



## **ASIAN AMERICAN ACCOMPLISHMENTS**

**APRIL 2008**

**MARYLAND CIGARETTE RESTITUTION FUND  
TOBACCO USE PREVENTION AND CESSATION PROGRAM  
LOCAL PUBLIC HEALTH COMPONENT**

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## **INTRODUCTION**

Minority outreach is paramount in eliminating tobacco related health disparities that exist in minority communities around Maryland. Minority participation in local community health coalitions is intended to enhance the efforts of local health departments to decrease tobacco and cancer related deaths and illness as well as prevent the initiation of tobacco use.

The Asian American population has been growing rapidly in the U.S. and is estimated to reach 10 percent of the total population by the year 2050. According to U.S. Census Bureau estimates, there are currently 13,159,343 Asian Americans in the United States. In Maryland, the Asian American population is 277,697 or almost 5 percent of the total state population, as shown in Table 1.

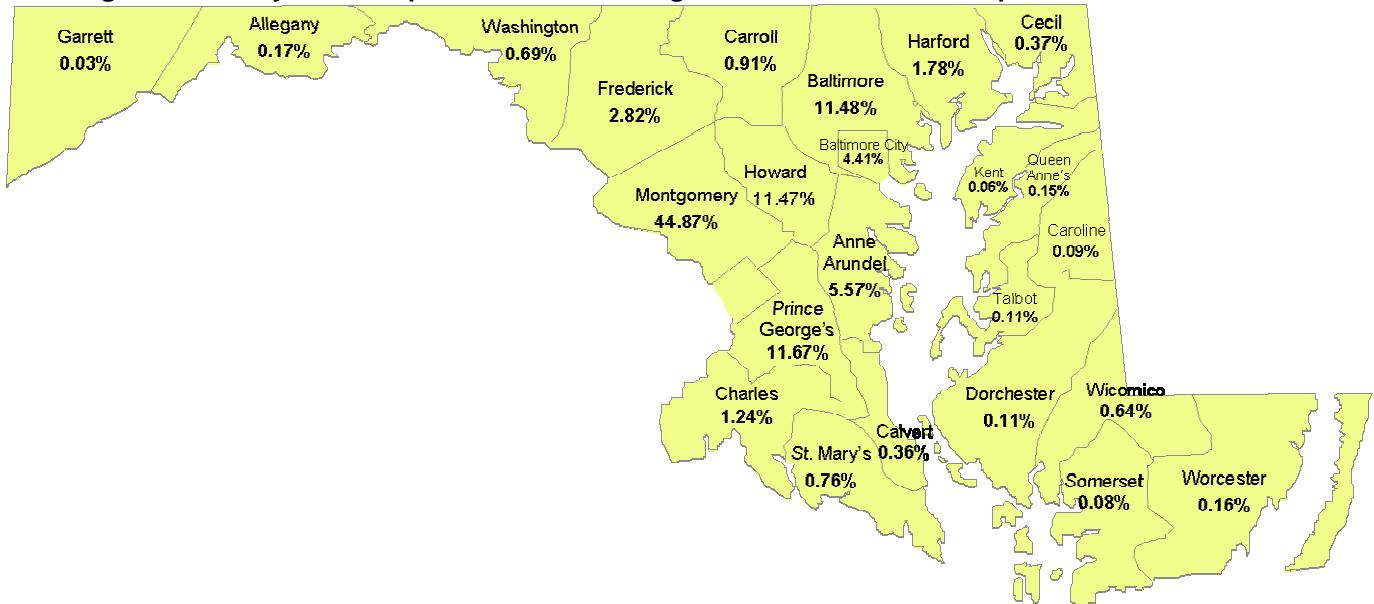
**Table 1. Asian American Population in Maryland by County**

	<b>Asian population</b>	<b>Total population</b>	<b>% of total population</b>
Maryland	277,697	5,615,727	4.9
<b>COUNTY</b>			
Allegany	484	72,831	0.7
Anne Arundel	15,468	509,300	3.0
Baltimore City	12,248	631,366	1.9
Baltimore County	31,868	787,384	4.0
Calvert	997	88,804	1.1
Caroline	237	32,617	0.7
Carroll	2,530	170,260	1.5
Cecil	1,015	99,506	1.0
Charles	3,444	140,416	2.5
Dorchester	297	31,631	0.9
Frederick	7,842	222,938	3.5
Garrett	78	29,859	0.3
Harford	4,952	241,402	2.1
Howard	31,854	272,452	11.7
Kent	154	19,983	0.8
Montgomery	124,596	932,131	13.4
Prince George's	32,420	841,315	3.9
Queen Anne's	406	46,241	0.9
St. Mary's	2,122	98,854	2.1
Somerset	225	25,774	0.9
Talbot	303	36,062	0.8
Washington	1,918	143,748	1.3
Wicomico	1,782	91,987	1.9
Worcester	457	48,866	0.9

