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*The National Women's Health Information Center*

A project of the U.S. Department of Health and Human Services, Office on Women's Health



## **Frequently Asked Questions about Health Problems in Asian American/Pacific Islander and Native Hawaiian Women**

### **Who are Asian American/Pacific Islander and Native Hawaiian women in the United States?**

Asian American/Pacific Islanders and Native Hawaiian women represent one of the fastest-growing and most diverse populations of women in the United States. Asian Americans represent a number of groups, including women from Vietnamese, Korean, Asian Indian, Japanese, Filipino, Cambodian, Laotian, and Chinese descent. Among Pacific Islanders are women who are Hawaiian, Samoan, Guamanian, Tongan, and Fijian. So, this population has a vast array of languages and cultures. Some of these women are 4th and 5th generation Asian Americans, while 75% are recent immigrants and refugees. Native Hawaiians and American Samoans are part of the Asian-American population, but they are native to this country, not immigrants.

### **What health problems affect a lot of Asian American/Pacific Islander and Native Hawaiian women?**

#### **Obesity and Overweight**

Being overweight or obese increases your risk of heart disease, type 2 diabetes, high blood pressure, stroke, breathing problems, arthritis, gallbladder disease, sleep apnea (breathing problems while sleeping), osteoarthritis and some cancers. Obesity is measured with a Body Mass Index (BMI). BMI shows the relationship of weight to height. Women with a BMI of 25 to 29.9 are considered overweight, while women with a BMI of 30 or more are considered obese. All adults (aged 18 years or older) who have a BMI of 25 or more are considered at risk for premature death and disability from being overweight or obese. These health risks increase as the BMI rises. Your health care provider can help you figure out your body mass or go to [www.cdc.gov/nccdphp/dnpa/bmi/calc-bmi.htm](http://www.cdc.gov/nccdphp/dnpa/bmi/calc-bmi.htm). Not only are health care providers concerned about how much fat a person has, but also where the fat is located on the body. Women with a "pear" shape tend to store fat in their hips and buttocks. Women with an "apple" shape store fat around their waists. For most women, carrying extra weight around their waists or middle (with a waist larger than 35 inches) raises health risks (like heart disease, diabetes, or cancer) more than carrying extra weight around their hips or thighs. Being overweight is a problem for Pacific Islanders. Native Hawaiians and Samoans are among the most obese people in the world. If you are overweight or obese, losing weight can lower your risk for many diseases. And physical activity is an important part of weight loss treatment. Try to be active (30 minutes most days of the week is best) and eat better to help prevent and treat obesity.

## **Diabetes** (dye-uh-bee-tees)

You can get diabetes if your body does not make or use insulin right. Insulin is what is in your body that changes the sugars in food into energy. Type 1 diabetes happens when your body destroys its own cells that make insulin. Type 2 diabetes occurs when the pancreas doesn't make enough insulin. A growing number of children are getting type 2 diabetes. Children have a greater chance of getting type 2 diabetes if they are overweight or if a family member has it. Data on how many cases of diabetes are in the Asian American/Pacific Islander and Native Hawaiian population are limited. Some groups within these populations are at increased risk for diabetes. For example, data collected from 1996 to 2000 suggest that Native Hawaiians are 2.5 times more likely to have diagnosed diabetes than White residents of Hawaii of similar age. Guam's death rate from diabetes is five times higher than that of the U.S. mainland. And it is one of the leading causes of death in American Samoa. People with diabetes have a higher chance of having problems with their skin, mouth, kidneys, heart, nerves, eyes, and feet. Although type 1 diabetes cannot be prevented, there are steps you can take to prevent and control type 2 diabetes:

- See your health care providers regularly. Don't forget about the dentist and eye doctor!
- Don't smoke.
- Control your blood sugar and cholesterol levels, your blood pressure, and weight.
- Exercise (30 minutes most days of the week is best).
- Check your feet everyday for blisters, red spots, swelling, or cuts.
- Stay aware of how you feel-if you notice a problem, call your health care provider right away.

