



NEWS RELEASE
For Immediate Release

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Kaiser Permanente study identifies cardiovascular health disparities in Asian American, Native Hawaiian and Pacific Islander communities

HONOLULU — May 31, 2025 — A new [study](#) supported by the National Heart, Blood and Lung Institute has found that some American Asian, Native Hawaiian, and Pacific Islander communities have up to 4-fold variation in heart disease risk compared to their non-Hispanic White counterparts. The study was published in the *Journal of the American Heart Association* and included data from more than 300,000 patients in Hawaii and California.

Researchers found that Native Hawaiian women had more than double the risk of stroke compared to non-Hispanic White women after accounting for age. In addition, patients who identified as multiracial, such as those with Pacific Islander and non-Hispanic White or Pacific Islander and Asian ancestry, had some of the highest rates of both heart disease and stroke.

“These are not just numbers. These are people in our communities,” said Dr. Yihe Daida, the study’s lead author and research investigator at Kaiser Permanente Hawaii. “This study tells us we need to do more to understand the unique health challenges faced by Native Hawaiians and multiracial individuals. Our communities deserve care that reflects who they are and what they experience.”

The study looked at adults ages 18 and older who received care from Kaiser Permanente Hawaii and the Palo Alto Medical Foundation. Researchers grouped participants into 12 different single and multiracial categories and examined their rates of first-time heart disease and stroke. They also looked at age, income and education and common health risk factors such as high blood pressure, diabetes, body weight, and smoking.

Even after accounting for those risk factors, some Asian American, Native Hawaiian and Pacific Islander groups still had higher rates of disease. Researchers believe that social and emotional stress, experiences of racism or discrimination, and cultural displacement may play a role.

“We know that lifestyle matters, but it is not the full story,” Dr. Daida said. “There may be deeper cultural, emotional, and social factors affecting people’s health that we cannot ignore.”

Key Findings from the Study:

1. **Native Hawaiian women had more than twice the risk of stroke** compared to non-Hispanic White women, after accounting for age.
2. **Patients identifying as multiracial Pacific Islander and non-Hispanic White or Pacific Islander, Asian, and non-Hispanic White had up to 86% higher risk of heart disease and 56% higher risk of stroke than Caucasian patients, respectively.**
3. **Asian Indian men had a 16% higher risk of coronary heart disease**, with the greatest disparities found in adults between 45 and 64 years old.
4. **Traditional risk factors**, such as body mass index, smoking, and diabetes, explained **some but not all** of the increased cardiovascular risk seen in Native Hawaiian, Pacific Islander, and multiracial groups.

Strategies Backed by Science

The findings come from the CASPER study, which stands for Cardiovascular Disease Among Asians and Pacific Islanders. It is one of the largest studies of its kind to look at disaggregated data within Asian American, Native Hawaiian, and Pacific Islander populations. These groups are often combined into a single category in research, making it difficult to see important differences in health outcomes.

“We cannot assume that health risks are the same across all communities,” said Dr. Daida. “This research helps us shine a light on where more support is needed.”

How the Study Will Help

Kaiser Permanente is using these findings to strengthen culturally tailored prevention efforts. The goal is to make sure that all communities, including Native Hawaiian, Pacific Islander, and multiracial groups, get the tools and support they need to protect their heart health.

“Our goal is not just to treat disease but to prevent it,” Dr. Daida said. “By identifying who is most at risk, we can intervene earlier to improve health outcomes.”

Kaiser Permanente’s Ongoing Commitment

In addition to advancing groundbreaking research like the CASPER study, Kaiser Permanente is deeply committed to supporting community health through strategic partnerships and local engagement to address the root causes of health disparities and improve outcomes for underserved populations.

Recognizing the value of addressing health disparities, Kaiser Permanente provided three years of grant funding, totaling \$255,000 to the American Heart Association of Hawaii to advance health equity for Pacific Islander communities to address food insecurity and hypertension in faith-based settings.

By training volunteers within trusted faith communities to provide blood pressure screenings and health interventions, this initiative has fostered community conversations with over 1,300 people on hypertension and nutrition and provided food vouchers and referrals to SNAP and WIC for eligible food support.

About Kaiser Permanente

Kaiser Permanente is committed to helping shape the future of health care. We are recognized as one of America's leading health care providers and nonprofit health plans. Founded in 1945, Kaiser Permanente has a mission to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 12.6 million members in 8 states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal Permanente Medical Group physicians, specialists, and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery, and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education, and the support of community health. For more information, go to about.kp.org.

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