

May 24, 2022



# Advancing Health Equity for Asian and Pacific Islander (AAPI) Communities

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# DISCLAIMER AND FUNDING STATEMENT

- This presentation was supported by the Food and Drug Administration (FDA) of the U.S. Department of Health and Human Services (HHS) Office of Minority Health and Health Equity (OMHHE) as part of a financial assistance award [FAIN] totaling \$500,00 (BAA contract) with 100 percent funded by FDA/HHS.
- The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by FDA/HHS, or the U.S. Government.

# Agenda

- ❑ Introduction
- ❑ Asian Health Disparities during the Pandemic
- ❑ Bridging Gaps: Recruiting African and Asian American Participants in Clinical Trials and Creating Culturally Competent Messages



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## Introduction

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- My research specialties are intercultural communication, new media study and health communication
- My interest to combine the three started in 2011, when I was writing an article about how Chinese cancer patients formed their own social support group on social media.

### Wei Sun

Ph.D. Communication  
and Culture

2002

Faculty



# Health, Health Communication, & Health Disparities

- **Health:** “is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (World Health Organization)
- **Health Communication:** actions to influence and empower individuals, populations, and communities to make healthier choices.  
*“Effective health communication is critical to health and well-being. Healthy People 2030 focuses on improving health communication so that people can easily understand and act on health information” (Healthy People 2030)*
- **Health disparities:** are preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations (CDC)

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# Asian American Health Disparities

- Health disparities are gaps in the quality of health and health care that mirror differences in socioeconomic status, racial and ethnic background, and education level
- Nearly 17.3 million Asian Americans and Pacific Islanders reside in the United States, and about 64% of them are employed and have job-related health insurance coverage. 57% of Asians were born in a foreign country.



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## Asian American Lived Experiences of Social Stigma During COVID-19

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**Principal Investigator Dr. Monica Ponder,**  
Assistant Professor at Howard University.

CDC Foundation funded research, Project ReFocus Phase 1.

- One area of the project examined 5 minority groups' social stigma during COVID-19.
- It has been well documented that Asian Americans have experienced increased social stigmatization related to COVID-19



## Asian American Experiences during COVID- 19-*continued*

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- Stigma has negative social and health impacts on minority communities, such as labeling, avoiding, shame, disgust, and social exclusion. The health impacts include both physical and mental illness, and the acceleration of health disparities. This study seeks to understand these lived experiences and subsequent coping strategies.
- The findings reveal that stigmatized behavior and attitudes of others did not stop Asian Americans from following the COVID-19 related health guidelines, because perceived health threats were high.
- Consumer behaviors of Asian Americans also changed dramatically towards buying almost everything online (for the sake of the pandemic and personal safety).
- This behavioral decisioning provides insights into the complex motivations for adopting health behaviors, and, in this case, social distancing was preferred not only to avoid people, but also due to fear of becoming victims of stigmatization in public areas.



# Asian Health Disparities during the Pandemic

- During the pandemic, historically underrepresented and ethnic minority communities have been disproportionately impacted by the COVID-19.
- According to an AAPI research in 2020, there is a 35% increase in deaths, or, 13,620 more Asian Americans died during the first year of the pandemic, compared to the previous 5 years' average.
- According to CDC's statistics of April 29, 2022, Asian non-Hispanic COVID-19 cases, hospitalization and death rates are 0.7 and 0.8 times more than White Americans.
- It is important to raise awareness, empower the AAPI community, for reducing/closing the health disparity gap.

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# **Bridging Gaps: Recruiting African and Asian American Participants in Clinical Trials and Creating Culturally Competent Messages**

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Ongoing Project in collaboration with the FDA Office of Minority Health and Health Equity

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## **Howard University Team**

Dr. Wei Sun (**Principal Investigator**)

Dr. Monica Ponder (**Co-Principal Investigator**)

Dr. Shoaab Almalki (**Postdoctoral Fellow**)

Bryan M. Jenkins & Kapriatta Jenkins (**Doctoral Students** Work on the Project in Summer)

## **Communication and Culture Consulting, LLC. Team:**

Dr. Donna Oti

Dr. Eleana Lazarus

Dr. Tracy Chung

## Research Background

- Clinical trials with homogeneous participants limit researchers' ability to generalize findings to heterogeneous populations.
- Participants in clinical trials should be a reflection of the U.S. and the individuals who may one day need to rely on these drugs, vaccines or devices to manage chronic, life-threatening illnesses.
- Throughout the COVID-19 pandemic underserved populations, such as racial and ethnic minorities, were disproportionately impacted by illness, death, and devastation. Ensuring people from diverse backgrounds have the ability to participate in clinical trials is key to advancing health equity



