Asian American Women

Economic Justice
- Welfare Reform
- Trafficking
- Garment Workers
- Other Low-Wage Workers

Health and Well-Being
- Health Care Needs
- Sexual and Reproductive Freedom
- Domestic Violence

Special Focus
- Hmong Women
- Hawai’i—The Asian State
- Lesbians, Bisexuals, and Transgendered Persons

Asian American Women: Issues, Concerns, and Responsive Human and Civil Rights Advocacy

Ford Foundation
Asian American Women: Issues, Concerns, and Responsive Human and Civil Rights Advocacy

by Lora Jo Foo
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 Fifty years ago, the United Nations adopted the Universal Declaration of Human Rights declaring that all human beings are born free and equal in dignity and rights, including the right to life, liberty, and security of person; the right to be free from hunger; and the right to have clothing, housing, and medical services. Yet, these fundamental human rights of Asian American women are denied every day. For example, they are trafficked into the US for sexual or severe labor exploitation, they work excessively long hours and earn poverty level wages as garment and domestic workers, they are slowly poisoned in high-tech jobs and endure degrading treatment when they try to access the US immigration, welfare and health care systems. In addition, prevailing racist and sexist stereotypes create a perception of Asian American women as the “other” and, as a result, their lives and issues are practically invisible to mainstream America. The Ford Foundation commissioned Lora Jo Foo to assist it in learning about the social and economic justice agenda of Asian American women.¹ Her report, *Asian American Women: Issues, Concerns, and Responsive Human and Civil Rights Advocacy*, illuminates the current situation of Asian American women in the United States.

This report builds on work done in 1997 and 1998 by the National Asian Pacific American Women’s Forum (NAPAWF) to identify the issues facing Asian American women. NAPAWF held meetings with Asian American women in San Francisco, Seattle, Los Angeles, New York City, and Minneapolis, the results of which helped provide the framework for this report. The report “puts meat on the bones” of that framework, focusing on the two states with the largest Asian American populations, California and New York, and devoting special attention to the State of Hawai’i, which has the highest percentage of Asian Americans, and to Minnesota, the state with the second largest number of Hmong Americans (after California). The first draft of this report was presented to a meeting convened by the Ford Foundation in June 2001 of longtime Asian American women activists from around the country who worked on the issues covered in this report. The final report incorporates their comments, critiques and invaluable contributions.

Only empowered Asian American women can make lasting changes in their communities and beyond. To achieve this, as the report shows, grassroots organizing and base-building efforts are crucial. An equally effective advocacy model has been the coalition work used by Asian American women. To build on what has been achieved, for Asian American women to move their social justice agenda and

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¹ The issues facing Pacific Islander women are not covered in this report. Not having sufficient familiarity with the Pacific Islander communities, Ms. Foo felt she could not write about or do justice to their issues. A report on Pacific Island women is more appropriately written by a Pacific Islander woman.

² State residents prefer this punctuation.
make the systemic changes needed to end the civil and human rights violations inflicted on them, a significant infusion of resources is needed to strengthen the capacity of the grassroots, base-building organizations and coalitions and to build regional and national infrastructure and institutions. The issues facing Asian American women are dire but the resources available to them are disproportionately low for the size of the population.

Although Asian American and Pacific Islander Americans (APA) are the fastest growing groups in the United States and significant numbers live well below poverty levels, very few resources are devoted to improving their situation. According to a study by Asian Americans/Pacific Islanders in Philanthropy, while Asian Americans represent 4% of the US population, only 0.2% of foundation funds were given to organizations working specifically on Asian American and Pacific Islander concerns. Unable to access major sources of foundation funding, Asian American communities have the weakest national infrastructure and institutions, and smallest budgets compared to their counterparts in other communities of color. There are only two small national Asian American women’s advocacy organizations with paid staff, two fledgling national women’s membership organizations without paid staff, and five national Asian American organizations whose advocacy work, though not targeted at women’s issues, has had an impact on Asian American women.

Despite the paucity of funding, beginning in the late 1960’s, Asian American women organized against the civil and human rights violations inflicted against their sisters. Lacking strong national and women’s organizations, the advocacy on behalf of Asian American women, then and now, and as reflected in this report, tends to be at the local level and through nongender specific organizations. However, the impact of these efforts has gone beyond the local level because Asian American women have worked with or led multiethnic coalitions in both joint advocacy and organizing efforts. As this report explains, these groups have succeeded on many fronts including the legislative arena, in union organizing, and in consumer education campaigns, advocating for culturally and linguistically acces-

\[\text{The Asian and Pacific Islander Domestic Violence Institute and the National Asian Women's Health Organization.}\]
\[\text{The National Asian Pacific American Women's Forum and the Asian Pacific, Lesbian, Bisexual and Transgender Network.}\]
\[\text{The National Asian Pacific American Legal Consortium, the National Korean American Services and Education Consortium (NAKASEC), the Southeast Asia Resource Action Center, the Asian Pacific American Labor Alliance (AFL-CIO), and the Asian Pacific Islander Health Forum.}\]
\[\text{For instance, the San Francisco-based Asian Law Caucus led the successful statewide effort in the passage of the Sweatshop Accountability Bill, which will help women garment workers throughout California. The Caucus was also active in the effort to raise the minimum wage in California, which resulted in an increase in the federal minimum wage. For many years, the San Francisco-based Asian Women's Shelter and other local shelters engaged in advocacy in California for culturally and linguistically accessible domestic violence services that also had national impact.}\]
sible services and breaking the silence on issues not previously considered appropriate for public discussion in many Asian communities.

*Asian American Women: Issues, Concerns, and Responsive Human and Civil Rights Advocacy* speaks to foundations and charitable organizations; local, state, and federal level policy makers; advocates for social justice; universities and scholars; and members of the public committed to strengthening democracy. I hope the courage and integrity with which Asian American women speak through Lora Jo Foo’s work on this report inspires and challenges institutions and individuals to join in this conversation and respond to this call to action.

*Barbara Y. Phillips*
Program Officer
Human Rights
Peace and Social Justice Program
The Ford Foundation
Asian American Women: Issues, Concerns, and Responsive Human and Civil Rights Advocacy is divided into three parts. Part One covers Economic Justice, Part Two covers Health and Well-being, and Part Three looks at specific Asian American communities that receive very little attention. Each chapter of “Asian American Women: Issues, Concerns, and Responsive Human and Civil Rights Advocacy” places the issues Asian American women face in the broader economic, legal, political, and/or historical contexts of American society and describes specifically how Asian American women are affected. With the exception of domestic violence and issues of lesbian women that affect Asian American women across the socio-economic spectrum, the human and civil rights violations identified in this report affect primarily Asian immigrant women at the bottom of the economic ladder where poverty rates can be as high as 63% and limited English proficiency (LEP) is over 70% in certain Southeast Asian communities.

The chapters make assessments of the advocacy needed to address the issues and provide background information about some of the organizations that do the work. The report focuses on the grassroots and coalition efforts that have been the mainstay of the activism of Asian American women. Each chapter concludes with suggestions for action.

Part One, Economic Justice, looks at the class, race, and gender dynamics that work together to depress the socio-economic status of Asian American women. Chapter One deals with the new Welfare Reform system that discriminates against and denies equal access to public benefits to Asian immigrant women and their families. Chapter Two discusses the human rights violations suffered by Asian women who are trafficked into the United States and subjected to severe labor and sexual exploitation. Chapters Three and Four examine the various industries where the majority of poor Asian American women work and how they are trapped in the lowest paying jobs, laboring excessively long hours, often in unsafe workplaces, facing discrimination, and with little to no opportunity to move up the ladder.

Part Two, Health and Well-Being, examines the particular health concerns of Asian American women. The US health care system is struggling to meet the needs of the US citizen population, the majority of whom speak English; the needs of Asian women are barely visible. There is very little data on the health status of Asian women, and health care providers are guided instead by stereotypes and assumptions that can lead to misdiagnosis or worse. Chapter Five looks at the health care disparities between Asian women and the general population and points to the urgent need to look at differences among Asian ethnic groups. Chapters Six and Seven address sexual and reproductive health and domestic violence; issues that have long been considered taboo subjects in Asian American communities. However, the consequences of silence around these issues can have fatal consequences and must be addressed.
Part Three, Special Focus, examines the needs of three particularly marginalized or invisible groups of Asian American women. These are Hmong women (Chapter Eight), Filipina and Native Hawai’ian women in Hawai’i (Chapter Nine) and lesbian, bisexual, and transgendered (LBT) Asian American women (Chapter Ten). Hmong American women are engaged in a powerful struggle to transform their patriarchal culture in a way that keeps the positive aspects but changes other aspects in order to fulfill the basic human right to be free from violence. Hawai’i has a predominantly Asian American population and the combination of race, class, and gender oppression play out very differently than it does on the mainland. Finally, Asian American LBTs experience multiple forms of oppression based on race, gender, and sexual orientation making them perhaps the most marginalized of Asian American women.

Paucity of Data on Asian America

Exacerbating the problems for Asian American women is the lack of data relating to their issues. According to Census 2000, there are about 11.9 million Asians/Asian Americans in the United States. Comprising only 4% of the US population, Asian Americans’ representation is “statistically insignificant” in most national studies, such as those on the impact of welfare reform, health, domestic violence, and low-wage workers. In certain key states such as California where 12% of the state’s population is Asian American and a large enough population set for regional studies, the invisibility and perceived sameness has meant that little funding has been available from government or foundations for community specific studies. The studies that do include Asian American women have a tendency to focus on selected ethnic groups and/or do not disaggregate the data for the over 40 distinct ethnic groups that make up the Asian American community in the United States. The gap in data or failure to disaggregate can have dire consequences when, for example, it “hides” evidence about the distinct health needs of particular groups or fails to show how the impact of policies and programs varies from one Asian American community to another. The author of this report made efforts to locate and review the relevant studies on Asian Americans. However, very little exists and in some places, the author was forced to make use of anecdotal information. Clearly, there needs to be an increase in research, data collection, and statistical analysis relating to the issues raised in this report.

History of Asians in America

The Asian presence in North America predates the 13 colonies’ declaration of independence from Great Britain. The first Asians arrived in the Americas in the 1500’s; they were reportedly conscripted sailors, primarily from what is now the Philippines, who jumped ship to seek freedom. Asians did not begin arriving in

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1 This section draws on Helen Zia, Asian American Dreams: The Emergence of an American People, Farrar, Straus and Giroux, 2000.
large numbers until the mid 1800’s when the British ended the slave trade from Africa and started importing “coolies” from China and India to various parts of the Caribbean. Large numbers of Chinese laborers began arriving in the United States during the “Gold Rush” and during the construction of the Trans-Continental Railroad. But anti-Chinese sentiments against the influx of Chinese during the recessions of that period led, in 1882, to Congress passing the Chinese Exclusion Act. This was the first legislation passed on the basis of race and barred all Chinese from becoming US citizens.

Other nations filled the gap created by the ban on Chinese labor. Workers from Japan, India, the Philippines, and Korea began arriving in the late 1880’s. Most settled in the Western part of the United States with large concentrations of Japanese, as well as Koreans and Filipinos, in California and what is now the State of Hawai’i. By the turn of the century, several thousand Punjabi farmers were working on California farms. US colonization of the Philippines meant that Filipinos had the status of US nationals and were eligible for immigration to the US. However, this ended in 1934 when the Philippines was reclassified as a commonwealth which resulted in a change of status for Filipinos. They became aliens hence, ineligible for citizenship. It is now well known that Japanese Americans were interned in camps during the xenophobic period of World War II.

By the early 1960’s, approximately 500,000 Asians lived in the United States. Large numbers began arriving after repeal of anti-Asian exclusion laws and the passage of the 1965 Immigration Act lifted quotas based on national origin. The effect was immediate: between 1960 and 1970, immigration from Asia rose to above 10% of total immigration. The first wave of immigrants from the 1965 Act included large numbers of professionals from South and Southeast Asia, leading publications such as The New York Times and U.S. News and World Report to contrast their skill level and work ethics with those of African Americans. This was the birth of the “model minority” myth that endures to this day.

The Vietnam War was a turning point for Asian America on many levels. Outraged by US action in Vietnam, Asian American students took part in antiwar protests. Influenced by parallel developments in the US civil rights movement, these students also highlighted the racist overtones in the news coverage of events in Southeast Asia. It was at this time that the term “Asian American,” created to replace the derogatory term “Oriental,” came into parlance. During the civil rights movement and upheavals of the 1960’s, Asian American women became politically active in large numbers. Second- and third- generation Chinese, Japanese, and Filipino women were involved in organizing against past and present injustices, indignities, and human rights violations against their communities and themselves. As a result of demands made during these strikes, the first Asian American Studies centers were established and Asian women’s courses taught at San Francisco State University and the University of California, Berkeley.

In the early 1970’s, large numbers of Cambodians, Laotians, and Vietnamese, displaced by the ravages of the Indo-China wars, began arriving in the United States. They were accepted as “boat people” but dispersed throughout the country with the hopes that they would soon blend in and assimilate. This wave of immi-
igration included large numbers of women and children. In addition, significant number of middle class persons from all over Asia began arriving in 1970’s with their working class counterparts arriving in large numbers in the 1980’s. Once settled, the family members of immigrants also made the move from Asia. In all, some 4.5 million Asian immigrated to the US between 1970 and 1990.

**Demographic Overview**

Census 2000 reveals a nation in change and more diversified than 10 years earlier due in large part to immigration. From 1990 to 2000, the Asian American population increased by 52% from 6.6 million to 10 million, or 11.6 million when part-Asians are included. By comparison, the Hispanic population increased by 58% from 22 million to 35 million. Whites dropped from 76% in 1990 to 69% of the current total US population while Hispanics increased to 13% and Asians to 4% of the US population. (See Figure 1).

While the traditional entry points for Asians remain California where 36% and New York where 10% of the nation’s Asian Americans live, the number of Asians in states like Indiana, Arkansas, and South Dakota doubled between 1990 and 2000. Half of all Asian Americans still live in the Western Region and 75% live in 10 states. (See Table 1). Half of all Asian Americans live in just three states—California (4.2 million), New York (1.2 million), and Hawai’i (0.7 million). According to Census 2000, 872,777 Asians live in New York City, 407,444 in Los Angeles, and just over 250,000 in San Francisco, San Jose, and Honolulu.

In 2000, no racial or ethnic group is the majority in the State of California. (See Figure 2). Asians are now the third largest group, making up from 11% to 12% (when part-Asians are included) of the state’s population, with Hispanics at 32% and Whites at 47%. Asian Americans are a larger percentage of certain counties and cities, making up 31% of San Francisco, 25% of Santa Clara, and 20% of Alameda counties. In Southern California, Los Angeles and Orange counties are 12% and 14% Asian, respectively. Six California cities are now majority Asian—Monterey Park (61%), Cerritos (58.4%), Walnut (55.6%), Milpitas (52.4%), Daly City (51.5%), and Rowland Hills (50.3%). In New York, the changes were also dramatic. Asian Americans increased by 30% to 1 million, or to about 10% of New York State’s population. Asians are now 10% of New York City as well. For the first time, New York City’s White population make up less than half of the residents, between 45% and 47% of the city.

Census 2000 indicates that a wide gap remains between affluent Asians and those living in poverty. Though the Census Bureau has not released details, its March 1999 Current Population Reports states that while one-third of Asian families have incomes of $75,000 or more, one-fifth have incomes of less than $25,000. Asians are more likely than Whites to have earned a college degree and to have less than a ninth-grade education. Asian Americans occupy the extreme spectrums: from wealth to poverty, entrepreneurial success to marginal daily survival, advanced education to illiteracy. Research and data concerning Asian Americans often are not disaggregated for different subgroups. For example, Census 2000 reports an overall poverty rate of 10.7%, the lowest poverty rate the Census Bureau
ever measured for Asian Americans when certain Asian ethnic subgroups have had poverty rates as high as 63%. The result is a picture that portrays Asian Americans as a “model minority” and hides the human and civil rights violations suffered by Asian American women at the bottom of the economic ladder.

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**Table 1.**

<table>
<thead>
<tr>
<th>Rank (Highest Numbers of Asians)</th>
<th>State</th>
<th>Number Choosing Only Asian or Pacific Islander</th>
<th>Including Part Asians or Part APIs</th>
<th>Percent of State(^1) Min</th>
<th>Max</th>
<th>Percent of Asians/API Nationally (Minimum)</th>
</tr>
</thead>
<tbody>
<tr>
<td>All States</td>
<td>10,476,678</td>
<td>12,327,643</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 California</td>
<td>3,752,596</td>
<td>4,321,585</td>
<td>11%</td>
<td>13%</td>
<td>36%</td>
<td></td>
</tr>
<tr>
<td>2 New York</td>
<td>1,041,156</td>
<td>1,167,226</td>
<td>5.5%</td>
<td>6%</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>3 Hawaii</td>
<td>602,590</td>
<td>858,105</td>
<td>50%</td>
<td>71%</td>
<td>6%</td>
<td></td>
</tr>
<tr>
<td>4 Texas</td>
<td>565,202</td>
<td>644,087</td>
<td>2.7%</td>
<td>3%</td>
<td>5.4%</td>
<td></td>
</tr>
<tr>
<td>5 New Jersey</td>
<td>479,187</td>
<td>523,971</td>
<td>5.7%</td>
<td>6%</td>
<td>4.6%</td>
<td></td>
</tr>
<tr>
<td>6 Illinois</td>
<td>423,032</td>
<td>473,830</td>
<td>3.4%</td>
<td>3.8%</td>
<td>4%</td>
<td></td>
</tr>
<tr>
<td>7 Washington</td>
<td>342,180</td>
<td>427,328</td>
<td>5.8%</td>
<td>7%</td>
<td>3.3%</td>
<td></td>
</tr>
<tr>
<td>8 Florida</td>
<td>268,954</td>
<td>340,589</td>
<td>1.6%</td>
<td>2%</td>
<td>2.6%</td>
<td></td>
</tr>
<tr>
<td>9 Virginia</td>
<td>262,657</td>
<td>308,645</td>
<td>3.7%</td>
<td>4.4%</td>
<td>2.5%</td>
<td></td>
</tr>
<tr>
<td>10 Massachusetts</td>
<td>238,492</td>
<td>268,027</td>
<td>3.7%</td>
<td>4.2%</td>
<td>2.2%</td>
<td></td>
</tr>
</tbody>
</table>

\(^1\) Census 2000 separated the Asian and Pacific Islander categories. Total Asian only population figures are 10,123,169 and Pacific Islander only population figures are 353,509. The figures listed in this table are combined Asian and Pacific Islander population figures, the only figures available to the author for these states as of this writing.

\(^2\) Minimum percent represents percent of population who chose Asian or Pacific Islander only on Census 2000 and maximum percent includes those who chose Asians or API and another race.

### Figure 1

**A New Look at Race in America**

Categories in 2000 are not directly comparable with those in 1990 because 2000 questionnaire was the first that allowed people to choose more than one race.

<table>
<thead>
<tr>
<th>Population</th>
<th>1990 Census</th>
<th>2000 Census</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number choosing just one race</td>
<td>Number choosing this race with other race(s)</td>
</tr>
<tr>
<td><strong>Non-Hispanic</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>188,128,296</td>
<td>194,552,774</td>
</tr>
<tr>
<td>Black</td>
<td>29,216,293</td>
<td>33,947,837</td>
</tr>
<tr>
<td>American Indian and Alaska Native</td>
<td>1,793,773</td>
<td>2,068,883</td>
</tr>
<tr>
<td>Asian</td>
<td>6,642,481</td>
<td>10,123,169</td>
</tr>
<tr>
<td>Native Hawai’ian and Other Pacific Islander</td>
<td>325,878</td>
<td>353,509</td>
</tr>
<tr>
<td>Other</td>
<td>249,093</td>
<td>467,770</td>
</tr>
<tr>
<td><strong>Hispanic</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(may be of any race)</td>
<td>22,354,059</td>
<td>35,305,818</td>
</tr>
<tr>
<td><strong>Total Population</strong></td>
<td>248,709,873</td>
<td>281,421,906</td>
</tr>
</tbody>
</table>

Note: Numbers do not add up to 100% because of rounding.

Source: U.S. Census Bureau
New York Times and Chronicle Graphic
Introduction

Total for 2000 is 16,538,491 when counting people who listed more than one race. In both 1990 and 2000, Hispanics could be of any race, so “black” shows non-Hispanic blacks, “white” shows non-Hispanic whites etc.

**Figure 2.** California’s Ethnic Pie

These pie charts reflect changes made in census breakdowns for race and ethnicity. In 2000, Asians and Pacific Islanders were counted as separate categories and a mixed-race group was added. Hispanics have been subtracted from each racial category, so “black” shows non-Hispanic blacks, “white” shows non-Hispanic whites etc.

How Californians in major ethnic or racial groups identified themselves (Hispanics subtracted to create their own category):

<table>
<thead>
<tr>
<th>Race</th>
<th>1990</th>
<th>2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>57.2%</td>
<td>46.7%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>25.8%</td>
<td>32.4%</td>
</tr>
<tr>
<td>Asian</td>
<td>8.8%</td>
<td>10.8%</td>
</tr>
<tr>
<td>Black or African-American</td>
<td>7.0%</td>
<td>6.4%</td>
</tr>
<tr>
<td>American Indian and Alaskan Native</td>
<td>0.6%</td>
<td>0.5%</td>
</tr>
<tr>
<td>Native Hawaiian and Other Pacific Islander</td>
<td>0.3%</td>
<td>0.3%</td>
</tr>
<tr>
<td>Some other race</td>
<td>0.2%</td>
<td>0.2%</td>
</tr>
<tr>
<td>Two or more races</td>
<td>2.7%</td>
<td></td>
</tr>
<tr>
<td>Total for 2000 is</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16,538,491 when counting people who listed more than one race.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Source:** U.S. Census Bureau
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Acknowledgements

This book is the joint product of many minds, hands and hearts. It originated from the Human Rights Unit of the Peace and Social Justice Program of the Ford Foundation when Program Officer Barbara Phillips commissioned me to conduct research and write up my findings on the social and economic justice agendas of Asian American women. I was assisted in preparing this report by Yin Ling Leung who conducted the research, literature review, and interviews for Part 2, Health and Well-being, and provided the initial written drafts for those chapters. Yin also assisted in research and/or interviews for Part 3, Special Focus. I thank Laura Ho, friend and former colleague, who helped with the final editing on each of the sections, often with very little notice and demanding turnaround times.

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Ford Foundation Deputy Directors Taryn Higashi and Urvashi Vaid attended the June 2001 meeting, a March 2002 briefing session and made helpful comments on the various chapters. Program Associate Que Dang also contributed at the June 2001 meeting. In addition, Alan Jenkins, Director of the Human Rights Unit and Natalia Kanem, Deputy, Office of the Vice President, gave valuable insight on the overall report. Many thanks to Dayna Bealy, Elizabeth Coleman, Mary Loftus and Laura Walworth, all of the Ford Foundation Department of Communications, for enabling this book to be produced, designed, illustrated and distributed. Designer, Ifaat Qureshi captured the spirit of “Asian women in action” in her original design for this report. Jeremy Fenn-Smith and Heather Moss were instrumental in keeping the numerous and scattered parties in touch throughout the process. Thanks to Linda Hsia Elmstrom, Copy Editor, for her hard work. My special thanks go to Mehlika Hoodbhoy, Editor and Publication Coordinator, whose editorial work was invaluable in fine tuning and strengthening the report and shaping the book into a useful advocacy tool. Mehlika’s energy and hard work in seeing the report through to final publication is much appreciated.

Lora Jo Foo
Author
Part 1
Economic Justice
Southeast Asian community members protesting 1996 Welfare "Reform" measures.
Welfare Reform’s Impact on Asian American Women

An Attack On Immigrant Women and Women With Children

At age 49, Mai lives with her 58-year-old husband and four children in a crowded apartment in San Jose, California. She is the sole breadwinner, as her husband is disabled from arthritis compounded by the beatings he received in a Vietnamese concentration camp. Her job assembling electronics parts only yields about $200 per month on piece rates. Over half of Mai’s income goes to pay the rent. To supplement her wages, Mai must rely on food stamps, Medi-Cal, cash assistance, and, as a last resort, a local church for free food. Mai wants a higher paying job, but she cannot read or write English and she has received only a few months of job training, ESL classes and job search assistance through Temporary Assistance to Needy Families (TANF). Mai says, “The five-year TANF limit is very rough. We’ve only been here a bit more than two years, and our lives are not stable. The fifth year will come and I’m afraid we won’t be ready.”

As enshrined in the Universal Declaration of Human Rights, Article 25, every person has the right to be free from hunger, and to have clothing, housing and medical services. In passing the Personal Responsibility and Work Opportunity Reconciliation Act of August 22, 1996 (hereinafter welfare reform), the US violated these fundamental human rights. Paraphrasing Franklin D. Roosevelt, necessitous women are not free because “true individual freedom cannot exist without economic security and independence.”

Welfare reform’s most vicious effects were on immigrant women, who suffer twofold. First, welfare reform ended Aid to Families with Dependent Children (AFDC), an entitlement program primarily for single mothers, and replaced it

TANF programs differ in the 50 states. Only 27 states and the District of Columbia provide the full five years lifetime limit. The average for all states is just 46 months. Only half the states provide TANF benefits to post-enactment immigrants. Not all states adopted the Family Violence Option. In determining eligibility, Hawai’i disregards 50% of earnings of a full-time, minimum wage earner. In Wisconsin, a recipient remains eligible for TANF until her income is more than three times the amount of the TANF grant. But in Alameda County, California, a woman is jailed for fraudulent receipt of welfare if she earns even a small amount from working. Across the Bay in Marin County, no welfare recipient has been jailed for the same “offense.”

The burden of the cuts fall disproportionately on immigrant women as they are the ones most likely to need welfare assistance. As Table 2 shows, in Los Angeles County, 80% of Korean, 79% of Cambodians, 69% of Chinese, and 69% of Vietnamese adults who receive TANF are women and as Table 3 shows, 60% of SSI, 59% of food stamp and 61% of Medicaid recipients are women. Asian Americans over 65, who utilize public assistance at high rates, are particularly vulnerable. Among Asian groups, Southeast Asian immigrants have been hardest hit by welfare reform because they suffer the highest poverty rates of all communities of color, including African Americans and Latinos.

Impact On Asian American Women

TANF Programs—Rights and Responsibilities

Welfare reform provided block grants for states to implement TANF programs. For the first time states were given the discretion to determine whether and which legal immigrants should receive public benefits. Faced with the possibility of increased homelessness, hunger, and emergency medical costs, every state except Alabama opted to maintain TANF benefits and every state except Wyoming opted to maintain Medicaid at least for immigrants who were in the US prior to welfare reform’s passage on August 22, 1996. Of the 10 states with the largest number of Asian immi-

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1TANF programs differ in the 50 states. Only 27 states and the District of Columbia provide the full five years lifetime limit. The average for all states is just 46 months. Only half the states provide TANF benefits to post-enactment immigrants. Not all states adopted the Family Violence Option. In determining eligibility, Hawai’i disregards 50% of earnings of a full-time, minimum wage earner. In Wisconsin, a recipient remains eligible for TANF until her income is more than three times the amount of the TANF grant. But in Alameda County, California, a woman is jailed for fraudulent receipt of welfare if she earns even a small amount from working. Across the Bay in Marin County, no welfare recipient has been jailed for the same “offense.”

2In 1998, while 22% of immigrants lived in poverty as compared to 13% of the general US population, only 5% of working age immigrants (other than refugees) received welfare-equivalent to usage by US born citizens.

3Public assistance rates for persons over 65 were 67% for Hmong, 57.8% for Laotian, 53.2% for Cambodians, 51.1% for Vietnamese; 42.1% of Koreans, 37.5% for Thai, 29.3% for Filipino, 28.4% for South Asians, and 25.9% for Chinese.

4In California, 63% of Hmong, 51% of Laotians, and 47% of Cambodians live in poverty.
grants, all opted to provide TANF and Medicaid to pre-enactment immigrants.

In addition to the five-year lifetime cap on benefits, welfare recipients are also required to find employment within two years or lose their benefits. During the two years, a recipient must agree to a welfare-to-work plan, conduct a job search and engage in a work activity, such as unsubsidized employment, job training (limited to one year), education, or work for her welfare check. Failure to engage in work activity can result in the loss of welfare benefits. Certain states, such as California, require welfare offices to provide welfare-to-work services to help recipients develop necessary job skills before their lifetime limit on assistance.

<table>
<thead>
<tr>
<th>Adults</th>
<th>One Parent</th>
<th>% One Parent</th>
<th>Two Parent</th>
<th>% Two Parent</th>
<th>Total Adults</th>
<th>% Adults</th>
<th>Total Households</th>
<th>% One Parent</th>
<th>% Two Parent</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Races</td>
<td>114,058</td>
<td>43,697</td>
<td>157,755</td>
<td>136,578</td>
<td>84%</td>
<td>16%</td>
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<tr>
<td>Female</td>
<td>105,069</td>
<td>22,520</td>
<td>127,589</td>
<td>81%</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Male</td>
<td>8,989</td>
<td>21,127</td>
<td>30,116</td>
<td>19%</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>All Asians</td>
<td>8,311</td>
<td>5,210</td>
<td>13,521</td>
<td>10,916</td>
<td>76%</td>
<td>24%</td>
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<td></td>
</tr>
<tr>
<td>Female</td>
<td>7,646</td>
<td>2,605</td>
<td>10,251</td>
<td>76%</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Male</td>
<td>665</td>
<td>2,605</td>
<td>3,270</td>
<td>24%</td>
<td></td>
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</tr>
<tr>
<td>Cambodians</td>
<td>2,162</td>
<td>937</td>
<td>3,099</td>
<td>2,631</td>
<td>82%</td>
<td>19%</td>
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<td></td>
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<tr>
<td>Female</td>
<td>1,989</td>
<td>469</td>
<td>2,458</td>
<td>79%</td>
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<tr>
<td>Male</td>
<td>173</td>
<td>468</td>
<td>641</td>
<td>21%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chinese</td>
<td>771</td>
<td>969</td>
<td>1,740</td>
<td>1,256</td>
<td>61%</td>
<td>39%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>709</td>
<td>485</td>
<td>1,194</td>
<td>69%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>62</td>
<td>484</td>
<td>546</td>
<td>31%</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Korean</td>
<td>144</td>
<td>55</td>
<td>199</td>
<td>172</td>
<td>84%</td>
<td>16%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>132</td>
<td>28</td>
<td>160</td>
<td>80%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>12</td>
<td>27</td>
<td>39</td>
<td>20%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vietnamese</td>
<td>1,732</td>
<td>2,135</td>
<td>3,867</td>
<td>2,800</td>
<td>69%</td>
<td>31%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>1,593</td>
<td>1,068</td>
<td>2,661</td>
<td>69%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>139</td>
<td>1,067</td>
<td>1,206</td>
<td>31%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: The author determined the number and percent of females in one and two parent households assuming that 50% of the two parent and 92% (actual percent for all races) of one parent households were female.

Source: Los Angeles County Department of Public Social Services
### Table 3.

**Adult Participation in Selected Programs, by Race/Ethnicity and by Sex, for the United States: 1996, 1997, 1998.**

<table>
<thead>
<tr>
<th>Program Participation of MHU Head/Spouse and Individual Race/Ethnicity</th>
<th>Adult Individuals</th>
<th></th>
<th></th>
<th></th>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Women</td>
<td>Men</td>
<td></td>
<td>Women</td>
<td>Total</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total Use Use Rate</td>
<td>Total Use Use Rate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TANF</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asian/Pacific Islander NH</td>
<td>128</td>
<td>86</td>
<td>67%</td>
<td>132</td>
<td>42</td>
<td>32%</td>
<td></td>
</tr>
<tr>
<td>Hispanic</td>
<td>779</td>
<td>588</td>
<td>76%</td>
<td>808</td>
<td>191</td>
<td>24%</td>
<td></td>
</tr>
<tr>
<td>Black NH</td>
<td>1,117</td>
<td>961</td>
<td>86%*</td>
<td>1,129</td>
<td>156</td>
<td>14%*</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>1,451</td>
<td>1,081</td>
<td>75%</td>
<td>1,394</td>
<td>369</td>
<td>27%</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>3,530</td>
<td>2,757</td>
<td>78%*</td>
<td>3,530</td>
<td>773</td>
<td>22%*</td>
<td></td>
</tr>
<tr>
<td><strong>SSI</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asian/Pacific Islander NH</td>
<td>226</td>
<td>136</td>
<td>60%</td>
<td>229</td>
<td>90</td>
<td>39%</td>
<td></td>
</tr>
<tr>
<td>Hispanic</td>
<td>837</td>
<td>523</td>
<td>62%</td>
<td>869</td>
<td>314</td>
<td>36%</td>
<td></td>
</tr>
<tr>
<td>Black NH</td>
<td>1,516</td>
<td>925</td>
<td>61%</td>
<td>1,528</td>
<td>591</td>
<td>39%</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>3,275</td>
<td>1,930</td>
<td>59%</td>
<td>3,213</td>
<td>1,345</td>
<td>42%</td>
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</tr>
<tr>
<td><strong>Total</strong></td>
<td>5,962</td>
<td>3,573</td>
<td>60%</td>
<td>5,962</td>
<td>2,389</td>
<td>40%</td>
<td></td>
</tr>
<tr>
<td><strong>Food Stamps</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asian/Pacific Islander NH</td>
<td>320</td>
<td>188</td>
<td>59%</td>
<td>331</td>
<td>132</td>
<td>40%</td>
<td></td>
</tr>
<tr>
<td>Hispanic</td>
<td>2,550</td>
<td>1,557</td>
<td>61%</td>
<td>2,636</td>
<td>993</td>
<td>38%</td>
<td></td>
</tr>
<tr>
<td>Black NH</td>
<td>3,716</td>
<td>2,568</td>
<td>69%*</td>
<td>3,741</td>
<td>1,148</td>
<td>31%*</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>5,704</td>
<td>3,555</td>
<td>62%</td>
<td>5,551</td>
<td>2,150</td>
<td>39%</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>12,496</td>
<td>7,987</td>
<td>64%</td>
<td>12,496</td>
<td>4,509</td>
<td>36%</td>
<td></td>
</tr>
<tr>
<td><strong>Medicaid</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asian/Pacific Islander NH</td>
<td>747</td>
<td>454</td>
<td>61%</td>
<td>778</td>
<td>293</td>
<td>38%</td>
<td></td>
</tr>
<tr>
<td>Hispanic</td>
<td>3,801</td>
<td>2,321</td>
<td>61%</td>
<td>3,979</td>
<td>1,480</td>
<td>37%</td>
<td></td>
</tr>
<tr>
<td>Black NH</td>
<td>4,663</td>
<td>3,193</td>
<td>68%*</td>
<td>4,701</td>
<td>1,470</td>
<td>31%*</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>11,415</td>
<td>6,801</td>
<td>60%</td>
<td>11,106</td>
<td>4,613</td>
<td>42%</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>20,978</td>
<td>12,967</td>
<td>62%</td>
<td>20,978</td>
<td>8,010</td>
<td>38%</td>
<td></td>
</tr>
</tbody>
</table>


The unit of analysis is the "minimal household unit" or MHU; MHUs include married couples, either alone or with dependent children, and single adults. The MHUs approximate (continues on next page) nuclear families and, in many cases, welfare eligibility units better than either households, individuals, or CPS family units. See Van Hook, Glick, and Bean 1999.
<table>
<thead>
<tr>
<th>Sex Difference</th>
<th>Intergroup Difference</th>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Amt.</td>
<td>Amt.</td>
<td>Amt.</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>36% **</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>52% **</td>
<td>-8%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>72% **</td>
<td>-19% *</td>
<td>18% *</td>
<td></td>
</tr>
<tr>
<td>48% **</td>
<td>-7%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>56% **</td>
<td>-11% *</td>
<td>10% *</td>
<td></td>
</tr>
<tr>
<td>21% **</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26% **</td>
<td>-2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22% **</td>
<td>-1%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17% **</td>
<td>1%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20% **</td>
<td>0%</td>
<td>-1%</td>
<td></td>
</tr>
<tr>
<td>19% **</td>
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<td></td>
<td></td>
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<tr>
<td>23% **</td>
<td>-2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>38% **</td>
<td>-10% *</td>
<td>9% *</td>
<td></td>
</tr>
<tr>
<td>24% **</td>
<td>-4%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28% **</td>
<td>-5%</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>23% **</td>
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</tr>
<tr>
<td>24% **</td>
<td>0%</td>
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<tr>
<td>37% **</td>
<td>-8% *</td>
<td>6% *</td>
<td></td>
</tr>
<tr>
<td>18% **</td>
<td>1%</td>
<td></td>
<td>-4%</td>
</tr>
<tr>
<td>24% **</td>
<td></td>
<td>-1%</td>
<td>0%</td>
</tr>
</tbody>
</table>

American Indians are included in the total population count but do not appear in the table because of their small population size.

* Difference as compared with Asian/Pacific Islander NH population is statistically significant at p < 0.10

** Difference between men and women is statistically significant at p < 0.10
expires. Other states, including New York, have no such mandate and actively push women off welfare without any job training.

**Pushed Off Welfare and into Poverty Jobs**
When the AFDC was eliminated and replaced by TANF, all women with children lost a safety net that existed for 60 years. Across the country, county-level welfare offices have not addressed the barriers Asian immigrant women face when they try to attain financial self-sufficiency—i.e., their limited-English proficiency and lack of job skills. Moreover, Asian immigrant women encounter discrimination and other hardships that often result in denial of equal access to TANF benefits and services.

► 1. Denial of Access to Written Materials and Interpreters
On August 23, 2000, 50 young Vietnamese and Cambodian men and women from the Bronx held a rally to protest the lack of translators at welfare offices. Nine-year-old Maryanne Heam told the rally that she was tired of missing school to serve as a welfare interpreter. She did not speak much Cambodian and found it hard to translate for her mother. The demonstrators moved to a welfare office and demanded a meeting with officials. They got a pledge that welfare offices will stop using children to interpret, and at the very least provide an interpreter by phone.⁶

California, New York, and other state laws require that limited-English proficient (LEP) applicants and recipients be provided with written translations and interpreters to enable them to effectively communicate with caseworkers. Federal law, Title VI of the Civil Rights Act of 1964, provides that no person shall be excluded from participation in, denied the benefits of, or be subjected to race, color, or national origin discrimination under any program or activity receiving federal financial assistance.⁷ Despite these laws, states routinely fail to provide language appropriate services to immigrants, thereby illegally denying them equal access to TANF benefits and services.