## **Heart Disease**

Heart disease is a group of diseases of the heart and of the blood vessel system within the heart. Coronary heart disease, the most common form of heart disease, affects the blood vessels (or coronary arteries) of the heart. It causes angina and heart attacks. Angina is a pain in the chest that happens when a part of the heart does not get enough blood. It feels like a pressing or squeezing pain, often in the chest under the breastbone, but sometimes in the shoulders, arms, neck, jaw, or back. Angina seldom causes permanent damage to the heart, like a heart attack. During a heart attack, you can feel chest pressure, fullness, squeezing, or pain in the center of the chest that lasts longer than a few minutes, or comes and goes, spreading pain to one or both arms, back, jaw, or stomach, or cold sweats and nausea. Some women don't have these symptoms but may have other symptoms, such as an upset stomach, burning feeling in the upper abdomen, and lightheadedness. If you have any of these symptoms, call 911 or see a health care provider right away. A heart attack can cause permanent damage to the heart and maybe even death. Heart disease is the main cause of death for American women. Overall, Asian/Pacific Islander and Native Hawaiian women have much lower rates of heart disease than women of other minority groups, but it is still the leading cause of death within their own group. Heart disease risk and death rates are higher among Native Hawaiians and some Asian Americans (Asian Indians) partly because of higher rates of obesity, diabetes, and high blood pressure.

Diabetes, high blood pressure, high cholesterol, not exercising, and smoking all put women at risk for heart disease. You can help prevent heart disease by not smoking, and by controlling your blood pressure, cholesterol, and your weight.

## **Stroke**

Lack of blood flow to the brain from a blood clot, or bleeding in the brain from a broken blood vessel, causes a stroke. Without a good blood supply, brain cells cannot get enough oxygen and begin to die. This type of damage to the brain could cause problems that may affect speech, language, movement, vision, balance, hearing, breathing, and swallowing. A stroke could also cause death. Among Asian Americans/Pacific Islanders, the risk of stroke is higher at ages 35-64 than for Whites. There are other medical problems that put you more at risk for a stroke, including diabetes, high blood pressure, heart disease, having already had a stroke or mini-stroke (TIA), and carotid artery disease.

To avoid heart attack and stroke, the American Heart Association advises people to take the following steps:

- Don't smoke.
- Control your blood pressure. Ask your health care provider what a healthy number is for you and how often you need your blood pressure checked.
- Eat healthy.
- Lower your cholesterol to the right level, based on your personal risk. Talk to your health care provider about a healthy level for you.
- Get at least 30 minutes of exercise on most days of the week.
- Maintain a healthy weight. Ask your health care provider what a healthy weight is for you.
- Have a normal fasting blood glucose level (below 110 mg/dL). Ask your health care provider when you should be tested.

## **High Cholesterol** (koh-les-ter-awl)

Cholesterol is a waxy substance found in all parts of the body. It comes from two sources: your body and the food you eat. Your liver makes all the cholesterol your body needs. Eating too much cholesterol in animal foods like meats, whole milk dairy products, and egg yolks can make your cholesterol go up. Cholesterol blocks blood from flowing easily through your body. The higher your cholesterol, the greater your risk for heart disease. Over 25% of American women have blood cholesterol levels high enough to put them at risk for heart disease. Among Asian American/Pacific Islander women, high cholesterol rates are highest in Japanese women. Asian American/Pacific Islander women also have low cholesterol screening rates. Control your cholesterol by exercising, eating foods low in saturated fat and cholesterol, and keeping a healthy weight. Ask your health care provider about how often you should get your cholesterol checked.

## **High Blood Pressure**

High blood pressure happens when blood cannot flow easily through your blood vessels. This creates pressure in your vessels, which damages the vessels and strains your heart. As a result, blood doesn't flow as well to your brain or kidneys, and you can have a heart attack, stroke, or kidney failure. Among Asian American/Pacific Islander women, high blood pressure is more of a problem for Filipino women. And all Asian American/Pacific Islander women have much lower blood pressure screening rates than other minority women. Certain factors increase your chances of having high blood pressure: increasing age (middle aged or older), diabetes, obesity (or being overweight), alcohol use, eating too much salt or sodium, a family history of high blood pressure, and not exercising.

## **Hepatitis B** (hep-uh-tight-iss B)

Hepatitis B is a serious disease caused by a virus that attacks the liver. The virus, which is called hepatitis B virus (HBV), can cause lifelong infection, cirrhosis (scarring) of the liver, liver cancer, liver failure, and death. You may have hepatitis B (and be spreading the disease) and not know it; sometimes a person with HBV infection has no symptoms at all. Only a blood test can tell for sure. Symptoms can include:

- eyes or skin turning yellow
- loss of appetite
- nausea, vomiting, fever, stomach or joint pain
- feeling very tired and not able to work for weeks or months

You get hepatitis B by direct contact with the blood or body fluids of an infected person; for instance, you can become infected by having sex or sharing needles with an infected person. A baby can get hepatitis B from an infected mother during childbirth. Hepatitis B is not spread through food or water or by casual contact. Your risk of getting the virus is higher if you were born in Southeast Asia or the Pacific Islands. Compared to the U.S. average this disease is 25 to 75 times more common among Samoans and immigrants from Cambodia, Laos, Vietnam, and China.