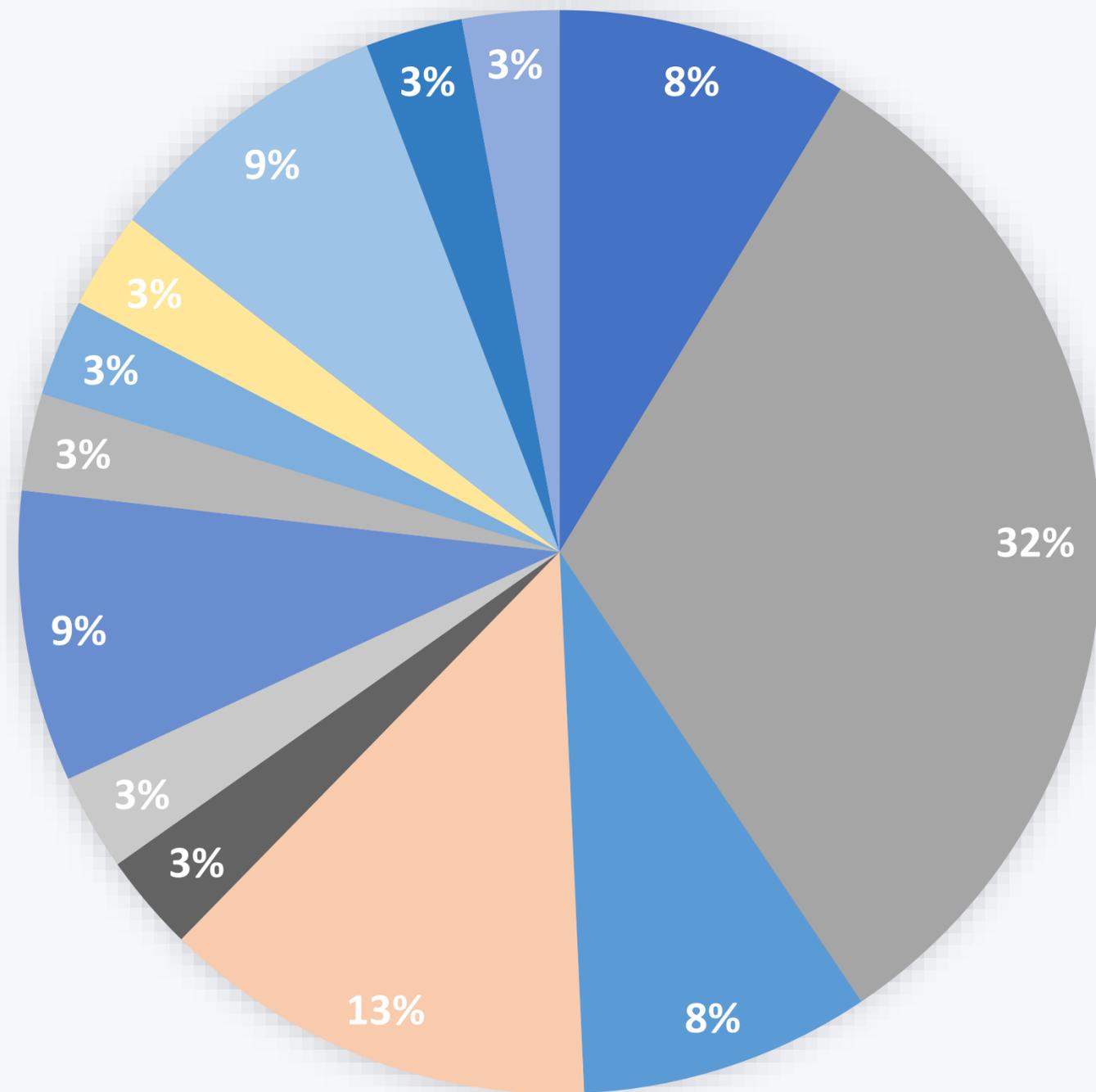
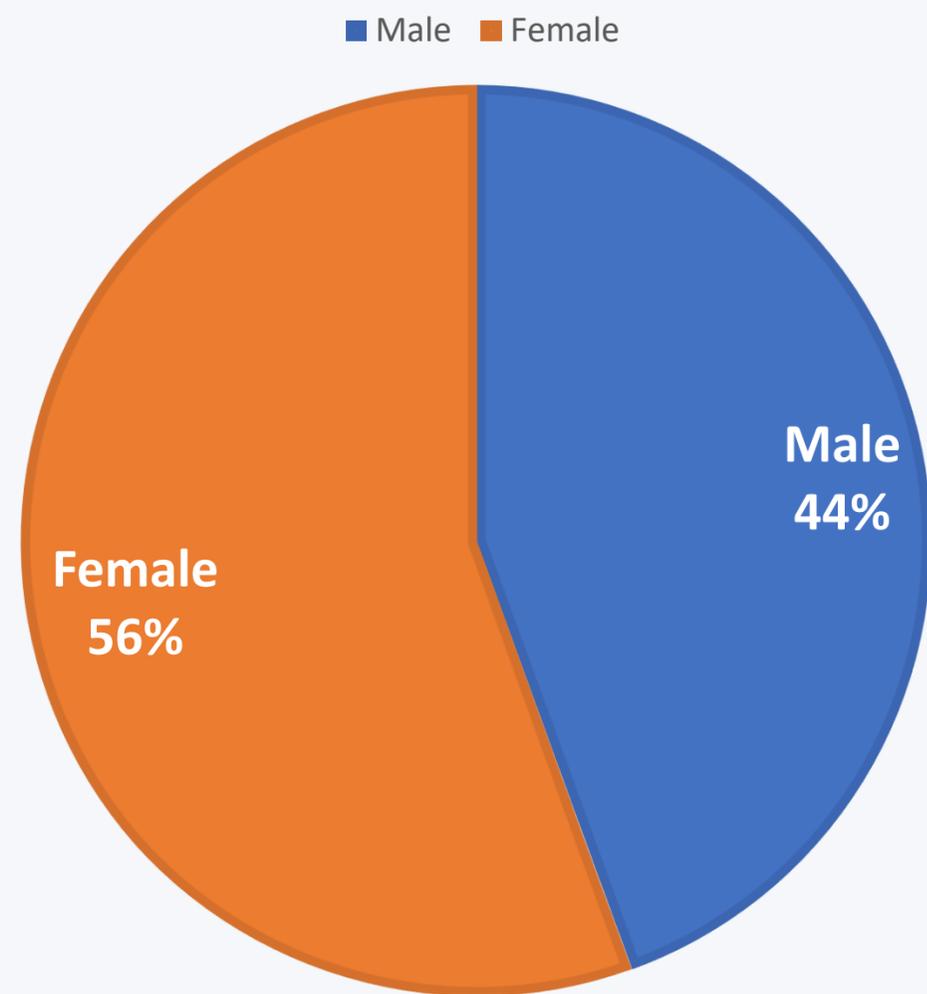
## Objectives

