

Epi Data Brief

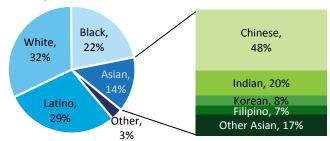
March 2018, No. 100

Health Disparities among Asian New Yorkers

An estimated 1.2 million Asians live in New York City (NYC), representing 14% of the city's overall population. Nationally, Asians are the fastest growing of all major racial/ ethnic groups; in NYC, the Asian population has increased 53% since 2000.² As a group, Asians tend to have more favorable health behaviors and outcomes when compared with the overall population.³ However, Asian New Yorkers are a heterogeneous population, comprised of dozens of different ethnic groups with unique languages and diverse cultures. Additionally, due to differences in immigration patterns and the impacts of colonialism on some Asian countries, sociodemographic characteristics, health behaviors, and health outcomes among different Asian groups may vary substantially. Despite these differences, Asians are frequently viewed and reported on as a homogeneous, monolithic group. Due to limitations in data collection, disparities among Asian ancestry groups are often understudied, preventing us from recognizing and addressing the health needs and challenges faced by underserved Asian ancestry groups. Some Asian groups such as South Asians have higher risk for hypertension, heart disease and diabetes when compared with other Asian groups. ⁵ To better understand the health of Asian New Yorkers, this report highlights differences in health care access, health behaviors, and health outcomes among New Yorkers from different Asian ancestry groups (see definitions box for the Asian ancestry groups in this report).

Characteristics of Asian New Yorkers^A

Racial/ethnic groups and Asian ancestry groups, New York City, 2015

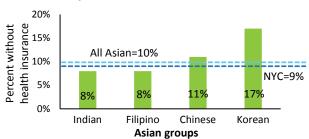


Note: White, Black, Asian/Pacific Islander race categories exclude Latino ethnicity. Latino includes Hispanic or Latino of any race. Other Asian includes Bangladeshi, Pakistani, Nepali and all other Asian ancestries. Source: American Community Survey, 2015

- In 2015, the largest
 Asian group in NYC was
 Chinese (48%), followed
 by Indian (20%), Korean
 (8%), Filipino (7%), and
 Other Asian (17%).
- Chinese New Yorkers were more likely to have limited English proficiency (61%) followed by Koreans (52%), Indians (28%), and Filipinos (19%).

- A larger share of Chinese adults (25 years and older) had attained less than high school education (34%) compared with Indian (21%), Korean (9%), and Filipino adults (5%).
- Among Asian New Yorkers, Koreans were more likely to be uninsured (17%) compared with Chinese (11%), Indian (8%), and Filipino New Yorkers (8%).

Asians without health insurance by ancestry, New York City, 2015



Note: Data are among non-institutionalized, civilian population, including children.

Source: American Community Survey, 2015

Definitions:

Asian is defined based on reported race and ethnicity as Asian/Pacific Islander in the American Community Survey (ACS) and the Community Health Survey (CHS). For the purpose of this publication, Latino includes persons of Hispanic or Latino origin, as identified by the survey questions "Are you Hispanic or Latino?" and regardless or reported race. Black, White, and Asian/Pacific Islander race categories exclude those who identified as Latino. In ACS data, Chinese, Indian, Filipino, and Korean groups are defined based on reported heritage or ancestry, and all other Asian ancestries are combined in Other Asian group. In CHS data, Chinese, Filipino, and Korean heritage or ancestry are selfreported. Indian, Bangladeshi, Pakistani and Nepali ancestries are grouped as South Asian, and Other Asian includes Japanese, Vietnamese and all other responses to Asian ancestry, as well as Pacific Islander.

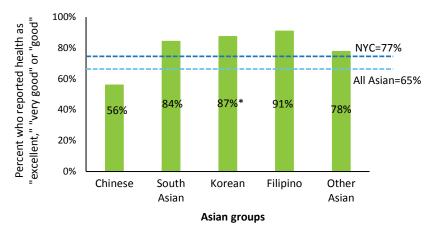
Binge drinking is defined as five drinks or more on one occasion for men and four drinks or more on one occasion for women in the past 30 days.

Overweight/obesity is defined as a body mass index greater than 25, based on self-reported weight and height. Epi Data Brief, No. 100 Page 2

Health behaviors, such as smoking, drinking and exercise varied by Asian ancestry^B

- In 2013-2015, 65% of Asians reported that they were in "excellent," "very good," or "good" health, which was lower than Whites (86%), Blacks (80%), and Latinos (68%). Among Asian groups, Chinese New Yorkers (56%) were least likely to rate their health as "excellent," "very good," or "good" compared with Filipinos (91%), Koreans (87%*), South Asians (Indian, Bangladeshi, Pakistani, or Nepali; 84%), and Other Asians (78%).
- One in three (35%) Chinese adults did not exercise in the past 30 days compared with about one in four Korean (23%), South Asians (22%), and Filipino adults (22%).

