



Testimony of Laurie Julian
Before the Appropriations Committee

Asian Pacific American Affairs Commission

FY 2010 & FY 2011
February 11, 2009

Senator Toni Harp, Representative John Geragosian, and members of the Committee, my name is Laurie Julian, Legislative Chair of the Asian Pacific American Affairs Coalition of Connecticut. The Asian Pacific American Coalition is a non-partisan group of concerned citizens who are leaders in their respective communities, volunteering their time and resources to advocate on behalf of Connecticut's Asian Pacific Americans.

First of all, I thank you for your support in the passage of P.A. 08-166, An Act Establishing an Asian Pacific American Affairs Commission. The legislation is to take effect July 1, 2009, within available appropriations.

I urge you to adequately fund the commission, a miniscule fraction of the overall state budget, to address the essential needs of this ethnically diverse and fastest growing population in Connecticut.¹

Asian Americans are exceedingly diverse, coming from nearly fifty countries and ethnic groups, each with distinct cultures, traditions, and histories, and they speak over 100 languages and dialects. The diversity within this category is seen not only in nationalities and languages but also in disparate poverty rates, educational attainment and other socioeconomic characteristics. In particular, language and cultural barriers significantly impact health care access. The cultural fear of Western medicine institutions and procedures results in the avoidance of prevention and screening services. So many fall between the cracks of our health care system and diseases go undetected - without treatment or care.

In terms of potential health concerns, Vietnamese American women have the highest rate of cervical cancer, and the Asian American group as a whole has an elevated cervical

¹ Asian Pacific Americans represented approximately 3.2% of the total population in Connecticut, making Connecticut the 8th fastest growing Asian Pacific American population in the United States. The Asian population is projected to grow by 113 % between 2000 and 2025.

cancer incidence rate. Tuberculosis rates are highest among Asian Americans. In some Asian American populations, cancer replaces heart disease as the leading cause of death. This pattern is not seen in other racial and ethnic groups. There are also disparities in various cancer sites that can be measured at the national level by country of origin (See figure below).

The establishment of a Commission is a critical part of the solution to addressing health care disparities among this population, as well as barriers to English language instruction, housing, access to courts and civil rights discrimination. The Commission will also create partnerships with private and public organizations in the economic development area to create jobs. It will provide a central location to serve as a resource for the public to obtain information and access to agencies and services. It will conduct education outreach to increase prevention strategies. On the state level, health and mental health data of Asian American and Pacific Islanders has not been collected and therefore knowledge of health needs have been limited. The Commission will serve as the liaison to the Asian community and advise the Governor, Legislature and state agencies on issues relating to health, social, education, economic development, civil rights and myriad of concerns and challenges confronting the Asian community.

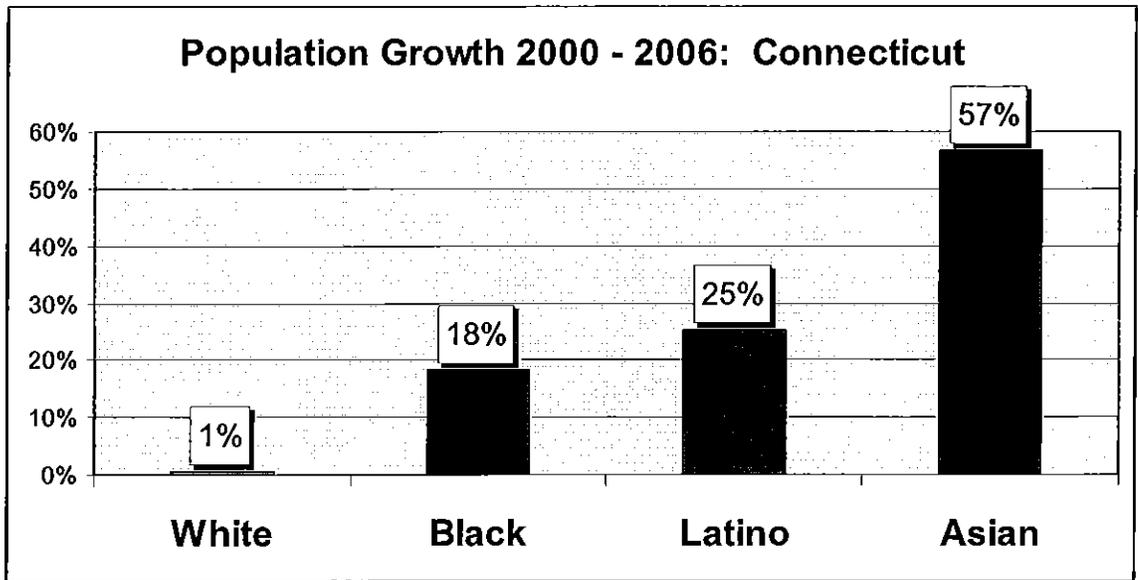
Asian Pacific Americans have a “quiet, silent culture,” and this unfortunately masks the desperate need for core essential services. It is time for the fast growing population in Connecticut to have a voice in government. An example is the Commission on Health Equity to address health disparities. The Health Equity Commission consists of representatives from state government agencies, private and public universities and chairpersons of the Latino, Women, African-American and Asian Pacific American Affairs Commission. Without the establishment of an Asian American Pacific American Commission, this population will continue to be un-represented.