1. Investigate Asian American perceptions of clinical trials and barriers to participation.
2. Test strategies to increase knowledge and encourage participation in clinical trials.
3. Design effective communication messages to increase participation in clinical trials.

## Demographics Overview

Population	Number of Focus Groups Conducted	Number of Participants
Asian American	5	36

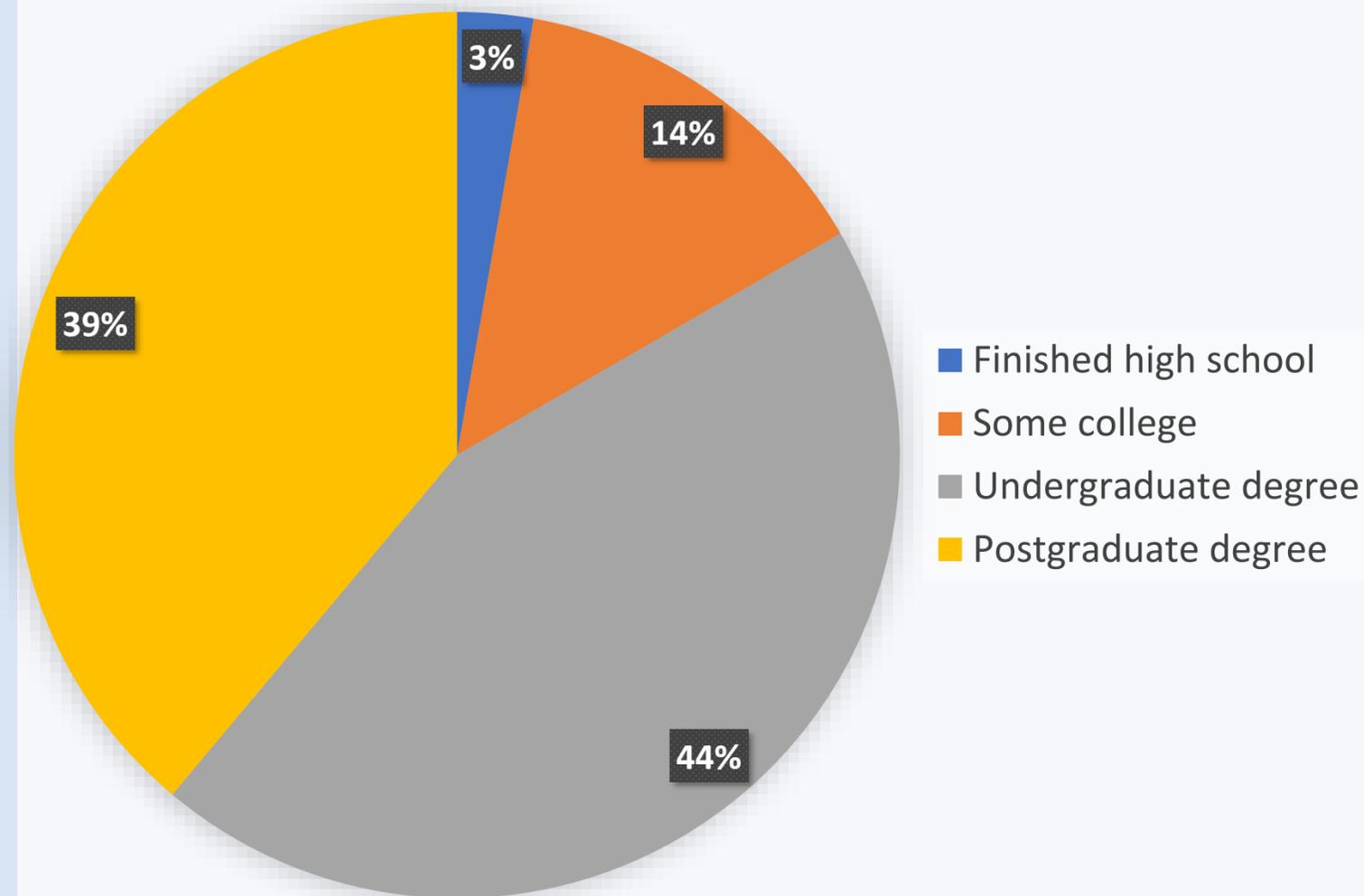
# Asian Focus Groups Demographics (1 of 2)



