

CSAAH Publication Community Brief

Sources of Health Information among Select Asian American Immigrant Groups in New York City

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WHAT IS THE PURPOSE OF THIS STUDY?

- To examine and to identify differences in the characteristics associated with the use of health information sources among the Asian American (AA) subgroups. We analyzed data from a foreign-born community sample of 219 Asian Indians, 216 Bangladeshis, 484 Chinese, and 464 Koreans living in New York City.
- To understand the effects of potential factors of health information behavior by these groups, including socioeconomic status, ethnicity, age and gender.

WHAT IS THE PROBLEM?

- Health information can potentially lessen adverse health outcomes among ethnic minority populations, but little research has done to examine how minorities, particularly Asian American immigrants access health information.
- New York City has the largest Asian American population in the US. Although Asian American subgroups in New York City are consist of individuals from over 20 nations, the data on Asian Americans are often broadly grouped together, which masks significant Asian subgroup differences.
- There is a need for greater understanding of health information behaviors broken out by Asian subgroups.

WHAT ARE THE FINDINGS?

- The major health information sources differ among these Asian American subgroups.
 - Printed media source use (i.e. newspapers, magazines and/or journals) was highest among Chinese (84%), Koreans (75%), and Bangladeshis (80%).
 - o Radio was most used by Chinese (48%) and Koreans (38%).
 - Television use was the highest among Bangladeshis (74%) and Koreans (64%).
 - Koreans (52%) and Chinese (40%) were most likely to use the Internet as a health information source.
- Age, gender, English proficiency and education are associated with health information media sources.
 - Age is a significant predictor across media types for Chinese and Koreans. Older Chinese prefer print media while younger ones are more likely to use the Internet. For Koreans, those who



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have lived in the US for more than 10 years have a preference for using the radio, while those who lived in the US for less than 10 years are more likely to use the Internet.

- o Bangladeshi females are more likely to use television as a health information source.
- o Unmarried Asian Indians are more likely to use the Internet as a health information source.
- English proficiency is also a significant marker for media types among Chinese, Korean, and Bangladeshis. Those with limited English proficiency are more likely to use health information sources in their native language. Therefore, native language media sources may be a useful way of spreading health information.
- Health promotion and prevention materials shared in the media should be culturally tailored and must be targeted to each specific AA audience and subgroup.

HOW DOES THIS PUBLICATION ADVANCE SCIENTIFIC RESEARCH?

- This publication initiates data collected and reported on health information behaviors broken out by Asian subgroups.
- Furthering research on culturally tailored health promotion and prevention materials shared in the media to each specific AA audience and subgroup would inform disparities reduction programs and efforts.
- To our knowledge, this is the first study that examined differences in the characteristics associated with health information sources in native language versus factors associated with use of English language health information sources.

WHO SHOULD CARE MOST?

- Researchers and policy-makers interested in developing culture-specific programs for disease prevention and management in minority communities.
- Healthcare facilities, community organizations, researchers, health care providers and policy workers working with AA communities in the United States and the New York metropolitan area.
- Health advocates working in AA communities.

CITATION

Islam, N.S., Patel, S., Wyatt, L.C., Sim, S.C., Mukherjee-Ratnam, R., Chun, K., Desai, B., Tandon, S.D., Trinh-Shevrin, C., Pollack, H. and Kwon, S.C., 2016. Sources of health information among select Asian American immigrant groups in New York City. Health communication, 31(2), pp.207-216. PMC4628554

LINKS

- Pubmed: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4628554/
- CSAAH Community Briefs: http://bit.ly/1kadOSM

Acknowledgements

The NYU Center for the Study of Asian American Health (CSAAH) was established in 2003 and is supported by the NIH National Institute on Minority Health Disparities (NIMHD) cooperative agreement P60 MD000538. The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the agency listed above.