



National Asian Pacific American Women's Forum NAPAWF

1050 17th Street, N.W., Ste 250
Washington, DC 20036
T (202) 293-2688; F (202) 293-4507
www.napawf.org

Reproductive Health Care and APA Women: A Fact Sheet

Although statistics from the U.S. Census Bureau indicate that Asian Pacific Americans (APA) represent one of the fastest growing populations, very few studies have documented the reproductive health care status, needs, practices, and attitudes of APA women, and even fewer studies breakdown health care needs according to the more than 30 diverse ethnic subgroups within the population. The studies that do exist reveal that comprehensive reproductive health care remains a critical issue for APA women.

What Encompasses Reproductive Health Care?

For APA women, reproductive health care includes a broad range of services, such as access to abortion, family planning, counseling, nutrition, pre-natal care, contraceptive options, emergency contraception, sexual freedom, culturally appropriate services, bilingual and interpreter services, health insurance, and preventive care.

Health Disparities

APA women continue to suffer from a number of health disparities:

- Vietnamese American women have the highest rate of cervical cancer than any racial or ethnic group.
- 47% of APA women do not have regular Pap smears.
- APA women born in the U.S. have a 60% higher risk of getting breast cancer than women born in Asia.
- Less than 50% of APA women over age 50 obtain regular mammograms, the lowest for any racial or ethnic group.
- Only 56% of Laotian Americans receive prenatal care, one of the lowest of any racial or ethnic group, increasing the risk of delivering low-birth weight infants and infant mortality.
- While the rate of sexually transmitted diseases is decreasing for the overall population, the rate is increasing for APA women under age 25.

Barriers to Reproductive Health

Lack of health insurance, discrimination, stereotypes of the APA community as the “model minority,” stereotypes of Asian women and sexual behavior, and cultural and language barriers prevent APA women from fully accessing reproductive health care services, resulting in poor health outcomes.

Policies and Practices that Will Improve the Reproductive Health for All APA Women:

Providing Affordable Health Care Coverage

Currently, 36% of APA women under age 65 have no health insurance, and Korean Americans are the most likely to be uninsured of any racial or ethnic group. Additionally, Asian immigrants are concentrated in low-wage jobs, such as garment workers, textile manufacturing, and subsistence fishing that do not provide health coverage. Current immigration laws also prohibit legal immigrants, including pregnant women and children, from receiving health care benefits under Medicaid or the State Children's Health Insurance Program (SCHIP) for five years, creating significant consequences for the APA community. Studies have shown that insurance coverage makes a critical difference in accessing health care, utilizing preventive screenings, and overall health.

Promoting Linguistically Appropriate and Culturally Sensitive Services

Over 60% of the Asian immigrant population is limited English proficient (LEP). According to Census figures, 40% of all APA individuals speak English less than “very well.” As a result, language barriers exist between a LEP patient and his/her doctor creating significant impediments to quality medical care by increasing the risk of misdiagnosis or mistreatment. Additionally, cultural values inhibit discussions about sexual and reproductive health within the APA community, preventing



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many APA women from disclosing intimate details about their sexual history to their doctors or seeking necessary information and services altogether. Finally, Western clinical practices fail to incorporate and provide insurance for traditional non-Western medicines and remedies, many of which are used by APA women.

Supporting Policies that Promote Reproductive Rights and Reproductive Choice

Studies indicate that a majority of APA women identify themselves as “pro-choice,” and support a woman’s right to elect an abortion. Yet, for many low-income uninsured APA women, accessing safe legal abortions remains difficult because, under the 1977 Hyde Amendment, public funding for abortion is available only in situations involving rape, incest, or where the woman’s life is endangered. Reproductive choice also includes knowledge and access to safe and reliable contraceptive services, including emergency contraception. Over two-thirds of APA women are sexually active, yet less than 40% regularly use contraception, increasing their risk of contracting STDs and becoming pregnant. Although the APA community is often viewed as having low teen pregnancy rates, the failure of studies to disaggregate research by subpopulations misrepresents the high incidence of pregnancy among specific APA groups. For instance, Laotian Americans have the highest teen birth rate of any racial or ethnic group in California.

Expanding Research Efforts to Include Data on APA Women

The lack of studies that document the reproductive rights and health care of APA women generally, and by subpopulation specifically, create the misconception that APA women are not as susceptible to illness or disease. Further, this misperception limits the development of public education programs, allocation of public resources

targeted at the APA community, and the ability of health care providers to adequately serve the diverse and unique population of APA women and their families. Developing a database that includes the needs of APA women will not only broaden our understanding about the reproductive health status of this community, but it will also help reduce the number of health disparities and create better health outcomes for all APA women.

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Resources:

Kaiser Family Foundation, Issue Brief: An Update on Women’s Health Policy, (Nov. 2004).
Lora Jo Foo, Asian American Women: Issues, Concerns, and Responsive Human and Civil Rights Advocacy, (2002).
Asians & Pacific Islanders for Reproductive Health, Center for Reproductive Health Research and Policy & National Centers of Excellence in Women’s Health, Teen Pregnancy Among Asians and Pacific Islanders in California: Final Report (2001).
Solutions: Meeting the Challenge of STDs in Asian Americans and Pacific Islanders (2000).
National Asian Women’s Health Organization, A Profile: Cervical Cancer and Asian American Women, (2000).
National Asian Women’s Health Organization, Expanding Options: A Reproductive and Sexual Health Survey of Asian American Women (Jan. 1997).