TIPS FOR ASIAN AMERICAN, NATIVE HAWAIIAN AND PACIFIC ISLANDER (AA NHPI) COMMUNITY ENGAGEMENT

This guide was developed courtesy of the Asian American, Native Hawaiian, and Pacific Islander (AA NHPI) Interest Group within the National Institutes of Health (NIH) Community Engagement Alliance (CEAL). The purpose of this document is to provide helpful insights to new CEAL researchers and community partners seeking to engage with AA NHPI populations. The team is led by Dr. Keawe Kaholokula (University of Hawai‘i at Manoa) and Dr. Grace Ma (Temple University) and includes members from the University of Arkansas for Medical Sciences, Johns Hopkins University, Mississippi State Department of Health, NICOS Chinese Health Coalition, NIH, NYU Grossman School of Medicine, Philly Counts, Scripps, SoCal Pacific Islander COVID-19 Response Team, UCLA, University of California at Riverside, University of California at San Francisco, University of Houston, University of North Texas Health Science Center. A special thank you to Kawaiopua Alo and Kawen Young (SoCal Pacific Islander Response Team), Mona AuYoung (Scripps) and Gloria Kim (UCLA) for sharing their insights, expertise, and recommendations for CEAL teams as well as others.

Small Communities Matter: Paving the Way to Widespread Usage of Correct Data Disaggregation Practices

Aggregating Asian Americans with Pacific Islanders glosses over the disparities and data nuances within smaller NHPI populations

- The federal Office of Management and Budget (OMB) designates that at minimum Asian American populations should be disaggregated from NHPI in data collection and reporting, even if the group is too small to perform statistical analysis
  - Need to continue working with federal agencies to ensure full implementation of OMB Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity – There is a need for data disaggregation at all levels (county, state, national)

- CEAL can identify common data metrics that can be used across CEAL teams for harmonization

- Consistency with disaggregation of AA, NH, PI groups: If NH and PI are included in a term (like AAPI), then there must be actual representation of NH and/or PI on the effort (team board, staff, document, etc.) in a manner that strongly connects to the community

- Consider separating out AA communities that may be disproportionately affected: For example, Filipinos, which have not been adequately represented, are disproportionately represented in high-exposure jobs like nursing and make up a larger share of COVID-related deaths than their proportion in the overall population.
• **Work with community leaders** on the ground to validate the quality of data collection and ensure attention to programmatic strategies that enable such
  - Expose discrepancies (such as when county vaccination numbers may not match up with community experiences)
  - Ensure inclusivity by avoiding references that specific populations are “too small” to analyze. If you are having trouble translating into preferred languages then seek support as is seen when translations into preferred languages are deemed “too hard” or “too expensive” – seek support

**Additional Resources**

**Central Repository of Information for AA NHPI Communities**
The CEAL AA NHPI Interest Group has collected and made accessible resources that can be shared on the CEAL website [here](#)