

OPINION

Systemic racism impacts Asian Americans as well



Community members walk with elected officials from San Gabriel, Alhambra, Monterey Park and Rosemead, as well as local law enforcement during a rally and march Against Anti-Asian Hate Crimes and Racism from San Gabriel City Hall to Alhambra City Hall in San Gabriel on Friday, March 26, 2021. (Photo by Libby Cline-Birmingham, Contributing Photographer)

By **BRITTANY MOREY** |

PUBLISHED: May 22, 2021 at 7:00 a.m. | UPDATED: May 22, 2021 at 7:01 a.m.



In the past year-and-a-half of the COVID-19 pandemic, we witnessed a dramatic rise in hate crimes against Asians. But the mass shooting of Asian women in Atlanta, the fatal attack on Vicha Ratanapakdee, the slashing of Noel Quintana's face with a knife on a subway, the many attacks on our Asian elders – these anti-immigrant and anti-Asian sentiments are nothing new. These tragic events are reminiscent of the 1982 murder of Vincent Chin, the Chinese American brutally murdered by two former auto workers who blamed Japanese auto companies for the loss of their jobs.

While President Biden's actions signing into law the COVID-19 Hate Crimes Bill on May 20th is commendable, they're only first steps. More must be done to identify long-term solutions that can address the structural racism affecting the safety and health of Asian Americans.

First, we can start by acknowledging that even those who are not direct victims of hate crimes experience worsened health as a result. Reports of the elderly avoiding walks and families postponing trips to the grocery store in fear of anti-Asian hate crimes are widespread, and such accounts of people consistently avoiding daily activities in public spaces due to the perceived dangers of living their lives can be a mental strain not only to the people choosing to stay sheltered at home but to those who hear of these painful stories as well.

Second, we need to increase health care access for underserved Asian Americans. Language and culture gaps are huge barriers preventing Asian Americans from reporting hate crimes and receiving adequate health care, and our current healthcare system fails to sufficiently invest in health care providers and infrastructure that can help address those issues. For many Asian Americans, this may manifest into situations where individuals delay basic preventive health care check-ups in fear of potential social discomfort or discrimination, waiting until their health deteriorates to a point where it is too late.

Third, we need immigration reform. Immigration policy directly impacts public health, as federal law requires most legal immigrants to wait five years before they can qualify for federal safety net benefits, including the Affordable Care Act and non-emergency Medicaid. The problem is, even when immigrants do qualify for health benefits, they choose not to use them out of fear that it may jeopardize their legal status in the country and path to U.S. citizenship. Popular (and harmful) sentiments about immigration and race become enshrined in immigration policy, exacerbating health disparities and proliferating xenophobic ideas that affect Asian Americans, who are often perceived as perpetual foreigners regardless of their actual citizenship status.



Furthermore, my research suggests that stress from the long and arduous process of applying for an immigration visa, a process exacerbated by politically created immigration visa backlogs, contribute to health disparities among Asian immigrants in the U.S. We need immigration policies that are just and equitable, and that streamline the immigration application process.

Finally, accurate data infrastructure that can shed light on the discrimination Asians experience in housing, healthcare, education, and the workforce are essential. One of the major reasons we have not done more to address inequities for Asian groups is because we have not had the data to do so. Especially needed are data that disaggregate Asians into the various Asian ethnic subgroups. Asian subgroups are extremely diverse socioeconomically, linguistically, and culturally. Disaggregating Asian subgroup data will help to identify where the needs are in our diverse community and direct resources to those in need.

Asian Americans experience systemic racism in all sectors of society, but our needs are often overlooked. This Asian American and Pacific Islander Heritage Month, I implore you to consider how you can help be a better ally to the AAPI communities and play your part in supporting better systems that will address structural issues to create opportunity for all.

Brittany Morey is an assistant professor of public health at University of California, Irvine. Her research examines how social and physical environments contribute to health and health disparities among racial and ethnic minority populations, including immigrant groups.

[Newsroom Guidelines](#)

[News Tips](#)

[Contact Us](#)

[Report an Error](#)

 **The Trust Project**

Get out of your bubble.

**Sign up for our Opinionist newsletter to
get informed commentary.**

Enter your email to subscribe

SUBSCRIBE



Tags: [Guest Commentary](#)



**Brittany
Morey**

[VIEW COMMENTS](#)

Join the Conversation

We invite you to use our commenting platform to engage in insightful conversations about issues in our community. Although we do not pre-screen comments, we reserve the right at all times to remove any information or materials that are unlawful, threatening, abusive, libelous, defamatory, obscene, vulgar, pornographic, profane, indecent or otherwise objectionable to us, and to disclose any information necessary to satisfy the law, regulation, or government request. We might permanently block any user who abuses these conditions.

If you see comments that you find offensive, please use the “Flag as Inappropriate” feature by hovering over the right side of the post, and pulling down on the arrow that appears. Or, contact our editors by emailing moderator@scng.com.