There are medications that can treat long-lasting HBV-infection. These work for some people, but there is no cure for hepatitis B. Hepatitis B vaccine is the best protection against HBV. These people should get the vaccine: all babies, at birth; all children 0-18 years of age who have not been vaccinated; persons of any age whose behavior puts them at high risk for HBV infection; persons whose jobs expose them to human blood. If you have HBV in your blood, you can give hepatitis B to your baby. Babies who get HBV at birth may have the virus for the rest of their lives, can spread the disease, and can get cirrhosis of the liver or liver cancer. All pregnant women should be tested for HBV early in their pregnancy.

## **Tuberculosis**

Tuberculosis (TB) is caused by a bacterium. While it can affect any part of your body, it usually attacks your lungs. TB is spread through the air. If someone with TB of the lungs or throat coughs or sneezes, people nearby who breathe in the bacteria may get TB. Some people who breathe in the bacteria may not have symptoms and can't give it to other people. This is called latent TB infection. If the body can't stop the bacteria from growing, people develop TB disease. If this happens and the TB is in the lungs, it can cause several symptoms:

- bad cough (with blood or phlegm)
- chest pain
- fatigue
- weight loss
- loss of appetite
- chills
- fever
- sweating at night

Among all women with TB, 81% of TB cases affect minority women. Of these cases, 26% are among Asian American/Pacific Islander women (second only to African American women, who make up 30% of TB cases among minority women).

## **Cervical cancer**

Cancer of the cervix, a very common kind of cancer in women, is a disease in which cancer cells are found in the tissues of the cervix. The cervix is the opening of the uterus, or womb. It connects the uterus to the vagina (the birth canal). Cancer of the cervix usually grows slowly over a period of time. Before cancer cells are found on the cervix, the tissues of the cervix go through changes in which abnormal cells begin to appear (a condition called dysplasia). Later, cancer starts to grow and spread more deeply into the cervix and to surrounding areas. New cases of cervical cancer among Vietnamese women are nearly 5-times those of White women. And, on average, Asian American/Pacific Islander women have much lower rates of Pap test screening than other groups.

The most common symptom of cervical cancer is abnormal bleeding. Many ethnic groups share the things that can make you more likely to get cervical cancer, such as having more than one sexual partner, starting sexual intercourse at a young age, and other dangerous sexual behavior. Human papilloma virus (HPV), a sexually transmitted disease (STD), causes most cases of cervical cancer. You can help find cervical cancer early, when it is most treatable, by getting regular Pap tests and pelvic exams. Pap tests should begin about three years after a woman begins having sexual intercourse, but no later than at 21 years old. Women should then have Pap tests at least once every three years. You should talk with your health care provider about how often you should have a Pap test and pelvic exam.

The National Breast and Cervical Cancer Early Detection Program (NBCCEDP) program provides free or low-cost cervical cancer screening to women who don't have health insurance. Non-profit organizations and local health clinics are the main groups who provide the tests. To learn more about this program, please contact the CDC at 1-888-842-6355 or look on the Internet at [www.cdc.gov/cancer](http://www.cdc.gov/cancer).

## **Breast cancer**

Women get breast cancer when cells in the breast don't grow right and a tumor forms. Breast cancer is less common in Asian American/Pacific Islander and Native Hawaiian women than it is in White or African American women. But, more Asian American/Pacific Islander and Native Hawaiian women have breast cancer than do women of Hispanic or American Indian/Alaska Native descent. Also, the number of Asian American/Pacific Islander women who have been diagnosed with breast cancer has increased. Chinese American and Japanese American women have higher rates of breast cancer than women of their same age in China and Japan. At first, it was believed a Western diet (higher in fat) could explain this difference, but this has not been proven. Among all other populations in the United States, Asian American/Pacific Islander women have the lowest death rate from breast cancer. But, among certain Pacific Islanders, death rates from breast cancer are much higher than among other ethnic groups. For example, Native Hawaiians have the highest death rate from breast cancer than for any racial/ethnic group in the United States. Breast cancer also is the leading cause of death among Filipino women. We do not know why the rates vary between these groups. But, among all ethnic groups in this country, Asian American/Pacific Islander and Native Hawaiian women are the least likely to have ever had a mammogram.

