

**Asian American Elders Bibliography**

**Casado, B., & Sacco, P. (2012). Correlates of caregiver burden among family caregivers of older Korean Americans. *The Journal of Gerontology, Series B: Psychological Sciences and Social Sciences, 67*(3), 331-336.**

Little is known about informal caregiving among ethnic minorities caring for elders. This study aimed to identify correlates of caregiver burden among caregivers caring for older Korean American family members. The sample included 146 caregivers who identified as Korean American. Characteristics of context, primary stressors, primary appraisals, and resources were measured as possible correlates of burden. Findings indicate that being female and the care recipient’s spouse were associated with higher levels of burden, where as having a large support network and more care management self-efficacy were associated with lower burden. Authors discuss how knowledge of these correlates might inform future interventions.

**Dong, X., Chang, E.S., Wong, E., & Simon, M. (2012). The perceptions, social determinants, and negative health outcomes associated with depressive symptoms among U.S. Chinese older adults. *The Gerontologist, 52*(5), 650-663.**

The recent growth of the older U.S. Chinese population requires greater understanding of their unique health needs. This study examined perceptions and social determinants of depressive symptoms and their impact on health and well-being among community-dwelling Chinese older adults in Chicago. Researchers utilized a community-based participatory research approach to partner with the Chinatown population in Chicago and data were collected using questionnaires and semi-structured focus groups with 78 Chinese older adults. Findings suggest that depressive symptoms were common among the sample and feelings of helplessness, feelings of dissatisfaction with life, boredom, loss of interest in activities, suicidal ideation, and feelings of worthlessness. Associated factors include societal conflict, family conflict, financial constraints, personality characteristics, and worsening physical health. The authors call for improved health education and awareness of resources to support treatment of depression and depressive symptoms among the older Chinese population in the U.S.

**Enguidanos, S., Yonashiro-Cho, J., & Cote, S. (2013). Knowledge and perceptions of hospice care of Chinese older adults. *Journal of the American Geriatrics Society, 61*(6), 993-998**.

This study sought to assess the factors associated with hospice enrollment among a growing population of Asian older adults. This study specifically explored Chinese Americans’ knowledge, understanding, and perceptions of hospice care through three focus groups. Focus groups were conducted in English, Mandarin, and Cantonese and participants were recruited from a Chinese social service agency. Discussions were audiotaped, transcribed and coded for themes. Thirty-four individuals participated in the focus groups. Themes included lack of knowledge, death timing, burden, peaceful death, and quality of care. These results suggest the need for education and outreach to Chinese American’s.

**Fuller-Thompson, E., Brennenstuhl, S., & Hurd, M. (2011). Comparison of disability rates among older adults in aggregated and separate Asian American/Pacific Islander subpopulations. *American Journal of Public Health, 101*(1), 94-100.**

This study examined prevalence and adjusted odds of 4 types of disability (functional limitations, limitations in activities of daily living, cognitive problems, and blindness or deafness) among 7 groups of Asian American/Pacific Islander (AAPI) subpopulations and compared results to non-Hispanic whites. Data were from the 2006 American Community Survey and included 524 Hawaiian/Pacific Islander, 2,357 Vietnamese, 3,230 Japanese, 5,109 Filipino, 2,942 Asian Indian, 6,034 Chinese, and 641,177 non-Hispanic whites adults aged 55 and older. Rates of disability varied among AAPI subpopulations more so than among non-Hispanic whites and Asian older adults had better disability outcomes that non-Hispanic whites on average.

**Han, H-R., Choi, Y.J., Kim, M.T., Lee, J.E., & Kim, K.B. (2008). Experiences and challenges of informal caregiving for Korean immigrants. *Journal of Advanced Nursing, 63*(5), 517-526.**

This study explored the caregiving experiences of Korean Americans from their own perspectives. This qualitative design used focus groups with 24 caregivers and thematic analysis conducted by bilingual researchers. Three themes were identified including competing priorities and beliefs, the impact of caregiving, and the need for culturally-tailored education and support systems. Ten subthemes were also discussed in detail. The caregiving experience of Korean American families would benefit from culturally-tailored and focused outreach programs and social services.

