

# ARCHIVE

The ARCH Newsletter

March 2018

## NEWS

- We welcome Minji Kim, PhD who is a new Associate Member. [Dr. Kim](#) is a Postdoctoral Fellow at the UCSF Center of Tobacco Control Research and Education. Her research specializes in anti-tobacco messaging and health communications.



Hospital Clinics, Chinese Community Health Plan, Northeast Medical Services, NICOS Chinese Health Coalition, San Francisco Cancer Initiative among others and is funded by the California Colorectal Cancer Coalition.

- Dr. Van Ta Park and her team's All of Us Journey outreach event to promote Precision Medicine research participation on 1/28/18 in San Jose was very successful, with 250 Vietnamese, Chinese, and Korean Americans participating in the event.

- ARCH endorses the efforts of San Francisco Kids vs. Big Tobacco, a coalition of parents, doctors, health organizations and community groups working to protect children and youth from the addictions of flavored tobacco products. For more information and to join the effort to defend the ban on the sale of flavored tobacco products in San Francisco, please visit their [website](#).



groups working to protect children and youth from the addictions of flavored tobacco products. For more information and to join the effort to

- Chinese Community Health Resource Center (CCRHC) announced a new website providing colorectal cancer education materials and videos in Vietnamese and English. The [website](#) was created as a joint effort between ARCH, CCHRC, Chinese

## GRANTS CONGRATULATIONS TO ARCH INVESTIGATORS FOR THE FOLLOWING NEW GRANTS

- Drs. Angela Sun (PI) and Janice Tsoh (Co-I) received a California Tobacco-Related Disease Research Program (TRDRP) High Impact 2-year pilot grant to develop a WeChat-delivered intervention to promote smoking cessation among 120 patients at the Chinese Hospital Clinics.



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## PUBLICATIONS

CONGRATULATIONS TO ARCH INVESTIGATORS FOR THE FOLLOWING PUBLICATIONS

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- Drs. Tsoh, McPhee, and Nguyen published [“Preferences for Depression Help-Seeking Among Vietnamese American Adults”](#) in Community Mental Health Journal on the results of a population-based telephone survey highlighting promising channels to deliver education about depression and effective help-seeking resources, particularly the importance of family doctors and social networks.
- Drs. Jih, Tsoh, Burke, Pasick, McPhee, Nguyen, and Mr. Woo published [“The Role of Physician Recommendation in Colorectal Cancer Screening Receipt Among Immigrant Chinese Americans”](#) in the Journal of Immigrant and Minority Health. In a study with 725 Chinese Americans, participants whose physician had recommended all colorectal cancer (CRC) screening modalities were significantly more likely to report ever having screening (adjusted odds ratio 4.29, 95% CI 1.26-14.68) and being up-to-date (4.06, 95% CI 2.13-7.74) than those who reported that their physician only recommended fecal occult blood test (FOBT).
- Dr. Park and her team published [“Perspectives and Insights from Vietnamese American Behavioral Health Professionals on How to Culturally Tailor a Vietnamese Dementia Caregiving Program”](#) in Clinical Gerontologist showing the importance of war, immigration, and culture on stress and depression among Vietnamese American caregivers of patients with dementia.
- Dr. Kanaya and collaborators published [“Inflammation and coronary artery calcification in South Asians: The Mediators of Atherosclerosis in South Asians Living in America \(MASALA\) study”](#) in Atherosclerosis showing that inflammatory biomarkers were not associated with coronary artery calcium presence or severity in South Asians.

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# ABSTRACTS REVIEWS

PREPARED BY VAN TA PARK

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November 1, 2017 - February 28, 2018

## Highlights

- A study with 95 middle-aged and older Vietnamese Americans found limited knowledge about treatment and cure of Alzheimer's disease, calling for urgent needs for educational outreach to improve knowledge about Alzheimer's disease among Vietnamese Americans.
- A study from the California Health Interview Survey 2011/2012 found that Asians had significantly lower adjusted odds ratios for both mental distress and serious mental illness compared to non-Hispanic Whites. However, when Asians were divided into subgroups and compared to Whites, Vietnamese and Japanese subgroups were significantly lower than Whites for mental distress while Koreans were significantly higher. Vietnamese and Chinese were found to have significantly less serious mental illness than Whites in the subgroup analyses.
- A study with 196 Korean American (KA) women found the breast cancer screening rate to be low. Perceived discrimination in health care, trust in health care providers, and distrust in the health care system directly or indirectly influenced breast cancer screening adherence in KA women.
- In a web-based survey administered to a convenience sample of South Asian women living in the U.S. (n = 535), information was gathered on experience/exposure to violence and adverse health outcomes. This study found that acculturation status is a key factor with respect to childhood verbal, physical, and sexual abuse, as well as body esteem and an individual's well-being.
- The mean acculturative stress score in a cross-sectional study with 107 first generation Korean Americans was higher than findings from prior studies of Korean immigrants in the United States or Canada, with the rates of obesity and hypertension higher than prior reports of Korean Americans or Koreans residing in Korea.
- Factors that shape API experiences accessing and engaging in community-based treatment from the perspective of 40 treatment providers who work with API clients in treatment programs in San Francisco and Los Angeles are reported in a qualitative study.
- A meta-analytic review on acculturation and alcohol use was conducted. The authors found that acculturation appeared to be more robustly associated with alcohol consumption and intensity of hazardous alcohol use, but not drinking-related problems.
- Tummala-Narra et al.'s study identified potential risk and protective factors in mental health, while underscoring the multidimensional aspects of social and contextual factors that contribute to mental health and help seeking among Asian American college students.



**Title:** Preferences for Depression Help-Seeking Among Vietnamese American Adults.

**Authors:** [Kim-Mozeleski JE<sup>1</sup>](#), [Tsoh JY<sup>2</sup>](#), [Gildengorin G<sup>3</sup>](#), [Cao LH<sup>4</sup>](#), [Ho T<sup>5</sup>](#), [Kohli S<sup>6</sup>](#), [Lam H<sup>3</sup>](#), [Wong C<sup>3</sup>](#), [Stewart S<sup>7</sup>](#), [McPhee SJ<sup>3</sup>](#), [Nguyen TT<sup>3</sup>](#).

**Publication:** [Community Ment Health J.](#) 2017 Nov 11. doi: 10.1007/s10597-017-0199-3. [Epub ahead of print] <https://www.ncbi.nlm.nih.gov/pubmed/29129006>

**Abstract:**

Culture impacts help-seeking preferences. We examined Vietnamese Americans' help-seeking preferences for depressive symptoms, through a telephone survey (N = 1666). A vignette describing an age- and gender-matched individual with depression was presented, and respondents chose from a list of options and provided open-ended responses about their help-seeking preferences. Results showed that 78.3% would seek professional help, either from a family doctor, a mental health provider, or both; 54.4% preferred to seek help from a family doctor but not from a mental health provider. Most (82.1%) would prefer to talk to family or friends, 62.2% would prefer to look up information, and 50.1% would prefer to get spiritual help. Logistic regression analysis revealed that preferences for non-professional help-seeking options (such as talking to friends or family, looking up information, and getting spiritual help), health care access, and perceived poor health, were associated with increased odds of preferring professional help-seeking. This population-based study of Vietnamese Americans highlight promising channels to deliver education about depression and effective help-seeking resources, particularly the importance of family doctors and social networks. Furthermore, addressing barriers in access to care remains a critical component of promoting professional help-seeking.



**Title:** The Role of Physician Recommendation in Colorectal Cancer Screening Receipt Among Immigrant Chinese Americans.

**Authors:** [Jih J](#)<sup>1,2,3</sup>, [Nguyen MP](#)<sup>4</sup>, [Ly I](#)<sup>4</sup>, [Tsoh JY](#)<sup>4,5</sup>, [Le GM](#)<sup>4,6</sup>, [Woo K](#)<sup>7</sup>, [Chan E](#)<sup>7</sup>, [Gildengorin G](#)<sup>8</sup>, [Stewart SL](#)<sup>9</sup>, [Burke A](#)<sup>4,10</sup>, [Pasick R](#)<sup>4,8</sup>, [McPhee SJ](#)<sup>4,8</sup>, [Nguyen TT](#)<sup>4,8</sup>.

**Publication:** *J Immigr Minor Health*. 2017 Nov 22. doi: 10.1007/s10903-017-0679-0. [Epub ahead of print] <https://www.ncbi.nlm.nih.gov/pubmed/29168060>

**Abstract:**

Chinese Americans have low colorectal cancer (CRC) screening rates. It is unclear whether physicians should offer all CRC screening modalities (fecal occult blood test [FOBT], sigmoidoscopy, colonoscopy) to Chinese Americans to increase screening. Seven hundred and twenty-five Chinese Americans were asked in a survey if their physician had ever recommended CRC screening and to self-report receipt and type of CRC screening. Participants whose physician had recommended all CRC screening modalities were significantly more likely to report ever having screening (adjusted odds ratio 4.29, 95% CI 1.26-14.68) and being up-to-date (4.06, 95% CI 2.13-7.74) than those who reported that their physician only recommended FOBT. Participants who received a recommendation of only one type of screening did not report a significant difference in ever having or being up-to-date for screening. A potential strategy to increase CRC screening among Chinese Americans is for clinicians to recommend all available CRC screening modalities to each patient.



# Asian American Research Center on Health

**Title:** Perspectives and Insights from Vietnamese American Mental Health Professionals on How to Culturally Tailor a Vietnamese Dementia Caregiving Program.

**Authors:** [Ta Park V1](#), [Nguyen K2](#), [Tran Y2](#), [Yeo G3](#), [Tiet Q4](#), [Suen J2](#), [Gallagher-Thompson D5,6](#).

## Author information

**Publication:** [Clin Gerontol](#). 2018 Jan 30:1-16. doi: 10.1080/07317115.2018.1432734. [Epub ahead of print] <https://www.ncbi.nlm.nih.gov/pubmed/29419364>

## **Abstract:**

**OBJECTIVE:** Little is known about dementia and caregiving among the rapidly growing Vietnamese American population. This qualitative study elicited insights on culturally tailoring an intervention to address mental health needs in Vietnamese American dementia caregivers from Vietnamese American mental health professionals.

**METHODS:** Eight Vietnamese American mental health professionals were interviewed to explore: experiences working with and needs of the community; Vietnamese attitudes toward treatment; and acculturation in Vietnamese caregiving. Participants provided recommendations on tailoring a program for Vietnamese dementia caregivers. Content analysis of their responses was conducted.

**RESULTS:** Themes included: a) caregivers' unique needs and experiences; b) different waves of immigration and acculturation levels affect views on mental health, treatment, and caregiving; c) traditions and beliefs on caregiving; d) mental health, help-seeking and health services; e) how to culturally tailor a program for Vietnamese dementia caregivers; and f) cultural acceptance of the program.

**CONCLUSIONS:** An intervention to reduce stress and depression among Vietnamese American dementia caregivers should recognize the special risks of the experiences of war and immigration of the caregivers as well as the pressure of the expectations of the Vietnamese culture on family care. For the program to be acceptable and effective, it needs to consider all aspects of caregivers' health, and incorporate Vietnamese cultural values/beliefs.

**CLINICAL IMPLICATIONS:** A successful Vietnamese dementia caregiver intervention should include traditional Vietnamese values/beliefs, holistic experiences, spirituality, and background/immigration experiences. Evidence-based programs may be used with this population if they are culturally tailored.

