



# Research Week 2021

## Disaggregating Asian American and Pacific Islanders' perinatal health outcomes: a review of research using birth certificate data

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### Keywords

Asian American Pacific Islanders; Ethnic subgroups; Perinatal health; Disparities; Epidemiology; Birth records/birth certificates/vital statistics; Literature review

### Abstract

#### Introduction

Asian Americans and Pacific Islanders (AAPIs) are understudied in perinatal health research, partly owing to unavailable or insufficient data. Health data for AAPIs are often aggregated, which masks disparities by ethnic subgroup. U.S. birth record data are the only publicly available national dataset with detailed AAPI ethnicity and perinatal health information.

#### Objective

We reviewed published research that used birth records data to examine perinatal health outcomes for AAPI subgroups.

#### Methods

We performed a MEDLINE search for studies from January 2000 through October 2020 that included AAPI subgroups, analyzed birth record data, and reported perinatal or child outcomes. Information abstracted included study design, setting, subgroups, exposures, outcomes, and how race/ethnicity was analyzed.

#### Results

Of 48 studies identified, 19 met inclusion criteria, and 10 have been reviewed so far. These examined births in California (n= 4), the U.S. (n= 3), Arkansas (n= 1), Texas (n= 1), and New York City (n= 1). The majority of studies linked birth record data to another data source, then examined outcomes including child abuse and neglect, pregnancy spacing, and birth defects. Race/ethnicity was typically treated as an exposure variable. Chinese individuals were the most represented and, along with whites, most frequently assigned as the referent group. The least mentioned subgroups were Pacific Islanders and Southeast Asians (Laotian, Thai, Cambodian, Hmong). Substantial heterogeneity in outcomes and exposure-outcome relationships were observed by subgroups. For example, preterm

birth occurred more frequently in Southeast Asian groups; the association between higher maternal education and reduced preterm birth was less pronounced in Southeast Asians than in whites and most East Asians.

## Conclusion

The diversity of AAPIs are obscured when their data are aggregated. This review can provide insights to researchers interested in AAPI health and in examining outcomes for these groups at a more granular level than is currently practiced.