In New York City, 15,000 to 25,000 Southeast Asians, primarily from Vietnam and Cambodia, live in the Bronx. A summer 2000 survey of 100 Southeast Asian adults and 96 youth in the Bronx conducted by the Committee Against Anti-Asian Violence (CAAAV) found that not one welfare center in the Bronx had Khmer or Vietnamese speaking translators even though 65% of the Southeast Asian population in the Bronx is on welfare. None of the adults sur-

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⁷ In August 2000, then-President Clinton issued an Executive Order requiring welfare agencies receiving federal funds to ensure that LEP recipients have meaningful access to programs and activities that are normally provided in English. As of March 2001, newly elected President Bush put the executive order on hold and he and Congress were considering whether to reverse Clinton’s mandate.
veyed were aware that the welfare centers were required by law to provide translation services. Although the city claims phone interpreters are available, 93% of the adults surveyed had never worked with a caseworker who made use of a phone interpreter. The children of Southeast Asian welfare recipients often find themselves translating for their parents at welfare centers. Of the youth surveyed, ranging from nine to twenty-one years old, 86% had missed school to translate for their parents. Most are not fluent in their parents’ native tongues and report feeling uncomfortable translating but do so nonetheless in attempt to preserve their families’ welfare benefits.

In Los Angeles County, 41% or about 94,000 welfare recipients speak languages other than English, including Armenian, Cambodian, Chinese, Spanish, and Vietnamese. Yet Los Angeles County routinely fails to provide written or verbal translations. In a class action complaint filed in December 1999 with the United States Department of Health and Human Services (HHS) by Asian and Latina TANF recipients and the Asian Pacific American Legal Center (APALC), plaintiffs allege that the county fails to provide, in the immigrant’s primary language, forms and program information, notice of mandatory appointments and notices of actions such as termination of aid, sanctions, approval or denial of various supportive services, appeal rights, and the right to participate in corrective action plans. Without their knowing why and what to do about it, women are denied the services they need to overcome barriers to employment, sanctioned, and dropped from welfare.

A 1999 Wisconsin study found that close to 70% of Hmong were unable to communicate verbally with their caseworker. Close to 90% couldn’t read the materials they received from the W-2 agency, Wisconsin’s TANF program. An Illinois study focusing exclusively on refugee women on welfare, including Vietnamese women, found that 83% do not speak English well or at all. While 81% had taken English classes, 74% still required translation assistance. A January 2001 Applied Research Center national study found that in New York City, problems were most pronounced for speakers of Asian languages. 84% of Southeast Asians did not have access to translation when needed, compared with 50% of Latinos.

Deprived of the right to interpreters, immigrants face personal indignities and financial penalties. Immigrants who are forced to rely on their children or complete strangers risk harming the parent/child relationship or embarrassment as their private lives are revealed to their children or a complete stranger. Financially, sanctions were imposed and benefits reduced for 48% of New York Southeast Asians surveyed by CAAAV, forcing many to spend rent money on food and finding themselves in debt or at the risk of eviction. The APALC complaint alleges that in Los Angeles County, over 500 LEP households have had their benefits terminated during the time English-only notices were used. A 2000 federal investigation of Wisconsin’s W-2 program found that one third of Hmong welfare recipients lost or were denied benefits because the state failed to provide interpreters or translate documents.
2. Denial of Access to Job Training and Educational Opportunities

TANF provided $3 billion to states over two years to pay for employment related activities aimed largely at individuals with significant barriers to work. For most Asian immigrant women, language is a daunting barrier between welfare and work. Yet, instead of using these resources to address the language barriers that keep immigrant women in poverty, states deny immigrant women equal access to vocational education and job training by offering classes only in English, failing to provide ESL classes and basic adult education, and steering them into Workfare programs (where one works for her welfare check), which tend to consist only of menial, dead-end jobs.

New York City’s treatment of LEP recipients is perhaps the most egregious. New York offers three ways for welfare recipients who cannot find unsubsidized employment to fulfill their work activities requirements: educational programs, job training, and Workfare. In the CAAAV survey, all 100 Southeast Asians surveyed were given only one option—Workfare. Not one survey participant was offered a job training or educational program, and 81% stated caseworkers never even informed them of the job training option. As part of Workfare, they cleaned parks or streets without proper equipment and picked up trash with bare hands and unmasked faces. Because of language barriers, none of the survey participants could speak to their Workfare supervisors and Workfare never provided ESL training. Vocational ESL classes do not exist for Khmer or Vietnamese speaking recipients. Over the last three years, only one person in the thousands of Southeast Asians living in the Bronx known to CAAAV has gotten a paid job after the Workfare program. As they waste their days in Workfare without learning jobs skills, the five-year time limit on receipt of TANF benefits ticks away.

Asian Americans in other states fare a little better, but not much. In the Wisconsin survey, 48% of Hmong report lack of job skills and 40% say language barriers prevented them from working. Nine out of 10 Hmong were placed in Workfare and of these two-thirds were assigned to light assembly and cleaning jobs with little to no opportunity for skill development. Of the 137 Hmong interviewed, only 13 received job training as part of Workfare and only seven were taking ESL courses. The Applied Research Center’s survey found that Asians were the least likely to be given job training. Only 28% of white respondents were enrolled in Workfare programs, compared to 33% of African Americans, 37% of Latinos, and 47% of Asians.

Los Angeles County, using the Work First policy, steers Asian immigrant women into jobs where earnings are below the federal poverty level. Under the Work First policy (which exists in almost every state), welfare recipients are pushed to find a job, any job, within four weeks of starting the welfare-to-work process.

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As of 2001, New York State had not spent $1.1 billion in federal welfare funds and had instead diverted those moneys to pay for tax cuts. Los Angeles County had approximately $400 million in unspent TANF funds.
The Work First policy leaves immigrant women in low-wage jobs with few options for job advancement in the long-run.

3. Stuck in Dead-end Below Poverty Wage Jobs
Denied welfare-to-work services, Asian immigrant women often remain on welfare longer than English-speaking welfare recipients. In California, for example, English speakers are leaving welfare at a faster rate, dropping 14% from 1998-99, compared with 8% for LEPs. Caseworkers are able to find work for only one-fifth of welfare recipients who speak limited-English, compared with about 60% of those who speak fluent English. Consequently, the proportion of LEP immigrants on TANF has increased while that of English speakers has decreased.

A 2000 Economic Roundtable study found that Southeast Asian women welfare workers fare worst of all welfare workers. For them, 63.8% earned below poverty wages as compared with 54.2% of Latinas and 53.3% of African American women. Southeast Asian women welfare workers have the highest poverty rate, at 97.2%, compared to Latinas at 88.8% and African American women at 81.6%. Southeast Asian women tend to have limited educational attainment in their home country and limited-English language ability. Higher levels of education, English-language ability, and US citizenship were strongly associated with greater job stability and earnings 54% higher than LEPs.

Eighty-five percent of Asian immigrant women on welfare work in low-wage industries. The niche industries for Southeast Asian women are non-durable manufacturing (41%), primarily apparel jobs, where earnings are 40% of the Federal Poverty Level (FPL); 18% in other services earning 44% of the FPL; and 10% in administrative positions earning 49% of the FPL. Recent immigrants end up in low-wage jobs without health benefits, not even earning minimum wage, because their limited English is not a barrier to working these jobs. As a result, 64% of Southeast Asians are concentrated in a few low-wage niche industries compared to 38% of Latino immigrants.

This pattern repeats itself throughout the country. Without job training, ESL, and vocational ESL classes, Asian immigrant women will be tracked into minimum wage or below jobs that lack health benefits. When they reach their lifetime cap in 2002, working full time at the minimum wage of $5.15 per hour or less, Asian immigrant women will have to work the equivalent of 60 to 80 hour weeks or two or three jobs just to move out of poverty.

Hungrier and Sicker Immigrant Women and Children

1. Declining Use of Food Stamps
Hunger has become a significant problem for Asian immigrants. An August 2000 survey by Physicians for Human Rights examined the impact of food stamp cuts on Asian and Latino immigrants in California, Illinois, and Texas and found that
87% of the legal immigrant households living in poverty were food insecure—seven times the rate in the general population. 10% suffered from severe hunger, more than 10 times the rate of the general population. To pay rent and avoid having utilities turned off, the majority of adult immigrants surveyed ate only twice a day, making sure their children ate something, even if it was peanut butter on old bread or tortillas and beans. Even short-term periods of malnutrition can permanently affect a child’s behavior, cognitive development, and future productivity. Food insecure pregnant women face high risks of low birth-weight infants and higher infant mortality rates.

Hunger and illness are rising in immigrant communities, not just because welfare reform excluded large segments of the immigrant population from eligibility but also because of the barriers to access that welfare reform and government officials created for those who remained eligible. Despite the fact that citizen children remained eligible for public benefits after welfare reform, an alarming number dropped out of the food stamp program. In the CAAV survey of Southeast Asians living in the Bronx, welfare centers were removing not only immigrant adults from the food stamps program but also their citizen children. Of those surveyed, 52% percent did not receive food stamps on a consistent basis. In its 2000 study, the National Immigrant Rights Coalition estimated that by 1998, 75% of citizen children in immigrant headed households had dropped off the program compared to only 11% of children in non-immigrant households. In Los Angeles County, an estimated 100,000 eligible Asian Americans are without food stamps.

2. Declining Use of Medicaid
Medicaid use also has declined significantly among eligible immigrants. Immigrants are concentrated in industries that traditionally do not provide health insurance (e.g., agriculture, garment, and private households). Thus, a higher percentage of immigrants (43%) are uninsured as compared to US born workers (16%). While there are no numbers on Asian Americans, according to the Latino Issues Forum, 70% or 420,000 California children eligible for Medicaid who live in families with immigrant parents are uninsured. The New York Immigrant Coalition estimates that 34,000 New York immigrants who were eligible in 2000 did not apply for Medicaid because of fear of the INS or confusion over eligibility. The health of immigrants has been harmed by the decrease in Medicaid coverage. Anecdotal evidence from doctors suggests that immigrants are generally sicker or in need of emergency care when they finally see a doctor.

3. Uneven Restoration of Benefits
In 1997, when the first notices advising of SSI cut-offs were sent, a number of desperate elderly immigrants in California, New York, and Wisconsin committed sui-

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1Food insecure is defined as having limited or uncertain access to enough safe, nutritious food for an active and healthy life.
cide. These tragedies along with intense pressure by advocates led to Congress restoring benefits to some 500,000 immigrants who were already receiving those benefits as of August 22, 1996, and food stamps to immigrants under the age of 18, those 65 years or older on August 22, 1996, and those receiving disability assistance. Congress divided immigrants between those who were in the US prior to passage of welfare reform on August 22, 1996 (pre-enactment immigrants) and those who entered after that date (post-enactment immigrants). Most pre-enactment working age immigrant adults remained ineligible for food stamps. Most post-enactment immigrants were excluded from eligibility for SSI and food stamps until they have met the five-year residency requirement. Since every year about 900,000 legal immigrants enter the US to join their families, the number excluded from federal public benefits continues to grow.

To replace the federally funded benefits that were cut, over half the states provide at least one of four key substitute programs to immigrants: TANF and Medicaid to post-enactment immigrants and food stamps and SSI to pre- and/or post-enactment immigrants. Only California opted to provide all four state-funded substitute programs. New York opted to provide only food stamps and only to pre-enactment children, elderly, and the disabled. As Table 4 shows, the safety net varies greatly state by state. Immigrants in many states have fallen through the cracks in the patchwork where neither federal nor state benefits are available to them.

Chilling Effects on Immigrant Parents and Their Citizen Children

A number of factors prevent eligible Asian immigrant women from applying for benefits, even when they are ill or their children are hungry. In an August 2000 study by APALC on use of food stamps, organizations serving the Asian American community in Southern California identified the top barriers to benefits participation by the Asian immigrant community, including mistrust and fear of government, fear that using public benefits would make one an undesirable public

\[\text{SSI was also restored to pre-and post-enactment immigrants who are veterans and refugees, to pre-enactment immigrants who have worked 10 years or become citizens, and post-enactment immigrants in the US for five years and who have worked 10 years. Food stamps were also restored to pre-enactment immigrants who are veterans, refugees, and members of Hmong and Laotians tribes militarily assisting the US during the Vietnam War but otherwise denied to most post-enactment immigrants for five years after entry. The veterans and 10-year work exceptions are biased against immigrant women, since most women are unlikely to have served in the armed forces. Asian immigrant women may find it difficult to meet the 10-year work requirement as so many work in the “informal economy” of sweatshops or as domestic workers where pay may be cash under the table or Social Security taxes are not paid on their behalf.}\]

\[\text{New York does not provide Medicaid to post-enactment immigrants and as a result, an estimated 52,000 of them currently living in poverty are not receiving Medicaid benefits. By the year 2005, 109,000 legal immigrants will not receive Medicaid benefits. The restoration of food stamps in 1998 still left over 600,000 ineligible immigrants for which some states, but not all, provided substitute benefits. In New York City, 53,500 legal immigrants remain ineligible for food stamps.}\]
### Table 4.

**State Funded Substitute Programs as of August 1999**

for Pre- and Post-enactment (August 22, 1996) Immigrants

in states with largest numbers of Asian American population

<table>
<thead>
<tr>
<th>STATE</th>
<th>TANF Pre-</th>
<th>TANF Post-</th>
<th>SSI Pre-</th>
<th>SSI Post-</th>
<th>Food Stamps Pre-</th>
<th>Food Stamps Post-</th>
<th>Medicaid Pre-</th>
<th>Medicaid Post-</th>
</tr>
</thead>
<tbody>
<tr>
<td>California (no deeming)</td>
<td>x</td>
<td>x*</td>
<td>x</td>
<td>certain immigrants</td>
<td>x</td>
<td>certain immigrants*</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>New York</td>
<td>x</td>
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<td>Hawaii</td>
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<td>x*</td>
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<td></td>
<td></td>
<td></td>
<td>x</td>
<td>x*</td>
</tr>
<tr>
<td>Texas</td>
<td>x</td>
<td></td>
<td></td>
<td>elderly, disabled only</td>
<td></td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>New Jersey</td>
<td>x</td>
<td></td>
<td></td>
<td>x*</td>
<td></td>
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<td>x</td>
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</tr>
<tr>
<td>Illinois</td>
<td>x</td>
<td>x</td>
<td></td>
<td>x</td>
<td>certain immigrants*</td>
<td></td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Washington</td>
<td>x</td>
<td>x*</td>
<td></td>
<td>x*</td>
<td>x*</td>
<td>x</td>
<td>x*</td>
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</tr>
<tr>
<td>Florida</td>
<td>x</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>children, elderly, disabled</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Virginia</td>
<td>x</td>
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<td></td>
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<td>x</td>
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<td>Massachusetts</td>
<td>x</td>
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<tr>
<td>Minnesota</td>
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<td>x*</td>
<td>x*</td>
<td>x</td>
<td>x*</td>
<td></td>
</tr>
</tbody>
</table>

**Source:** Supplemental Report to “Patchwork Policies: State Assistance for Immigrants under Welfare Reform, The Urban Institute, August 1999

* Sponsor deeming: An immigrant is eligible only if the combined income of her and her sponsor (family member who sponsored her to US) does not exceed 50% to 80% of poverty.

1 Most state funded substitute programs are not permanent and appropriations must be made each new legislative session. Some programs may have been added or ended since 1999.

2 For children only, starting in 2000, with sponsor deeming.
charge, confusion about which immigrants are eligible for which programs, and language barriers. Other barriers include the hostility of state and county government and caseworkers toward immigrants and intimidating government tactics that discourage immigrants from applying for benefits.

▶ 1. Oppressive Government Tactics
From 1994-99, the State of California funded a program at border points and airports to “catch” immigrant women who used prenatal care provided by Medicaid. Latina women were detained at the Mexican border by state and INS agents. At the San Francisco and Los Angeles airports, 50% of those detained were Asian women, 25% were Latina, and 25% were of other nationalities. State and INS officials specifically targeted women of childbearing age on flights from Asia and Mexico. Under questioning, if a woman indicated she had recently given birth and received public assistance at that time, the INS agent on the spot decided whether she was a public charge and whether or not she received the assistance fraudulently. The state agent calculated how much she received. Women were intimidated into repaying the Medicaid benefits they received, even if they obtained the benefits legally, by the threat of imprisonment, deportation, or reduced chances for obtaining green cards or citizenship. In this way, California illegally collected $3.8 million from approximately 1,500 Asian and Latina women.\[12\]

▶ 2. The “Public Charge” Label
If the INS considers a person likely to be public charge, i.e. someone who either has become or has the possibility of becoming dependent on government benefits, it can deny an immigrant’s application for a green card, refuse immigrants reentry into the US, or deport the person. Being considered a public charge by the INS is among the top barriers to immigrant women applying for public assistance. In May 1999, the INS issued guidelines making it clear that use of food stamps, nutritional assistance, Medicaid, and school lunches would not make an immigrant a public charge. Nonetheless, thousands of Asian immigrant women will not apply for food stamps and Medicaid. More than a year after the INS guidelines were issued, most Los Angeles area Asian American service providers surveyed in the APALC study stated they were reluctant to give assurances to immigrant women because they themselves were skeptical of the INS guidelines. The health consequences to women and their children who do not have Medicaid are already becoming manifest. The National Immigrant Law Center recently reported that infant mortality rates are climbing in immigrant communities such as New York City’s Bedford-Stuyvesant, Harlem, and in parts of Brooklyn and the Bronx.

\[12\]The program was challenged in court and settlements were reached that required the state to return the moneys unlawfully collected by the state. In April 1999, the state legislature defunded the program.
3. Mandatory Reporting

Welfare reform requires that state agencies administering TANF, SSI, and food stamps programs report to the INS any person the agency knows is not legally in the US and allows voluntary reporting of any immigrant, even if she is here legally. The INS has not made it clear that reporting requirements apply to the individual seeking assistance and not to the whole family. State agencies ask about the immigration status of all family members. The vast majority, 85%, of immigrant families (those headed by a non-citizen parent) are “mixed status” families that include at least one US citizen and may include undocumented family members. Fear of exposing undocumented family members to the INS is the primary reason that immigrant women, Asian and Latino, do not apply for Medicaid or Food Stamps even if they are pregnant or have US citizen children. 77% of the children in mixed status families are US citizens and eligible for all forms of public assistance. It is pure fear that prevents a very large number of citizen children from receiving food stamps or health coverage.

4. Sponsor Deeming

Under welfare reform, to determine an immigrant’s eligibility for food stamps, Medicaid, TANF, and SSI, a state agency may count the income of the family member who sponsored the immigrant to the US as part of the immigrant’s income. In other words, the sponsor’s income is deemed the applicant’s income, usually resulting in a combined income that exceeds eligibility levels. If sponsors’ incomes are low enough for applicants to be eligible for public assistance, the sponsors are financially liable for reimbursing Medicaid used (except for emergency services) and food stamps. In order not to expose their sponsors to financial liability, immigrants often do not apply for benefits.

5. Caseworkers and Immigrant Eligibility

Asian immigrants are unsure about their eligibility status and many of their caseworkers are also confused. Myriad types of immigrant categories were created by welfare reform (such as pre- and post-enactment, qualified and non-qualified, refugees, veterans, children, elderly, and disabled) and each group qualifies for different sets of benefits. Often, caseworkers assume that ineligibility for one type of benefit means ineligibility for all types of assistance and some have refused to accept benefits applications from immigrants.

6. Hostile Caseworkers

Immigrants face open hostility from many caseworkers, which often delays the receipt of benefits and sometimes create insurmountable barriers to applying for or receiving benefits. For example, an undocumented, pregnant, and battered Vietnamese woman applied for Medicaid for her US-citizen child. Her caseworker told her, “You have no right to be having children here” and threatened to phone the INS. The woman left the office without receiving any benefits. A Milwaukee widow was told that her benefits arrived only sporadically “because you’re Hmong.” An Oakland, California, woman reported that a caseworker had torn her
application form up in front of her because she could not understand the case-worker’s English.

7. Language Barriers
Across the country, the lack of translated materials and interpreter services exacerbates the rampant confusion over immigrant eligibility, public charge, and mandatory reporting concerns. Asian immigrants who do manage to get approved for benefits often get cut off or have benefits reduced when they receive but cannot read or respond to English-only notices.

Advocacy Needed
Advocacy must occur on two fronts. The first is the fight for TANF reauthorization. Unless Congress reauthorizes funding, funds for TANF and the food stamps programs will run out in September 2002. The second need is for on-going local and state advocacy to expand state substitute programs to immigrants ineligible for federal benefits and ensure that Asian immigrant women have equal access to existing TANF benefits and welfare-to-work services.

The Reauthorization Fight
In the reauthorization process, no one seriously thinks that they can succeed in restoring the old system of entitlement to welfare for families with children. However, the reauthorization debates may be an opportunity for advocates to “fix” welfare reform by restoring benefits to all immigrants and addressing the barriers to women moving from welfare to work. Other “fixes” include eliminating Work First and expanding the list of qualifying work activities to include ESL classes, removing barriers to immigrants use of public benefits, extending time limits for difficult-to-place clients, and creating safety nets for those who simply cannot learn English or job skills necessary to move from welfare to work. Given the recent capture of the White House and both houses of Congress by the Republicans, fixing welfare reform will be even more difficult.

An early indication of the conservative agenda came in February 2001 at a “New World of Welfare” conference consisting of Washington DC, conservative think tanks such as the Heritage Foundation and individuals such as Charles Murray, author of the Bell Curve, who put forth their reauthorization agenda: cutting off welfare to unwed mothers, protecting Work First, full family sanctions, and keeping the time limits firm. The liberals were invited to debate the conservatives. The Center on Law and Social Policy and the Center on Budget & Policy Priorities, didn't disagree that the premise of TANF was good, but only sought a softer approach, such as liberalizing time limits and seeking less punitive sanctions. The issue of language barriers to access was not on the agenda. Grassroots and civil rights organizations were shut out from speaking at this conference.
Ensuring Equal Access to TANF, Food Stamps, and Medicaid

Ongoing advocacy must continue to ensure Asian immigrant women have equal access to TANF and other public benefits. Class actions, in court and before HHS, have been filed in New York City, Los Angeles, Minneapolis, and the San Francisco Bay Area. These actions claim that the failure to provide written translations and interpreters amounts to a denial of equal access to benefits to LEP immigrants and national origin discrimination. Most of these class actions have not been resolved.

For immigrant women who were denied welfare-to-work services, their 60-month lifetime cap must be extended until they have received appropriate job training or ESL classes. To assuage eligible immigrants of their distrust of government and encourage use of food stamps and Medicaid programs, the INS must be pressured to issue clearer guidelines. Caseworkers must be trained about immigrant eligibility rules so that immigrants are not wrongfully denied benefits. Immigrants need to know their eligibility rights and how to take action against illegal caseworker actions. Advocacy and litigation groups need to be funded to monitor and identify abuses, to take complaints from immigrants and to counter systemic abuses.

The Organizations

Coalition Work
Coalitions of civil rights, welfare rights, and women’s and labor organizations must be forged to engage in the reauthorization debates. Such coalitions failed to form in 1996. Aside from Asian American organizations, most national civil rights groups failed to throw their full weight into fighting welfare reform. Instead of opposing welfare reform in its entirety, the D.C. beltway feminist organizations identified battered women as the most deserving for public assistance and lobbied for the Family Violence Option to TANF. Patsy Mink (D-HI), author of the liberal alternative to welfare reform, was disappointed in the national feminist organizations. “If they had raised the feminist issue,” she says, “it might have made a big difference.” Different welfare constituents fought to protect their share of the pie. Asian American civil rights groups did not find allies in the general welfare rights movement. Equal access to public benefits for immigrants became the sacrificial lamb.

In 1995 and 1996, the Asian American civil rights organizations—National Asian Pacific American Legal Consortium (NAPALC) and its three affiliates, the San Francisco-based Asian Law Caucus (ALC), Asian Pacific American Legal Center of Southern California (APALC), and Asian American Legal Defense and Education Fund (AALDEF) in New York, and the newly formed National Korean American Services and Education Consortium (NAKASEC) organized early, mobilizing their constituents and lobbied intensely against the exclusion of immigrants from TANF, food stamps, and SSI. All these organizations engaged in the fight to restore food stamps and SSI. However, until Congress puts reauthorization on its agenda, most of the Asian American organizations will not regroup for the fight.

In 2002, given the large impact on their communities, Southeast Asian American organizations are leading the struggle to fix welfare reform. The
Southeast Asia Resource Action Center (SEARAC) in coalition with the Hmong National Development (HND) and support from the NAPALC began intensive legislative advocacy, in particular, for restoration of TANF to all immigrants and more flexible rules to allow states to count ESL and other education classes as work and lengthen the allowable time spent in education while women are receiving TANF benefits.

Grassroots Organizing
Public benefits programs are administered on the local level. States and counties adopt their own regulations. The ongoing work of ensuring equal access must take place on a state-by-state and county-by-county basis, which makes advocacy more difficult. Added to this difficulty is the paucity of Asian American organizations that do this work in a consistent manner. Only the New York-based Committee Against Anti-Asian Violence (CAAAV) has a comprehensive ongoing welfare rights program that engages in grassroots organizing, advocacy, and direct services to Southeast Asian welfare recipients. Most of the Asian American civil rights organizations do not have welfare rights projects and took up the welfare reform and restoration fight because of its broad attacks on immigrants. The Los Angeles-based APALC continued some welfare rights advocacy after the restoration of food stamps and SSI, moving from eligibility issues to access issues. It filed the class action complaint challenging Los Angeles County’s denial of equal access to TANF benefits and services to LEP immigrants, issued the Barriers to Food Stamps report, and as part of the reauthorization process, is conducting a survey of 15 CBOs who serve TANF recipients to determine the advocacy that will be needed. Primarily, Asians benefit from the language access advocacy of the broader immigrant rights or legal services coalitions such as the California Immigrant Welfare Collaborative (which APALC helped form and is a part of), the New York Immigration Coalition, and ad hoc legal services coalitions such as one led by the Oakland-based Center on Poverty Law and Economic Opportunity (CPLEO).
**Recommendations for Action**

- On the federal level, engage in legislative advocacy for the reauthorization of TANF and food stamps funding when it ends in September 2002. “Fix” welfare reform by restoring benefits to immigrants that they were entitled to before. Address the barriers to Asian immigrant women moving from welfare to work.

- Provide, at the state level, permanent substitute programs for immigrants no longer eligible for federally funded programs.

- Study the impact of welfare reform on Asian American communities.

- Ensure that Asian immigrant women have equal access to TANF and other public benefits.

- Bring class actions litigation and apply pressure on counties to challenge their failure to provide written translations, interpreters, job training, vocational ESL and ESL classes to Asian immigrant women. Engage in outreach to the affected Asian American women.

- Pressure the INS to issue clearer guidelines to end the chilling effects of mandatory reporting.

- Train caseworkers to understand eligibility rules so immigrants are not wrongfully denied benefits. Translate eligibility rules into several Asian languages and distribute them widely.

- Help immigrants understand their rights and how to exercise them vis-à-vis caseworkers. Provide advocacy and litigation groups with the resources to receive complaints from immigrants and monitor and take action against illegal caseworker practices.
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From the Asian American Legal Defense and Education Fund (AADELF) and the National Employment Law Project’s jointly produced handbook "Rights Begin at Home: Protecting Yourself as a Domestic Worker" on employment laws in the New York City area.
The Trafficking of Asian Women

The Most Grievous of Human Rights Violations

Thonglim Khamphiranon, 41, and Somkhit Yindrphor, 57, two Thai women, were smuggled into the US and enslaved for five years by Supawan Verapol, a Thai national. She forced them to work at her home and her restaurant, the Gulf of Siam in Los Angeles. The women worked seven days a week, 12 hours a day, and sometimes up to 18 to 20 hours a day at the house and restaurant. They were forced to sleep on the floor outside the employer’s door at night to be at her beck and call. They were denied medical and dental care. One of them was in such pain at one point that she resorted to pulling her own teeth with toenail clippers. They finally escaped in 1998 and found refuge at the Thai Community Development Center in Los Angeles.¹

Scope and Causes of Trafficking

In the trafficking of women, class, race, and gender oppression come together to create the worst exploitation.² All of the principles of the Universal Declaration of Human Rights are violated by the trade in women for sexual or severe labor exploitation. Each year, an estimated 700,000 to two million women and children are trafficked globally. Of that number, the Central Intelligence Agency (CIA) estimates that about 45,000 to 50,000 are brought to the US under false pretenses and held in servitude, forced into prostitution, bonded sweatshop labor, and/or domestic servitude. Approximately 30,000 come from Asia, 10,000 from Latin America, and 5,000 from other regions such as the former Soviet bloc countries.

² While men and boys are also trafficked into involuntary servitude, the vast majority of trafficking victims are women and girls. They suffer harms of a different nature and degree than male victims. Women and girls are primarily trafficked for sex, as well as labor deemed to be “women’s work.” Or they are forced into marriages and/or reproduction while men and boys are not. Girls are most often trafficked for their virginity into marriage and the sex industry while boys are most often trafficked into sweatshop or other similar labor.
The income gap between the richest and poorest countries has increased from 30 to 1 in 1960 to 74 to 1 in 1997. The worldwide flow of migrants looking for work increased from 85 million people per year in 1975 to 145 million in 2000.

Trafficking in women flourishes in direct proportion to the growing economic inequity between the developing countries of the South and the industrialized countries of the North. Traffickers recruit women in the most impoverished countries where unemployment is high, women have unequal access to employment opportunities, safety nets are nonexistent, and social networks are disintegrating. Denied access to the formal economy, poor women increasingly migrate alone across international borders to support families. Barred from legal immigration because of limited visas issued by receiving countries, women are easily recruited and deceived into traveling with organized crime members to factory jobs, domestic work, and sex work.

In addition, as informal and underground economy grows in the US so does trafficking and slavery. The exploitation of immigrants and women of color is widespread and very much a part of the fabric of the underground economy. Across sectors including the garment, domestic, agricultural, and restaurant industries, multiple violations of minimum wage and overtime, health and safety, workers compensation, and other labor laws occur. Underenforcement of laws by government allows employers to violate laws with impunity, paving the way for trafficking to spread.

Current US Law on Trafficking

Asian women are trafficked into the US in different ways and for various purposes. Whether or not a person is considered to have been trafficked depends on the definition adopted by a country. Until recently, there has not been even a minimally agreed upon definition of trafficking. In October 2000, advocates in the US succeeded in obtaining from Congress, in the recently passed The Victims of Trafficking and Violence Protection Act of 2000 (HR 3244), a comprehensive trafficking law with a definition of trafficking, stiffer penalties for traffickers—from 10 to 20 years per count and life sentences if death, kidnapping, sexual abuse, or attempted murder are involved—and protections and services for victims. The definition is broad enough for prosecutors to establish the crime of trafficking where

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3 The income gap between the richest and poorest countries has increased from 30 to 1 in 1960 to 74 to 1 in 1997. The worldwide flow of migrants looking for work increased from 85 million people per year in 1975 to 145 million in 2000.

4 Trafficking for the sweatshop industries will be covered in Chapters Three and Four.

5 While many victims of trafficking are forced to work in brothels hidden in Asian ethnic communities and serve only Asian clients, many women freed from the brothels have also stated that white men were among their customers. Thus, more data is needed before the source of the growing demand can be determined.
only psychological and no physical coercion is used. If recruitment involved the use of fraud, HR 3244 allows prosecutors to bring cases even where victims agreed to migrate voluntarily to work as a domestic worker or in the sex industry but find themselves in peonage, debt bondage, slavery, or involuntary servitude.

The Broad Spectrum of Trafficking and Exploitation

Trafficking by Organized Crime for the Sex Industry

In February 2001, after a two-year INS probe, 19 members of an Asian smuggling ring operating in the San Francisco Bay Area were indicted for trafficking women into the US from Korea, Malaysia, and other Southeast Asian countries and forcing them to work as prostitutes in brothels in California and other states. The women had to pay off debts of up to $40,000 to the smugglers. The smuggling ring also trafficked immigrant women from other parts of the US, including Texas, Arizona, Minnesota, Louisiana, and New York. The brothels were operated out of as many as 25 single-family homes in suburban settings where they were less likely to arouse suspicion. 

1. Scope and Magnitude

It is unclear how many of the estimated 30,000 Asian women trafficked into the US are destined for the sex trade as no centralized governmental agency is tracking this data. However, it is estimated that 10,000 Asian women are forced to work in Los Angeles' underground brothels. The Immigration and Naturalization Service (INS) has discovered over 250 brothels in 26 different cities where it is likely that trafficking victims are working. It is estimated that about 20 to 30 Thai women are smuggled into US and Canadian brothels each month. Advocates believe that hundreds, perhaps thousands, of brothels, operate as massage parlors, spas, tanning parlors, and beauty salons. Every major city is a receiving center for trafficked women, with the city of Los Angeles receiving the most.

2. The Traffickers

The CIA believes that traffickers of Asian women into the US are not part of the more established and highly organized crime syndicates. Rather, they are primarily small or large criminal groups, working in loosely connected criminal net-

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7 Trafficking in women is much more extensive in the US than trafficking in girls, but it is a growing problem. For example, in 1999, 13 members of an Asian smuggling ring were indicted for trafficking up to 1,000 Asian women and girls, between the ages of 13 and 25, to Atlanta and other US cities for prostitution. The girls were held in bondage until their $30,000 to $40,000 contracts were paid off.
8 Given the lack of data collection, US law enforcement officials admit they do not know what degree large international organized crime syndicates are engaged in this industry.
works. Though their connections are loose, the groups are effective in setting up businesses in the US, concealing the criminal nature of their activities, and deceiving women into accepting them as legitimate recruiters or potential employers. It is known that Chinese, Vietnamese, Korean, and other Southeast Asian criminal enterprises play an integral part in the smuggling of Asian women to the US, whether as recruiters, jockeys (bringing the women to the US), harborers (providing the safehouses during transit), brothel owners, extortionists, or protectors. A loose joint venture may cut across ethnic and organizational lines and may exist only temporarily for a given opportunity. They may subcontract out parts of their operations to groups such as street gangs in the Asian ethnic enclaves to act as prison guards or retrieve women who have escaped.

3. Enticement and Deception
 Traffickers lure women from impoverished countries to the US by making false promises of jobs as waitresses, nannies, models, and factory workers with high wages and good working conditions. Recruiters front the money for travel documents, transportation, and charge the women from $25,000 to $30,000 for their services. Once recruited, the women’s passports are confiscated, their movements are restricted, and many are forced to work as prostitutes until their debts are repaid. Women are prevented from leaving by violence, or threats of violence to themselves or their families. Trafficking victims may also suffer from extreme physical and mental abuse, including rape, imprisonment, and forced abortions. The women live and work in isolation and are denied outside medical attention. Fearing arrest and isolated by language, the women often do not attempt to leave.

4. Enormous Profits/Minimal Risks
 The selling of naive and desperate young women into sexual bondage has become one of the fastest growing criminal enterprises in the global economy. Trafficking in women is now more lucrative than the international trade in drug and arms. Unlike cocaine, women and girls can be sold and resold. Criminal groups make big profits with little risk by dealing in humans; the punishment is minimal. Until HR 3244 created stiffer penalties in the US, the statutory maximum for sale into involuntary servitude was only 10 years per count. Sentences for traffickers of human beings ranged from seven months to nine years. By contrast, the punishment for distributing a kilo of heroin is a life sentence.

Trafficking for Domestic Servitude
 Shamela Begum, a Bangladeshi woman, was a live-in domestic in New York for an official at the Bahrain Mission to the UN. Upon her arrival in the US, her passport was taken away by her employer. Over the 10 months that she worked for him, she worked seven days a week, 12 to 15 hours a day, and was only paid $100 a month, which was sent by her employer to Begum’s husband in Bangladesh. When her employers left town, they left Begum no food or money to buy food. She was twice
assaulted by her employer’s wife and confined to the house, leaving only twice, both times with the wife. The second time, Begum overheard a conversation in Bengali among some sidewalk vendors. When her employers left town later that day, she left the apartment alone for the first time. Not knowing how to use the elevator, she had to ask a boy to help her get downstairs. She retraced her steps to the vendor and told him her tale. The vendor contacted a Bengali language newspaper, which contacted Andolan, a South Asian workers’ rights group. On August 30, 1999, Andolan brought the police to the apartment and Begum was freed. Because Begum’s employers had diplomatic immunity, they were not arrested.9

Each year, the INS issues 4,000 two-year temporary work visas to diplomats and international bureaucrats based in the US to bring domestic workers to work as nannies, maids, cooks, and gardeners. These visas are issued to diplomats at foreign embassies and consular offices throughout the US and to high-ranking officials of the United Nations, Organization of American States, World Bank and IMF. The diplomat employers of domestic workers come from all over the world, but their domestic helpers are primarily from poorer countries. Of the 4,000 visas issued annually, 49% are issued to women from Asian countries, half of those to Filipinas, and the rest to women from Latin American and African countries. Most diplomatic domestic workers are employed in New York City, the site of UN headquarters, and in Washington DC, the site of most embassies and the main offices of the World Bank and IMF. As diplomats, employers may have full or limited diplomatic immunity from criminal and/or civil prosecution and as a result their domestic employees may not have legal recourse for the abuses and exploitation suffered.

Over a 20-year period, the Spanish Catholic Center in the Washington DC area has handled at least 50 cases a year, for a total of 1,000 cases, of women who faced severe exploitation or were held in slave-like conditions by diplomats and international bureaucrats. Advocates believe this is only the tip of the iceberg. These women are confined to homes, forced to work around the clock, seven days a week, with no time off. They are paid between $100 to $400 a month, some working for years without pay. In some cases they are passed on to a relative or mistress.

Thousands of other domestic workers are employed by wealthy private individuals and work under similar conditions of involuntary servitude.10 Wealthy individuals who traffic women to the US are primarily émigrés from countries

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10 Domestic workers enter the US legally on B-1 visas (temporary work visas). Because the INS does not keep a record of the number of domestic workers brought in under the B-1 visa category, it is difficult to estimate the number of women who may be in the situation of domestic servitude.
with great disparities in wealth such as Indonesia, Bangladesh, Thailand, the Philippines, and Nepal. They often bring their domestic help with them to the US, whom they view as servants and not as workers with rights. When a domestic worker moves with the family to the US, often salaries that are promised are not paid, there may be sexual abuse and withholding of health and dental care, and if she complains, death threats to the family back home. In one case, the employers had their domestic worker’s home in Bangladesh burnt down to intimidate her into not testifying in a criminal prosecution against them. Domestic workers may work as long as five years in a home before escaping. These domestic workers continue working despite the abuses because of their need to support their families back home, threats to their families, and an inability to escape because of language and cultural barriers, isolation, or a watchful employer.

