

## COMMUNITY HIGHLIGHTS

### Racial Equity Approaches to the Social Determinants of Health for Asian American, Native Hawaiian, and Pacific Islander Communities

#### ABSTRACT

This report outlines racial equity approaches and strategies that address social determinants of health for Asian American, Native Hawaiian, and Pacific Islander (AANHPI) communities and introduces the Community Highlights series. The **Community Highlights** series presents three AANHPI-serving community based organizations that address their populations' needs with racial equity strategies. Each Highlight describes an organization and the communities it serves and connects the communities' needs to social determinants of health and themes from the racial equity framework. Read the summaries below and follow the links to learn more about community approaches to social determinants of health.

#### Racial Equity Approaches to the Social Determinants of Health for AANHPI Communities

Public health professionals have long acknowledged that social determinants, such as economic stability, education, social and community context, the built environment, and access to healthcare, impact the health of individuals and communities (See [HealthyPeople2020 website](#)). Community based organizations can support the health outcomes of the communities they serve when they provide services that address social determinants of health. This is especially important for Asian American, Native Hawaiian, and Pacific Islander community based organizations, many of whom operate in regions where their communities are small and geographically isolated. AANHPI community members rely on these one-stop shop organizations for services that are tailored to their unique cultural needs and address multiple social determinants of health.

The "[Asian American, Native Hawaiian, and Pacific Islander Racial Equity Framework](#)" serves as a theory of change that illustrates unique AANHPI experiences and strategies that advance long-term equity outcomes. The framework was born out of a two-year Racial Equity Initiative, facilitated by the Asian & Pacific Islander American Health Forum (APIAHF) and evaluated by Social Policy Research Associates (SPR). APIAHF and SPR engaged twenty-six community based organization partners from five different regions – California, Hawaii, Michigan, Mississippi, and New Orleans. Regional groups worked together to advance policy, systems, and environmental changes that address racial inequities facing their respective AANHPI communities. Although the framework does not represent the entirety of the AANHPI experience, it is an excellent starting point for communities, AANHPI groups, non-AANHPI racial equity allies, and racial equity funders who want to achieve equitable outcomes for AANHPI children and families. The racial equity framework also helps illustrate the contexts, strategies, and outcomes CBOs are working within and implementing in their racial equity work through the SDoH services they provide.

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## AANHPI Racial Equity Framework Strategies

- **Raise Visibility of Our Communities & Our Issues:** Raise visibility by telling the community story through research, data, story, and art.
- **Incorporate Culture:** Incorporate the foundational elements of culture by weaving AANHPI history and tradition into programming; including both language access and language preservation.
- **Build Capacity for Change:** Build capacity for change through translation of public meetings and materials, civic education to inform communities about their rights, how to access resources, and how to become politically engaged.
- **Foster Interconnectedness & Shared Ownership:** Foster interconnectedness and shared ownership through a sense of collective identity within AANHPI ethnic groups and with other communities of color.
- **Foster Community Self-Determination:** Rather than focus on access to resources and opportunities, reframe on fostering an understanding of the community's role in shaping these resources and opportunities.
- **Break the Silence & Reclaim Our Narrative:** Prioritize identity exploration as a key strategy for addressing these painful realities, breaking the silence, and reclaiming narratives; focus attention on exploring not only cultural aspects that make AANHPI communities powerful, but also name, acknowledge, and address the negative stereotypes that cause psychological harm and limit opportunities.

## Community Highlights

The Community Highlights series presents three AANHPI-serving community based organizations that address their populations' needs with racial equity strategies. Each Highlight describes an organization and the communities it serves and connects the communities' needs to social determinants of health and themes from the racial equity framework.

The [Asian Pacific American Network of Oregon \(APANO\) Community Highlight](#) discusses APANO's efforts to improve housing quality and stability for residents in the Jade District of Portland, Oregon. The majority foreign-born, low-income Asian Americans living in the Jade District face higher housing costs than residents in other parts of the city. APANO uses their community organizing and empowerment framework to address these housing challenges by ensuring affordable housing is developed in the area, organizing tenants to advocate for their rights, and facilitating the preference of qualified Jade District residents for available affordable housing options.