Self-reported "excellent," "very good," or "good" health among Asian adults, by ancestry, New York City, 2013-2015



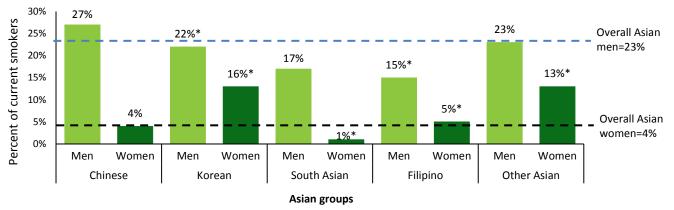
Note: Data are age-adjusted

*Interpret estimate with caution due to small sample size

Source: Community Health Survey, 2013-2015

- Overall, Asians had the lowest prevalence of binge drinking alcohol (10%) compared with other racial/ethnic groups, however the prevalence varied by Asian ancestry. Korean adults were more likely to binge drink (22%) compared with South Asians (13%), Filipino (10%*), and Chinese adults (7%).
- Among the 14% of Asians who were current smokers, men were nearly five times more likely to smoke than women (23% vs. 4%). This difference between men and women was seen among Chinese and South Asians, though not among Koreans, Filipinos, and Other Asians.

Current smokers among Asian adults, by sex and ancestry, New York City, 2013-2015



Note: Data are age-adjusted *Interpret estimate with caution due to small sample size Source: Community Health Survey, 2013-2015

Data Sources:

A. American Community Survey (ACS) 2015 is conducted annually by the U.S. Census Bureau. Selected Population Profile tables (S0201) comparing racial/ethnic groups and Asian ancestry groups were downloaded from American FactFinder. Data for each measure shown are among different populations and age groups.

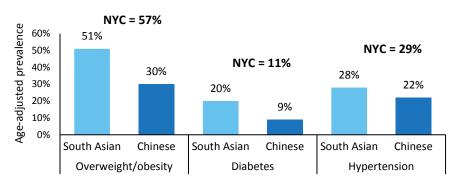
B. New York City Community Health Survey (CHS) 2013-2015 is conducted annually by the Health Department with approximately 9,000 non-institutionalized adults ages 18 and older. Pooled 2013-2015 data presented in this brief are age-adjusted to the US 2000 standard population. The CHS has included adults with landline phones since 2002 and, starting in 2009, has included adults who can be reached by cell phone. *An estimate with an asterisk should be interpreted with caution. Estimate's Relative Standard Error (a measure of estimate precision) is greater than 30%, or the 95% Confidence Interval half-width is greater than 10 or the sample size is too small, making the estimate potentially unreliable. For more survey details, visit nyc.gov/health/survey.

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Compared with Chinese New Yorkers, South Asian New Yorkers were at higher risk for overweight or obesity, hypertension and diabetes^B

- In 2013-2015, more than half of New York adults (57%) were overweight or obese. Among all racial/ethnic groups, Asians had the lowest prevalence of being overweight or obese (36%). However, Asians may be at higher risk of obesity-related diseases, such as diabetes, at lower body mass indices (BMI).⁵ Among Asians, South Asians were more overweight or obese (51%) compared with Koreans (22%*), Chinese (30%), Filipinos (33%*), or Other Asians (41%).
- South Asians were more than twice as likely as Chinese adults to have ever been told by a health care provider that they had diabetes (20% vs. 9%).
- South Asians were also more likely than Chinese and Korean New Yorkers to have ever been told by a health care provider that they had hypertension (28% vs. 22% and 16%).

Overweight/obesity, diabetes and hypertension among Chinese and South Asian adults, New York City, 2013-2015



Note: Data are age-adjusted

Source: Community Health Survey, 2013-2015

One in five Chinese New Yorkers have not used preventive dental services^B

- In 2013-2014, Chinese adults were less likely to have ever had a preventive dental cleaning compared with South Asian, Korean, and other Asian adults (80% vs. 94%, 99%* and 91%*, respectively).
- Chinese adults were less likely to have ever been tested for HIV (34%) compared with South Asians (49%), Filipino (47%*), and Other Asians (46%).
- South Asians were about twice as likely to report not getting needed medical care in the past year (14%) compared with Chinese (8%), Filipino (7%*), and Korean adults (6%*).

Authors: Liza King, Wen Qin Deng

Acknowledgements: Nneka Lundy De La Cruz, Kinjia Hinterland, Amber Seligson Levanon, Sophia Greer, Aldo Crossa References:

1 US Census Bureau/American FactFinder. "S0201: Selected population profile in the US." 2015 American Community Survey. US Census Bureau's American Community Survey Office, 2015. Web 2 February 2017.

2 New York City Department of City Planning Data. Available at: nyc.gov/site/planning/data-maps/nyc-population.page. Accessed May 25, 2017

3 Bloom B, Black LI. Health of non-Hispanic Asian adults: United States, 2010–2014. NCHS data brief, no 247. Hyattsville, MD: National Center for Health Statistics, 2016.