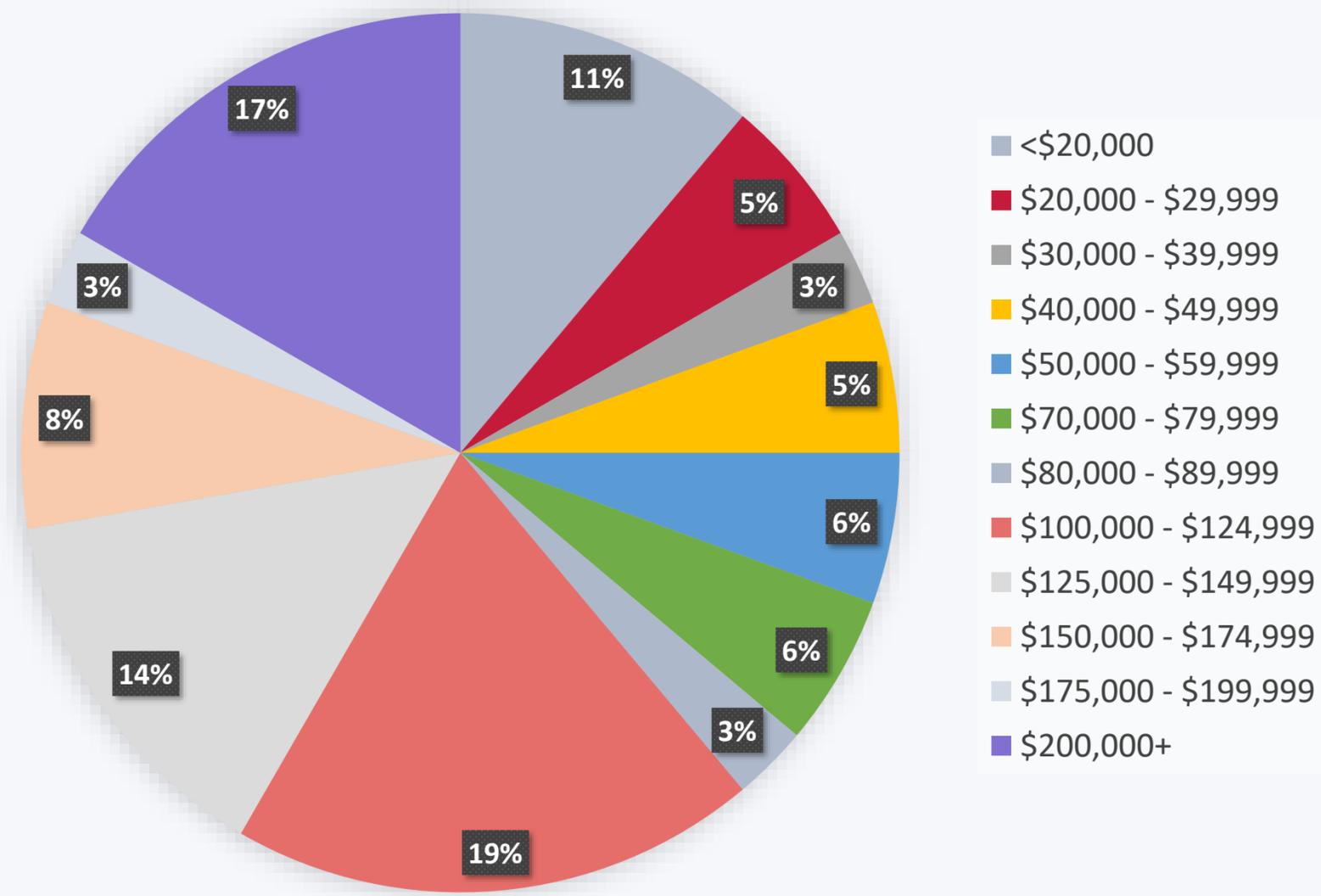
- Filipino American
- Indian American
- Korean
- Vietnamese
- South Indian
- Indonesian
- Chinese
- Pacific Islander
- Malaysian
- Laotian
- Hawaiian
- Japanese American
- Taiwanese American