Source: U.S. Census Bureau 2006 PEP

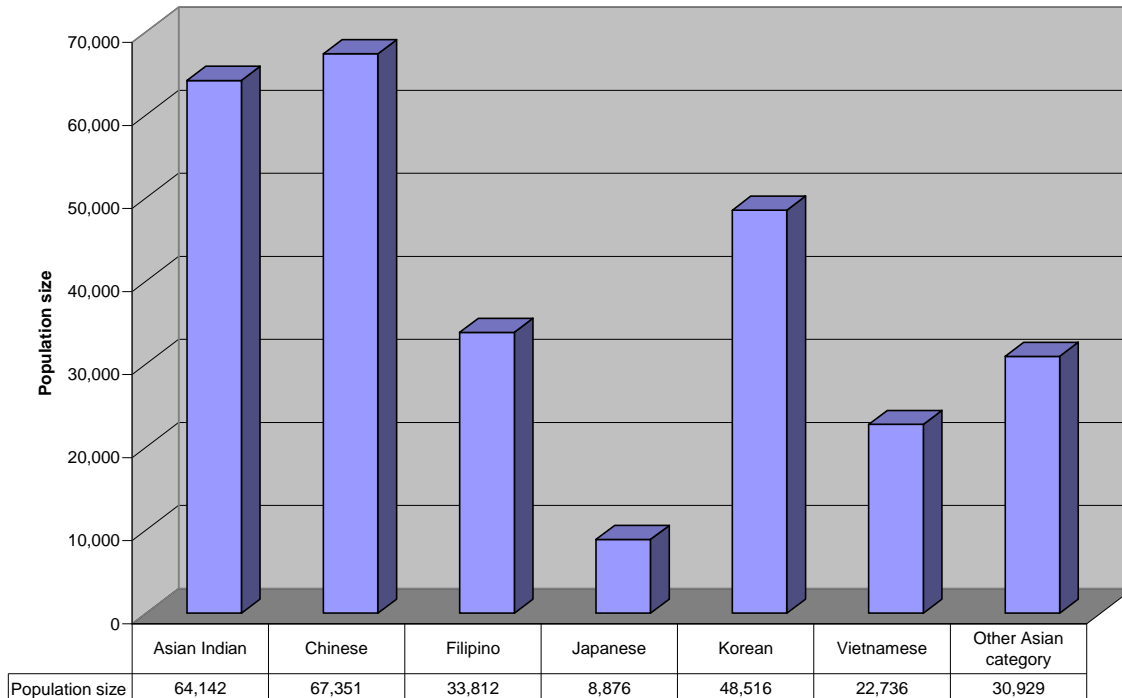
Maryland has experienced extraordinary growth in its Asian American population within the past decade. One estimate has shown that between 1990 and 1994, the Asian population in the state increased by 26 percent, with Montgomery County serving as the nucleus of growth. Maryland's three most populous jurisdictions—Montgomery, Prince George's, and Baltimore County—are home to over half of the state's Asian population (Figure 1). Moreover, almost 90 percent of Asian Americans in Maryland live within the counties that makeup the metropolitan Washington/Baltimore region.

**Figure 1. County Asian Population as Percentage of Total State Asian Population**



Although Maryland's Asian American population represents a diversity of Asian sub-groups, three groups in particular are represented more heavily in terms of population size. As shown in Figure 2, the 2006 U.S. Census Bureau American Community Survey indicates that the three largest Asian ethnic groups in Maryland are Asian Indians (64,142), Chinese (67,351), and Koreans (48,516).