4 Barnes PM, Adams PF, Powell-Griner E. Health Characteristics of the Asian Adult Population: United States, 2004-2006. Adv Data. 2008 Jan 22;(394):1-22.

5 Araneta MR, Kanaya AM, Hsu WC, et al. Optimum BMI cut points to screen Asian Americans for Type 2 Diabetes. Diabetes Care 2015 May;38(5):814-820.

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Epi Data Tables

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Health Disparities among Asian New Yorkers

Data Tables

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- **Table 2.** Health behaviors among Asian adults by heritage or ancestry, New York City, 2013–2015
- Table 3. Health conditions among Asian adults by heritage or ancestry, New York City, 2013–2015
- **Table 4.** Health care utilization among Asian adults by heritage or ancestry, New York City, 2013–2015

Data Sources

American Community Survey (ACS) 2015 is conducted annually by the U.S. Census Bureau. Selected Population Profile tables (S0201) comparing racial/ethnic groups and Asian ancestry groups were downloaded from American FactFinder: https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml.

NYC Community Health Survey (CHS) 2013-2015 is conducted annually by the Health Department with approximately 9,000 non-institutionalized adults ages 18 and older. Pooled 2013-2015 data presented in this brief are age-adjusted to the US 2000 standard population. The CHS has included adults with landline phones since 2002 and, starting in 2009, has included adults who can be reached by cell phone. For more survey details, visit nyc.gov/health/survey.



Table 1. Selected characteristics of some Asian ancestries (Chinese, Indian, Korean, and Filipino)¹, New York City, 2015

Source: American Community Survey, 2015

	Asian Groups	Percent	Lower 95% Confidence Interval	Upper 95% Confidence Interval	p-va	alue
Sex						
Male	Chinese	47.0	46.3	47.7	ref	
	Indian	50.6	49.3	51.9	<0.001	
	Filipino	38.9	36.4	41.4	<0.001	
	Korean	43.9	40.9	46.9	0.047	
Female	Chinese	53.0	52.3	53.7	ref	
	Indian	49.4	48.1	50.7	<0.001	
	Filipino	61.1	58.6	63.6	<0.001	
	Korean	56.1	53.1	59.1	0.047	
lativity						
US-born	Chinese	28.5	27.2	29.7	ref	
	Indian	30.1	27.9	32.4	0.205	
	Filipino	27.4	23.2	31.6	0.632	
	Korean	30.2	27.5	33.0	0.255	
Foreign-born	Chinese	71.5	70.5	72.5	ref	
	Indian	69.9	68.1	71.6	0.105	
	Filipino	72.6	70.0	75.3	0.455	
	Korean	69.8	66.9	72.6	0.255	
ducation ²						
Less than high school	Chinese	34.2	32.5	35.9	ref	
	Indian	21.4	19.3	23.5	<0.001	
	Filipino	4.5	2.6	6.4	<0.001	
	Korean	8.6	6.6	10.6	<0.001	
mployment ³						
Unemployed	Chinese	6.2	5.4	7.0	ref	
	Indian	6.4	5.1	7.7	0.801	
	Filipino	6.2	4.2	8.2	1.000	
	Korean	5.6	3.3	7.9	0.626	
anguage proficiency ⁴						
Speak English less than "very well"	Chinese	60.6	59.1	62.1	ref	
	Indian	27.8	25.3	30.3	<0.001	
	Filipino	19.1	16.1	22.1	<0.001	
	Korean	51.5	47.0	56.0	<0.001	
lealth insurance ⁵						
Uninsured	Chinese	10.7	9.4	12.0	ref	<0.001
	Indian	8.1	6.8	9.4	0.006	<0.001
	Filipino	8.4	6.3	10.5	0.073	<0.001
	Korean	17.1	13.9	20.3	<0.001	ref

Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

^{1.} Asians with mixed race and Asians with Latino ethnicity are not included in the analysis. Asian ancestry groups do not include persons of mixed Asian ancestry.

^{2.} Education attainment is among adults 25 years or older.

^{3.} Employment is among adults 16 years or older.

^{4.} English language proficiency is among persons 5 years or older.

^{5.} Health insurance is among non-institutionalized, civilian population, including children.

Table 2. Health behaviors among Asian adults¹ by heritage or ancestry², New York City, 2013–2015

Source: NYC Community Health Survey, 2013-2015.

2013-2015 combined years analyses are weighted to the NYC adult residential population as per the 2014 American Community Survey.

Data are age adjusted to the 2000 US Standard Population.

