



MINORITY HEALTH FACTS

Asians & Pacific Islanders

IN RHODE ISLAND

2011 MINORITY HEALTH FACT SHEETS PREPARED BY:

**THE OFFICE OF MINORITY HEALTH
DIVISION OF COMMUNITY, FAMILY HEALTH,
AND EQUITY**

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Introduction

This report provides information about major health indicators for the Asian and Pacific Islander populations living in Rhode Island. An Asian or Pacific Islander (API) is defined by the Office of Management and Budget (Directive 15, rev 1997) as a person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands. This area includes, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, Laos, Vietnam, and Samoa. A White person is defined as a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

This report presents data on socio-economic characteristics, morbidity and mortality, behavioral risks, infectious diseases, maternal and child health, and access to care among Asian and Pacific Islander residents in comparison to the White and the overall state populations. Please note that race and ethnic status for some Department of Health data sets are based on self-identification. Due to the nature in which data are collected, some statistics may be reported only for Asians rather than both Asians and Pacific Islanders. All groups reported in this fact sheet are non-Hispanic unless otherwise indicated. The tables present point estimates which should not be used to imply statistical significance.

Population Demographics

According to the US Bureau of the Census, 2010 Census, there are 30,293 Asians and Pacific Islanders living in Rhode Island. Approximately 2.7% of the Rhode Island population is of Asian descent, and about 0.03% is of Pacific Islander descent. 61.9% of the Asian and Pacific Islander population in RI was born in a foreign country. Estimates from the 2007–2009 American Community Survey data indicate that the median age for the Asian population is 30.3 years whereas the overall state median age is 39.4 years. About 94% of the Asian population is age 65 or younger, while 86% of the overall state population is age 65 or younger.

Socio-Economic Characteristics

The following are socio-economic characteristics of Rhode Island's Asian and Pacific Islander population. These characteristics may affect the health of the Asian and Pacific Islander residents living in Rhode Island. Except for the high school graduation rate, the socio-economic data source for Asian and Pacific Islander, White, and overall state populations is based on the 2007–2009 American Community Survey 3-Year Estimates.

- The percentage of Asians and Pacific Islanders living below the poverty level is slightly higher than that of the overall state population and almost two times that of the White population.
- The Asian population has a lower unemployment rate than all other minority groups and the overall state population.
- The median household income for Asians and Pacific Islanders is about \$56,700. That is \$2,000 above the state median and about \$2,800 less than that for the White population.

TABLE A: SOCIO-ECONOMIC DATA

	ASIAN & PACIFIC ISLANDER ¹	WHITE ¹	STATE ¹
Percentage of population living in poverty*	15.9%	8.2%	11.9%
Percentage of population that is unemployed	4.7%	4.4%	5.2%
Median household income**	\$56.7K	\$59.5K	\$54.7K
High school graduation rate ²	89%	91%	89%

Sources: 1. US Bureau of the Census, 2007–2009 American Community Survey 3-Year Estimates
2. Rhode Island Department of Elementary and Secondary Education, 2006–2007 School Year

*The 100% federal poverty level for a family of 4 in 2008 was \$21,200.

**The median income is the middlemost amount which divides the incomes into two equal groups, half having incomes above the median and half having incomes below the median. Household income takes into account any wage earners who share a household regardless of relation.

Behavioral Risk Factors

The percentage of the Asian and Pacific Islander population that is overweight is substantially lower than that of the White and the overall state populations.

The percentage of Asians and Pacific Islanders who participate in light to moderate physical activity for at least 30 minutes a day is less than that of the White or the overall state populations.

Mortality

For the period of 2005–2009, cancer, heart disease, stroke, and unintentional injuries were among the four leading causes of death for the Asian and Pacific Islander and the overall state populations.

Chronic Diseases

Racial and ethnic disparities exist in health outcomes related to chronic diseases such as asthma, diabetes, heart disease, and stroke. For detailed reports of the burden of these chronic diseases on the health of Rhode Island residents and the disproportionate impact on the state's minority residents, visit the Rhode Island Department of Health website at www.health.ri.gov

Infectious Diseases

The rate of chlamydia is approximately 2.5 times higher in the Asian and Pacific Islander population than in the White population.

Between 2005 and 2007, the rate of tuberculosis cases was six times higher for Asians than it was for the overall state population and 17 times higher than for the White population.

There were no known cases of tuberculosis in the Pacific Islander population.

	ASIAN & PACIFIC ISLANDER	WHITE	STATE
Percentage of adult population who participates in light to moderate physical activity for at least 30 minutes per day (2003, 2005, 2007)	38.1	51.9	50.3
Percentage of adult population (20 yrs+) who is overweight/obese ¹ (2005–2008)	36.4	61.2	61.4
Percentage of adult population (20 yrs+) who is obese ² (200–2008)	12.2	21.6	22.2
Percentage of adult population who consumes at least 5 daily servings of fruits and vegetables (2003, 2005, 2007)	27.6	28.9	28.5
Percentage of adult population who smokes cigarettes (2005–2008)	12.4	18.6	18.4
Percentage of adult population who consumed 5+ drinks on one or more occasions in past month (binge-drinking) (2005–2008)	7.4	18.2	17.3

Source: Rhode Island Department of Health, Behavioral Risk Factor Surveillance System

