SOC 205 Lecture 19  
Race and Health Issues: Asian and Pacific Islander Americans  

Demographics

• It is estimated that by 1992, the Asian and Pacific Islander (APIA) population reached 8.45 million by the middle of 1992, making that population about 3.3% of the total U.S. population.
• The level shown above reflects an increase of 1.18 million from 1990. This trend is indicative of the fact that APIAs are the fastest growing segment of the American population.
• The census has projected that by the year 2050, the APIA population will grow to about 41 million, or 10.7% of the total population.

Ethnic Variability

• To discuss the APIA population as one group is somewhat misleading. That group is composed of a number of different ethnic groups that vary in terms of culture, immigration patterns, and other factors.
  • For example, many Chinese, Japanese and Filipino people living in the U.S. are descendants of those who immigrated to the U.S. several generations earlier.
  • By comparison, many of those from Southeast Asia (Vietnam, Cambodia, Laos) immigrated fairly recently (mid 1970’s).

Ethnic Variability (continued)

• Under the heading of Asian and Pacific Islander Americans fall people who have originated from 28 Asian countries and 25 Pacific Island cultures.
• The largest ethnic group within the APIA population is Chinese, followed by Filipino, Japanese, and Indian.
• In sum, the extreme heterogeneity within the APIA population makes it difficult to make summary statements about the population as a whole.

Geographic Distribution

• As was the case for Hispanics, APIAs tend to be concentrated in a few regions around the country.
  • In 1991, 58.5% of this population lived in the west, especially in California (39.1% of APIAs).
  • Other states with high numbers of APIAs include New York (9.5%) and Hawaii (9.4%).
• APIAs tend to live in metropolitan areas. In 1990,
  • 49% lived in suburbs
  • 45% lived in central cities
Immigration and Nativity

• Much of the growth in the APIA population over the period from 1971 to 1990 was due to immigration. During this time, about 4.45 million people immigrated to the U.S. from Asia.
• Between 1980 and 1990, immigration accounted for about 71% of the growth in this population.
• Due to these immigration patterns, compared to the overall population, a very large part of the APIA population is foreign born. This level differs by ethnic group.

Socioeconomic Status

• What is the myth of the “model minority” as it applies to APIAs?
  • According to Lin-Fu, the myth implies, “that APIAs are a homogenous population all of whom are highly successful, have no particular health problems or health care needs, and do not require special considerations as do other minorities.”
• Why is this myth incorrect?
  • There is great variability within the APIA population that renders such a generalization inaccurate.

Socioeconomic Status

(continued)

• Education
  • About 81% of APIAs over the age of 25 had 4 years of high school education or more compared to about 78% of the total population. These rates were much lower among certain APIA subgroups (e.g., Laotians and Cambodians)
  • About 39% of that population had 4+ of college compared to only 21.5% of the total population. (?)
  • Further, the rate of APIAs with 0-4 years of elementary education was about twice that of the total population.
  • In sum, APIAs tend to be overrepresented at both ends of the education scale.

Socioeconomic Status

(continued)

• Income
  • In 1990, the median earnings of a year-round, full time APIA worker were $25,193 compared to $25,511 for the total population.
  • Other evidence indicates that at specific levels of education, APIAs tend to earn on average somewhat less than the total population.
One piece of evidence that is often used to substantiate the myth of APIAs as a model minority is that in 1990, their median family income was $42,245 compared to $35,353 for the total population. What factors account for this difference?

- APIA families typically have more wage earners
- Many APIA families live in places with higher median incomes.
- Fewer APIA families were headed by female householders.

Socioeconomic Status
(continued)

- Poverty
  - As was mentioned previously, ethnic groups within the APIA population tend to vary greatly, even in terms of SES.
  - These differences are evident in terms of the percentages of those living in poverty by ethnic group.
  - In 1989, the total Asian population had a poverty rate of about 14%, but among certain groups (e.g., Hmong, Cambodians), the rate was much higher.

Health Data
- In discussing health differences between racial groups, it is commonly accepted that there are problems with data for APIAs. These problems are similar to the classification problems we discussed for Hispanics. What are the general issues here?
  - In general, the data show that APIAs tend to have better health and mortality outcomes than the general population.
  - Once the data are adjusted to account for the classification problems, APIAs still tend to have better outcomes, but the differences are not as great.

Health Status
- On average, APIAs tend to have the lowest death rates of any group in the population.
- Compared to whites of both genders, APIAs have lower death rates at all age levels.
- While APIAs are less likely to die at all ages, the rates of death due to certain causes are similar to those for whites.
- Life expectancy among APIAs is also higher than that for other Americans.
- Infant mortality rates also tend to be lower among APIAs.
  - However, these rates vary greatly by ethnic group.

Discussion Question
- What factors might account for the lower levels of mortality among certain APIA groups?
  - Selection
  - SES
  - Acculturative stress
  - Diet
• Health behaviors
• Maintenance of ethnic traditions
• Systems of social support

Discussion Question
• What barriers might exist in terms of providing adequate health care to APIAs? Further,
• In order to overcome these barriers, will we need to enact culturally specific interventions or strategies?