National Asian and Pacific Islander Month

History

National Asian and Pacific Islander Heritage Month began as Asian/Pacific American Heritage Week, first observed in 1979 under President Jimmy Carter, who noted the “enormous contributions to the sciences, arts, industry, government and commerce” made by Asian and Pacific Islanders. In 1990, President George H.W. Bush expanded the celebration to cover the whole month of May. May was chosen by the organizers in recognition of May 7, 1843, the date the first Japanese immigrants arrived in the United States, and in recognition of May 10, 1869, which marked the completion of the transcontinental railroad, which would not have been possible without the contributions of Chinese-Americans.

Asian and Pacific Islanders in the U.S.

Asian and Pacific Islanders have a history in America that stretches back hundreds of years. The first record of Asians in North America dates to 1587, when Filipino sailors came to what is now California. The first Chinese people recorded in the United States were three sailors who came to Baltimore in 1785 as part of an interracial shipping crew.

U.S. Population: Asian Alone or in Combination with Other Races

Asian and Pacific Islanders are a diverse group, making up more than 50 ethnic groups and speaking more than 100 languages. Asian and Pacific Islanders in the United States increased by 45 percent between 2000 and 2010, making them one of the fastest growing minority groups in the country.

Asian and Pacific Islander population by ethnicity

- Asian Indian: 25.2%
- Chinese: 20.6%
- Korean: 15.5%
- Filipino: 14.0%
- Vietnamese: 7.5%
- Other: 17.2%

in Maryland:
- Asian Indian: 24.7%
- Chinese: 24.8%
- Korean: 12.8%
- Filipino: 10.8%
- Vietnamese: 7.4%
- Other: 19.3%

in Washington, D.C.:
- Asian Indian: 28.8%
- Chinese: 15.4%
- Korean: 5.9%
- Filipino: 20.2%
- Vietnamese: 13.1%
- Other: 16.6%

in Florida:
- Asian Indian: 77%
- Chinese: 75%
- Korean: 70%
- Filipino: 43%
- Vietnamese: 15%
- Other: 7%

Not surprisingly, LEP rates differ by ethnic group, with 53 percent of Vietnamese and 2 percent of native Hawaiians considered LEP.

Speak a Language Other than English at Home

Asians are more likely than any other minority groups to speak a language other than English at home.

Rates of Limited English Proficiency

- Roughly a third of Asian and Pacific Islanders have limited English proficiency (LEP), significantly more than the numbers for the U.S. population as a whole.
- Not surprisingly, LEP rates differ by ethnic group, with 53 percent of Vietnamese and 2 percent of native Hawaiians considered LEP.

34% for Asian and Pacific Islanders
9% for total US Population

15% White

77% Asian alone
75% Latino
70% Asian “alone or in combination with other races”
43% Native Hawaiians and Pacific Islanders

#HopkinsBetterTogether
Asian and Pacific Islander Innovators

Asian and Pacific Islanders have made tremendous contributions to medical science and innovation.

**Dr. Anandi Gopal Joshi**, born in India, was the first Hindu and first Indian female doctor to receive a medical degree in the United States, graduating at 20 years old in 1886.

**Dr. Min Chueh Chang**, born in Taiyuan, China, helped develop the birth control pill and was a pioneer of in vitro fertilization who paved the way for the birth of “test-tube babies.”

**Dr. David Ho**, a Taiwanese-American physician, developed foundational research for the modern “cocktail” antiretroviral therapy, of which Dr. Ho was an early champion.

**Dr. Katherine Luzuriaga**, a Filipino-American physician and pediatric immunologist, who, in conjunction with Johns Hopkins virologist Deborah Persaud, was recognized for work leading to the “functional cure” of an HIV-positive infant.

Improving Asian Health

Cancer is the leading cause of death in Asians, unlike most demographic groups, with kidney cancer rates nearly three times and stomach cancer rates two times those found for non-Hispanic whites. The Asian American Cancer Program at the Johns Hopkins Bloomberg School of Public Health aims to reduce that disparity, using community-based participatory research to improve liver, breast and cervical cancer screening rates in the Asian community.

Overcoming a History of Persecution

Throughout American history, Asian and Pacific Islanders have been both a highly desired and deeply debased immigrant group, responsible for some of the nation’s greatest achievements and the targets of the nation’s worst instincts. Victims of both individual and institutional prejudice, Asians have faced a long history of inequality and exclusion. The Chinese Exclusion Act of 1882 was the only piece of immigration legislation to ever exclude a group based upon their nationality. Similarly, the World War II internment of Japanese-Americans in 1942 represented the only time since the end of slavery that a portion of the population was imprisoned solely because of their ethnicity. The vast majority of the 117,000 people interned were American citizens, and 17,000 of them were children under the age of 10.
Health Disparities Affecting AAPI in the United States

The National Institute on Minority Health and Health Disparities (NIMHD), an institute of the National Institutes of Health (NIH), the nation’s medical research agency, focuses scientific research on the health inequities that Asians face regarding cancer, chronic diseases (heart disease, hypertension and diabetes) and mental health, as well as inequities among the elderly. It is the only U.S. population with cancer as the leading cause of death. In particular, Asians have the highest incidence and mortality rates of liver and stomach cancers — the most preventable cancers — largely due to high prevalence of related infections such as hepatitis B. In addition, Asians have the lowest cancer screening rates and are typically diagnosed at a later stage compared with other racial and ethnic groups.

NIMHD has been a leader in increasing the scientific community’s focus on nonbiological factors such as socioeconomics, politics, discrimination, culture and environment in relation to health disparities, with initiatives providing scientific knowledge and designing interventions to improve health outcomes to reduce and ultimately lead to the elimination of health disparities. Visit their website, nimhd.nih.gov, for more information on their recent introduction of the NIH Minority Health and Health Disparities Strategic Plan 2021–2025.

Source: Families USA
https://familiesusa.org/resources/asian-american-pacific-islander-health-disparities-compared-to-non-hispanic-whites/
Autoimmune Disease Spotlight: Lupus

The CDC conducted multiple population-based lupus patient registries to collect information on people diagnosed with the disease. The studies found a disproportionate number are women and people of color — particularly Asian and Hispanic women — compared with non-Hispanic white women.

Lupus is a complex, chronic autoimmune disease that triggers inflammation in different tissues of the body. The disease causes the body’s immune system to attack virtually any organ or tissue with severity ranging from mild to life-threatening. Affecting up to 1.5 million people across the U.S. and people of all ages, women of childbearing ages (15–44) are at greatest risk and men at lower risk.

Healio, a clinical information website, highlights an article published in Arthritis Care & Research indicating lupus is more severe in U.S. Asian populations compared with white people, particularly among Filipino individuals at young ages. The importance of increased research will allow clinicians to detect more severe disease earlier while caring for Asian cohorts, thus improving outcomes. Further defining unique disease patterns, genetic influences and treatment responses among Asian subgroups may help to identify patients at greatest risk for disability and death.

1 Lupus among Hispanic and Asian Persons cdc.gov/lupus/features/lupus-asians-hispanics.html

Resources

Asian Pacific American Heritage Month
asianpacificheritage.gov/
The Asian Pacific American Institute for Congressional Studies spaics.org/hate-crime-resources
National Association of Asian American Professionals naaap.org/events/
Native Hawaiian/Other Pacific Islander minorityhealth.hhs.gov/omh/browse.aspx?lvl=3&lvlid=65

Johns Hopkins Resources

Asian American Cancer Program at the Johns Hopkins Bloomberg School of Public Health jhsph.edu/research/centers-and-institutes/asian-american-cancer-program/index.html