**KEYWORDS:** Vietnamese; behavioral health professionals; dementia caregiving

PMID: 29419364 DOI: [10.1080/07317115.2018.1432734](https://doi.org/10.1080/07317115.2018.1432734)



**Title:** Inflammation and coronary artery calcification in South Asians: The Mediators of Atherosclerosis in South Asians Living in America (MASALA) study.

**Authors:** [Mehta A1](#), [Patel J2](#), [Al Rifai M3](#), [Ayers CR4](#), [Neeland IJ5](#), [Kanaya AM6](#), [Kandula N7](#), [Blaha MJ8](#), [Nasir K9](#), [Blumenthal RS8](#), [Joshi PH10](#).

## Author information

**Publication:** [Atherosclerosis](#). 2018 Jan 29;270:49-56. doi: 10.1016/j.atherosclerosis.2018.01.033. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29407888>

## **Abstract:**

### BACKGROUND AND AIMS:

Inflammatory biomarkers and adipocytokines (IBA) may contribute to atherosclerosis by promoting vascular inflammation. The association between IBA and coronary artery calcium (CAC), a marker of subclinical atherosclerosis, is not well defined in South Asians (SA). We hypothesized that IBA (high sensitivity C-reactive protein [hsCRP], tumor necrosis factor alpha [TNF- $\alpha$ ], adiponectin, and leptin) were independently associated with and improved discrimination of CAC among SA.

### METHODS:

We analyzed IBA and CAC among participants in the prospective Mediators of Atherosclerosis in South Asians Living in America (MASALA) study. We used logistic regression models to examine cross-sectional associations of IBA with CAC presence (CAC >0) and severity (CAC >100), and C-statistics to assess the incremental contribution of each IBA to traditional risk factors (TRF) from the AHA/ACC Pooled Cohort Equations (PCE) for discrimination of CAC.

### RESULTS:

Among 906 participants in the MASALA study, women (n = 420) had significantly higher levels of hsCRP, adiponectin, and leptin but lower levels of TNF- $\alpha$  than men (p < .01 for all). There was no significant association between any of the four IBA and either CAC category in multivariable-adjusted models, respectively. Lastly, none of the four IBA improved discrimination of CAC presence or severity when added to elements of the PCE.

### CONCLUSIONS:

IBA were not associated with CAC presence or severity in the MASALA population. IBA did not help identify SA at risk of subclinical atherosclerosis, although associations with ASCVD events remain unclear. In SA, CAC may have a distinct pathophysiology independent of inflammation as measured by IBA.



**Title:** Decision-making about prenatal genetic testing among pregnant Korean-American women.

**Authors:** [Jun M](#)<sup>1</sup>, [Thongpriwan V](#)<sup>2</sup>, [Choi J](#)<sup>3</sup>, [Sook Choi K](#)<sup>4</sup>, [Anderson G](#)<sup>5</sup>.

**Publication:** [Midwifery](#). 2018 Jan;56:128-134. doi: 10.1016/j.midw.2017.10.003. Epub 2017 Oct 6.  
<https://www.ncbi.nlm.nih.gov/pubmed/29101864>

**Abstract:**

*OBJECTIVE:*

to understand the prenatal genetic testing decision-making processes among pregnant Korean-American women.

*DESIGN:*

a qualitative, descriptive research design.

*PARTICIPANTS:*

referrals and snowball sampling techniques were used to recruit 10 Korean-American women who had been recommended for amniocentesis during pregnancy in the United States (U.S.). All participants were born in Korea and had immigrated to the U.S. The number of years living in the U.S. ranged from 4 to 11 (M=5.7).

*SETTING:*

various regional areas of the U.S.

*MEASUREMENTS AND FINDINGS:*

the researchers conducted face-to-face or phone interviews using semi-structured interview guides. The interviews were conducted in the Korean language and lasted approximately 50-100minutes. The interview guides focused on the decision-making process and experiences with prenatal genetic testing, as well as reflections on the decisions. Four core themes emerged related to the participants' decision-making processes, according to their descriptions. These themes are (1) facing the challenges of decision-making, (2) seeking support, (3) determining one's preferred role in the decision-making process, and (4) feeling uncomfortable with the degree of patient autonomy in U.S. health care.

*KEY CONCLUSION:*

researchers concluded that many distinctive factors influence the decision-making processes used by pregnant Korean-American women. The results have the potential to improve shared decision-making practices regarding prenatal genetic testing.

*IMPLICATIONS FOR PRACTICE:*

clinicians need to understand the sociocultural underpinnings of pregnant Korean-American immigrants regarding prenatal genetic screening and testing as an initial step to engage these patients in shared decision-making.





**Title:** Ethnic socialization and ethnic identity development among internationally adopted Korean American adolescents: A seven-year follow-up.

**Authors:** [Hu AW<sup>1</sup>](#), [Zhou X<sup>1</sup>](#), [Lee RM<sup>1</sup>](#).

**Publication:** [Dev Psychol.](#) 2017 Nov;53(11):2066-2077. doi: 10.1037/dev0000421.

<https://www.ncbi.nlm.nih.gov/pubmed/29094970>

**Abstract:**

The relationship between ethnic socialization by parents, peers, and ethnic identity development was examined over a 7-year time span in a sample of 116 internationally adopted Korean American adolescents. Parent report data was collected in 2007 (Time 1 [T1]) when the adopted child was between 7 and 13 years old and again in 2014 at ages 13 to 20 years old (Time 2 [T2]). Adolescent report data also was collected in 2014. We examined differences in parent and adolescent reports of parental ethnic socialization at T2, changes in parent reports of ethnic socialization from T1 to T2, and the relationship among ethnic socialization by parents at T1 and T2, ethnic socialization by peers at T2, and ethnic identity exploration and resolution at T2. Results indicated parents reported higher levels of parental ethnic socialization than adolescents did at T2. Parent reports of parental ethnic socialization also decreased between childhood and adolescence. Adolescents reported higher parental ethnic socialization than peer ethnic socialization at T2. Path analysis demonstrated positive indirect pathways among parental ethnic socialization at T1, parental ethnic socialization and peer ethnic socialization at T2, and ethnic identity exploration and ethnic identity resolution at T2. The study highlights the cultural experiences of transracial, transnational adopted individuals, the role of both parents and peers in ethnic socialization and ethnic identity development, and the importance of longitudinal and multi-informant methodology. (PsycINFO Database Record.



**Title:** Concept analysis of dietary biculturalism in Filipino immigrants within the context of cardiovascular risk.

**Authors:** [Serafica R<sup>1</sup>](#), [Knurick J<sup>2</sup>](#), [Morris BT<sup>3</sup>](#).

**Publication:** [Nurs Forum](#). 2017 Oct 30. doi: 10.1111/nuf.12232. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29084348>

**Abstract:**

*BACKGROUND:*

Dietary biculturalism is an emerging phenomenon among the Filipino immigrant population. Determining the concept of dietary biculturalism on this specific population will unravel some of the obscurities of emerging dietary patterns within the context of cardiovascular risk.

*PURPOSE:*

The purpose of this article is to provide a concept analysis of dietary biculturalism within the health context of cardiovascular risk using Walker and Avant's method as an organizing framework.

*METHODS:*

A detailed literature review was performed on the basis of population specificity (Filipinos) use of dietary patterns as variable and theoretical literary models of acculturation.

*FINDINGS:*

The generalizability of published research on this issue is problematic since researchers have not addressed the unhealthy traditional foods component that one may consume in addition to the Western foods.

*NURSING IMPLICATIONS:*

Nurse researchers should focus on the detrimental effects of unhealthy traditional foods that may be relevant in explaining some of the cardiovascular risk factors affecting this population. Nurses and practitioners should take care to query not only about the frequency of ethnic food consumption, but also types, and amounts among their Filipino patients.



# Asian American Research Center on Health

**Title:** Family meals then and now: A qualitative investigation of intergenerational transmission of family meal practices in a racially/ethnically diverse and immigrant population.

**Authors:** [Trofholz AC](#)<sup>1</sup>, [Thao MS](#)<sup>2</sup>, [Donley M](#)<sup>3</sup>, [Smith M](#)<sup>4</sup>, [Isaac H](#)<sup>5</sup>, [Berge JM](#)<sup>5</sup>.

**Publication:** [Appetite](#). 2018 Feb 1;121:163-172. doi: 10.1016/j.appet.2017.11.084. Epub 2017 Nov 8.  
<https://www.ncbi.nlm.nih.gov/pubmed/29128396>

**Abstract:**

Having frequent family meals has consistently been associated with better health outcomes in children/adolescents. It is important to identify how intergenerational transmission of family meal practices occurs to help families benefit from the protective nature of family meals. Limited studies exist that explore the intergenerational transmission of family meal practices, particularly among racially/ethnically diverse and immigrant populations. This study explores how parents describe differences and similarities between meals "then" and "now", lessons they learned as children about family meals, lessons they passed onto their children, the challenges of carrying out family meals, and how families handle the barriers/challenges to intergenerational transmission of family meal practices. The study was conducted with a sample of African American, Native American, Latino, Hmong, Somali, and White families (25/category). Qualitative themes were explored with the overall sample, by race/ethnicity, immigrant status, and by time in the United States (US) as an immigrant. Parents overwhelmingly reported learning as children that family meals were important and conveying this message to their own children. Differences existed among racial/ethnic groups and time in the US as an immigrant. For example, Somali parents frequently endorsed having no challenges with intergenerational transmission of family meal practices. Immigrant parents in the US for a longer period of time were more likely to endorse learning/teaching about family meal importance, that the food eaten now is different than growing up, that a chaotic environment is a challenge to having family meals, and that they accommodate family member's schedules when planning family meals. Results demonstrate that exploring a parent's early family meal experiences may be important when intervening with parents from diverse racial/ethnic and immigrant populations when trying to improve or increase family meal practices.



# Asian American Research Center on Health

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**Title:** Ethnic differences in psychosocial factors in methadone maintenance: Hmong versus non-Hmong.

**Authors:** [Bart G](#)<sup>1</sup>.

**Publication:** [J Ethn Subst Abuse](#). 2017 Nov 9:1-15. doi: 10.1080/15332640.2017.1371656. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29120275>

**Abstract:**

Little is known about the characteristics of U.S.-based Asian populations undergoing methadone maintenance treatment for opioid use disorders. We evaluated psychosocial factors in 76 Hmong and 130 non-Hmong on methadone maintenance for at least two months in a single urban methadone maintenance clinic. Assessments included the Addiction Severity Index 5th Edition, the Symptom Checklist-90, and the Structured Clinical Interview for DSM-IV Axis I Disorders. The Hmong were older, predominately male, and on lower doses of methadone than the non-Hmong. Hmong had significantly lower ASI composite scores across all dimensions except employment and legal. While the SCL-90 Global Severity Index (GSI) score did not differ between groups, the Hmong had lower scores in the interpersonal sensitivity, depression, anxiety, hostility, and paranoid ideation dimensions. Sixty-seven percent of Hmong and 29% of non-Hmong were without Axis I diagnoses ( $p < .001$ ). There was no difference between the groups in DSM-IV substance use diagnoses. The extent to which these psychosocial differences impact methadone dose requirements and treatment outcomes in Hmong and non-Hmong remains unknown.



# Asian American Research Center on Health

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**Title:** Vietnamese Oral Health Beliefs and Practices: Impact on the Utilization of Western Preventive Oral Health Care.