**Servile Marriages**

She met her husband over the Internet. She was well educated, a teacher in China, and entered the US legally. The man lied to her about his age, profession, and where they would live. Once she came to the US, she found herself living for several months in a remote and isolated area in the California desert. He kept her imprisoned in their house and sexually abused her. He had a scheme for her to make money for him and be his source of income in old age. For this scheme to work, she had to learn English. For a few weeks she attended ESL classes where she also learned about shelters for domestic violence victims. She called the police, escaped, and made her way to the Coalition to Abolish Slavery and Trafficking. She is now at a battered women’s shelter.

About 100,000 to 150,000 women from around the globe advertise their availability for marriage in mail-order catalogues, e-mail “pen-pal” clubs on the Internet, classified ads, and various types of dating services. The INS estimates that 4,000 to 6,000 women are brought by men to the US as brides through these types of arrangements. The majority of the brides are from countries of Southeast

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11 Interview with Muneer Ahmad, attorney with the Asian Pacific American Legal Center, who represented Ms. Shaefeli Akhtar, a Bangladeshi woman who was trafficked into the US for domestic servitude by a Bangladeshi couple in 1995. She worked for five years for this couple, enduring beatings and death threats to herself and her family. She escaped in June 2000. She was a material witness for the federal criminal prosecution that resulted in the conviction of the couple.

12 Women forced into prostitution are usually detected within a year or two because, unlike domestic work, prostitution is a crime for which law enforcement is actively seeking prosecution.

13 A more commonly used term for these brides is “mail-order bride.” However, this term is not used in this report because many Asian women consider it derogatory and because it places a stigma upon women who found husbands through these types of arrangements.

Asia, primarily the Philippines, and also former Soviet bloc countries. There are over 200 mail-order catalogue agencies operating in the US. Bringing a woman to the US in this manner is not always considered to be trafficking. Some of the men treat their wives well and are looking for companionship, not just a housekeeper who also provides sex. However, where there is not full disclosure and informed consent as to the nature of the relationship, a woman may end up as a trafficking victim in a servile marriage and may be exploited as a domestic worker and sexual slave, confined to the house, denied the opportunity to learn English, drive or communicate with family back home, and kept isolated or even prostituted by her husband.

No national figures exist on the abuse of women trapped in servile marriages. Some figures are available and anecdotal evidence sheds light on the extent of the problem. While the INS estimates that the 4,000 to 6,000 brides who enter through mail-order or pen-pal arrangements are only three to four percent of all annual immigration involving female spouses, the Asian Women’s Shelter in San Francisco estimates that about 17% of the population in its shelters are women trapped in servile marriages. The Asian Task Force Against Domestic Violence in Boston estimates that these women represent five percent of its shelter population. Given the great economic, age, and social disparity between the spouses and that many of the men who seek spouses in this manner are looking for subservient women they can control, abuse in these marriages is very common. In the US, there have been high profile cases of Filipinas trapped in servile marriages who were killed by their husbands. In 1994, Jack Reeves of Texas, a serial bride buyer, killed his wife of seven years, Estelita Villar Reeves. Estelita was the third bride Reeves brought over to the US. The following year, Susana Blackwell, also 25 and Filipina, was killed by her estranged husband at a Seattle courthouse that was hearing her divorce petition.

While many mail-order companies may be legitimate businesses, they are completely unregulated. They are not required to and generally do not screen their male clients, some of whom have histories of domestic violence or criminal records. While the companies provide personal details about the women, they do not disclose much about the male customers. Lack of regulation means that the companies are able to advertise minors, many as young as 13 years old, to clients. When mail-order brokers in arranging a “match” fail to inform the woman that the man she will marry may have a criminal background or may be a batterer, a pimp, or a serial bride-buyer, the broker should be considered a trafficker.

15 A survey conducted in 1999 for the INS revealed that 94% of the men seeking brides through mail-order catalogues were white, 50% were college educated, 6% with M.D.’s or Ph.D.’s. They were politically and ideologically conservative and economically and professionally successful. Their median age was 47, whereas their brides are from 16 to 24 years old. Over 90% of the men surveyed were 20 to 50 years older than their brides and state that they want women they can mold and are not too educated. Most of the men surveyed talked about “traditional values.”
Advocacy Needed

Advocacy for Victim Services

Very few services exist for trafficking victims in the US. The most pressing need of those who escape is for shelter. HR 3244 prohibits the detention of victims in inappropriate facilities and requires that they receive medical care and protection from recapture or harm by the traffickers. However, shelters for trafficking victims do not exist. Homeless shelters are unsafe because many require the resident to leave during the day and return only at night. Some domestic violence shelters accept only victims of spousal abuse. In addition, both types of shelters are already overburdened and not trained to handle the extreme forms of exploitation suffered by trafficking victims. Advocates feel that it is better for trafficking victims, who often have bonded from their shared traumatic experiences, to be housed together rather than split among several shelters. There is a need for advocacy for emergency, transitional, and low-income housing for trafficking victims. Appropriate shelters need to be constructed and additional resources given to existing shelters to expand their capacity to accept trafficking victims and train staff to address the legal, case management, and safety needs of trafficking victims. There needs to be advocacy for more funding from government and private foundations and education to change domestic violence shelters’ restrictions that preclude them from providing services to trafficking victims.

After shelters, the second most pressing need of freed trafficking victims is finding ways to support themselves while criminal prosecutions or their visa applications are pending, either of which may last over a year. HR 3244 created a new visa category, the T visa, which will allow up to 5,000 victims of trafficking to remain temporarily in the US while they are assisting in the investigation and prosecution of a trafficking case. T visa holders are authorized to work while they remain in the US. HR 3244 also provides that those certified by the government as victims of severe forms of trafficking are eligible, to the same extent as refugees, for public benefits such as food stamps, TANF, Medicare, and job training programs. Federal, state, and county welfare agencies need to be educated about these regulations and trained to appropriately handle these cases.

The new law requires that victims have access to information about their rights and translation services. INS and US Attorneys have kept victims seclude

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16 For the entire country, the DOJ has issued only one grant in the amount of $75,000 per year for two years for victim services and that grant was to CAST. Funding from private foundations is available for international organizations working on trafficking, but not for domestic groups because many funders find it difficult to believe that slavery can exist in America. When CAST went to a major funder for support, the program officer asked that they not use their letterhead but to make the request under the name of its fiscal sponsor, Little Tokyo Service Center, because the term “Slavery” on the letterhead might prompt concerns that would delay the grant.

17 If certain conditions are met, a T visa holder may petition the INS to become a permanent legal resident (green card holder) after three years.
and away from attorneys who can provide them with legal advice, such as possible political asylum claims and the right to bring civil suits to recover wages and damages. Victims also need legal representation to protect them from criminal prosecutors who sometimes threaten to prosecute the women as co-conspirators. Legal Services Corporation attorneys are authorized under HR 3244 to represent undocumented trafficking victims. Advocacy is needed to ensure that the women have access to LSC attorneys and that they and other attorneys receive training.

Training of Law Enforcement
An African woman from the Ivory Coast worked for a family and was beaten by both the husband and wife. The police were called in, but the woman spoke only French. She tried to tell the police what happened to her by making the motions of being beaten. The employer said to the police, “She is crazy, see how she is beating herself,” whereupon the police took the worker to a mental hospital where she was strapped down, drugged, and released back to the abusive couple.\(^\text{18}\)

When victims of trafficking escape and turn to law enforcement, they may be victimized a second time by being incarcerated, prosecuted, deported or returned to their abusers. For decades, law enforcement and the INS did not see these women as victims of human rights violations, but treated them like criminals, focusing on prosecuting them as prostitutes or deporting them. Victims may be held indefinitely in detention and mixed in with the general prison population while serving as a witness in criminal cases against traffickers. The INS has not developed any systems to detect, screen for, and process trafficking victims detained at a port of entry. Often INS agents assume the person is a migrant attempting to gain entry illegally and will deport the person who then is returned to the clutches of the traffickers. In some cases, traffickers may post bail to have the victim released and she continues on her journey into bondage. Thousands of children are in INS detention. They are being released to “uncles” who bail them out and then disappear into bondage and the underground economy.

HR 3244 requires specialized training for Department of Justice (DOJ) and Department of State (DOS) personnel in identifying and responding to trafficking victims. Other federal, state, and local law enforcement need training in identifying trafficking victims and referring them to appropriate shelters and the appropriate federal agency, not simply to INS.

Ensuring Implementation of HR 3244
HR 3244 authorized $26.5 million for its implementation in 2001, but Congress did not make an appropriation to release the funds. In addition, limited resources have hindered the US Attorneys’ ability to investigate and prosecute trafficking cases and HR 3244 did not include appropriations to the Department of Justice for

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\(^{18}\) Author’s interview with Joy Zerembka, Jan. 21, 2001.
increased prosecutions.\textsuperscript{19} Advocacy is needed for Congress to appropriate sufficient funds to implement HR 3244.

Advocacy is needed to ensure that the implementing regulations carry out the intent of HR 3244. Advocates have begun drafting proposed regulatory language to cover all forms of trafficking, whether by organized crime or wealthy individuals and diplomats (without absolute immunity) or by men who “purchase” a bride through a mail order company. Advocacy is also needed to ensure that the temporary T visas are available not just to victims designated as material witnesses but also to those who cooperate in giving information if the government decides not to prosecute. The bill is not clear as to who applies for the T visa, the victim herself or a federal official on her behalf, such as a US Attorney. Similarly, the bill is unclear if a woman can self-petition for certification as a victim of trafficking in order to be eligible for public benefits. Advocacy is needed to ensure that regulations provide for a self-petitioning process in both situations. Because many months will elapse before a T visa or certification application is approved, regulations are needed to provide victims with interim status so that shelter, public benefits, and other protections are available while the application is pending.

\textbf{The Organizations}

There are few nonprofit organizations that advocate on behalf of trafficking victims in the US. Because of the dire needs of the victims, these few understaffed organizations are overwhelmed with direct services as well as advocacy work. In a sense, the anti-slavery and trafficking movement in the US is where the domestic violence movement was 20 years ago. It is inchoate, with organizations only two years old developing networks to provide direct services and do advocacy work and the needed education to bring this issue to the public’s attention. This is an important area for funders to make a long-term commitment.

The Los Angeles-based \textit{Coalition to Abolish Slavery and Trafficking (CAST)} was formed in 1998 and until 2002, was housed at Little Tokyo Service Center (LTSC), which is its fiscal sponsor. Because the majority of trafficking victims are Southeast Asians, this project and its predecessor have always been affiliated with an Asian American organization and have had Asian women staff. CAST is the only one of its kind in the US. It provides direct services, technical assistance, and training and is part of the national network that brought about the HR 3244 victory.

CAST created the Community Care Network (CCN) of direct service providers who can accept trafficked persons as clients. Trafficked women are referred to CAST by the INS, FBI, US Attorney, or community agencies after the

\textsuperscript{19} While as many as 50,000 women and girls are trafficked into the US, during 1999 and 2000 the government prosecuted cases involving fewer than 300 victims. The DOJ has handled only 50 cases in the last five years.
woman has escaped on her own. CAST clients speak 13 languages. The majority of the clients are from Southeast Asia with Thai women being the largest group. Of the 25 cases that CAST has handled since 1998, the victims included domestic, home care, restaurant, and sex workers. CAST does case management, following a matrix of needs chart, working with the women from the crisis mode until she has returned to the home country or, if living in the US, she is both safe and thriving. In addition to an active caseload, CAST provides technical assistance and trainings to the INS, FBI, and other federal agencies throughout the country after brothel raids on how to work with the freed women and also for service providers who find a victim on their door steps. CAST has been inundated with calls for training by its staff.

CAST’s regional advocacy work is conducted through the Task Force for Trafficking Victims Services, which it created in 2000 and brings together CCN organizations and federal agencies such as the INS, Department of Labor (DOL), FBI, and US Attorneys to coordinate work among them since most all of them are involved when a trafficked person has been freed. CAST worked with a national coalition in drafting, reviewing and lobbying for passage of HR 3244. This coalition is led by the Washington DC-based International Human Rights Law Group (IHRLG), which relies on grassroots groups like CAST for their expertise. In January 2001, this national coalition met in D.C. and formed the Freedom Network (USA) to Empower Trafficking and Enslaved Persons, a network of 15 organizations from 16 cities to work on implementation of HR 3244.

The Campaign for Migrant Domestic Workers Rights was started in 1997 and is a project of the Washington DC-based Institute for Policy Study. The Campaign is a coalition of social service, church-based, human rights and labor groups and private attorneys. It has one staff person and its focus is on domestic workers employed by diplomats and officials of the World Bank and IMF. The Campaign started out with a focus on advocacy, but expanded into direct services because there were so few organizations that do this work. In the past year, the Campaign has assisted 29 women and has a caseload that includes 10 Asian women: six Indonesians, two Filipinas, a Nepalese, and a Bangladeshi woman. Often the staff person operates in crisis mode when a federal agency or a Good Samaritan calls seeking shelter for a woman who has escaped, and has even taken part in helping women escape. For years, an informal network of churches and service agencies such as the Spanish Catholic Center, lawyers, safehouses, and Good Samaritan- sort of an “underground railroad”-assisted domestic workers in the D.C. area. These groups now work under the umbrella of the Campaign. However, finding language appropriate agencies for these women has been difficult, particularly Asian American organizations. There are no shelters for these women except homeless shelters, which are inappropriate. The Campaign wants to build a network of direct service providers much like CAST’s but its one staff person is inundated with being a service provider, volunteer coordinator, and back up to the pro bono attorneys and has little time to build the network. Like CAST in Los Angeles, the Campaign fields calls from other parts of the country.
As part of its advocacy work, the Campaign engaged in a dialogue with the World Bank and IMF to press them to adopt codes of conduct for staff employing domestic workers. The World Bank agreed to adopt codes of conduct, including a complaints mechanism for workers, but refused to consider the idea of providing domestic workers with access to independent social workers. Workers who have filed complaints have endured months-long delays and hostility when they finally meet with World Bank officials. When negotiations with the World Bank and IMF reached an impasse, the Campaign turned to legislative reform. The Campaign wants legislation to protect diplomatic domestic workers similar to those that exist for the au pair program, a visa program sponsored by Congress. The au pair program brings to the US mostly white, middle-class, and young European women to work as nannies in private homes. Au pair agencies throughout the country administer this program. There are safeguards built into the au pair program such as screening of parents, a one-week orientation for au pairs before they begin work, an exchange of names and numbers of all other au pairs in the area, regular reporting by both the au pair and the employer to the agency; and the availability of the au pair agency to the nanny if she needs to turn to someone if problems arise. Congress created the au pair program with its safeguards to protect young European women coming to this country to work in thousands of homes. The Campaign wants Congress to provide young women from Asia, Latin America, and Africa who work for diplomats with no less protection than their white European counterparts.

With the passage of HR 3244, the Campaign will advocate to ensure that diplomatic domestic workers are protected under the new trafficking law and that T visas, work authorizations, and certification as trafficking victims are available for these workers also. The Campaign is also part of the Freedom Network (USA) to Empower Trafficking and Enslaved Persons.

As Asian American organizations have become aware of the enormity of human rights violations occurring against trafficking victims, a number have begun assisting them. The Asian American Legal Defense and Education Fund in New York represented Shamela Begum in a lawsuit against her Bahrain diplomat employer to recover damages sustained from, among other things, involuntary servitude and false imprisonment. The Asian Pacific American Legal Center in Los Angeles represented Shaefeli Aktar who was a witness in the criminal case against the Bangladeshi couple who imprisoned her. The Asian Law Caucus represented a number of the Asian women freed from brothels after the February 2001 INS raid, securing their release from INS custody and assisting them in obtaining T visas. Two grassroots South Asian women’s organizations, Andolan and Workers Awaaaz in New York, have assisted domestic workers held in involuntary servitude for a number of years. Neither organization has paid staff. Volunteers and the women workers themselves do the outreach work, find attorneys to represent women who have escaped or have helped women escape, and hold demonstrations against abusive employers to bring public attention to the women’s plight.
Recommendations for Action

- Train law enforcement to identify trafficking victims, provide them with appropriate services and shelter, medical care, access to translators, and protection from harm by their traffickers.

- Educate federal, state, and local government agencies and nonprofit service providers on the rights provided by HR 3244 to trafficking victims, including rights to public benefits such as TANF.

- Increase language appropriate services to victims, including building shelters for trafficking victims, legal representation, and assistance in moving from crisis mode to situations where they are safe and thriving, either in their home country or in the US.

- Ensure regulations are adopted that carry out the intent of HR 3244, specifically ensuring that regulatory definitions cover all forms of trafficking and trafficking victims.

- Conduct ethnic group specific research on the scope of trafficking of Asian women to the US.

- Bring the plight of trafficked Asian women to the public’s attention through media work and high profile litigation to create pressure and demand for an end to this extreme form of exploitation of women.

- Educate the ethnic communities in which trafficked women are hidden on how to identify trafficking victims and where to refer them for help.
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Picketers at a 1982 demonstration of 20,000 New York Chinese garment workers demanding that contractors renew the union contract.
Asian American Garment Workers: 
Low Wages, Excessive Hours, and 
Crippling Injuries

Introduction

Man Le Lo worked for 10 years in San Francisco sewing the private label garments of major discount retailers. She worked seven days a week, and except on Sundays, 10 hours a day, some days even longer. After 10 years of setting elastic bands, she sustained repetitive stress injury to her hands, wrists, and arms. In the mornings she could not close her fingers into a fist because of the pain. On piece rates, in the last two years of employment, she averaged $2.00 to $3.00 an hour, half of minimum wage. She was never paid overtime. She reported the violations in her shop to the US Department of Labor (DOL), triggering an investigation of five shops owned by her employer. When she began organizing her co-workers, she was fired. But 200 of her co-workers benefited from her bravery. They recovered $192,000 in unpaid overtime wages as a result of the DOL’s investigation.¹

Ten to twelve hour days, six to seven days a week are the regular hours that garment workers toil in the United States. The majority of garment workers are Asian, Latina, and other immigrant women of color. In California, close to 100,000 garment workers are Latinas and 30,000 are Asian. New York’s 65,000 workers are half Latina and almost half Asian. On piece rates, they earn at or below the federal minimum wage of $5.15 per hour and often without overtime pay. They work under dangerous conditions that include blocked fire exits, unsanitary bathrooms, poor ventilation and suffer from repetitive stress injuries. The DOL estimates that

¹ The author, who was a staff attorney at the Asian Law Caucus from 1992-2000, represented Man Le Lo in her wrongful termination and wage violation lawsuit and assisted her with her workers’ compensation claim.
more than half of the country’s 22,000 sewing shops violate minimum wage and overtime laws and 75% of US garment shops violate safety and health laws. In a 2000 survey of garment shop compliance with labor laws, the DOL found a 60% rate of overtime and 54% rate of minimum wage violations in Los Angeles shops, 61% overtime and 31% minimum wage violation rates in New York shops, and 25% overtime and 8% minimum wage violation rates in San Francisco.  

The US General Accounting Office has developed a working definition of a sweatshop as “an employer that violates more than one federal or state labor, industrial homework, occupational safety and health, workers’ compensation, or industry registration law.” This report focuses on the New York, Los Angeles and San Francisco garment industries where Asian American women are employed.

The US Garment Industry

Today, the US garment industry consists of almost 621,000 jobs, a decline of 56% since reaching a high point of 1.4 million jobs in 1973. The movement of production overseas to Asia beginning in the 1980’s and passage of the North American Free Trade Agreement (NAFTA) in 1993, have been devastating to the domestic industry, particularly in New York and Texas. Today, over half of all apparel sold in the US is made overseas, resulting in tremendous downward pressure on wages and worsening of conditions in the domestic industry.
Los Angeles

The Los Angeles garment industry has been the exception to the declines, though not to the worsening of working conditions. The Los Angeles garment industry has grown in the last decade into the country’s largest garment center, from 137,000 in 1991 to 156,000 jobs in 1997, with 120,000 of those jobs in the downtown Los Angeles area. Between 1994 and 1998, the number of manufacturers and the contract shops producing work for them increased from 4,000 to 6,000, with about 5,000 in the Los Angeles area. The 1,000 garment manufacturers based in Los Angeles tend to produce locally, contracting out to 4,000 contract shops. Production has stayed local because Los Angeles’ niche market of constantly changing women’s casual wear, with brand names like Guess, Bugle Boy and Chorus Line, requires “Quick Response” production; garments orders are turned around within five to seven weeks or even shorter time periods. A local contractor can process reorders within a week or two. Contractors in Asia require a turnaround time of 10 to 12 weeks or longer. However, with the skills of Mexican garment workers, quality control, and turnaround times improving and with NAFTA eliminating quotas and tariffs, a greater percentage of California’s production is expected to shift to Mexico. By the end of 2000, Los Angeles garment worker jobs dropped down to 142,100.

Despite the loss of jobs, the Los Angeles’ garment industry still accounts for $28 billion dollars of the region’s economy. Los Angeles’ lucrative garment profits are made off the backs of Latina and Asian women—94% of whom are immigrant, 75% Latinas, and about 15% Asian (Chinese and Vietnamese) women. The vast majority are non-English speakers. Work is assigned on the basis of gender. Higher paying cutting and heavy pressing jobs are almost exclusively performed by men while the sewing operations are almost exclusively performed by women. Over half of Los Angeles’ Latino garment workers are undocumented, most arriving within the last 15 years. Immigrant workers are employed by contractors who are also immigrants. Production is concentrated in downtown Los Angeles’ garment district but in the last 10 years has spread to the immigrant communities of El Monte, East Los Angeles, Orange County, and San Fernando Valley as contractors look for cheaper labor and better space.

Given the large numbers of undocumented workers, Los Angeles’s workforce is especially vulnerable to exploitation, which may explain the higher rates of minimum wage and overtime violations than in San Francisco with its mostly documented workforce. Passage of the Immigration Reform and Control Act of 1986 (IRCA) contributed to the worsening of conditions for garment workers. IRCA prohibits the employment of undocumented workers but imposes such low sanctions that few employers are deterred. Instead, employers use IRCA as a weapon against workers. Some contractors prefer to hire undocumented workers and call the INS when workers protest conditions. Employers threaten to call “la migra,” undocumented workers stay compliant, and a whole sub-class of workers in the Los Angeles garment industry work at sub-minimum wages, driving the wages of the entire Los Angeles industry down with them.

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**San Francisco**

Historically, San Francisco’s garment industry was located in Chinatown. For decades, Chinese immigrant women walked to work from the crowded tenements where they lived to small mom and pop sewing shops, employing 10 to 15 employees and operating out of storefronts. In the 1970’s and early 1980’s, this began to change as entrepreneurial immigrants from Hong Kong began setting up larger, more efficient shops outside of Chinatown.

Today, 13,000 workers, primarily Chinese, work in 400 contract shops in the San Francisco’s South of Market and Outer Mission districts and 2,700 workers in 175 shops across the Bay in Oakland’s sewing shops. The larger, more modern South of Market and Mission district shops survive and grow larger. These more efficient shops of over 100 workers, operating with new machinery and using assembly line methods of production (vs. one worker assembling the whole garment,) are able to produce higher quality apparel in greater volumes. They have greater bargaining power to obtain higher contract prices and are able to pay at least minimum wages to 75% of their workers.

Chinese garment workers, however, continue to work 10-hour days, six days and even seven days a week, without overtime pay. Garment jobs in San Francisco have also decreased (from a high of 15,000 in 1997) as many of its local manufacturers, such as Esprit, Koret of California, Byers and Eberts, have moved production to Southern California or Mexico where wages are lower than in the Bay Area.

**New York**

The New York garment industry remains the US’s leading center for high fashion even though production jobs have declined precipitously. Apparel jobs declined to a low of between 65,000 and 74,000 in 2000 from a high of over 149,000 in 1980. However, a local industry will always remain because, like Los Angeles and San Francisco, New York manufacturers must also have “Quick Response” strategies for its unpredictable market of women’s wear. New York’s niche is producing high-end fashion and more formal apparel. This includes dresses (25% of all US-made dresses are produced in New York), overcoats, blouses, slacks, and tailored women jackets with names like Oscar de la Renta, Donna Karan, and Calvin Klein giving New York fashion its glamour. Many of the higher end fashion houses produce in small batches of hundreds, not thousands, and prefer to stay in New York where their designers can walk across the street to their contract shops to personally oversee the quality of production.

About 54% of sewing shops are concentrated in New York’s midtown (in a zoned garment district) and in Chinatown, 26% in Brooklyn (with half in Sunset Park), and the remaining in Queens and the Bronx. There are 1,600 garment manufacturers and 2,600 contractors registered with New York’s Department of Labor and an additional 2,500 contract shops that are unregistered, bringing the total of contractors to about 5,100 primarily small shops with less than 20 workers each. The small size of a sewing workforce provides manufacturers with a flexible and fragmented workforce that can be laid off easily during seasonal lows. The majority of garment workers are Chinese immigrant women and Latina workers, with a
smaller number from the Dominican Republic and other countries.

The majority of the midtown and 80% of Chinatown sewing shops are unionized by UNITE (Union of Needletrades, Industrial and Textile Employees). However, UNITE has not been effective in enforcing the union contract in these shops and rampant minimum wage and overtime violations continue to exist. In the early 1980’s, most garment manufacturers were also under union contract and produced locally. During that period, UNITE members working in the Chinatown shops could earn from $5.00 to $15.00 per hour. Support for the union was strong. In 1982, 20,000 Chinese garment workers went on strike to demand that contractors renew the union contract. However, union manufacturers such as Liz Claiborne, Donna Karan, and Calvin Klein began moving the bulk of their production overseas: 66% of Liz Claiborne’s garments are made abroad. With union manufacturers moving their work, union contractors were forced to compete with nonunion contractors for work from nonunion manufacturers. The union contractors were thus forced to accept contract prices too low to pay even minimum wage.

Additionally, involuntary servitude is a regular part of the New York industry. Between 1991 and 1994, at least 100,000 people from the city of Fuzhou in the coastal province of Fujian, China, have been smuggled into the US, with the majority of them settling in New York. Most of them owe snakeheads (people smugglers) $30,000 in fees. A large number are women who end up in garment sweatshops. These workers have been harassed, beaten, and even killed by snakeheads for protesting poor working conditions and/or not working hard enough to repay their “debt.” Desperate to pay off their debts, the Fuzhounese take the lowest paying jobs in the Chinese community and line up outside the sewing factory long before the doors open to be the first to begin work. At night they work until after 10 p.m., sometimes until 4 a.m., sleeping in the factory, and start work again after sunrise. Increasingly, garment manufacturers offer contracts to Chinese subcontractors who hire Fuzhounese, whose willingness to accept low pay and poor working conditions has further dropped standards in Chinatown garment industry in New York.

The combination of jobs going overseas, involuntary servitude, and fear of the INS have resulted in wages of New York garment workers dropping to between $2 and $6 per hour. Working hours have steadily increased, with legal immigrants and naturalized citizens working six to seven days a week, 10 to 12 hour days. Homework and child labor are becoming more widespread. It is now common in New York shops, including unionized shops, for workers to work several months without receiving a paycheck. It is also not unusual for employers, seeking to reduce their taxes, to pay workers half in cash under the table and half by check, then take back a percentage of the cash payment.
The Root Causes of Sweatshops

Four key factors contribute to the proliferation of sweatshops in the US and worsening conditions for garment workers.

A Pyramid of Exploitation
The very structure of the garment industry encourages the creation of sweatshops. Retailers sit at the top of the apparel pyramid, placing orders with brand-name manufacturers, who in turn subcontract to sewing contractors to assemble the garments. Contractors receive cut garment parts from manufacturers and recruit, hire, and pay the workers who occupy the bottom level of the pyramid, to assemble finished garments. Most contractors must accept the low price set by the manufacturer, even if the contract price is insufficient to pay minimum wages, as they risk having the work given to another contractor. To stay in business, contractors “sweat” profits out of their workers, cut corners, and operate unsafe workplaces.

Consolidated Power of Retailers
The second factor is the power of retailers. During the past decade the retailing industry has experienced major mergers leading to considerable consolidation of their buying power, especially among discounters. In the United States, Wal-Mart and Kmart outsell all department stores combined and the 10 largest retailers account for nearly two-thirds of all apparel sales. With this consolidated buying power, retailers dictate the price of clothing and ultimately what workers earn. Retailers have forced manufacturers to reduce their wholesale prices by as much as 25% or more, with the worker at the sewing machine feeling the biggest pinch. Retailers also control the apparel industry by producing their own private labels instead of buying from brand-name manufacturers. The Federated Department Store’s private labels, for example, include INC/International Concepts, Charter Club, and Arnold Palmer. Retailers, acting as manufacturers, design the garment, contract out and oversee production, and set the prices for garments created exclusively for their stores. Approximately 32% of women’s apparel sold in the US is manufactured under retailers’ private labels. Retailers’ domination of the garment industry means their decisions directly affect whether sweatshop conditions improve or worsen.

Race to the Bottom of the Global Assembly Line
A critical factor leading to resurgence of sweatshops in the US is the movement of production overseas. Production began moving to Asia in the early 1980’s where hourly wages were as low as 20 cents per hour and to Mexico after adoption of the...

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The $100 sale price of a garment is typically divided up as follows: $50 to the retailer, $35 to the manufacturer, $10 to the contractor, and $5 to the garment worker. A 25% reduction in price means the workers’ earnings drop to $3.75 for assembling the garment.
NAFTA in 1993. Forced to compete with overseas labor costs, domestic contractors lost their leverage to extract higher prices from manufacturers. Attempts by workers to improve their lot have resulted in manufacturers and retailers “running away.” For example, when UNITE targeted Guess factories and contract shops for unionizing in 1995, Guess moved 70% of its jeans production to Mexico, Peru, and Chile. In San Francisco, when Esprit de Corps’ Chinatown shop unionized in the mid 1970’s, Esprit closed the shop, moved to Hong Kong, and did not return for 10 years. The threat of shop closings has kept workers from organizing even as conditions worsen. Overseas production has led to a race to the bottom in terms of wages, affecting workers in all major garment centers, including California’s strong and stable industry.

**Poor Enforcement of Labor Laws**

The final factor contributing to the persistence of sweatshops is the chronic underenforcement of labor laws by state and federal labor agencies, both of which are underfunded and understaffed. In New York, there are only five state-level DOL inspectors to monitor over 4,000 garment shops. Even if a factory is given a citation for a violation, re-inspection for compliance is rare. In California, only 25% of all sewing shops are inspected each year by state or federal DOLs. Most contractors violate the law with impunity, assuming they will not be inspected. If inspected, the contractor simply pays the unpaid minimum wages, overtime premiums, and fines as part of the “cost of doing business” and returns to business as usual, knowing that the inspectors will not return for at least four years. In any case, most contractors do not even remain in business that long.

**Advocacy Needed**

Given the numerous factors that affect garment workers who labor in sweatshops, advocacy to improve conditions requires a multi-pronged approach. The approach includes making retailers and manufacturers legally accountable for sweatshop practices, improved government enforcement of labor laws, organizing and unionization of workers, consumer education and corporate accountability campaigns, as well as impact litigation and legislative advocacy. No one approach is sufficient and each is the necessary complement of the other.

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1. Heightened media attention on overseas sweatshops has led to consumers looking for the “Made in the USA” label. In response, retailers have shifted some production to US territories in the western Pacific Ocean. On Saipan, part of the Commonwealth of the Northern Marianas Islands, about 15,000 imported Asian women—Chinese, Filipina, Bangladeshi—produce garments for over 25 retailers, including The Gap and Tommy Hilfiger. They work 80 to over 100 hours a week, often “off the clock” without pay or overtime. They earn $2.90 per hour, a little more than half of the US minimum wage. They live seven women to a room in inward-pointing barbed wire enclosed barracks and are subject to lockdowns and curfews. The “Made in the USA” apparel are shipped to the US quota and tariff free.
Holding Retailers and Manufacturers Legally Accountable for Sweatshops

State and federal governments’ response to the proliferation of sweatshops has been to go after the sewing shops, often with the media in tow. Harassing contractors has proven to be an ineffective and misdirected strategy. Given that it is the retailers and manufacturers who force contractors to accept contract prices so low that contractors cannot pay minimum wage, it is they who must be responsible for the resulting labor law violations. But because production work is subcontracted out to “independent” contractors, manufacturers are often not considered the employers of the production workers and are shielded from legal liability.

Unless manufacturers are held legally responsible for the wage and working hour violations of their contractors, they have no incentive to increase contract prices or avoid using contractors who are chronic violators. Garment worker advocates have used impact litigation successfully to hold retailers and manufacturers jointly liable along with their contractors for minimum wage and overtime violations. However, impact litigation is costly. Plaintiffs face high hurdles in establishing a sufficient degree of control by the manufacturer for it to be held liable. Hence, less than 10 such lawsuits have been filed in the last 20 years. Thus, legislation creating strict manufacturers liability without lengthy litigation is needed.

In California, garment workers succeeded in 1999 in getting a strict manufacturer’s liability law, AB 633 (Steinberg), passed. AB 633 created a “wage guarantee” requiring manufacturers and retailers acting as manufacturers to guarantee payment of minimum wages and overtime. However, in exchange for the guarantee, garment workers gave up the right to enforce the new law in court and agreed to bringing all wage guarantee cases before the state Labor Commissioner under an expedited administrative process. Retailers are attempting to escape AB 633 coverage by influencing the rule making process. They hope to craft a regulatory definition of “manufacturer” that excludes most retailers and garment manufacturers. Continued advocacy is needed to ensure that rules and regulations are adopted which properly implement the new law. In the meantime, joint liability impact litigation must continue to be brought.

A strict liability law is needed in New York State. The current version of the joint liability law, SO7628 (Spano), passed in 1998, holds manufacturers liability only if they knew or should have known, with the exercise of reasonable care, of the contractor’s failure to comply with labor laws. Meeting the reasonable care standard mires garment workers in time-consuming litigation, which California’s AB 633 avoided. On the federal level, after the November 2000 Presidential and Congressional elections, advocates will have to wait until a friendlier political climate in Washington before attempting federal joint liability legislation.

Advocating for Government Enforcement of Labor Laws

Laws do not protect unless vigorously enforced. Advocacy is needed to increase staffing levels at state and federal labor agencies. Advocates must exert pressure on these labor agencies to direct their enforcement efforts against contractors and manufacturers. Advocates must oppose the labor agencies’ joining with INS in their investigations and their inquiries. Workers will not step forward to complain
or cooperate if they fear being apprehended by the INS. Vigorous enforcement has brought results. A case in point is the San Francisco Bay Area where minimum wage violations are significantly lower than in Los Angeles and New York. This improvement in wages in the Bay Area is due to the concerted outreach efforts to Chinese garment workers that began in 1990, media coverage on the lack of government efforts, successful lawsuits by the Asian Law Caucus against manufacturers and contractors, organizing efforts by UNITE, a national anti-sweatshop campaign launched by the Asian Immigrant Women’s Advocates, and pressure by ALC and UNITE on DOL to use the “hot goods” provision of the Fair Labor Standards Act to confiscate garments made in sweatshops. Using the threat of seizing hot goods, the DOL compelled manufacturers to increase contract prices and monitor their contract shops to bring them into compliance. Monitoring by manufacturers and combined federal and state agency raids on sewing shops led to the demise of San Francisco Chinatown’s mom and pop industry, the growth of larger, more efficient and stable garment factories outside of Chinatown and higher wages for San Francisco garment workers.

Empowering Workers

In the long-run, lasting improvements in the industry can occur only with an empowered and organized workforce. After a lawsuit or government inspection, after wage judgments and fines have been paid, neither government agencies with increased staffing nor lawyers are in a position to monitor factories day to day to ensure compliance with labor laws. After the scrutiny is over, employers revert to violating the law. Only an organized workforce can monitor factory conditions on a routine basis. However, workers face serious challenges to organizing because they are employed in the most globalized industry in the world.

Workers in Southern California face an additional challenge to organizing. Over half of the 100,000 garment workers in the Los Angeles garment industry are undocumented and the fear of deportation prevents them from becoming an empowered workforce. Garment workers in Southern California need amnesty. For sweatshop conditions to be eliminated, workers need to move from undocumented to legal status. These challenges are formidable but not insurmountable and require that new and innovative forms of organizing be developed.

Public Education and Consumer Campaigns

Traditional methods of union organizing, lawsuits, and government enforcement are not enough in today’s global economy. As long as garment manufacturers can close shop and run away overseas with impunity, sweatshop conditions will remain and worsen. Garment workers need the support of the public and con-

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8 Goods that are produced in violation of minimum wage and overtime laws are considered “hot goods.” The US DOL can seize hot goods and prevent them from being shipped or sold until the wages are paid.
sumers. In August 1995, 72 Thai immigrant women were discovered behind barbed wire fences in an apartment complex in El Monte, California, working under conditions of involuntary servitude: they were sewing the private labels of major retailers such as Mervyn’s, Montgomery Ward, and Miller’s Outpost. Sustained media attention and intense advocacy by garment worker advocates around the El Monte case, as well as other high profile campaigns, began to turn public opinion. The refusal to patronize retailers and manufacturers who break worker organizing drives sent a clear message that the public did not support manufacturers who profit off the sweat of garment workers, domestically or internationally. Through numerous high profile campaigns and lawsuits, the public has been educated and no longer believes manufacturers’ claim of ignorance of conditions in their contract shops. Indeed, the support of an educated public contributed to garment workers success, after 10 years of effort, in obtaining AB 633 in California.