	NYC & Asian Groups	Percent	95% CI	P va	llue
Smoking					
Never smoker	NYC Overall	66.0	(65.2-66.7)		
	Chinese	74.4	(71.9 - 76.7)	ref	
	South Asian	74.6	(69.1 - 79.3)	0.946	
	Filipino	70.7 *	(59.2 - 80.0)	0.506	
	Korean	61.1 *	(48.7 - 72.2)	0.033	
	Other Asian	68.8	(60.7 - 75.9)	0.173	
Current smoker	NYC Overall	14.6	(14.0-15.2)		
	Chinese	15.0	(13.2 - 17.0)	ref	0.503
	South Asian	11.4	(8.3 - 15.4)	0.074	0.138
	Filipino	8.7 *	(4.3 - 16.7)	0.045	0.066
	Korean	17.7	(11.3 - 26.6)	0.503	ref
	Other Asian	18.1	(12.1 - 26.3)	0.404	0.933
Former smoker	NYC Overall	19.4	(18.8-20.0)		
	Chinese	10.6	(9.0 - 12.5)	ref	
	South Asian	14.1	(10.3 - 19.0)	0.149	
	Filipino	20.6 *	(12.1 - 33.0)	0.065	
	Korean	21.3 *	(12.4 - 34.0)	0.058	
	Other Asian	13.1	(8.8 - 19.0)	0.372	
Current drinker ³					
Yes	NYC Overall	54.8	(54.0-55.6)		
	Chinese	36.5 ^D	(33.9 - 39.2)	ref	0.001
	South Asian	41.1	(35.6 - 46.9)	0.147	0.014
	Filipino	44.4 *	(33.4 - 56.0)	0.186	0.126
	Korean	57.0 *	(45.5 - 67.8)	0.001	ref
	Other Asian	45.0	(36.9 - 53.4)	0.054	0.094
No	NYC Overall	45.2	(44.4-46.0)		
	Chinese	63.5 ^U	(60.8 - 66.1)	ref	0.001
	South Asian	58.9	(53.1 - 64.4)	0.147	0.014
	Filipino	55.6 *	(44.0 - 66.6)	0.186	0.126
	Korean	43.0 *	(32.2 - 54.5)	0.001	ref
	Other Asian	55.0	(46.6 - 63.1)	0.054	0.094

Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

^{*}Estimate should be interpreted with caution. Estimate's Relative Standard Error (a measure of estimate precision) is greater than 30%, or the 95% Confidence Interval half-width is greater than 10 or the sample size is too small, making the estimate potentially unreliable.

D When reporting to nearest whole percent, round down.

U When reporting to nearest whole percent, round up.

 $^{^{\}mbox{\scriptsize 1.}}$ Asian New Yorkers with Latino ethnicity are not included in the analysis.

^{2.} Asian heritage or ancestry is self-reported and is based on the following question: "Please tell me which group best represents your Asian heritage or ancestry?". The response options are: Chinese, Asian Indian, Filipino, Korean, Japanese, Vietnamese and Something else. Asian Indian, Bangladeshi, Pakistani and Nepali ancestries are grouped as South Asian. Due to small sample size, Japanese, Vietnamese and all other Asian heritage or ancestries are categorized as Other Asian.

^{3.} Current drinker is defined as having consumed at least one alcoholic drink during the past 30 days.

Table 2. Health behaviors among Asian adults¹ by heritage or ancestry², New York City, 2013–2015

Source: NYC Community Health Survey, 2013-2015.

2013-2015 combined years analyses are weighted to the NYC adult residential population as per the 2014 American Community Survey.

Data are age adjusted to the 2000 US Standard Population.

	NYC & Asian Groups	Percer	nt	95% CI	P va	ilue
Heavy drinker ⁴						
Yes	NYC Overall	5.2		(4.8-5.6)		
	Chinese	2.0		(1.3 - 3.2)	ref	0.021
	South Asian	2.9	*	(1.3 - 6.2)	0.500	0.062
	Filipino	۸		۸	^	^
	Korean	8.4	*	(4.4 - 15.5)	0.021	ref
	Other Asian	4.2	*	(1.9 - 9.0)	0.215	0.186
No	NYC Overall	94.8		(94.4-95.2)		
	Chinese	98.0		(96.8 - 98.7)	ref	0.021
	South Asian	97.1	*	(93.8 - 98.7)	0.500	0.062
	Filipino	۸		٨	^	^
	Korean	91.6	*	(84.5 - 95.6)	0.021	ref
	Other Asian	95.8	*	(91.0 - 98.1)	0.215	0.186
Binge drinker ⁵						
Yes	NYC Overall	17.4		(16.7-18.0)		
	Chinese	7.4		(5.9 - 9.1)	ref	< 0.001
	South Asian	13.3		(10.0 - 17.4)	0.004	0.046
	Filipino	9.7	*	(5.0 - 18.2)	0.477	0.017
	Korean	22.4		(15.3 - 31.6)	< 0.001	ref
	Other Asian	16.3		(11.0 - 23.6)	0.006	0.250
No	NYC Overall	82.6		(82.0-83.3)		
	Chinese	92.6		(90.9 - 94.1)	ref	< 0.001
	South Asian	86.7		(82.6 - 90.0)	0.004	0.046
	Filipino	90.3	*	(81.8 - 95.0)	0.477	0.017
	Korean	77.6		(68.4 - 84.7)	< 0.001	ref
	Other Asian	83.7		(76.4 - 89.0)	0.006	0.250

Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

^{*}Estimate should be interpreted with caution. Estimate's Relative Standard Error (a measure of estimate precision) is greater than 30%, or the 95% Confidence Interval half-width is greater than 10 or the sample size is too small, making the estimate potentially unreliable.

