

Japanese CHRNA

(Community Health Resources and Needs Assessment)

Between 2014 and 2015, the Center for the Study of Asian American Health (CSAAH) and community partners including Japanese American Association and Japanese American Social Services, Inc., collected 103 surveys in the Japanese community in New York City. The Japanese community in NYC is focused in Manhattan (52%), Queens (25%), and Brooklyn (19%).¹ The 2010 Census counted 31,742 Japanese in the New York Metro Area and the population has grown 20% from 2000 to 2010. CHRNA survey findings indicate that the majority (92%) of Japanese respondents were foreign-born; 85% of whom were born in Japan. Among the immigrants, 52% have lived in the U.S. for longer than 20 years.

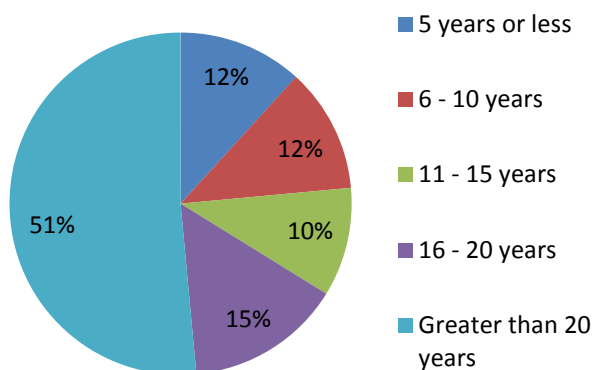
DEMOGRAPHIC INFORMATION

A majority of foreign-born Japanese CHRNA respondents have lived in U.S. for more than two decades. Educational opportunities was the top reason for coming to the U.S.

LOW ENGLISH LANGUAGE PROFICIENCY

- An overwhelming majority (72%) speak English less than “very well”
- 21% speak English “not well” or “not at all”

Years Living in the U.S.

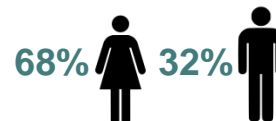


EDUCATION

- 10% have only a high school education
- 20% have some college education
- 69% are college graduates



JAPANESE CHRNA RESPONDENTS were...

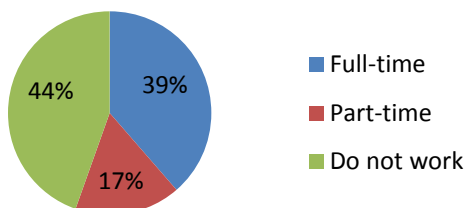


HOUSEHOLD INCOME

- 13% : less than \$25,000
- 17% : between \$25,000 - \$55,000
- 55% : greater than \$55,000
- 17% did not know or declined to answer the question

EMPLOYMENT

66% of participants were working-age adults between 18 to 64 years old.



Of the respondents who do not work, none are retired and 40% are a homemaker.

WORKING HOURS

- Among Japanese respondents who work:
- 13% work < 34 hours per week
 - 47% work 35-40 hours per week
 - 30% work ≥ 40 hours per week

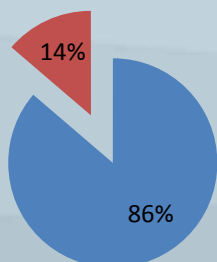
GENERAL HEALTH

PERCEIVED HEALTH STATUS

Japanese CHNRA respondents were asked to rate their health status:

86% describe their health status as **GOOD, VERY GOOD, or EXCELLENT**

14% rated their health as **FAIR or POOR**



DID YOU KNOW?

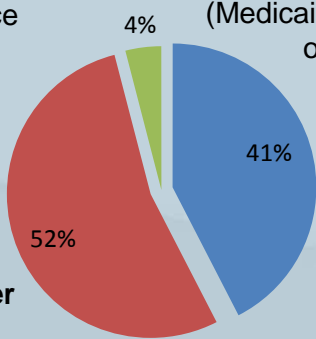
The top health concerns among Japanese CHRNA respondents were:

- ✓ **Cardiovascular disease (40%)**
- ✓ **Cancer (29%)**
- ✓ **Diet or nutrition (28%)**