**Hinton, L., Tran, J.N., Tran, C., & Hinton, D. (2008). Religious and spiritual dimensions of the Vietnamese dementia caregiving experience. *Hallym International Journal of Aging, 10*(2), 139-160.**

This study examined the role of religion and spirituality in caregiving for family members with dementia among a sample of Vietnamese refugees. In-depth interviews were completed with 9 Vietnamese caregivers and transcriptions were analyzed, revealing the following themes: spirituality was related to caregiving through 1) the caregiver’s own suffering, 2) their motivations for providing care, and/or 3) their understanding of illness. Key terms included: karma, blessings, grace, peace of mind and sacrifice. Religions discussed include: Animism, Buddhism, Taoism, Confucianism, and Catholicism. Authors discuss these themes as being relevant for psychotherapeutic interventions with caregivers.

**Horne, M. & Tierney, S. (2012). What are the barriers and facilitators to exercise and physical activity uptake and adherence among South Asian older adults: A systematic review of qualitative studies. *Preventive Medicine, 55*(4), 276-284.**

This study systematically synthesized experiences of South Asian older adults with exercise and physical activity by reviewing qualitative research published from January 2000 to October 2011. Out of 26 studies analyzed by full text, 11 were included in the review. A concept derived from the review was the influence of empowering and disempowering contexts on physical activity levels. Themes covered areas of: communication, relationships, beliefs, and environment. Results suggest the importance of generating group norms by utilizing community resources.

**Hsueh, K-H., Hu, J., & Clarke-Ekong, S. (2008). Acculturation in filial practices among U.S. Chinese caregivers. *Qualitative Health Research, 18*(6), 775-785.**

Researchers examined acculturation in filial practices among Chinese immigrants living in the Midwest U.S. Individual interviews and focus group included a total of 21 participants who the authors identify as situational-reciprocal-filial caregivers. Factors that influenced acceptance of new filial practices included financial status and the past relationship with the care receiver. Motivations to acculturate included being overwhelmed, situational constraints related to immigrant status, access to resources, the need for a coordinated approach to filial responsibilities. Filial motivations discussed included love, social expectation, tradition, and meeting personal values. Authors discuss implications for culturally-sensitive caregiving support services and training.

**Janevic, M. R., & Connell, C. (2001). Racial, ethnic and cultural differences in the dementia caregiving experience. *The Gerontologist, 41*(3), 334-348.**

This literature review assesses 21 studies that compared two or more racial, ethnic, national, or cultural groups on aspects of the dementia caregiving experience. The studies included samples such as African Americans, Chinese/Chinese-Americans, Koreans/Korean-Americans, Latinos, Whites, and 14 European Union countries. The results showed mixed findings in terms of coping and social support suggesting a lack of available support among minority groups compare to Whites. The authors suggest using both quantitative and qualitative methods to specify the pathways by which race, ethnicity, and culture affect the caregiving experience, as well as expanding the focus on not only the primary caregivers but also their families and networks.

**Jang, Y., Kim, G., & Chiriboga, D. (2010). Knowledge of Alzheimer’s disease, feelings of shame, and awareness of services among Korean American elders. *The Journal of Aging and Health, 22*(4), 419-433.**

This study explored predictors of knowledge of Alzheimer’s disease (AD), feelings of shame, and awareness of AD-related services among Korean American older adults. The sample included 675 Korean American older adults and analyses included hierarchical linear models and logistic regression models. Higher levels of education and acculturation were found to predict greater knowledge of AD and feelings of shame were reported more often from individuals with lower education, acculturation, and knowledge of AD. Those who already had a family member with AD knew more about available services related to AD. Findings indicate the importance of education and acculturation in knowledge of AD, shame, and awareness of AD services.

**Jang, Y., Park, N. S., Kim, G., Kwag, K. H., Roh, S., & Chiriboga, D. A. (2012). The association between self-rated mental health and symptoms of depression in Korean American older adults. *Aging & Mental Health, 16*(4), 481-485.**

The primary aim of this study was to examine the association between self-rated mental health (SRMH) with three measures of depressive symptoms (the short form CES-D, GDS-SF, and PHQ-9) among a sample of 420 community-dwelling Korean American older adults. Participants were from the New York City metropolitan area. Hierarchical regression models estimated an array of predictors including sociodemographic characteristics, physical health-related variables, and the three measures of depressive symptoms. Results indicated that all three measures of symptoms were interrelated and each made a significant contribution to multivariate models. Findings indicate a strong link between measures of depressive symptoms and SRMH.

**Jang, Y., Shin, J., Cho, S., Kim, G., & Chiriboga, D. A. (2011). The interactive role of chronic medical conditions and sleep disturbance in predicting depressive symptoms among Korean American older adults. *Aging & Mental Health, 15*(2), 198-203.**

This study examined effects of chronic medical conditions and sleep disturbance on depressive symptoms using a sample of 675 community-dwelling Korean American older adults that had high levels of reported depressive symptoms. Hierarchical regression models of depressive symptoms were estimated using the following predictors: demographic variables, chronic medical conditions, sleep disturbance, and an interaction between chronic medical conditions and sleep disturbance. Both chronic conditions and sleep disturbance were significant independent factors for depressive symptoms when controlling for demographic variables. The interaction was also a significant factor, implying that the coexistence of these conditions should be closely monitored by healthcare professionals.

