ASIAN PACIFIC AMERICAN MEDICAL STUDENT ASSOCIATION

Resolution 10
HOD-23

Introduced by: Brandon W. Yan MPH, UCSF School of Medicine

Subject: Recognizing and Combating Health Disparities from COVID and future Pandemics in AANHPI Communities

Referred to: Resolutions Committee

Whereas, Asian Americans experienced a lower COVID-19 mortality rate per 100,000 population than white Americans, and Native Hawaiian and Pacific Islanders have experienced a significantly higher age-adjusted COVID mortality rate per 100,000 than white Americans,[1]

Whereas Non-AANHPI minority populations including Black, Indigenous, and Latino/a/x communities have also experienced disproportionate COVID-19 disease and mortality burden,[1]

Whereas, Asian Americans have faced significantly higher risk of death from COVID-19 and higher case fatality rates than white Americans in both unadjusted and adjusted analyses,[2–5]

Whereas, Asian Americans experienced significantly higher excess mortality in the COVID era as compared to white Americans,[6,7]

Whereas, COVID Data on AANHPI populations were frequently missing from public reports, particularly for NHPIs,[8]

Whereas, Disaggregated data by AANHPI subgroup was sparse despite evidence of significant differences in health outcomes,[9–11]

Whereas, APAMSA National Policy 10.002 calls for Disaggregation of AAPI Health Outcomes Data,

Whereas, Anti-Asian hate crimes have risen dramatically since the start of COVID and "Stop AAPI Hate" has logged nearly 11,000 incidents of hate against AANHPI individuals from March 19, 2020 to December 31, 2021[12,13]; therefore be it

RESOLVED, APAMSA calls attention to the dramatic rise in anti-Asian hate in the context of COVID-related political rhetoric that has exacerbated bias, discrimination, and hate against people of Asian descent; and be it further

RESOLVED, APAMSA recognizes the disparities in health outcomes experienced by AANHPI communities during the COVID-19 pandemic, including but not limited to a disproportionate mortality burden among NHPIs and high case fatality rates and excess

mortality among Asian Americans compared to the overall population and white Americans; and be it further

RESOLVED, APAMSA advocates for public health policy and initiatives that advance our understanding of AANHPI health disparities and contribute to the mitigation of such disparities

with respect to not only COVID-19 but also future pandemics and other disease burdens facing AANHPI communities; and be it further

RESOLVED, APAMSA reaffirms its call for the inclusion of AANHPIs in all health data collection and reporting by race and ethnicity, and further that this data be disaggregated by AANHPI subgroups to the furthest extent possible; and be it further

RESOLVED, APAMSA acknowledges disparities in disease burden facing all people of color and seeks to work in allyship towards advancing shared goals in ameliorating health disparities.

Your Resolutions Committee reviewed this item, and found it to be well supported and very timely. Our only note is that Resolved 4 is not novel, because it's something that runs through the thread of all of our advocacy.

References:

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