HEALTH CARE ACCESS

HEALTH INSURANCE COVERAGE

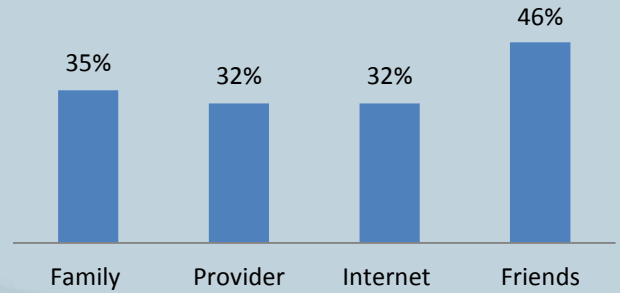
4% do not have health insurance



41% are enrolled in **public or government** insurance coverage (Medicaid, Medicare, other)

HEALTH INFORMATION

The Japanese CHRNA respondents get their health information and hear about services primarily from:



52% have **private or employer** coverage

HEALTH CARE PROVIDERS

• 1 out of 10 do not have a regular health care provider.

Among those with a regular provider:

- 6% to some extent feel that **their doctor looks down on them** and the way they live their life
- 57% **did not understand everything their doctor discussed** with them during their last visit



ROUTINE CHECKUPS



- 73% saw a health care provider for a **routine physical checkup in the past year**, which is below 88% of all New Yorkers overall²

When Japanese CHRNA respondents **feel sick or become injured**:

- 76% **see a private doctor or healthcare provider**
- 4% go to a hospital emergency room

BARRIERS TO HEALTH CARE

24% of Japanese CHRNA respondents reported difficulty obtaining necessary medical care, tests, or treatments in the last year. Reasons given were because of **cost** (22%), **problems with insurance** (22%), or **didn't know where to go to get care** (13%).

OVERWEIGHT/OBESITY

Body mass index (BMI) is a measure of body fat based on height and weight that applies to adult men and women. According to standard BMI measurements, about 13% of Japanese respondents are overweight, with 2% registering as obese. In comparison, 33% of New Yorkers are overweight and 23% are obese.²

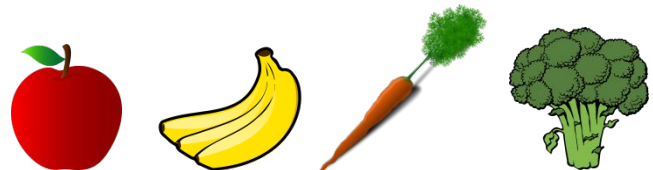
When using Asian BMI standards, the proportions of overweight and obese Japanese respondents shift to 31% and 3%, respectively.



HEALTH PROFILE

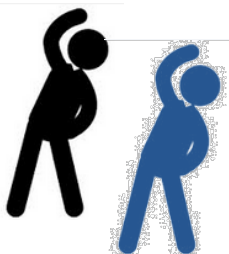
ACCESS TO HEALTHY FOOD

- About 5% of Japanese CHRNA respondents "always" or "usually" **worry about having enough money to buy nutritious meals**
- 31% reported that their homes are a 10-minute-walk or more away from a place to buy fresh fruits and vegetables



PHYSICAL ACTIVITY

Sedentary lifestyle is related to many chronic diseases such as obesity, diabetes, heart diseases, and depression.



- 17% of Japanese respondents **DO NOT** engage in **any** weekly physical activity, compared to 26% of New Yorkers overall²
- About 56% engage in **sufficient weekly physical activity**, compared to 67% of New Yorkers.² Sufficient physical activity means spending >150 minutes per week engaging in moderate physical activity, > 75 minutes a week engaging in vigorous physical activity, or a combination of both

ORAL HEALTH

- 34% of Japanese respondents rate their oral health as “POOR” or “FAIR”
- 76% have received an oral/dental health check-up in the past year

MENTAL HEALTH STATUS

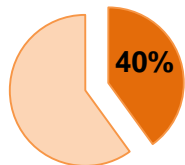
A depression screening was used to determine how respondents would describe their feelings in the past 2 weeks:

3% of respondents may potentially benefit from mental health services, and 13% did not answer the depression risk questions

- However, over 53% of respondents said they had never been screened for depression by a health care provider
 - 7% have been diagnosed with depression

RISK FOR CARDIOVASCULAR DISEASES

High cholesterol levels and high blood pressure are risk factors of cardiovascular diseases (CVD), which can lead to heart disease and stroke.