[^] Data are suppressed due to imprecise and unreliable estimates.

^{1.} Asian New Yorkers with Latino ethnicity are not included in the analysis.

^{2.} Asian heritage or ancestry is self-reported and is based on the following question: "Please tell me which group best represents your Asian heritage or ancestry?". The response options are: Chinese, Asian Indian, Filipino, Korean, Japanese, Vietnamese and Something else. Asian Indian, Bangladeshi, Pakistani and Nepali ancestries are grouped as South Asian. Due to small sample size, Japanese, Vietnamese and all other Asian heritage or ancestries are categorized as Other Asian.

^{4.} Heavy drinker is defined as having consumed > 2 alcoholic drinks per day for men or consumed > 1 alcoholic drink per day for women during the past 30 days.

^{5.} Binge drinker is defined as having consumed 5 or more alcoholic drinks for men on one occasion and 4 or more alcoholic drinks for women during the past 30 days.

Table 2. Health behaviors among Asian adults¹ by heritage or ancestry², New York City, 2013–2015

Source: NYC Community Health Survey, 2013-2015.

2013-2015 combined years analyses are weighted to the NYC adult residential population as per the 2014 American Community Survey.

Data are age adjusted to the 2000 US Standard Population.

	NYC &	Percent	95% CI	P value	
	Asian Groups				
Exercise in the past 30 days					
Yes	NYC Overall	74.8	(74.1-75.5)		
	Chinese	64.9	(62.2 - 67.4)	ref	
	South Asian	77.6	(72.6 - 81.9)	< 0.001	
	Filipino	78.0	(67.4 - 85.9)	0.008	
	Korean	76.6	(65.8 - 84.8)	0.020	
	Other Asian	71.4	(63.1 - 78.4)	0.116	
No	NYC Overall	25.2	(24.5-25.9)		
	Chinese	35.1	(32.6 - 37.8)	ref	
	South Asian	22.4	(18.1 - 27.4)	< 0.001	
	Filipino	22.0	(14.1 - 32.6)	0.008	
	Korean	23.4	(15.2 - 34.2)	0.020	
	Other Asian	28.6	(21.6 - 36.9)	0.116	
Physical activity ⁶ (2013-2014)					
Inactive/Insufficiently active	NYC Overall	31.7	(30.7 - 32.7)		
	Chinese	40.7	(37.0 - 44.6)	ref	
	South Asian	31.4	(24.6 - 39.2)	0.027	
	Filipino	43.6 *	(32.8 - 55.1)	0.634	
	Korean	24.0 *	(13.8 - 38.3)	0.011	
	Other Asian	43.2 *	(32.7 - 54.3)	0.676	
Sufficiently active	NYC Overall	68.3	(67.3-69.3)		
	Chinese	59.3	(55.4 - 63.0)	ref	
	South Asian	68.6	(60.8 - 75.4)	0.027	
	Filipino	56.4 *	(44.9 - 67.2)	0.634	
	Korean	76.0 *	(61.7 - 86.2)	0.011	
	Other Asian	56.8 *	(45.7 - 67.3)	0.676	

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Bold p-values indicate a statistically significant difference from the reference group.

^{1.} Asian New Yorkers with Latino ethnicity are not included in the analysis.

^{2.} Asian heritage or ancestry is self-reported and is based on the following question: "Please tell me which group best represents your Asian heritage or ancestry?". The response options are: Chinese, Asian Indian, Filipino, Korean, Japanese, Vietnamese and Something else. Asian Indian, Bangladeshi, Pakistani and Nepali ancestries are grouped as South Asian. Due to small sample size, Japanese, Vietnamese and all other Asian heritage or ancestries are categorized as Other Asian.

⁶ The 2008 Physical Activity guidelines for Americans recommends at least 150 minutes of moderate intensity aerobic physical activity or equivalent exercise per week for adults for long term health benefits. Adults who meet the physical activity guidelines are defined as sufficiently active, while those who are inactive or do not meet the physical activity guidelines are considered as inactive/insufficiently active.

Table 3. Health conditions among Asian adults¹ by heritage or ancestry², New York City, 2013–2015

Source: NYC Community Health Survey, 2013-2015.

2013-2015 combined years analyses are weighted to the NYC adult residential population as per the 2014 American Community Survey.