**Figure 2. Asian Ethnic Groups in Maryland**



Source: U.S. Census Bureau 2006 American Community Survey

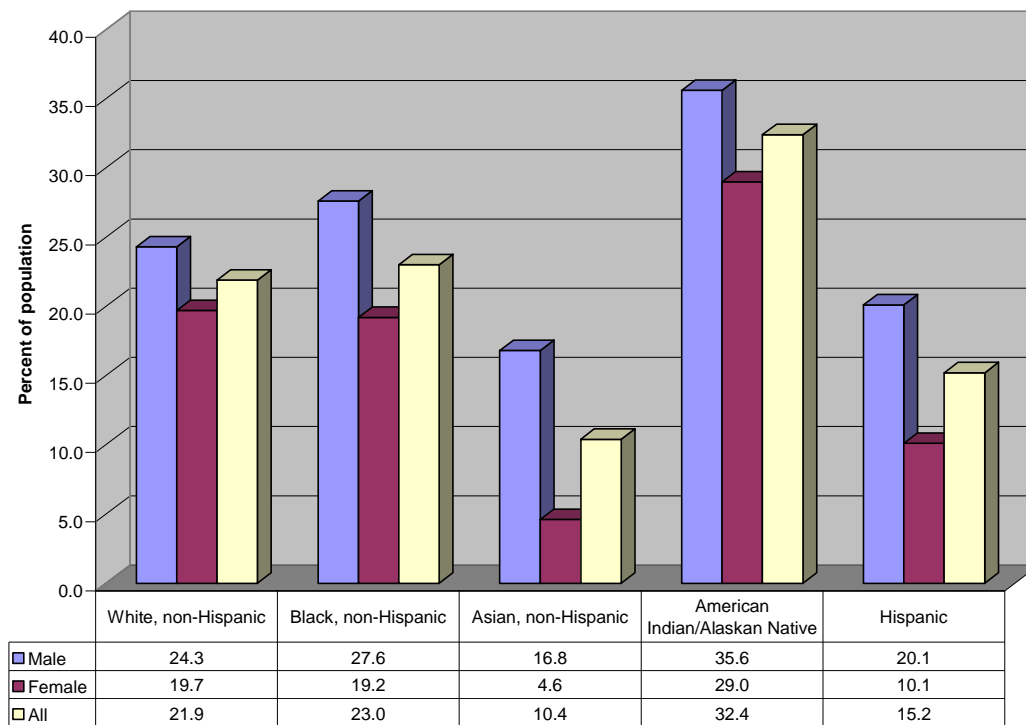
Similar to trends exhibited by other immigrant groups across the country, Asian immigrants in Maryland are choosing to settle in suburban areas rather than in the city. From 1990 to 1994, the Asian population in Anne Arundel County grew by 28 percent, Baltimore County's by 26 percent, and Howard County's by 33 percent. In stark contrast to the growth in the counties, the Asian population in Baltimore City grew only by 8 percent during the same time period.

### ASIAN AMERICANS AND TOBACCO USE PATTERNS

As a group, Asian Americans are well educated, earn high incomes, and enjoy a high quality of life. Although they represent a range of languages, dialects, and cultures that are as different from one another as they are to non-Asian groups, Asian Americans are often inaccurately viewed as a homogeneous "model" minority with few social or health problems. Consequently, the needs and concerns of this group have been largely ignored or have not been taken seriously.

Figure 3 below shows that Asian Americans have the lowest smoking prevalence rates among adults of all racial/ethnic groups in the United States. In 2006, 10.4 percent of Asians smoked compared to 15.2 percent of Hispanics, 23.0 percent of non-Hispanic blacks, 21.9 percent of non-Hispanic whites, and 32.4 percent of American Indians/Alaskan Natives. Not only did Asian women have the lowest smoking prevalence at 4.6 percent, but their prevalence was also over 50 percent less than the rates of women of other racial/ethnic groups. Asian men, with a prevalence of 16.8 percent, were also lower than men of other racial/ethnic groups; however their differences were less marked.

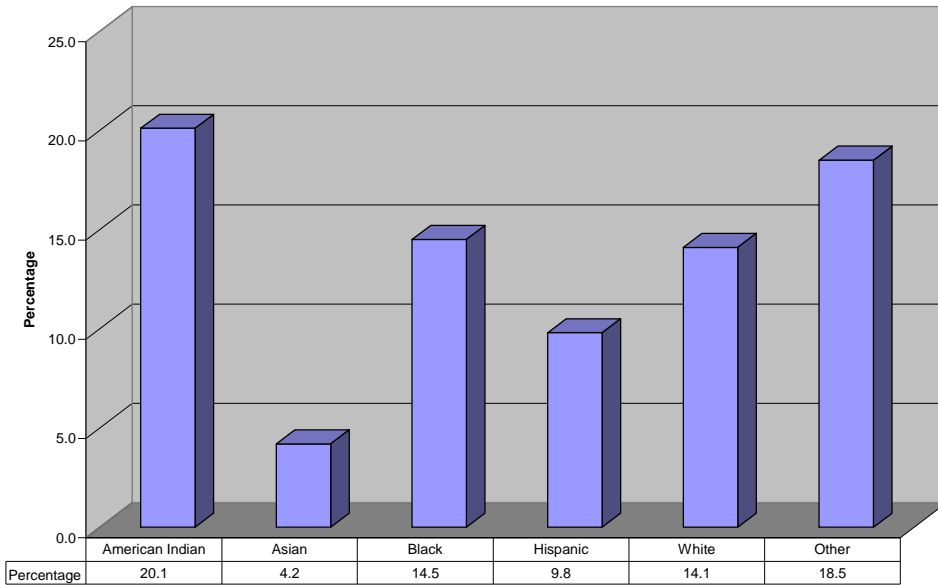
Figure 3. Current U.S. Cigarette Smoking by Sex and Race/Ethnicity (2006)