Fending Off False Solutions from the Industry
In response to the public education and consumer campaigns, the fashion industry created The Apparel Industry Partnership, now called the Fair Labor Association (FLA), a coalition of companies such as Liz Claiborne, Nike, Reebok, and human rights and labor organizations. In April 1997, the coalition announced a scheme to eliminate sweatshops worldwide. It rolled out the Workplace Codes of Conduct to which industry members of the task force said they would adhere. But major flaws exist in the Code. For example, it institutionalizes indecent wages and inhumane hours for women of color around the world. For instance, the Code only requires US firms to pay a country’s minimum wage which, in order to attract apparel firms, governments set so low that it does not cover a family’s basic needs. The Code also adopts the 60-hour week, without overtime pay, as a standard workweek. In November 1998, the coalition announced its “independent monitoring” scheme. The scheme allows companies to pick the factories that will be inspected by monitors chosen and paid for by the company. Based on inspections of only five percent of factories hand-picked by the company, the FLA can declare the entire company in compliance with the Codes. Based on this monitoring scheme, the company is permitted to sew labels onto all of its garments that indicate that the garment was made under fair conditions. The apparel industry has developed various other schemes to clean up sweatshops which, like the FLA’s, are essentially public relations tools for damage control. Advocates have responded with critiques and exposés, assisted in developing codes of conduct requiring living wages and monitoring mechanisms with teeth. They have also developed an alternative, the Workers Rights Consortium, which has adopted Codes of Conduct and an independent monitoring system for the production of sweatshirts with university logos, baseball caps, and other products.

A Global Approach to Garment Advocacy
When workers in one country organize to improve wages and working conditions, US retailers and manufacturers move their production to countries where they pay
workers even less. In the 1960’s, manufacturers moved production to Hong Kong, South Korea, Japan, and Taiwan. However, over time these economies boomed and wages rose to almost the same levels as in US. In the 1980’s, hundreds of thousands of women workers who had worked for 10 to 20 years in the garment industry lost their jobs as US manufacturers shifted production to the lower wage countries of Indonesia, Thailand, and the Philippines. Presently, Thailand’s garment workers are losing their jobs as manufacturers move production to Vietnam and China where wages are even lower. The US garment industry has a global strategy for production, profit making, and exploitation. It has acted with virtual impunity in implementing its strategy. Garment workers in the US, who have lost their jobs and those who work in ever worsening conditions, must begin working with workers overseas to the build coalitions and networks needed to challenge the industry’s heretofore unfettered exploitation of them.

Looking Ahead to 2005

Major changes in trade law portend further suffering for women garment workers in the US. Between 1993 and 1996, the US lost 143,000 apparel jobs due to the passage of the 1993 North American Free Trade Agreement. Only because of quotas and tariffs on goods from the rest of the world did 460,000 jobs remain in the US between 1985 to 1996. However, the worldwide quotas for cotton and wool apparel imports to the US, provided for in the MultiFibre Arrangement of 1974 (MFA), which prevented the entire industry from leaving, will be phased out altogether by 2005. Removing these quotas will enable US companies to shift more of production to the lowest wage countries.

It is projected that only 379,650 jobs of the currently existing 621,000 jobs in the US apparel industry will survive the overseas shift likely to occur after 2005. As a result, the jobs of some 70,000 California and 35,000 New York garment workers, primarily Asian and Latina immigrant women, will be in jeopardy. Given the contraction of safety nets in the US, these working women will be in the same position as other low-wage, limited-English speaking immigrant women are now. Specifically, they will be in a crunch to learn English and new job skills before the expiration of their five-year lifetime bar for cash benefits under TANF. As described in Chapter One, Asian immigrants are being denied equal access to the welfare-to-work services they need to gain marketable skills that will enable them to find self-sustaining living wage jobs.

For the garment industry that remains, it cannot compete through a low-wage strategy since US wages will not drop as low as wages in developing countries. To eliminate sweatshop conditions in the US, manufacturers must compete through a high-value strategy, that is, by producing high-end fashions and investing in technology and in higher wages for workers to improve quality, skills, delivery, and efficiency in the production process.
The Anti-Sweatshop Organizations

For the past two decades, the anti-sweatshop work has been carried out by Asian American organizations. The leaders in this movement are Asian American women, many of whom developed into labor and community leaders through their advocacy on behalf of garment workers. The work of these Asian American women has helped garment workers of every ethnicity and race. Their collaborative and multi-pronged approach to organizing and advocacy has also built one of the strongest movements for civil and human rights among people of color.

California

The leading organization advocating on behalf of garment workers for the past two decades is the San Francisco-based Asian Law Caucus (ALC). The ALC was the first to use impact litigation to create joint liability case law holding manufacturers responsible for the labor law violations of its contractors. It has litigated or co-counseled most of the California joint liability lawsuits brought against a retailer or manufacturer. It is a named plaintiff in one of three lawsuits brought against retailers using sweatshop labor on the island of Saipan, a US territory in the Western Pacific, lending its expertise on the garment industry to the legal team. It led or participated in all the legislative attempts to pass joint liability laws in California, succeeding in 1999 in passing AB 633. ALC staff drafted the bill and its amendments and led the statewide coalition in negotiating and lobbying for the bill’s passage. The ALC played a large role in improving conditions in the San Francisco garment industry. When San Francisco manufacturers began moving work to Southern California in response to the higher wages, ALC’s work expanded to building the capacity of Los Angeles advocates who did not begin their work until after El Monte came to light. The ALC lends its expertise to the Southern California groups primarily through Sweatshop Watch (see below), which it co-founded. In addition, the ALC provided guidance to the national anti-sweatshop movement.

For the past 10 years, the Asian Immigrant Women Advocates (AIWA), an Oakland-based organization, have provided know-your-rights and leadership training to Chinese garment workers to improve the conditions in their shops. In 1992, AIWA launched a national campaign against designer Jessica McClintock when one of her contract shops closed, owing its workers weeks of pay. The high point of the campaign, a segment that aired on 60 Minutes in 1994, brought nationwide attention to the plight of garment workers. More recently, in April 2000, working with faculty, physicians and nurses from the University of California, San Francisco (UCSF), AIWA opened a workers health clinic. The project also works with an ergonomist to develop low cost solutions to prevent injuries in factories.

The Asian Pacific American Legal Center of Southern California (APALC) began its advocacy work for Southern California garment workers in 1995 in representing the 72 Thai garment workers released from involuntary servitude in the El Monte sweatshop. APALC filed a lawsuit against the smuggler/employers
and retailers and won a $4 million settlement for the workers. Since El Monte, APALC has brought several other impact litigation cases on behalf of garment workers, was part of the team that negotiated and worked on passage of AB 633, and represents garment workers who are filing wage guarantee claims before the Labor Commissioner.

**Sweatshop Watch (SW)**, a coalition of 24 organizations formed in 1995, engages in statewide and national anti-sweatshop work that its member organizations cannot do individually. For example, working in conjunction with labor, Sweatshop Watch coordinated the community effort in qualifying a ballot measure to raise the minimum wage in California. It hosted a Living Wage Working Summit in 1998, which brought together 50 participants from across the US and abroad to popularize the concept of a living wage. In 1999, it coordinated the effort to win passage of AB 633. Currently, it coordinates statewide advocacy to implement AB 633, mobilizes public pressure against The Gap and other retailers accused of using a system of indentured servitude on Saipan, works with students across the country in their anti-sweatshop activities, and raises public awareness about sweatshops through publishing a quarterly newsletter and serves as an information clearinghouse. Sweatshop Watch recently opened a multi-ethnic Garment Workers Center, a worker membership organization, in Los Angeles’ downtown garment district, where Asian and Latina workers learn about their rights. The workers develop leadership skills through a special curricula for women workers, learn how to use AB 633 to advocate on their own behalf, and train other workers. The Center has a walk-in clinic as well as a telephone hotline in six languages. Asian and Latina workers have organized and worked together to win back wages from contractors and manufacturers. SW’s member organizations, APALC, Korean Immigrant Worker Advocates, and Coalition for Human Immigrant Rights of Los Angeles guide the work of the Center.

**New York**

The *Chinese Staff and Workers Association (CSWA)* is a worker organization with garment worker members since 1979. CSWA believes that only empowered workers can make lasting changes in their workplaces and tells workers who come to them for help that “we will fight with you, not for you.” CSWA has a small staff, relying on its worker members to do the program work. CSWA's modus operandi is direct action, rallies, and picket lines and campaigns to expose the inhuman conditions in New York's sweatshops. In 1999, CSWA along with the National Mobilization Against Sweat Shops (NMASS), launched a campaign against Donna Karan accusing it of using subcontractors who operate 12-hour days, seven-day work weeks under intolerable conditions, such as padlocked bathrooms, surveillance cameras, and denial of time off to care for sick children. Identifying excessively long hours of work as one of the leading causes of health and safety problems, CSWA started its Garment Workers Health and Safety Project in 1997. CSWA also targeted corruption in the New York State Workers’ Compensation Board (WCB) where workers are not allowed to testify at their own hearings, are not provided translators, and their cases can drag on for up to seven to eight years.

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or are closed without explanation. The workers held a demonstration in front of the WCB to protest the delays and collusion between insurance companies and workers’ comp judges. CSWA will be working with New York University Law Center to draft legislation to reform the WCB.

For the past 10 years, the New York-based *Asian American Legal Defense and Education Fund (AALDEF)* has used lawsuits to supplement the organizing efforts of Asian workers. AALDEF, in cooperation with CSWA’s organizing efforts, is currently litigating a class action against Donna Karan on behalf of all workers in her contract shops in New York. By including all of Donna Karan’s contract shops, AALDEF has removed the opportunity to move work between factories as a method of frustrating the lawsuit. Also, AALDEF recently successfully defended itself against a $75 million defamation lawsuit filed against it, CSWA, and NMASS for a campaign against New York manufacturer Street Beat. Street Beat’s lawsuit claimed that the protests in front of their building caused the cancellation of contracts with Sears Roebuck. In this lawsuit, AALDEF created a new legal precedent that protects the rights of workers and activists to engage in protest and exercise their First Amendment rights.
**Recommendations for Action**

- Hold retailers and manufacturers legally responsible, through impact litigation and legislative advocacy, for the labor law violations of their contractors in order to end their practice of forcing contractors to accept low contract prices or using contractors who are chronic violators.

- Increase staffing levels at state and federal labor agencies and pressure them to direct their enforcement efforts against contractors and manufacturers.

- Organize and unionize workers because only an empowered workforce can monitor its own factory day to day and make lasting changes in their factories and industry.

- Enlist the support of the public to prevent “runaway” shops. Strengthen the ability of NGOs to conduct the necessary state and national level campaigns and advocacy.

- Conduct research to determine the potential impact of the removal of quotas for cotton and wool apparel imports in 2005.

- Obtain federal, state, and county funding for ESL and retraining programs to help garment workers who will lose their jobs in 2005 to transition to other industries.

- Foster global networks and coalitions of garment workers and advocates to counter the race to the bottom and coordinate responses to the elimination of quotas in 2005.
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From "Picturing Change," a project of the Service Employees International Union (SEIU), Local 616, that allows homecare workers to portray their struggles and accomplishments.
Other Low-Wage Workers: High-Tech Sweatshops, Home Care Workers, and Domestic Workers

High-Tech Sweatshops-Asian Immigrant Women in Silicon Valley

“I have a very simple formula for hiring.... Just three things I look for in hiring entry-level manufacturing operatives: small, foreign and female. These little foreign gals are grateful to be hired-very, very grateful-no matter what.”¹

A Segregated Valley with Asian Women at the Very Bottom

California’s Silicon Valley is famed for its semiconductor industry and the multi-millionaire entrepreneurs who created Hewlett Packard, Sun Microsystems, and other high-tech businesses associated with the seemingly endless possibilities for boundless wealth at the turn of the century. However, this industry is highly segregated along race, class, and gender lines. The high-paid and stock-optioned engineers and executives are overwhelmingly white males. Women, especially white women, make up nearly 80% of the secretarial workforce. Women of color dominate the bottom of the wage ladder in production, fabrication, and assembly jobs. Most of these women are immigrants of Mexican, Vietnamese, Filipina, Chinese, and Korean origin.

The high-tech industry is so segmented that segregation exists even among women of color. Fabrication workers, who work in the “clean rooms” and wear the white bubble suits, are primarily Filipina women who, as the result of US colonization of the Philippines, have the English language skills to program and

operate the computerized machines that make microchips. By contrast, the semi-skilled and unskilled assembly line workers, those who solder wire and transistors onto circuit boards, are non-English speaking Vietnamese, Korean and Chinese women. Seventy percent of the approximately 50,000 to 70,000 assembly line workers are Asian and Latina women who do not get health benefits. In the sub-contracting shops, the percentage is higher—75% to 100% of the assembly labor force is Asian and Latina women. Entry-level jobs in the assembly industry pay between the California minimum wage of $6.25 per hour to $12 per hour, with the median wage at between $7 and $9 an hour. Often these jobs are temporary and the women move back and forth between assembly jobs and welfare.

Beginning in the 1960's, as much as 90% of high-tech production shifted overseas. However, faced with intense competition from among firms in product development, semiconductor companies needed a convenient source of labor for prototypes and short-term projects. Most big computer companies handled manufacturing in-house and turned to outside firms, the mom and pop “board stuffer” shops, for help only when demand spiked. These mom-and-pop shops provided savings of 15% to 50% on labor costs and quick turnarounds. By the 1990's the contract industry grew to a $120 billion industry. Today, there are over 800 manufacturing firms in Silicon Valley; 300 of those are contract manufacturers.

**Racist and Sexist Stereotyping to Justify Discrimination**

In the high-tech industry, white male managers hire immigrant women for low-tech jobs. They justify the low pay and poor treatment by claiming that women, whom they assume are attached to a man, can afford to work for less. These managers also believe Asian and Mexican immigrant women are better suited for boring, repetitive assembly line work and assume that the women have superior hand-eye coordination and patience. One white male manager said that the women's small size makes it easier for them to sit quietly for long periods of time doing detail work, qualities that neither immigrant men nor white women have. White managers consistently refer to Asian workers as “girls,” while non-Asian workers were “women.” One manager claimed:

“Asian women are more subservient than American females; if I refer to them as “girls” it's because to me, they act like girls: they only speak when spoken to, do exactly as they are told, and so forth. So I play into it—I treat them firmly like a father figure...”

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2 The Asian Law Caucus and Equal Rights Advocates in San Francisco attempted to ascertain the sectors that immigrant workers are employed. However, because of the lack of official data and statistics, it is not clear which sectors of the high-tech industry employ low-wage immigrant women and in what percentages. The different sectors include printed circuit board assembly, fabrication of circuit boards, cables and printer assembly and software assembly. Author's interview with Hina Shah, Asian Law Caucus, March 27, 2001.

Based on these racist and paternalistic stereotypes, managers steer white women away from assembly line work (“They don’t look right there, they’re Americans”) and toward office or professional jobs. Immigrant men are channeled into higher paid technician work. Immigrant women are only hired for assembly work. Relying on stereotypes that make Asian women different, into the “other” and hence less valued in society, enables these managers to justify paying them less, laying them off as needed, and exposing them to dangerous chemicals without fear of a societal outcry. As one factory owner admitted:

“Let’s face it, when you have to expand and contract all the time, you need people who are more expendable. When I lay off immigrant housewives, people don’t get as upset as if you were laying off regular [sic] workers.”

The Creation of High-Tech Products in Immigrant Homes

In the 1980’s, Silicon Valley electronics assembly companies regularly used immigrant women workers, many of whom were welfare recipients, to assemble circuit boards in their homes. At that time, the state Labor Commissioner began an investigation of homework that screeched to a halt when high-tech firms met with labor officials and local politicians and convinced them they should be allowed to police themselves. With the fox guarding the chicken coop, homework flourished throughout the 1980’s. The industry’s largest contract manufacturer, $5.3 billion Solectron and other contractors, grew into the industry giants they are now by using homeworkers throughout the 1980’s and 1990’s.

A 1999 investigation by The San Jose Mercury News found whole families, particularly Vietnamese, working far into the night at kitchen tables, in living rooms, bedrooms, and garage workbenches, soldering tiny wires, strip cables, and transistors onto printed circuit boards, painstakingly assembling the nervous system of high-tech products. Often nighttime workers had day jobs at a manufacturing firm earning $7 to $9 per hour while earning well below the minimum wage by doing piecework at home at night. The Mercury News reported that at least 30 electronic contract manufacturers-ranging from small firms to multi-billion dollar Solectron-used homeworkers. Contract manufacturers are no frills operations with after tax profits of just three to five percent. They turn to homeworkers and

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4 Most managers will not hire African Americans based on equally insidious stereotyping—that they are troublemakers, quit sooner, and not dependable. In fact, African American workers were frozen out of Silicon Valley almost entirely. African Americans are not above 7.5% of the high-
or low-tech workforce in any category. This segregation was a conscious decision on the part of manufacturers.

5 See Karen Hossfeld, supra note 1.

6 In California, homework is prohibited in the garment, food, and toy manufacturing industries, but not in the electronics industry. Companies, however, must obtain a license prior to hiring industrial homeworkers and labor laws protecting factory workers are applicable to homeworkers also.
piecework for rush jobs or orders priced so low that they cannot otherwise deliver the required results. On piecework, production is sped up because the faster a worker works, the more money she makes. Says a former Solectron production manager, “We give the workers 100 boards and the next day they have to bring back 100 boards. Maybe at home they do it faster if they have brothers and sisters helping them.” Of course, these siblings never show up on the company books. In July 2000, after conducting an investigation of five assembly factories, the federal DOL ordered four of them to pay nearly $105,500 in minimum wage and/or overtime wages to 57 home assemblers. Two companies were cited for allowing underage children to assist in the homework.

To avoid legal responsibilities, companies that use homeworkers treat them as independent contractors, even though technically they are neither independent nor contractors. If they were treated as employees, the company would be required to pay them minimum wage, overtime, and employer taxes such as unemployment, disability, and Social Security. To evade these laws, companies ask workers to get a business license for themselves or others working in the same house so that they pay them as “independent contractors,” which may also include other relatives, including children as young as 10-years-old. Those who work exclusively at home work 12 to 15 hours a day, seven days a week and frequently 24 hours at a stretch on rush jobs.

In recent years, large companies have reduced their reliance on homeworkers. However, the practice remains robust in smaller companies, particularly cable assembly houses. The persistence of homework reflects both the manufacturers’ demand for cheap labor and the more than ample supply of desperate Asian immigrant women. These women suffer employment discrimination, lack on-the-job training and are in dire need to supplement their incomes. In a 1999 study of welfare reform, the Equal Rights Advocates found that a significant number of Vietnamese and Mexican American women welfare recipients had worked in electronic assembly jobs. Some were assembling computer parts at home, earning half the minimum wage and collecting welfare. Given the intermittent nature of the high-tech contracting industry, these workers move back and forth between employment and unemployment, without the security of unemployment insurance and rely on food banks and the welfare office to survive.

**Heightened Health Risks to Asian Immigrant Women Workers**

Asian and Latina women semiconductor production workers are exposed to dangerous chemicals that may cause cancer or neurological, vision, respiratory, or reproductive damage. One 1988 study of women working in the “clean rooms” (where the bubble units they wear are not to protect them from chemicals but to protect the product from being sneezed on) found that 38% of pregnant women suffered spontaneous abortions. Seven chemical agents used by fabrication workers were linked to spontaneous abortions. Of the 58 chemicals used in the construction of chips, circuits and monitors, 15 are suspected carcinogens. IBM uses a chemical in its “clean room” that is known to be linked to brain cancer. IBM’s own data of 25,000 employee deaths from 1975-89 show that 8,000 died from can-
cer, with 149 dying from primary brain cancer, which is a very high number for a rare disease. Repetitive stress injuries are common. In addition, homeworkers bring hazardous industrial materials, including lead and flux, into their homes when they solder parts onto circuit boards. The toxic chemicals are used in the kitchen and bathroom sinks throughout the house thus exposing children and other relatives. While occupational illnesses represented just 14.3% of all manufacturing workers’ ailments, they made up 30% of semiconductor employees’ maladies. The rate of injuries and illnesses from toxic exposures is three times higher for semiconductor workers than other manufacturing workers.

The Organizations

Neither labor, women’s, nor ethnic organizations have made major inroads in challenging the hiring hierarchy, occupational hazards, and homework violations in Silicon Valley. Each attempt has run up against the political might of the high-tech industry. In 2000, after The Mercury News investigation on homework, the industry again flexed its muscles to nix proposed state legislation to add five DLSE investigators to Silicon Valley to examine high-tech practices. A 1998 government study to measure cancer and birth defect rates among California semiconductor workers was scuttled when leading semiconductor companies refused to cooperate. The federal DOL is so understaffed that after the recent investigations of five assembly plants, it plans no further investigation of the industry since its investigation did not turn up “severe” levels of abuse, such as multiple minimum wage violations. Most homeworkers they interviewed earned $7 per hour. Despite the multiple overtime violations, the DOL’s view is that there are people in other industries making $2 an hour (presumably garment and agriculture) to which it must turn its attention.

Two Asian American organizations work with high-tech workers in Silicon Valley. For several years, the Oakland-based Asian Immigrant Women Advocates (AIWA) has worked with Korean women in a number of assembly plants, educating them on occupational hazards, providing ergonomics training, and teaching advocacy skills to prevent repetitive stress injuries at the worksite. The involvement of the San Francisco-based Asian Law Caucus (ALC) is more recent. In 1999, the ALC filed a lawsuit on behalf of a Cambodian worker who took work home after a full day, working four extra hours each night on piece rate and earning less than minimum wage. ALC co-counseled the case with Equal Rights Advocates and currently represents five other homeworkers in unpaid minimum wage and overtime claims. ALC hired an attorney in 2001, funded through a National Association of Public Interest Law (NAPIL) fellowship, to work on health and safety issues in Silicon Valley, provide legal services through a clinic, and assess needs and the most appropriate advocacy models. The ALC also formed the High Tech Collaborative that includes ERA, AIWA, and Services, Immigrant Rights and Education Network (SIREN). The Collaborative is currently developing a work plan for public education and outreach to workers, research into the industry, litigation and policy advocacy. The Santa Clara Center for Occupational Safety and Health (SCCOSH), while not an ethnic-specific organization, has a Working Women’s Leadership
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Domestic Workers in the Hidden Economy

About Domestic Workers

There are no reliable statistics on the number of domestic workers employed in the US, let alone the number of Asian American domestic workers. Given the small number of organizations that advocate for domestic workers, even anecdotal information is sparse. While it is possible to monitor the number domestic workers employed by diplomatic personnel by looking at the number of work visas issued each year, the overwhelming majority of domestic workers are employed in the homes of private citizens. In states with large immigrant populations, most domestic workers are immigrant women. More often than not, they receive their wages as cash under the table and as such, are part of a vast underground economy. In the 1970’s, Congress estimated that domestic workers comprised approximately half of all female heads of households and that three-quarters earned less than minimum wage. Over the last three decades, some of these women have moved to higher paying, more secure jobs but hundreds of thousands continue to work as domestic workers, and this remains a low-wage, female dominated workforce.

The Committee Against Anti-Asian Violence (CAAAV), an organization that works with domestic workers, estimates that about 200,000 to 300,000 domestic workers work in the tri-state area of New York, New Jersey, and Connecticut. CAAAV’s estimate is based on the number of professionals likely to have full time nannies, cooks and housekeepers. In the tri-state area, the vast majority of domestic workers are Caribbean immigrant women, about 25% are Asian immigrants, and a smaller number are Irish women. Among the Asian workers, 80% or about 25,000 are Filipinas, working in the suburbs primarily for white families. 3,000 are Tibetan women. This exact figure is derived from INS data; Tibetan women enter the US as political asylees and 99% of them work as domestic work-

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3 CAAAV’s statement that “for every lawyer, doctor, and corporate executive, there is at least one immigrant woman from Asia, the Caribbean, or Latin America working as domestic workers in their home” may be an exaggeration, but even if a quarter to a third of professionals employed full-time domestics, there would still be around 50,000 to 75,000 domestic workers in the tri-state area. Author’s interview with Jane Bai, Ai Jen Poo, and Caroline De Leon, all of CAAAV, Dec. 13, 2000.
ers. South Asian domestic workers (from Nepal, Bangladesh, India, Pakistan) and Malaysians make up the rest of the Asian domestic workforce. It is estimated that there are thousands of South Asian domestic workers. Except for the South Asian domestic workers who work for employers of the same ethnicity, e.g., Bangladesh for Bangladeshi, all other Asian domestics work primarily for white families. Most domestic workers in the tri-state area, except the Tibetans, are undocumented migrant workers who work in the US in order to send money home to their families and many have been here up to a decade or more.

Regardless of ethnicity, the issues domestic workers face are the same across the board: low wages and long hours, isolation, sexual harassment, and lack of health care. Many continue working despite their exploitation because of their isolation, particularly for suburban live-ins who may become homeless if they were to leave an abusive situation. They are unaware of their rights and fear deportation by the INS because of their undocumented status. Employers threaten to turn them over to the INS if they complain and many do not leave the house for fear of being picked up by the INS. Under these circumstances, organizing among undocumented domestic workers is particularly difficult. Among South Asian domestic workers employed by those of the same ethnicity, many work in conditions of involuntary servitude. Their passports are confiscated, they cannot leave the house or use the telephone and may be physically abused, and may work 100 hours a week for wages as low as 50 cents an hour.

Other live-ins isolated in the suburbs, such as Caribbean, Filipino, and Latina immigrants, work long hours for wages that average $2 per hour. Conditions for those who work as live-out domestic workers in Manhattan are better as they have each other for support. They meet in the park, at playgrounds, schools, and play spaces or while walking the dog or shopping at grocery stores. They teach each other how to negotiate with employers and spread the word about job openings. But even these workers work 12 hour days with no overtime pay. Their wages range from $5 to $7 an hour. Another issue is that the average age of domestic workers is in the late 40’s and 50’s. For many, Social Security taxes have not been paid during their years of work. What will happen to them in retirement?

**Gaps in Legal Protection**

Exacerbating the abuses spawned by their isolated work situations is the fact that domestic workers are excluded from federal and state labor laws that protect most other workers. Not until 1974 did Congress include domestic workers within the protections of minimum wage and overtime laws of the Fair Labor Standards Act (FLSA). But FLSA’s overtime protections do not apply to live-in domestic workers. Nor do they apply to babysitters and companions to the disabled or elderly whose principal duties do not include housekeeping. The National Labor Relations Act,

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*Nahar Alam, an Andolan organizer, estimates that there are 20 cases of indentured servitude of South Asian domestic workers a year in New York. Author’s interview of Alam, Dec.14, 2000.*
which grants employees the right to organize, does not cover domestic workers. Title VII of the Civil Rights Act of 1964 (Title VII), which prohibits discrimination on the basis of race, color, religion, sex, or national origin, only covers employers with 15 or more employees, thereby excluding virtually all private households and domestic workers. As for state laws, a number of states exclude them from their higher minimum wage laws, resulting in domestic workers making the lower federal minimum ($5.15/hour). Over half of states exclude private households and domestic workers from their civil rights and workers compensation laws. And while all states but one offer unemployment benefits to domestic workers, most do not qualify because of requirements such as the need to earn $1,000 per quarter from the same employer; many domestic workers work a few hours a week for several employers.

The Organizations
Advocacy on behalf of immigrant domestic workers is very challenging. They must be located, then educated about their rights and given a place to turn to for help. The ethnic communities from which these domestic workers come do not look at them as workers with rights, but rather as servants. Thus, there are very little resources for domestic workers in these communities. The numerous issues they face in addition to low wages and long hours are still hidden. Moreover, to advocate legislatively to address their issues and expand their limited legal rights, hard data is needed to persuade lawmakers. Broad based organizing must be done among domestic workers as a critical part of any advocacy work.

CAAAV’s Women Workers Project (WWP), formed in 1998, is engaged in organizing work. Today, the WWP has 70 members, about 40 Filipina and 30 from other Asian groups. CAAA V also spearheads a multi-racial campaign for domestic workers, involving 400 workers, 80% Caribbean and 20% Asian workers, and is conducting a survey of them and other domestic workers. To reach these workers, WWP goes into parks, the streets of wealthy neighborhoods, and indoor play areas during rainy days, such as gyms for babies, or on the subways. The WWP provides workshops on basic rights under labor laws, negotiations with employers, and health fairs such as mammogram days. It has also developed a standard contract for domestic workers to use in negotiating with a prospective employer. However, the WWP is not a service provider; its emphasis is organizing for broader change. When a domestic worker seeks assistance from the WWP, the eight-member Organizing Committee (seven Filipinas, one Malaysian) decides on accepting the case based on whether it will further all workers’ rights and whether the woman seeking help agrees to be part of a public campaign. For example, the WWP

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9 On Monday and Tuesday mornings, between 6 a.m. and 8 a.m., organizers are at the Long Island Railway terminal leafleting live-in domestics workers who are going back to Long Island to work after a day off. Many domestic workers sublet apartments in Queens or Brooklyn where they stay on their days off so that they are not at the beck and call of their employers on their rest days. Their employers are disembarking from the very same trains to go to work.
accepted a case on behalf of a Malaysian woman injured on the job and organized a demonstration in front of her employer’s office. The gathering in front of the well-known psychologist’s office brought public attention to the occupational hazards faced by domestic workers and the role of employment agencies who send women to employers known to be abusive.

In addition to individual campaigns, WWP has lobbied private banks to adopt codes of conduct for their international staff who hire domestic workers. In a highly publicized case, CAAAV targeted a Crédit Lyonnais executive who was transferred from England to the US and brought a Filipino domestic worker with him. She was paid $2 an hour to work on-call 24 hours a day, seven days a week as a live-in nanny and housekeeper. The nanny sued the executive for unpaid wages. There is no legal precedent to include Crédit Lyonnais as a defendant. In addition, WWP has targeted Citibank and Merrill Lynch but to date, both corporations have refused to respond. WWP has also pulled together a legal team to advocate for expanding existing labor laws to include domestic workers and providing for standardized contracts for domestic workers. The legal team includes the Asian American Legal Defense and Education Fund (AALDEF), National Employment Law Project (NELP), and New York University School of Law’s Immigrant Rights Project (NYIRC). The legislation could, for example, regulate employment agencies that refer domestic workers. A campaign to garner support for the legislation would include education of workers on the concept, media work to educate the public, demonstrations in front of employment agencies, a citywide domestic workers negotiations day, or a one-day sick out.

Workers Awaaz and Andolan are both New York-based South Asian women worker organizations. They are membership and all-volunteer organizations without paid staff or funding. Andolan has 15 to 20 active members and 15 to 20 domestic worker supporters. Like CAAAV, Andolan uses cases as a way to educate other domestic workers and the public. Andolan currently has five back-wage claims. Andolan also provides services such as pro bono attorneys, self-defense classes, phone advice on how to leave the house and use public transportation, and has helped numerous workers escape involuntary servitude situations. In conjunction with the lawsuits, workers are asked to protest and demonstrate in front of employers’ homes to bring forth other domestic workers and educate the public. These two groups are working with CAAAV on its standardized contracts campaign. Domestic workers from as far away as Los Angeles have called Andolan for assistance.

In bringing minimum wage and overtime lawsuits and in their legislative advocacy, CAAAV, Andolan, and Workers Awaaz rely on AALDEF, NELP, and NYIRC for their pro bono services. AALDEF and NELP have a joint South Asian Workers’ Rights Project staffed by attorneys funded by Skadden-Arps and NAPIL fellowships that focus on domestic workers.
On February 25, 1999, the Service Employees International Union (SEIU) won the right to represent more than 74,000 homecare workers, primarily women of color, in Los Angeles County. This was the biggest organizing victory for the US labor movement since workers at Ford Motor Company’s River Rouge plant joined the United Auto Workers in 1941. This stunning achievement was accomplished over 12 years among a low-wage, ethnically diverse, and predominantly female workforce scattered throughout the 4,083 square miles of Los Angeles County. Similar organizing efforts in the Greater San Francisco Bay Area have also succeeded with SEIU now representing 30,000 homecare workers, also women of color. In the past decade, 100,000 homecare workers have become union members. Through the union’s collective bargaining and backing from elderly and disabled advocates, San Francisco homecare workers now earn $9.75 per hour, with medical and dental benefits. Alameda County workers earn $7.82 per hour with health care benefits, receive free bus passes to get to work, and got funding for a Workers Center. Los Angeles County homecare workers earn $6.75 per hour, without health benefits.

A Profile of Homecare Workers

Homecare workers are personal attendants who provide assistance to sick, elderly, and disabled people in their homes. Their duties may include helping their clients bathe, dress, move around the house, eat, and use the toilet. Other routine household tasks might include meal preparation, doing laundry, and managing household money. Homecare workers are also legally permitted to perform medically related tasks such as bowel and bladder care and administration of medications. Their jobs are often difficult and stressful, requiring a variety of skills ranging from heavy lifting to coping with death. In California, homecare workers are paid by the California In-Home Supportive Services (IHSS), which administers funds from Medicaid and other government programs.

In California, currently there are about 200,000 IHSS homecare workers providing care to 230,000 consumers. Overwhelmingly, homecare workers are women of color, many of whom are immigrants. Los Angeles County has some 74,000 homecare workers. 83% are women, 39% are Latinas, 25% are African Americans, 14% are of Armenian or Russian descent, and 7% are Asian/Pacific Islanders. This contrasts with San Francisco and Alameda Counties where approximately 30% of the 15,000 workers are Chinese.

Half of homecare workers are family members of the consumers, e.g., a daughter caring for an elderly mother. Over half of Los Angeles homecare workers are over age 45. Prior to unionization, the wages paid to homecare workers was the state minimum wage, which was below the federal poverty level. Moreover, the workers were not entitled to any medical insurance, pension, or holiday pay.

The Challenges to Organizing and the Union’s Strategy

The union was faced with several formidable challenges in organizing the homecare workers. First, the workforce was dispersed throughout the county and diffi-
cult to locate. With individuals working in home settings, they had no occasion to
come together as a group. They spoke many languages—more than 100 different
languages in Los Angeles County alone. Due to the low pay and lack of benefits,
and consumer death, their turnover rate was estimated to be a staggering 40%.
Second, it was not easy to pinpoint who the employer was. While IHSS performed
the administrative functions of issuing paychecks, it did not have the legal author-
ity to enter into negotiations with the union and neither the state nor the county
would accept the responsibility of being the workers’ employer. Moreover, some
traditional functions of employers such as hiring, firing, and directing work, were
performed by the consumers, who were unwavering about retaining this right as a
means to control their lives. In fact, the consumers themselves were a potential
obstacle if they publicly opposed homecare workers unionizing. Some were very
concerned that the union would strike and leave them without critical care that no
one else could provide, and others were suspicious that the union’s intervention
would decrease the control they valued over their ability to lead independent lives.
Finally, there did not seem to be any leverage that the workers could use to press
their concerns. The traditional weapon of a strike was not a viable source of lever-
age because the workers were often family members of the consumers.

1. The Action Plan
Notwithstanding the formidable challenges, the union committed itself to the fol-
lowing plan of action. As a first step, the union needed to pass statewide legislation
to create a public authority in each county, an employer-of-record, with which the
union could collectively bargain. Once passed, the next step would be to form pub-
lic authorities in each county and commence collective bargaining. To achieve
these goals, the union utilized a three-pronged strategy in each county: 1) grass-
roots organizing and political mobilization around day-to-day worker issues, 2)
coalition building among workers, consumers, and advocates, and 3) policy
changes aimed at restructuring the homecare system to bring higher wages and
benefits to workers, while delivering better care to consumers.

2. Grassroots Organizing
Without worker interest, the union could not claim representation rights.
Grassroots organizing was critical. In a long-term campaign with a 40% turnover
rate, this required constant organizing and reorganizing just to maintain a
statewide level of support of 10,000 to 15,000 of homecare workers at any given
time. The initial challenge in Los Angeles was to find the 74,000 workers. The
union went to senior citizens’ centers, doctors’ offices, markets, and churches. It
established a union office that provided assistance in finding jobs and gave work-
ers a space to come together. It filed a successful lawsuit over late paychecks,
organized to raise the minimum wage from $3.75 to $4.25, and fought cuts in
funding for homecare workers’ services every year from 1989 to 1992. From these
early successes, workers realized what could be done collectively. In Alameda
County, SEIU set up a community-based Workers Center to conduct outreach.
Once workers heard about the union and had a ray of hope that they could earn

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higher than minimum wages, they readily joined the union. Remarkably, the Los Angeles local was able to sign up 12,000 workers in a three-month period in 1987.

3. Coalition Building

After building a base among homecare workers in each targeted county, the union created partnerships with activists in the elderly and disabled communities. Most consumers came to see that by upgrading the pay and skills of their personal attendants, turnover would decrease and quality of their care would improve. The strength of worker/consumer partnerships formed the basis of a wider community alliance with church and other community-based organizations (CBOs). In the San Francisco Bay Area, Asian American CBOs such as Oakland Chinese Community Council, Korean Community Center, and Self Help for the Elderly supported the homecare workers. Delegations of workers, elderly, disabled persons, and CBOs met with politicians, rallied at government buildings, and chained themselves to the doors of the Capitol, all demanding dignity for homecare workers through a revision of the existing employer system.

4. Policy Making

In 1993, the homecare worker/consumer coalition succeeded in passing state laws providing the statutory authority for counties to establish public authorities. The public authority was designed to bargain with the union, train homecare workers, and provide a registry to match workers with prospective consumers. The union then turned its attention to establishing the public authorities in the counties and funding appropriations for IHSS workers’ wage increases. San Francisco was the first to establish one in May 1995 and San Mateo’s was the first to become operational in January 1996. In 1997, 10 years after the Los Angeles campaign began, homecare workers celebrated the establishment of their public authority.

After the public authorities were formed, finding common ground between workers and consumers was critical. For instance, while negotiating for the union contract with the public authority, the issue of who should have the right to hire and fire the workers was hotly debated. In the end, the union contract gave consumers the right to hire and fire with or without cause. “I came to understand how intensely personal this job is, and how important it was that the consumers had a choice in who touched their bodies,” said a SEIU Executive Vice President. The union contract prohibits striking. A bill passed in 1999 prevents funding wage increases by reducing the hours of care approved for consumers. In return, the union got from consumers their support in pressing for higher state and country appropriations to pay for wage increases.

In 1999, the worker/consumer coalition succeeded in getting a law passed requiring each country to establish an Advisory Board and an “employer-of-record” by 2003. The law also protects against reductions in consumers’ hours of care and requires all counties with a caseload of more than 500 individuals to provide the homecare option. Another law passed that year requires counties to provide the union the names, addresses, and phone numbers of all IHSS homecare workers it seeks to represent, solving the problem that the union faced 10 years earlier of locat-
ing homecare workers.

