



Concepts of Health & Disease among South Asian Immigrants in Chicago

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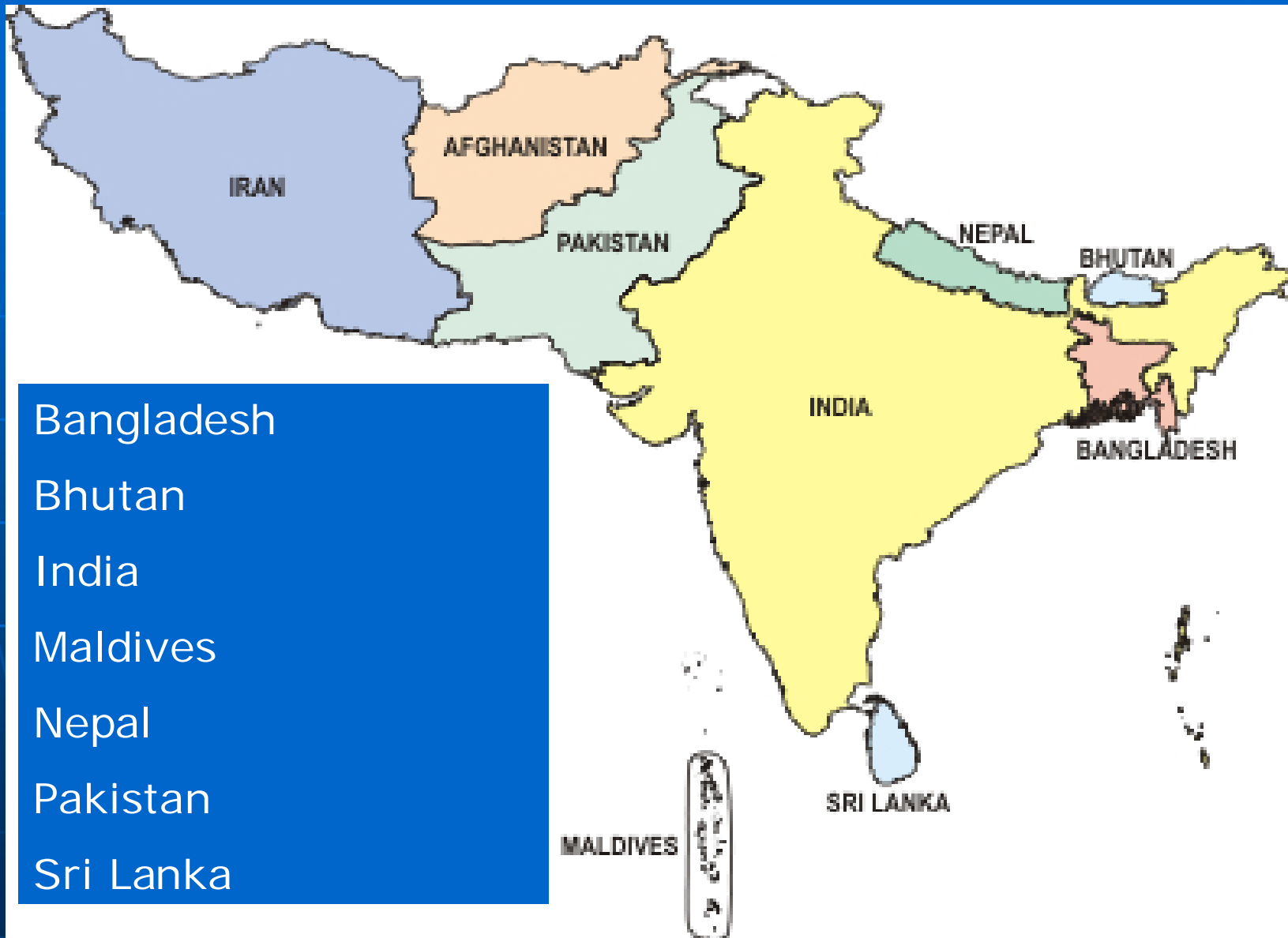
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Background

- South Asians are one of the fastest growing immigrant groups in the US.
- Higher prevalence of heart disease and diabetes in South Asians.
- Few health promotion interventions target this group in the US
- Beliefs about health and disease may influence receptivity to health information and chronic disease prevention behaviors.