**Authors:** [Nguyen KYT](#), [Smallidge DL](#), [Boyd LD](#), [Rainchuso L](#).

**Publication:** [J Dent Hyg](#). 2017 Feb;91(1):49-56.

<https://www.ncbi.nlm.nih.gov/pubmed/29118151>

**Abstract:**

**Purpose:** Infrequent use of the Western health care by the Vietnamese may be explained by deeply-rooted traditional oral health beliefs and practices unique to the Asian culture. This study investigated Vietnamese oral health beliefs and practices and their relationship to the utilization of Western preventive oral health care services among Vietnamese-Americans.

**Methods:** An exploratory, cross-sectional survey design with a convenience sample of 140 participants (n = 140) was used for this study. Participants were recruited on site of a Vietnamese-owned business, with questionnaires consisting of 28 questions that were distributed in hard copy by the principal investigator (PI) on multiple occasions and at various times of the day.

**Results:** Spearman Rank Correlations tests showed participants who agreed with the statement, "Regular dental visits will help prevent dental problems," were more likely to utilize medical health services ( $p < 0.05$ ) and visit a dentist if their "gums were bleeding" ( $p < 0.05$ ). However, only 22.86% of the participants would visit a dentist if experiencing a toothache. Despite results showing a strong association between the use of medical health care services and the belief that dental visits can prevent future dental health problems, participants did not believe in seeking Western oral health care for all dental health issues. No statistical significance was found between age, gender, primary language, years spent in the United States, education level, religion and the Vietnamese survey participants' individual oral beliefs and practices.

**Conclusion:** The results suggest that Vietnamese Americans holding the belief that dental visits help prevent oral health problems, were more likely to utilize Western health care services. The study also supports existing literature that Vietnamese oral health beliefs and practices impact the use of Western health care services.



**Title:** Knowledge of Alzheimer's disease among Vietnamese Americans and correlates of their knowledge about Alzheimer's disease.

**Authors:** [Lee SE](#)<sup>1</sup>, [Casado BL](#)<sup>2</sup>.

**Publication:** [Dementia \(London\)](#). 2017 Jan 1;1471301217691616. doi: 10.1177/1471301217691616. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29149788>

**Abstract:**

The present study examined the knowledge of Alzheimer's disease and correlates of the disease knowledge among Vietnamese Americans. Cross-sectional survey interviews were conducted with 95 middle-aged and older Vietnamese Americans. Vietnamese Americans showed limited knowledge about Alzheimer's disease. Normalization of Alzheimer's disease in old age was prevalent. They lacked knowledge about treatment and cure of Alzheimer's disease. Those who reside longer in the U.S. and are more exposed to Alzheimer's disease are likely to have higher levels of Alzheimer's disease knowledge. Our study identified current Alzheimer's disease knowledge level and status, and areas of misconceptions and knowledge gaps among Vietnamese Americans, calling for urgent needs for educational outreach to improve knowledge about Alzheimer's disease among Vietnamese Americans. Information about who can be more or less knowledgeable about Alzheimer's disease can be used to strategize and tailor outreach efforts for different segments of the Vietnamese American population.



**Title:** Cervical Cancer Screening Experiences Among Chinese American Immigrant Women in the United States.

**Authors:** [Seo JY](#), [Li J](#), [Li K](#).

**Publication:** *J Obstet Gynecol Neonatal Nurs*. 2017 Nov 13. pii: S0884-2175(17)30434-3. doi: 10.1016/j.jogn.2017.10.003. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29144960>

**Abstract:**

*OBJECTIVE:*

To understand the experiences and perceptions of having cervical cancer screening tests and to explore the extant barriers to having the tests among first-generation Chinese American women in the United States.

*DESIGN:*

Qualitative, descriptive, phenomenological research.

*SETTING:*

Los Angeles, California.

*PARTICIPANTS:*

Snowball and purposive sampling of 12 Chinese American immigrant women ages 20 to 65 years.

*METHODS:*

Individual face-to-face, in-depth, semistructured interviews in which participants were asked about their experiences and perceptions about cervical cancer screening. Interviews were audiotaped, transcribed, and translated into English. Data analysis included comparing and distinguishing, collecting and counting, and presupposing and inferring.

*RESULTS:*

Through the analysis process, we identified four major themes that reflected the experiences, perceptions, and barriers to having cervical cancer screening among Chinese American women: Belief in a Healthy Lifestyle, Maintaining Privacy for Female Health Problems, Fear of Losing Control, and Feeling Vulnerable in an Unfamiliar Health Care System. These themes indicated that Chinese immigrant women in the United States face challenges to their cultural health beliefs and practices with regard to decision-making and health-seeking behaviors related to cervical cancer screening. They felt more vulnerable as immigrants because of systematic barriers to navigation of the unfamiliar health care system and limited resources.

*CONCLUSION:*

Women's health care providers should be aware of and give consideration to cultural differences through the provision of more educational information and comfort to Chinese immigrant women who seek cervical cancer screening. Ultimately, the development of culturally appropriate and affordable cancer prevention programs with effective strategies is important to ease Chinese American women's senses of vulnerability.



# Asian American Research Center on Health

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Title: Identifying as American among Adolescents from Asian Backgrounds.

**Authors:** [Kiang L](#)<sup>1</sup>, [Witkow MR](#)<sup>2</sup>.

**Publication:** [J Youth Adolesc.](#) 2017 Nov 21. doi: 10.1007/s10964-017-0776-3. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29164379>

**Abstract:**

An important aspect of identity development requires adolescents to consider and select the cultural label or labels that best fit with their conception of who they are. Yet, little is known about the longitudinal development of such labeling preferences and their possible links with adjustment. Using longitudinal data from 180 Asian Americans (60% female; 74% U.S.-born), intra-individual and group-level changes in adolescents' American label use were tracked. Over time, 48% chose an American label as their "best-fitting" label and 42% chose an American label at least once, but did not include an American label during at least one other time point. American label use was not associated with continuous measures of American identity, but the use of American labels was linked with lower levels of ethnic identity. American identity, whether indicated by label use or continuous scale scores, was generally linked with positive psychological and academic adjustment, with some effects of label use moderated by gender and generational status. Developmental implications of American cultural labels as markers of adolescent identity and broader adjustment are discussed.





**Title:** Chinese, Vietnamese and Asian Indian Parents' Perspectives About Well-Child Visits: a Qualitative Analysis.

**Authors:** [Ragavan M](#)<sup>1</sup>, [Li W](#)<sup>2</sup>, [Elwy AR](#)<sup>3</sup>, [Cowden J](#)<sup>4</sup>, [Bair-Merritt M](#)<sup>5</sup>.

**Publication:** [Acad Pediatr](#). 2017 Nov 17. pii: S1876-2859(17)30564-8. doi: 10.1016/j.acap.2017.11.003. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29157598>

**Abstract:**

*OBJECTIVES:*

Well-child visits are a critical component of pediatric healthcare; however, disparities in attendance and quality of care exist for Asian children. Limited research has explored Asian immigrant parents' perspectives about their well-child visit experience.

*METHODS:*

Qualitative interviews were conducted with Chinese, Vietnamese, and Asian Indian immigrant parents. Participants were recruited from community-based organizations in the Boston area. Interviews focused on parents' perceptions about well-child visits, including individual attitudes, social and cultural factors impacting their opinions, perceived behavioral control, and improving visits for Asian immigrant families. Data were coded and analyzed using thematic analysis.

*RESULTS:*

Fifty-one parents participated. Although participants reported attending well-child visits, they felt language barriers and unfamiliarity with US preventive healthcare may limit attendance for other Asian immigrant families. Some reported high-quality visits, while others described them as "too simple", recollecting healthcare experiences from their countries of origin where more tests were completed. Participants described seeking advice about their children's preventive care from elder family members. Many expressed the importance of culturally-concordant healthcare providers and culturally sensitive care, while others felt culture was less relevant. Differences emerged among the three subgroups around culturally-concordant care and traditional medicine.

*CONCLUSIONS:*

Querying parents about their past healthcare experiences and providing information about well-child visits may be useful when caring for immigrant families. Social influences on children's health outside of the parent-provider-child triad may also be important. Further work should explore how to deliver culturally sensitive care that not only considers a family's language preferences, but also their unique cultural identity.



# Asian American Research Center on Health

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**Title:** Barriers to Physical and Mental Health: Understanding the Intersecting Needs of Cambodian and Latino Residents in Urban Communities.

**Authors:** [D'Anna LH<sup>1</sup>](#), [Peong V<sup>2</sup>](#), [Sabado P<sup>3</sup>](#), [Valdez-Dadia A<sup>3</sup>](#), [Hansen MC<sup>4</sup>](#), [Canjura C<sup>3</sup>](#), [Hong M<sup>5</sup>](#).

**Publication:** [J Immigr Minor Health](#). 2017 Nov 30. doi: 10.1007/s10903-017-0677-2. [Epub ahead of print]  
<https://www.ncbi.nlm.nih.gov/pubmed/29189993>

**Abstract:**

A community needs assessment was conducted to explore barriers and facilitators to good physical and mental health among Cambodian and Latino residents in an urban community in Southern California. Thirty-six Cambodians and 29 Latinos completed the interviewer-facilitated survey administered door-to-door, and another 20 Cambodian and 18 Latino residents participated in focus groups. Crime, limited knowledge of positive health behaviors, lack of access to affordable healthcare, and lack of access to safe spaces for recreational activities were identified as threats to good health. Participant recommendations to support health in the community included increasing police presence to improve safety and reduce violence, and increasing opportunities/locations for physical exercise. While differences between Cambodian and Latino residents exist, the identified threats and suggested improvements were primarily associated with environmental factors, highlighting the need for systems level approaches that recognize the relationship between community context and health.



# Asian American Research Center on Health

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**Title:** Racial and Ethnic Differences in Mental Health among Asian Americans and Non-Hispanic Whites: Based on California Health Interview Survey.

**Authors:** [Park H<sup>1</sup>](#), [Choi E<sup>2</sup>](#), [Park YS<sup>3</sup>](#), [Wenzel JA<sup>4</sup>](#).

**Publication:** [Issues Ment Health Nurs.](#) 2017 Nov 28:1-7. doi: 10.1080/01612840.2017.1379575. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29182435>

**Abstract:**

While Asians are becoming the largest ethnic group in the United States, studies have focused on Asians as a single population. The purpose of this study was to explore the racial and ethnic mental health differences between non-Hispanic Whites and Asians, with an emphasis on understudied subgroups, from the California Health Interview Survey 2011/2012. In this data set Asians had significantly lower adjusted odds ratios for both mental distress and serious mental illness. However, when Asians were divided into subgroups and compared to Whites, Vietnamese and Japanese subgroups were significantly lower than Whites for mental distress while Koreans were significantly higher. Vietnamese and Chinese were found to have significantly less serious mental illness than Whites in the subgroup analyses. Our results underscore the importance of recognizing that Asian subgroups should not be overlooked, and all Asians should not automatically be treated as a homogenous group.



# Asian American Research Center on Health

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**Title:** Barriers to Health Care among Laotian Americans in Middle Tennessee.

