



Equity Series Part II:

Understanding Nuances of Health Disparities and Cultural Barriers Within Asian American and Pacific Islander Communities

COVID-19 has devastated Black, Indigenous, and People of Color communities in unprecedented ways, bringing to the forefront historical inequities that have existed in the United States since its inception. As the homeless response system continues to design strategies and resources that align with public health guidance in response to the pandemic, it is critical that stakeholders and providers understand the root causes of health disparities within Black, Indigenous, and People of Color communities and the very legitimate and real mistrust these communities have about public health and healthcare systems. In gaining this understanding, communities are better equipped to lead with equity and approach vaccine distribution efforts with [cultural humility](#).

Part II of this special series will focus on understanding nuances of health disparities and cultural barriers within Asian American and Pacific Islander communities. Asian Americans are the [fastest-growing racial group](#) in the United States and face a host of major health disparities detailed below.

The Intersection of Race, Culture, COVID-19, and Racism Against Asian American and Pacific Islander Communities

Incidents of anti-Asian racism have continuously escalated across the world since the beginning of the COVID-19 pandemic. In the United States, these acts of racism and oppression have been carried out and perpetuated by community members, media outlets, and some of the country's most trusted government institutions through acts of violence, spreading of misinformation, and overall messaging about the evolution of COVID-19. This has contributed to heightened cautiousness in some Asian American and Pacific Islander communities as well as their diminishing trust in information outlets and care systems. More information on the experiences of Asian American and Pacific Islander communities and culturally responsive resources can be found on the [Association of Asian Pacific Community Health Organizations](#)' resource page. Information includes bystander intervention strategies, guidance on how to talk with community members about COVID-19 and discrimination, and resources that address removing stigma. These resources coupled with other [HUD Exchange materials](#) on equity can be a valuable tool set in supporting vaccine conversations with Asian American and Pacific Islander people experiencing homelessness.

Health Disparities in Asian American and Pacific Islander Communities

Asian American and Pacific Islanders are the [largest and fastest-growing racial/ethnic group](#) in the United States. This pan-ethnic umbrella includes people who trace their roots to more than [20 countries](#) in East Asia, Southeast Asia, and the Indian subcontinent, each with unique histories, cultures, languages, and other characteristics. There are also disparities among certain groups within the Asian American and Pacific Islander community, both in homelessness and health. As described in [State of Homelessness: A look at Race and Ethnicity](#) by the National Alliance to End Homelessness, 76 percent of Asian homelessness is concentrated in five states and one territory with Pacific Islanders facing the "highest national-level rate of homelessness."

In these communities and others where there may be a significant subpopulation of people experiencing homelessness who identify as Asian American and Pacific Islander, ensure that there are partnerships with local Asian American community organizations to help bridge cultural and linguistic divides that may cause hesitancy in engaging the homeless system for help. These community partners will be critical when having vaccine discussions with people experiencing homelessness who identify as Asian American and Pacific Islander as current health disparities and cultural barriers may impact or inform conversations. Information presented in the following sources show how persons experiencing homelessness who identify as Asian American and Pacific Islander can be supported.

Current Health Disparities and Cultural Barriers to Healthcare for Asian Americans and Pacific Islanders

- [Health Centers' Role in Reducing Health Disparities Among Asian Americans, Native Hawaiians, and other Pacific Islanders](#)

This article examines disparities within specific Asian American and Pacific Islander subgroups and the broader Asian American and Pacific Islander community including having the highest rate of liver cancer, highest rate of tuberculosis, greater likelihood of coronary heart disease, and an increased incidence of breast cancer. The article goes on to document the way in which health centers are uniquely positioned to address such disparities within the Asian American and Pacific Islander community while delivering community-based, culturally appropriate, and comprehensive services.

- [Asian Americans' Reports of Their Health Care Experiences](#)

This article highlights findings from a national survey which examined how race and ethnicity impact Asian American and Pacific Islander health care experiences and care satisfaction. The article provides beneficial insights and connection to the cultural dynamics which may inform decision-making about getting vaccinated for Asian American and Pacific Islander people experiencing homelessness. The article serves as a reminder as to the importance of intentionality and transparency in current vaccine efforts, communications, and conversations, as many survey respondents in the article reported fewer accounts of decision-making in their care, more accounts of providers not understanding their values and background, and fewer accounts of having meaningful time spent with physicians to discuss evaluations, diagnoses, and care options.

- [The Role of Social Cognition in Medical Decision Making with Asian American Patients](#)

This article examines how provider perceptions and behaviors may possibly contribute to health disparities in the Asian American community along with poverty, low health literacy, and harmful health behaviors. The article states that "there is little research on healthcare providers' stereotypes of Asians and how those stereotypes impact their medical care." Asian American health literature is lacking but, based on evidence that other minorities receive poorer health care than White patients due to provider perceptions and behaviors, there is a possibility that this is also true for Asian Americans. It is, however, well documented that Asian Americans are at least twice as likely as White Americans to suffer from stomach and liver cancers, and Asian American women specifically are more likely to die from breast and cervical cancers than White women.

- [U.S. Department of Homeland Security \(DHS\) Statement on Equal Access to COVID-19 Vaccines and Vaccine Distribution Sites](#)

DHS released a statement on equal access to COVID-19 vaccines and vaccine distribution sites affirming their commitment and full support of undocumented immigrants having equal access to the COVID-19 vaccine and vaccine distribution sites. The DHS statement includes its sensitive locations policy, citing that U.S. Immigration and Customs Enforcement and U.S. Customs and Border Protection "will not conduct enforcement operations at or near vaccine distribution sites or clinics."

It is pivotal that communities equip themselves with this information to help bridge conversations with Black, Indigenous, and People of Color experiencing homelessness, and those who may not yet have confidence in the vaccine or in medical institutions. The COVID-19 pandemic has only heightened existing inequities that Black, Indigenous, and People of Color face in both healthcare and homelessness. Visit [Health Leads USA](#) to learn more about the challenge of the trust gap and its collaborative approach to equity-oriented vaccine demand.