

Office of Health Equity Veterans Health Administration Department of Veterans Affairs



ASIAN AMERICAN VETERANS DISPARITIES INFORMATION BRIEF

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INTRODUCTION

The Veterans Health Administration (VHA) serves an increasingly racially and ethnically diverse Veteran population. Equitable access to high-quality care for all Veterans is a major tenet of the VA healthcare mission. The Office of Health Equity (OHE) champions the elimination of health disparities and achieving health equity for all Veterans.

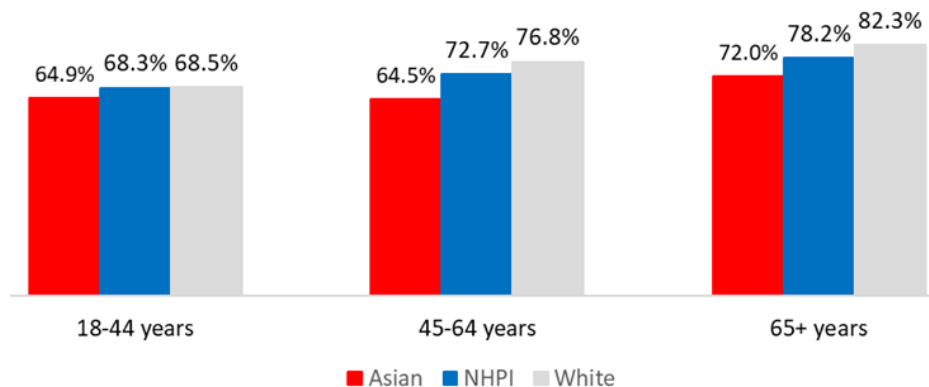
There are an estimated 292,164 Veterans of Asian American, Native Hawaiian, and Pacific Islander (AANHPI) descent. AANHPI Veterans are more likely than Veterans of other racial/ethnic groups to have greater levels of education, income, and use of private health insurance. They report poorer overall mental health, however, and lower use of VA and non-VA mental health services.

Vietnam-era AANHPI Veterans often faced race-related traumas, including racial stigmatization by their comrades-in-arms and being mistaken for “the enemy.” Societal stereotypes of AANHPIs as “model minorities” with few social and psychological issues, however, may lead to their unique needs being unrecognized and understudied.

The VA’s Survey of Health Experience of Patients (SHEP) is used to assess Veterans’ experiences with VA. One measure assessing patient-centricity of Veterans’ care asks, “in the last 6 months, how often did clerks and receptionists at this provider’s office treat you with courtesy and respect?”

In the most recent SHEP survey data, AANHPI Veterans reported feeling that they were treated with courtesy and respect at lower rates than White Veterans. This disparity was especially noticeable for AANHPI Veterans who are aged 45–64 and 65+ compared to White Veterans in the same age groups.

Percent of of Asian American and Native Hawaiian/Pacific Islander Veterans Who Reported Always Being Treated by Staff with Courtesy and Respect



Source: SHEP Survey, FY 2016-2019



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REDUCING DISPARITIES AND IMPROVING ACCESS TO CARE

OHE supports efforts across VHA to reduce health disparities among AANHPI communities, including by providing culturally appropriate care when cultural differences may jeopardize Veterans' engagement in care.

HEALTH DISPARITIES AMONG RURAL AANHPI SUB-POPULATIONS

The VHA provides care in the Pacific Islands across 2.6 million square miles of ocean—nearly the size of the continental U.S. These rural Veterans face barriers to care, including a lack of trained health professionals and the need to travel by air to obtain specialty health care. For these reasons, tele-mental health technology may offer Pacific Island Veterans with post-traumatic stress disorder an alternative to in-person care and enable timely access to mental health treatment.

Rural Pacific Island Veterans can suffer from higher rates of PTSD than their White counterparts and face substantial barriers to accessing mental health care. These include: 1) difficulty navigating the VA system, 2) time associated with receiving care, 3) family stigma, 4) community stigma, 5) cultural differences, and 6) a lack of knowledge about VA services and benefits.

VA mental health providers culturally adapted a cognitive-behavioral clinical intervention that is specific to rural Pacific Island Veterans. This intervention is called “Koa” and is a multi-session family psychoeducational program that integrates selected Pacific Islander values, beliefs, and healing traditions with an empirically based mainstream US intervention.

It was piloted with 28 rural Pacific Island Veterans and their family members. Participants attended the sessions virtually through video teleconference. Participants perceived the intervention to be highly acceptable, useful, and relevant. They also reported that their relationships improved and family caregiving burden also improved significantly. The positive results of this investigation emphasize the importance of developing culturally adapted mental health interventions for culturally distinct subgroups of Veterans and their families.



For more information about the Office of Health Equity visit: <https://www.va.gov/healthequity/>

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