**Authors:** [Saenphansiri X](#), [Wyant DK](#), [Wofford LG](#).

**Publication:** [J Health Care Poor Underserved](#). 2017;28(4):1537-1558. doi: 10.1353/hpu.2017.0132.

<https://www.ncbi.nlm.nih.gov/pubmed/29176113>

**Abstract:**

We examined barriers to health care among Laotian Americans in a Middle Tennessee community that included a Laotian-speaking practitioner. A Laotian American primary care clinic nurse practitioner surveyed 312 adult Laotian Americans. The dependent variable was whether respondents visited ( $n = 214, 77.8\%$ ) or did not visit ( $n = 61, 22.2\%$ ) primary care providers (PCP) in the last year. Chi-square analysis found visiting less likely if respondents were age 18-34 ( $p < .001$ ), born in U.S. ( $p < .001$ ), spent less time in U.S. ( $p = .010$ ), never married ( $p = .001$ ), lacked health insurance ( $p < .001$ ), or lacked a PCP ( $p < .001$ ). Chi-square analysis segmented by age found neither lack of English fluency nor preference for Laotian-speaking providers significantly reduced access, possibly because of the Laotian practitioner. Logistic regression found individuals with insurance five times more likely to visit and individuals with PCP 8.5 times more likely. Results support the value of training minority providers.



**Title:** Effects of Perceived Discrimination and Trust on Breast Cancer Screening among Korean American Women.

**Authors:** [Hong HC<sup>1</sup>](#), [Ferrans CE<sup>2</sup>](#), [Park C<sup>2</sup>](#), [Lee H<sup>3</sup>](#), [Quinn L<sup>2</sup>](#), [Collins EG<sup>2</sup>](#).

**Publication:** [Womens Health Issues](#). 2017 Dec 6. pii: S1049-3867(17)30167-6. doi: 10.1016/j.whi.2017.11.001. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29223326>

**Abstract:**

*OBJECTIVE:*

Korean American (KA) women continue to have lower breast cancer screening rates than other racial groups. Perceived discrimination and trust have been associated with breast cancer screening adherence, but little is known about the associations in KA women.

*METHODS:*

Surveys were completed by 196 KA women in the Chicago metropolitan area. Multiple and Firth logistic regression analyses were performed to identify factors (perceived discrimination, trust, acculturation, cultural beliefs, health care access) influencing breast cancer screening adherence (mammogram). In addition, SPSS macro PROCESS was used to examine the mediating role of trust between perceived discrimination and breast cancer screening adherence.

*RESULTS:*

Ninety-three percent of the women surveyed had health insurance and 54% reported having a mammogram in past 2 years. Predictors of having a mammogram were knowing where to go for a mammogram, having a regular doctor or usual place for health care, greater trust in health care providers, and lower distrust in the health care system. Perceived discrimination had an indirect effect on breast cancer screening through trust.

*CONCLUSIONS:*

The breast cancer screening rate among KA women is low. Perceived discrimination in health care, trust in health care providers, and distrust in the health care system directly or indirectly influenced breast cancer screening adherence in KA women. Trust is a factor that can be strengthened with educational interventions.



# Asian American Research Center on Health

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**Title:** Understanding Health, Violence, and Acculturation Among South Asian Women in the US.

**Authors:** [Nagaraj NC](#)<sup>1</sup>, [Vyas AN](#)<sup>2</sup>, [McDonnell KA](#)<sup>2</sup>, [DiPietro L](#)<sup>2,3</sup>.

**Publication:** [J Community Health](#). 2017 Dec 7. doi: 10.1007/s10900-017-0450-4. [Epub ahead of print]  
<https://www.ncbi.nlm.nih.gov/pubmed/29218541>

**Abstract:**

The devastating effects of experiencing violence in childhood are seen well into adulthood. This has been particularly difficult to assess among South Asians living in the U.S., due to a lack of disaggregated data on this ethnic group. In a web-based survey administered to a convenience sample of South Asian women living in the U.S. (n = 535), information was gathered on experience/exposure to childhood violence; adult intimate partner violence; and adverse health outcomes, including ever suicide ideation/attempt, experiences of quality of life and body esteem in adulthood. Further, an individual's acculturation levels were measured specifically looking at cultural identity which was guided by Berry's biculturalism model. This study found that acculturation status is a key factor with respect to childhood verbal, physical, and sexual abuse, as well as body esteem and an individual's well-being. These results suggest that acculturation plays a key role for childhood violence, as well as key adult health indicators. The findings in this study, suggest that more research is warranted to better understand the complex relationships between acculturation status and health. While studies of South Asian immigrants have increased substantially, the study on how acculturation influences family violence and health outcomes has lagged behind. The findings in this study will provide guidance for future work in understanding how acculturation can play a key role in addressing the health and well-being of South Asian women in the U.S.



# Asian American Research Center on Health

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**Title:** Talking about cancer: Explaining differences in social support among Chinese American and European American breast cancer survivors.

**Authors:** [Hsu BY<sup>1</sup>](#), [Chentsova Dutton Y<sup>1</sup>](#), [Adams IF<sup>2</sup>](#), [Gomez SL<sup>3</sup>](#), [Allen L<sup>3</sup>](#), [Huang E<sup>1</sup>](#), [Wang JH<sup>1</sup>](#).

**Publication:** [J Health Psychol.](#) 2017 Dec 1:1359105317745967. doi: 10.1177/1359105317745967. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29243524>

**Abstract:**

Cultural models of emotional disclosure and its impact on seeking support are understudied in the context of cancer diagnosis. We argue that two different cultural norms must be considered: (1) the importance of emotional disclosure and (2) attitudes toward seeking support from loved ones. Our interviews with 37 foreign-born Chinese American and 23 European American breast cancer survivors revealed differences in disclosure of cancer diagnosis and perception of social support. Both Chinese American and European American survivors receive and provide emotional and social support with loved ones, but their manifestations of disclosure and help-seeking behaviors are culturally specific.



**Title:** Associations among physical symptoms, fear of cancer recurrence, and emotional well-being among Chinese American breast cancer survivors: a path model.

**Authors:** [Cho D](#)<sup>1,2</sup>, [Chu Q](#)<sup>3</sup>, [Lu Q](#)<sup>4</sup>.

**Publication:** [Support Care Cancer](#). 2017 Dec 14. doi: 10.1007/s00520-017-4010-3. [Epub ahead of print] <https://www.ncbi.nlm.nih.gov/pubmed/29243170>

**Abstract:**

*PURPOSE:*

Most existing studies on fear of cancer recurrence (FCR) are exploratory without theoretical underpinnings and have been conducted among non-Hispanic Whites. Based on theoretical models, we hypothesized that more physical symptoms (pain and fatigue) would be associated with higher FCR, which, in turn would be related to lower emotional well-being among Chinese American breast cancer survivors.

*METHODS:*

Participants were 77 Chinese American women who were diagnosed with breast cancer of stages 0-III. A cross-sectional path analysis was conducted with a bootstrapping method.

*RESULTS:*

The final model showed that indirect paths from pain interference to emotional well-being and from fatigue to emotional well-being via FCR were significant. That is, higher levels of pain interference and fatigue were associated with higher FCR, which was further related to lower emotional well-being.

*CONCLUSIONS:*

To our best knowledge, this is the first theory-driven study that investigates FCR experiences among Chinese American breast cancer survivors. Our study might provide a more comprehensive understanding of FCR as it simultaneously shows predictors and a psychological consequence of FCR. Results need to be replicated in large, racially/ethnically diverse samples and longitudinal studies.





**Title:** Acculturative stress in Korean Americans.

**Authors:** [Shin CN](#)<sup>1</sup>, [Dirksen SR](#)<sup>2</sup>, [Suh B](#)<sup>3</sup>.

**Publication:** [Appl Nurs Res](#). 2017 Dec;38:70-75. doi: 10.1016/j.apnr.2017.09.010. Epub 2017 Sep 25.

<https://www.ncbi.nlm.nih.gov/pubmed/29241523>

**Abstract:**

*BACKGROUND:*

Acculturative stress is known to contribute to chronic diseases among many immigrants and yet this association in Korean Americans remains unclear.

*AIM:*

The study purpose was to examine the level of acculturative stress in Korean Americans and to determine if correlations existed with personal and physiological factors.

*METHODS:*

An exploratory, cross-sectional, descriptive study was conducted in a sample of 107 Korean American adults. Data on acculturative stress and personal factors were collected using a survey questionnaire in addition to a direct measure of physiological factors (i.e., body mass index and blood pressure).

*RESULTS:*

All 107 participants were first-generation Koreans. Most participants were women (66.4%), with a mean age of 53.9±10.7, married (88.8%), and with a college education (84.2%). Acculturative stress was associated with a number of personal factors (i.e., arrival age, years of U.S education, years of U.S. residency, English proficiency), and the personal factors of gender, age, employment status, and years of U.S. residency were associated with the physiological factors. No statistically significant associations were found between acculturative stress and physiological factors.

*CONCLUSIONS:*

The mean acculturative stress score in this study was higher than findings from prior studies of Korean immigrants in the United States or Canada, with the rates of obesity and hypertension higher than prior reports of Korean Americans or Koreans residing in Korea. Future study is necessary with a larger sample from a variety of different geographic areas of the United States to examine further the impact of acculturative stress on physiological factors during the process of acculturation.



## Asian American Research Center on Health

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**Title:** Time-Varying Associations of Parent-Adolescent Cultural Conflict and Youth Adjustment Among Chinese American Families.

**Authors:** [Juang LP](#), [Hou Y](#), [Bayless SD](#), [Kim SY](#).

**Publication:** [Dev Psychol](#). 2017 Dec 14. doi: 10.1037/dev0000475. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29239636>

**Abstract:**

The purpose of this study was to examine time-varying associations of parent-adolescent cultural conflict with depressive symptoms and grade point average (GPA) among Chinese Americans from ages 11-22. We pooled two independently collected longitudinal data sets (N = 760 at Wave 1) and used time-varying effect modeling (TVEM) to show that the frequency of parent-adolescent conflict increased during early adolescence (12 years), peaked at mid adolescence (16 years), and gradually decreased throughout late adolescence and young adulthood. In general, parent-adolescent conflict was associated with negative adjustment (more depressive symptoms and lower GPA) more strongly during mid- to late-adolescence (15 to 17 years) compared with other developmental periods. These time-varying associations differed slightly by gender, at least for GPA. Our findings provide important developmental knowledge of parent-adolescent conflict for Chinese American youth and suggest that attention to conflict and links to adjustment is especially relevant during mid to late adolescence. Our study also illustrates the usefulness of integrative data analysis and TVEM to investigate how the strength of conflict-adjustment associations might change throughout development. (PsycINFO Database Record).



**Title:** Perceived Social Support Mediates the Longitudinal Relations between Ambivalence over Emotional Expression and Quality of Life among Chinese American Breast Cancer Survivors.

**Authors:** Tsai W<sup>1</sup>, Lu Q<sup>2</sup>.

**Publication:** *Int J Behav Med*. 2017 Dec 13. doi: 10.1007/s12529-017-9705-9. [Epub ahead of print]  
<https://www.ncbi.nlm.nih.gov/pubmed/29238936>

**Abstract:**

*PURPOSE:*

The present study examined perceived social support as a mediator of the longitudinal link between ambivalence over emotional expression (AEE) and quality of life among a sample of Chinese breast cancer survivors.