Source: National Health Interview Survey, United States, 2006

Tobacco use patterns among Asian Americans in Maryland tend to reflect national cigarette smoking trends. Figure 4 shows current tobacco use among adults in Maryland. Asian Americans at 4.2 percent have the lowest prevalence of tobacco use among all racial groups in the state.

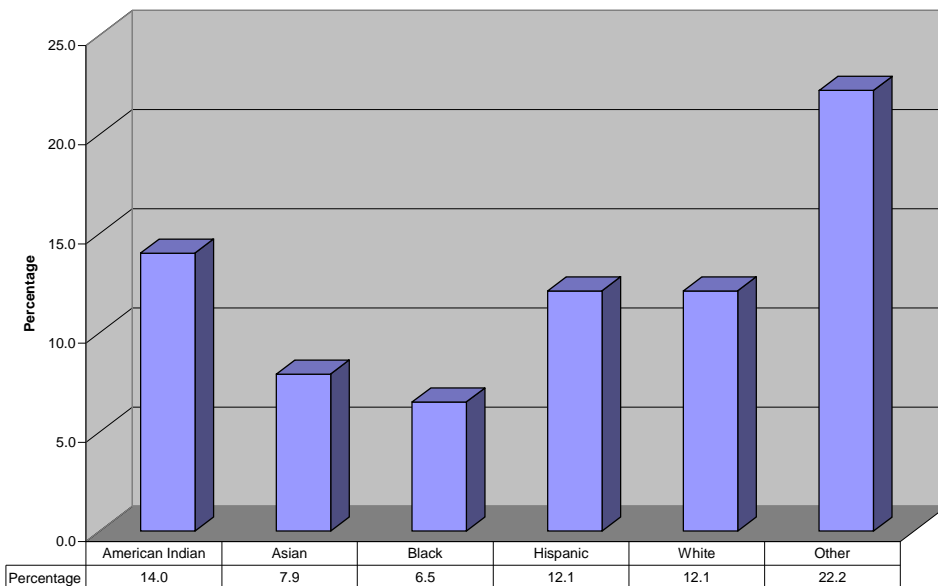
Figure 4. Current Smoking by Maryland Adults (18+) by Race



Source: DHMH Monitoring Changing Tobacco-use Behaviors in Maryland, November 2007

Tobacco use by Asian American youth compared to other groups is similar to adult tobacco use trends. Figure 5 indicates that among under-age (less than 18 years) youth, Asian Americans at 7.9 percent have the lowest prevalence of tobacco use among all racial groups in Maryland.

