

# Nutritional Status of Korean Americans: Implications for Cancer Risk

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**Purpose/Objectives:** To examine nutrient intake of Korean Americans, especially those foods and supplements implicated in cancer.

**Design:** Cross-sectional survey and descriptive analysis.

**Setting:** Chicago, IL.

**Sample:** 103 Korean Americans who were between 40 and 69 years of age.

**Methods:** An instrument, culturally and linguistically adapted from the Health Habits and History Questionnaire, was administered to assess nutrient intake from food and vitamin and mineral supplements. Bilingual interviewers collected data at respondents' homes.

**Findings:** Relative to their diet in Korea, more than one-third of the respondents reported an increase in the consumption of beef, dairy products, coffee, soda, and bread, as well as a decrease in the intake of fish and rice and other grains. Compared to the general U.S. population included in the National Health Interview Survey (NHIS), Korean Americans had a greater intake of carbohydrates and vitamins A and C and lower intake of total fat, cholesterol, and saturated fat. Moreover, the percentages of calories were higher from carbohydrates and lower from fat, sweets, and alcohol for Korean Americans than those reported by NHIS respondents. Gender, education, and marital status were significantly associated with nutrient intake. The use of daily vitamin and calcium supplements was similar between respondents and those from NHIS.

**Conclusions:** At their stage of cultural adaptation, the incorporation of a larger quantity of Western food items did not make for a less healthy dietary pattern among respondents. Data showed that Korean Americans continued to consume diets more consistent with Korean than with American food patterns, in as much as greater than 60% of their calories came from carbohydrates and about 16% of calories from fat. As a group, respondents met the recommended dietary guidelines for most nutrients, except for dietary fiber and calcium.

**Implications for Nursing Practice:** Variation in dietary intake by age, culture, gender, and years in the United States is well accepted. Effective cancer prevention and initiatives for dietary reform call for the incorporation of available research findings and considerable attention to data gaps regarding Korean Americans and other Asian Americans and Pacific Islander populations. Culturally competent, community-based programs should include the reinforcement of positive traditional dietary habits, encourage the adaptation of healthy Western food items, as well as assist minority populations in developing strategies that will effectively correct likely deficiencies in diet.

## Key Points . . .

- ▶ Culture has a considerable influence in dietary choice, and cultural variability related to dietary choice among Asian American and Pacific Islanders is understudied.
- ▶ Korean American respondents in this study continue to consume diets more consistent with Korean than with American food patterns.
- ▶ At their stage of cultural adaptation, incorporating Western foods did not make for a less healthy diet among Korean American respondents.
- ▶ Culturally competent, community-based educational programs should include the reinforcement of positive traditional dietary habits and encourage the adaptation of healthy Western food.

Over the past two decades, considerable attention has been given to the potential role of dietary factors in the etiology and prevention of cancer (American Cancer Society [ACS], 2000; Nixon, 1990; Ocke et al., 1995; Steinmetz, Potter, & Folsom, 1993). Evidence now suggests that about one-third of all deaths from cancer in the United States are, in part, associated with dietary intake (ACS; American Institute for Cancer Research [AICR], 1997; Doll, 1992; Willett, 1994). According to ACS and AICR, diet may be critical in preventing commonly seen cancers of the breast, colon, rectum, endometrium, and prostate. Consequently, diet is considered the most important modifiable cancer risk factor for all nonsmoking Americans (ACS).

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