*METHODS:*

Ninety-six Chinese breast cancer survivors recruited from Southern California completed four surveys in total: (1) a baseline survey (T1), 1-month follow-up (T2), 3-month follow-up (T3), and 6-month follow-up (T4). Participants filled out a paper-pen questionnaire containing the Ambivalence over Emotional Expression Questionnaire (AEQ), the Functional Assessment of Cancer Therapy-General (FACT-G), and the Medical Outcomes Study Social Support Scale (MOS-SSS).

*RESULTS:*

Higher T1 AEE was associated with lower T1 social support ( $B = -0.01$ ,  $SE = 0.004$ ,  $p < 0.01$ ) which in turn was associated with lower quality of life at T2 ( $B = 2.98$ ,  $SE = 0.64$ ,  $p < 0.01$ ), T3 ( $B = 2.14$ ,  $SE = 0.54$ ,  $p < 0.01$ ), and T4 ( $B = 2.08$ ,  $SE = 0.68$ ,  $p < 0.01$ ).

*CONCLUSIONS:*

These results suggest that the harmful effect of AEE on quality of life is explained by reduced social support. Given the detrimental effects of AEE on social support and quality of life, future research on interventions that facilitate emotional disclosure is needed. Implications for the effects of Chinese culture on AEE are discussed.



# Asian American Research Center on Health

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**Title:** Structural factors affecting Asians and Pacific Islanders in community-based substance use treatment: Treatment provider perspectives.

**Authors:** [Chang JS](#)<sup>1,2</sup>, [Sorensen JL](#)<sup>1</sup>, [Masson CL](#)<sup>1</sup>, [Shopshire MS](#)<sup>1</sup>, [Hoffman K](#)<sup>3</sup>, [McCarty D](#)<sup>3</sup>, [Iguchi M](#)<sup>4</sup>.

**Publication:** [J Ethn Subst Abuse](#). 2017 Oct-Dec;16(4):479-494. doi: 10.1080/15332640.2017.1395384.  
<https://www.ncbi.nlm.nih.gov/pubmed/29236627>

**Abstract:**

Asians and Pacific Islanders (API) have large disparities in utilization of substance use treatment compared to other racial groups. In this study, we analyzed factors that shape API experiences accessing and engaging in community-based treatment from the perspective of treatment providers. We conducted semi-structured interviews with 40 treatment providers who work with API clients in treatment programs in San Francisco and Los Angeles. We analyzed the transcribed interview data in ATLAS.ti using a content analysis approach. There were three main findings. First, treatment providers found the API category itself is too broad and heterogeneous to meaningfully explain substance use patterns. Second, beyond race/ethnicity, structural factors such as poverty, neighborhood, housing, and age had an impact on API substance use. Third, factors such as family, immigration status, religion, language, stigma played complex roles in API treatment experiences, contingent on how client, programs, and providers attended to differences in these categories.



# Asian American Research Center on Health

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**Title:** Depression among older Japanese Americans: The impact of functional (ADL & IADL) and cognitive status.

**Authors:** [Kim BJ](#)<sup>1,2</sup>, [Liu L](#)<sup>2</sup>, [Nakaoka S](#)<sup>2</sup>, [Jang S](#)<sup>3</sup>, [Browne C](#)<sup>2</sup>.

**Publication:** [Soc Work Health Care](#). 2017 Dec 13:1-17. doi: 10.1080/00981389.2017.1397588. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29236614>

**Abstract:**

*PURPOSE:*

The objective of this article is to investigate the relationship between activities of daily living, instrumental activities of daily living, cognitive impairment, and depression among Japanese American elders.

*METHODS:*

A cross-sectional study of 207 older Japanese Americans (68 years and older) was conducted in Los Angeles, California and Honolulu, Hawaii. Independent variables included activities of daily living, instrumental activities of daily living, and cognitive functioning. Age, gender, marital status, and income were also identified. Depression was the dependent variable.

*RESULTS:*

Descriptive analyses were done to show group differences in terms of gender, age and marital status. Gender (male) and marital status (married) were the determinants of lower rates of depression. Lower rates of IADL and cognitive functioning were significant determinants of higher rates of depression among older Japanese Americans.

*CONCLUSIONS:*

This study provides empirical evidence that physical and cognitive functioning are directly associated with depression in older Japanese Americans. Social workers need to provide the services of ethnic-based via formal agencies in order to prevent depression of older Japanese Americans. Also, it is important to have sensitivity and competency to assess depressive symptoms and refer elders to an appropriate mental health agency.



**Title:** Relation of Social Constraints on Disclosure to Adjustment among Chinese American Cancer Survivors: A Multi-Processes Approach.

**Authors:** [Wong CCY<sup>1</sup>](#), [Warmoth K<sup>1</sup>](#), [Ivy S<sup>1</sup>](#), [Cheung B<sup>1</sup>](#), [Lu Q<sup>1</sup>](#).

**Publication:** [Psychooncology](#). 2017 Dec 12. doi: 10.1002/pon.4604. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29232487>

**Abstract:**

*PURPOSE:*

The present study examines the association between social constraints and depressive symptoms among Chinese American breast cancer survivors, and the mechanism underlying this association. A multi-processes model is tested to examine the mediating roles of ambivalence over emotional expression (AEE), avoidance, intrusive thoughts, and social support in the association between social constraints and depressive symptoms among Chinese American breast cancer survivors.

*METHODS:*

Ninety-six Chinese American breast cancer survivors were recruited from Chinese community organizations. They were asked to complete a questionnaire package that assessed social constraints, AEE, avoidance, intrusive thoughts, social support, depressive symptoms, and demographic information. Path analysis was conducted to test the hypothesized model.

*RESULTS:*

The overall and specific indirect effects of social constraints on depressive symptoms through AEE, avoidance, intrusive thoughts, and social support are significant. When the mediators are controlled for, the direct effect of social constraints on depressive symptoms is no longer significant.

*CONCLUSIONS:*

A multi-processes model of social constraints and depressive symptoms is tested in a sample of Chinese American breast cancer survivors. The findings suggest that the existence of multiple pathways, through which social constraints may associate with depressive symptoms among Chinese American breast cancer survivors.



**Title:** Dietary intake of soy and cruciferous vegetables and treatment-related symptoms in Chinese-American and non-Hispanic White breast cancer survivors.

**Authors:** [Nomura SJO](#)<sup>1</sup>, [Hwang YT](#)<sup>2</sup>, [Gomez SL](#)<sup>3</sup>, [Fung TT](#)<sup>4,5</sup>, [Yeh SL](#)<sup>6</sup>, [Dash C](#)<sup>1</sup>, [Allen L](#)<sup>3</sup>, [Philips S](#)<sup>7</sup>, [Hilakivi-Clarke L](#)<sup>1</sup>, [Zheng YL](#)<sup>1</sup>, [Wang JH](#)<sup>8,9</sup>.

**Publication:** [Breast Cancer Res Treat](#). 2017 Dec 11. doi: 10.1007/s10549-017-4578-9. [Epub ahead of print] <https://www.ncbi.nlm.nih.gov/pubmed/29230660>

**Abstract:**

*PURPOSE:*

This project was undertaken to examine the association between dietary intake of soy or cruciferous vegetables and breast cancer treatment-related symptoms among Chinese-American (CA) and Non-Hispanic White (NHW) breast cancer survivors.

*METHODS:*

This cross-sectional study included 192 CA and 173 NHW female breast cancer survivors (stages 0-III, diagnosed between 2006 and 2012) recruited from two California cancer registries, who had completed primary treatment. Patient-reported data on treatment-related symptoms and potential covariates were collected via telephone interviews. Dietary data were ascertained by mailed questionnaires. The outcomes evaluated were menopausal symptoms (hot flashes, night sweats, vaginal dryness, vaginal discharge), joint problems, fatigue, hair thinning/loss, and memory problems. Associations between soy and cruciferous vegetables and symptoms were assessed using logistic regression. Analyses were further stratified by race/ethnicity and endocrine therapy usage (non-user, tamoxifen, aromatase inhibitors).

*RESULTS:*

Soy food and cruciferous vegetable intake ranged from no intake to 431 and 865 g/day, respectively, and was higher in CA survivors. Higher soy food intake was associated with lower odds of menopausal symptoms ( $\geq 24.0$  vs.  $0$  g/day, OR 0.51, 95% CI 0.25, 1.03), and fatigue ( $\geq 24.0$  vs.  $0$  g/day, OR 0.43, 95% CI 0.22, 0.84). However, when stratified by race/ethnicity, associations were statistically significant in NHW survivors only. Compared with low intake, higher cruciferous vegetable intake was associated with lower odds of experiencing menopausal symptoms ( $\geq 70.8$  vs.  $< 33.0$  g/day, OR 0.50, 95% CI 0.25, 0.97) in the overall population.

*CONCLUSIONS:*

In this population of breast cancer survivors, higher soy and cruciferous vegetable intake was associated with less treatment-related menopausal symptoms and fatigue.



# Asian American Research Center on Health

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**Title:** Diabetes Among Asian Americans with BMI Less Than or Equal to 23.

**Authors:** [Kobayashi KM](#)<sup>1</sup>, [Chan KT](#)<sup>2</sup>, [Fuller-Thomson E](#)<sup>3</sup>.

**Publication:** [Diabetes Metab Syndr](#). 2017 Dec 16. pii: S1871-4021(17)30392-2. doi: 10.1016/j.dsx.2017.12.011. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29273426>

**Abstract:**

Lowering the BMI overweight cut point to 23 for Asian Americans (AA) is helpful, but careful monitoring for diabetes across the whole BMI spectrum is still required for AA; One in every 17 AA with a BMI < 23 has diabetes. Twenty one percent of all AA with diabetes has a BMI < 23.





**Title:** Comparing Chinese and European American mental health decision making.

**Authors:** [Gao S](#)<sup>1,2</sup>, [Corrigan PW](#)<sup>2</sup>, [Qin S](#)<sup>2</sup>, [Nieweglowski K](#)<sup>2</sup>.

**Publication:** [J Ment Health](#). 2017 Dec 20:1-7. doi: 10.1080/09638237.2017.1417543. [Epub ahead of print] <https://www.ncbi.nlm.nih.gov/pubmed/29260922>

**Abstract:**

*BACKGROUND:*

Shared decision making (SDM) tends to reflect more Western values of individualism and empowerment, values that may be foreign to East Asian healthcare preferences for collectivism and family involvement: family centered decision making (FCDM).

*AIMS:*

To show that Chinese will be more likely to believe FCDM would be more pleasing for them if they were the patient. Conversely, European Americans will respond more favorably to SDM. To examine effects of Western acculturation on FCDM compared to SDM.

*METHOD:*

In this study, preferences for FCDM versus SDM and doctor-led decision making (DrDM) were examined in a vignette study completed online by European Americans (n = 298) and Chinese (n = 327). Research participants read a vignette about Lily (a depression patient) presenting with symptoms of depression. After reading the vignette, participants completed items representing two sets of outcomes: three perceptions of impact on Lily and how participants might respond for themselves in a similar decision making situation.

*RESULTS:*

Chinese rated FCDM greater than European and Chinese Americans. Chinese Americans mostly responded similar to European Americans and not Chinese.

*CONCLUSION:*

European Americans prefer SDM more for mental health services. Chinese value FCDM more than European Americans. Preferences of Chinese living in America seem to parallel European Americans.



# Asian American Research Center on Health

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**Title:** Prevalence and Predictors of Depression and Anxiety among Korean Americans.