40% of respondents said CVD is a **major concern** for themselves or for their families

- Over **80%** received a checkup or screening for **cholesterol**, 73% in the last year
- 33% were told they have high cholesterol. In comparison, 30% of New Yorkers were told the same thing by their physicians²
 - 56% of respondents with high cholesterol are currently taking medications for high cholesterol
- 92% of Japanese surveyed received a checkup or screening for **blood pressure**. 81% had their blood pressure checked in the last year
- 23% were told they have high blood pressure, while 29% of New Yorkers were told the same thing by their physicians²
 - 64% of respondents with high blood pressure are currently taking medications for high blood pressure

RISK OF DIABETES

Frequent blood sugar level screenings are important to preventing and controlling diabetes

- 72% have previously received a check-up or screening for **blood glucose** in the past year
- About 13% were told by a health care provider that they have diabetes, slightly more than the 11% of New Yorkers told the same thing²
- About 50% of respondents with diabetes are currently taking medications prescribed by a health care provider

OSTEOPOROSIS

Two risk factors that increase risk of osteoporosis in later life are:

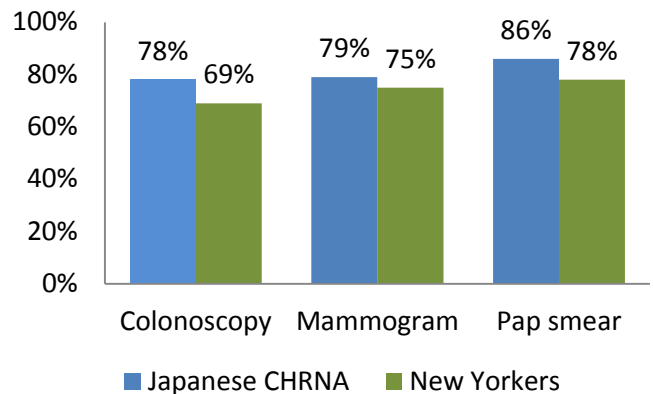
1. Being of Asian descent
2. Being female



Early screenings and intervention help to prevent negative health outcomes such as arthritis and joint injuries.

- 70% of female Japanese CHRNA respondents 65+ years have **received a checkup or screening for bone mineral density** in the past 12 months

COMPARISON OF CANCER SCREENING RATES



- **78%** of Japanese CHRNA respondents 50+ years old have received a **colonoscopy**, while **69%** of New Yorkers 50+ years old received a colonoscopy in the past 10 years⁶
- Approximately **77%** of female Japanese CHRNA respondents 21+ years have had a **clinical breast exam**
- **79%** of female respondents 40+ years have had a **mammogram** in the past 2 years, as compared to **75%** of New York women⁶
- **86%** of female Japanese CHRNA respondents have had a **pap smear** in the past 3 years, as compared to **78%** of New York women⁵
- 71% of male Japanese CHRNA respondents 50+ years have ever received a **prostate exam**

SMOKING



- **4% of Japanese CHRNA respondents are current smokers**, compared to 16% of New Yorkers*
- 7% of men are current smokers; this is much less than the 20% of current male smokers in New York*
- 3% of the women surveyed are current smokers; in comparison, 13% of New York women are current smokers*

ALCOHOL

- About **one third** of all respondents are **current drinkers**
 - Among them, nearly 88% have 1 or 2 drinks on the days they drink
- About 30% of current drinkers have consumed 5 or more drinks at least once in the past 30 days, which is considered binge drinking
 - In comparison, 18% of New Yorkers have had 5 or more drinks at least once in the past 30 days²

TUBERCULOSIS

57% of respondents have previously had a tuberculosis (TB) test.

