

More acculturated Asian Americans consume significantly more (+14%) *ultra-processed foods*.

Characterizing Ultra-Processed Food Consumption Among Asian Americans from NHANES (2011-2018)

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Introduction

Why focus on Asian Americans (AAs)?

- AAs are the *fastest growing* racial and ethnic minority group in the United States.
- AAs suffer a significant non-communicable disease (NCD) burden (e.g., diabetes, cardiovascular disease, cancer).

Why study ultra-processed foods (UPFs)?

- Diet is a *strong, modifiable* risk factor for NCDs.
- UPFs contain added salt, sugars, oil, unhealthy fats, coloring, sweeteners, and emulsifiers (e.g., flavored yoghurt, frozen pizza) and have been linked to an *increased risk* of NCDs.
- UPF consumption has not yet been characterized among AAs.

Research Question:

Among AAs, from 2011-2018, what was the percentage of diet derived from UPFs, and how does this consumption differ by sociodemographic, socioeconomic, self-reported health, and acculturation characteristics?

Methods

Study Design: Cross-sectional secondary analysis

Data: National Health & Nutrition Examination Survey (NHANES)

Sample: 2404 AAs (age >18) with NOVA data

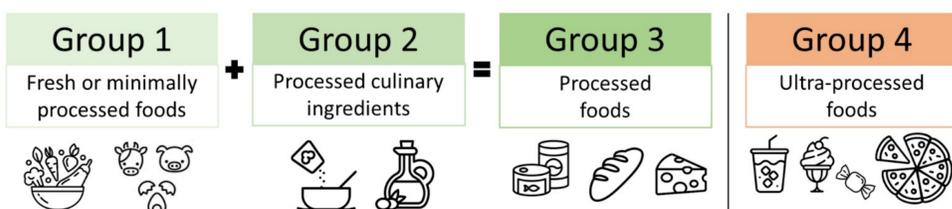
Acculturation Measures:

- Nativity status (US-born versus foreign-born)
- Nativity status and years lived in the US (<10, 10-19, ≥20 years)
- Language spoke at home (English only, 'mixed', non-English only)
- ↳ **acculturation index** (least, somewhat, and most acculturated)

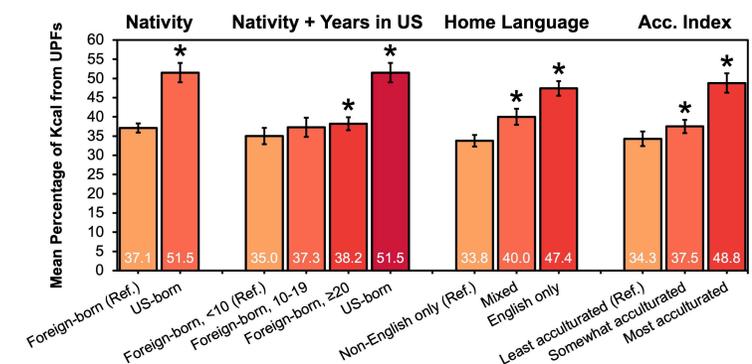
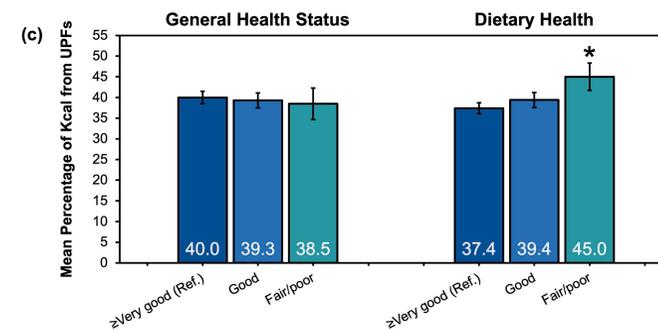
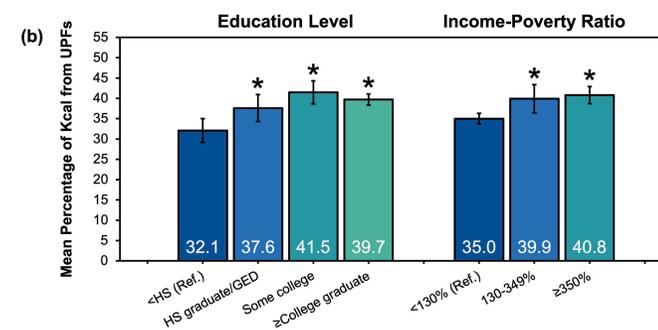
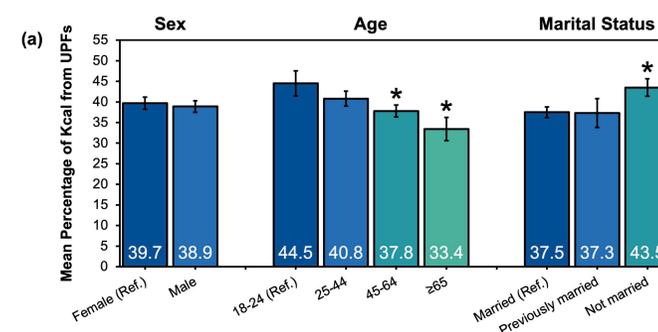
Analysis: Bivariate analysis, multivariable linear regression

Outcome of Interest: Percentage of diet derived from UPFs

NOVA Framework:



Results



UPF consumption is higher among:

- **US-born AAs and foreign-born AAs living in the United States <10 years** (+11.9% and +14.8%)
- AAs who **speak English only** in their home (+12%)
- **Most acculturated AAs** (+14%)

Discussion

Strengths:

- NHANES is a *nationally representative* dataset which oversamples AAs
- NOVA is a cross-cultural framework
- Multiple measures of acculturation increase rigor of analyses

Limitations include a lack of access to disaggregated AA subgroup data as well as generational status of participants, potential recall/social desirability bias, and a limited understanding of causation.

Conclusions

- Higher acculturation was linked to greater UPF consumption among AAs
- We need dietary intervention efforts targeted at *more acculturated* AAs

Next Step

- AA subgroup heterogeneity calls for disaggregated data analysis.

UPF consumption:

- *Decreased* with age
- *Increased* with **education level, income-poverty ratio**
- *Increased* as **dietary health worsened**