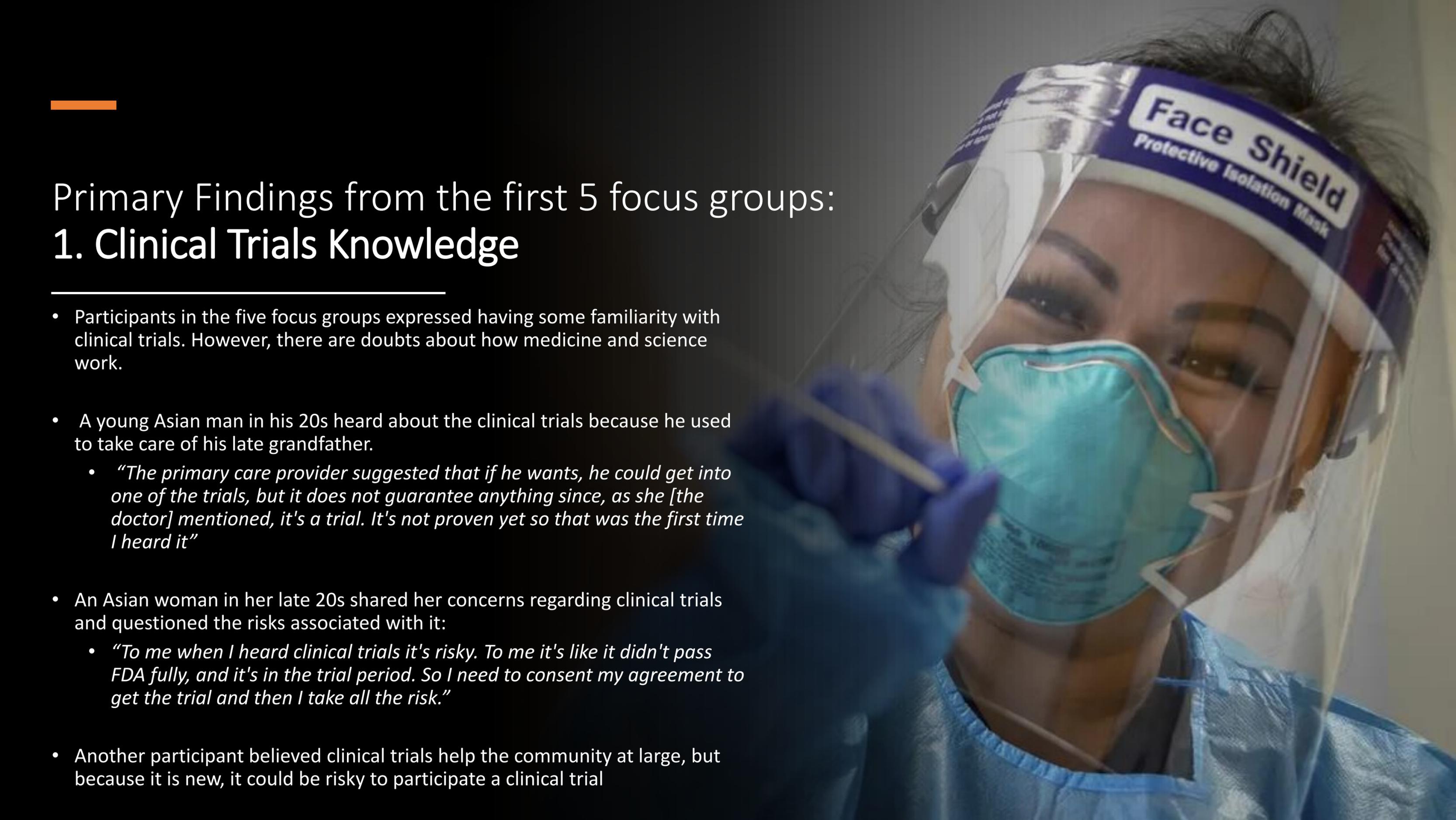
# Asian Focus Groups Demographics (2 of 2)

