

## Abstract

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### **“I don’t go to chinatown doctors anymore”: A qualitative study of social isolation impacting healthcare in a Chinese immigrant community**

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**Background:** Social isolation has adverse consequences for psychosocial health, physical outcomes, and mortality. While previous studies document higher risks of social isolation in immigrant communities, few have examined the ramifications of social isolation on the healthcare experiences of those communities.

**Objective:** This qualitative study explores narratives of social isolation among Chinese immigrants living in an ethnic enclave, identifying mechanisms of social isolation and downstream effects on healthcare experiences.

**Methods:** We conducted six semi-structured focus groups with 49 adults. Groups were conducted in Mandarin or Cantonese. Focus groups were audio-recorded, transcribed, and translated. Codes were generated from transcripts using grounded theory and the constant comparison method. For internal consistency, a codebook was iteratively developed by 4 reviewers. Discrepancies were resolved using a standard of intercoder agreement.

**Results:** Participants identified several mechanisms of isolation. Prominent themes included language barriers as isolating (“Since I didn’t know how to speak English...I still mainly go to places in Chinatown. I seldom go to other places”); and challenges in forming social networks (“I don’t have many friends and relatives here...I can’t talk to anyone”). Both personal- and community-level experiences of social isolation had downstream impacts on accessing healthcare (“We can only find Chinese-speaking doctors. That is why the line is long”) and at times, quality of healthcare (“I don’t go to Chinatown doctors any more. They are never on time”).

**Discussion:** In all, participants described various mechanisms of social isolation impacting their health and healthcare, potentially exacerbating health disparities in Chinese immigrant populations.

Assessment of individual and community needs for health education Diversity and culture Provision of health care to the public