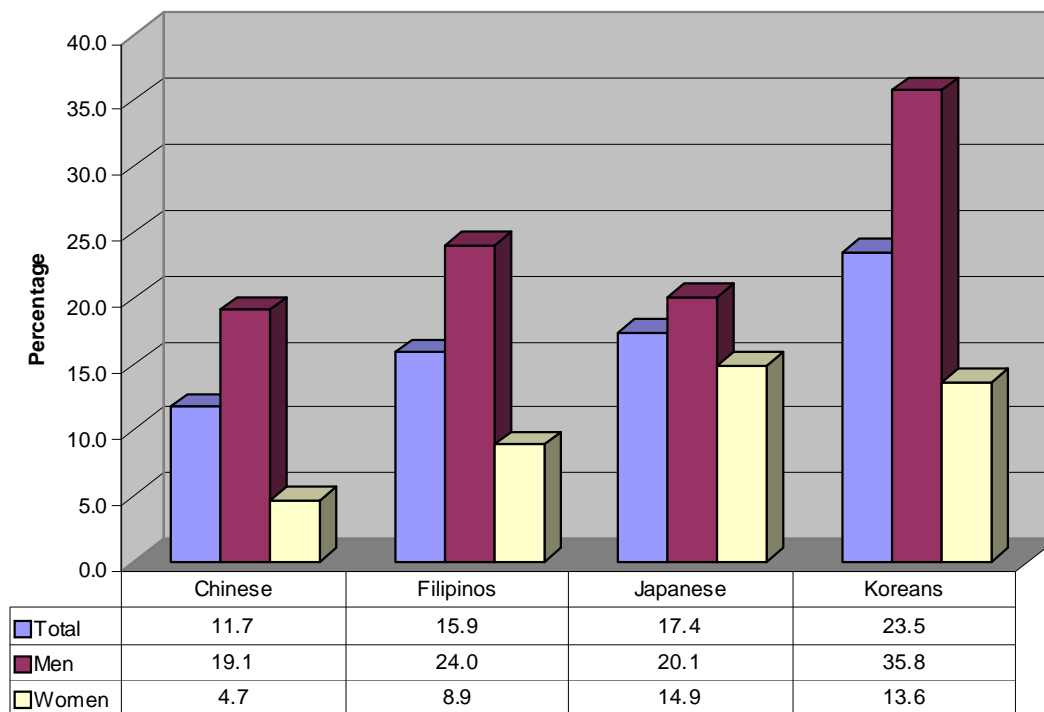
Figure 5. Current Smoking by Maryland Under-age Youth (<18) by Race



Source: DHMH Monitoring Changing Tobacco-use Behaviors in Maryland, November 2007

The statistics presented are accurate, yet can be misleading. Emerging data and research on Asian American subgroups show real and important disparities that are not otherwise apparent when considering Asians as an aggregate and homogenous whole. In fact, there exists substantial variation in smoking rates among Asian American subgroups.

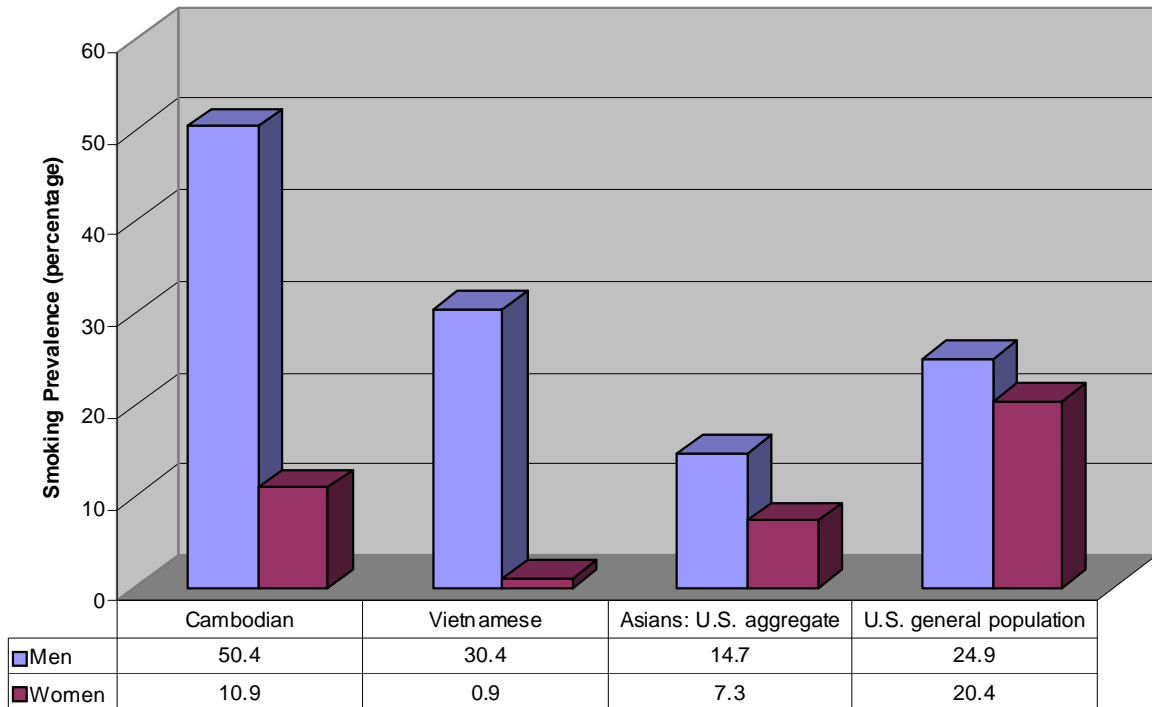
**Figure 6. Percentage of Adult Asian Americans and Pacific Islanders Who Reported Being Current Smokers**



Source: Surgeon General's Report, 1998

Figure 6 presents the percentage of adult Asian Americans and Pacific Islanders who reported being current smokers. For men, the percentages range from a low of 19.7 percent among Chinese men to a high of 35.8 percent for Korean men, which is considerably higher than the 25.5 percent prevalence of white, non-Hispanic men (Figure 3). Asian American men of Southeast Asian origin (Cambodian and Vietnamese for example) tend to have significantly higher rates of smoking than both the national aggregate for Asian Americans and the U.S. population in general as shown below in Figure 7.