## Level of Education



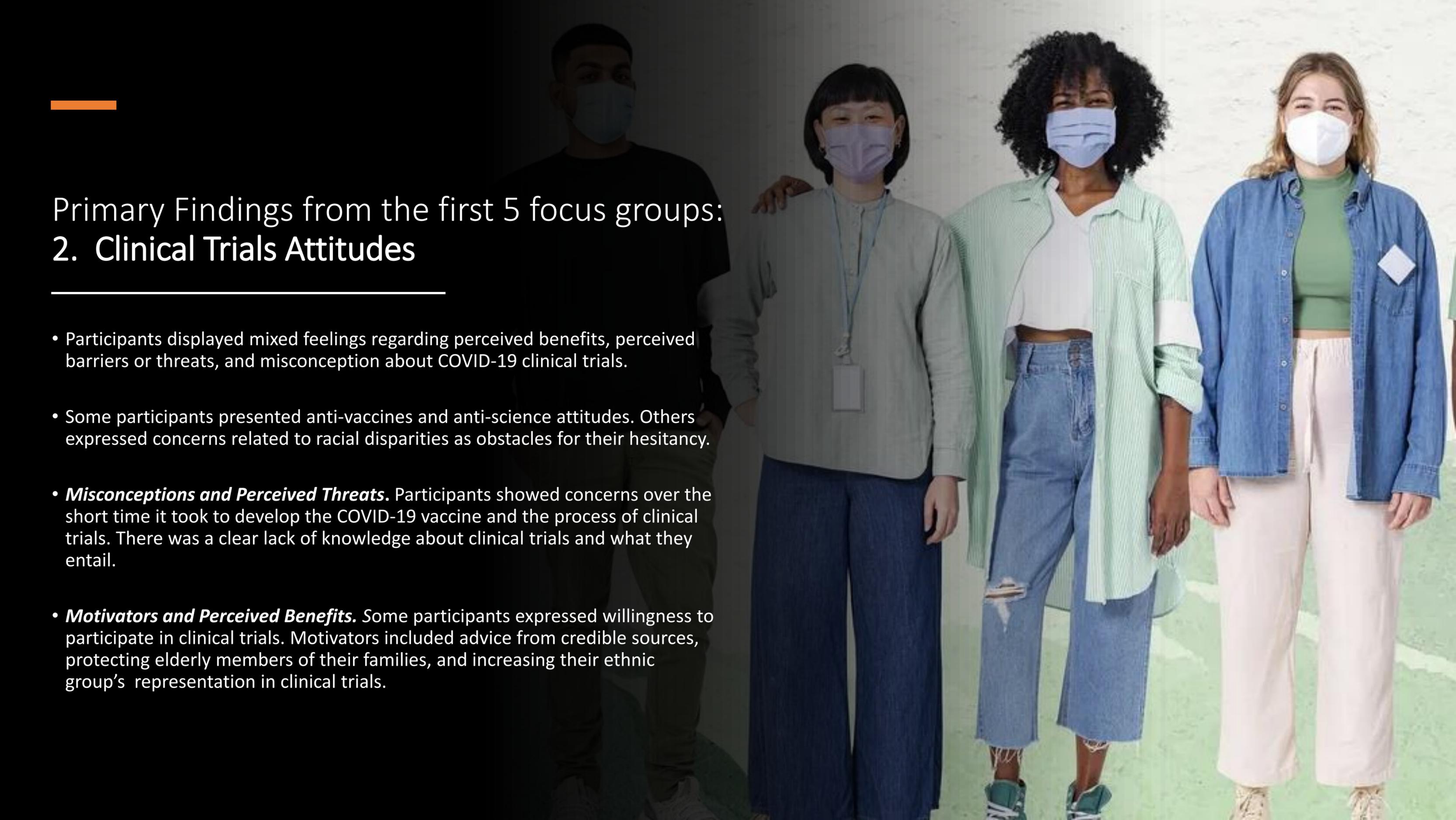
## Household Income



A close-up photograph of a healthcare worker wearing full personal protective equipment (PPE). The worker is wearing a blue surgical cap, a clear face shield with a purple headband that says "Face Shield" and "Protective Isolation Mask", a light blue surgical mask, and blue nitrile gloves. The worker is holding a wooden swab stick. The background is a plain, light-colored wall.

## Primary Findings from the first 5 focus groups: 1. Clinical Trials Knowledge

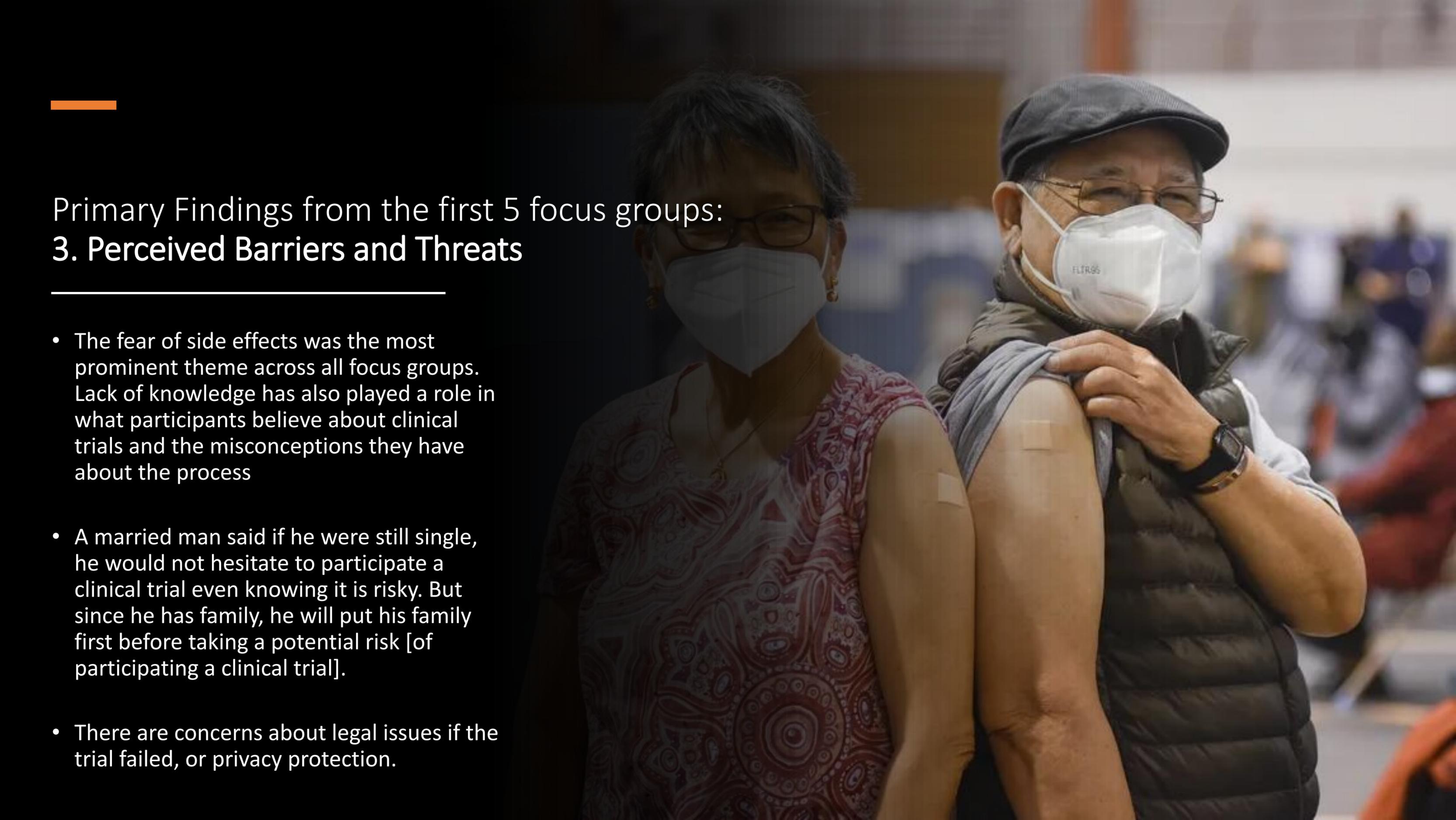
- Participants in the five focus groups expressed having some familiarity with clinical trials. However, there are doubts about how medicine and science work.
- A young Asian man in his 20s heard about the clinical trials because he used to take care of his late grandfather.
  - *“The primary care provider suggested that if he wants, he could get into one of the trials, but it does not guarantee anything since, as she [the doctor] mentioned, it's a trial. It's not proven yet so that was the first time I heard it”*
- An Asian woman in her late 20s shared her concerns regarding clinical trials and questioned the risks associated with it:
  - *“To me when I heard clinical trials it's risky. To me it's like it didn't pass FDA fully, and it's in the trial period. So I need to consent my agreement to get the trial and then I take all the risk.”*
- Another participant believed clinical trials help the community at large, but because it is new, it could be risky to participate a clinical trial