**Authors:** [Koh E1](#).

**Author information**

**Publication:** [Soc Work Public Health](#). 2018;33(1):55-69. doi: 10.1080/19371918.2017.1415178.  
<https://www.ncbi.nlm.nih.gov.ucsf.idm.oclc.org/pubmed/?term=29297791>

**Abstract:**

Despite the significant growth of the Asian population in the United States, current knowledge on their mental health and service utilization behaviors is very limited. The study examined the prevalence and predictors of depression and anxiety among Korean Americans in the Washington, D.C. metropolitan area. A total of 602 Koreans completed a self-administered survey on physical and mental well-being, and the study found that 18.2% and 16.9% of the participants had severe symptoms of depression and anxiety, respectively. Acculturative stress and perceived social support were common predictors for depression and anxiety, and the effects of demographic factors were minimal.



**Title:** CE: Original Research: Physical Activity Among Chinese American Immigrants with Prediabetes or Type 2 Diabetes.

**Authors:** [Hu SH1](#), [Fu MR](#), [Liu S](#), [Lin YK](#), [Chang WY](#).

[Author information](#)

**Publication:** [Am J Nurs](#). 2018 Jan 11. doi: 10.1097/01.NAJ.0000530221.87469.86. [Epub ahead of print] <https://www.ncbi.nlm.nih.gov/pubmed/29329117>

**Abstract:** Findings from this mixed-methods study reveal deficits and suggest areas for change.

**Background:** Although the benefits of aerobic exercise and strength training for patients with type 2 diabetes have been studied extensively, research on physical activity among Chinese American immigrants diagnosed with prediabetes or type 2 diabetes has been limited.

**PURPOSE:** We sought to learn more about this population's knowledge of physical activity, the types and intensity levels performed, and the barriers to such activity.

**DESIGN AND METHODS:** A concurrent mixed-methods design was used. The short version of the International Physical Activity Questionnaire-Chinese was used to quantitatively measure participants' levels of exercise intensity. Semistructured face-to-face interviews were conducted to obtain qualitative information regarding participants' knowledge about physical activity, the types performed, and the barriers to such activity.

**RESULTS:** A total of 100 Chinese American immigrants were recruited for the study from January to July 2012 in New York City. On average, participants had lived with a diagnosis of prediabetes or type 2 diabetes for 3.3 years and had lived in the United States for 21.5 years. Energy expenditure was measured in metabolic equivalent of task (MET) units; intensity was measured in cumulative MET-minutes per week. The mean total intensity score was 2,744 MET-minutes per week. This was achieved mainly through walking. The mean intensity score for walking was 1,454 MET-minutes per week; the mean duration was 79 minutes per day. Vigorous physical activity was least common. The mean intensity score for vigorous physical activity was 399 MET-minutes per week, and the mean duration was 17 minutes per week. Regarding types of physical activity, the most common were housekeeping, walking upstairs, and taking walking or stretching breaks every hour during the workday. Based on the interviews, three themes emerged regarding barriers to moderate or vigorous physical activity: insufficient education about physical activity, health concerns about physical activity, and work-related barriers to physical activity.

**CONCLUSIONS:** The majority of Chinese American immigrants with prediabetes or type 2 diabetes do not engage in sufficient physical activity, performing at a rate significantly below that of the general U.S.

**POPULATION:** Increases in the intensity and duration of physical activity should be promoted as part of diabetes management for Chinese American immigrants.



# Asian American Research Center on Health

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**Title:** Recurring Vivid Dreams in an Older Hmong Man With Complex Trauma Experience and Cognitive Impairment.

**Authors:** [Askar W](#)<sup>1</sup>, [Khan A](#)<sup>2,3</sup>, [Borson S](#)<sup>4</sup>, [Malone ML](#)<sup>1,3</sup>.

## **Author information**

**Publication:** [WMJ](#). 2017 Aug;116(3):171-172.

<https://www.ncbi.nlm.nih.gov/pubmed/29323835>

## **Abstract:**

### **INTRODUCTION:**

Health care workers need to consider the culture and ethnic preferences prevalent in the Hmong community in order to provide optimal care. We describe an older Hmong man to illustrate the challenges faced and competencies needed by primary care.

### **CASE PRESENTATION:**

An 80-year-old non-English speaking Hmong man with diabetes, nerve sheath tumor, and hypertension presented to the outpatient clinic with his grandson complaining of sleep problems. He had had 2 vivid recurring dreams during the previous few months. Memory assessment was significant for dementia.

### **DISCUSSION:**

This case addresses the complexity in taking care of a non-English speaking Hmong older man who has memory loss, trauma in adulthood, multiple caregivers, and sleep problems.

### **CONCLUSIONS:**

A careful history from patient and family to get to know their cultural preferences and attitudes was helpful. Identification of the primary caregiver was critical in providing care.



**Title:** Physician Intervention and Chinese Americans' Colorectal Cancer Screening.

**Authors:** [Huei-Yu Wang J1](#), [Ma GX2](#), [Liang W3](#), [Tan Y2](#), [Makambi KH4](#), [Dong R4](#), [Vernon SW5](#), [Tu SP6](#), [Mandelblatt JS](#).

## Author information

**Publication:** [Am J Health Behav](#). 2018 Jan 1;42(1):13-26. doi: 10.5993/AJHB.42.1.2.

<https://www.ncbi.nlm.nih.gov/pubmed/29320335>

## **Abstract:**

### **OBJECTIVE:**

We conducted a cluster-randomized trial evaluating an intervention that trained Chinese-American primary care physicians to increase their Chinese patients' colorectal cancer (CRC) screening.

### **METHODS:**

Twenty-five physicians (13 randomized to the intervention arm and 12 to the control arm) and 479 of their patients (aged 50-75 and nonadherent to CRC screening guidelines) were enrolled. The intervention, guided by Social Cognitive Theory, included a communication guide and 2 in-office training sessions to enhance physicians' efficacy in communicating CRC screening with patients. Patients' CRC screening rates (trial outcome) and rating of physician communication before intervention and at 12-month follow-up were assessed. Intention-to-treat analysis for outcome evaluation was conducted.

### **RESULTS:**

Screening rates were slightly higher in the intervention vs. the control arm (24.4% vs. 17.7%,  $p = .24$ ). In post hoc analyses, intervention arm patients who perceived better communication were more likely to be screened than those who did not (OR = 1.09, 95% CI: 1.03, 1.15). This relationship was not seen in the control arm.

### **CONCLUSIONS:**

This physician-focused intervention had small, non-significant effects in increasing Chinese patients' CRC screening rates. Physician communication appeared to explain intervention efficacy. More intensive interventions are needed to enhance Chinese patients' CRC screening.



**Title:** Prevalence of Hearing Loss and Hearing Care Use Among Asian Americans: A Nationally Representative Sample.

**Authors:** [Choi JS](#)<sup>1</sup>, [Kari E](#)<sup>2</sup>, [Friedman RA](#)<sup>2,3</sup>, [Fisher LM](#)<sup>1</sup>.

## **Author information**

**Publication:** [Otol Neurotol](#). 2018 Feb;39(2):158-167. doi: 10.1097/MAO.0000000000001668.

<https://www.ncbi.nlm.nih.gov/pubmed/29315179>

## **Abstract:**

**OBJECTIVE:** To assess the prevalence of hearing loss and factors affecting hearing care use among Asian Americans, using the first nationally representative sample of Asian Americans.

**STUDY DESIGN:** National cross-sectional survey.

**SETTING:** Ambulatory examination centers.

**PATIENTS:** Three thousand six hundred twelve adults (522 Asian American) aged 20 to 69 in the 2011 to 2012 National Health and Examination Survey with pure-tone audiometry.

**MAIN OUTCOME MEASURE(S):** Percentage with hearing loss, undertaking a hearing test before the study, and hearing aid use. Hearing loss was defined as better hearing ear speech frequency pure-tone average  $\geq 25$  dBHL. Analyses incorporated sampling weights to account for complex sampling design.

**RESULTS:** The prevalence of hearing loss was 6.0% [95% CI 3.1-8.9%] among Asian Americans, comparable to White, Black, and Hispanic groups, and increased substantially with age (OR: 2.25 [95% CI: 1.6-3.2]). After adjusting for age and pure-tone average, Asian Americans with hearing loss were less likely to have received a hearing test compared with White (OR: 0.27 [95% CI: 0.20-0.36,  $p < 0.001$ ]) and Black groups (OR: 0.26 [95% CI: 0.16-0.38,  $p < 0.001$ ]), less likely to use hearing aids compared with Whites (OR: 0.06 [95% CI: 0.01-0.64],  $p = 0.02$ ), and less likely to self-report poor hearing compared with Whites (OR: 0.30 [95% CI: 0.10-0.90],  $p = 0.03$ ). Among Asian Americans, using more non-English than English, being foreign-born, less education, being married, and not having insurance were associated with lower levels of receiving a hearing test.

**CONCLUSION:** The nationally representative sample of Asian Americans with hearing data suggests that hearing loss prevalence is similar to other races/ethnicities. However, hearing aid adoption by Asian Americans tends to be less frequent.



**Title:** Health Care Providers' Perspectives on Barriers and Facilitators to Cervical Cancer Screening in Vietnamese American Women.

**Authors:** [Nguyen-Truong CKY1](#), [Hassouneh D2](#), [Lee-Lin F2](#), [Hsiao CY3](#), [Le TV4](#), [Tang J4](#), [Vu M4](#), [Truong AM4](#).

## **Author information**

**Publication:** [J Transcult Nurs](#). 2017 Dec 1:1043659617745135. doi: 10.1177/1043659617745135. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29308717>

## **Abstract:**

### **INTRODUCTION:**

Vietnamese American women (VAW) are diagnosed and die at twice the rate than White non-Hispanic American women (16.8/100,000 vs. 8.1/100,000 and 4.4/100,000 vs. 2.4/100,000, respectively). Despite efforts to increase cervical cancer (CC) screening among VAW, the participation rates are persistently low (69% to 81%). The purpose of this study was to explore health care providers' (HCPs) perspectives on barriers and facilitators to CC screening in VAW.

### **METHOD:**

This qualitative descriptive pilot study, used open-ended semistructured interviews with 10 HCPs.

### **RESULTS:**

The HCPs had two to 23 years treating VAW. Major barriers and facilitators identified by the HCPs were as follows: VAW's decision making about CC screening; sexual health divide; language discordance, relying on interpreters; breaking suspicion; VAW's exposure to health sources of CC screening; sustainable trust; and motivated health care practices.

### **DISCUSSION:**

HCPs perceived the reasons for VAW not being screened or delaying CC screening were due to their lack of knowledge, cultural barriers, language, and issues related to trust.