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	NYC & Asian Groups	Percent	95% CI	P va	alue
Self-reported health status					
Excellent/Very good/Good	NYC Overall	77.5 ^D	(76.8-78.1)		
	Chinese	56.0	(53.4 - 58.6)	ref	
	South Asian	84.3	(79.6 - 88.1)	< 0.001	
	Filipino	90.9	(84.7 - 94.8)	< 0.001	
	Korean	87.4 *	(76.5 - 93.6)	< 0.001	
	Other Asian	77.8	(70.0 - 84.0)	< 0.001	
Fair/Poor	NYC Overall	22.5 ^U	(21.9-23.2)		
	Chinese	44.0	(41.4 - 46.6)	ref	
	South Asian	15.7	(11.9 - 20.4)	< 0.001	
	Filipino	9.1	(5.2 - 15.3)	< 0.001	
	Korean	12.6 *	(6.4 - 23.5)	< 0.001	
	Other Asian	22.2	(16.0 - 30.0)	< 0.001	
Body mass index (BMI)					
Normal/underweight (BMI < 25)	NYC Overall	42.7	(41.9-43.6)		
	Chinese	70.2	(67.4 - 72.8)	ref	< 0.001
	South Asian	49.0	(43.5 - 54.5)	< 0.001	ref
	Filipino	66.6 *	(54.7 - 76.7)	0.541	0.006
	Korean	77.7 *	(63.4 - 87.5)	0.234	< 0.001
	Other Asian	59.0	(51.3 - 66.4)	0.007	0.036
Overweight/obese (BMI \geq 25)	NYC Overall	57.3	(56.4-58.1)		
	Chinese	29.8	(27.2 - 32.6)	ref	< 0.001
	South Asian	51.0	(45.5 - 56.5)	< 0.001	ref
	Filipino	33.4 *	(23.3 - 45.3)	0.541	0.006
	Korean	22.3 *	(12.5 - 36.6)	0.234	< 0.001
	Other Asian	41.0	(33.6 - 48.7)	0.007	0.036

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 $^{^{\}mbox{\scriptsize 1.}}$ Asian New Yorkers with Latino ethnicity are not included in the analysis.

^{2.} Asian heritage or ancestry is self-reported and is based on the following question: "Please tell me which group best represents your Asian heritage or ancestry?". The response options are: Chinese, Asian Indian, Filipino, Korean, Japanese, Vietnamese and Something else. Asian Indian, Bangladeshi, Pakistani and Nepali ancestries are grouped as South Asian. Due to small sample size, Japanese, Vietnamese and all other Asian heritage or ancestries are categorized as Other Asian.

Table 3. Health conditions among Asian adults¹ by heritage or ancestry², New York City, 2013–2015

Source: NYC Community Health Survey, 2013-2015.

2013-2015 combined years analyses are weighted to the NYC adult residential population as per the 2014 American Community Survey.

Data are age adjusted to the 2000 US Standard Population.

	NYC & Asian Groups	Percent	95% CI	P va	ılue
Asian modified body mass index ³ (BMI)					
Normal/underweight (BMI < 23)	Chinese	51.3	(48.5 - 54.2)	ref	< 0.001
	South Asian	29.9	(25.0 - 35.3)	< 0.001	ref
	Filipino	49.0 *	(38.6 - 59.5)	0.672	0.002
	Korean	54.7 *	(40.7 - 68.0)	0.642	0.001
	Other Asian	39.1	(31.9 - 46.8)	0.003	0.048
Overweight/obese (BMI ≥ 23)	Chinese	48.7	(45.8 - 51.5)	ref	< 0.001
	South Asian	70.1	(64.7 - 75.0)	< 0.001	ref
	Filipino	51.0 *	(40.5 - 61.4)	0.672	0.002
	Korean	45.3 *	(32.0 - 59.3)	0.642	0.001
	Other Asian	60.9	(53.2 - 68.1)	0.003	0.048
Hypertension					
Yes	NYC Overall	28.6	(28.0-29.2)		
	Chinese	21.5 ^U	(19.6 - 23.6)	ref	0.014
	South Asian	28.0	(23.5 - 33.0)	0.014	ref
	Filipino	31.5 * ^U	(21.2 - 44.0)	0.096	0.580
	Korean	16.2	(8.8 - 27.9)	0.279	0.029
	Other Asian	24.3	(18.3 - 31.6)	0.428	0.383
No	NYC Overall	71.4	(70.8-72.0)		
	Chinese	78.5 ^D	(76.4 - 80.4)	ref	0.014
	South Asian	72.0	(67.0 - 76.5)	0.014	ref
	Filipino	68.5 * ^D	(56.0 - 78.8)	0.096	0.580
	Korean	83.8	(72.1 - 91.2)	0.279	0.029
	Other Asian	75.7	(68.4 - 81.7)	0.428	0.383

Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

^{*}Estimate should be interpreted with caution. Estimate's Relative Standard Error (a measure of estimate precision) is greater than 30%, or the 95% Confidence Interval half-width is greater than 10 or the sample size is too small, making the estimate potentially unreliable.

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^{3.} Asian modified body mass indices (BMI) are designed to account for increased health risk at lower BMIs for those of Asian ancestry. Overweight is defined as 23 ≤ BMI < 25, and obesity is defined as BMI ≥ 25 for Asians.

Table 3. Health conditions among Asian adults¹ by heritage or ancestry², New York City, 2013–2015

Source: NYC Community Health Survey, 2013-2015.

2013-2015 combined years analyses are weighted to the NYC adult residential population as per the 2014 American Community Survey.

