

CALIFORNIA: ASIAN AMERICANS, NATIVE HAWAIIANS & PACIFIC ISLANDERS

DID YOU KNOW?

♦ California has 3,814,474 Asian American and Pacific Islander (AAPI) residents, making up 11% of the state's total population.

♦ During the past decade, California's AAPI population grew 34% from 2.8 to 3.8 million. Its Asian population** grew by 56%, and its Native Hawaiian and Other Pacific Islander (NHOPI) population** grew by 105%.

♦ Filipinos are California's largest AAPI ethnic group, followed by the Chinese†† and Vietnamese (see table right).

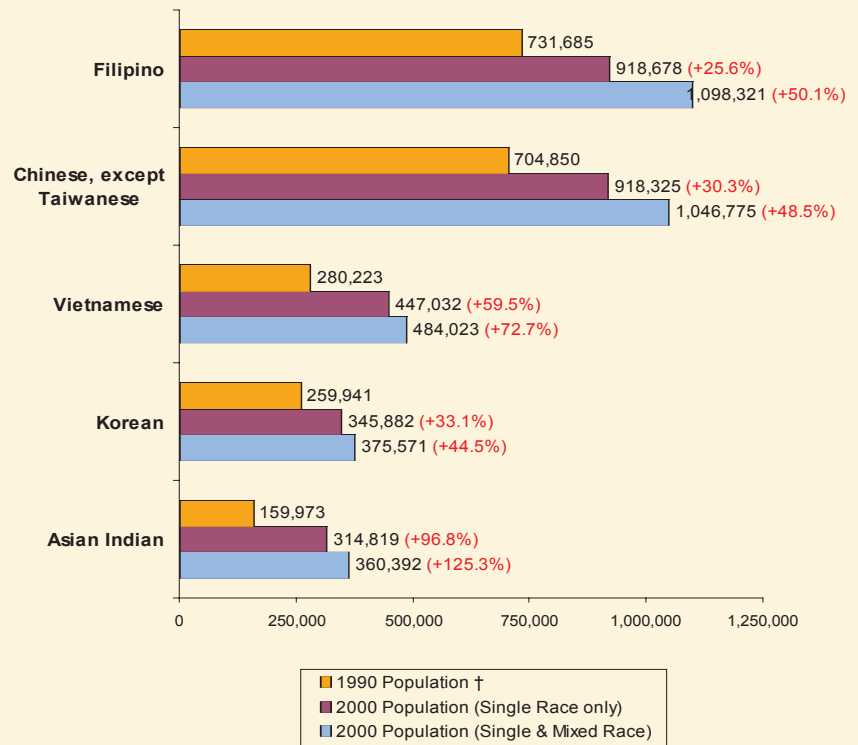
♦ Asian Indians, Vietnamese, Hmong, Koreans, and Chinese†† are the fastest growing AAPI populations in California.

♦ There are 4 AAPCHO community health centers located in California serving over 48,700 AAPI patients annually (2003 UDS): Asian Health Services (Oakland), Asian Pacific Health Care Venture (Los Angeles), North East Medical Services (San Francisco), and Operation Samahan Health Clinic (National City).

♦ 8.9 million of California's residents were foreign-born, of which 2.4 million or 28%, are from Asia. The Philippines, China, Vietnam, Korea, and India were among the countries with the most migrants.

CALIFORNIA'S TOP AAPI POPULATIONS

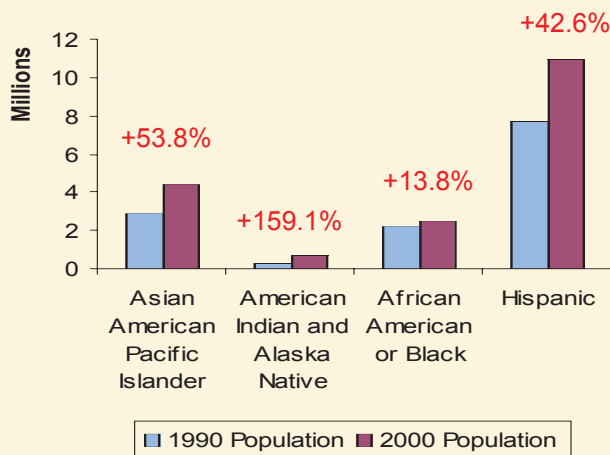
RANKED BY 2000 SINGLE RACE POPULATION
(Census 2000)



CALIFORNIA'S MINORITY POPULATIONS

(Single Race Data, Census 1990, 2000)

Total California state population in 2000: 33,871,648



AAPIs** are the largest minority population in California, increasing 54% in the last decade. Among AAPI groups, Asian Indians and Pacific Islanders††† have the highest growth rates, increasing 125% and 119%, respectively.

CALIFORNIA'S 1990-2000

POPULATION CHANGE BY COUNTY

Ranked by 2000 AAPI Alone Population

(Census 1990, 2000)

County	1990 Single Race Population †	2000 Single Race Population**	Change (1990-2000)*	2000 Single & Mixed Race Population**	Change (1990-2000)**
Los Angeles	954,485	1,164,553	22.0%	1,294,533	35.6%
Santa Clara	261,466	435,868	66.7%	474,218	81.4%
Orange	249,192	395,723	58.8%	440,577	76.8%
Alameda	192,554	304,360	58.1%	344,497	78.9%
San Diego	198,311	263,363	32.8%	319,870	61.3%
San Francisco	210,876	243,409	15.4%	259,750	23.2%
San Mateo	109,281	151,087	38.3%	170,408	55.9%
Sacramento	96,344	142,163	47.6%	173,237	79.8%
Contra Costa	77,012	107,459	39.5%	129,190	67.8%
San Bernardino	59,201	85,327	44.1%	106,702	80.2%

* Single Race. **In combination with one or more races and/or detailed race group.