5. Establishing a Workers Center
Before the campaign, only one union business agent (paid staff of union) represented some 7,000 workers in Alameda County. To provide more representation to homecare workers, the union decided to create the Homecare Workers Center. Workers are given four months of training on workers’ rights, the union contract, and IHSS rules and procedures and can then serve as business agents for fellow workers. Initial funding for the Workers Center came from private foundations. Union dues now pay for operations of the Center, including rent and wages for the five member/organizers who provide assistance in Chinese, Spanish, and English. However, union dues for homecare workers are one-third those of other SEIU members. As a result, there is only enough funding for the Center to provide a few hours of assistance a day and only very limited programs.

6. The Role of Chinese Homecare Workers in the San Francisco Bay Area
In Alameda County, Chinese homecare workers, who made up 30% of the workforce, were the most active union members at every stage of the organizing campaign. They recruited union members, lobbied for the 1993 state law that created the public authorities as employer-of-record, pushed the counties to form public authorities, negotiated the wage increases and health benefits, and represented their fellow workers in solving problems with the county. Non-English-speaking Chinese immigrant women learned to work the phones to enlist their fellow workers and CBOs to turn out at Board of Supervisor and state capitol hearings and testify, rally, or lobby for setting up the public authority or releasing funds for their wage increases. Chinese homecare workers have also run for union office and currently four out of the seven Executive Board members are Chinese (with two Latinas and an African American). The thousands of Asian immigrant women who joined the union and played key roles in the organizing campaign have also helped shatter stereotypes that non-English-speaking Asian women are unable to stand up for their rights.

Advocacy Needed
Unionized homecare workers have achieved a great deal. But much remains to be done. For example, homecare workers still do not earn a living wage or have vacation, sick leave, and retirement plans. They need a 24-hour registry for consumers to call in emergencies. In Los Angeles with 74,000 workers, they need more leaders and leadership training. They do not have a job description or a procedure for dealing with sexual harassment on the job or violent clients. Occupational safety laws do not apply to homecare workers. Because of client privacy rights, workers are not told what health problems a client has and cannot protect themselves when handling a patient. In addition, thousands of Asian American homecare workers in other states remain to be organized.
However, their impressive successes so far can serve as a model of how to continue addressing the issue of homecare workers and can also serve as a model for empowering garment, high-tech, and domestic workers.

**Recommendations for Action**

**High-Tech Sweatshops**

- Conduct research on the health and safety effects of working with toxic chemicals in Silicon Valley industries. Based on the research, advocate with employers and OSHA for banning or lowering the threshold for acceptable levels of chemical exposure.

- Conduct research on the structure of the semi-conductor industry to determine theories of liability and accountability for labor law violations and injuries suffered by workers and the targets for systemic change.

- Conduct research on the sectors within the high-tech industry where Asian immigrant women are concentrated and in what proportions.

- Ensure that Federal and State DOL offices have adequate funding to carry out regular inspections and to follow up the violations they uncover.

- Outreach to workers (in factories and in homes) and train them to report wage, hour and health and safety violations and sub-standard work conditions.

- Address the racism, sexism and xenophobia that prevails in Silicon Valley.

**Domestic Workers**

- Conduct outreach to workers, provide them a place to assemble/organize and educate them about their rights.

- Conduct research to understand the issues faced by domestic workers and to provide the hard data needed to persuade lawmakers to create/change legislation to protect workers’ rights.

- Bring impact litigation and engage in high-level campaigns to bring the plight of domestic workers to the public’s attention.
Homecare Workers

► Widely spread the SEIU success story to inspire similar campaigns and actions on behalf of home care workers in other states.

► Ensure that legislation on health and safety and sexual harassment applies to homecare workers.

► Negotiate for benefits that other workers enjoy, such as vacation time, sick-leave and retirement plans.

► Advocate for resources for leadership training and the creation of workers’ centers.
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Part 2
Health and Well-Being
Significant health disparities exist between Asian American women and the population in general for illnesses which are preventable and treatable.
Health Care Needs of Asian American Women

Introduction

Susan Matsuko Shinagawa, a Japanese American breast cancer survivor and advocate had two different breast surgeons tell her that “Asian women don’t get breast cancer” and that she had nothing to worry about when she found a lump in her breast. In fact, breast cancer rates for Japanese American women are the highest of all Asian ethnic groups. Susan Shinagawa survived because she had the assertiveness to demand a biopsy.¹

There are very few studies on the health of Asian American women in general, and even fewer on specific subgroups within the population. Where it does exist, research on Asian American women is limited largely to studies that include Asians among the minority or “other” category, or as part of large-scale studies when the data collection net is cast broadly. The “Asian and Pacific Islander American” (APIA) category in research tends to include all 48 separate, incomparable, and diverse groups of APIA sub-populations. Table 5 details at least 24 distinct Asian subgroups. Where there is health data on specific APIA ethnic groups, information has been primarily limited to Chinese, Japanese, and Filipino and, in some cases, Native Hawai’ians and Vietnamese. Not until 1992 did the National Center for Health Statistics separate vital statistics for APIAs into the above groups and further into Indian, Korean, Guamanian (Chamorro), Samoan, and “Remaining API.” Presumably, “remaining API” consists primarily of persons of Cambodian, Laotian, Thai, Hmong, and Pakistani descent. As the Shinagawa story shows, the failure to disaggregate by specific Asian subgroups in health research, delivery of services, and policy and treating the population as a single, homogenous unit can have harmful, even fatal effects.

¹ Asian Pacific American Islander Health Forum, Women’s Health Watch Newsletter, Summer 1997.
## Table 5.

### Asian Population by Detailed Group: 2000

<table>
<thead>
<tr>
<th>Detailed Group</th>
<th>Asian Alone</th>
<th>Asian in combination with one or more other races</th>
<th>Asian detailed group alone or in any combination</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>One Asian group</td>
<td>Two or more Asian groups</td>
<td>One Asian group</td>
</tr>
<tr>
<td>----------------</td>
<td>-----------------</td>
<td>--------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Total</td>
<td>10,019,405</td>
<td>223,593</td>
<td>1,516,841</td>
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<tr>
<td>Asian Indian</td>
<td>1,678,765</td>
<td>40,013</td>
<td>165,437</td>
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<tr>
<td>Bangladeshi</td>
<td>41,280</td>
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<tr>
<td>Bhutanese</td>
<td>183</td>
<td>9</td>
<td>17</td>
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<tr>
<td>Burmese</td>
<td>13,159</td>
<td>1,461</td>
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<tr>
<td>Cambodian</td>
<td>171,937</td>
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<td>20,830</td>
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<td>Chinese</td>
<td>2,314,537</td>
<td>130,826</td>
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<td>Filipino</td>
<td>1,850,314</td>
<td>57,811</td>
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<td>Hmong</td>
<td>169,428</td>
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<tr>
<td>Indo Chinese</td>
<td>113</td>
<td>55</td>
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<tr>
<td>Indonesian</td>
<td>39,757</td>
<td>4,429</td>
<td>17,256</td>
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<tr>
<td>Iwo Jiman</td>
<td>15</td>
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<td>60</td>
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<tr>
<td>Japanese</td>
<td>796,700</td>
<td>55,537</td>
<td>241,209</td>
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<td>Korean</td>
<td>1,076,872</td>
<td>22,550</td>
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<td>Laotian</td>
<td>168,707</td>
<td>10,396</td>
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<td>Malaysian</td>
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<td>22</td>
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<td>Nepalese</td>
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<td>Sri Lankan</td>
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<tr>
<td>Vietnamese</td>
<td>1,122,528</td>
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<tr>
<td>Other Asian</td>
<td>146,870</td>
<td>19,576</td>
<td>195,449</td>
</tr>
</tbody>
</table>

**Source:** US Census Bureau, Census 2000

1 Respondents reporting several Asian groups are tallies of Asian responses rather than the number of Asian respondents. Respondents reporting several Asian groups are counted several times. For examples, a respondent reporting “Korean and Filipino” would be included in both the Korean and Filipino numbers.

2 Includes respondents who checked the “Other Asian” response category on the Census questionnaire or wrote in a generic term such as “Asian” or Asiatic.
Health Disparities for Asian American Women

The studies that do exist show that the health and mental status of Asian American women are disproportionately worse than the mainstream. As outlined below, the existing data points to significant health disparities between Asian American women and the population in general for certain diseases and illnesses.

Preventable and Treatable Illnesses
Like all women, many of the illnesses that Asian American women suffer are preventable, detectable and treatable if found at the early stages. But Asian American women face particular obstacles that prevent early detection and treatment for these diseases. The following are the three of most pressing areas.

1. Cancer
While breast and cervical cancer rates are lower in Asian countries than Western nations, the rates increase for Asian women who immigrate to the US. For Asian American women age 45 to 54, breast cancer is the leading cause of death. In addition, breast cancer occurs at different rates for different Asian ethnicities. Among Asian women in the United States, Japanese women have the highest rate of breast cancer incidence, followed by Filipinas. Breast cancer also is the most common cancer among Chinese and Korean women. While breast cancer death rates for white, African American, and Latino women decreased or stayed the same from 1990-95, incidence of breast cancer in APIA women increased during this period. Studies show that Asian American women are at risk for cancer at younger ages and of more aggressive types than non-Asian women. Moreover, the risk of death for Asian American women who contract breast cancer is 1.5 to 1.7 times that of white women. The higher risk of death from breast cancer in Asian American women is explained in part by a lack of early screening. For APIA women over the age of 50, only 49% had obtained a mammogram or clinical breast exam within the previous two years. APIA women 50 years and older have the lowest rate of breast cancer screening among all racial and ethnic groups.

For Vietnamese women, cervical cancer is the most common type of cancer and is the highest rate among all groups of women and is nearly five times the rate for white women. Yet, cancer screening rates are very low for Vietnamese, Hmong, and Cambodian women. One San Francisco study showed that 21% of 2,756 Asian and Pacific Islander women surveyed have never received a Papanicolaou smear to detect cervical cancer, compared with 5% of white women. Studies also show that Japanese, Korean, and Filipino American women all present later with cervical cancer. These are the more educated Asian American groups; it seems logical to assume that the low levels of early screening are at least as, if not more, pronounced among the less educated and acculturated Asian American groups. In fact, the San Francisco study showed that Vietnamese women who had migrated to the United States more recently (post-1981) were more likely (76%) to have never had the Pap test than women who had migrated before 1981 (33%).
The obstacles to early detection among Asian American women include a lack of information in their native languages, a reluctance to discuss reproductive health, the common notion that female organs cease to function if they are not used for procreation and therefore not susceptible to disease, and the belief that cancer is inevitably fatal. A San Francisco survey of Vietnamese women found that 52% believed “there is little one can do to prevent cancer.” These misleading notions must be combated with increased education and outreach in the Asian American community and among health care providers whose recommendations are a key impetus to regular screening. In addition, doctors may not be aware of the differences among the various sub-groups and thus unable to make appropriate recommendations and referrals.

2. Coronary Heart Disease
While compared to white (43%) and black (41.4%) American women, Asian and Pacific Islander women have a lower death rate of coronary heart disease (35.7%). However, coronary heart disease is the single largest killer of Asian American women. The limited studies that do exist indicate higher rates for Asian Indians, Filipinos, and Laotians than for the general population. However, because Pacific Islander women and all Asian women are grouped together in the studies, it is difficult to precisely determine which sub-groups of Asian American women are at a higher risk.

The risk of hypertension also varies by subgroups. There is more of a problem for Filipino (25%) than for either Chinese (16%) or Japanese (13%) Americans. In California, while the rate of hypertension for all females in the state population is 16%, it is only 9% for Vietnamese females and 3% for Korean American females. Further research is needed for all other Asian sub-populations.

3. Osteoporosis
Osteoporosis is primarily a woman’s disease, with women making up approximately 80% of all cases. Asian American women are at higher risk for osteoporosis, most likely because they tend to be lighter in weight and have smaller bones and possibly due to an average calcium intake half that of the general US population. 20% of Asian American women are estimated to have the disease and are at higher risk for hip, spine and wrist fractures. The dangers posed by a hip fracture are particularly serious. Within one year after a hip fracture, up to 30% of the victims will die, 25% of the survivors will be confined to long-term care facilities, and 50% will experience long-term loss of mobility. Yet, only 11% of Asian American women between the ages of 40 and 64 in California have had a bone density test for osteoporosis in the past two years.

Mental Health
Asian American women have the highest suicide rates among women over age 65 and the second highest among women ages 15 to 24 in the United States. Suicide is the eighth leading causes of death for Asian American women. Among all Asian
female suicide deaths in California, 56% were Chinese, 22% were Japanese, 11% were Korean, and 8% were Filipina. In addition, 89% of those who committed suicide were immigrants. The suicide death rate for Chinese women is 20 deaths per 100,000 population, the highest of all racial and ethnic groups. A high suicide rate may be a combination of cultural and social factors; cultures in which counseling and psychotherapy are not socially acceptable, such as in many Asian cultures, tend to have higher rates of suicide.

Despite these alarming figures, Asian Americans are only a quarter as likely as whites, and half as likely as African Americans and Hispanic Americans to seek outpatient treatment. Asian Americans are also less likely than whites to be psychiatric inpatients. A constellation of barriers deters Asian Americans from seeking treatment, and when they do seek treatment, it may not meet their needs. Many Asian Americans feel ill at ease with the mental health system in the United States. They may find clinicians who only understand the white middle-class orientation, with its cultural values and beliefs, as well as its biases, misconceptions, and stereotypes of Asian cultures. Other reasons for the underutilization of services include the stigma and loss of face over mental health problems and limited-English proficiency among some Asian immigrants. These obstacles are more pronounced for recent immigrants.

For certain Southeast Asian refugees who have suffered persecution, torture, and starvation during the Vietnam War and after, more than psychiatric treatment is needed. While there are no known longitudinal studies, the few that exist show that survivors of the Cambodian holocaust, the Mahautndorai, are experiencing a health crisis that is a direct result of their extraordinary trauma. Those who lived in Cambodia from 1970-80 suffered major trauma that included starvation, combat conditions, slave labor, imprisonment, witnessing atrocities, torture both physical and psychological, death of family members, physical injury, and loss of home, property, and country. A study of Cambodians living in Massachusetts found that by the mid-1980’s, those who had lived in Cambodia from 1975-79 were suffering high incidence of headache, dizziness, fatigue, muscle and bone pain, palpitations, sweating and fever-symptoms associated with starvation. For those who suffer post traumatic stress disorder (PTSD), their symptoms increase as they age. A California State Department of Mental Health survey found that 16% of Cambodians met the criteria for PTSD and other studies have found that 40 to 50% of Khmer teenagers who lived through the Mahautndorai had PTSD. Many years after their trauma experiences, child survivors are having breakdowns and intrusive memories. For women traumatized as children, they demonstrated an unusual lack of physiologic response to a startle paradigm. Psychosomatic blindness for Cambodian women ages 40 years and older has also been reported.

Researchers are discovering that like survivors of the Nazi concentration camps of World War II, the survivors of the Cambodian holocaust also suffer psychic symptoms such as increased lassitude, failing memory and inability to concentrate, sleeplessness or irritability, and vertigo. The psychic symptoms are the result of starvation-induced organic brain and neurological changes. Studies are beginning to show that a history of torture is associated with hidden or undiag-
nosed traumatic brain injury that may be interfering with positive responses to psychiatric treatment. This fact raises serious questions as to whether some Manhantdorai survivors will be able to achieve self-sufficiency at a time when the safety net of social protection is being shredded in this country.

Reproductive Health and Maternal-Child Health

1. HIV and STDs
Of all women of all racial groups, in recent years, APIA women have the highest rate of increase in certain sexually transmitted diseases (STDs), such as gonorrhea and chlamydia. APIA women have four times as many reportable STDs as APIA men. Although less than one percent of AIDS cases occur among APIAs, APIA women have the highest rate of increase in new HIV/AIDS infections in recent years. However, because of cultural stereotypes about patients at risk for HIV, doctors often fail to offer Asian women HIV tests or compile sexual history profiles for these women. Many Asian American women only learn of their HIV status through tests during pregnancy, job or insurance change, or after their partner became ill. White and Asian women tend to be infected for the longest time before discovering their HIV status.

2. Early Prenatal Care
Prenatal care provides early detection of mothers at risk of delivering a premature or growth-retarded infant and interventions to reduce the risks of low-birth weight and other adverse pregnancy conditions and outcomes. Some groups of Asian American women have particularly low rates of prenatal care. Laotian women have the lowest percent (56.1%) receiving early prenatal care. Nearly half of Cambodian women do not begin prenatal care during their first trimester and as a result experience higher risk births. Of the five major Southeast Asian groups in Oregon (Khmer, Hmong, Mien, other Lao, and Vietnamese), Hmong American women had the least favorable birth risk profile. Asian Indians (8.3/1,000) and the group classified as “Other Asian” (8.9/1,000) have the highest infant death rates among Asians and Pacific Islanders. Asian Indians (8.4%), Thai (7.5%), Cambodians (7.1%), and Filipinos (7%) have the highest percentages of low-birthweight infants among Asians.

3. Hepatitis B
Hepatitis B rates for Chinese, Koreans, Filipinos, Southeast Asians and Pacific Islanders range up to 15%, as compared to 0.2% among the general US population. Perinatal transmission is the most common mode of transmission among Asian women and their children. Every year, about 19,000 women infected with Hepatitis B Virus deliver infants in the US; nearly half of these women are Asian.

4. Breast-Feeding
The American Academy of Pediatrics recommends that all mothers breastfeed their children. The benefits to breastfeeding for both mother and child include the
better health of the infant which translates into time, energy, and money saved due
to fewer visits to the doctor and fewer missed days from the job tending to a sick
child. Among all women in California, Southeast Asian women have the lowest
incidence of breastfeeding. This contrasts with the very high rate of breastfed
Southeast Asian babies (93%) born outside of the United States as compared to
only 10% of those born in the United States. Possible barriers include lack of infor-
mation about breastfeeding, limited maternity leave, lack of workplace breastfeed-
ing facilities, and lack of support from peers and family members.

Barriers to Care

As described above, the paucity of research and data and the failure to disaggregate
data lead to health care providers failing to provide adequate health care to Asian
American women. In addition, the lack of education among Asian American
women leaves them with the false belief that they are not at risk for breast or cer-
vical cancer or fatalistic resignation if diagnosed with cancer. Other equally serious
barriers to care are outlined below.

1. Uninsured Asian American Women
One reason for the low utilization of preventative services is the lack of health
insurance. Approximately 36% of Asian American women under 65 years of age
do not have any form of health insurance, a higher proportion than the general US
population. Asian American women in California were ranked second only to
Latinas (21% and 32% respectively) as most likely to be uninsured. Asian immi-
grants are concentrated in low-wage jobs that do not provide health insurance,
such as garment shops, restaurants, and private households. Korean Americans are
the most likely to be uninsured of any racial or ethnic group. In addition to the
financial barriers to the working poor purchasing individual health insurance, the
1996 Welfare Reform Act excluded many Asians immigrants living in poverty from
federal- and/or state-funded Medicaid programs. Furthermore, as described in
Chapter One of this report, those who remain eligible for Medicaid do not apply
for fear of adverse immigration consequences. In California, since welfare reform,
there has been a 33% decrease in Medicaid coverage among Asian Americans. As
a result, selected sub-populations of Asians are more likely to be without health
insurance, and this lack of health insurance causes some Asian American women
to become frequent users of hospital emergency rooms.

2. Language Barriers to Care
Language barriers impede clear communication that is vital to ensuring the deliv-
ery of quality health care. Linguistic accessibility means that service delivery sites
must utilize appropriately translated forms, educational materials, signs and
posters. Since over 60% of the Asian immigrant population is limited-English pro-
cient, the lack of linguistically accessible services poses a serious impediment.
There are far too many anecdotal accounts of immigrant children having to inter-
pret for their mothers at the doctor’s office. Sometimes interpreters are found at random. For example, a 52-year-old Korean-speaking woman had a gynecology appointment at a county hospital. A community-based agency called ahead to request a Korean language interpreter for her. She arrived at her appointment, but the hospital did not provide an interpreter or bilingual worker. Instead, the hospital staff asked a 16-year-old boy sitting in the waiting room—a complete stranger—to be the interpreter for her gynecology appointment.

In one of the most extreme examples of a health care breakdown due to lack of language accessible services, a 51-year-old mother of seven was imprisoned for 10 months in Fresno, California because she failed to take all her tuberculosis medication. She had stopped because of severe side effects, and because, after talking to county health interpreters who did not speak Lao, she thought the medicine could kill her. She was arrested by police with guns drawn. At the jail, a translator misunderstood and told officials that she was suicidal. She was held in a cell with no light, water, heat, or food for three days. After she became acutely ill due to this mistreatment, she was taken to a hospital where she was chained by her ankles to the bed. After six months, the doctors diagnosed her as being non-contagious, yet she was held another four months before a judge found that she was being illegally detained.

➤ 3. Lack of Culturally Competent Care

Despite growth in and the diversity of the Asian American population, the US health delivery system has not been able to meet the need for culturally competent services. Culturally competent health care requires having knowledge of cultural beliefs and practices, including dietary and health care practices. It requires the ability to introduce Western medical practices to non-Western patients in a way that can be understood within their cultural framework. It also encompasses incorporating traditional treatments in clinical practice and health education. For example, traditional practices such as acupuncture and herbal medicines should be, but often are not, included in the treatment of Asian Americans or covered by insurance. Yet, Asian American women are more likely to use traditional health practices and medicines than Asian men—69% versus 39%. By ethnic group, nearly 96% of Cambodian women, 81% of Laotian women, and 64% of Chinese women use traditional health practices. Their reliance on traditional medicines may explain the high non-compliance with Western prescription medications. Instead of viewing the non-compliance as lack of cooperation, health care providers should be trained on how to incorporate traditional health practices into their western clinical practices.

➤ 4. Barriers Faced by Asian American Lesbians

As described in more detail in Chapter Ten, Asian American lesbians face multiple forms of discrimination based on race, gender, and sexual orientation. One can hypothesize that as a result, stress effects may be great for Asian American lesbians. Yet, the author of this report found no health studies specific to Asian American lesbians. Studies relating to the health of lesbians generally have shown that les-
bians have overall poorer health than the general population, morbidity is greater among lesbians than among heterosexual women, and lesbians use the health care system less often than heterosexual women. In addition, lesbians who do not disclose their sexual orientation may be at increased risk for melanoma or other cancers due to psychogenic suppression of the immune response. Chapter Ten also describes the difficulties Asian American lesbians experience when they “come out” to their families. However, there is no data to determine how this stress affects the particular health care needs of Asian American lesbians.

With regard to the general lesbian population, it is known that lesbians encounter discrimination by health care providers, such as reluctance or refusal to treat, negative comments during treatment, or rough handling during examinations. As a result, the majority of lesbians, up to 72%, do not disclose their sexual orientation when seeking medical care. Without knowledge about a woman’s sexual orientation, physicians are unable to provide appropriate, sensitive, and individualized health care. For example, when seeing a gynecologist, she/he may assume that the patient is heterosexual and asks questions that are heterosexist, such as “Do you use birth control?” The doctor will not know to ask questions about family history for breast cancer given that women who do not have children may be at a higher risk for this disease. Gathering accurate information about sexual behavior history is an essential component of good medical care. Yet, if a physician is not aware that a woman is lesbian or is uncomfortable eliciting this information on sexual behavior, she/he cannot advise, for example, on safe sex practices or order tests for particular STDs.

The Organizations

Most of the Asian American organizations engaged in health care advocacy are based in California, funded by the California Endowment or California Wellness Foundation, but their advocacy work is national in scope. Asian American health organizations in other parts of the country primarily focus on providing direct services or research.

The Asian Pacific Islander American Health Forum (Health Forum) was founded in 1986 and is based in San Francisco. The Forum conducts public policy advocacy, capacity building for health CBOs, and regional and national conferences on APIA health. It currently has four projects: HIV Capacity-Building Assistance Program, National Cancer Survivors Network, Center for Census Information and Services, and Tobacco Education Network. In its projects, the Health Forum partners with health CBOs and local clinics throughout the country, provides technical assistance (including review of health promotion literature for cultural competency) and trainings, and acts as an intermediary with federal agencies, particularly within Health and Human Services. As the intermediary, it keeps the CBOs informed on policy, legislative, and regulatory changes that affect provisions of health services and acts as the advocacy arm of the CBOs, conveying to the federal agencies the specific health care issues facing Asian Americans and
their providers. The Health Forum had a Women’s Information Network (WIN) project that networked with APIA women’s organizations, published a newsletter, and reviewed multi-lingual health outreach and education materials related to Asian women’s health. Funding for WIN ended and the Health Forum folded advocacy on women’s health issues into its overall work. It is the fiscal sponsor for the Asian American Pacific Islander Domestic Violence Institute.

The National Asian Women’s Health Organization (NAWHO) approaches health from a “rights” perspective, with a focus on access to health. It conducts research to assess health disparities among Asian American women and widely disseminates results to policymakers, health care providers, and government health agencies. It conducts train-the-trainers programs on cultural competency, creates curricula, and educates policymakers through media briefings. An example of a successful campaign is the research it conducted on prevalence of smoking among Asian Americans. Through media work publicizing the results, the Center for Disease Control, which initially refused to fund NAWHO based on their belief that “Asians don’t smoke,” released funding for people of color organizations to engage in education and outreach work in their communities. NAWHO’s breast and cervical cancer program has developed cultural competency curriculums for and also provides train-the-trainers programs to state health care officials and personnel and staff of the American Cancer Society and their affiliates from eight states.
Recommendations for Action

The best way to achieve health is through the “public health” model where health providers and their patients work in partnership to move patients from “communities of recovery” to “communities of resistance”, best described by the feminist bell hooks. For the Asian American communities, advocacy is needed to address the specific barriers to women’s empowerment over their own health care, including advocacy for the following:

- Culturally competent research and data disaggregated by ethnic group, to assess and understand the particular health needs of Asian American women. The research agenda should take into account the health crisis present in certain specific sub-populations of Asian American women.

- Educating health care providers, public and private, of the high-risk diseases present among different ethnic groups in order to overcome stereotypical assumptions that preclude the provision of high-quality and appropriate medical care.

- Training health care providers to better understand their patients’ culturally related health beliefs and medical practices in order to incorporate them into treatment plans and/or to better explain western treatments to patients.

- Educating Asian American women to understand the health issues specific to them to enable them to be proactive in the prevention, early detection, and treatment of high-risk diseases.

- Providing linguistically accessible services, including hiring of interpreters and bilingual health care workers, so that women can communicate with their health care providers.

- Researching and studying the health status and needs of Asian American lesbians.
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Sexual and Reproductive Freedom for Asian American Women

Introduction

For women, sexual freedom is the right to be a sexual being, free from both the patriarchal constraints of uncontrolled pregnancy or the mandate to be heterosexual.\(^1\) Control over sexuality and reproduction are inextricably interrelated.\(^2\) Society’s deep-seated antagonism toward women’s sexual freedom has limited the discussion regarding women’s reproductive health and rights to a narrow focus centered on control over women’s procreative functions. But, to deny a woman control over reproduction and force her to remain pregnant against her will is, in essence, to force her into a form of slavery. She becomes the involuntary vessel for someone else’s desire for procreation.

The choice of whether or not to have an abortion is fundamental to women attaining full status as persons. In *Roe v. Wade*, the Supreme Court provided the right to abortion and as well as a constitutional basis for women’s liberation, gender equality, and the capacity to participate equally in society as full persons. However, in the United States powerful social forces attack this constitutional right; their objective goes beyond assuring that motherhood is the primary occupation of women. The core of the attack is antagonism to women’s sexual freedom.

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1 Same-sex relationships also threaten the traditional hegemony of men in the sexual pecking order. The potential for women to have sexual pleasure and to construct relationships and communities without men changes the balance of sexual power in familial relations, precisely the arena most resistant to egalitarian intervention.

2 In the early abortion cases, some advocates pressed this argument and emphasized the differential punishment women suffered as a consequence of sexual activity enjoyed at least as much by men. But antagonism by the courts toward sexual freedom is very deep. Thus, in *Roe v. Wade*, advocates relied primarily on and the Supreme Court chose the right of privacy as the constitutional basis to protect a woman’s right to abortion, and not the 13th Amendment prohibition against servitude and slavery.
Women’s sexual freedom, well-being, needs, and rights have only recently been recognized and incorporated into public debate. Women have been disadvantaged in making sexual choices, exercising their rights with partners, and negotiating safer practices in personal relationships.

Reproductive freedom and the notion of “choice” for Asian American women encompasses more than the decision of whether or not to have an abortion. It also includes a broader framework of racial, gender, and economic justice. Reproductive freedom includes the struggle for the very existence of Asian women in America, their right to establish families and communities, having and making reproductive “choices” freely, having control over the gender and number of children born, the right to culturally relevant sexuality education, and freedom from environmental exposures that affect women’s overall and reproductive health.

Silence about Sex and Sexuality

How do Asian Americans view sexual freedom and other matters related to sexual health and well-being? Questions about attitudes on these topics have not been asked explicitly. However, there is evidence that suggests that, by and large, Asian Americans are “pro-choice.” In a 1991 survey by the Asians and Pacific Islanders for Reproductive Health, 77% identified themselves as “pro-choice” and an overwhelming majority of the over 1,000 respondents were supportive of a woman’s right to choose abortion under varying conditions. The survey did not inquire as to the basis for their pro-choice feelings and it remains unclear whether the beliefs expressed are based on a woman’s right to sexual freedom or on other grounds. In certain Asian American communities, sex is as much a taboo topic, if not more so, as in the general American population. Asian American lesbians have explained that one of the reasons it is so difficult to come out to their parents is that sex is not a topic that is usually or openly discussed in their families, especially outside the family, i.e., publicly. In some Asian cultures, women are not seen as sexual beings; they have sex for the purposes of reproduction or as a marital obligation, not for pleasure. To be a lesbian is to choose to be a sexual person and some Asian American parents are shocked and have a difficult time accepting this. Sexism allows male children greater freedom to express their sexuality and independence than female children.

The dialogue around sexuality is very new. Perhaps the first time that people of color convened nationally to discuss sexuality in their communities was in February 2001 when the Ford Foundation invited experts and activists from around the country to engage in a dialogue. Given that these issues have only recently moved from behind closed doors, there are no specific studies on Asian American women’s sexual rights and well-being. Hence, this report can only note the importance of this emerging issue for Asian American community and the need for resources to examine and investigate how sexuality is defined and the patterns of sexual behavior in different Asian American communities. This is critical for determining how views of sex and sexuality contribute to reproductive
health and social problems discussed in this and the following chapter on domes-
tic violence.

**Obstacles to Reproductive Freedom for Asian American Women**

**Government Policies to Control the Asian American Population**

Ever since there have been Asians in the United States, the government has created laws and policies to control the size and existence of Asian American populations. When Asians first arrived on US shores, Asian male indentured servants were prohibited from having families. The Page Law of 1875 was the first federal anti-Asian Exclusion Act aimed specifically at barring Chinese women from joining Chinese men working in the US. Anti-miscegenation laws and the Chinese Exclusion Act further prevented family formation and reproduction among Asians in the US. Similar policies were also applied to Filipinos. (See Chapter Nine on Hawai‘i.)

Today, anti-immigrant sentiments play out differently, but nonetheless aim to control the population of Asian and other immigrant communities of color. Groups such as the Carrying Capacity Network and the Federation of Americans for Immigration Reform, and segments of groups like Zero Population Growth and the Sierra Club, now use overpopulation and environmental reasons to argue for drastically reduced immigration quotas from countries that have been utilizing the “family reunification” application process. The 1986 Immigration Marriage Fraud Amendments (IMFA) (described more fully in Chapter Seven on domestic violence) made it more difficult for immigrant women to obtain lawful permanent residence status which is a prerequisite to citizenship. The IMFA is a legacy of the Page Law of 1875; its passage was in large part based on testimony in Congressional hearings about women from Asia allegedly entering into fraudulent marriages with US citizens in order to enter the US.¹

**Lingering Traditions of Male Preference**

First-generation Asian American women often experience reproductive oppression when their husbands and extended families put both overt and subtle pressure on them to bear a male child. It is widely known that unwanted girl babies are abandoned all over Asia every day and that women who bear only girl children are accorded less respect. In many cases, women are pressured into having more children than the family can economically support until a male heir is born.

¹ The 1996 welfare reform package also contained provisions affecting the reproductive rights of Asian American women. These lesser-known provisions of the welfare reform package are conservatives’ efforts to control the fertility of poor women of color. For example, the “family caps” or “child exclusion” policy allows states to withhold cash benefits to discourage women from having more children while on assistance. In addition, by providing monetary incentives, states are encouraged to reduce out-of-wedlock births.
The devaluation of girls and adult women until they bear male children has led to the practice of aborting female fetuses in certain Asian countries. In China, because of its one-child policy, women use ultrasound or amniocentesis to determine the gender of the fetus in order to abort female fetuses. Similar attitudes and practices can be found among some Asians who migrate. In an example from Canada, South Asian women activists waged a huge and successful fight to shut down private prenatal testing clinics that were set up to assist South Asian families in determining the sex of the fetus in order to abort female fetuses. In the US, a study of prenatal testing done at the University of California, San Francisco, found that Asian and white women undergo prenatal diagnosis for chromosomal disorders at a significantly higher rate than Latinas and African Americans. Experts speculate that the low use of prenatal testing by Latinas may be due to Catholic religious beliefs. African American women may avoid such tests due to historical experiences with sterilization abuse, eugenics politics, and the infamous Tuskegee Institute study that allowed African American men affected with venereal diseases to go untreated. In contrast, Chinese women had high utilization rates for prenatal testing, including amniocentesis. Experts speculate that the practices resulting from China’s one-child policy influence the acceptance and use of prenatal testing. The use of such reproductive technologies begs the following questions:

Should sex selection and abortion of female fetuses be a woman’s choice?

Is sex selection a form of reproductive repression rather than freedom of choice when women internalize sexist and patriarchal beliefs about the lesser value of girls or pressures are put on them to abort their less valued female fetuses?

These issues are not addressed by mainstream reproductive rights activists and are only beginning to be addressed by Asian American women’s groups.

Limited Choice of and Access to Reproductive and Sexual Health Care

1. Contraceptive Abuse

True reproductive “choice” means that Asian women are able to utilize family planning, fertility and abortion services in their languages, and have their needs met without fear of being denied access to or coerced into using one form of reproductive technology over another. There is anecdotal evidence that Asian women may be victims of contraceptive abuse. For example, it is widely known within the Asian community and Planned Parenthood clinics that Depo-Provera, a contraceptive injection given every three months, is the most popular contraception for Asian women. However, it is also a form of birth control that has many potential side effects. Each of these following questions about why the use of Depo-Provera is so widespread suggests an underlying injustice around the limited reproductive rights and choices low-income Asian women experience when they “choose” this form of birth control.
Is Depo-Provera popular because of the wide promotion and use of this form of family planning in Southeast Asian refugee camps and in those countries where it first appeared in the market?

Is there a greater need among Asian women for an invisible form of birth control to hide from one’s spouse/extended family?; or

Is Depo-Provera’s popularity because it is a convenient, low-maintenance method which requires less time and health education effort from overburdened health providers?

2. Abortion

Financially strapped nonprofit and public hospitals that provided abortion services are being merged into or bought by Catholic hospitals. Because of their religious doctrines, Catholic hospitals are eliminating access to abortions, to emergency contraception, and sterilization at their newly acquired hospitals. Sterilization is the most commonly used form of birth control for American women—28% of all women undergo contraceptive tubal ligation. This number leaps to 41% among poor women. Large numbers of low-income Asian American women without insurance who relied on the nonprofit or public hospitals are losing access to abortion and family planning services. There is also a growing strategy of anti-choice groups such as the Christian Coalition to recruit Asian community churches, especially those with immigrant or refugee memberships, to take on anti-gay and anti-choice political causes.

Language and cultural access is an issue for Asian American women. According to clinic providers, for the most part the Planned Parenthood clinics and other public family planning providers are aware of the need to provide language access for limited-English speaking women. However, such clinics are only equipped to handle early-term/first trimester abortions. Given the overall lack of providers that perform late-term abortions, it is usually the most isolated limited-English speaking women with the least access to family planning services or prenatal services who, in their third trimester, end up seeking but having even narrower opportunities to end unwanted pregnancies.

3. Medicaid Managed Care

The shift by Medicaid to managed care plans has interfered with the ability of low-income women to receive time sensitive services such as prenatal care, abortion, and contraception. Under managed care, services may be delayed when a primary

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4 In June 2001, the National Conference of Catholic Bishops declared that sterilization (tubal ligation and vasectomy) is “intrinsically evil” and voted 207 to 7 to prohibit sterilization from being performed in any Catholic-run hospital. The new policy affects all of the nation’s 1,140 Catholic health-care facilities, which treat 85 million patients annually. In California, Catholic hospitals are a major source of health care. Catholic Healthcare West is the single largest hospital operator in California, with over 12% of the state’s general care hospitals.
care provider is required to give prior authorization for visits to obstetricians and gynecologists. Allowing women to choose obstetricians and gynecologists for primary care is one solution but these doctors often cannot treat a woman for other illnesses. Many states allow self-referrals to obstetric and gynecological services but place limitations on the number or types of visits. The emphasis on care coordination between providers may conflict with the confidentiality concerns of women who go to a family planning provider (FPP) instead of their regular doctors because they may not want other family members to know. Basic information such as the right to go to an out-of-plan provider or even which FPPs are part of the plan is not being distributed.

For low-income women, many reproductive care services are not covered by Medicaid managed care (MMC) plans even though the state has authorized these services as a covered benefit. FPPs have had difficulties obtaining reimbursement for most costly contraceptives such as Depo-Provera and Norplant and sterilization. In one state, the managed care plans routinely ignore claims for reimbursement for STD diagnosis and treatment. FPPs, including community-based providers in Asian American communities, are experiencing growing financial difficulties when they treat women enrolled in managed care but are at best partially reimbursed. In addition, multilingual translation services are not being fully reimbursed.

4. Domination of Western Medical Practices

Many traditional maternal health practices that empower Asian women throughout the birth process are being denied Asian American women because they conflict with predominant Western medical practices. For instance, Hmong women will search far and wide for doctors who do not “cut” during the birthing process and allow them to squat during birth. The custom of saving the placenta after a birth for burial in a special site is not honored in today’s hospitals; they consider the placenta a “biohazard.” The common practice of offering ice chips and ice water during labor is antithetical to widespread Asian beliefs about the harm from exposure to coldness. For women who believe in these practices, the lack of support by the medical establishment means their birth experience and reproductive freedom are compromised.

