

Health Status of Asian/Pacific Islander Adults in Michigan



- Asians[†] were the fastest growing racial group in Michigan from 2000-2010.¹
- Even though the Asian population is growing, accurate and timely data at the state-level are limited. In 2012, data were collected in the Asian/Pacific Islander Behavioral Risk Factor Survey (APIBRFS) to better describe the current health status of Asian/Pacific Islander adults in Michigan.

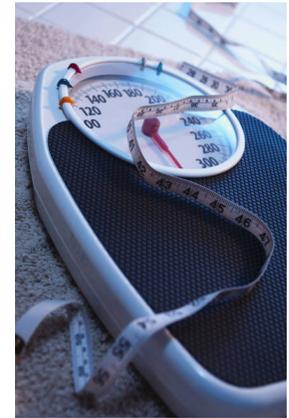
Asian Adults vs. All Adults in Michigan

For the **majority** of health indicators, Asian adults were **similar** to all adults in Michigan. Some^a of these were: no personal health care provider, routine health checkup in the past year, adequate physical activity, binge drinking, reported high blood pressure, breast cancer screenings (women 40+ years), and no dental visit in the past year.

For **some** of the health indicators, Asian adults did **better** than all adults in Michigan. These^a included: overweight (BMI^b 25.0-29.9), obesity (BMI \geq 30), no health care access due to cost, worried about having enough money to pay rent/mortgage, current smoker, missing six or more teeth, and ever told to have arthritis.

For **two** of the health indicators, Asian adults were **worse** than all adults in Michigan. These included ever having an HIV test and having appropriately timed Pap test (women 18+ years).

For the majority of indicators, Asian adults were similar or healthier than all Michigan adults. However, there are some limitations to the way the data were collected. The survey was only done in English and any participants who had difficulty understanding or speaking English were not included in the survey. Therefore, results from the 2012 APIBRFS may not be a true representation of the entire Asian population in Michigan.



There is large diversity in the Asian American population. Some Asian racial groups are among the most highly educated and wealthiest of all racial/ethnic groups in the state (e.g. Asian Indian, Filipino, Japanese), while other groups, on average, have much less education and are poorer (e.g. Bangladeshi, Hmong, Burmese).²

[†] Asian is defined here by the Census as 'Asian alone or in combination'. For the remainder of the report, Asian is used to refer to respondents that are either Asian American or Native Hawaiian or Other Pacific Islander. All Asian participants were of non-Hispanic origin.

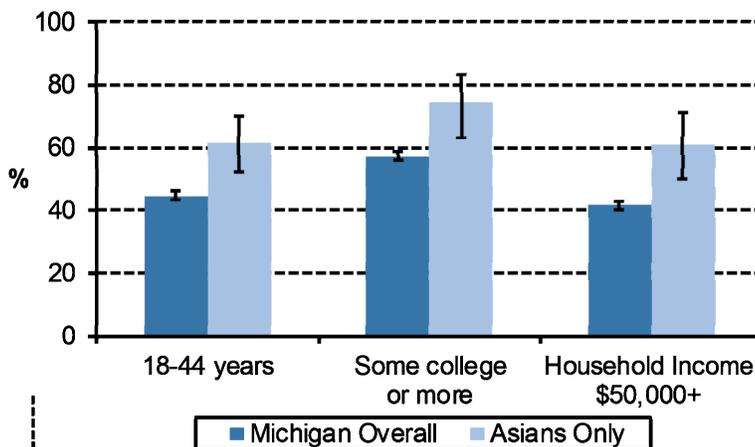
^a For a complete list of health indicators, reference the full report, "Health Risk Behaviors Among Asian/Pacific Islander Adults Within the State of Michigan" at www.michigan.gov/brfs and www.michigan.gov/minorityhealth. All of the estimates reported in the summary are age-adjusted and limited to only indicators with a relative standard error of less than or equal to 30%. ^b BMI: Body Mass Index

The top left photo was acquired from the Public Health Image Library (<http://phil.cdc.gov/Phil/home.asp>), courtesy of the Centers for Disease Control and Prevention/Amanda Mills.

