



FOR IMMEDIATE RELEASE: November 18, 2019

Contact: John Kim | jkim@skdknick.com

STATE OF CHINESE HEALTH: FIRST-OF-ITS KIND REPORT AND SURVEY OF HEALTH DISCREPANCIES IN NYC CHINESE COMMUNITIES SHOWS RISE OF IMPERILED CONDITIONS IMPEDING ACCESS TO QUALITY HEALTH CARE

REP. GRACE MENG, ASSEMBLY HEALTH COMMITTEE CHAIR RICHARD GOTTFRIED, COUNCIL MEMBER CARLINA RIVERA, AAF EXECUTIVE DIRECTOR JO-ANN YOO, AND MOCA PRESIDENT NANCY YAO TODAY UNVEILED REPORT AT THE MUSEUM OF CHINESE IN AMERICA

Nearly One Million Chinese New Yorkers Experience Severe Barriers to Care Leading to Lasting Health Problems -- 70% Report at Least One Health Condition; 48% Admit to Smoking; Only 43% Watch Their Diets Carefully

NEW YORK, NY – SOMOS, a New York City-based nonprofit, physician-led network of more than 2,500 health care providers with over 700,000 patients rooted in NYC’s immigrant-rich neighborhoods, joined with Congresswoman Grace Meng, Assembly Health Committee Chair Richard Gottfried, Council Member Carlina Rivera, Asian American Federation Executive Director Jo-Ann Yoo, and MOCA President Nancy Yao today to release a first-ever, city-wide study: State of Chinese Health in New York City (SOCH). Conducted among Chinese physicians and patients across New York City, SOCH details health perception challenges and severe barriers impeding access to care and health education faced by hundreds of thousands of Chinese New Yorkers living largely in poverty. The historic report concludes with solutions based in education and policy to guide health professionals and government leaders towards a healthier future for New York’s rising Chinese population.

State of Chinese Health in New York City combines a city-wide survey and in-depth interviews of Chinese New Yorkers—both of which were conducted in Chinese and English—with extensive conversations with the doctors that serve them to unpack Chinese New Yorkers’ health issues and barriers to care.

“This study gives us an important look into the Chinese community’s state of health in New York City, and shines a light on the challenges and barriers that exist to accessing care,” **said U.S. Rep. Grace Meng (D-Queens)**. “It shows that we must all work together to increase awareness, education, and cultural and language access, so that Chinese New Yorkers can be connected to the health services they need, and I’m committed to doing all I can to make that happen. There must never be barriers to health care. We must ensure that members of the Chinese community receive the care they need; that they lead healthy and thriving lives and contribute the economic growth and success of our nation. I look forward to continuing the discussion and further addressing this issue, and I thank SOMOS Community Care for

conducting this historic study that we hope will lead to improvements in the state of health for all Chinese New Yorkers.”

“The State of Chinese Health in New York City as we approach 2020 is misunderstood, overlooked, and oversimplified,” said **Dr. Henry Chen, SOMOS President**. “The general perception of the Asian population is one of the ‘model minority’ but the majority are average people who don’t receive the attention they deserve. As an immigrant from this community myself – who treats many Chinese patients in my practice – I have seen the harmful health effects of these misperceptions firsthand. But now, with this groundbreaking study, we have identified the biggest health issues plaguing the Chinese community and we hope that this report serves a roadmap to one-by-one, help our population.”

Key findings from *The State of Chinese Health in New York City* include:

- **Chinese New Yorkers are not as healthy as they think they are.**
 - Nearly **80 percent** believe they are in good health and have a healthy lifestyle—and yet **70 percent** report that they have been diagnosed with a health condition.
 - Only **52 percent** say they don’t smoke; only **43 percent** say they watch their diet carefully.
- Communication issues pose an enormous health barrier.
 - Over **60 percent of Chinese New Yorkers have** limited English proficiency but it **goes beyond speaking the same language**. For Chinese New Yorkers, it’s about being health literate with **50 percent** of respondents saying they still don’t understand what their doctors are saying even when the doctors speak Chinese.
 - In-depth interviews of Chinese patients and a focus group with their doctors reveal how cultural misunderstanding often leads to lack of compliance of medical advice, denial of illness, and overall misalignment between doctor and patient.
- Accessibility detractors are **exacerbated** for Chinese New Yorkers and these obstacles often lead to negative emotions and distrust.
 - Respondents included **cost, family support, time off work, and transportation** as top barriers to accessing health care.
 - **55 percent** say the cost of health care stops them from visiting the doctor on a regular basis.
 - **55 percent** say they **need** their children or someone they trust to attend doctor visits with them.
 - **49 percent** say they can’t take time off of work for doctor’s visits.
 - **44 percent** say getting to and from the doctor’s office is difficult.
- Despite being underserved and lacking sufficient culturally-competent health resources, indicators reveal that **ideal health conditions for Chinese New Yorkers is within reach**.
 - **Over 90 percent** have healthcare insurance;
 - **70 percent** have a Chinese-speaking primary doctor;
 - **65 percent** visit their primary care doctors often; and
 - **Over 50 percent** have a positive outlook on the healthcare system.

“For far too long has the numerous health challenges facing the Chinese community have been ignored, and as a result, hundreds of thousands of our neighbors are living with persistent disparities that the current system just isn't addressing,” said **Jo-Ann Yoo, Executive Director of the Asian American Federation**. “I am standing with SOMOS doctors and their patients today to insist that officials take the findings revealed by this report into account when crafting budgets and health policy - including more culturally competent health education and awareness tools and more Chinese community health workers, for starters.”

