

## HEALTH INEQUITIES IN THE ASIAN AMERICAN COMMUNITY

**“Racial and ethnic minorities tend to receive a lower quality of healthcare than non-minorities . . .”<sup>i</sup>**

*– Institute of Medicine*

### PERSPECTIVES

“If you speak English well, then an American doctor, they will treat you better. If you speak Chinese and your English is not that good, they would also kind of look down on you. They would [be] kind of prejudiced.”

“I have a desire to improve my English so I can go to an American doctor and get better treatment”

*– Chinese focus group participants<sup>ii</sup>*

The Asian American community has long borne the tag of being the “model minority,” a myth that has contributed to the perception that Asian Americans suffer from few health issues. Considerable health disparities, however, persist in the Asian American community, and barriers in obtaining coverage and in finding culturally and linguistically appropriate health care contribute to and intensify these disparities.

Access to effective health care is a critical goal for Asian Americans because of the serious health trends that have emerged in this population and that are out-of-step with the American population as a whole.

- Hepatitis B infection among Asian American youths occurs at a rate approximately 30 times greater than that for white children.<sup>iii</sup>
- Overweight and obesity rates have climbed faster for Asian American and Pacific Islander children than for any other U.S. population.<sup>iv</sup>
- The Asian American, Native Hawaiian, and Pacific Islander community has had the “highest percentage increase in HIV infection and AIDS cases among racial and ethnic groups over the most recent four year period.”<sup>v</sup>
- Breast cancer mortality rates climb in the Asian American community as these rates fall in all other racial groups in the U.S.<sup>vi</sup>

To help mitigate these disparities, Asian Americans must have greater access to culturally and linguistically appropriate health care providers. **Over one-third of Asian Americans have limited English proficiency and one-quarter of Asian Americans live in households without a member aged 14 or over that possesses English proficiency.**<sup>vii</sup> Effective communication would contribute to overcoming not only problems in addressing patients’ current health issues, but also in helping patients make educated decisions concerning their health. Studies have revealed that **94% of Vietnamese, Laotian, and Cambodian immigrants “reported having no knowledge of blood pressure and its significance, and 85 percent reported no knowledge of how to prevent heart disease.”**<sup>viii</sup> Also, **“Asian Americans and Pacific Islanders were twice as likely as non-Hispanic whites to report knowing nothing about AIDS.”**<sup>ix</sup> Greater education on health-related issues is vital to improving the health of the overall Asian American community.

Effective health care reform, however, does not stop with greater access to linguistic and culturally appropriate health care, but must also encompass the principles outlined in the “Consensus Statement on Addressing Health Inequities in Health Reform.”

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<sup>i</sup> INSTITUTE OF MEDICINE, UNEQUAL TREATMENT 1 (Brian D. Smedley, Adrienne Y. Stith, and Alan R. Nelson eds., 2002).

<sup>ii</sup> *Id.* at 393-94.

<sup>iii</sup> ASIAN AMERICAN COMMUNITIES AND HEALTH : CONTEXT, RESEARCH, POLICY AND ACTION 114 (Chau Trinh-Shevrin, Nadia Shilpi Islam, and Mariano Jose Rey eds., 2009).

<sup>iv</sup> *Id.* at 142.

<sup>v</sup> ASIAN & PACIFIC ISLANDER AMERICAN HEALTH FORUM, 2008-2012 POLICY AGENDA 15-16 (2008).

<sup>vi</sup> Asian American Communities and Health, *supra* note iii, at 137.

<sup>vii</sup> ASIAN AMERICAN JUSTICE CENTER AND ASIAN PACIFIC AMERICAN LEGAL CENTER, A COMMUNITY OF CONTRASTS: ASIAN AMERICANS AND PACIFIC ISLANDERS IN THE UNITED STATES 3 (2006).

<sup>viii</sup> Asian American Communities and Health, *supra* note iii, at 180.

<sup>ix</sup> *Id.* at 187.