We do not know how to prevent breast cancer. There are things women can do to reduce their risk, such as limiting how much alcohol they drink. However, it's vital for women to take steps to find breast cancer if they have it:

- Women aged 40 and older should have a screening mammogram every 1-2 years. Talk to your health care provider.
- Perform a breast self-examination (BSE) every month.
- The National Breast and Cervical Cancer Early Detection Program (NBCCEDP) program provides free or low-cost breast cancer testing to women who don't have health insurance. Non-profit organizations and local health clinics are the main groups who provide the tests. To learn more about this program, please contact the CDC at 1-888-842-6355 or look on the Internet at [www.cdc.gov/cancer](http://www.cdc.gov/cancer)

## **Suicide**

Suicide, or the taking of one's own life, is a tragic problem. Asian American women have the highest suicide rate among women 65 or older. And suicide rates are higher than the national average for Native Hawaiians. One possible reason for the higher rate of suicide among Asian American/Pacific Islander and Native Hawaiian women is that seeking mental health support is not socially acceptable in those cultures. And many of them wait to seek treatment until symptoms of mental health problems, such as depression, reach crisis levels. Nearly one out of two Asian American/Pacific Islanders will have problems using mental health treatment because they do not speak English or cannot find services that meet their language needs. You can help prevent suicide. You can call 911, 1-800-SUICIDE, or the number of a suicide crisis center (you can find the number in your phone book) if you feel suicidal or know someone who talks about it. It is important to talk with someone right away.

## **Osteoporosis**

Osteoporosis is a condition in which your bones become thin, brittle, weak, and more likely to break. A combination of things, not all of which you can control, can increase your chances of getting osteoporosis. These include:

- being female
- a small, thin body frame
- a family history of the disease
- postmenopausal or advanced age
- abnormal absence of menstrual periods
- eating disorders (anorexia or bulimia)
- a diet low in calcium and vitamin D
- inactive lifestyle
- cigarette smoking
- long-term use of glucocorticoids (medicines for many diseases like arthritis, asthma, and lupus)

While all women are at risk for getting osteoporosis, Asian American women have a higher risk because of their lower bone mass and density and smaller body frames. They also have a lower intake of calcium compared to other groups of women. As many as 90% of Asian Americans are lactose intolerant or cannot easily digest dairy products. Making sure to get enough calcium and exercise in the teen years and beyond can help prevent osteoporosis later in life. Your health care provider can find out if you have osteoporosis by giving you a bone mineral density test, which takes pictures like x-rays of the skeleton. If you are getting osteoporosis, you can prevent future bone fractures by having a calcium-rich diet, daily exercise, and drug therapy. There are a variety of drugs available to help preserve or increase bone mass. Talk with your health care provider about what is best for you.

## **Getting Health Care**

Although this isn't a problem with the health of women, it can lead to health problems because many women can't get the right health services, medicines, and supplies when they need them. Some reasons include:

- They can't pay for it and don't have health insurance.
- They have no way to get to a doctor.
- They have physical limitations that make it hard to get to a doctor.
- They don't understand the language.

On average, Asian American/Pacific Islander women have much lower breast and cervical cancer screening rates, and lower cholesterol and blood pressure screening rates than the national average. And overall, about 21% of Asian American/Pacific Islanders lack health insurance, compared to 16% of all Americans. Even with health insurance, culturally accepted medical models such as acupuncture and herbal medicines often are not covered services, a fact that further limits access to health care. Asian American women are more likely to report using traditional health practices and medicines than Asian men—69% versus 39%. By ethnic group, nearly all Cambodian women (96%), nearly a fifth (18%) of Laotian women, and nearly two-thirds of Chinese women (64%) report using traditional health practices.

Nearly one out of two Asian American/Pacific Islanders will have problems using mental health treatment because they do not speak English or cannot find services that meet their language needs. And not all English medical/health terminology can be readily translated into the various Southeast Asian languages, nor can many Southeast Asian expressions describing physical and mental conditions be directly translated for U.S. health care providers. Thus, it may be difficult for Asian patients to accept their diagnoses as real or to accept western treatment regimens for them. Fear of difficulties in communicating, compounded by shame, guilt, anger, depression, and other responses to certain stigmatized conditions such as mental illnesses, also may deter Asian Americans from seeking care promptly.