**Kim, J-H., & Knight, B.G. (2008). Effects of caregiver stress, coping styles, and social support on the physical health of Korean American caregivers. *The Gerontologist, 48*(3), 287-299.**

This paper discusses findings from a study of direct and indirect effects of caregiver status on the physical health of Korean American caregivers. The study assessed direct effects of status and indirect impacts through various coping styles and quantity and quality of informal social support. A sample of 87 caregivers was matched to 87 non-caregivers and path models were compared across the two groups. Findings indicate that caregiver status is associated with poor health outcomes among caregivers, but negative effects were found in objective health markers but not the subjective markers. Indirect effects were found only for cortisol levels through the quality of informal social support. Findings suggest that adverse health outcomes among caregivers may go unnoticed, even among the caregivers themselves.

**Kim, G., Chiriboga, D. A., Jang, Y., Lee, S., Huang, C. H., & Parmelee, P. (2010). Health status of older Asian Americans in California. *Journal of the American Geriatrics Society, 58(*10), 2003-2008.**

This study examined physical and mental health status of five subgroups of Asian American older adults. The sample included Chinese, Japanese, Korean, Vietnamese, and Filipino adults aged 60 and older who participate in the 2007 California Health Interview Survey (CHIS). Differences in background characteristics and physical and mental health conditions. Patterns in chronic disease, disease comorbidity, and disability rates were compared across groups. Vietnamese and Filipinos reported poorer physical health than Chinese, Japanese, and Korean older adults. Japanese older adults reported the lower psychological distress. Findings suggest various differences in health status among subgroups that are relevant for provision of health care services to Asian American older adults.

**Kimura, J., & Browne, C.V. (2009). Eldercare in a Filipino community: Older women’s attitudes toward caregiving and service use. *Journal of Women & Aging, 21*(3), 229-243.**

Authors report preliminary findings from focus groups with older Filipino women living in the U.S. regarding attitudes toward caregiving and utilization of formal services. The greatest factors in attitudes were cultural values and the economic challenges related to immigration status. Participants mainly reported positive attitudes toward the use of formal services. Future research should seek to confirm and further explore these findings, producing important implications for practice and research with culturally diverse populations.

**Ko, E. & Berkman, C. S. (2012). Advance directives among Korean American older adults: Knowledge, attitudes, and behavior. *Journal of Gerontological Social Work, 55*(6), 448-502.**

This study explored knowledge, attitudes, and behaviors around advance directives and how cultural values influence beliefs by holding three focus groups with 23 older Korean American adults. Findings suggest that advance directive are seen as helpful for ensuring preferences are follows and honored and for relieving the burden of decision-making among family members. However, some participants reported a preference to focus on living and seemed to think advance directives were contrary to this focus. Authors suggest that culturally sensitive education about advance directives should be established to support use among Korean American older adults.

**Kong, E-H., Deatrick, J.A., & Evans, L.K. (2010). The experiences of Korean immigrant caregivers of non-English-speaking older relatives with dementia in American nursing homes. *Qualitative Health Research, 20*(3), 319-329.**

This study sought to describe the experiences of Korean immigrant caregiver’s experiences of nursing home placement of non-English-speaking older relatives with dementia. Seventeen semi-structured interviews were conducted with 10 Korean immigrant family caregivers. Six themes were identified, including: “I never thought about a nursing home”, “If I think in a Korean way…”, “nursing home staff cannot communicate with …”, “care recipient maintains Korean culture”, “nursing home services are better than expected, but…”, and “care recipient is more vulnerable due to dementia.”

**Lee, Y., & Bronstein, L.R. (2010). When do Korean-American dementia caregivers find meaning in caregiving? The role of culture and differences between spouse and child caregivers. *Journal of Ethnic & Cultural Diversity in Social Work, 19*, 73-86.**

This study explored the role of culture in how Korean-American dementia caregivers find meaning in caregiving and compares findings from spouses with adult child caregivers. Analyses included data from 65 Korean-American caregivers. The strongest predictor of finding meaning in caregiving was the amount of received social support and child caregivers found more meaning in caregiving than spouses.

