

Resource Paper

Measuring State-Level Asian American and Pacific Islander Health Disparities: The Case of Illinois

Laurent S. Tao, Jini Han, and Ami M. Shah

Abstract

Illinois is home to the sixth largest Asian American and Pacific Islander (AAPI) population nationwide. AAPIs suffer higher incidence, morbidity, and mortality rates from certain cancers, infectious, and chronic diseases. Despite the exponential growth of the AAPI population, few state-level data sources exist that provide detailed and accurate information regarding AAPI health disparities and needs. Efforts to improve health care for this population will require improved data collection and funding for research on AAPI ethnic groups.

Introduction

In the United States racial and ethnic disparities in health status, disease burden, morbidity, and mortality persist (Department of Health and Human Services 2000a). A recent report to the Department of Health and Human Services (DHHS) concluded that while overall health status may be improving for all racial and ethnic groups, some groups continue to suffer disproportionate rates of death and disability (Department of Health and Human Services 2002). One of the primary goals of the DHHS' Healthy People 2010 Initiative is to eliminate these racial and ethnic health disparities by the year 2010 (Department of Health and Human Services 2000b). Furthermore, the Institute of Medicine (IOM) documented that definite racial and ethnic disparities in the provision of numerous medical services exist. The IOM investigation revealed that minority populations such as African Americans have lower rates of coronary artery revascularization procedures, kidney transplan-