Access to health care among Samoans living on American Samoa is unique, in part because of the political relationship between the United States and its territory. Although this set of islands, located 240 miles southwest of Hawaii (the nearest site for tertiary care for residents of American Samoa), is medically underserved, American Samoa has operated a locally appropriate form of Medicaid since 1983. All inpatient and most outpatient services are provided at the Lyndon Baines Johnson (LBJ) Tropical Medical Center in the village of Faga'alu on the island of Tutuila. For persons living in the urban areas of Tutuila, this aging facility built in 1968 is convenient; however, for persons in rural areas of Tutuila or on other islands within the U.S. Territory of American Samoa, it is difficult to access care. Financial access to services at LBJ is not a problem for the Samoan population because of the Medicaid program. However, other things, such as an insufficient number and scope of needed health professionals, the unavailability of sophisticated diagnostic tools, and the lack of financing to replace the aging and increasingly outdated medical center, hinder the access to quality care in American Samoa. Samoans living on the United States mainland are more likely to be poor than other Americans and also are less likely to hold higher paying jobs that provide insurance coverage for families. Other barriers in access to health care for American Samoans result from their linguistic isolation, their culture and traditions, and their beliefs about the etiology of disease. Among groups on the U.S. mainland, urban American Samoans are one of the most linguistically isolated. Linguistic isolation makes it difficult for Samoans to seek and receive appropriate health care. Only in Hawaii, where the Samoan community is visible and concentrated in three distinct areas (Laie, Kalihi, and Waianae), have community-centered clinics been developed to provide culturally appropriate health care and education.

## **What types of health care coverage exist? How do I find out about them?**

Finding health insurance often requires good research and finding answers to lots of questions. There are a number of different kinds of health care coverage:

### **Private Insurance**

- Employer sponsored -- fully or partly paid by an employer, includes health maintenance organizations, preferred provider organizations, and point of service plans. Contact your employer for information on plans available to you.
- Individual insurance -- private health insurance that a person buys through an insurance company. You may want to talk to an insurance broker, who can tell you more about the health care plans that are available for individuals. Some states also provide insurance for very small groups or people who are self-employed. You may also want to go to the Quality Interagency Coordination Task Force Web site on health care quality at <http://www.consumer.gov/qualityhealth/> for information on selecting a health plan. If you do not have access to the Internet, or don't know how to use a computer, call 1-800-994-WOMAN (1-800-994-9662).

## Public Insurance

- Medicare -- federal government health insurance program for people 65 and older, or who are disabled, or who have permanent kidney failure. You can call the Social Security Administration at 1-800-772-1213 or contact your local Social Security Office for more information.
- Medicaid -- federal and state health insurance program run by states for low-income or disabled people of all ages. Click on <http://cms.hhs.gov/medicaid/tollfree.asp> for a list of Medicaid toll-free lines in each state. If you do not have access to the Internet, or don't know how to use a computer, call 1-800-994-WOMAN (1-800-994-9662).

For more information on health insurance, contact these organizations:

### Agency for Healthcare Research and Quality

Phone: (800) 358-9295

Internet Address: <http://www.ahrq.gov>

### Bureau of Primary Health Care

Phone: (800) 400-2742

Internet Address: <http://www.bphc.hrsa.gov/>

### Centers for Medicare & Medicaid Services (CMS)

Phone: 877-267-2323

Internet Address: <http://www.cms.hhs.gov>

### Health Insurance Association of America

Phone: 202-824-1600

Internet Address: [http://www.hiaa.org/index\\_flash.cfm](http://www.hiaa.org/index_flash.cfm)

## For More Information...

You can find out more about health problems in Asian American/Pacific Islander and Native Hawaiian women by contacting the National Women's Health Information Center at 800-994-WOMAN (9662), visiting the NWHIC Minority Women's section (<http://www.4woman.gov/minority/index.cfm>), and contacting the following organizations:

### Office of Minority Health

Phone: (301) 443-5224 (301) 589-0951 (TDD line) (800) 444-6472 (Publications)

Internet address: <http://www.omhrc.gov>

### Office of Minority and Women's Health

Phone: (301) 594-4490

Internet address: <http://bphc.hrsa.gov/OMWH/home.HTM>

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