**Title:** Depression Symptom Patterns and Social Correlates among Chinese Americans.

**Authors:** [Zhu L](#)1.

**Author information**

**Publication:** [Brain Sci.](#) 2018 Jan 16;8(1). pii: E16. doi: 10.3390/brainsci8010016.  
<https://www.ncbi.nlm.nih.gov/pubmed/29337888>

**Abstract:**

The aim of this study is to examine and compare the depression symptoms pattern and social correlates in three groups: foreign-born Chinese Americans, US-born Chinese Americans, and non-Hispanic whites. This study used data from the Collaborative Psychiatric Epidemiology Surveys (CPES). The study sample consists of 599 Chinese Americans (468 for the foreign-born and 121 for the US-born) and 4032 non-Hispanic whites. Factor analysis was used to examine the depression symptom patterns by each subgroup. Four depression symptoms dimensions were examined: negative affect, somatic symptoms, cognitive symptoms, and suicidality. Logistic regression was used to investigate the effects of sociodemographic (age, gender, marital status, and education), physical health condition, and social relational factors (supports from and conflict with family and friends) on specific types of depression symptoms separately for the three subgroups. The findings showed little differences in depression symptom patterns but clear variation in the social correlates to the four depression dimensions across the three ethnocultural groups, foreign-born Chinese Americans, US-born Chinese Americans, and non-Hispanic whites. Clinicians should take into account the sociocultural factors of patients when making diagnosis and suggesting treatments. In addition, psychiatrists, psychologists, or other mental health service providers should offer treatment and coping suggestions based on the specific symptom dimensions of patients, and patients' ethnocultural backgrounds





# Asian American Research Center on Health

**Title:** Acculturation and Alcohol Use Among Asian Americans: A Meta-Analytic Review.

**Authors:** [Lui PP](#), [Zamboanga BL](#).

**Publication:** [Psychol Addict Behav](#). 2018 Jan 22. doi: 10.1037/adb0000340. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29355333>

## **Abstract:**

Acculturation has been considered a key sociocultural factor that helps explain Asian American's mental health outcomes, including alcohol use. Yet, findings on the degree to which acculturation is directly linked to alcohol use have been mixed. The present meta-analysis reviewed original studies published since 1979, and tested the association between acculturation and alcohol use outcomes among Asian Americans across age groups. Analyses also examined the extent to which participant and methodological variables moderated this relation. A systematic literature review yielded 31 published research reports that were eligible for the meta-analysis. Across 39 independent study samples (N = 28,028), analysis with random-effects model estimated a small and statistically significant mean weighted correlation between acculturation and alcohol use ( $r = .06$ ,  $p < .05$ ). Acculturation appeared to be more robustly associated with alcohol consumption and intensity of hazardous alcohol use, but not drinking-related problems. Most studies examined acculturation as a unidimensional construct. Within study samples that conceptualized acculturation as a bidimensional construct, alcohol use was positively associated with acculturation (orientation to the mainstream host culture) but negatively associated with enculturation (orientation to the Asian heritage culture). Statistically significant between-study variability ( $Q[38] = 876.62$ ,  $p < .001$ ,  $I^2 = 95.67\%$ ) was accounted for by gender, age, and geographical location. Limitations to the scope of this meta-analysis regarding the observational nature of study effect sizes, sample-level analyses, and focus on self-report survey data, as well as future research directions are discussed.



**Title:** Developmental and Contextual Correlates of Mental Health and Help-Seeking Among Asian American College Students.

**Authors:** [Tummala-Narra P](#), [Li Z](#), [Chang J](#), [Yang EJ](#), [Jiang J](#), [Sagherian M](#), [Phan J](#), [Alfonso A](#).

**Publication:** [Am J Orthopsychiatry](#). 2018 Feb 1. doi: 10.1037/ort0000317. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29389152>

**Abstract:**

Guided by an integrative contextual framework of immigrant youth development (García Coll & Marks, 2012), this study investigated the potential role of developmental (e.g., ethnic identity) and contextual factors (e.g., perceived discrimination, stereotyping) in mental health outcomes and help-seeking attitudes, and variations across gender and nativity among Asian American college students. Online surveys assessing perceived subtle and blatant racism, ethnic identity, the internalization of the model minority stereotype, depressive symptoms, anxiety symptoms, and attitudes toward seeking help from mental health professionals were administered to Asian American college student participants ( $n = 465$ ) from diverse ethnic backgrounds and geographic regions in the United States. The findings support prior research indicating that perceived subtle racism and blatant racism are positively associated with depressive and anxiety symptoms. Further, only certain dimensions of ethnic identity and internalization of the model minority stereotype were found to be associated with mental health outcomes and help-seeking attitudes. The findings did not indicate a significant association between perceived racism and help-seeking attitudes. There were also no significant differences in the relationships among variables across gender and nativity, with the exception of the association between ethnic identity and help-seeking attitudes across gender. The study identified potential risk and protective factors in mental health, while underscoring the multidimensional aspects of social and contextual factors that contribute to mental health and help seeking among Asian American college students.



**Title:** The Association of Perceived Discrimination and Depressive Symptoms Among Chinese, Korean, and Vietnamese Americans.

**Authors:** [Chau V](#), [Bowie JV](#), [Juon HS](#).

**Publication:** [Cultur Divers Ethnic Minor Psychol](#). 2018 Feb 1. doi: 10.1037/cdp0000183. [Epub ahead of print] <https://www.ncbi.nlm.nih.gov/pubmed/29389149>

**Abstract:**

## **OBJECTIVES:**

Few studies have investigated ethnic differences in discrimination and depressive symptoms, and the link between them among foreign-born Asian Americans. This study identifies if depressive symptoms and perceived discrimination differ by Asian ethnicity, and if perceived discrimination is associated with depressive symptoms among foreign-born Chinese, Korean, and Vietnamese Americans.

## **METHODS:**

This study uses data from the Asian American Liver Cancer Prevention Program (N = 600). Using nonprobability sampling, foreign-born Asian American adults (58% female, Mage = 47.3 years, SD = 11.82) were recruited from the community in the Baltimore-Washington Metropolitan Area. Perceived discrimination was defined using everyday and major discrimination scales; the Centers for Epidemiological Studies-Depression Scale defined the outcome of depressive symptoms. Multiple logistic regressions were conducted to determine if this association exists.

## **RESULTS:**

A high prevalence of depressive symptoms (one third to one fifth per ethnicity) and ethnic differences between foreign-born Chinese, Korean, and Vietnamese Americans were found; increased perceived discrimination was associated with worse depressive symptomology. Those with "high" and "mild discrimination" had greater odds of being depressed than those who had never experienced discrimination; those with "unfair treatment" had greater odds of being depressed than those who had none. Major experiences of discrimination were less common and less likely associated with depressive symptoms than everyday experiences.

## **CONCLUSIONS:**

Foreign-born Asian Americans experience substantial discrimination and depressive symptoms. Future studies should stratify by Asian ethnicity and examine the differences between minor and major experiences of discrimination to provide appropriate mental health prevention and treatment for this population.



**Title:** Korean clergy for healthy families: online intervention for preventing intimate partner violence.

**Authors:** [Choi YJ](#)<sup>1</sup>, [Orpinas P](#)<sup>2</sup>, [Kim I](#)<sup>3</sup>, [Ko KS](#)<sup>4</sup>.

**Publication:** [Glob Health Promot.](#) 2018 Jan 1:1757975917747878. doi: 10.1177/1757975917747878. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29384426>

## **Abstract:**

### **BACKGROUND:**

Intimate partner violence (IPV) among immigrant women is a serious public health problem. Churches and clergy play a fundamental role in their lives, as a form of social organization and alternative to community services.

### **PURPOSE:**

To describe the implementation and evaluation of an intervention for Korean American faith leaders designed to increase knowledge about IPV and about resources to handle IPV, strengthen attitudes that do not support IPV, enhance self-efficacy to handle IPV, and increase prevention and intervention behaviors about IPV.

### **METHODS:**

Korean American faith leaders in a Southeastern state of the USA were invited to participate in the study ( n = 55). Participants completed two online assessments: baseline and a 3-month follow-up. After the baseline assessment, participants were randomized to either the intervention ( n = 27) or the control ( n = 28) group. The intervention consisted of three online modules, each taking approximately 30-45 min to complete. Modules were developed based on the researchers' work with Korean American faith leaders. Assessments and interventions were available in Korean and English.

### **RESULTS:**

Compared to the control group, the intervention group significantly improved their knowledge of resources and enhanced attitudes against IPV. The intervention group increased their self-efficacy and behaviors to prevent IPV more than the control group, but these changes were not statistically significant.

### **CONCLUSIONS:**

The online training provided a safe and convenient environment for the Korean American clergy, for whom anonymity and convenient access were important. Results are promising, but highlight the need to include more specific training of skills, which could be incorporated into the online modules in the form of an avatar. This online training could serve as a template to be adapted for other immigrant groups.



**Title:** Disease factors associated with spousal influence on diabetic diet: An exploratory comparison of Vietnamese American and White older adults.

**Authors:** [August KJ1](#), [Dowell A1](#), [Sorkin DH2](#).

**Author information**

**Publication:** [Health Psychol Open](#). 2017 Nov 20;4(2):2055102917738658. doi: 10.1177/2055102917738658. eCollection 2017 Jul-Dec.

<https://www.ncbi.nlm.nih.gov/pubmed/29379626>

**Abstract:**

This study examined whether disease-specific factors were important for how and how often White versus Vietnamese American spouses influenced their partners' diabetic diet. Results from a cross-sectional survey of 145 older adult spouses whose partners had type 2 diabetes revealed that Vietnamese American spouses used more frequent spousal influence (positive and negative) than White spouses. In addition, most of the factors associated with spousal influence differed for Vietnamese American and White spouses. Findings from this study highlight the importance of proximal and sociocultural factors in understanding older spouses' influence on their partners' diabetic diet.



**Title:** Self-care among Filipinos in the United States who have hypertension.

**Authors:** [Ea EE1](#), [Colbert A2](#), [Turk M2](#), [Dickson VV3](#).

[Author information](#)

**Publication:** [Appl Nurs Res](#). 2018 Feb;39:71-76. doi: 10.1016/j.apnr.2017.11.002. Epub 2017 Nov 3.

<https://www.ncbi.nlm.nih.gov/pubmed/29422180>

**Abstract:**

**BACKGROUND:** Despite the strong literature on the influence of self-care on hypertension (HTN) diagnosis, there is a notable lack of studies that explore self-care among Filipino immigrants in the United States (US) who have HTN.

**AIM:** To determine the levels of and relationships between and among acculturation, acculturative stress, HTN self-efficacy, patient activation, and HTN self-care among first generation Filipino immigrants in the US who have HTN.

**DESIGN:** A cross-sectional correlational design was used to determine the relationships between and among acculturation, acculturative stress, HTN self-efficacy, patient activation, and HTN self-care using the Transactional Model of Stress and Coping. One hundred and sixty-three community-dwelling first-generation Filipino immigrants participated in the study.

**METHODS:** Data on HTN self-care, acculturation, acculturative stress, HTN self-efficacy, and patient activation were collected.

**RESULTS:** The study results revealed that HTN self-efficacy and patient activation significantly contributed to the regression model that accounted for 29.5% of the variance in HTN self-care for this sample. Further analysis revealed that patient activation had a mediating role between HTN self-efficacy and HTN self-care.

**CONCLUSIONS:** Findings from this study revealed that HTN self-efficacy and patient activation were associated with self-care behaviors associated with HTN management for this sample.

**CLINICAL RELEVANCE:** Findings from this study highlight the importance of addressing HTN self-efficacy and patient activation in improving HTN self-care for this population.



# Asian American Research Center on Health

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**Title:** Asian-Indians: a review of coronary artery disease in this understudied cohort in the United States.

**Authors:** [Ardeschna DR](#)<sup>1</sup>, [Bob-Manuel T](#)<sup>2</sup>, [Nanda A](#)<sup>3</sup>, [Sharma A](#)<sup>2</sup>, [Skelton WP 4th](#)<sup>3</sup>, [Skelton M](#)<sup>4</sup>, [Khouzam RN](#)<sup>5</sup>.

