI clients. Without disaggregating demographic and health data, it is impossible to detect the great variations in income, education, and health status among AAPI populations, hiding serious socioeconomic and health problems both within and between certain ethnic groups. The need to examine the health care issues of *specific* AAPI subgroups (e.g., Chinese, Filipino, native Hawaiian, Vietnamese) is clear. (Zane et al., 1994).

- **History**
- **Demographics**
- **Health Status**
  - Data
  - Leading Causes of Morbidity and Mortality
- **Traditional Health Beliefs and Practices**
  - Overview of Philosophies, Religions, and Worldviews
  - Overview of Asian Medicine
  - Fatalism
  - Death and Dying
  - Causes of Illness
  - Possible Consequences of Specific Health Beliefs
- **Risk Factors and Challenges**
  - Access to Health Care
  - Lack of Insurance
  - Language
  - Parasitic Infestations
  - Smoking
  - Diet and Exercise
  - Stress
  - Lack of Knowledge of Risk Factors
- **Strengths and Protective Factors**
  - Education, Income, and Employment
  - Family and Social Life
  - Diet and Exercise
  - Low Rates of Alcohol Abuse
- **Adherence Factors**
  - Decision-Making
  - Communication
  - Diet
- **Complementary and Alternative Medicine**
  - Use
  - Specific Practices
  - Possible Concerns
- **References and Resources**

## **History**

- **Immigrants come from more than 20 countries.** Motivated by economic factors, political turmoil, and the desire for education, Asian Americans have immigrated to the US from more than 20 countries. They speak more than 100 different languages and represent more than 60 different ethnicities. (Ponce, 1990).
- **Traumatic sociopolitical experiences are common.** Traumatic sociopolitical experiences (war, internment camps, torture, and famine) prior to migration are common among many Southeast Asian refugees. Their adjustment to the US may include lifelong issues of separation, loss, abandonment, and guilt. (Chin and Bigby, 2003).
- **US immigration policies have been discriminatory.** Immigration policies have historically been discriminatory toward Asians and resulted in more stringent quotas and greater scrutiny and hurdles for entry and citizenship than for any other racial or ethnic group. (Chin and Bigby, 2003).

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