Data are age adjusted to the 2000 US Standard Population.

	NYC & Asian Groups	Percent	95% CI	P va	alue
Diabetes					
Yes	NYC Overall	11.1	(10.7-11.6)		
	Chinese	9.1	(7.6 - 10.9)	ref	< 0.001
	South Asian	20.0	(16.1 - 24.7)	< 0.001	ref
	Filipino	13.3	(8.6 - 19.8)	0.160	0.057
	Korean	٨	۸	۸	٨
	Other Asian	15.1	(9.3 - 23.4)	0.103	0.235
No	NYC Overall	88.9	(88.4-89.3)		
	Chinese	90.9	(89.1 - 92.4)	ref	< 0.001
	South Asian	80.0	(75.3 - 83.9)	< 0.001	ref
	Filipino	86.7	(80.2 - 91.4)	0.160	0.057
	Korean	٨	۸	٨	٨
	Other Asian	84.9	(76.6 - 90.7)	0.103	0.235

Confidence Intervals (CIs) are a measure of estimate precision: the wider the CI, the more imprecise the estimate.

[^] Data are suppressed due to imprecise and unreliable estimates.

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Table 4. Health care utilization among Asian adults¹ by heritage or ancestry², New York City, 2013–2015

Source: NYC Community Health Survey, 2013-2015.

2013-2015 combined years analyses are weighted to the NYC adult residential population as per the 2014 American Community Survey.

Data are age adjusted to the 2000 US Standard Population.

	NYC & Asian Groups	Percent	95% CI	P value	
Personal doctor or health c					
Yes	NYC Overall	83.0	(82.4-83.7)		
	Chinese	80.3	(78.0 - 82.5)	ref	
	South Asian	84.6	(79.4 - 88.7)	0.103	
	Filipino	88.4 *	(79.6 - 93.7)	0.028	
	Korean	80.7	(70.8 - 87.9)	0.930	
	Other Asian	84.4	(78.4 - 89.0)	0.165	
No	NYC Overall	17.0	(16.3-17.6)		
	Chinese	19.7	(17.5 - 22.0)	ref	
	South Asian	15.4	(11.3 - 20.6)	0.103	
	Filipino	11.6 *	(6.3 - 20.4)	0.028	
	Korean	19.3	(12.1 - 29.2)	0.930	
	Other Asian	15.6	(11.0 - 21.6)	0.165	
Did not get needed care in	the past 12 months				
Yes	NYC Overall	10.2	(9.7-10.7)		
	Chinese	7.8	(6.4 - 9.5)	ref	0.006
	South Asian	14.1	(10.4 - 18.8)	0.006	ref
	Filipino	6.6 *	(3.2 - 13.1)	0.639	0.020
	Korean	5.8 *	(2.5 - 13.0)	0.433	0.011
	Other Asian	13.3	(7.8 - 21.6)	0.122	0.848
No	NYC Overall	89.8	(89.3-90.3)		
	Chinese	92.2	(90.5 - 93.6)	ref	0.006
	South Asian	85.9	(81.2 - 89.6)	0.006	ref
	Filipino	93.4 *	(86.9 - 96.8)	0.639	0.020
	Korean	94.2 *	(87.0 - 97.5)	0.433	0.011
	Other Asian	86.7	(78.4 - 92.2)	0.122	0.848

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Bold p-values indicate a statistically significant difference from the reference group.

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²· Asian heritage or ancestry is self-reported and is based on the following question: "Please tell me which group best represents your Asian heritage or ancestry?". The response options are: Chinese, Asian Indian, Filipino, Korean, Japanese, Vietnamese and Something else. Asian Indian, Bangladeshi, Pakistani and Nepali ancestries are grouped as South Asian. Due to small sample size, Japanese, Vietnamese and all other Asian heritage or ancestries are categorized as Other Asian.

Table 4. Health care utilization among Asian adults by heritage or ancestry, New York City, 2013–2015

Source: NYC Community Health Survey, 2013-2015.

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	NYC & Asian Groups	Percent	95% CI	P value	
Preventive dental cleaning (2	013-2014)				
Within past 1 year	NYC Overall	60.0	(58.9-61.0)		
	Chinese	43.8	(40.2 - 47.5)	ref	
	South Asian	53.1	(45.8 - 60.2)	0.025	
	Filipino	66.9 *	(54.1 - 77.7)	< 0.001	
	Korean	70.0 *	(56.8 - 80.5)	< 0.001	
	Other Asian	48.5 * ^U	(38.3 - 58.8)	0.403	
1 year ago but	NYC Overall	17.0	(16.2-17.8)		
less than 2 years ago	Chinese	14.9	(12.5 - 17.8)	ref	
	South Asian	22.7	(17.1 - 29.3)	0.023	
	Filipino	23.2 *	(13.9 - 36.1)	0.157	
	Korean	16.1 *	(8.3 - 28.7)	0.831	
	Other Asian	18.3	(12.2 - 26.5)	0.385	
2 or more years ago	NYC Overall	19.3	(18.5-20.1)		
	Chinese	21.4	(18.6 - 24.6)	ref	
	South Asian	18.2	(13.1 - 24.6)	0.319	
	Filipino	9.8 *	(5.3 - 17.7)	0.001	
	Korean	13.2 *	(6.5 - 25.0)	0.088	
	Other Asian	24.7	(16.4 - 35.4)	0.527	
Never	NYC Overall	3.8	(3.4-4.2)		
	Chinese	19.8	(17.0 - 22.9)	ref	
	South Asian	6.1	(3.5 - 10.6)	< 0.001	
	Filipino	0.0 ¶		< 0.001	
	Korean	0.8 *	(0.2 - 3.3)	< 0.001	
	Other Asian	8.5 * ^U	(4.3 - 16.2)	0.001	

