



**Substance Use Among
Asian Americans: A Descriptive Study**

by

Thuy N. Nguyen



**California State University
of Long Beach,
May 2015**



Introduction



- The Substance Abuse and Mental Health Services Administration (SAMHSA; 2013a) reported that the Asian and Pacific Islanders (APIs) population grew at a rate of over 4 times the rate of the total population between 2000 and 2010 in the United States
- SAMHSA (2013b) reported that APIs are half as likely to receive specialty treatment for substance use as other racial groups at 10.4%
- There were only 291 facilities in the entire United States to serve 500,000 APIs who needed treatment for substance use (U.S. Department of Health and Human Services; 2011)
- The Intersectionality Theory: identifies marginalized groups as oppressed based on the multiple identities which are socially constructed from the political world (Crenshaw, 1991; Hune, 2003)
- The Myth of Homogeneity: This presumption of homogeneity has led to health care disparities among the various cultural Asian groups



Social Work Relevance

- This study was relevant to social work because it aimed to understand the service needs among those who used substances in the diverse Asian communities in the United States.
- This research was particularly relevant to older adults and families as there is a need to develop culturally sensitive prevention and intervention programs for API adults who have used and are using substance as they age.
- Asian subgroups immigrated during different eras (PEW research. 2013). The exploration of immigration patterns may be an important factor in determining substance use among the Chinese, Filipino, and Vietnamese.
- Additionally, understanding the difference among Asian Americans who are born in the United States and Asian immigrants allows further understanding of various coping skills developed through the acculturation process



Cross-cultural Relevance

- Emphasis on the ecosystem and intersectionality theories assisted with research touching upon an array of multicultural issues within Asian subgroups, such as Vietnamese, Filipinos, Chinese and all other Asians
- It is important to understand the unique cultural differences among the various Asian groups in order to direct appropriate resources toward those who are at risk of substance use (Sharma, 2008).
- The coined term *model minority* does not exist in this research because multiple results showed across Asian groups and different attributes to risks of using substances are present and experiences is social problems do occur
- Various characteristics determined the prevalence of substance use and utilization of services among each Asian culture from this research.



Methods

- ▶ Secondary data collected from the Collaborative Psychiatric Epidemiology Surveys, which combined three different survey datasets: the National Comorbidity Survey Replication, the National Survey of American Life, and National Latino Asian American Study.
- ▶ The interviews were completed via computer-assisted personal interviews, computer-assisted telephone interviews and traditional telephone interviews, (Alegria, Jackson, Kessler, & Takeuchi, 2008).
- ▶ The participants of this study were 18 years or older and lived in the United States, excluding the state of Alaska
- ▶ 11 research questions were used analysis selected variables
 - ▶ Asian cultural group, gender, age, immigration status, geographic location, marital status, acculturation issues, substance use, and utilization of services for mental health and physical health.



Methods

- ▶ Sample size only included 2,095 participants of Asian descent who self-identified as Vietnamese, Filipino, Chinese, or all other Asians
- ▶ One-way analysis of variance (ANOVA) and chi-square statistical procedures were conducted using the Statistical Package for Social Science (SPSS), version 22 to determine the prevalence of substance use as well as service use patterns among the Asian subgroups were determined.
 - ▶ Age was recoded into six categories.
 - ▶ Alcohol use was recoded into a dichotomous variable of use or no use in the past year.
 - ▶ Tobacco use was recoded into a dichotomous variable of individuals who identified as smokers or non-smokers.



Results

- ▶ Vietnamese, Filipino, and Chinese participants in this study had different experiences with substance use and utilization of services depending on other characteristics.
- ▶ All other Asian participants were more likely to have self-reported their English proficiency levels as excellent in the age group of 24 to 34.
- ▶ All other Asian participants who self-reported their English proficiency level as excellent had a higher prevalence of tobacco and marijuana use than alcohol use.
- ▶ Among those who utilized mental health or substance use services, a majority of Vietnamese, Filipino, Chinese and all other Asian participants responded “no”.
- ▶ However, Filipino and Chinese participants who self-reported English proficiency level of “excellent” were more likely to have seen a professional for mental health or substance use services.



Results

- Among Filipinos across all attributes were more likely to use alcohol, tobacco, and marijuana compared to Vietnamese, Chinese, and all other Asians.
- Vietnamese participants had lower risks of alcohol, tobacco, and marijuana across all marital statuses, genders, United States citizenship statuses.
- Vietnamese participants who self-report their level of English proficiency as poor across all ages had lower risks of with alcohol and tobacco use.
- Chinese participants without United States citizenship were less likely to use marijuana.
- Chinese who self-reported their level of English proficiency as poor across all ages identified as smokers and alcohol users



Discussion/Implications for Social Work

- Service agencies need to have a better understanding of the distinct Asian cultures in their geographical area to determine how to target resources for the most vulnerable based on the differences among each groups
- Further assessments and services are needed for the Filipino population are at risk of substance use with alcohol, tobacco, and marijuana.
- Offering no cost English as second language (ESL) classes to all Asian communities will potentially increase acculturation and improve their chances to obtain higher education, higher incomes, and access to resources.
- Educational resources or workshops made available to the different Asian communities and presented in different Asian languages would assist adults and families to understand the consequences of substance use and become aware of the resources available



References

- Alegria, M., Jackson, J. S., Kessler, R. C., & Takeuchi, D. (2008). Collaborative psychiatric epidemiology surveys (CPES), 2001-2003 [United States]. [ICPSR20240]. Ann Arbor, MI: Inter-university Consortium for Political and Social Research [distributor]. <http://doi.org/10.3886/ICPSR20240.v6>.
- Crenshaw, K. W. (1991). Women of color at the center: Selections from the Third National Conference on Women of Color and The Law: Sapping the margins: Intersectionality, identity politics, and violence against women of color. *Stanford Law Review*, 43, 1241-1417.
- Hune, S. (2003). *Asian/Pacific Islander American women: A historical anthology*. New York: New York University Press.
- PEW Research Center. (2013). *The rise of Asian Americans*. Washington, DC: Pew Research Center. Retrieved from www.pewresearch.org.
- Sharma, M. (2008). Substance abuse in minorities. *Journal of Alcohol & Drug Education*, 52(3), 3-8.
- Substance Abuse and Mental Health Services Administration. (2013a). *64 percent of Asian and Pacific Islander treatment admissions name alcohol as their problem*. Rockville, MD: Author. Retrieved from: www.samhsa.gov/data/.
- Substance Abuse and Mental Health Services Administration. (2013b). *The NSDUH report: need for and receipt of substance abuse treatment among Asian Americans and Pacific Islanders*. Rockville, MD: Author. Retrieved from: www.samhsa.gov.
- U.S. Department of Health and Human Services. (2011). *Availability of Asian language substance abuse treatment counselors varies by region*. (Center for Behavioral Health Statistics and Quality, National Survey of Substance Abuse Treatment Services). (Data Spotlight) Retrieved from http://www.integration.samhsa.gov/clinicalpractice/Availability_of_Asian_language_Substance_Abuse_Treatment_Counselors_Varies_by_Region.pdf