Figure 7. Gender Specific Smoking Prevalence of Cambodian and Vietnamese Americans



Source: Morbidity and Mortality Weekly Report, August 2004

This pattern does not hold true for Cambodian and Vietnamese American women however. Although Cambodian American women have a slightly higher smoking prevalence than the national aggregate for Asian Americans, both Cambodian and Vietnamese American women have a considerably lower prevalence compared to the general U.S. population.

### THE EFFECTS OF ACCULTURATION AND TOBACCO USE

Further variations are exposed when considering acculturation as a variable in Asian American tobacco use patterns. There is evidence supporting an association between cigarette smoking and acculturation among Asian Americans. As shown in Table 2, those who have lived in the United States longer and those who had a higher level of English-language proficiency demonstrated a lower likelihood to be smokers. Among Chinese men, the likelihood of being a current smoker decreased with increasing percentage of lifetime spent in the United States.

**Table 2. Percentage of Chinese and Vietnamese Men Who Reported They Smoke and Level of Acculturation**

Acculturation characteristic	Chinese		Vietnamese	
	%	Avg. number cigarettes	%	Avg. number cigarettes
< 25% of lifetime in United States	29.8	13.0	NA	NA
> 25% of lifetime in United States	26.2	22.3	NA	NA
Fluent in English	*	*	29.7	10.7
Not fluent in English	31.8	13.3	36.6	10.0
Immigration before 1981	NA	NA	32.2	10.5
Immigration in 1981 or later	NA	NA	37.7	9.8

\* Numbers too small for analysis

Source: Surgeon General's Report, 1998

Interestingly enough, even though the current smoker percentage decreased the average number of cigarettes smoked increased. For Vietnamese men, smoking prevalence was highest for those not fluent in English and who had immigrated to the United States after 1981.

## **TOBACCO CONTROL PROGRAMS IN MARYLAND**

In FY07, the tobacco control programs of most of Maryland's twenty-four jurisdictions targeted the Asian American community in one form or another. Activities included, but were not limited to, providing smoking cessation programs, increasing awareness through outreach campaigns, and providing funding to Asian American churches and other Asian American organizations.

**Table 3. Asian American Tobacco Use Prevention Activities by County**

County	Asians in smoking cessation	Asian churches funded	Asian organizations funded	Asian outreach campaigns
Allegany	0	0	0	1
Anne Arundel	2	0	0	3
Baltimore City	71	0	4	5
Baltimore County	9	0	1	2
Calvert	0	0	0	1
Caroline	0	0	0	0
Carroll	0	0	0	0
Cecil	1	0	0	0
Charles	0	0	2	7
Dorchester	0	0	0	0
Frederick	3	0	4	7
Garrett	0	0	0	0
Harford	1	0	0	0
Howard	3	0	1	2
Kent	0	0	0	0
Montgomery	43	1	0	11
Prince George's	60	0	1	13
Queen Anne's	0	0	0	0
Somerset	0	0	0	0
St. Mary's	0	0	0	0
Talbot	0	0	0	1
Washington	0	0	0	1