**Lee, K. H. & Yoon, D. P. (2011). Factors influencing the general well-being of low-income Korean immigrant elders. *Social Work, 56*(3), 269-279.**

This study explored factors affecting general well-being of low-income Korean immigrant elders. The sample included 206 older adults living in Los Angeles County and Orange County, CA. Dimensions of general well-being included: anxiety, depression, positive well-being, self-control, vitality, and general health. Significant predictors of anxiety, depression, low self-control, low vitality, and low general health included lack of English proficiency and longer residence in the U. S. Losing a spouse significantly predicted low vitality and financial problems were associated with lower positive well-being. Social support and spiritual coping were significant protective factors for anxiety, depression, positive well-being, and vitality. The discussion covers implications for culturally competent social work practice among Korean immigrant elders.

**Lee, S., Martinez, G., Ma, G. X., Robinson, Hsu, C. E., Robinson, E. S., Bawa, J., & Juon, H. S. (2010). Barriers to health care access in 13 Asian American communities. *American Journal of Health Behavior, 34*(1), 21-30.**

This study explored health care use among Asian Americans through focus groups with 174 Asian American adults living in 13 Asian American communities in Maryland. Four major barriers to accessing health care were reported: financial, physical, communication, and cultural attitudes. Authors suggest that future research and health policy consider underrepresented Asian American subgroups in order to reflect their needs.

**Li, Y., Kao, D., & Dinh, T. Q. (2014). Correlates of neighborhood environment with walking among older Asian Americans. *Journal of Aging and Health, 26*(4).**

There is limited research on the physical activity of older Asian Americans. This study examined associations between neighborhood factors and walking among a sample of 1,045 adults aged 55 and older who participated in the 2003 California Health Interview Survey. Five subgroups were represented; Chinese, Filipino, Japanese, Korean, and Vietnamese. Findings show that older Asian Americans walk more than non-Hispanic whites and higher neighborhood cohesion was associated with higher rates of walking among most subgroups, but not all.

**Mokuau, N., & Tomioka, M. (2010). Caregiving and older Japanese adults: Lessons learned from the periodical literature. *Journal of Gerontological Social Work, 53*(2), 117-136.**

As a minority group in the U.S., the Japanese American population is reputed to have one of the longest life expectancies. Their experiences of aging should be explored for added information on the intersection of aging and culture. This article is a periodic review of the literature regarding older Japanese adults to assess the association between aging and culture. Two important lessons emerged: the influence of culture on caregiving and women as caregivers. Authors explore implications for social work practice.

**Mondia, S., Hichenberg, S., Kerr, E., Eisenberg, M., Kissane, D. W. (2014). The impact of Asian American value systems on palliative care: Illustrative cases from the family-focused grief therapy trial. *American Journal of Hospice & Palliative Medicine, 31*(4).**

This article is focused on culturally sensitive practice with Asian American families. Authors report findings from a randomized controlled trial of family therapy that began during pallitative care and continued into bereavement. Three Asian American families were followed through 26 therapy sessions using transcriptions and therapists’ notes. The authors provide a narrative for each family along with common themes such as family closeness, respect for hierarchy, gender roles, intergenerational tensions, shame, and limited emotional expression.

**Moon, A. & Cho, I. (2012). Psychology of Asian American older adults: Status, challenges, and strengths. In Chang, E. C., & Downey, C. A. (Eds.) *Handbook of Race and Development in Mental Health*, p. 189-206.**

This chapter reports on major challenges to supporting the mental health of Asian American older adults including stigmatization of mental health disorders, a lack of knowledge about disorders, and underutilization of services. Sources of resiliency include familial support, spirituality, peer support, and social networks. Authors also report demographic characteristics and prevalence rates of mental disorders among this population.

**Mui, A. C. & Lee, E. S. (2013). Correlates of depression among Chinese and Korean immigrant elders in the United States. *Ageing International*, March 2013.**

This study examined effects of life stressors, religiosity, and family coping resources on depression in a sample of older Chinese and Korean immigrants in the U.S. and examined ethnic group differences. Secondary analysis was conducted with data from the Asian American Elders in New York City Survey. Findings indicate that 46% of the Chinese participants and 24% of the Korean participants were depressed and both rates were higher than among older Americans of other ethnicities in related literature. Korean immigrants show higher levels of religiosity than Chinese participants and religiosity had a significant positive effect on depression among the Korean group, but not among the Chinese group.