5. Sexual Health Care

Health must also include sexual well-being, that is, the right to a satisfying and safe sex life, with healthy and pleasurable sex for both men and women. There needs to be a construction of sexuality that portrays women as equal sexual partners responsible for their well-being and health, and provision of information and services that enhance women’s capacities to safely negotiate their sexual encounters. The taboo in many societies and people’s association of shame, guilt, and secrecy in discussing sex hinders the development of this more healthy view of sexuality. Taboos around sexuality also create barriers to improving reproductive health by hindering discussion about the extent of HIV/AIDS transmission and by extension, the development of prevention strategies.
Cultural Acceptance of Teen Pregnancy

According to a recent California Wellness Foundation study, teen pregnancy in some Asian American sub-populations is on the rise. The highest teen birth rates in California are among Laotian girls (8.7%). According to the Women’s Association of Hmong and Lao in Minnesota, among Hmong girls between ages 15 to 19 in Twin Cities high schools, 50% have had children or become pregnant before they graduate. These pieces of data do not square with the August 2000 Centers for Disease Control (CDC) report that announced the lowest teen birth rates in 60 years for women ages 15 to 19: 4.96 percent for women of all ages and 2.28 percent for Asian women. The data was not disaggregated by ethnic group and as a result, the CDC report gives the public health community the impression that teen birth rates are very low among Asian girls. These misleading statistics have made it difficult to finance teen pregnancy prevention programs in the Southeast Asian communities where teen pregnancy rates are high.

Mainstream pregnancy prevention programs are based on the premise that teen pregnancy is a pathology. But counselors who work with girls in Southeast Asian communities with high teen birth rates find that it is not financial barriers, ignorance of birth control, lack of access to family planning services, or peer or boyfriend pressure to have sex that cause teen births. Rather, the high birth rates among certain Southeast Asian girls is the result of cultural traditions, such as among the Hmong and Mien, that encourage or pressure girls to marry at a young age and to have children in their teens. This is often seen as a rite of passage and a woman is not given respect and authority within her family and community until becoming a mother. For Cambodian teens, the primary reason for becoming a mother was to gain respect and authority within their families. However, some teenage girls are fighting against early marriages that often condemn them to a life of poverty and cut off their dreams to full personhood.

For example, programs such as the San Francisco-based Asian Women’s Shelter and Oakland-based Narika have assisted teenagers who have resisted forced arranged marriages by escaping from their families. Narika has an outreach program on forced arranged marriages, conducting workshops for teens as well as with community members and leaders to raise awareness about the impact of forced arranged marriages on teens. The Women’s Association of Hmong and Lao (WAHL) also has a teen pregnancy prevention program, which is described in Chapter Eight, Hmong Women in the US.

Teenage mothers face awesome challenges and poor life prospects. Children of teenage mothers are more likely than children of later child-bearers to have health and cognitive disadvantages and to be neglected or abused. Census data from the 1995 special tabulation indicates that 33% of single female heads of households are living in poverty, compared to 11% of single male heads of household and 7% of married households. Particularly with the elimination of welfare as an entitlement for single mothers with children, funding for teen pregnancy prevention programs is needed more than ever.
Environmental Toxins’ Impact on Healthy Birth Outcomes

Freedom to have healthy births also is linked to living and working in environments free of toxins. An emerging body of literature supports claims that past exposure to military bombs, Agent Orange (a powerful herbicide), and DDT (a long-banned pesticide in the US but used widely in Southeast Asia and in refugee camps during and after the Vietnam War) causes poor reproductive health outcomes among Southeast Asian women. Ironically, after escaping the war, because of their need to resettle in low-cost housing areas, many of these same women and their families now live in the shadows of the refineries and chemical manufacturing plants that once produced these toxins. Moreover, large numbers of Asian women work in high-tech manufacturing where they are more vulnerable than the general population to chemical and heavy metal exposures that lead to miscarriages or birth defects. (See Chapter Four: Other Low-Wage Workers.)

There are disproportionate levels of pollutants in these communities and little research has been conducted regarding the effect of these toxins. In part because of a fear of entering into discussions that require acknowledging that a fetus be given legal standing, mainstream reproductive rights activists have shied away from taking on issues relating to unhealthy workplaces and the links to women’s reproductive health.

An additional challenge in attaining environmental and reproductive justice for Asian women is the fact that scientific research is inconclusive as to causation, that is, whether the illnesses that Asian women are having today are a result of exposures that happened many years ago in their countries of origin. Their health status is also intertwined with the effects of the overall lack of health care and poverty in the US. In addition, most primary care providers are not trained in screening for environmental or occupational health diseases. Thus, many of the effects of these exposures are undetected and go untreated for many years and across generations.

The Organizations

Grass Roots Organizing

California-based Asians and Pacific Islanders for Reproductive Health (APIRH) believes that if women are to have true reproductive freedom, they must have the economic, social, and political power to make healthy decisions for themselves and their families at work, home and all other areas of their lives. Key strategies that APIRH employs include community organizing, leadership development, popular education, community building and participatory action research. Two campaigns waged by APIRH to protect the safety and reproductive health of API girls and women exemplify these strategies. For instance, in 1998, after an incident with a male teacher who sexually harassed several girls, Cambodian teenage girls in APIRH’s Health, Opportunities, Problem-Solving & Empowerment (HOPE) project in Long Beach successfully waged a two-year research and action campaign that resulted in a citywide taskforce on school safety and stronger anti-
harassment policies that are now enforced throughout the Long Beach School District. In early 2001, APIRH played a leadership role in stopping toxic dioxin emissions from a medical waste incinerator located in Oakland between Interstate 880 and Alameda. In this campaign, HOPE members increased the visibility of reproductive health issues related to the toxic emissions and within the grassroots environmental justice movement. APIRH members also recently published the first Reproductive Freedom Tour Guide which identifies toxic sites in Oakland that pose concern to the reproductive health of low-income API young women. Currently, APIRH is working with other organizations to increase the base of API women and girls involved in the reproductive rights movement.

Coalition Work
The Asian Pacific Environmental Network (APEN) has also worked with environmental groups and environmental justice organizations to counter the policy, public relations, and editorial campaigns that were being waged by anti-immigration population control groups posing as environmentalists. Whenever these groups lobbied or paid their way into speaker slots at environmental law and student conferences, APEN along with other immigrant rights and friends in the environmental movement worked to provide a counter perspective. These strategies successfully helped to expose the anti-immigrant, racist agenda behind these organizations.
Recommendations for Action

► Ensure that the voices of the vast majority of Asian Americans who are pro-choice are heard in order to counter inroads being made by social conservatives and Asian churches. The communities’ widespread support for a woman’s right to choose is important to provide an alternative message to young Asian American girls that motherhood is not their only path to respect.

► Break down the taboos to discussing sex in Asian American communities so that a more healthy view of sexuality can develop. Begin dialogues regarding Asian American women’s sexuality, rights, and needs. Examine how sexuality is defined and how patterns of sexual behavior hinder the ability of women to be equal sexual partners.

► End the abusive practices of sex selection and pressuring women to have more children than they want through work on transforming cultural norms. (For examples see descriptions in Chapter Seven: Domestic Violence and Chapter Eight: Hmong Women in the US.)

► Provide language services that allow women access to safe and legal abortions. Address issues in the Medicaid managed care system that delay or make it difficult for service providers to get reimbursed for using translators when providing care.

► Develop teen pregnancy prevention programs that address the specific community and cultural values Asian American girls encounter, i.e., by addressing the root causes that lead to teen births in low-income South Asian and Southeast Asian sub-populations.

► Integrate traditional Asian and Western sexual and reproductive health practices.

► Conduct research on the effects of toxins on the reproductive health of Asian American women.
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San Francisco-based Asian Women’s Shelter multi-lingual brochures. Language barriers often create insurmountable obstacles for Asian women seeking to escape abusive relationships.
Domestic Violence and Asian American Women

Prevalence of Domestic Violence Against Asian American Women

A woman is physically battered every nine seconds in the United States. One out of three women reports physical abuse at the hands of an intimate partner at least once in their lives. Every year, an estimated 1.5 to 3.9 million women are physically abused by their partners. In all intimate relationships, both heterosexual and lesbian, domestic violence occurs 20 to 25% of the time. Domestic violence occurs in every community regardless of race, ethnicity, class, or sexual orientation. Yet, domestic violence is an underreported crime.

For Asian American communities, the paucity of data makes it even more difficult to estimate the prevalence of partner abuse. This report extrapolates from the few specific studies that do exist. The studies indicate that domestic violence is at least as prevalent in the Asian American population as the general American population and may be higher in certain Asian subgroups. For example, in Chicago, a survey of 150 Korean women found that 60% reported physical abuse. The data also suggests that Asian American women may be at higher risk for fatalities related to domestic violence than women in the general population.

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1. In Boston, a survey of men and women from the Cambodian, Chinese, Korean, South Asian, and Vietnamese communities found that 38% of respondents reported knowing a woman who had been physically abused or injured by her partner. A focus group with Southeast Asian Chinese estimated that 20-30% of Chinese husbands hit their wives. A Northern California survey found that 25% of Filipinas had experienced domestic violence in the Philippines, the US, or both.

2. Research indicates a higher incidence of domestic violence among military families. Advocates in Hawai’i, which has a large military base population, have noticed that Asian immigrant women married to US servicemen have fewer financial and social resources, suffer from prejudices against interracial marriages, and are especially vulnerable to abuse. As described in Chapter Two of this report, domestic violence against women in servile marriages may be higher than in the general population.
example, Santa Clara County in California is comprised of 17.5% Asians. However, between 1994 and 1997, almost one-third of the 51 deaths related to domestic violence occurred among Asian women, the highest of any ethnic group. In Massachusetts, Asians constituted three percent of the population. However, in 1997, 18% of Massachusetts residents killed as a result of domestic violence were Asian.

**Safety Needs Neglected**

What accounts for the higher fatality rates related to domestic violence for Asian American women? Why are the safety needs of Asian American women not being met by the systems that exist? To date, there has been no research to answer these questions. We do know that Asian American women in abusive relationships face different challenges than white women who speak English and are American citizens, for whom most shelter and outreach programs are designed. Asian American women, the majority of whom are foreign-born immigrants with different languages and cultures, experience numerous institutional barriers to seeking safety. The categories of safety-related challenges particular to Asian American women—ill-equipped shelter programs, language barriers, laws that discriminate against immigrants, cultural values that lead to violent behavior, and barriers to safety for Asian American lesbians—are described below.

**Lack of Culturally and Linguistically Accessible Services**

1. **Limited and Inadequate Shelter Space**

Shelter space in general is limited, but those with the capacity to serve Asian women’s language needs and who make their facilities culturally supportive for an immigrant women are in extremely short supply. In Massachusetts, out of 35 women’s shelters, only two have Asians on staff. Some shelters do not accept non-English speaking women at all. The Asian Women’s Shelter (AWS) in San Francisco has the capacity to help non-English-speakers but is forced to turn away 600 individuals each year. This number represents 75% of the women who contact the clinic. Moreover, mainstream women’s shelters are not designed for women with more than one or two kids. Hmong women in the St. Paul/Minneapolis area

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Mainstream shelters are designed in dormitory styles with congregated dining that is alienating to Asian women used to cooking their own foods, feeding their own children, and keeping their children with them most of the time. Additionally, Asian women have a difficult time following mainstream shelters’ programs and procedures, such as participating in shelter chores selection, because of their inability to communicate with staff and other residents. They also report feeling very lost when they were forbidden to have any contacts with their mothers who have traditionally been their source of support.
who have larger than average families were not able to make use of most shelters until Asian Women United designed a shelter to accommodate larger families. Asian Health Services, an Oakland community health clinic, believes that these institutional barriers are so formidable that only two out of 10 Asian American women patients who experience abuse actually find refuge in a shelter. This ratio is low compared to the mainstream population.

2. Lack of Accurate Interpretation

Police who respond to domestic violence calls are seldom bilingual and often do not bring interpreters with them. They seek to communicate with someone who speaks English and that is often the husband. As a result, in many cases the Asian woman’s story goes unheard. In some instances, children, family, and friends have inappropriately been asked to interpret. When those close to the situation have judgmental attitudes and/or fear retaliation by the abuser, they often engage in victim-blaming and are unable to accurately or completely convey the women’s perspective. An example of the tragic results of inadequate translation occurred in the state of Washington. A battered woman’s estranged husband threatened her with a gun, with the intention to kill her. Because of the lack of adequate translation, the abuser was never prosecuted because the police did not obtain statements from the victim and two witnesses with sufficient detail for the prosecutor to proceed. A year after the incident, the abuser killed his wife.

In addition, many Asian women come from countries where police and other institutions do not respond to domestic disputes, which contributes to the lack of reporting. Moreover, the US criminal justice system is viewed as discriminatory toward immigrants, people of color, and other minorities and this also creates negative perceptions that prevent women from seeking police protection when necessary.

3. Lack of Services for Batterers

In most parts of the US, linguistically and culturally accessible intervention programs for batterers from the Asian community do not exist. Court sentences for batterers that require mandatory participation in such programs are rendered meaningless if no such program exists in the batterers native tongue.

4 Court sentences that involve serving time and mandatory participation in intervention programs are often insufficient to convey the gravity of the crime to the batterer. In addition, there needs to be culturally relevant sentencing. For example, in the Hmong community, when clan elders resolve domestic violence cases through the mediation process, they may order the husband to hire a shaman for a soul-calling ceremony to heal the wife. When a wife has been abused, the soul leaves her body because it has been mistreated. When the soul is not well, the body is not well. In a soul-calling ceremony, a shaman calls the soul back to the body.
Laws That Traps Asian Women in Violent Domestic Situations

1. Anti-Immigrant Legislation

Anti-immigration legislation poses the most difficult barrier to Asian immigrant women seeking safety. Prior to 1986, a US citizen husband could petition for and obtain lawful permanent residence status (a green card) for his immigrant wife immediately after marriage. However, in 1986 Congress enacted the Immigration Marriage Fraud Amendments (IMFA) that created a new conditional residence status requiring that an immigrant spouse must stay married to a citizen spouse for two years. At the end of two years, the partners must file a joint application to adjust the conditional status to permanent status. As a result, some immigrant women were trapped in violent domestic situations, unable to leave out of fear that their husbands would become unwilling to cooperate in jointly filing the application, thereby rendering them undocumented and thus subject to deportation at the end of the two years.

In 1990, Congress enacted the Battered Spouse Waiver to remedy the unintended consequences of the 1986 law after powerful documentation of the physical, emotional, and economic abuses suffered by battered immigrant women was brought to light. The Battered Spouse Waiver allowed a battered immigrant woman to leave her US citizen husband and “self-petition” for lawful permanent residence without the cooperation of her husband. In 1994, Congress enacted the Violence Against Women Act (VAWA) to provide broader protections to immigrant women, allowing any woman, documented or undocumented, married to a citizen or green card holder to self-petition if she is a victim of domestic violence. When VAWA was reauthorized by Congress in 2000, other barriers to the self-petition process were removed. These included allowing divorced spouses to self-petition, allowing abused wives living abroad to self-petition if married to employees of the government or US military, and eliminating the requirement to show extreme hardship to her or her children if deported to her home country.

2. Limitations of the Battered Spouse Waiver and VAWA

The Battered Spouse Waiver and VAWA have been on the books for twelve to eight years respectively. However, because of lack of education and outreach, many monolingual women are unaware of these legal protections. Many women are under the impression that their batterers have complete control over their immi-

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5 VAWA 2000’s other provisions allow self-petitioning by women whose abuser husbands die or lose their immigration status or whose husbands have committed bigamy. In addition, VAWA 2000 also created a new visa, the U visa, for women not covered by VAWA, such as battered wives of men holding temporary worker visas or student visas and victims of sexual and other crimes, such as rape and torture. However, it is more difficult to obtain relief through the U visa than through VAWAs self-petitioning process because the woman must show substantial physical or emotional abuse.
migration status and continue to live in dangerous and violent domestic situations. In addition, there are not enough attorneys trained in immigration law, family law, and domestic violence law to deal with the most complicated VAWA cases, especially those involving undocumented women. Even when a woman self-petitions, she may not get the relief she seeks.

An attorney from the Asian Law Caucus in San Francisco found that Asian immigrant women have difficulty meeting the documentation requirements for self-petitioning. For example, in order to self-petition for permanent residence status after leaving an abusive husband, immigrant woman must document the abuse through either police reports or protective orders, record of time spent at a shelter, or affidavits from friends. The extreme isolation of many Asian immigrant women, their lack of awareness of the availability of shelter programs or police protection, and the language barriers to obtaining assistance from them, make it difficult for them to use these channels to document the abuse. In addition, because the crime of domestic violence is a deportable offense, some Asian immigrant women hesitate to report their batterers to law enforcement. These women often must use only their own declarations and rely on the discretion of INS officers. But an advocate who tracks VAWA cases nationally notes that the INS has a great deal of discretion in hearing a case, and even if the woman’s declaration is legally sufficient, many INS officers in local district offices are not sympathetic to the plight of battered immigrant women.

3. Restrictions Created by Welfare Reform

Welfare reform has resulted in serious financial barriers to Asian immigrant women seeking safety. Recognizing that welfare programs serve as an essential bridge to safety for women fleeing domestic abuse, Congress created exceptions for battered immigrant women. For example, a battered immigrant woman, even if she is undocumented, is eligible for public benefits when she has a pending VAWA or family sponsored petition. Battered women are also exempted from the “sponsor deeming” requirements. Congress also created the Family Violence Option (FVO), which allows states to exempt a battered woman from TANF work requirements if meeting these requirements would make it more difficult for the woman to escape an abusive situation. FVO also permits the clock on the five-year lifetime cap to stop running until the woman is safe. Under FVO, a state can waive the paternity establishment and child support requirements. However, the widespread, erroneous impressions among both caseworkers and battered women themselves that “immigrants aren’t entitled to any benefits anymore” have kept battered women from applying and caseworkers from accepting applications. There is anecdotal evidence that caseworkers ignorant of FVO provisions have sanctioned battered women for not complying with job search and work requirements, and thus reducing or terminating their benefits. In addition and as described in Chapter One of this report, fear of mandatory reporting to INS and
fear of becoming a deportable public charge has also kept eligible Asian immigrants from applying for public benefits.

Without a safety net to keep them from falling into dire circumstances if they leave the batterer, women remain in dangerous and violent situations. In a report by the Family Violence Prevention Fund that chronicles the effects of welfare reform, an advocate from Massachusetts relays:

“Many women are afraid to apply for benefits because of the public charge issue. We’ve heard of cases where someone received benefits only briefly—just for the time it took to leave a dangerous relationship—and was denied legal permanent residency by the INS and put into deportation proceedings. To many women, it just doesn’t seem worth it.”

Welfare reform has also resulted in shelters mistakenly believing that it is unlawful to provide services to undocumented women and thus increasingly denying services to battered immigrant women. In fact, emergency medical care and shelters continue to be available to everyone, regardless of immigration status. Some shelters also believe that their funding streams preclude them from serving immigrant women when in fact federal domestic violence funding carries no such restrictions. Given the limited number of beds, some shelters have chosen to provide services only where there is a guarantee of public benefits reimbursement and to deny these services to immigrant women whose eligibility for public benefits are in doubt. One Asian women’s shelter director suspects that instead of fund-raising to increase language capacity and transitional programs specifically needed by immigrant women, these shelters justify discriminating against Asian immigrant women by simply stating that their programs cannot serve their needs.

Cultural Norms and Values That Lead to Violent Behavior

1. Acceptance of Violence Against Women

A survey conducted by the Boston Asian Task Force revealed that 20-25% of the respondents from the Cambodian, Chinese, Korean, South Asian, and Vietnamese communities surveyed thought that violence against a woman was justifiable in certain domestic disputes. The report also found that a higher number of Asian men than women condone family violence. Among Korean respondents, 29%

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6 INS’s May 1999 guidelines state that use of non-cash benefits such as Medicaid and food stamps does not make one a public charge. VAWA 2000 barred the INS from finding a woman a public charge based on her use of non-cash benefits that she is legally qualified to use.

(the highest percentage among the five ethnic groups surveyed) felt that a battered woman should not tell anyone. In general, Cambodian and Vietnamese respondents believe that a battered woman should not leave or divorce her husband. South Asian respondents felt that the woman in marriage becomes her husband’s property and thus she cannot turn to her family and/or parents to ask them to intervene. Older Chinese respondents were more tolerant of the use of violence in certain situations, and younger Chinese were less likely to see leaving and divorce as viable options for battered women. Response patterns were similar between the foreign-born and US-born. Moreover, these attitudes permeate all sectors of a community, including those who are supposed to protect battered women. One legal advocate who represents battered women in Hawai’i was dismayed to hear female interpreters at an immigrant social service agency siding with a particularly violent batterer on the grounds that his estranged wife was pregnant by another man.

In the home countries of many Asian women, extended families often exert collective pressure to prevent abuse of wives. However, migration to the US broke up extended families and changed social practices to the detriment of women who often rank lowest in the family structure. In some communities this has resulted in the perversion of extended families from protector to perpetrator. NARIKA, a South Asian domestic violence resource center in Berkeley, has reported that there are cases where entire families, extended and joint, get involved in abusing a woman, with some members holding her down while others do the hitting. Therefore, conventional legal restraints, such as protective orders against the lone male abuser, are of limited use—when there are multiple perpetrators—including in-laws and other women in the family.

2. Cultural Emphasis on Preserving Family

The notion of having to preserve the family and “save face” often makes Asian women more hesitant to leave and break up the family. Women in abusive marriages are frequently blamed for not behaving or told to tolerate the abuse in order to save face for the entire family or clan. Because certain Asian communities are small and close-knit, victim advocates from the communities often face harassment and threats from the abuser and the family for helping women leave the relationship and upsetting the social order. Also, this pronounced belief in the sanctity of the family even in the face of violent victimization, combined with a cultural antipathy toward divorce, makes it more difficult for white shelter workers and advocates to provide support and understanding to Asian women. As the Boston-based Asian Task Force against Domestic Violence notes, “One of the biggest and most important challenges to addressing family violence within Asian communities is reconciling the differences between Western ideals of independence and individualism with Asian ideals of interdependence and group harmony.”

In addition, the traditional Asian gender roles of male providers and female homemakers are often disrupted by the American economy that requires both partners to work outside the home. As described in Chapter Eight, while this has been liberating for some Asian women, women’s economic independence is seen
as a threat to social orders that privilege men and has, in some communities, contributed to a rise in domestic violence.

3. Transforming Culture
Culture is not static, fixed, and unchangeable. Norms, values, and beliefs are constructed in the interchanges between and among people within cultural groups and are constantly evolving. As Asian immigrants, it can be threatening in light of changes forced by relocating to the United States, to think that cultures must also be changed from within. Who will be then? Will we disappear as a distinct social group? There are aspects of Asian cultures that are worthy of saving and passing on. There are others that must be transformed in order to honor basic human rights—in this case, the right of women to be free from domestic violence. In Asian American communities for example, the emphasis on preservation of the family is worthy but must be transformed so that it is achieved not by pressuring women into staying in violent situations, but by changing the cultural and social cues that sanction men’s use of violence to control women. Thus, a number of Asian women shelters and outreach groups frame their organizing work as “work to perpetuate the core values of each Asian community that are positive and to eliminate those parts that are no longer useful or healthy.”

Battered Queer Asian American Women*

Domestic violence is equally prevalent in queer Asian women’s relationships. However, there is little research and data on same-gender relationship violence and what does exist tends to underreport the incidents involving queer Asian women. There are several causes for this underreporting. In 1998 national and local focus groups held by the Family Violence Prevention Fund and the San Francisco-based Asian Women’s Shelter, queer Asian women divulged that they did

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The term queer is controversial within the lesbian/gay/bisexual/transgender (LGBT) community. However, many LGBTs have reclaimed “queer” as a positive term. This report uses it to encompass the diversity of the LGBT community.

In both national and local focus groups of queer Asian women held by the Family Violence Prevention Fund and the San Francisco based Asian Women’s Shelter, survivors expressed discomfort with the label of domestic violence and preferred the term relationship violence to describe violence in queer relationships.

In October 2000, the National Coalition of Anti-Violence Programs issued a report that there were over 3,000 cases of LGBT domestic violence (47% female, 50% male survivors) throughout the US, with 1,356 cases in Los Angeles, 741 in San Francisco, and 510 in New York. For San Francisco, 75% of the cases involved whites and 25% people of color, including Asian Americans.
not feel safe reporting relationship violence to the police or authorities. They feared that disclosing oneself as a lesbian being abused by another lesbian may subject them to further abuse at hands of the police. Many were hesitant to access service providers due to sexism, racism, homophobia, language and cultural barriers, and fear of disbelief among service providers. Queer Asian women often do not feel safe even speaking to friends. They may also hesitate to report their abusive partner because they do not want to further isolate a woman who is already marginalized by society or subject her to a homophobic, racist legal system and its consequences.

Even when abused queer Asian women seek help, they find that the vast majority of domestic violence agencies are not able to meet their needs. One factor is that the domestic violence movement does not acknowledge same gender relationship violence. The mainstream domestic violence movement understands violence as a patriarchal phenomenon, deriving from sexism, with men using violence to control women. Within the queer women’s community, it is not always the more masculine, or butch, woman that is the abuser. Women can be survivors and batterers. The typical response of mainstream domestic violence agencies’ is to ostracize the batterer. But banishing the abuser from a small, marginalized queer Asian community is akin to cutting her off from her only family members. Agencies do not have programs that assist both the batterer and survivor. The San Francisco shelter is the only program with a Queer Asian Women Services project.

The Organizations

The Shelter Programs

Since the first shelter program for Asian American women and children started in Los Angeles in 1981, six other Asian women’s shelters have emerged across the country along with over a dozen outreach, education and hotline programs for Asian women. The majority of these were started by and for South Asian women. These include organizations such as Apna Gar (“our home” in Hindi-Urdu), Manavi (“primal woman” in Sanskrit), the Nav Nirmaan Foundation, Inc., the New York Asian Women’s Center, Raksha (“protection” in several languages), Pragati (“progress”) and Sakhi (“women’s friend”).

The handful of shelters that are available cannot meet the needs of Asian American women, especially limited-English speaking women, in their regions.
let alone the country. All these groups and shelters conduct some form of community education and outreach as part of their prevention activities to address the root causes of domestic violence. Shelters have conducted local advocacy, such as pressuring police departments to hire interpreters or working with them on protocols on handling domestic violence calls in Asian communities. Not until 1997 was the first large national pan-Asian conference convened in California that brought together 400 service providers and activists from across the country. Since then, other conferences have been held, such as one for Koreans in Los Angeles, South Asians in New York, and a pan-Asian conference in Ohio. With such limited capacity, locally based shelters and programs have relied on coalitions such as the National Network on Behalf of Battered Immigrant Women to conduct the statewide and nationally advocacy needed to address the unique challenges Asian women face, when and if those challenges dovetail with the agenda of these broader coalitions.  

Coalition Work

In 2000, as a means to address the lack of a national Asian American battered women’s advocacy organization, the San Francisco-based Asian Women’s Shelter, the Asian & Pacific Islander American Health Forum, the Family Violence Prevention Fund, and the National Resource Center on Domestic Violence, launched the *Asian and Pacific Islander Domestic Violence Institute (APIDVI)*. The mission of APIDVI is to advocate for policy changes and increased ethnicity specific data collection, facilitate the sharing of service models for battered Asian women and children, and promote national discussions on differing Asian community perceptions of domestic violence, community responses to the problem and the intersecting cultural values. Since the formation of APIDVI, all the various Asian women’s shelters and domestic violence programs have become members. Based on evidence of higher fatality rates among battered Asian women, its first research project is a fatality review of deaths of Asian and Pacific Islander women in major urban centers like Chicago, Santa Clara, San Francisco, and Boston. Its first advocacy project will focus on getting police departments to disaggregate fatality data by ethnicity because most departments simply put Asians under the “Other” category after “White”, “Black” and “Hispanic.” The APIDVI advocacy will focus on two areas: Welfare Reform and Cultural Competency as they relate to domestic violence. This work will be conducted by working groups consisting of its member organizations and coordinated by APIDVI staff. Initial funding came from the US Department of Health and Human Services.

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13 The National Network is made up of three groups, the Family Violence Prevention Fund, the Immigrant Women Program of NOW Legal Defense Fund (formerly housed at AYUDA, Inc.), and the National Immigration Project of the National Lawyer’s Guild.
Transformative Initiatives

An example of work to transform local community attitudes on domestic violence in the Korean community is the SHIMTUH project—a joint project between the Asian Women’s Shelter in San Francisco and the Korean Community Center of the East Bay. SHIMTUH has direct service, outreach, and organizing components. It reaches out to the social networks, structures, and institutions in the Korean community to transform cultural norms. Through cultural events, drumming, singing, working with the Korean press, and outreach to indigenous Korean religious institutions, SHIMTUH engages in public dialogue with religious leaders and others to influence more and more spheres in the community. Another example is the Family Violence Prevention Fund’s reframing of the concept of “hiya” or shame in the Filipino community. In a poster campaign, the FVPF introduced the concept of “nakakahiya”—a woman should not feel ashamed for having bruises and being beaten, and the community should be ashamed for not helping her.

One example of work among immigrant men is the Tapestri Men’s Group, a project of the Refugee’s Women’s Network, Inc. in Atlanta, Georgia. Tapestri’s philosophy is twofold. First, it believes that cultural norms are not immutable and can evolve. Second, it views the violence of men not as an individual pathology amenable to counseling or therapeutic intervention in one-on-one sessions, but rather as a social malaise where a man has learned through modeling at home and in society that the use of violence against women is an accepted way of resolving differences. Thus, Tapestri does not provide anger management because it views men’s violence against women not as an angry man out of control, but as a man who chooses to be violent to control his partner.

In the men’s groups where Asian, Latino, Caribbean, African, and East European men have participated, the transformative and re-education work takes place not by experts imparting information top down to batterers, but through a process where men themselves critically explore, in an atmosphere of mutual respect and horizontal relationships, the antecedents, dynamics, and effects of their violent behaviors, values, and expectations. In the process, men’s views of themselves and their roles as partners and fathers are transformed, gender identities are de-constructed and re-constructed, and the men become agents of change in their communities. The Tapestri Men’s Group and others like it were created when domestic violence survivors, who did not want to leave their marriages, requested intervention programs for their husbands. As the men participate in the 24-week program, women advocates from Tapestri work with their wives to provide support, ensure that they are not in danger, and monitor the progress being made by the men.
Recommendations for Action

- Address racism, homophobia, and xenophobia within social service and law enforcement agencies that deal with battered Asian American women.

- Increase language access to all services needed by battered women through hiring of interpreters and bilingual staff and creating culturally competent services in police departments, shelters, and counseling and court intervention programs for men.

- Eliminate barriers to public benefits such as the chilling effects of mandatory reporting to the INS, fear of being designated a public charge, and hostile caseworkers.

- Train eligibility caseworkers on the exceptions for battered women, the Family Violence Option in TANF, and the myriad categories of immigrants to correct the widespread erroneous perception that immigrants are no longer eligible for benefits.

- Educate both government agencies and social service providers and immigrant women to understand and utilize the protective provisions in VAWA.

- Repeal the conditional residence status that has trapped women in violent homes and which the passage of VAWA simply will not fix.

- Address and transform cultural norms that accept violence against women as a means of discipline or control. This includes creating programs for both female and male Asian American batterers.

- Conduct studies on relationship violence in queer Asian women commun-ities. Redefine domestic violence theories to include same gender relationship violence.
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Part 3
Special Focus
Ka Ying Yang, a Hmong refugee who arrived from Laos in 1976, is the Executive Director of the Southeast Asia Resource Action Center (SEARAC), a national membership network of mutual assistance associations.
Hmong Women in the US: Changing a Patriarchal Culture

Introduction

The story of Hmong women in America is a story of both crushing burden and an indefatigable will to survive and overcome barriers. Many Hmong women marry and have children at young ages, work full-time jobs, and cope with raising 10 to 14 kids. Sometimes they are the sole breadwinners of the family. It is the strength of Hmong culture and the women themselves that have made survival possible. Many of the older women who grew up in Laos worked beside their men in the fields harvesting crops, clearing brush, feeding the pigs, cooking, and raising the children. A 56-year-old Hmong grandmother says proudly, “I delivered all 12 of my babies by myself and never let their heads touch the ground.”

In America, Hmong women quickly realized they had freedoms that didn’t exist back in Laos. They were free to marry whomever they choose, free to pursue jobs or an education, and free to get out of a bad or loveless marriage. Denied educational opportunities in Laos, Hmong women of all socioeconomic classes have seized educational opportunities and are often more likely to get and hold a job than their male counterparts. The first Hmong Ph.D. in anthropology in the US was a woman. The majority of Hmong lawyers in Minnesota are women and collectively they started the first and only Hmong Bar Association in the country.

However, some women found themselves in situations where the burdens were too much to bear. In June 1998, a 13-year-old Hmong girl, Lee Vang of Wisconsin, killed the infant she had just given birth to; this infant was the product of rape by her even younger male cousin. Lee Vang’s mother was single and relied on the assailant’s family for financial support. The assailant came and went from their house all the while sexually assaulting Lee Vang. Mother and daughter could not defend themselves and had no one to protect them. In the aftermath of Lee Vang’s arrest and release, Hmong elders shunned and isolated her for bringing shame onto the community. In September 1998, 24-year-old Khoua Her of Minnesota killed her six children and attempted suicide. Khoua Her was raped, at age 12, by the man whom she was forced to marry, and had her first child at age
13 in Laos, and had six children by the time she was 19. On July 17, 2001, 26-year-old Mee Xiong, was arrested for killing two of her six children and there is speculation that she survived a suicide attempt.

Some Hmong men, angered by what they feel are drastic and rapid changes and advances made by Hmong women, have reacted with violence. Domestic violence has increased to alarming proportions, sometimes with fatal results. In Khoua Her’s case, police had been called 16 times to her apartment over a one-year period in response to reports of domestic disturbances. The same month Khoua Her killed her children, Bao Lor, age 28 and mother of seven children, disappeared the day before her abusive, estranged husband shot and killed himself. Bao Lor’s bones were found two years later.

In the uproar following the murders, the Minnesota Hmong community was befuddled and in denial over the deep gender issues within their community. Voices within the community that wanted to speak out against the epidemic of domestic violence and sexual assaults against Hmong women were discredited as being too radically feminist and silenced. Male clan elders responded by shifting the focus from the community’s shock and anger to the white racist attacks on the Hmong community in the mainstream media and to the “monster” mothers who did the unthinkable. However, more murders followed. At the end of 2000, four more Hmong women in Minnesota were killed by their husbands. Two of these men committed suicide after killing their wives. In total, 25 children lost one or both parents.

In California, while the cases are fewer and received no publicity, Hmong husbands also have attempted to kill their wives. In the Sacramento area, Mai Thao was widowed in November 1999 when her husband killed their five youngest children and then killed himself. For years the couple had been fighting over finances and he had threatened to kill his wife and his children before. Mai Thao is alive today because she was not home when the killings happened. In 2000, another Hmong man attempted to kill his wife by chopping her with a knife. This couple had immigrated from camps in Thailand six years before and had also argued over money. Both families were on public assistance. In California, as in Minnesota, the alarming rise in domestic violence is a topic of public discussion in the Hmong community. On radio talk shows, domestic violence is a constant topic. However, the bottom line is that Hmong men blame women for breaking up families. The main message from the community is that families must be preserved and that women should behave. One listener, in answer to the question posed by a talk show host, “What would you do about inequalities between men and women?” responded, “We’ll deal with these women with our fists and guns.”

Hmong women activists have been grappling with their desire to remain loyal to their culture and traditions and their anger and dismay at the deaths and killings of women and children. In Laos, where the US Hmong immigrated from, domestic violence and suicide/homicides were not as prevalent. What is behind the crisis? Why are Hmong so desperate that mothers believe that death is the only escape and fathers decide to kill their families and themselves? To begin looking for answers, this report provides a brief history of the Hmong, their migration to the
US, and some information on Hmong culture. It then looks at the changed eco-

nomic status of some Hmong women and the violent backlash by men who feel 
they have “lost control” of their women. This chapter details some of the efforts 
Hmong women have made to respond, provides description of some of the groups 
working on these issues, and offers suggestions on the advocacy and efforts that are 
needed to end the oppression and high rate of violent deaths among Hmong 
women in the US.

History and Migration to the US

The Hmong lived in China for almost two thousand years. In the 19th century,
seeking to escape persecution, they crossed the Chinese border into Vietnam, Laos, 
Thailand, and Burma. In order to remain free and independent, the Hmong chose 
to isolate themselves in the remote, unsettled high mountains of these countries. 
Today, five million Hmong remain in China while another half million live scat-
tered around the mountains of Southeast Asia. In the highlands of Laos, the vast 
majority of Hmong lived in small rural villages and practiced subsistence, slash 
and burn agriculture. The Hmong were drawn into the mainstream during the 
war of liberation from French and American rule. Beginning in the 1960’s, the 
Hmong were recruited as part of the US Central Intelligence Agencies’ Secret Army 
in its war against the North Vietnamese and Pathet Lao. Farmers became soldiers 
and in the process the Hmong lost one-third of their people. When the US pulled 
out of Southeast Asia, the Pathet Lao announced its intention of exterminating the 
Hmong. So began the most difficult escape and migration of the Hmong, this time 
to the US, beginning in 1975.

Current estimates place the US Hmong population at 250,000, with the 
majority living in Sacramento and Fresno areas of California (70,000), the Twin 
Cities area of Minnesota (60,000 to 70,000) and Wisconsin (50,000). The largest 
urban concentration is in the Twin Cities area. Whereas in past migrations, the 
Hmong could start a new life, free, independent and isolated from the mainstream, 
this was not possible in the US and the Hmong found adjusting particularly diffi-
cult. Close to 25% of the Hmong who migrated to the US lived in refugee camps 
in Thailand. Few were literate when they arrived. The men’s occupations as farm-
ers and soldiers and women’s in the home and in the fields did not easily translate 
into jobs in the US. In Minnesota, many Hmong families still remain isolated in
urban ghettos and dependent on public welfare although some successful Hmong families have followed the white exodus to wealthier suburbs. In California, the Hmong live in the more rural areas of the state’s Central Valley where jobs are few. Overall, the Hmong live in more dire circumstances than most Asian Americans. While poverty rates among all Asian Americans is 14%; it is 66% for the Hmong. While 56% of Asian Americans aged five and older do not speak English well and 35% live in linguistically isolated households, for the Hmong these rates are 78% and 61% respectively.