## Primary Findings from the first 5 focus groups: 2. Clinical Trials Attitudes

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- Participants displayed mixed feelings regarding perceived benefits, perceived barriers or threats, and misconception about COVID-19 clinical trials.
- Some participants presented anti-vaccines and anti-science attitudes. Others expressed concerns related to racial disparities as obstacles for their hesitancy.
- **Misconceptions and Perceived Threats.** Participants showed concerns over the short time it took to develop the COVID-19 vaccine and the process of clinical trials. There was a clear lack of knowledge about clinical trials and what they entail.
- **Motivators and Perceived Benefits.** Some participants expressed willingness to participate in clinical trials. Motivators included advice from credible sources, protecting elderly members of their families, and increasing their ethnic group's representation in clinical trials.

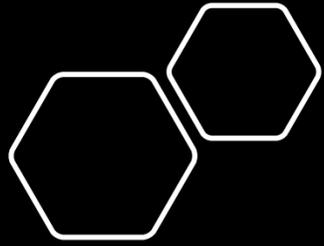


Primary Findings from the first 5 focus groups:

### 3. Perceived Barriers and Threats

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- The fear of side effects was the most prominent theme across all focus groups. Lack of knowledge has also played a role in what participants believe about clinical trials and the misconceptions they have about the process
- A married man said if he were still single, he would not hesitate to participate a clinical trial even knowing it is risky. But since he has family, he will put his family first before taking a potential risk [of participating a clinical trial].
- There are concerns about legal issues if the trial failed, or privacy protection.



# Major observations

Population believes they are socially responsible and self-reliant

Messages that emphasize social responsibility and the ability to help others resonate

Perception of low impact on Asian American community conflicts with data

Best results by targeting second and third-generation Asian Americans

Highly educated group – physician spouse enrolled their children in COVID-19 vaccine trials

Distinct differences between highly and less educated participants in terms of perceptions of Western medicine.

Several scientists in focus groups

# To advance health equity

- Individual
- Community leaders
- Researchers/educators
- Medical professionals
- Governmental agencies



# Selective References

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