

Researchers Challenge Myth of the Well-Adjusted Asian American

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(PhysOrg.com) -- Two University at Buffalo researchers are challenging the "myth of the well-adjusted Asian American," detailing how members of one of the country's fastest-growing ethnic groups face crucial disadvantages preventing them from receiving quality health care taken for granted by other, more culturally assimilated Americans.

In their paper, "Barriers to [Health Care](#) Among Asian Americans," UB School of Social Work professors Wooksoo Kim and Robert H. Keefe write that Asian Americans cannot be carelessly lumped together with such easy stereotypes as "well adjusted" or "successful." In addition to the many Asian Americans who have assimilated well and become accomplished professionals, able to enjoy all the accompanying benefits, millions of Asian Americans still face daunting obstacles that stand in the way of quality health care, the UB researchers say.

Their conclusions are based on analysis of previous research into health care disparities among U.S. racial and ethnic groups, including Asian Americans, and upon U.S. Census data.

Four major barriers -- language and culture, health literacy, health insurance and immigrant status -- create vast differences between some Asian Americans with access to good health care and those who endure these barriers as best they can, the researchers conclude in their study, published this summer in *Social Work in Public Health*.

"Previous researchers (who studied selective nationalities or regional

groups) may extrapolate from their findings to form a model they believe is representative of all Asian Americans," explain Kim and Keefe. "This limitation not only fails to flush out differences among the Asian-American groups not being studied, but the one group under study is unlikely to be representative of its own ethnic Asian-American population."

All these factors "perpetuate the myth of the well-adjusted Asian American," the researchers find.

"Asian Americans are considered a 'model minority,' which prevents many Asian Americans from getting help when they need it, and this study addresses that issue," Kim explains. "There is a dire need to expand our knowledge regarding better health care services for Asian Americans. I hope health care providers and policy makers become more cognizant of the needs of 12 million Asian Americans in this country."

"The mission of social work research lies in its utility. It has to contribute to the betterment of people's lives," she adds. "In this sense, I am studying Asian Americans in order to improve well-being of all Asian Americans through research."

Before making recommendations for health and social policy reforms, the UB researchers outline the barriers standing in the way of quality health care for an ethnic group that will constitute 8 percent of the American population by 2050:

Language/Culture: Kim and Keefe call language the most "formidable" barrier for Asian Americans looking for quality health care. It is particularly difficult for elderly Asian Americans, they say, who often need it the most and are least likely to be proficient in English.

Health Literacy: Besides having access to good health care, people need to understand the content and context of specific health situations, and use analytic and decision-making skills when they seek health care advice.

Health Insurance: "Despite the public's view of Asian Americans as the financially well-to-do 'model minority,' the poverty rate for Asian Americans as a group is actually higher than that of Caucasians," the researchers point out. As a result, Asian Americans may turn to less-costly but frequently ineffective treatments.

Immigrant Status: Immigrants who decide to undertake the "adventure of immigrating" may be healthier than the average person living in their host country. But the longer they live in their new country, the more the positive effects wear off. And illegal immigrants miss out on many health care benefits, most obviously the denial of jobs offering health insurance.

According to the researchers, attempts to address the issue of uneven health care among Asian Americans need to take these barriers into account.

"The presence of health care experts who are knowledgeable about Asian-American culture and social conditions can help remove, or mitigate, the effects of the barriers to health care for Asian Americans," the researchers write.

Improving access for Asian Americans also improves the chances other under-served groups will benefit from quality health care.

In the long run, a country with healthy Asian Americans is a necessary condition for a stronger health-care system in the United States, the researchers say. "Health care for Asian Americans cannot be

conceptualized without considering health care for all Americans," Kim says.

Provided by University at Buffalo

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