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[¶] Estimate should be interpreted with caution. 95% Confidence Interval and Relative Standard Error are not calculated.

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Table 4. Health care utilization among Asian adults by heritage or ancestry, New York City, 2013–2015

Source: NYC Community Health Survey, 2013-2015.

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	NYC &	Percent	95% CI	P value	
	Asian Groups		3370 G.		
Ever tested for HIV					
Yes	NYC Overall	62.6	(61.8-63.4)		
	Chinese	34.5 ^D	(31.9 - 37.2)	ref	
	South Asian	48.8	(43.3 - 54.4)	< 0.001	
	Filipino	46.6 *	(35.7 - 57.8)	0.040	
	Korean	38.6	(29.2 - 48.9)	0.440	
	Other Asian	46.2	(38.2 - 54.4)	0.008	
No	NYC Overall	37.4	(36.6-38.2)		
	Chinese	65.5 ^U	(62.8 - 68.1)	ref	
	South Asian	51.2	(45.6 - 56.7)	< 0.001	
	Filipino	53.4 *	(42.2 - 64.3)	0.040	
	Korean	61.4	(51.1 - 70.8)	0.440	
	Other Asian	53.8	(45.6 - 61.8)	0.008	
lu shot in the past 12 months					
Yes	NYC Overall	42.6	(41.8-43.4)		
	Chinese	43.7	(41.0 - 46.4)	ref	
	South Asian	46.2	(40.6 - 51.9)	0.438	
	Filipino	60.2 *	(48.6 - 70.8)	0.005	
	Korean	36.6 *	(25.5 - 49.2)	0.258	
	Other Asian	43.0	(35.0 - 51.3)	0.874	
No	NYC Overall	57.4	(56.6-58.2)		
	Chinese	56.3	(53.6 - 59.0)	ref	
	South Asian	53.8	(48.1 - 59.4)	0.438	
	Filipino	39.8 *	(29.2 - 51.4)	0.005	
	Korean	63.4 *	(50.8 - 74.5)	0.258	
	Other Asian	57.0	(48.7 - 65.0)	0.874	

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Table 4. Health care utilization among Asian adults by heritage or ancestry, New York City, 2013–2015

Source: NYC Community Health Survey, 2013-2015.

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	NYC & Asian Groups	Percent	95% CI	P value	
Ever had a colonoscopy (ar	nong 50+)				
Yes	NYC Overall	73.1	(72.1-74.2)		
	Chinese	70.3	(66.2 - 74.0)	ref	
	South Asian	65.1	(55.5 - 73.5)	0.303	
	Filipino	68.4 *	(53.6 - 80.3)	0.801	
	Korean	47.8 *	(22.3 - 74.5)	0.132	
	Other Asian	59.1 *	(44.7 - 72.2)	0.136	
No	NYC Overall	26.9	(25.8-27.9)		
	Chinese	29.7	(26.0 - 33.8)	ref	
	South Asian	34.9	(26.5 - 44.5)	0.303	
	Filipino	31.6 *	(19.7 - 46.4)	0.801	
	Korean	52.2 *	(25.5 - 77.7)	0.132	
	Other Asian	40.9 *	(27.8 - 55.3)	0.136	
Colonoscopy within the las	t 10 years (among 50+)				
Yes	NYC Overall	69.4	(68.3 - 70.5)		
	Chinese	69.3	(65.2 - 73.1)	ref	0.054
	South Asian	58.0 *	(46.9 - 68.3)	0.054	ref
	Filipino	64.8 *	(50.1 - 77.1)	0.534	0.448
	Korean	47.8 *	(22.3 - 74.5)	0.150	0.520
	Other Asian	59.1 *	(44.7 - 72.2)	0.173	0.898
No	NYC Overall	30.6	(29.5 - 31.7)		
	Chinese	30.7	(26.9 - 34.8)	ref	0.054
	South Asian	42.0 *	(31.7 - 53.1)	0.054	ref
	Filipino	35.2 *	(22.9 - 49.9)	0.534	0.448
	Korean	52.2 *	(25.5 - 77.7)	0.150	0.520
	Other Asian	40.9 *	(27.8 - 55.3)	0.173	0.898

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