† 1990 Census did not distinguish between single and mixed race categories. †† Except Taiwanese.

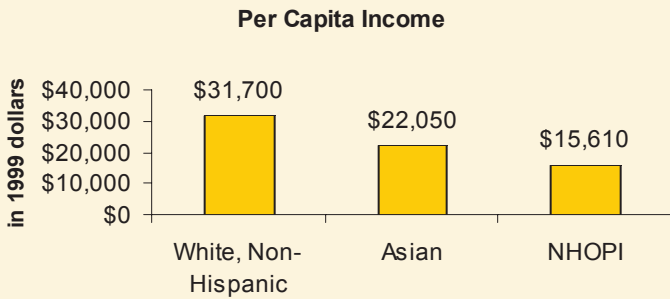
††† Pacific Islander category does not include Native Hawaiians.

Population information is based on U.S. Bureau of the Census. (www.census.gov)

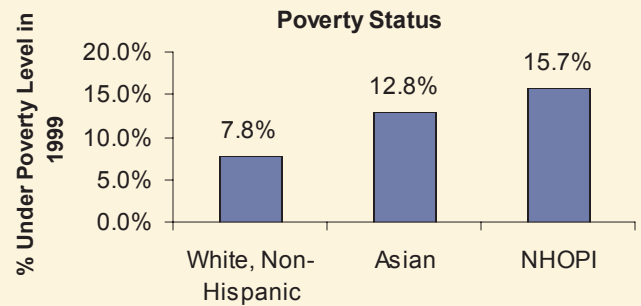
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SOCIO-ECONOMIC INDICATORS

SOURCE: CENSUS 2000 (UNLESS OTHERWISE NOTED)



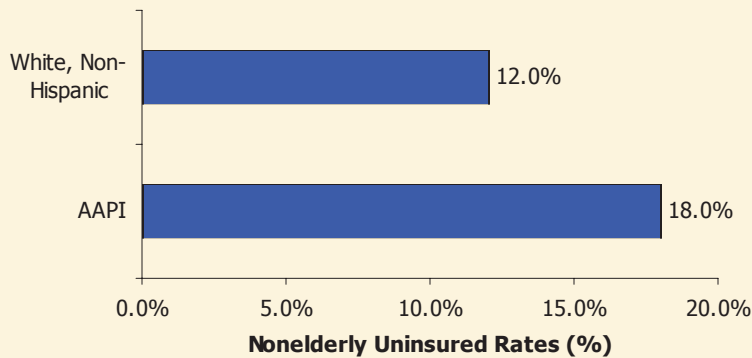
Per capita income for AAPIs is lower than Non-Hispanic Whites in California. However, income varies significantly by AAPI ethnic group, with Hmong and Cambodians having the lowest income at \$5,263 and \$8,534, respectively.



A larger proportion of AAPIs compared to Non-Hispanic Whites were in poverty in California. Additionally, poverty rates vary significantly by AAPI ethnic group, with Hmong and Cambodians having the highest poverty rates at 53% and 41%, respectively.

UNINSURED RATES

(Current Population Survey, 2002)



The uninsured rate is 6% higher for AAPIs as compared to Non-Hispanic Whites in California. The insurance disparity may be explained, in part, by differences in income, employment, and access to insurance programs.

LINGUISTIC ISOLATION

79% of AAPIs in California age 5 and older speak a language other than English at home. Of these, 52% rated their ability to speak English as less than “very well.”

HEALTH STATUS INDICATORS

The leading cause of death for AAPIs in California is cancer, with liver cancer being 5 times more prevalent for AAPIs as a group than for Whites (California Cancer Registry, 2000). AAPIs in California are also at a greater risk for cerebrovascular disease than other ethnic groups (Center for Health Statistics, 1998). Additionally, tuberculosis affects AAPIs in California at a rate of 34 per 100,000 compared to 2 per 100,000 for Whites (Division of Communicable Disease Control, CA Department of Health Services, 2001).

TERMINOLOGY

“Asian” refers to people having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including Chinese, Filipino, Japanese, Asian Indian, Korean, Vietnamese, Cambodian, Laotian, Thai, and others. “NHOPI” refers to Native Hawaiians and Other Pacific Islanders

People having origins in any of the original peoples of Guam, Samoa, or other Pacific Islands are referred to as “Pacific Islander,” including Polynesian, Samoan, Tongan, Micronesian, Guamanian or Charmorro, Melanesian, Fijian, and Other Pacific Islander not specified. Those persons having origins in the original peoples of Hawaii are referred to as “Native Hawaiian.” Unless indicated, “Pacific Islander” includes Native Hawaiians.

“White” refers to people having origins in any of the original peoples of Europe, the Middle East, or North Africa.

The data for different censuses are not directly comparable due to changes made to each census; thus caution must be used when interpreting changes in racial composition over time. For instance, the 2000 Census incorporated more race categories, modified existing categories, and offered respondents the option to mark one or more races. For more information, visit www.census.gov.