Infant Mortality of Asian Americans

Asian Americans constitute one of the fastest growing racial and ethnic groups in the United States. According to the 2000 U.S. census, about 4.2 percent (or 11.9 million people) reported Asian alone or in combination as a racial category. (Grieco 2001 and Barnes 2002). As the sources of immigration have diversified, the Asian American population has become increasingly heterogeneous. According to Census 2000, Chinese Americans are the largest Asian group, while Filipinos were the second largest specified Asian group in the United States (Barnes 2002). We examine infant mortality among four Asian American subgroups: Chinese, Japanese, Filipinos and Other Asian Americans. Variations of infant mortality among those Asian American subgroups are well documented by previous studies (Singh and Yu 1995, Hummer and et. al. 1999).

The Asian American population is now predominantly foreign-born and immigrants play an undeniable role in this group. The immigrant advantages in infant survival over their native born counterparts have been well established for many racial and ethnic groups. The picture also varies among Asian American groups: immigrated Asian Americans usually have lower infant mortality than their native born counterparts. However, few studies have examined the immigrant advantage of infant death by age of infant death. Does the infant mortality difference between the foreign born and native born groups vary by age of infant death? Do the infant mortality differentials among Asian American subgroups change with age of infant death? Previous studies did not answer those questions.

The overall purpose of this paper is to examine the differences in infant morality among Asian Americans, with special attention given to the effect of infant death age. We use the National Center for Health Statistics (NCHS) linked birth/infant death files for 1995-2000 to examine 1) if immigrant advantage in infant death varies by age of infant death among the Asian American population; 2) if infant mortality differentials among Asian American subgroups vary by age of infant death.

Data

Data for this study are from the National Center for Health Statistics (NCHS) linked birth/infant death files polled for the years 1995-2000. There are total of 992,392 Asian American live births in the pooled dataset, including 125,106 whose mothers are US born and 867,286 whose mothers are foreign-born. 4,777 of the infants died during the first year of life. Table 1 shows the distribution of survival/death status by mother's race/ethnicity and nativity group for 1995-2000.

Methods

SAS life table estimates and logistic regression models are used to estimate the infant death risk.

Results

Immigrant advantages in infant mortality by age of infant death among Asian

Americans

The large proportion of immigrants in the Asian American population means that researchers need to consider seriously the dramatic role of immigration in this minority group. Much previous research has concluded that immigrants on average show lower infant mortality than their U.S. born counterparts. Our preliminary results confirm the immigrant advantages in infant mortality among Chinese, Japanese, Filipino and other Asian American subgroups. Figure 1 displays the Kaplan-Meier estimates for infant survival probabilities of these four Asian American subgroups by mothers' immigration status. From figure 1 we can see that foreign born mothers have higher infant survival probabilities than native born mothers among all of the four subgroups. However, this advantage is not constant. Table 2 presents the infant death hazards for those separate groups by age of infant death. From Table 2 we can see that all of the Asian American subgroups except Filipinos show a similar picture: the immigrant advantage in infant mortality appears under one day; then it disappears during the following four weeks before it reemerges. Although the immigrant advantage is evident for the whole first year for Filipinos, the overall magnitude of the advantage is the same as the other Asian American subgroups. The immigrant advantage for Filipino Americans is more obvious in the first day and after the first four weeks than the other time.

Heterogeneity of infant mortality by age of infant death among Asian Americans

The Asian American population has a high degree of heterogeneity because of its highly diversified immigration sources. Owing to data limitations, our study just focuses on four Asian subgroups, including Chinese, Japanese, Filipinos and Other Asian Americans. Consistent with previous research, we find that Chinese and Japanese Americans have lower infant mortality than Filipinos and Other Asian Americans. However, those advantages also vary by age of infant death. Our preliminary results have provided evidence for variations of infant mortality differences among those Asian American subgroups by age of infant death. (Logistic regression results are not ready to provide.)

Table 1: Frequency of Infant Survived/Died by Mother's Race/Ethnicity and Nativity Group, 1995-2000

	Chinese	se	Japanese	se	Filipinos	SO1	Other Asians	\sians		Total
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Died	62	512	104	115	213	785	363	2623	742	4035
Total	16170	157461	22200	29746	29555	149244	57181	530835	125106	867286

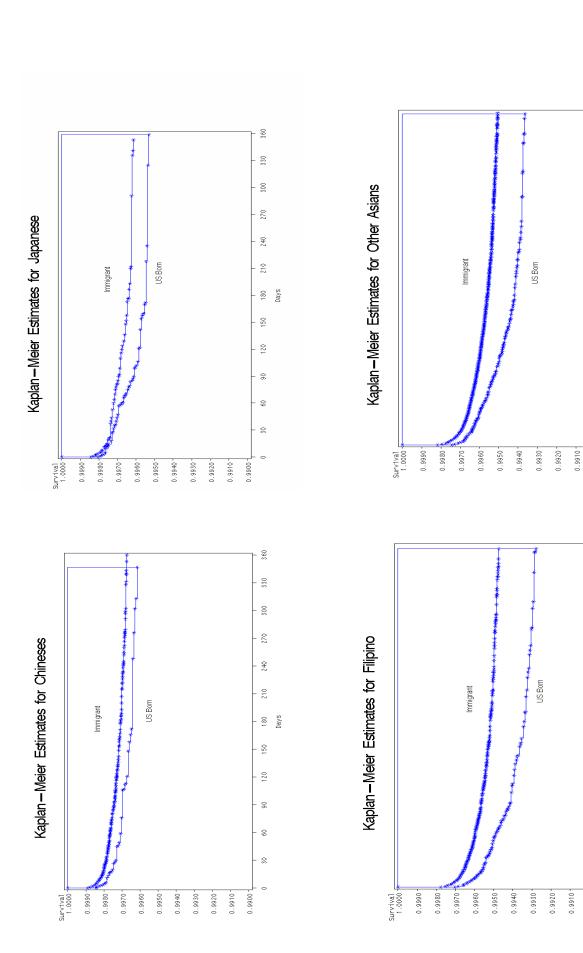


Figure 1: Kaplan-Meier Survival Estimations for Chinese, Japanese, Filipinos and all other Asian Americans

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Table 2: Life Table Estimates of Infant Mortality for Asian Americans by Age of Infant Death for Mother's Race/Ethnicity and Nativity Group, 1995-2000

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