## **Author information**

**Publication:** [Ann Transl Med.](#) 2018 Jan;6(1):12. doi: 10.21037/atm.2017.10.18.

<https://www.ncbi.nlm.nih.gov/pubmed/29404358>

## **Abstract:**

Coronary artery disease (CAD) is a major cause of cardiovascular death worldwide. Prevalence of CAD is highly variable among different races. Asian Indians have been noted to have the highest CAD rates and the conventional risk factors fail to explain this difference completely. Asian Indians constitute a fifth of the global population, and the higher rates of CAD in this population constitute a major health challenge. There have been studies in the early 2000s that investigate the risk factors in this population; however, very few studies have been done since then that explore the higher CAD rates in Asian Indians. This is a comprehensive and current review of the known risk factors for CAD in Asian Indians and strategies physicians should consider relieving this burden.

## **KEYWORDS:**

Asian Indian Americans; Coronary heart disease; coronary artery disease (CAD)

PMID: 29404358

PMCID [PMC5787729](#)

DOI: [10.21037/atm.2017.10.18](https://doi.org/10.21037/atm.2017.10.18)





# Asian American Research Center on Health

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**Title:** Factors Related to the Probable PTSD after the 9/11 World Trade Center Attack among Asian Americans.

**Authors:** [Kung WW](#)<sup>1</sup>, [Liu X](#)<sup>2</sup>, [Huang D](#)<sup>2</sup>, [Kim P](#)<sup>3</sup>, [Wang X](#)<sup>3</sup>, [Yang LH](#)<sup>2,4</sup>.

**Author information**

**Publication:** [J Urban Health](#). 2018 Feb 15. doi: 10.1007/s11524-017-0223-5. [Epub ahead of print]  
<https://www.ncbi.nlm.nih.gov/pubmed/29450681>

**Abstract:**

Despite the fact that Asians constituted a sizeable proportion of those exposed to the World Trade Center attack on September 11, 2001 due to its proximity to Chinatown and many South Asians working in the nearby buildings, no study had focused on examining the mental health impact of the attack in this group. Based on data collected by the World Trade Center Health Registry from a sample of 4721 Asians 2-3 years after the disaster, this study provides a baseline investigation for the prevalence and the risk and protective factors for PTSD among Asian Americans directly exposed to the attack and compared this population against 42,862 non-Hispanic Whites. We found that Asians had a higher prevalence of PTSD compared to Whites (14.6 vs 11.7%). "Race-specific factors" significantly associated to PTSD in the multivariate analyses were noted among sociodemographics: higher education was protective for Whites but a risk factor for Asians; being employed was protective for Whites but had no effect for Asians; and being an immigrant was a risk factor for Whites but had no effect for Asians. However, income was a protective factor for both races. Other "universal factors" significantly increased the odds of PTSD symptoms but showed no racial differences, including exposure to the disaster and the presence of lower respiratory symptoms which intensified odds of PTSD by the greatest magnitude (3.6-3.9 times). Targeted effort to reach out to Asians is essential for prevention and follow up treatment given this group's striking history of underutilization of mental health services.

**KEYWORDS:**

9/11 World Trade Center attack; Asian Americans; Epidemiology; Mental health; PTSD; Social factors

PMID: 29450681



**Title:** Fasting Plasma Glucose and the HbA1c Are Not Optimal Screening Modalities for the Diagnosis of New Diabetes in Previously Undiagnosed Asian Indian Community Participants.

**Authors:** [Prakaschandra R1](#), [Naidoo DP2](#).

**Publication:** [Ethn Dis](#). 2018 Feb 1;28(1):19-24. doi: 10.18865/ed.28.1.19. eCollection 2018 Winter.  
<https://www.ncbi.nlm.nih.gov/pubmed/29467562>

**Abstract:**

**OBJECTIVES:**

There is no definitive consensus on the screening algorithm in high-risk communities for diabetes. The aims of our study were to determine the prevalence of undiagnosed diabetes in a high-risk community using the oral glucose tolerance test (OGTT), as well as determine the value of anthropometric measurements and other measures of glycemia in the detection of diabetes.

**METHOD:**

All participants from the Phoenix Lifestyle project without known diabetes, and who had undergone an OGTT were selected for study. Anthropometric measurements were collected according to accepted guidelines. Diabetes was diagnosed if fasting plasma glucose (FPG)  $\geq 7.0$  mmol/l, if 2-hour plasma glucose level during OGTT was  $\geq 11.0$  mmol/l, or if HbA1c  $\geq 6.5\%$ .

**RESULTS:**

The prevalence of newly diagnosed diabetes was 14.3% (11.7 % age standardized) (women=15.4%; men=11.8%). The prevalence rates were underestimated using FPG criteria, but overestimated when using the HbA1c. The AUC (area under the receiver-operator characteristics curve) was highest for FPG (.879), HbA1c (.855), then anthropometry measures (BMI=.621; waist circumference=.627). For diabetes, at levels  $>6.3$ , the discriminant ability (DA) of HbA1c was highest (79%), while a cut-point of  $\geq 5.5$  mmol/l for FPG yielded a DA= 81.5% (82% sensitivity; 81%; specificity of 81%). There was a low level of agreement between the FPG (Kappa = .506), HbA1c (Kappa = .537), and the OGTT. Age- and sex-adjusted independent determinants of diabetes using stepwise backward logistic regression were age, triglyceride levels and a positive family history for diabetes.

**CONCLUSION:**

Neither the HbA1c nor the FPG approached adequate predictive accuracy in the diagnosis of diabetes. In view of the high prevalence of undiagnosed diabetes, this study underscores the need for ongoing national surveillance data.

**KEYWORDS:** Asian Indians; Diabetes; Fasting Plasma Glucose; HbA1c; OGTT

PMID: 29467562 PMCID:[PMC5794443](#) [Available on 2018-08-01] DOI: [10.18865/ed.28.1.19](https://doi.org/10.18865/ed.28.1.19)



# Asian American Research Center on Health

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**Title:** A Systematic Review of Culturally Specific Interventions to Increase Physical Activity for Older Asian Americans.

**Authors:** [Katigbak C1](#), [Flaherty E](#), [Chao YY](#), [Nguyen T](#), [Cheung D](#), [Yiu-Cho Kwan R](#).

## **Author information**

**Publication:** [J Cardiovasc Nurs](#). 2018 Feb 16. doi: 10.1097/JCN.0000000000000459. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29461304>

## **Abstract:**

### **BACKGROUND:**

Physical activity (PA) is a significant modifiable risk factor for cardiovascular disease. For older adults, engaging in PA is shown to improve cardiac status, reduce cognitive, and functional decline, and improve overall quality of life. However, only 17% of Asian American adults meet the 2008 federal recommended guidelines for aerobic and muscle strengthening activity; and there is a paucity of data reporting on older Asian Americans - a rapidly growing, underserved group. While data pertaining to Asian Americans is frequently reported at the aggregate level, this masks differences (eg, language, culture, income) among Asian ethnic subgroups that may impact health behaviors. The purpose of this review was to identify intervention, and cultural adaptation strategies in studies promoting PA for older Asian Americans.

### **METHODS:**

A comprehensive literature search was performed to identify interventions published between 1996-2016 focused on improving PA among older Asian Americans (> 60 years old). Data were abstracted to examine intervention study designs, cultural adaptation strategies, theoretical frameworks, and physical activity measures.

### **RESULTS:**

Nine studies met the review's inclusion criteria. Community-based recruitment approaches were widely used, and all studies employed cultural adaptation to varying degrees. Most studies reported improvements in PA outcomes, focused on Chinese Americans, and relied on self-reports of PA, while few aimed to increase PA using a multi-component approach.

### **CONCLUSIONS:**

Future studies would benefit from larger sample sizes, a wider representation of Asian ethnic subgroups, and concentrated efforts to implement deep level adaptations that may increase the salience and sustainability of these interventions.

PMID: 29461304 DOI: [10.1097/JCN.0000000000000459](https://doi.org/10.1097/JCN.0000000000000459)



**Title:** Rethinking the Acculturation Gap-Distress Theory among Asian Americans: Testing Bidirectional Indirect Relations.

**Authors:** [Lui PP1](#).

**Author information**

**Publication:** [Am J Orthopsychiatry](#). 2018 Feb 19. doi: 10.1037/ort0000322. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29461073>

**Abstract:**

The acculturation gap-distress theory postulates that parent-offspring acculturation mismatch precipitates greater intergenerational conflict in immigrant families, which in turn increases the risk for psychological problems among offspring. Whereas cross-sectional studies have shown support for these theory-informed relations, comparatively little is known about whether acculturation mismatch negatively affects psychological functioning, or whether offspring's psychological problems precipitate greater perceived acculturation mismatch via intergenerational cultural conflict. Furthermore, more research is needed to investigate how acculturation and family conflict affect Asian Americans transitioning into college and emerging adulthood. Across two measurement occasions, two cohorts of Asian American first-year college students (N = 555, Mage = 17.99, 56.0% women) completed survey questionnaires assessing their perception of parent-offspring acculturation discrepancies, acculturation-related intergenerational conflict, and internalizing and externalizing symptoms. For both sets of psychological functioning, gender invariant structural equation models testing the bidirectional relations demonstrated adequate fit for the data. In the case of externalizing symptoms, acculturation mismatch marginally significantly predicted subsequent intergenerational conflict, but acculturation mismatch did not predict externalizing symptoms via intergenerational cultural conflict. By contrast, offspring's internalizing and externalizing symptoms respectively predicted greater self-reported intergenerational cultural conflict, which in turn predicted perceived parent-offspring acculturation mismatch over time. These indirect relations suggested that both internalizing and externalizing symptoms indirectly contributed to greater acculturation mismatch through the presence of intergenerational cultural conflict, but data did not support the acculturation gap-distress theory. Theoretical and clinical implications as they pertain to Asian American emerging adults are discussed. (PsycINFO Database Record.

PMID: 29461073 DOI: [10.1037/ort0000322](https://doi.org/10.1037/ort0000322)



# Asian American Research Center on Health

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**Title:** Development and Assessment of a Helicobacter Pylori Medication Adherence and Stomach Cancer Prevention Curriculum for a Chinese American Immigrant Population.

**Authors:** [Kwon SC](#)<sup>1</sup>, [Kranick JA](#)<sup>2</sup>, [Bougrab N](#)<sup>2</sup>, [Pan J](#)<sup>2</sup>, [Williams R](#)<sup>3</sup>, [Perez-Perez GI](#)<sup>4</sup>, [Trinh-Shevrin C](#)<sup>2</sup>.

**Author information**

**Publication:** [J Cancer Educ.](#) 2018 Feb 19. doi: 10.1007/s13187-018-1333-9. [Epub ahead of print]

<https://www.ncbi.nlm.nih.gov/pubmed/29460136>

**Abstract:**

Chinese American immigrants are at increased risk for Helicobacter pylori infection and stomach cancer. Despite their increased risk, very few prevention strategies exist which target this vulnerable population. The purpose of this article is to present the stakeholder engaged development, review, assessment, refinement, and finalization of a H. pylori treatment adherence and stomach cancer prevention curriculum specifically designed to engage vulnerable, limited English proficient Chinese Americans in New York City.

**KEYWORDS:**

Chinese American; Curriculum development; H. pylori; Prevention; Stomach cancer

PMID: 29460136 DOI: [10.1007/s13187-018-1333-9](https://doi.org/10.1007/s13187-018-1333-9)