**National Center on Elder Abuse. (2013). *Mistreatment of Asian Pacific Islander (API) Elders.* Retrieved from:** <http://www.ncea.aoa.gov/Resources/Publication/docs/NCEA_API_ResearchBrief_2013.pdf>

This research briefsummarizes issues of cultural competency and culturally appropriate practice with Asian Pacific Islander (API) elders as well as common perceptions of elder abuse and family roles among API family members, and cultural considerations in identifying and communicating about abusive situations. The brief then summarizes research findings of rates and types of abuse among various ethnic groups within API communities including: Indian, Chinese, Filipino, Japanese, Korean, and Vietnamese populations.

**Park, J., Roh, S., & Yeo, Y. (2012). Religiosity, social support, and life satisfaction among elderly Korean immigrants. *The Gerontologist, 52*(5), 641-649.**

This study was designed to tests Smith’s (2003) theory of religious effects to explore the relationship between religiosity and life satisfaction and to test social support as a mediating factor. The sample included 200 Korean immigrant older adults in New York City aged 65 to 89 years. The results indicate that greater religiosity predicts greater life satisfaction and this relationship was partially mediated by social support. Authors discuss implications for social service provision and suggest future study with diverse ethnic groups of older immigrants.

**Shibusawa, T. & Mui, A. C. (2010). Health status and health services utilization among older Asian Indian immigrants. *Journal of Immigrant and Minority Health, 12*(4), 527-533.**

This study examined health status and use of physicians, hospitals, emergency departments, and traditional medicine among older Asian Indian immigrants. Data were collected as part of the Asian American Elders in New York City (AAENYC) Study (*N*=100). Having medical insurance predicted hospital stays and number of medical conditions predicted the likelihood of physician visits. Medical insurance was also a predictor of emergency department visits and low English proficiency was related to traditional medicine.

**Sorkin, D. H., Nguyen, H., & Ngo-Metzger, Q. (2011). Assessing the mental health needs and barriers to care among a diverse sample of Asian American older adults. *Journal of General Internal Medicine, 26(*6), 595-602.**

A wide mix of cultures and immigration experiences put Asian Americans at risk for mental health problems, but little is known about how the mental health needs of Asian subgroups differ and how they compare to non-Hispanic whites. Data were from the cross-sectional 2007 California Health Interview Survey (N=20,712). Results indicate that Korean and Filipino Americans were more likely to report symptoms indicating mental distress compared to non-Hispanic whites, but were less likely to have visited a primary care provider or take prescription medications. Japanese Americans were less likely to report symptoms of mental distress and less likely to use mental health services than non-Hispanic whites. Findings indicate there are unmet mental health needs among subgroups of Asian Americans.

**Sun, F., Ong, R., & Burnette, D. (2012). The influence of ethnicity and culture on dementia caregiving: A review of empirical studies on Chinese Americans. *American Journal of Alzheimer’s Disease and Other Dementias, 27*(1), 13-22.**

This study sought to identify the cultural and ethnic influences on dementia caregiving among Chinese American families through a systematic review of the relevant literature. Eighteen articles published between 1990 and 2011 were included in the review. Based on this review, the authors suggest that caregivers’ beliefs about dementia and family harmony are important cultural factors affecting help-seeking behaviors and participating in research. These may also be key factors affecting caregivers’ appraisals of stress, coping, and formal and informal support.

**Tang, M. (2011). Can cultural values help explain the positive aspects of caregiving among Chinese American caregivers? *Journal of Gerontological Social Work, 54*, 551-569.**

Using the caregivers’ stress model, this study examined positive aspects of caregiving in a sample of 113 Chinese American family caregivers providing care to older relatives. Hierarchical and multiple regression analysis indicate that caregiver background characteristics, stressors, and cultural values have direct effects on positive aspects of caregiving. Caregivers’ health and age also predicted positive aspects of caregiving.

**Yancura, L. A. (2013). Justifications for caregiving in White, Asian American, and Native Hawaiian grandparents raising grandchildren. *Journals of Gerontology Series B: Psychological Sciences and Social Sciences, 68*(1), 139-144.**

Among family members caring for older adults, race has been shown to predict justifications for caregiving. However, little research has explored whether race predicts justifications among Grandparents Raising Grandchildren (GRG). This study examined justifications for caregiving among 259 GRG registered as primarily caregivers with the children’s schools. Justifications were measured using the 10-item Cultural Justifications for Caregiving (CJCG) scale. Two factors from the CJCG scale emerged: custom and responsibility. Race was predictive of custom, with Native Hawaiian GRG having higher scores than Whites or Asian Americans. Native Hawaiian GRG also scored higher than Asian Americans on responsibility. These findings support the hypothesis that justifications differ among racial identification.