1. Overweight/obesity defined by the Centers for Disease Control and Prevention (CDC) as body mass index (BMI) ≥ 25

2. Obesity defined by CDC as BMI ≥ 30

*According to the 2010 Census,
there are 30,293 Asians and Pacific Islanders
living in Rhode Island.*

DISEASE	ASIAN & PACIFIC ISLANDER	WHITE	STATE
1	Cancer	Heart Disease	Heart Disease
2	Heart Disease	Cancer	Cancer
3	Stroke	Chronic Respiratory Diseases	Chronic Respiratory Diseases
4	Unintentional Injuries	Stroke	Stroke
5	+	Unintentional Injuries	Unintentional Injuries

Source: Rhode Island Department of Health, Office of Vital Records, RI Resident Deaths, ICD-10 Codes, 2005–2009

+ Data too small for meaningful analysis

DISEASE	ASIAN & PACIFIC ISLANDER	WHITE	STATE
Gonorrhea ¹	24.8	19.7	38.0
Chlamydia ¹	368	146	300
Tuberculosis ²	22.4	1.3	3.7
HIV/AIDS ³	+	11.0	17.9

Sources: Rhode Island Department of Health, Division of Infectious Disease and Epidemiology

1. Sexually Transmitted Diseases (STD) Surveillance Data, 2007

2. Tuberculosis Database, 2005–2007

3. HIV/AIDS Surveillance Data, 2007

+ Data too small for meaningful analysis

	ASIAN & PACIFIC ISLANDER	WHITE	STATE
Percentage of pregnant women with delayed prenatal care ^{1,~}	25.4	13.5	15.5
Rate of births to teens ages 15-19 (per 1000 teens) ^{1*}	22.9	27.1	28.3
Percentage of births to mothers with less than 12 years of education ¹	14.3	14.2	16.6
Percentage of infants with low birth weight (<5.5 lbs) ¹	9.0	7.4	8.0
Infant mortality rate (per 1000 live births) ²	10.4	5.5	6.3
Percentage of children in poverty (<18 years old) ³	17.1	9.1	17.1

Sources: 1. Rhode Island Department of Health, Center for Health Data and Analysis, 2005–2009
2. Rhode Island Department of Health, Center for Health Data and Analysis, 2005–2009 (births to mothers who are Rhode Island residents)
3. US Bureau of the Census, 2007–2009 American Community Survey 3-Year Estimates

* Note: Teens aged 15-19: Rates are calculated using 2006–2008 American Community Survey Estimates; all race categories, excluding Whites, include Hispanic ethnicity.

~ Delayed prenatal care is defined as beginning prenatal care in the second or third trimester or receiving no prenatal care at all.

	ASIAN & PACIFIC ISLANDER	WHITE	STATE
Percentage of adults younger than 65 years old who reported having no health insurance (2005–2008)	5.4	6.4	9.3
Percentage of adults who reported having no specific source of ongoing healthcare (2001, 2006)	+	10.0	10.9
Percentage of adults who had no routine checkup within the past year (2005–2008)	31.5	19.5	20.2
Percentage of women aged 40+ who reported not receiving a mammogram in the past 2 years (2006, 2008)	+	16.4	16.7
Percentage of women who reported not having a pap test in the past 3 years (2006, 2008)	+	12.7	12.9
Percentage of adults who reported being unable to afford to see a doctor at least once in the past year (2005–2008)	16.5	7.8	10.0

Source: Rhode Island Department of Health, Behavioral Risk Factor Surveillance System

+ Sample too small for meaningful analysis

	ASIAN & PACIFIC ISLANDER	WHITE	STATE
Percentage of youth who reported using marijuana one or more times during the past 30 days (2007, 2009)	+	26.8	24.9
Percentage of youth who reported engaging in binge drinking one or more days in the past 30 days (2007, 2009)	28.0	40.6	38.6
Percentage of youth who reported having engaged in sexual intercourse (2007, 2009)	35.4	42.3	45.0
Percentage of youth who reported smoking cigarettes or cigars or using smokeless tobacco (2007, 2009)	+	12.3	11.4
Percentage of youth who reported not engaging in physical activity for 60 minutes or more on 5 or more days in the past 7 days (2007, 2009)	63.1	53.5	56.9
Percentage of youth who reported never or rarely wearing a seatbelt when in a vehicle driven by someone else (2007, 2009)	17.0	10.5	13.2

Source: Rhode Island Department of Health, Behavioral Risk Factor Surveillance System

+ Sample too small for meaningful analysis



Maternal and Child Health

The overall state and the White populations have more favorable maternal and child health outcomes than the Asian and Pacific Islander populations.

The rate of births to teens for the Asian and Pacific Islander populations is lower than that for the White and overall state populations.

The percentage of Asian and Pacific Islander women who receive delayed prenatal care is almost two times greater than that of the White and the overall state populations.

Access To Healthcare

A higher percentage of Asians and Pacific Islanders report having no routine check-up within the past year compared to the White and the overall state populations.

Nearly twice as many Asian and Pacific Islanders report that they could not afford to see a doctor within the past year than the White population.

Youth Risk Behavior

A lower percentage of Asian and Pacific Islander youth engage in binge drinking than their peers in the White and overall state populations.

Nearly twice as many Asian and Pacific Islander youth report never or rarely wearing a seatbelt when in a car driven by someone else compared to the White population.