The Family and Marriage

Nine fireplaces are not as bright as the sun.
Nine daughters are not worth as much as one son.
—Hmong proverb

The Hmong have a clan system that is centuries old. There are 18 major Hmong clans (with 18 surnames) and members are related by blood. Greater value is placed on the clan and family than on the individual. There is great concern about individual actions and how these may affect the reputations of the family and the clan. Hmong culture is highly patriarchal. As the above proverb reveals, Hmong women were and are considered far less valuable than men. A good temper, work skills, obedience to husband and parents were the characteristics most valued in young women. Men controlled decisions affecting the lives of all family members. If a man wanted 10 children, his wife would have little say.

Traditionally, the natural state of a mature Hmong is as a part of a married couple with children. Until a young Hmong marries and produces offspring, he or she is not considered an adult. Hmong usually marry for the first time in adolescence. In Laos, girls were married starting at age 13 and in the US, they marry at age 15 or 16. Boys marry later, around age 18. Married Hmong women live with the husband’s family until they have children and are able to support themselves. Most Hmong believe love should be present in a marriage and young adults should choose their marriage partners. But ritual and real kidnappings of an unwilling bride are part of Hmong traditions. As a refugee woman in Sacramento related:

In 1980, when she was 13 years old and a sixth-grader living in Utah, a 22-year-old friend of her stepbrother’s kidnapped her and declared that he was going to marry her. Her mother could do nothing because, while the man did not touch her, she was kept in his home for three days. According to Hmong tradition, after passage of three days spent with a man in his home, a woman must marry him as long as he could pay the bride price. She was bought for $1,500. They had six children in rapid succession.²

In this way, a woman could be forced to marry any man who wants her or whomever the elders chose. While kidnapping a bride has all but ended in the US, arranged marriages are still prevalent and most husbands are still expected to pay a bride price, from $3,000 to $4,000 in Minnesota and in California from $6,000 to as high as $10,000. Some in the community view the bride price as mostly symbolic and a relic they brought with them to America. Some view the bride price as the high regard that families place on a daughter or future daughter-in-law and as a protection against abuse and divorce. Husbands are obligated to return the bride price when they send their wives back and must pay penalties for abuses. But the woman kidnapped in Utah says, “Why did you want to sell your daughter like an animal? Every time you have a fight with your husband or your in-laws... they remind you how much they paid for you.”

In the case of rape, a Hmong woman or girl still may be forced into marriage. When a rape occurs in the Hmong community it is considered not just a violation of the woman but also a shaming of the family. The assailant is expected to make a public apology and his family to pay restitution in the amount from $2,000 to $3,000 to the woman’s family in lieu of a bride price and as a way of re-establishing peace and balance between the two families. Sometimes, the victim’s family insists that the assailant marry the daughter because her family and community view her as tainted and no other Hmong man would want to marry her. By marrying her off to the assailant, the assailant’s clan must take responsibility for the now even more devalued daughter. While the victim’s parents may love her and feel the injustice of the situation, often, reinstating the family’s reputation is more important than the individual in such a situation.

The Hmong marriage process involves very complex negotiations to bind not just the woman and man together, but also the extended families. An intermediary is asked to broker the marriage. Marriage negotiations can bring up animosities that go back generations. Debts from generations back must be paid to make amends for all past wrongdoings before the couple can wed. The groom’s family pays a bride price to the bride’s family. In the view of the community, a bride’s body and soul belong to the husband’s extended family. By tradition, whomever a woman’s body and soul “belong” to is responsible for taking care of her at the point of her death or her child’s birth. She is no longer part of her birth family. As one father explained to his daughter on her wedding day:

*Your mother is not your real mother. You’ve found your real mother now. You only borrowed this mother’s womb. When you go places, you will have to call us “them.”*

The Hmong tradition does not have a place for divorce. The community disapproves and both extended families are shamed for not being able to intercede

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and prevent it. When divorces are nonetheless inevitable, a court-ordered divorce is insufficient to dissolve that connection. The couple must be properly divorced through the traditional method of mediation by the two extended families and an agreement by both that the divorce should happen. Divorce is the marriage process in reverse, undoing the family ties, including repaying the bride price.

Polygamy is also part of Hmong tradition. In Laos, many Hmong men died fighting in the wars and their widows were expected to marry their husbands’ younger brothers. Polygamy was not as common before the wars, but as male deaths increased and incomes increased for some men (often from payments for service to the CIA), the practice of buying younger wives became more prevalent. In some cases, divorced and widowed women became second wives in order to protect themselves from male in-laws who pressured them for sex. Divorcees and widows are no longer virgins and some Hmong men consider them fair game for sexual pursuit. Economic realities, such as women’s lack of income and inability to raise orphaned children, also contributed to the rise in polygamy.

Traditionally, the number of children a couple was able to raise afforded them higher status in their villages. Subsistence farmers, in the face of high infant mortality rates, required large families to provide labor in the fields. In the US, many Hmong continue the tradition of large families. Many have between eight to 12 children, all of whom usually survive, and find it almost impossible to support them. Younger Hmong women who grew up in the US have five to six children, which is much higher than the average of two children per Caucasian family. Hmong activists believe that the third generation of Hmong women will have only one or two kids. One reason large Hmong families persist is that given the low status of girls, couples continue having children until they have a boy.

The generation of Hmong men in their 20’s and 30’s continue the patriarchal traditions of the old country in the US. Some continue to view slapping and physical abuse as acceptable means of disciplining a disobedient wife. They can be polygamous with approval of the clan elders and have extramarital affairs that clan members may not approve of but do nothing to end. Other young men maintain that patriarchal traditions and stories of polygamy and domestic abuse are history, vehemently deny they still exist, and resent Hmong women for shining a spotlight on them. This denial only helps to preserve the status quo. In all fairness, some Hmong men, young and old, express genuine concern, but besides wringing of hands they have not taken concrete steps to address these problems.

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4 With such large families, the Hmong population is extraordinarily young. Slightly over 36% are under 10-years-old compared to the overall population of less than 15% and nearly 60% of Hmong are under 18 years old. Combined with their inability to find high-paying jobs, large families of eight to 12 children are keeping many Hmong in poverty. They are one of the poorest groups in Minnesota and 72% of their children live in poverty. These large families are having a difficult time transitioning from welfare to self-sufficiency.
Adjusting to Life in the US

1. The Changing Role of Women
As Hmong women learn English, become wage earners, and attain higher levels of economic independence, the power dynamics within families change, albeit incrementally at first. For example, in Minnesota in the mid-1980’s, Hmong women were not seen in public with their husbands. They were pressured to stay home and not attend outings, such as weddings or Hmong New Year celebrations. The activist women of the Association for the Advancement of Hmong Women tackled these problems by insisting their own husbands take them to these events. Slowly, other women began attending. In 1989, 20% of the men brought their wives to events. In 1990, half brought their wives and by 1998, it was socially acceptable for a woman to accompany her husband to public events. This change also curbed extramarital affairs and the traditional prohibition against women making eye contact has changed as well. Yet, most clan elders want no change in their traditions; they believe that Hmong have survived through their many migrations because they have held on to their traditions.

In recent years, the unraveling of the traditional Hmong culture has been accelerated by the Welfare Reform Act of 1996. For example, in Sacramento, California, welfare departments require that a TANF case file be established in the mother’s name. Not knowing that they can instruct the welfare office otherwise, Hmong women let the welfare office issue the check in their names. Hmong men resent this because of the appearance that they are not the breadwinners and because their wives now have control of the finances, power women did not have in Laos. Many Hmong women have used TANF as a means to move toward self-sufficiency. Welfare reform forced both wife and husband into job training, ESL classes, and jobs outside their ethnic enclave. Some men refuse to attend classes with women as they find it demeaning and a loss of face to be learning alongside women. On the other hand, women tend to be eager to learn and are willing to take jobs men won’t take. Consequently, many more women of all ages, from 25 to 50, are graduating with ESL diplomas than men. As a result, women, not men, are the ones getting jobs, sometimes with health insurance, and earning higher wages.

2. Violent Backlash
Unfortunately, these changes have also brought a noticeable rise in divorces and an escalation of domestic violence as Hmong men are feeling threatened. Their wives

 Unlike Asian immigrant women in the rest of the country, because of the availability of factory jobs in the Twin Cities area, Hmong women were able to secure higher than minimum wage jobs in meat packing, vegetable canneries, and light assembly in such companies as Pillsbury, 3M and General Mills. Hmong women prefer working in manufacturing jobs where they carpool to the suburbs instead of working in the service sector such as domestic and janitorial. In these jobs, they can earn from $7 to $12 an hour, though if they have large families of eight to 12, their earnings remain below the poverty line.
are out all day working and have discovered how to take advantage of resources within and outside their communities. Meanwhile, many men stay home, gamble, have affairs with other women, and expect their wives to be the housekeepers when they return home from work. They become jealous of their wives’ newfound independence and suspicious because they are out of the house all day. Now when men take second wives, their first wives are likely to ask for a divorce. Such gender role changes are dramatic in the patriarchal Hmong culture, particularly when women begin making financial decisions within the family. When life as Hmong men understand it changes beyond recognition, some see suicides and homicides as the only solution. Bao Lor’s husband, who had a second wife, was suspicious of Bao Lor having an affair and killed her before killing himself. Put less generously and as one Hmong women stated in an editorial:

The Hmong men despise the idea that they can no longer freely beat their wives and that they must be responsible fathers despite broken love between a couple. These men resort to violence as protest against attempts at gradual erasing of misogyny. These Hmong men did not kill their wives because of the stress of adjusting to American culture. They did it because they thought they could and had right to do so.  

The increase in domestic violence and suicide-killings is also related to the deterioration of the traditional buffer, the extended family and the traditional mediation and intervention it provided, between husband and wife when there is marital discord. On the other hand, a woman can still be pressured by the extended families to stay in a marriage if her husband is otherwise considered a good member of his extended family. A woman can be disowned if her family does not accept her decision to pursue a divorce. If woman goes to court for a divorce, it is taken as a sign that she has washed her hands of her extended families. Without being divorced in the traditional way, a woman belongs neither to her ex-husband’s family nor to her father’s household, who may refuse to assist her in the future.

When they reach this point, women do not know where to turn for help to escape their abusers. Women who have gone to shelters have been scolded by other members of the Hmong community. Calling the police does not guarantee assistance; Khoua Her called the police 16 times and had obtained a temporary restraining order. Numerous Hmong women suffering repeated battering by their husbands fear for their lives and children’s lives but do not leave. Of late, Hmong men use suicide killings as a weapon to keep their wives in line by verbally threatening: “If you don’t behave, the whole family will die.”

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7 The Association for the Advancement of Hmong Women saw 32 victims of domestic violence in 1999. In 2000, that number increased to 46.
Sexual Assaults

Sexual violence has always existed but the topic has been taboo and not discussed within the Hmong community. In the early 1980’s, the Women’s Association of Hmong and Lao (WAHL) obtained funding for sexual assault work, but an outraged community forced it to return the money. Traditionally, Hmong clan leaders have handled rapes internally usually by requiring perpetrator families to pay retribution. Recently, however, there has been a rise in reporting of sexual assaults. The forms of sexual violence include rape by dates and acquaintances, male relatives, gang rapes, and sexual assaults, and men who pimp their girlfriends or teen runaways. As mentioned above, single women and their daughters who do not have a man in the house to protect them are particularly vulnerable to predatory male relatives. With more women working, there has arisen the phenomenon of some men in temporary employment agencies withholding paychecks until the women performs sexual services for them.

Young Hmong girls are particularly vulnerable. For example, in St. Paul, in January 1998, two men and five teenage boys were charged with gang raping of three Hmong girls. In June 1998, several Hmong men in St. Paul were charged with repeatedly raping seven young Hmong girls as part of gang initiation. In September 1999, four teenage girls disappeared from Wisconsin during Hmong New Year and were found days later in Detroit, imprisoned and raped by approximately 20 men. This increased vulnerability has multiple sources. First, in some cases both father and mother work outside the home and cannot supervisef their teenage children or have lost control over them, particularly if four or five of them reach puberty at the same time. Second, teenage girls are engaging in activities that put them at risk. There is a high rate of truancy among Hmong girls who start skipping school in the seventh grade. Groups of girls skip school together and hang out at a classmate’s house during the day without adult supervision. The Hmong girls found it difficult to reform and return to being good Hmong girls once they had shamed their families and often get into deeper trouble. Hmong girls go on the run together and stay at known hideouts with adults who support them. Sometimes they are taken in by prostitutes who force them to shoplift. In these situations, Hmong girls are easily preyed upon by gang members.

Hmong culture does not approve of sexual assault. Yet the Hmong community will take no action in helping the victims. The Hmong approach to preventing sexual assault is to tell the girls to keep themselves safe by staying home.

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8 In the St. Paul school district, 27% of students referred to the truancy intervention program were Hmong, with equal percent of boys and girls. Of the court petitions filed for chronically truant Hmong students, almost 70% were for Hmong girls. Half of those with truancy petitions filed against them also had petty offense charges. See May Kao Yang, Growing Up Hmong American: Truancy Policy and Girls, Master’s Degree Paper, Hubert H. Humphrey Institute of Public Affairs, April 24, 1996.
(therefore not going to the library, participating in extracurricular activities, or going on fieldtrips, and certainly not dating or going to dances or living alone). As a result, when a girl gets raped, she gets blamed, because how else could the man have access to her unless she let him? There is also community denial of sexual abuse, lack of punishment for perpetrators, and learned behavior from watching male family members and friends. Victims are re-victimized: blamed for the rape, forced to marry the perpetrator, shunned by the community, stigmatized instead of provided with counseling, and held responsible for the ruined reputations of themselves and their families. Until WAHL started its Sexual Assault Program in 1998, with a 24-hour hotline, there were very few resources for the victims. Many do not seek help for fear of being disowned by their families if they tell their stories. In such a close-knit community, a woman may decide not to go to a clinic to get examined for fear that there is no confidentiality and someone she knows will find out. However, there is evidence that attitudes are changing. Some parents have come to see WAHL’s program as a way for their daughters to be taken care of, receive counseling and get help. Older women in their 30’s and 40’s have also begun going to WAHL for assistance.

**Challenges to Effective Responses**

**1. Violence is Met with Silence**

*How can our children know about peace when many of them are born out of the rape of their mothers, with the sobs of their mothers as they are saying “no” to non-consensual sex and “no” to unwanted pregnancies still echoing in their newborn ears? How can our children know about peace when they grow up watching their fathers beating up with words and fists on their mothers, with no one to tell them that it is wrong? How can our children know about peace when they see their 12-year-old sisters raped or married off, with no one to tell them that it is wrong? If we want peace for our Hmong children, then peace has to start in the womb, with peace for Hmong women.*

The lesser value placed on Hmong women and girls is the root cause of the escalating violence against them. The cultural norms within the Hmong community that devalue women and girls must be transformed. Every immigrant group has experienced the stress of adjusting to a new life in the US. Yet, the level of violence that is being inflicted upon Hmong women is unprecedented. Within the Hmong community, there is still no consensus on how to address the problem. There are elderly Hmong women and men who do not like the polygamy, early marriages, bride price, very large families, and domestic violence. There are good fathers, brothers, and husbands in the Hmong community who are appalled at the

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*From Editorial Opinion by Pacyinz Lyfoung, Denial: The Core Problem, Hmong advocate calls for end to silence, Asian Week, September 17-23, 1998.*
level of violence against women. It is the combined voices of clan leaders, elderly men and women, fathers, brothers, and husbands, as well as young women speaking out that can change the norms. But, for different reasons, the voices of men and elders have remained silent. Many cling to the belief that “nine daughters are not worth as much as one son” and fail to see that the appalling violence that racks their community and is directly connected to the devaluing of women and girls.

When women do speak up, they are silenced. Within a week of Khoua Her’s arrest, the Hmong Executive Director of a pan-Asian women’s shelter in the Twin Cities called for the community to look at the chronic violence in Hmong women’s lives. But many in the community, including women, had conflicted responses and were unable to act. Some frankly admitted to having no sympathy or interest in a Hmong woman evil enough to kill her own children. The Board of Directors of the shelter forbade the executive director from making statements about the Khoua Her case and eventually she resigned. After her departure, no one else dared to point out the connection between the devalued status of women and the killings. In California, a year after the murder/suicide in Mai Thao’s family, when the executive director of the Hmong Women’s Heritage Association (HWHA) in Sacramento was featured in a September 2000 article in The Sacramento Bee talking about the murder, Hmong women’s refusal to continue living in bad or loveless marriages, and Hmong men’s need to break with the destructive patterns of the past, she received numerous death threats from Hmong men.

2. Generational Differences in Addressing the Issues

Some young Hmong women have attempted to address the status of women. One example is the Women’s Association of Hmong and Lao. In 1998 they held a two-hour walk for peace that drew 100 Hmong women, men, and youth. Based on interviews and two focus group discussions with Hmong women activists in Minnesota, the author believes that the silence from young Hmong women is also caused, in part, by self-censorship. Young women are paralyzed as they attempt to walk the fine line between remaining loyal to a culture badly badgered by a racist mainstream community and publicly challenging the gender inequalities embedded in Hmong culture. As mostly young unmarried women, the women activists do not believe the elders will listen to them. Elders and the community want to know if the person speaking up is a “traditional Hmong woman” or a “Westernized woman.” They often will not even listen to a Hmong who does not speak Hmong. There is a degree of guilt in having become westernized that lowers their credibility in their own eyes. Young Hmong women want to become respected leaders within their communities and do not want to jeopardize this by appearing too strident about women’s issues.

Moreover, in a close-knit community, speaking up has implications for a woman’s father, husband and clan; it may bring shame to the entire family. Older women are afforded more status in the Hmong culture and young women need them to lend their credibility and join them in speaking out. The older women, though, speak about the need to use more moderate language and feel that using the term domestic violence cuts off the possibility for further discussion with men.
Their approach is to encourage women to teach their sons to respect women, husbands to talk with other men, and to involve men in all efforts in order to make them credible to the community. Although each approach has something to contribute, there has not been enough intergenerational work among Hmong women to enable them to develop an effective and concerted response to the epidemic of violence.

Since the Khoua Her case, male clan elders have made efforts to mediate domestic disputes, but they hold onto the traditional perspective that families must be preserved and women are never right. Clan elders, many of whom were high ranking military officers in Laos, still dominate the community and their patriarchal attitudes have not changed. The 18 Clan Council, formed to mediate marriage disputes prior to a court permitting divorce, was initially made up of only Hmong men. Women were suspicious of it, particularly since the chair of the Council was a man with two wives. Recently, six Hmong women joined the Council, but because they are young, activists say they lack credibility within the community.

3. Evolving Hmong American Feminist Approaches
Hmong women in different parts of the US, who come from different life experiences, are exploring multiple ways to address the violence in their communities and improve the lives of Hmong women and girls. Hmong women in California have developed their own Hmong style of feminism that includes working closely with clan elders. They view the transformation of their culture as consisting of combining “what is positive from the old culture with what is good in this country.” It also includes adhering to the close-knit clan structure and its moral authority. For example, the Hmong Women’s Heritage Association has as part of its governing structure a Clan Advisory Council made up of all men. Some have criticized the exclusion of women, but traditionally, women did not serve on clan councils. HWHA believes that because it has male clan elders integrated into its organizational structure, the community has been more accepting of its work. When the executive director received death threats and criticism after making statements to The Sacramento Bee, the Council stood behind her and smoothed tensions in the community. HWHA has honored clan leaders at dinners, and at the same time criticized the old Hmong guard for living in the past. When issues arise and the clan leaders want to respond in the traditional way, HWHA points out the conflict between Hmong traditions and US law and works to negotiate a middle ground. The Council meets regularly to mediate sensitive cases, such as domestic disputes and divorces. The HWHA believe that only when clan leaders and men are empowered can they be moved to accept change.

In Minnesota, younger women’s experiences with their clan leadership give them less confidence in the traditional ways and the traditionally male-dominated systems of community decision-making and leadership. They have criticized the traditional all-male elders councils. They have created a new tradition of honoring Hmong women leaders and women of courage. For example, the Hmong Women’s Action Team holds an annual leadership and courage award banquet, now in its fourth year, to bestow honor on Hmong women leaders. Hmong
women in Minnesota are also struggling to change their personal lives—in their roles as wives, in their husbands’ roles, and most importantly in the need for the men in their lives (husbands, brothers, fathers, uncles, elders, etc.) to openly support them and other women.

Ultimately, a concerted effort on the part of all segments of the community is needed to begin the dialogue to come up with solutions. Changing of cultural norms is key, whether through men’s focus groups, public education programs, or other means. The community must also address the problem of unemployment among Hmong men and their inability to adjust to the economic realities of life in the US. In addition, to protect teenage girls, advocacy is needed in the schools to address the factors that cause the high levels of truancy.

The Organizations

Since 1975, when the first Hmong arrived in the United States, Hmong women came together to address the problems their families faced in adjusting to a new way of life. Many of the first mutual aid associations were formed by Hmong women. Today, there are at least seven fully staffed Hmong women’s associations in Minnesota, Wisconsin, California, and Colorado that provide services to support families and/or advocate on their behalf. These networks and infrastructure are impressive. In 1995, Hmong women sent a 35-woman strong delegation of all ages to the United Nations Fourth World Conference on Women in Beijing, China. This was the largest and most organized delegation of Asian American women at this or any past UN Conference. The leadership needed for the Hmong community to succeed in their transformative work exists in the organizations and strong networks that Hmong women have formed in the past 30 years.

The Women’s Association of Hmong and Lao (WAHL), founded in 1979, has a Sexual Assault Project that provides direct services to women and girls who are victims of domestic violence and rape. Since the program started in 1998, it has seen 30 clients a year, has a 24-hour hotline, assists victims in navigating the criminal justice system, and conducts outreach and education to encourage victims to step forward and seek support. It is working with law enforcement to develop protocols on handling domestic violence cases from the Hmong community. Hmong Women’s Peace (HWP) is WAHL’s advocacy arm in the sexual assault work. HWP partners with the Asian Women United of Minnesota, a women’s shelter, and Hmoob Thaj Yeeb, or Hmong Peace, which provides anti-violence education to Hmong community to counter violence. To raise awareness and break the silence about sexual violence in the community, HWP conducted interviews and focus groups, workshops, and forums and published its findings identifying sexism and violence against women as one of the root causes of violence in the Hmong community.

WAHL’s Teen Pregnancy Prevention Program addresses the high teen pregnancy rates among Hmong girls. In the Twin Cities high schools, 50% of Hmong girls have had children or become pregnant before they graduate. For every 1,000
Asian teens between ages 15 to 19, there are 90 pregnancies compared to 25 pregnancies per every 1000 Caucasian teen. In Minnesota, nearly 70% of teen moms dropped out of high school and 80% use welfare. The Prevention Program works in junior high schools with girls ages 12 to 14 year to encourage education and dreams, teach them assertive skills to use against sexual pressures, teach family planning and the use of birth control, and help parents talk with their teens about sexual abstinence.

Recently WAHL went through a strategic planning process and its Board and staff made a commitment to increase public policy advocacy, legislative lobbying in particular, work in coalitions to further its advocacy around welfare reform and sexual violence, and use of the media in its advocacy work. The younger Hmong women leading the organization are struggling with the issue of how to change cultural norms.

Formed in 1998, the Twin Cities-based Hmong Women’s Action Team (HWAT) is an all-volunteer organization whose mission is to prevent violence against women and girls by ending sexism in the community. Its programs include the Hmong Oral History Project to capture the stories of Hmong women across three generations and their experiences before, during, and after the Vietnam War, focusing on leadership and the contribution they make to their families and communities. HWAT publishes a quarterly newsletter, “Hnub Tshiab,” which gives safe space to Hmong women to talk about their issues. It launched the 2001 Pledges for Hmong Women campaign to get 2001 individuals to take a stand for Hmong women and make people aware of the power of the individual to make a difference. It has been involved in court cases, organized a walk for peace, and issued a report about the concerns of Hmong women. HWAT’s long-term plan is to build the capacity of Hmong women and girls as advocates to increase the number of programs, challenge existing organizations to better serve their needs, and ensure that their voices are included in discussions that affect their lives. In refusing to remain silent about the sexism in their culture, the activists in HWAT are stamped as radicals by the elders.

The Association for Advancement of Hmong Women in Minnesota (AAHWM), founded in 1981, has programs in early childhood development, childcare and parenting, teen pregnancy prevention and for teen moms, and health education and a self-sufficiency program which does job assessments, screening, and placement for Hmong TANF recipients. It hosts biannual women’s leadership conferences. In the early 1980’s, the women activists of AAHWM were instrumental in changing the traditions that kept Hmong women out of the public sphere, i.e., the public events described earlier. AAHWM has partnered with the League of Women Voters to promote civic participation and has engaged in advocacy for Hmong welfare recipients. It was one of the named plaintiffs in a 1999 class action lawsuit challenging Minnesota’s Department of Human Services failure to provide interpreters or written materials in Hmong. The women of AAHWM are also grappling with the question of how to engage elders and men in dealing with the rise in domestic violence.
The Sacramento, California-based *Hmong Women’s Heritage Association (HWHA)*, founded in 1993 and operated by volunteers, secured funding in 1998 and hired its first staff. Its program areas include the Family Resource Development, which assists families in crisis, mentors women, and provides mediation through the Clan Advisory Council. It also has Hmong Women’s Circles in four area schools where teenage girls develop leadership skills by organizing, planning, and facilitating events such as mother’s and father’s day programs. It received funding in 1999 to develop a program to help elders bridge the generation gap.

The Washington DC-based *Hmong National Development (HND)* is a national organization formed in 1987 that provided refugee resettlement assistance to about 100 Hmong community groups across the country. It now provides technical assistance to local Hmong mutual aide associations throughout the US on issues such as citizenship, welfare reform, legislative changes, and advocacy. The recently hired new executive director is a woman from Minnesota, former chair of the HWAT and former executive director of WAHL. Since assuming the helm of HND, she has been convening Hmong Women’s Circles in California, Wisconsin, and St. Paul to address issues facing Hmong women, including violence against women and girls, and encouraging the development of programs to deal with these issues. HND is also actively involved in the TANF and food stamp reauthorization fight in the US Congress.

**Recommendations for Action**

- Convene intergenerational women’s groups in regions with large Hmong populations, such as California, Minnesota, and Wisconsin to engage in ongoing discussions about solutions to the rise in violence against Hmong women.

- Develop and implement a comprehensive plan for action for the transformative work needed to change cultural values and raise the status of women in the Hmong community.
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Hawai'i's Ethnic Pie

Note: Two or more races: Of persons reporting two or more races, not including Hispanics, 157,880 reported being at least part Asian, Native Hawaiian and Other Pacific Islander, Some other race or some combination of all three groups.

Source: U.S. Census Bureau. Population by Race and Hispanic or Latino Origin, for All Ages and for 18 years and Over, for Hawai‘i: 2000
Hawai‘i—The Asian State

Introduction

Hawai‘i is home to the third largest population of Asian Americans in the US. In contrast to the US mainland where Asian Americans are 4% of the US population, close to 70% of Hawai‘i’s population is Asian or part Asian. However, unlike the general US Asian American population, which is 63% immigrant, in Hawai‘i, 84% are US born. The author of this report looked into the following questions: Do Asian Americans, who make up the vast majority of the state and control its political apparatus, suffer human and civil rights violations? The answer was “yes” though with variations not seen on the mainland. With regard to the question: “Is there an Asian American identity or sense of solidarity on the islands?,” the answer was “no.”

On the mainland, the white dominant culture’s perception of all Asians as being the same and the resulting oppression that does not discriminate among Chinese, Japanese, Filipinas, and Southeast Asians contributes to the creation of Asian American identity and solidarity. With Hawai‘i’s population being majority Asian, however, there is no white/Asian dichotomy. Rather, each Asian ethnicity occupies a different place in the social hierarchy, and Native Hawai‘ians surely do not place themselves within the “Asian Pacific Islander” identity construct that is sometimes seen on the mainland. Indeed, in Hawai‘i, it is the Japanese ethnic group that wields political power and it, along with whites who hold economic power, are among the sources of the human and civil rights violations inflicted on other Asian Americans (Filipinos and newer immigrants) and Native Hawai‘ians.

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1 State residents prefer this punctuation.
2 Instead, persons of Asian descent self-identify by ethnicity, such as Japanese, Chinese, or Oriental (used by those without the political consciousness to use the term Asian), or they will say, “I’m local,” meaning not haole or Japanese tourist. The darker one is, the more one will self-identify as local or others will identify one as local.
who occupy the bottom of the socioeconomic ladder.\(^3\)

In order to understand the socioeconomic and political positions of the different ethnic communities in present day Hawai‘i, this chapter first gives a brief history of the settlement of Hawai‘i by haoles\(^4\) from the mainland, the immigration of laborers from Asia, and the creation of the Japanese American middle and professional classes. The report will then examine the issues facing the ethnic groups at the bottom of socioeconomic ladder and possible steps for future action and advocacy.

**Brief History of Settlement and Immigration to Hawai‘i**

1. **Overview**

   Native Hawai‘ians’ first came into contact with the US in the late 1700’s. The first missionaries began arriving in Hawai‘i in 1830. The immediate offspring of four missionary families began accumulating immense wealth, beginning with sugar and pineapple plantations. Intermarriage among the four families, intrafamily holdings, and interlocking directors created the Big Five companies which came to control the economy of the islands, expanding beyond sugar and pineapple to encompass the steamship, railway, utilities, cattle, and hotel industries.\(^5\) In the 1860’s, the lands of Native Hawai‘ians were stolen by the descendants of these haole missionaries and turned into sugar cane fields for the world market. Labor was needed to work the fields, but outside diseases such as small pox and diphtheria decimated the Native Hawaiian population.

   From 1778 to 1893, the Native Hawaiian population dropped from an estimated one million to 40,000. Sugar plantations owners turned to Asian labor. In 1852, the first Chinese immigrants arrived, with 46,000 arriving before anti-Chinese sentiments resulted in Chinese Exclusion laws in 1883. Chinese laborers were replaced by Japanese immigrants, who were arriving in large number by 1885 and then by Koreans in 1903. From the 1850’s to 1950’s, close to 400,000 people, primarily from Asia, were brought to Hawai‘i to work in the sugarcane fields. Asians are a numerical majority in Hawai‘i today because of the massive depopulation of Hawai‘i’s indigenous people and importation of Asian immigrant labor for the sugar industry. The Kingdom of Hawai‘i was overthrown in 1893 by the US military and annexed as a territory in 1898. The Big Five controlled every aspect of

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\(^3\) While the governor and lieutenant governor are Filipino, Japanese Americans hold the majority of other political offices.

\(^4\) Residents of Hawai‘i refer to Caucasians as “haole.”

\(^5\) The Big Five includes American Factors, C. Brewer, Alexander and Baldwin, Castle & Cook, and Theo H. Davies.
island life, economic, social, and political and had absolute control over plantation workers. Hawai‘i became the 50th state of the US in 1959.

2. Japanese Immigration

Japanese immigration to Hawai‘i began in 1868 and occurred in five waves, with men outnumbering women 20 to 1 in the early period and later the ratio dropped to 5 to 1. The first generation of women, the Issei, went to work in the sugar cane fields. By 1890, Japanese women made up nearly two-thirds of wage-earning women in Hawai‘i’s economy and nearly all of them were laborers. In 1900, the territorial government abolished contract servitude and Japanese plantation workers went on strike to join unions and organized for wage increases and better conditions. One of the strike demands was for two months paid maternity leave, a reflection of the large number of women fieldworkers.

A treaty with Japan in 1908 allowed larger numbers of Japanese women to immigrate to join their husbands to reconstitute or create new families. Between 1908 and 1924, the Japanese population grew rapidly in Hawai‘i. Anti-immigrant backlash from whites in Hawai‘i resulted in passage of a 1924 immigration law that virtually ended immigration from Asia until the 1965 repeal of the various bans on immigration of Asians into the US. Nonetheless, because both Japanese men and women were allowed to enter Hawai‘i, Japanese families, communities, and infrastructure developed early, with their second, or Nisei, generation born in the 1920’s and 1930’s, Sansei (third generation) born in the 1950’s and 1960’s, Yonsei (fourth generation) born in the 1970’s and 1980’s, and now Gonsei (fifth generation) born in the 1990’s. As described below, the Sansei and later generations were able to rise to the middle and professional classes.

3. Post World War II

Hawai‘i’s workforce underwent drastic changes when Japan attacked Pearl Harbor in December 1941. Martial law was imposed. It was only the fact that 37% of the islands’ workforce was now Japanese, that prevented relocation to mainland internment camps. During World War II, like their mainland counterparts, women in Hawai‘i moved into heavy industry. When the war ended, the Rosie the Riveters of Hawai‘i and the mainland lost good-paying manufacturing jobs and were pushed into female dominated clerical work in expanding offices. Younger Hawai‘i born women of Japanese and Chinese descent made up this new white-collar workforce that personifies the movement of women from the fields into offices.

In 1945, Hawai‘i passed the Hawai‘i Employee Relations Act, which gave agricultural workers the right to organize. The International Longshore Workers Union (ILWU) successfully organized the first multi-racial union, integrating all Asian ethnicities, in the sugar industry. The 1946 strike of 26,000 sugar workers, known as the Great Hawai‘i Sugar Strike, shut down the sugar industry island wide, winning them the first industry contract. Their victory broke the oligopoly and stranglehold of The Big Five over the economic and social life of the islands and changed the balance of power between workers and the plantations. Strikes in other industries followed. The multiethnic communities forged in these strikes
laid the foundation for ending the Big Five and Republican control of Hawai‘i eight years later.

4. The Democratic Revolution of 1954

When the Japanese American veterans returned to Hawai‘i after World War II, they returned to a segregated society, not dissimilar to that of the US south. Up until the 1960’s, Hawai‘i had segregated schools, with haole children attending private English Standard Schools and Asian and Native Hawai‘ian students attending the county public schools, taught in pidgin or Hawai‘ian Creole. Segregation also existed in housing (through racial covenants in deeds that prohibited the sale of real property to non-whites) and employment. The veterans came home and went to college using the GI Bill but were locked out of corporate firms. Immigrants could not vote because they could not become US citizens. In civil and criminal trials, they did not have a right to a jury of their peers but were at the mercy of all-white jurors, usually white plantation managers. The Japanese American veterans who grew up on plantations began seeking change by running for political office. In what is called the Democratic Revolution of 1954, these veterans took over control of the state territorial legislature, breaking the stranglehold Republicans and the Big Five had on state government since annexation. Their base of support was the plantation workers unionized by the ILWU and other union workers who made up nearly one-third of the workforce. Once elected, they started passing social and civil rights legislation, including ending segregation by creating a statewide school system taught in standard English that replaced the poorly funded county school districts. Hawai‘i was the first state to adopt a civil rights law that predated the federal Civil Rights Act of 1964, ratify the Equal Rights Amendment, and recognize the right to abortion and same-sex marriage. These policies were pushed by a strong and progressive labor movement, which provided the Democratic Party with its platform and base of support.

While Japanese Americans are the political elite, economic power still lies with haoles, including the corporations descended from the The Big Five and the US mainland owned resorts and hotel chains. Dole Pineapple owns the island of Lanai and the Robinson family owns the island of Ni‘ihau. In Hawai‘i, like the rest of the US, those who hold economic power also have great sway over politics. A glass ceiling for Asian Americans, even for Japanese Americans, exist in upper levels of corporate management. For example, the CEOs of the large hotels are white while the middle management is Japanese American. Television newscasters are white and 70% of the tenured professors at the University of Hawai‘i are white, mostly from the mainland. The lecturers are predominately women of color. The

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6 The colonial mentality of the locals accounts for much of this. Anything from the mainland is thought to be of better quality. Locals will send their children to any mainland college rather than to the University of Hawai‘i. There is a lot of deference by Asians to white authority.
white faculty resent having to answer to a state legislature that is predominately people of color.

5. Post War Changes for Japanese Hawai’ian Women

In the 1950’s, Hawai’i began moving from an agriculture-dominated economy to a service economy, relying on tourism and support services for military families. World War II, the labor movement, the political ascension of the Democratic Party, and statehood opened up many more opportunities for the Nisei women. They moved into jobs in hotels, offices, and retail where they continue to predominate today. Younger Nisei women whose families could pay for their higher education entered the feminine gendered professions and became teachers, librarians, nurses, and social workers. The public sector tended to be less discriminatory toward racial and ethnic minorities and many women gravitated to government jobs. Sansei women also went to college, entered into the female-gendered professions like their Nisei mothers, but also chose careers in law, journalism, academia, medicine, and politics. Their Yonsei daughters obtain even more prestigious and exclusive secondary, baccalaureate, and post-graduate education. But Native Hawai’ian women were discriminated against and kept out of the white collar positions and relegated to food service and housekeeping.

Discrimination Against the Newer Asian Immigrants

1. Chinese and Filipino Immigration and Racial Discrimination

Unlike the Japanese immigrants, Chinese and Filipino laborers were prohibited from bringing their wives and families to Hawai’i. Filipinos were forced to live in bachelor societies and it was not until after 1965 that they could bring their families to Hawai’i. Chinese men married Hawai’ian women, but their children faced discrimination and their descendants did not move up the socioeconomic ladder in the same way as the Japanese. The particular history of immigration to Hawai’i has influenced the socioeconomic stratification of Hawai’i, which consists of a Chinese merchant and business class that largely stays out of politics, a middle and professional class of Japanese that dominates politics, and a working poor or impoverished class made up of Filipinos, Southeast Asian refugees, mixed ethnicities, and Native Hawai’ians.

Much of the discrimination and violation of civil and human rights suffered by Filipinos and Native Hawai’ians is inflicted by Japanese American politicians or white, Japanese and Chinese employers, managers and those in positions of power and authority. An example of an employment decision by a Japanese American

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7 There are of course poor and struggling Japanese American families and well-to-do professional Filipino families. But statistically, most Japanese Americans are in the middle or higher classes and a larger proportion of Filipino Americans are among the working poor.
involving a Filipino American that was allegedly discriminatory occurred in the 1989 *Fragante v. City and County of Honolulu* case that went up to the Ninth Circuit Court of Appeals. Fragante, a Filipino, had applied for an entry-level clerk position dealing with the public with the Hawai‘i Department of Motor Vehicles. His interviewees, one of whom was a Japanese American, declined to hire him because they found his Filipino accent difficult to understand. Fragante sued for accent discrimination, a form of national origin discrimination. He ultimately lost the case.