- None were told by a health care provider that they have the TB infection

HEPATITIS B

Asian Americans are at higher risk for Hepatitis B, but many who are infected do not know it³

- 60% of respondents have previously been screened for hepatitis B
- About 2% of all participants have been diagnosed

SEASONAL FLU VACCINE

- About **51%** of Japanese CHRNA respondents received the flu vaccine in the past year, which is less than the **56%** of all New Yorkers²

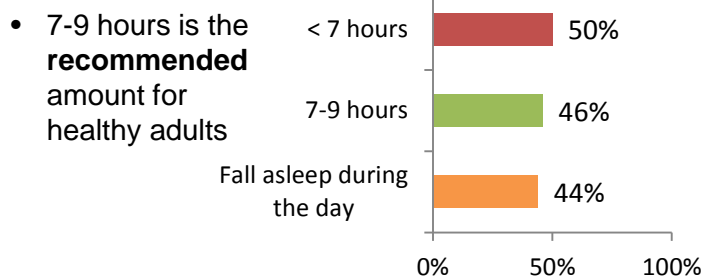
COMPLEMENTARY AND ALTERNATIVE MEDICINE

Japanese CHRNA respondents reported using various types of complementary and alternative medicine to maintain health or treat a health condition

- 21% have used herbal medicine
- 23% have used acupuncture
- 23% have used other CAMs, such as yoga and massage therapy

NOT MEETING SLEEP RECOMMENDATIONS

Sleep supports healthy brain function to ensure good mental and physical health. A lack of adequate sleep can impact how well a person thinks, works, learns, or gets along with others.⁴ Only 46% of Japanese respondents reported getting the recommended number of hours of sleep.



- 82% of respondents self reported that they did not get enough rest or sleep at least once in the past 30 days
- 14% reported taking sleeping pills, other drugs, or alcohol to help them sleep

NEIGHBORHOOD

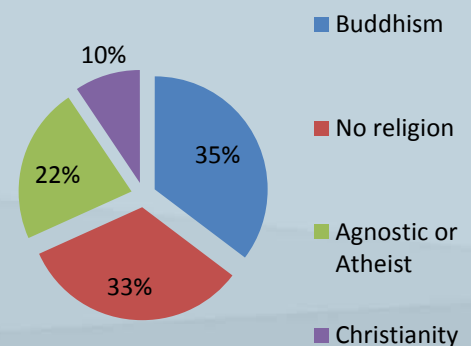


- 73% of Japanese CHRNA Respondents believe people in their neighborhood **are trustful**
- 77% believe people in their neighborhood **get along well together**
- 63% believe their neighbors **look out for each other**
- 70% believe that their neighbors **would offer assistance in the event of an emergency**
- **19%** have been verbally or physically abused, or have had property damaged specifically because of race or ethnicity

SOCIAL ENVIRONMENT

RELIGIOSITY

- Among religious Japanese respondents, 17% worship at least once a week
- 30% pray at least once a day



CONCLUSION

The Japanese CHRNA results indicate that Japanese Americans have healthier behaviors compared to other Asian American subgroups surveyed, including higher rates of certain types of health screenings for cancer and oral health. However, the results reveal that Japanese Americans continue to face health disparities including low levels of English language proficiency, high levels of binge drinking, and high rates of cardiovascular disease related risk factors such as high cholesterol, diabetes, and lack of physical activity.

Health Promotion

Developing community-based health promotion and preventive healthcare in partnerships with Japanese-serving community-based organizations is essential to improving the health and well-being of the Japanese community.

Citations:

1. Asian American Federation, "Asian Americans in NYC, April 2013
2. New York City comparison data derived from the New York City Department of Health and Mental Hygiene's EpiQuery: NYC Interactive Health, 2013 NYC Community Health Survey data at <http://on.nyc.gov/1Cf1RAf>.
3. Center for Disease Control and Prevention. "Asian Americans and Hepatitis B" CDC Features. <http://www.cdc.gov/features/aapihepatitisb/>
4. National Institute of Health. "Why Is Sleep Important?" NHLBI, NIH. <http://1.usa.gov/1zdBlfa>.
5. New York City comparison data derived from New York City Department of Health and Mental Hygiene's EpiQuery: NYC Interactive Health, 2010 Survey Trends data at <http://on.nyc.gov/1AnvDsL>
6. New York City comparison data derived from New York City Department of Health and Mental Hygiene's EpiQuery: NYC Interactive Health, 2012 Survey Trends data at <http://on.nyc.gov/1AnvDsL>

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The mission of the NYU Center for the Study of Asian American Health (CSAAH) is to identify health priorities and reduce health disparities in the Asian American community through research, training and partnership.

For more information about this project, please contact:

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