In closing, I thank the Committee’s support and request it fund the Commission to address the essential needs of this ethnically diverse and fastest growing population in Connecticut. I appreciate the opportunity to provide this testimony. If you have any questions feel free to contact me at (860) 286-0144.

Figure 68. National Cancer Statistics for Asian American Men and Women

- Cancer has been the leading cause of death for female Asian Americans since 1980. In fact, Asian American females are the first U.S. population to experience cancer as the leading cause of death.
- Cervical cancer is a significant health problem in Korean American women.
- Cervical cancer is the number one incident cancer in Vietnamese women, whereas breast cancer is the number one incident cancer for all other racial and ethnic groups.
- Only 48 percent of Filipino and 41 percent of Korean women receive Pap smear tests within the recommended time.
- Southeast Asian women have higher invasive cervical cancer incidence rates and lower Pap testing frequencies than most other ethnic groups in the United States.
- Young Asian women have lower participation in Pap tests and breast self-exams.
- Breast cancer incidence in Japanese American women is approaching that of U.S. Whites.
- Some studies indicate that approximately 79 percent of Asian-born Asian American women with breast cancer have greater proportion of tumors larger than 1 cm at diagnosis.
- Liver cancer, usually caused by exposure to the hepatitis B virus, disproportionately affects Asian Americans. This is the reason why the third leading cancer among Asian Americans is liver cancer.
- Approximately one-half of women who gave birth to hepatitis B-carrier infants in the United States were foreign-born Asian women.
- Vietnamese men have the highest rates of liver cancer for all racial/ethnic groups.
- The incidence of liver cancer in Chinese, Filipino, Japanese, Korean, and Vietnamese populations are 1.7 to 11.3 times higher than rates among White Americans.
- Korean men experience the highest rate of stomach cancer of all racial/ethnic groups and a five-fold increased rate of stomach cancer over White American men.
- Lung cancer rates among Southeast Asians are 18 percent higher than among White Americans.
- Filipinos have the second poorest five-year survival rates for colon and rectal cancers of all U.S. ethnic groups (second to American Indians).
- Twenty-five percent of Filipino and 38 percent of Korean women receive adequate and timely colorectal cancer screening.

Source: Rev. Paul L. In, BTh, MDiv, Relationship Manager, Rocky Mountain Division, American Cancer Society

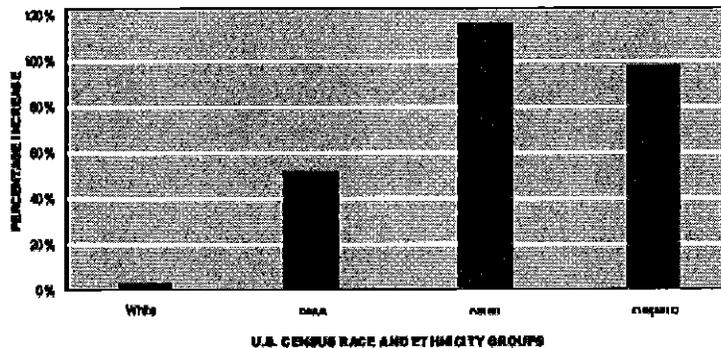


Source: US Census

Overall, Connecticut will experience only slight population growth between 2000 and 2030, from 3,405,565 to a projected 3,688,630 — 8.3 percent, compared to U.S. population growth of 29.2 percent over the same time span. Connecticut will decline in rank among states from 29th to 30th in overall population. As with much of the country, Connecticut's population will grow older, from 13.8 percent to 21.5 percent age 65 and over. This compares with 12.4 percent age 65 and over in the United States in 2000, and 19.7 percent in 2030.¹³ Additionally, the race and ethnicity composition of the population will change. While neither the U.S. Census Bureau nor Connecticut state authorities have yet released race and ethnicity projections based on the U.S. Census 2000, the Census Bureau has released projections from the 1990s forward to 2025, shown in Figure 4.

Detailed population projections for cities and towns by race, ethnicity and age to 2050 are anticipated in 2007.¹⁴

FIGURE 4: PROJECTED PERCENTAGE INCREASE IN CONNECTICUT POPULATION GROUPS BETWEEN 2000 AND 2025



Source: U.S. Census Bureau, *Projected State Populations, by Sex, Race and Hispanic Origin: 1995-2025*. Available at: <http://www.census.gov/ipeds/data/states/tables/2000-2025/>

The projections in Figure 4 indicate that Connecticut's Asian population will grow by more than 113 percent between 2000 and 2025, the Hispanic population by more than 99 percent, the black population by more than 50 percent, and the white population by only 2.5 percent. Further analysis shows that the nonwhite population is a younger population than the white population. As of 2000, 41.1 percent of the white population was under 35 years old, in contrast with the black population (59.3 percent under 35), the Asian population (55.2 percent under 35), and the Hispanic population (73.7 percent under 35).¹⁵ Thus, if current trends continue, Connecticut will be increasingly characterized by an older white, and a younger black, Asian and Hispanic population. And the trend may be underestimated in the available data. While the overall undercount of population in Connecticut is small, younger black, Asian, Hispanic, and immigrant populations are more likely to be undercounted, according to several U.S. Census Bureau analyses.¹⁶