When power resides in Japanese Americans who have made discriminatory employment and other decisions regarding Filipino Americans, there can be no Asian American identity or solidarity in Hawai‘i.

The animosity Filipinos feel for Japanese Americans’ long-standing discrimination against them came to a head in 1998. Filipino Americans protested and reversed the decision of the Association of Asian American Studies to present a Japanese American writer, Hawai‘ian-born Lois Yamanaka, with its Fiction Award for her book, *Blu’s Hanging*, which depicted a Filipino man as a sexual pervert who rapes a Japanese American boy. The opening poem of Yamanaka’s earlier book, *Saturday Night at the Pahala Theatre*, also portrayed a Filipino man as a sexual predator of young Japanese girls. The racist stereotypes of Filipino men as sexual threats originated 90 years earlier in the days when Filipino men lived in bachelor camps on the plantations. Filipinos had protested the racist portrayals in *Saturday Night* and were appalled to learn that Yamanaka was receiving an award for a second book that again perpetuated the stereotype. This conflict pitted Japanese Americans who defended Yamanaka against Filipinos who were criticized for censorship and over-sensitivity for protesting yet another manifestation of the racism against them.

2. Poverty and Inequities

In Hawai‘i, the most serious civil and human rights violations are, as on the US mainland, inflicted on the working poor and impoverished women, in this case, Filipinas and Native Hawai‘ian women. Since the 1940s, the lower wages paid first by an agricultural economy, then a service economy, along with a high cost of living in Hawai‘i, (about 35% to 40% higher than the national average), have meant that full-time employment for two or more adults in a family is common. This has resulted in Hawai‘i’s women leading the nation in female labor force participation. A large part of the family income goes to childcare. Hawai‘i’s housing market is limited and very expensive because most land is owned by a few private estates, corporations, and the government and locals also must compete with tourists for rentals or end up moving further away from their jobs and children’s schools, increasing the cost of transportation.

In the last 10 years, the loss of jobs from sugar and pineapple plantations and downturn in tourism because of Japan’s weak economy has caused high unemployment. In Molokai, one-third of the population lost their jobs with the recent closing of one resort. There are no jobs on the island of Lanai and much of Molokai. 28% percent of the TANF recipients are part Hawai‘ian; 92% being women. Eight percent are Filipinas and 38% are local (mixed ethnicity, other
than Hawai’ian). With the five-year lifetime limit on TANF benefits expiring in a year, Native Hawai’ians, Filipinas, and persons of mixed ethnicities will find themselves in dire circumstances. Most of the issues that they face are directly related to their poverty:

**Incarceration Rates**
Hawai’i has the largest proportion of females in the prison population in the country. Girls are arrested and incarcerated at a higher rate in Hawai’i than anywhere else in America. The women and girl prisoners are primarily Native Hawai’ian. In 1970, there was one women incarcerated in the state; that number increased to 500 in 2001, 99% for nonviolent crimes such as drug possession. As high as 95% of incarcerated women need substance abuse treatment and are not getting it. Far more incarcerated girls (45%) than boys (7%) have attempted suicide and 38% of girls and 14% of boys reported being sexually abused in prison.

**Health Disparities**
Hawai’ians/Part Hawai’ians (23%) and Filipinas (20%) have the highest number of AIDS cases among all women in Hawai’i. Hawai’ians/Part Hawai’ians suffer the highest cancer rates. Working poor Hawai’ians and Asians, who mostly live in the rural parts of Oahu or the other islands, do not have transportation to access health services such as AIDS testing, prenatal care, pelvic exams, etc. Mobile mammography vans are often the only way that rural women can obtain mammograms, but such vans are not available on the neighbor islands. There is also a higher prevalence of domestic violence among Filipinos and Hawai’ians, at 18.2% and 16.1%, respectively.

**Gaps in Education**
Hawai’i is returning to a two-tiered segregated school system with Hawai’ians/Part Hawai’ians at the bottom. The children of middle class and more affluent Japanese and Chinese Americans attend private schools and the public schools are populated by Filipinos, Native Hawai’ians, and new Southeast Asian immigrants. The public schools are 19% Filipino and 25% Hawai’ian/Part Hawai’ian. However, respectively, these groups make up only 1.4% and 8.9% of the University of Hawai’i, Manoa campus.

**Unequal Access to Employment**
In the hotels, higher paid bell captains, front desk clerks, and maître d’s have traditionally been Japanese Americans. Filipinos and Native Hawai’ians worked in the back of the house. Only now are second and third generation Filipinas moving into front desk positions. In the service sector, 80% of home care workers are Filipinas.

**Homelessness**
Of all Asian groups, Filipinos have the highest numbers of single female and family units who are homeless (5.77% single, 4.23% families). The largest Asian/Pacific Islander group with homeless single women and families are Hawai’ians/Part Hawai’ians.
Hawai’ians (25.24% single women, 40.78% families) and Mixed/Cosmopolitan \(^8\) (7.89% single, 12.69% families).

**Welfare Reform**

After the passage of welfare reform in 1996, Hawai’i did not create state substitute programs for food stamps or SSI for immigrants, pre- or post-enactment. Not until four years later, in 2000, did Hawai’i provide Medicaid for post-enactment children. Language access to these services is poor.

**The Native Hawai’ian Sovereignty Movement**

Native Hawai’ians have a markedly different view of Asian immigration and political ascendancy. The most outspoken in the sovereignty movement have been Native Hawai’ian women:

Modern Hawai’i, like its colonial parent the United States, is a settler society; that is, Hawai’i is a society in which the indigenous culture and people have been murdered, suppressed, or marginalized for the benefit of settlers who dominate our islands. In settler societies, the issue of civil rights is primarily an issue about how to protect settlers against each other and against the state. Injustices done against Native people, such as genocide, land dispossession, language banning, family disintegration, and cultural exploitation, are not part of this intrasettler discussion and therefore not within the parameters of civil rights.\(^9\)

The Hawai’ian sovereignty movement asserts that Hawai’i has been overrun by non-Natives, including Asians. Haunani Trask explains: “Calling themselves ‘local,’ the children of Asian settlers greatly outnumber us. They claim Hawai’i as their own, denying indigenous history, their long collaboration with our continued dispossession, and the benefits therefrom.” The sovereignty movement sees the triumphant story of the Japanese Americans over white racism and rise from plantation life to the middle class and political dominance as part of the history of Native Hawai’ian colonization. It sees that local Asians’ efforts to differentiate themselves from haoles in Hawai’i only masks Native struggles against Asian settler colonialism. To the sovereignty movement there are no immigrants, only settlers and their children, and Asian Americans are seen as no different than white

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\(^8\) A category sometimes used to capture any combination of two or more ethnic/racial backgrounds.

South Afrikaners and Israeli settlers on occupied territory. Many Native Hawai’ian women do not see their oppression and exploitation stemming only from class, race, and gender discrimination, but rather as violations of their human and sovereign rights as a people.

Needless to say, Asian Americans in Hawai’i are threatened by losing the only home they have ever known. Former Senator Daniel Inouye had refused to introduce legislation designating Native Hawai’ians as an indigenous people in the same way Native Americans on the mainland have been designated and given ownership and jurisdiction over their own lands. Even the most progressive Asian Americans have an ambivalent relationship with the sovereignty movement.  

The Organizations

There are very few organizations that advocate on behalf of Filipinos and Native Hawai’ians. Na Loio No Na Kanaka, a nonprofit legal service located in Honolulu, serves primarily low-income, limited-English speaking immigrants, with Filipinos being their largest client base since over half, or 56%, of annual immigration to Hawai’i is from the Philippines. Na Loio provides legal services in the areas of immigration, naturalization, political asylum, and domestic violence. Na Loio also engages in advocacy on behalf of immigrants before the state legislature.

The National Hawai’ian Legal Corporation is a nonprofit, public interest law firm representing Native Hawai’ians in their assertions of rights to land and natural resources and other entitlements. The Corporation has handled cases involving quiet titles (claims to disputed lands), Hawai’ian home lands program, ceded lands issues, tenants, water, access, fishing and religious rights, and historic preservation.

The Hawai’i Commission on the Status of Women is a state administrative agency which each year lobbies and tracks legislation pertaining to women. It conducts research and seeks and coordinates testimony to garner support or opposition for a bill. It provides support to the bipartisan Women’s Legislative Caucus, that works to introduce bills concerning women. Its Violence Prevention Program monitored court cases and found that judges were issuing lenient sentences to sexual assault offenders. Its advocacy led to commitments from the prosecutor’s office and the courts to seek and order sentences that reflected the seriousness of the crime. It has two staff members and its funding is threatened every year in the state budget process. It is incorporating as a 501(c)(3) so that it can raise funds to expand its work.

Ironically, while the descendents of Asians on Hawai’i do not self-identify as Asian American, Native Hawai’ians perceive Chinese, Japanese, Korean, Filipino, and Southeast Asians as the same and any differences between them are merely differences among intrasettlers.
There is no other grassroots organizing among Filipinas to address their issues. The grassroots organizing in which Native Hawai’ian women are involved concern their fight for sovereignty, not civil rights. Most of the issues facing Filipina and Native Hawai’ian women are not being addressed.

**Recommendations for Action**

- Convene a cross-section of Asian, Native Hawai’ian and Pacific Islander women to discuss their issues, concerns, and priorities and the responsive civil and human rights advocacy needed for systemic change and to begin discussion on the institutions and infrastructure they need to carry out their social change agenda.

- Conduct research to determine the distinct concerns of women within each of the specific Asian groups as well as the needs of Native Hawai’ians and Asian Pacific Islanders women.
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Trikone's award-winning magazine provides insight into the lives, arts and concerns of South Asian LGBTs.
Asian American Lesbians, Bisexuals and Transgendered Persons—Moving from Isolation to Visibility

Introduction

Asian American lesbians, bisexual women, and transgendered persons (LBT), aka queer Asian women, are affected by all of the issues described in the previous chapters of this report. Asian American lesbians are also subject to the additional oppression and discrimination that all lesbians face in employment, housing, the military, family law, and various other areas. For many Asian LBTs, it is difficult to determine whether the source of the discrimination they face is related to their gender, race, or sexual orientation because these identities are interconnected and multiple. This complicated form of oppression makes Asian LBTs perhaps the most marginalized of Asian American women. Even more marginalized are immigrant and limited-English speaking Asian LBTs.

LBTs are denied many of the rights that straight people take for granted, including the right to marry and the over 1,000 legal rights inherently associated with formal marriage. For example, they are excluded from protections afforded by community property and intestate laws, and denied many rights that protect heterosexual partners and families including the right to hospital visitation, the right to make health care decisions, and the right to health care coverage. Moreover, most states do not allow gay couples to adopt children and unlike married heterosexual couples, joint custody by the parent who is not the biological mother of a child is not automatic. As described in Chapter Five, the health care needs of LBTs are not being met. Like all lesbians, queer Asian women are victims of hate crimes and suffer from domestic violence from their intimate partners. Their partners are also denied the right to seek permanent residency and citizenship.

Some women prefer to use the term “LBT” or lesbian and others, particularly younger women, prefer the term “queer.” The author will use the terms LBT, lesbian, and queer Asian woman interchangeably in this report and hopes none of the terms are offensive to the Asian LBT community.
This was a small pilot survey to assess the needs and attitudes of the Asian LGBT community. It was conducted in English only over a two-and-a-half week period in October 2000 with 153 women of 11 Asian ethnicities from 19 states of the US participating. The results were presented to the Presidential Commission. Of the respondents, 42% were between the ages of 20 and 29 and 34% between 30 and 39; 67% were either born in the US or immigrated at a young age; and 46% were college educated.

Since they face additional obstacles that the general Asian and LBT communities do not, a key question to explore is how the different forms of discrimination intersect and manifest themselves for the Asian LBT community. With scores of Asian American subgroups, it is difficult to generalize on the issues facing Asian LBTs. Only a handful of research studies and articles address these particular concerns. Asian lesbian and gay issues are marginalized in research and studies, such as the 1998 Institute of Medicine study on health care needs of lesbians and gays. Asians were not invited to the table to shape or participate in this study and only learned about it when it came out. This report attempts to describe the issues faced by Asian LBTs based on interviews of activists, an October 2000 survey by the Asian Pacific Islander Lesbian, Bisexual, Queer & Transgender Task Force (APLBQT), testimonies given to the Presidential Commission on Asian Americans and Pacific Islanders on November 13, 2000 and the literature that does exist. The information gathered from these sources reveal the ways in which pan-Asian queer women’s issues are unique and different from other lesbians and straight Asian women, and as such, requires advocacy specific to Asian LBTs.

**Coming Out and Others Issues Facing Asian American LBTs**

1. “There Are No Gay Asians!”

To the American public, the face of a lesbian is that of a white middle-class woman. Asian American lesbians have no presence in the mainstream or alternative media. Very rarely do they appear in commercial ads or in brochures in national outreach and educational campaigns of the white queer community. Because Asian lesbians are invisible to the general public, many people believe that they simply do not exist—at least not to the society in general and not within some Asian American communities. Although there are more Asian LBTs coming out and becoming more vocal in some areas of the country, there are still few visible role models for many young Asian LBTs or their families. This invisibility makes coming out to one’s family very difficult. One Asian mother said to her daughter when she came out, “You can’t be gay; Koreans aren’t gay.” Certain Asian communities consider homosexuality a “Western” or “white” disease and think that their children would not be gay if they were still living back in their home country. Certain Asian immigrant communities are isolated from or lack access to the public discourse on sexual orientation taking place in the US that increasingly recognizes gay and lesbian

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rights. This distance prevents these communities from understanding that gay
people are a natural part of all cultures and becoming more tolerant and accept-
ing of a person’s sexual orientation.

2. Family Acceptance

Given the cultural barriers, the coming out process for many Asian American les-
bians and their parents can be particularly traumatic. In the APLBQT survey, 40% of respondents ranked family acceptance as their most important need and 76%
ranked it as a need overall. There are a number of difficulties unique to queer Asian
women in coming out to their families. First, as explained in Chapter Six, in some
Asian cultures, women are not seen as sexual beings. To be lesbian is to choose to
be a sexual person and some Asian American parents are shocked and have a dif-
ficult time accepting this. In addition, first generation Asian American family ties
are very strong. Some Asian daughters continue living with their parents as adults
until they marry. When an Asian lesbian continues to live at home, it is that much
more difficult for her to come out because she is more vulnerable emotionally and
financially. In numerous testimonies before the Presidential Commission, Asian
American lesbians revealed how, in coming out to their parents, they were yelled
at, physically abused, disowned, or kicked out of the house with all financial sup-
port cut off. Some parents have responded violently, threatening to kill their
daughter. If financially dependent on her parents, coming out is not an option.
Being disowned is particularly traumatic. As one Asian LBT activist explains,
“Coming out to my parents was by far the most difficult aspect of being a lesbian-
despite having been ‘out’ at work and to everyone else for many years, it was only
recently, after having been active in both the Asian and lesbian and gay communi-
ity for over 20 years, that I overcame the fear of losing my parents and I finally came
out to them.” Regarding strong family ties, one Korean lesbian stated that Asian
daughters want to take care of their parents in their old age, and they are in more
difficult situations of freely choosing the life they want to lead and being a good
Asian daughter.

Particularly in immigrant families, Asian lesbians do not want to bring shame
onto their parents. As a Filipina testifies, “When Asian lesbians ’come out,’ our fam-
ilies, especially our parents, go deep into the closet.” Fearing that they will bring
shame to the extended family, Asian parents remain silent, suffering in pain and
isolation, not knowing who to tell or turn to. There are very few resources avail-
able for Asian American lesbians to use to help their parents understand their
coming out.

As more Asian LBTs come out at younger and younger ages, they may be
forced to leave home, and not surprisingly, the increasing numbers of homeless
LBTs has become a critical problem. There are few shelters and resources devoted
to their special needs, especially if they face language barriers or are undocument-
ed. With no means of financial support, many end up on the streets trying to sur-
vive by prostituting themselves. Because of the great pressure to keep silent about
their sexual orientation or the lack of places to turn for help, queer Asian women,
particularly Asian LBT youth, may suffer higher than average rates of suicide
The limited rights that the lesbian and gay community have gained does not necessarily provide similar protections to the transgender community. For example, a hate crimes statute that protects a person because of her or his sexual orientation may not apply to an assault of a TG if it was based on the person’s transgender identity. However, TGs would be protected if the statute included “gender” as a protected classification.

In the APLBQT survey, respondents ranked personal safety as their second most important need. 87% of survey respondents reported being yelled at or insulted because they were or were thought to be queer. More than half of the respondents reported threats of physical violence, and 15% reported physical injury. These attacks may be because of their gender, race, or sexual orientation or a combination of all of these. Sometimes an Asian butch/dyke might be accosted as a fag when the attacker mistakes her for an effeminate Asian man, instead of seeing her for what she is, a butch Asian woman, because that image is so far from the attacker’s stereotyped conception of what an Asian woman should be. The percentage of hate crimes were slightly higher among youth ages 18 to 23 and police protection emerged as one of five top needs for this age group.

Transgender persons (TGs) have recently become an integral part of the lesbian and gay movement. For the most part, not only have TGs been discriminated against by the heterosexual population, they have not been readily accepted by the gay and lesbian community either. Transgender is a gender identity or expression, not a sexual orientation. It refers to individuals who have cross-gender identification from the gender they were born with. This group includes transsexuals (those who changed their bodies with hormones and/or surgeries) as well as those who simply cross dress or anyone who identifies as transgender. They do not consider themselves gay or lesbian, but if born a man considers herself to be a “she” (M2F) and if born a woman considers himself to be a “he” (F2M). TGs experience daily harassment and discrimination in housing, employment, seeking health care, and just walking down the street. Job opportunities are minimal at best and most Asian transgendered women are forced to work as prostitutes, increasing their risk of contracting HIV/AIDS. In many areas of the US, it is a crime to cross dress. Transgender women are the target of hate crimes, especially by police, and evoke particularly violent reactions from straight men. For example, a transgender woman from Thailand was at a final INS interview for her green card as she had married an American citizen. When the INS officer saw her Thai documents reflected her gender as “male,” he harassed her aggressively, and threatened to kill her, saying that he had a gun.
Facing Cultural Isolation, Racism, Sexism, and Homophobia

As noted above, Asian American LBTs face the same needs and issues as all other lesbians and Asian women, as well as additional obstacles that may exacerbate their problems. Most importantly, none of the communities they are a part of, including the lesbian, gay, and mainstream straight Asian communities, explicitly address their needs. Queer Asian women are marginalized by all as they face combinations of cultural isolation, racism, sexism, homophobia, and xenophobia from one or more of these communities.

1. Isolation from the Non-Asian Lesbian Community

Some Asian American LBTs may not feel much kinship to white or non-Asian lesbians. The white lesbian community often promotes the concept of being “loud and proud” and many Asian LBTs are not comfortable with this communication style. Similar to the general society, white lesbians may hold certain racial stereotypes about Asian women. For instance, when Jenny Shimizu first started appearing in the Calvin Klein ads, Asian women considered her butch, but many white women insisted she was androgynous. The racist stereotypes work in reverse when these same white women see African American lesbians; they assume they are masculine and butch.

Furthermore, the services provided to white lesbians may not be applicable to Asian American lesbians. For example, some advise LBTs to come out to their parents when they are old enough to leave home but, as noted above, this strategy may not work for an Asian LBT since she may not want to jeopardize losing her family by coming out. Cultural and language differences makes some queer Asian women uncomfortable in social settings or support groups with non-Asian lesbians. As a result, there is a strong need for Asian LBTs to have “safe space” for themselves.

2. Racism in the Larger Gay Community

Racism within the broader gay, male community is even more challenging for Asian LBTs. Often, the only thing an Asian American lesbian has in common with a gay white man is that neither are heterosexual. Some white gay men may have a difficult time understanding or relating to the issues of Asian lesbians or any LGBT person of color because they have enjoyed the privileges of being white and male in a racist, patriarchal society. Racism on the part of gay men is disappointing since the discriminatory experiences they have had as gay men has not sensitized them to the discrimination of other oppressed groups. For instance, in a Gay Pride parade in New York one year, a Nazi gay man marched with a swastika. When an Asian lesbian confronted him, she was stopped by the parade marshals who stated that anyone who is gay has a right to march, even if he spews racism and hate toward people of color. In 1992, the Lambda Legal Defense and Education Fund, a national civil rights and law organization that champions gay and lesbian rights, used the racist and sexist Broadway play “Miss Saigon” as a benefit fund-raiser, ignoring objections by Asian queers. Asian American activists initially protested...
the yellow-face casting of a white actor in the Asian male lead role. Asian lesbians were the first to point out the racist and sexist nature of the play itself. The Asian queer community, along with other queer communities of color, often finds itself in the position of pointing out racial discrimination and stereotyping in the broader gay community. Many white gay men do not believe in affirmative action but cling to the meritocracy myth and some believe they have advanced through life on their merits and not because of white male privilege that works to remove the obstacles in their paths.

Asian LBTs have been marginalized by the broader gay community in struggles to influence legislation. For example, the state of Hawai’i’s ballot initiative on same sex marriage was dominated by mainland-based white organizations, in particular the Human Rights Campaign (HRC), which excluded Native Hawai’ians and Asians lesbians and gays from framing the issues and appearing in public as gays to support the initiative. Instead, HRC mounted an abstract campaign with an obtuse message that this initiative was not about lesbian and gay rights, but rather, it was about defending constitutional rights. The Republicans and the religious right defeated the initiative as most voters, not hearing the voices of their Asian and Native Hawai’ian sisters and brothers, mothers and fathers, did not see this as their issue.

3. Male-Dominated Asian Gay Organizations
Some gay Asian men’s organization have made efforts to address Asian LBT’s issues. However, sexism or insensitivity to women’s issues contributes to their inability to provide long-term support for women’s programs. An example can be seen in co-gender HIV/STD prevention programs. In San Francisco at the API Wellness Center, AQUA (Asian and Pacific Islander, Queer & Questioning, 25 and Under, Altogether) operated for over three years organizing among young gay men before QUACK (Queer Asian Chicks) was formed to provide support and a safe space for Asian LBTs. When QUACK ran out of funding, the Wellness Center was going to end the program and it was the efforts of Asian lesbians outside the organization that ensured QUACK’s survival.

4. Straight Asian Ethnic Organizations
Unless the issue involves HIV/AIDS, most Asian Pacific Islander CBOs do not consider Asian LBTs as part of their constituents. Most do not have anti-discrimination policies that include protections based on gender identity or sexual orientation. Staff are not trained on these issues or given sensitivity training in assisting LBT clients. When the Korean Americans for Civil Rights in Los Angeles requested various API/CBOs to lend their names to opposing an anti-gay state initiative sponsored by Korean Republicans, some API/CBOs readily agreed but the staff in others could not decide and punted the issue to their Board of Directors to decide.

Another example is the experience of the South Asian Lesbian and Gay Association (SALGA) when it sought permission to participate in the annual India Day Parade in New York City. For seven years, the Federation of Indian Associations (FIA) refused to permit SALGA to march in the parade citing various
and inconsistently applied bureaucratic reasons. The FIA pointed out that SALGA was not an FIA member while allowing other non-FIA members to participate. With the support of local politicians, community organizations, South Asian activist groups and gay and lesbian organizations, SALGA was finally granted permission to participate in 2000.

5. Barriers to Social Services

Given the cultural isolation, homophobia, racism, and sexism that exists in the communities queer Asian women are a part of, it is not surprising that their needs are not being met. For example, a Korean-speaking lesbian recently arrived in the US might be extremely reluctant to approach a Korean social service agency for fear of exposure as a lesbian. She might not be aware of the existence of LGBT social service providers and even if she found one, she probably would not find Korean-speaking staff and culturally appropriate services. Mental health professionals and other service providers are generally ill-equipped to address the multiple oppression queer Asian women face.

Families of Asian lesbians have few resources to deal with the coming out process. For example, Parents, Families & Friends of Lesbians and Gays (PFLAG), with over 350 chapters around the country, supports families through the coming out process, but participants in their support groups are 95% Caucasian and sessions are conducted in English only. A monolingual immigrant parent of an Asian lesbian would not be able to participate. Even English-speaking Asian American parents find it difficult to participate because, as previously noted, many Asians believe that they must solve their problems within the family, and are reluctant to seek outside support and share private family issues with outsiders. Unfortunately, despite repeated requests to do so, PFLAG has not adequately address Asian LBTs’ needs.

State of the Queer Asian American Women’s Movement

Asian American LBTs have been organizing since the mid 1970’s when they first discovered each other within the “feminist” or “women’s” movement and people of color communities during the time of Third World Liberation politics. Initially, Asian women and lesbians came together for support. By the mid 1980’s, local Asian lesbian groups throughout the US began to form in San Francisco, New York, Los Angeles, Chicago, Minneapolis, Madison, Boston, and other major metropolitan areas. The first and only national grassroots organization, the Asian Pacific Lesbian, Bisexual Women’s and Transgender Network (APLBTN), was founded in 1987, networking nearly 31 queer Asian women’s organizations across the country. APLBTN-pronounced “Apple Button,” was the central force behind the Presidential Commission’s November 13, 2000 hearing, organizing the APLBTN Task Force, which prepared several hundred pages of a report and testimonies that were presented to the Commission. APLBTN operates without an office, staff, or budget. As an all-volunteer organization, APLBTN has organized
many events, including national and regional retreats and conferences, and an Activist Institute to provide leadership training and skills-building for young Asian LBTs. It has mobilized contingents to participate in national marches in Washington DC and New York and educated its constituency on political issues such as pushing for support of same-sex marriage within the Japanese American Citizens League, Hawai‘i, California, and Vermont. APLBTN is very fragile and as an all-volunteer organization, has mostly functioned more as a network or clearinghouse. Yet, despite formidable challenges, APLBTN recently obtained 501(c)(3) status and hopes to fund-raise to continue its Activist Institute to train community organizers and to hire staff to implement programs to meet the needs of the Asian LBT community.

Since 1998, the Family Violence Prevention Fund and the Queer Asian Women's Project of the San Francisco-based Asian Women's Shelter have convened national and local focus groups of survivors of same-gender relationship violence and their advocates. At the end of 2001, they hope to launch a national network, Queer Asian and Pacific Islander Women on Domestic Violence, to provide resources to Asian LGBT programs around the country and for these programs to share information and experiences. Also in San Francisco, is Trikone, an organization for South Asian LGBTs. Trikone engages in social and political activities that affirm member’s South Asian identity and sexual orientation and puts out an award winning magazine that regularly features articles on issues important to queer South Asian women. Recently, as part of its efforts to address homophobia and discrimination, Trikone worked with the Gay & Lesbian Alliance Against Defamation (GLADD) on a media kit to encourage fair, accurate and inclusive reporting on Asian Pacific American LGBTs.

There are few funded projects in the country that serve the needs of queer Asian women. None are autonomous lesbian organizations or specifically Asian LBT organizations, but projects within larger API service agencies. The Queer Asian Women's Project of the Asian Women's Shelter in San Francisco addresses domestic violence within LBT relationships and Persimmon Space is a project of Asian Pacific Islander Coalition for HIV and AIDS in New York. As explained above, QUACK in San Francisco is a tenuous program. One Asian lesbian activist explained that because the Asian lesbian and bisexual community has not been devastated by the AIDS pandemic, it never attracted the same level of funding that enabled Asian gay and bisexual men to build permanent staffed organizations. As a result, the Asian lesbian and bisexual women’s organizations have evolved over the past 25 years in fits and starts. Other Asian LBT activists note that most of what exists today are primarily social support groups, which is a necessary stage in their development. However, a major factor that has prevented most from taking the next step of engaging in political activities or transforming themselves into civil and human rights advocacy organizations has been the lack of funding, not the lack of desire.

In fact, there are numerous queer Asian activists working on the myriad of issues facing their varied identities, be it immigrant, language, health care, employment, or civil rights for the larger Asian community or the lesbian and gay rights
movement. They have also been involved with national lesbian and gay rights organizations including Lambda Legal Defense and Education Fund in New York, the National Center for Lesbian Rights in San Francisco, the Audre Lorde Project in New York, and the National Gay and Lesbian Task Force in Washington DC. However, none of these organizations has adequately addressed the needs of the Asian American LBT community.

**Recommendations for Action**

► Convene Asian LBT activists to discuss their issues, concerns, and priorities and the responsive civil and human rights advocacy needed for systemic change and to begin discussion on the institutions and infrastructure they need to carry out their social change agenda.

► Conduct research to determine the distinct issues, concerns, and needs of Asian LBT women in each of the specific Asian ethnic subgroups and whether these needs are being met.
References


Asian Pacific Islander Lesbian, Bisexual, Queer & Transgender Task Force, Report to the Presidential Commission on Asian Americans and Pacific Islanders, November 13, 2000


Family Violence Prevention Fund and Asian Women's Shelter, “The Queer Asian Women's Community, Understanding Same Gender Relationship Violence & Meeting the Needs of All Battered Women,” draft, date unknown


Appendix: List of Interviewees

**Chapter 1  Welfare Reform's Impact on Asian American Women**

Jane Bai & Eric Tang, Committee Against Anti-Asian Violence (CAAAV), New York, NY
Luz Buitrago, Center on Poverty Law and Economic Opportunity, Oakland, CA
Rini Chakaborty, California Immigrant Welfare Collaborative, Sacramento, CA
Christina Chung & Dennis Kao, Asian Pacific American Legal Center, Los Angeles, CA
Gen Fujioka, Asian Law Caucus, San Francisco, CA
Dan Hosang, Grass Roots Organizing for Welfare Leadership (GROWL), Oakland, CA
Pat McManaman, Na Loio No Na Kanaka, Honolulu, HI
Karen Narasaki, National Asian Pacific American Legal Consortium (NAPALC), Washington DC
Doris Ng, Equal Rights Advocates, San Francisco, CA
Amy Taylor, New York Immigrant Coalition, New York, NY
Jim Williams & Naomi Zanderer, National Employment Law Project, New York, NY
Chia Vang, Urban Institute of Minnesota, Minneapolis/St. Paul, MN
Ka Ying Yang, Southeast Asia Resource Action Center (SEARAC), Washington DC
Ly Vang, Association for Advancement of Hmong Women, Minneapolis, MN
Naly Yang, Women's Association of Hmong and Lao, St. Paul, MN
Sung Kyu Yun, National Korean American Services and Education Consortium (NAKASEC), Flushing, NY
Wendy Zimmerman, Urban Institute, Washington DC

**Chapter 2  Trafficking in Asian Women**

Muneer Ahmad. Asian Pacific American Legal Center, Los Angeles, CA
Nahar Alam, Andolan, New York, NY
Hae-Jung Cho & Kathryn McMahon, Coalition Against Slavery and Trafficking in Women (CAST), Los Angeles, CA
Helen Choi, Asian Task Force Against Domestic Violence, Boston, MA
Lana Hoang, Asian Women's Shelter, San Francisco, CA
Ken Kimmerling & Chumtoli Huq, American Legal Defense and Education Fund, New York, NY
Ivy Lee, Asian Law Caucus, San Francisco, CA
Carol Pier, Human Rights Watch, Washington DC
Debra Suh, Center for the Pacific Asian Family, Los Angeles, CA
Joy Zarembka, Campaign for Migrant Domestic Workers Rights c/o Institute for Policy Studies, Washington DC
Chapter 3  Asian American Garment Workers
Margaret Fung & Ken Kimberling, Asian American Legal Defense and Education Fund (AALDEF), New York, NY
Tarry Hum, Department of Urban Studies, Queens College, City University of New York, Flushing, NY
Nan Laffuay, Asian Immigrant Women Advocates, Oakland, CA
Joanne Lum & Karah Newton, National Mobilization Against Sweat Shops, New York, NY
Hina Shah, Asian Law Caucus, San Francisco, CA
Betty Yu, Chinese Staff & Workers Association, New York, NY

Chapter 4  Other Low Wage Workers
Hi-Tech Sweatshops
Doris Ng, Equal Rights Advocates, San Francisco, CA
Raquel Sancho, Santa Clara Center for Occupational Safety and Health, San Jose, CA
Hina Shah, Asian Law Caucus, San Francisco, CA

Domestic Workers
Nahar Alam, Andolan, New York, NY
Jane Bai, Ai Jen Poo & Caroline De Leon, Committee Against Anti-Asian Violence, New York, NY
Lillian Galedo, Filipinos for Affirmative Action, Oakland, CA
Ken Kimmerling & Chumtoli Huq, Asian American Legal Defense and Education Fund, New York, NY

Homecare Workers
Mila Thomas, SEIU Local 616, Oakland, CA

Chapter 5  Health Care Needs
May Akimine, Kalihi Palama Health Center, Honolulu, HI
Lisa Hasegawa, Office of the White House Initiative on Asian Americans and Pacific Islanders, Rockville, MD
Allicyn Hikida Tasaka, Hawai‘i State Commission on the Status of Women, Honolulu, HI
Afton Hirohama, National Asian Women’s Health Organization, San Francisco, CA
Val Kanuha, University of Hawai‘i - School of Social Work, Honolulu, HI
Rod Lew & Karen Rezai, Association of Asian and Pacific Islander Community Health Organizations (AAPCHO), Oakland, CA
Eveline Shen & Gina Acebo, Asians and Pacific Islanders for Reproductive Health, Oakland, CA
Shobha Srinivasan & Tessie Guillermo, Asian & Pacific Islander American Health Forum, San Francisco, CA
Chapter 6  Sexual and Reproductive Freedom

Cindy Choi, Environmental Justice Fund, Los Angeles, CA
Vanessa Chong, American Civil Liberties Union of Hawai’i, Honolulu, HI
Lisa Ikemoto, Loyola Law School, Los Angeles, CA
Miriam Kuppermann, University of California – San Francisco, San Francisco, CA
Peggy Saika, Oakland, CA
Eveline Shen & Gina Acebo, Asians and Pacific Islanders for Reproductive Health, Oakland, CA

Chapter 7  Domestic Violence

Judy Chen, Washington State Coalition Against Domestic Violence, Seattle, WA
Colleen Ching, Pat McManaman, Jodi Nishioka, Na Loio No Na Kanaka, Honolulu, HI
Chic Dabby, Asian and Pacific Islander Domestic Violence Institute, San Francisco, CA
Ivy Lee, Asian Law Caucus, San Francisco, CA
Pacyinz Lyfoung, Asian Women United, Minneapolis, St. Paul, MN
Janice Kaguuyutan, NOW Legal Defense and Education Fund, Washington DC
Leni Marin and Debbie Lee, Family Violence Prevention Fund, San Francisco, CA
Beckie Masaki, Asian Women’s Shelter, San Francisco, CA
Mee Moua, Hmong Bar Association, Roseville, MN
Gail Pendleton, National Immigration Project–National Lawyer’s Guild, Boston, MA
Bo Thao, Hmong Women’s Action Team, St. Paul, MN

Chapter 8  Hmong Women in the US

May Ying Ly, Hmong Women’s Heritage Association, Sacramento, CA
Pacyinz Lyfoung, Asian Women United, St. Paul/Minneapolis, MN
Mee Moua, Hmong Bar Association, Roseville, MN
Bo Thao, Hmong National Development, Inc., Washington DC
Chia Vang, Urban Institute of Minnesota, St. Paul/Minneapolis, MN
Deu Yang, St. Paul, MN
Ly Vang, Association for Advancement of Hmong Women, Minneapolis, MN
Naly Yang, Women’s Association of Hmong and Lao, St. Paul, MN

Chapter 9  Hawai’i

Amy Agbayani, Student Equity Education and Diversity, University of Hawai’i—Student Services. Honolulu, HI
Joyce Chinen, University of Hawai’i-West Oahu, Pearl City, HI
Ku’umealoha Gomes, Kua’ana Student Services, University of Hawai’i – Manoa, Honolulu, HI
Marya Grambs, Honolulu, HI
William Hoshijo, Hawai’i Civil Rights Commission, Honolulu, HI
Chris Iijima, William S. Richardson School of Law, University of Hawai’i—Manoa, Honolulu, HI
Kyle Kajihiro, American Friends Service Committee, Honolulu, HI
Val Kanuha, University of Hawai’i-School of Social Work, Honolulu, HI
Mire Koikari, UH-Manoa-Women’s Studies, Honolulu, HI
Ah Quon McElrath, Honolulu, HI
Pat McManaman, Na Loio No Na Kanaka, Honolulu, HI
Leanne Miyasato, Asian Pacific American Women’s Leadership Institute, Honolulu, HI
Hermina Morita, Hawai’i State Representative—District 12, Honolulu, HI
Suzanne Chun Oakland, Hawai’i State Senator—District 14, Honolulu, HI

Chapter 10  Asian American LBTs

Dipti Ghosh, Trikone – Bay Area, San Jose CA
Judy Han, Korean Americans for Civil Rights, Los Angeles/Oakland, CA
Alice Hom, Los Angeles, CA
Christina Hwang, National Center for Lesbian Rights, San Francisco, CA
Val Kanuha, University of Hawai’i - School of Social Work, Honolulu, HI
Christine Lipat, Astrea Lesbian Action Foundation, New York, NY
Trinity Ordona, API-PFLAG Family Project and Institute for Health and Aging, San Francisco, CA
Janet SooHoo & Anne Xuan Clark, Asian Pacific Lesbian Bisexual Queer Transgender Task Force, Seattle, WA
Doreena Wong, Asian Pacific Lesbian Bisexual Network, San Francisco, CA and National Health Law Project, Los Angeles, CA
Lora Jo Foo was born and raised in San Francisco’s Chinatown community where she began working in a garment sweatshop at the age of 11. After college, she returned to work in a garment factory, this time as a union organizer, and spent eight years organizing among garment and hotel workers. She was a leader in the 1980 citywide strike of 6,000 San Francisco hotel workers. In 1985, after graduating from law school, she joined a labor law firm representing unions. In 1992, she joined the staff of the Asian Law Caucus in San Francisco where for eight years she successfully litigated numerous cases on behalf of Asian immigrant workers in sweatshop industries in their struggles for decent wages and working conditions. In 1999, she led a statewide coalition of worker advocates in passing the Garment Accountability Bill which holds apparel manufacturers responsible for the labor law violations of their contractors. In 1995, she co-founded California-based Sweatshop Watch and has been its Board President since its inception. In 1996, she co-founded the National Asian Pacific American Women’s Forum. Lora Jo recently returned to school and obtained her Masters in Public Administration from the Kennedy School of Government, Harvard University in June 2002. She lives in the San Francisco Bay Area.
Credits

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