“Chinese-American New Yorkers face serious language and cultural obstacles to good health care that most New Yorkers don't have and that New York must help to overcome. And they have a problem in common with millions of other New Yorkers: even though 90% of Chinese-American New Yorkers have health coverage, it leaves them with major financial burdens. More than half say the cost of health care prevents them from going to the doctor on a regular basis,” said **Assembly Health Committee Chair Richard N. Gottfried**.

Council Member Peter Koo stated, “The State of Chinese Health study highlights a distressing trend that Chinese New Yorkers are in dire need of more accessible health care and culturally competent services. While health care providers within Chinese communities do exist in the City of New York, it is important to recognize that disparities still exist across the city that prevent Chinese New Yorkers from receiving the care they need. Sharing this report is tremendously helpful in the struggle to dispel the model minority myth and ensure our community is educated and informed about their health and well-being.”

The study also found that an unbalanced regimen of Western and traditional Chinese medicine (TCM) can impede proper care. Often, Chinese patients use traditional Chinese medicine as a workaround—viewing it as an affordable and familiar path to wellness that doesn't run counter to their cultural beliefs or create situations in which they feel misunderstood or humiliated. Many Chinese patients tend to refer to Western and TCM practices equally (**60 percent** practice TCM regularly and **65 percent** visit their primary care doctors often). While this combination can often be beneficial, tradition can at times get in the way of proper medical attention when patients believe they can self-medicate with TCM, do not disclose to their doctors what they do at home, or do not comply with their doctors' recommendations.

The SOCH concludes that increasing the factors that encourage Chinese New Yorkers' use of professional health services can tip the scales from being a community rife with misperceptions and disparities to a model of great health. Such factors are outlined in the study's recommendations. These include:

- **Extend DSRIP and continue building a patient-centric system that lowers costs and fosters better care.** Patients with publicly-funded insurance—which comprise of nearly half of all Chinese New Yorkers—often receive inconsistent care. Fortunately, state-based solutions have started to chip away at this simmering crisis. Under Governor Cuomo's Medicaid Redesign program, a model called Delivery System Reform Incentive Payment (DSRIP) has been transitioning all providers to a value-based-payment paradigm that pays on the basis of overall patient health results. Since its inception, DSRIP has successfully reduced preventable hospital readmissions by 36%, exceeding the five-year goal of 25%; reduced preventable medical emergency room visits by 34%; and decreased preventable behavioral health emergency visits by 47%. We must extend the DSRIP program to ensure our current successes are scalable and sustainable and recommend a two-phased approach tiered into one- and three-year increments. By the state and city working in coordination with local physicians, we can continue innovating and building a patient-centric system that delivers

culturally competent, quality care that lowers costs and fosters better care for our city's most vulnerable populations.

- **Continue building a robust community health worker program.** Chinese-speaking community health workers (CHW) play a vital role in helping Chinese New Yorkers get insured, find their doctors, and get the support they need. Yet these programs are lacking in resources and funds. We need a greater public investment in culturally-competent, in-language fluent community health workers to continue outreach to hard-to-reach, infrequent patients.
- **Firmly establish partnerships with community-based organizations (CBOs) for community outreach.** There is a clear correlation between satisfaction with the healthcare system and having access to established API community-based organizations. Indeed, these groups play an instrumental role in tracking factors that impact patients' mental and physical health—such as housing conditions, employment, and education. Such partnerships need to continue to ensure our collective efforts are productive and deliver the means for our communities to thrive. That is why there must be a greater public investment in and multi-agency support for health care networks and community-based organizations.
- **Create partnerships with Chinese CBOs to improve nutrition in Chinese communities.** To improve health outcomes through nutrition, we must expand the footprint of Community-Supported Agriculture (CSAs) markets, urban rooftop farms, and Farmer's Markets in food deserts where many Chinese New Yorkers reside. While it is critical for local lawmakers and elected leaders to play a role in helping forge these partnerships among Chinese communities across the city, we also need greater collaboration between health care providers and local community groups to expand nutrition programs and increase access to healthy food options for low-income Chinese communities.
- **Increase funding on Chinese focused health education with an emphasis on reaching young people.** Culturally sensitive health education for Chinese New Yorkers can make all the difference. For healthcare providers and staff, this means having a deeper and more empathetic understanding of Chinese culture to better communicate diagnoses, combat persistent stigmas particularly around mental health, and offer useful health information that does not undermine their traditions. However, current systems are lacking. There needs to be a significantly enhanced funding for health education and health literacy not only in-language, but in-dialects that can capture Chinese New Yorkers of all ages—because from smoking cessation, to diet and nutrition to mental health, cultural stigma and lack of awareness run deep and awareness of in-place site crises are low. The city can make an immediate difference, including among the younger generation born in this country.

To learn more about the findings from the study, please visit:
<https://somoscommunitycare.org/soch-english/>

About SOMOS:

SOMOS is a non-profit, physician-led network of nearly 2,500 community health providers, serving nearly a million Medicaid beneficiaries in New York City—200,000 of whom are Chinese. SOMOS launched in 2015 as part of New York State's DSRIP program and is the only physician-led network to be designated as a Value Based Payment Innovator by the New York State Department of Health. SOMOS's

network of providers deliver culturally-competent care to New York City's most vulnerable populations throughout the Bronx, Brooklyn, Manhattan and Queens.