

**Abstract**

**Title:** [Unraveling the Determinants to Colorectal Cancer Screening Among Asian Americans: a Systematic Literature Review.](https://urldefense.proofpoint.com/v2/url?u=http-3A__www.ncbi.nlm.nih.gov_pubmed_28779479&d=DwMEaQ&c=clK7kQUTWtAVEOVIgvi0NU5BOUHhpN0H8p7CSfnc_gI&r=iFavz6KbtuaSFObSvuCXnLmt5VbY86Jha1tKLeBFedI&m=dXYz1WKbzCe0vcNYG_i4bRSO8lJFLCgwh-4bFmd1z84&s=7HqA-tPEHBy8wVZfXE_RY5HKJ2OO_0PdUeAbPk29nFk&e=)

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**Abstract:**

Colorectal cancer (CRC) is one of the top three cancers experienced among Asian American (AA) men and women. One effective way to decrease incidence and mortality from CRC is the adherence of regular CRC screening; however, AA continue to receive the lowest screening rates compared to other racial/ethnic groups. When disaggregating this heterogeneous population, further disparities exist between subgroups. Examination of facilitators and barriers to cancer screening among AA subgroups is fairly recent and the synthesis of this information is limited. As such, a systematic review was conducted examining the facilitators and the barriers among Chinese, Filipino, Korean, and Japanese Americans using a systematic literature review method. The Health Belief Model served as the primary theoretical framework for this study and used to organize and synthesize the facilitators and barriers to CRC screening. In total, 22 articles yielded 29 examinations of each of the AA subgroups. Different facilitators and barriers to screening uptake for each subgroup were revealed; however, consistent across all the subgroups was physician recommendation as a facilitator and participants' unawareness of screening tests and those stating having no problems/symptoms of CRC as a barrier across screening modalities. Tailored approach in outreach and intervention efforts are suggested when achieving to improve CRC screening in AA ethnic subgroups.