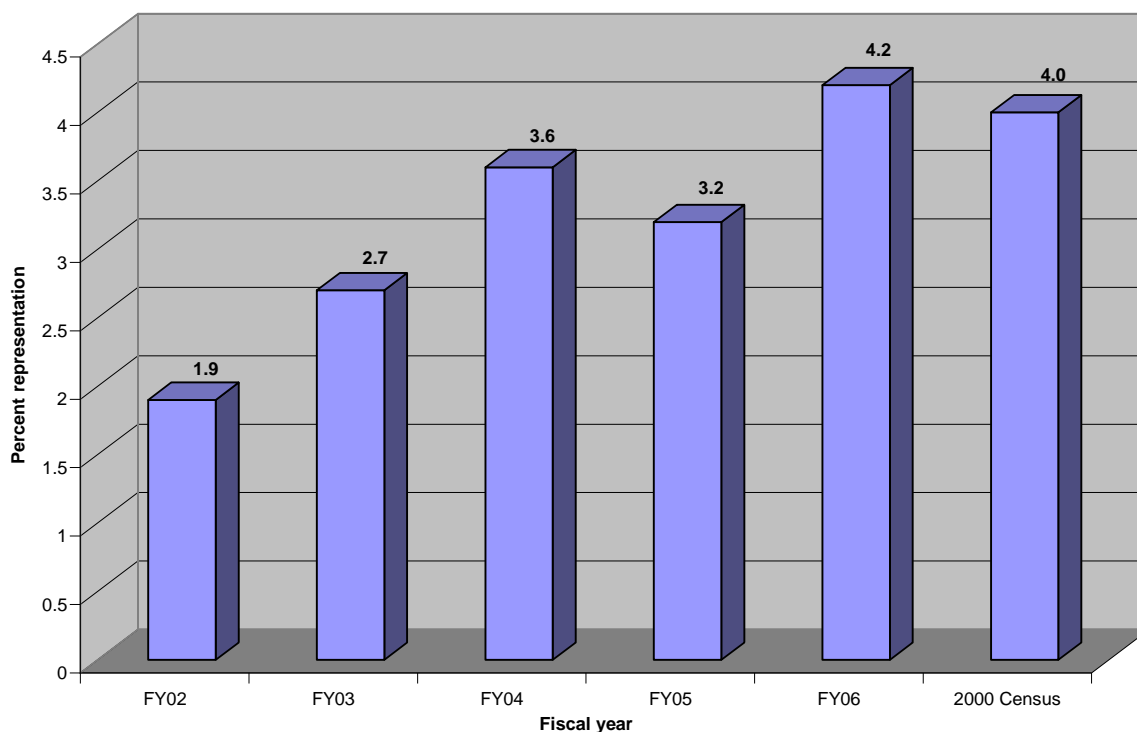


<b>Wicomico</b>	1	0	0	0
<b>Worcester</b>	0	0	0	0

Source: CRFP Database

Asian American participation on local tobacco coalitions from FY02 to FY06 has generally been an upward trend, as shown in Figure 8. However, the proportion of Asian Americans represented on tobacco coalitions was less than the population proportion (based on the 2000 Census) for every year except FY06.

**Figure 8. Asian American Participation on Local Tobacco Coalitions**



Source: AIR Comprehensive Report: Evaluation of Maryland's Cigarette Restitution Fund Program, May 2007

Five Maryland counties had well developed programs in FY07 that involved committed collaboration with organizations working on tobacco control in Asian American communities.

**Baltimore City**

The Korean Resource Center (KRC) focused on educating Korean merchants and Asian American adults. KRC planned, organized, and implemented educational sessions for Korean merchants on the local ordinances regarding sales to minors and product placement. In partnership with Asian American Anti-Smoking Foundation (AAASF), KRC provided services to Chinese Americans. KRC targeted women by providing women's health seminars. The following indicators give their actual performance for FY07:

- Educated 940 Asian Americans
- Educated 389 Korean merchants on Baltimore City tobacco control laws

- Conducted one-on-one outreach activity to 50 additional merchants to educate them on the hazards of secondhand smoke, effects of tobacco use, and tobacco control laws

### **Frederick County**

The Learning Institute for Enrichment & Discovery, a not for profit, is an educational organization local to Frederick County that provides a dynamic setting and fun learning environment for students. In FY07, the Learning Institute was funded to develop and provide tobacco educational materials in multiple languages, conduct youth group meetings and provide tobacco education, and recruit and train community members on the Life Skills curricula. The following indicators give their actual performance for FY07:

- Provided anti-tobacco educational materials to 2,000 Asian Americans at nine local cultural events
- Educated 50 Asian youth through 24 weekly youth group meetings
- Recruited and trained three Asian community members on Life Skills

### **Howard County**

Howard County had two Asian American organizations as sub-vendors in FY07. The KRC was funded to implement the Environmental Protection Agency Smoke-Free Homes Pledge and educate the Korean American community in Howard County about the risks and costs of tobacco use and secondhand smoke exposure. The following indicator gives their actual performance for FY07:

- 580 Korean Americans educated

AAASF was funded to conduct a secondhand smoke education campaign to reach the Chinese and Vietnamese populations. Two secondhand smoke public service announcements were developed in Chinese and Vietnamese. A secondhand smoke prevention ad was also placed in *The Washington Chinese News*. The following indicators give their actual performance for FY07:

- 1,380 materials distributed
- 1,000 people reached

### **Montgomery County**

The Korean Community Service Center (KCSC), a not for profit, has been developing mutually beneficial partnerships and long-standing relationships between the Asian and Pacific Islander community groups to address issues related to tobacco use. In FY07, they were funded to provide tobacco use prevention, education, and outreach services; support community groups; and develop non-school based prevention and outreach programs for Asian/Pacific Islander youth. The following indicators give their actual performance for FY07:

- 11 media campaigns conducted
- 28 community leaders trained
- 779 people received culturally appropriate tobacco prevention information
- 165 people received culturally appropriate tobacco cessation information
- 10 secondhand smoke education projects completed

- 1 youth leadership program provided

**Prince George's County**

The Korean Community Service Center (KCSC) received funding in the community and cessation elements. KCSC provided cessation classes and therapy to Asian Americans. KCSC provided training for community leaders to enable them to provide culturally sensitive and linguistically appropriate cessation classes. They also reached out to the community through trained volunteers, providing educational workshops as well as increasing awareness of the availability of cessation classes. KCSC provided technical assistance and culturally appropriate educational materials to Chinese and Vietnamese community based organizations. The following indicators give their actual performance for FY07:

- 43 community leaders trained in CDC best practices
- 24 tobacco awareness campaigns conducted
- 951 Asian Americans educated on harmful effects of smoking and secondhand smoke
- 17 secondhand smoke educational programs
- 5 faith-based programs involving Korean and Vietnamese churches
- 315 tobacco brochures and 115 flyers distributed
- 81 people individually counseled on smoking cessation
- 27 participants provided nicotine patches

**ASIAN AMERICAN TOBACCO CONTROL NETWORKS**

As part of the state’s comprehensive tobacco control efforts, in FY07 the CRF program implemented “Promoting Tobacco Use Prevention Initiatives in Asian American Communities” in order to enhance awareness and build capacity and infrastructure for tobacco control within Asian American communities. This statewide effort was aimed at targeting Asian American organizations to develop culturally sensitive and relevant educational programs. In addition, they should organize leadership training and network development in order to address the leadership shortage in Asian American communities. Two well respected and capable organizations were funded to carry out these activities. Learning Institute for Enrichment and Discovery carried out these activities in the Capital Beltway Area while Asian American Anti-Smoking Foundation covered the Baltimore Metropolitan Area. The following table gives their accomplishments for FY07–FY08:

**Table 4. Asian Network Initiatives Grant Accomplishments**

<b>Learning Institute for Enrichment and Discovery</b>	<b>Asian American Anti-Smoking Foundation</b>
<ul style="list-style-type: none"> <li>• Worked on building capacity and networking via conferences and trainings</li> </ul>	<ul style="list-style-type: none"> <li>• Recorded, edited, and mastered Tobacco Use Prevention and Cessation DVD in Chinese, Korean, and Vietnamese languages</li> </ul>
<ul style="list-style-type: none"> <li>• Advocated for a culturally appropriate needs assessment at a Frederick County Health Coalition meeting</li> </ul>	<ul style="list-style-type: none"> <li>• 100 copies of Tobacco Use Prevention and Cessation Education educational package distributed (40 Chinese, 40 Korean, and 30 Vietnamese)</li> </ul>
<ul style="list-style-type: none"> <li>• Met with Burmese and Korean community leaders to introduce concept of health promotion and disease prevention as related to tobacco use and secondhand smoke</li> </ul>	<ul style="list-style-type: none"> <li>• 100 Asian Americans self selected as leaders for tobacco use prevention in their business or organization</li> </ul>

<ul style="list-style-type: none"> <li>• 40 people reached through meetings and trainings</li> <li>• 60 second anti-tobacco commercial developed by Asian Youth Against Tobacco in collaboration with the county TRASH Project</li> </ul>	<ul style="list-style-type: none"> <li>• 3,500 multilingual flyers distributed</li> </ul>
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## **CONCLUSION**

Asian Americans are an extremely heterogeneous group that represents both ends of the spectrum in terms of socioeconomic and health indices. The within group variation among Asian Americans is as diverse as the general population of the United States. Such diversity within a seemingly homogenous group clearly highlights the importance of disaggregating tobacco and smoking related data for Asian Americans.

The longstanding paradigm of "model" minority as well as the utilization of "cookie cutter" intervention approaches and strategies for Asian Americans is simply untenable. In order to be successful, tobacco control programs focusing on Asian Americans must carefully examine subgroup variations and account for acculturation, target high-risk groups, and develop interventions that are both culturally specific and culturally sensitive.

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