Bangladesh

Bhutan

India

Maldives

Nepal

Pakistan

Sri Lanka

Study Aim

- To understand concepts of health and disease among South Asian immigrants using qualitative methods

Hypothesis

- South Asians hold an infectious disease model of health and disease.

Methods

- Semi-structured, in-depth interviews.
- 75 respondents, recruited from a federally qualified health center (n=45) and a community organization (n=30) on the North side of Chicago.
- Age 20-75 years, self-identify as Asian Indian or Pakistani, and speak English, Hindi, or Urdu.

Analysis

- Interviews were audio-taped, transcribed, and translated into English.
- Developed a coding scheme based on content analysis of 10 pilot interviews.
- A subset of interviews double-coded for consensus to determine inter-rater reliability.
- NVIVO 7.0 qualitative software used for coding and analysis.

Participant Characteristics (N=75)

- 51% male
- 70% in US less than 10 years
- 69% born in India
- 68% Muslim
- 57% Bachelor's degree or higher
- 55% uninsured
- Equal numbers in English, Hindi, Urdu

Results

What do you think are the major diseases affecting your community?

1. Stress, depression
2. Heart diseases
3. Diabetes
4. High blood pressure
5. Cholesterol

Prompts to elicit concepts of health:

- Are you healthy? What is the reason behind this thought of yours?
- What does it mean to you to be healthy?
- What things do you do to take care of your health?

Domains of Health Concepts

1. Behavioral

-Diet, exercise, take medications

2. Psychosocial

-Avoid stress, happy

3. Physical

-Energetic, no symptoms/pain, functional

4. Spiritual

- Prayer, Higher being, religious attendance

⌘ These domains emerge to form a “holistic”
concept of health

Holistic model of health

1. **Behavioral:** "I guess, I watch myself. While I go to eat biriyani* I like to eat biriyani but if I have a choice I'm gonna go ahead and eat bean for a few day or lentil so to balance myself. You know try to."
2. **Psychosocial:** "My philosophy is also is kind of different than average people and I do have a believe and I believe a very strong believe um because uh if you have a positive thinking you don't get sick much."
3. **Physical:** "I don't have no blood pressure, no um diabetes and that's lot of common for diseases now a day with the people and uh the the guys in my age group I know lot of people have a blood pressure, high cholesterol, all those kind of things uh so that's why I am better than those people."
4. **Spiritual:** "If you get sick then you have to take medicine. But the God has the power and that is if he wants he can make you better without even eating medicine."

*Biryani: oily, spicy rice dish

Domains of Disease Concepts

1. Behavioral

- Diet, lack of exercise

2. Psychosocial

- Stress, depression

3. Physical

- Symptoms, functional limitations, weakness

4. Other

- Not feeling good, environment, not caring

⌘ There is a notable absence of spiritual concepts

Bio-psychosocial Model of Disease

1. **Behavioral:** "I don't know, maybe inadequate diet, maybe not doing exercises, maybe not following all the rules of the health."
2. **Psychosocial:** "I cannot say why some people get sick, but just some reasons... attitude, mental stress."
3. **Physical:** "Activities, pace is slow and um using medicine, maybe sneezing."
4. **Other:** "maybe the home is too chaotic."

Conclusions

- Contrary to the original hypothesis, South Asians do not have an infectious disease model of health and disease.
- Concepts of health are largely holistic.
- Concepts of disease are predominantly bio-psychosocial.
- South Asian immigrants may hold multiple health belief systems

Implications

Health promotion messages should recognize:

- Awareness of bio-psychosocial aspects of health and disease, specifically risk factors for chronic diseases
- Take into account psychosocial and spiritual factors as part of health promotion.

Acknowledgments

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 - Indo-American Center
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THANK YOU!

General health indicators

- BODY MASS INDEX (BMI) [median/range]
 - WHO criteria for obesity in South Asians >25 kg/m²
 - Male: 27.60 (18.39-37.7)
 - Female: 26.75 (18.64-38.85)
- SELF-REPORTED CHRONIC DISEASES:
 - Hypertension: 32%
 - Diabetes: 19%
 - Cholesterol: 21%
 - Heart Disease: 11%
 - Family history of heart attack: 57%

What do you think are the major diseases affecting your community?

1. Stress, depression (38)
2. Heart diseases (34)
3. Diabetes (27)
4. High blood pressure (22)
5. Cholesterol (12)