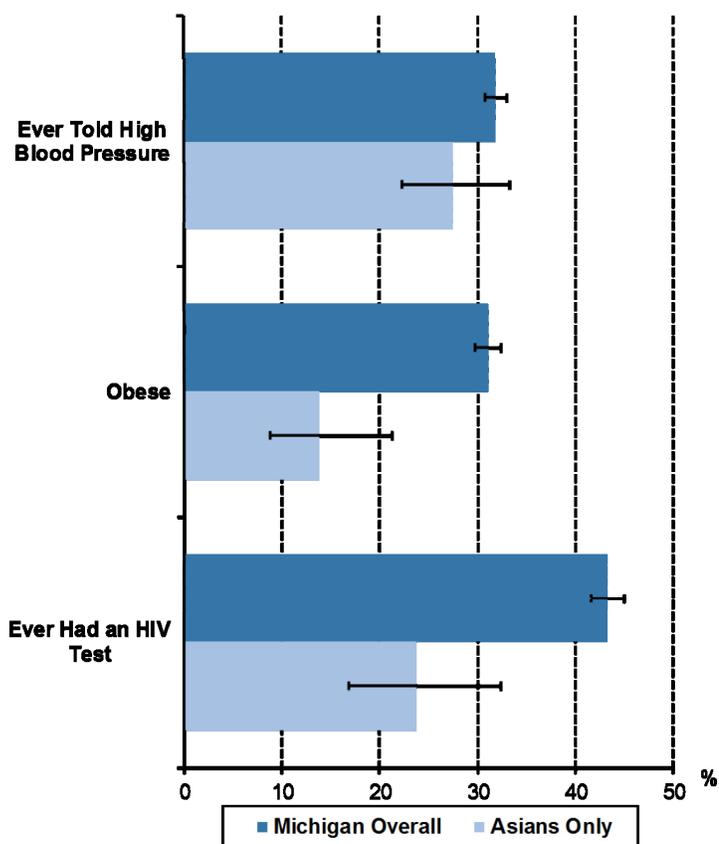


In 2012, a higher proportion of Asian adults in Michigan were between the ages of 18 and 44 years (61.5%), had an education of some college or more (74.4%) and had a household income of \$50,000 or more (61.1%) compared to all Michigan adults (44.6%, 57.2% and 41.8%, respectively). These differences are important to consider since they can influence the occurrence of certain health conditions and related risk factors.³ Therefore, age-adjusted estimates are presented in this report.

**Demographic Comparison,
Michigan Overall vs. Asians Only, 2012**



**Selected Risk Factors,
Michigan Overall vs. Asians Only, 2012**



In 2012,

- A **similar** proportion of Asian adults (27.4%) said that they have been told by a health care provider to have high blood pressure than all Michigan adults (31.8%).
- A **lower** proportion of Asian adults (13.8%) were obese than all Michigan adults (31.1%).
- A **lower** proportion of Asian adults (23.7%) said they had ever had an HIV test than all Michigan adults (43.2%).

The full list of health indicators, survey results, and methods are available in the “Health Risk Behaviors Among Asian/Pacific Islander Adults Within the State of Michigan” report at www.michigan.gov/brrfs and www.michigan.gov/minorityhealth.

Next Steps

- These data provide important information to develop effective and culturally appropriate programs and services for Asians in Michigan.
- Data collection efforts in 2015 will be focused on obtaining data among Asian racial groups who are not well represented by the current 2012 APIBRFS methodology.

References:

1. Hoeffel EM, Rastogi S, Kim MO, Shaid H. 2012. The Asian Population: 2010. 2010 Census Briefs. United States Census Bureau, U.S. Department of Commerce. <http://www.census.gov/prod/cen2010/briefs/c2010br-11.pdf>. (June 2015).
2. U.S. Census Bureau, 2006-2010 American Community Survey. Tables GCT1501 and B19013. Available from: <http://factfinder2.census.gov>. (July 2015).
3. National Research Council (US) Panel on Race, Ethnicity, and Health in Later Life; Anderson NB, Bulatao RA, Cohen B, editors. Critical Perspectives on Racial and Ethnic Differences in Health in Late Life. Washington (DC): National Academies Press (US); 2004. 9, Race/Ethnicity, Socioeconomic Status, and Health. Available from: <http://www.ncbi.nlm.nih.gov/books/NBK25526/>. (June 2015).

Suggested Citation

Hekman K, Fussman C, Lyon-Callo S, Weir S. 2015. Health Status of Asian/Pacific Islander Adults in Michigan. Lansing, MI: Michigan Department of Health and Human Services, Lifecourse Epidemiology and Genomics Division and Health Disparities Reduction and Minority Health Section.