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## **Social Determinant of Health:** Housing

### **Racial Equity Framework Strategies:**

- 1) *Building the capacity* of Jade District residents to advocate for change,
- 2) *Cultivating the interconnectedness* of Asian American Jade District residents toward a sense of shared ownership of their neighborhood, and
- 3) *Fostering residents' sense of self-determination* by empowering them to learn about and advocate for their rights.

Click [here](#) to learn about housing instability as a social determinant of health, and [here](#) to learn about housing quality as a social determinant of health.

**The [Center for Pan Asian Community Services \(CPACS\) Community Highlight](#)** discusses CPACS's efforts to fulfill the transportation needs of immigrant and refugee communities who rely on regional transit to access employment opportunities. CPACS is located in the Atlanta, GA area and serves a majority Limited English Proficient (LEP) Asian community, many of whom are low-income. CPACS learned that many of their clients were unable to access regional transportation resources because the transportation resources lacked language assistance for LEP users. Lack of transportation then became a barrier to employment access. With support from the Atlanta Regional Commission, CPACS designed a transportation system for their clients that was language-accessible and transported clients to their primary employment hubs.

## **Social Determinant of Health:** Transportation & Economic Stability

### **Racial Equity Framework Strategies:**

- 1) *Incorporating language access* into a transportation system,
- 2) *Building the capacity* of riders to locate employment, and
- 3) *Supporting community members' self-determination*.

Click [here](#) to learn more about employment as a social determinant of health and [here](#) to learn about poverty as a social determinant of health.

Click [here](#) to learn how transportation impacts health when it is a barrier to employment.

**The [Asian Services in Action \(ASIA\) Community Highlight](#)** discusses how ASIA grew and adapted to address the health care access and primary care needs of the immigrant and refugee populations they serve in Ohio. ASIA began as a small social services organization and expanded as the needs of the AAPI communities in their area grew. In 2006, ASIA opened two AAPI-serving federally qualified health centers because the primarily Asian immigrant and refugee populations in the area were unable to access in-language, culturally-informed health care.

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## **Social Determinants of Health:** Access to Primary Care & Health

### Services **Racial Equity Framework Strategies:**

- 1) *Raising the visibility* of culture for their clients,
- 2) *Incorporating culture* into the delivery of health care services, and
- 3) *Enhancing the ability of their clients to achieve self-determination* by providing accessible and needed health care.

Click [here](#) to learn more about access to health services as a social determinant of health and [here](#) to learn about primary care as a social determinant of health.

## **Lessons Learned**

Several themes emerged across the three Community Highlights. Familiar to many AANHPI-serving CBOs, the themes include:

- 1) **Disaggregate AANHPI data to illuminate disparities.** It is difficult for community based organizations to document their clients' needs and obtain necessary resources when they cannot show the disparities their clients experience.
- 2) **Ensure language access in all services and client interactions.** All CBOs emphasized the importance of ensuring language access in all steps of a client's interaction with an organization: from advertising and making appointments to facilitating transportation. Furthermore, CBOs recommended ensuring language access through onsite personnel instead of language translation phone lines.
- 3) **Address clients' multifaceted needs.** Although each **Community Highlight** focuses on one primary social determinant of health, these community based organizations provide services that address multiple social determinants of their clients' health. Just as people's identities and experiences are intersectional – incorporating race, gender, age, income, and ability – the social determinants of health are intersectional and influence the opportunities and barriers people face in multiple, layered ways.

Contact the Asian & Pacific Islander American Health Forum to learn more about our capacity building training opportunities and similar efforts in support of AANHPI communities in your area. APIAHF is the largest and oldest national public health and policy organization working with Asian American, Native Hawaiian, and Pacific Islander communities across the nation. APIAHF works with over 100 AANHPI-serving CBOs across 34 states in the U.S. APIAHF envisions a world where all people share responsibility and take action to ensure healthy and vibrant communities for current and future generations.