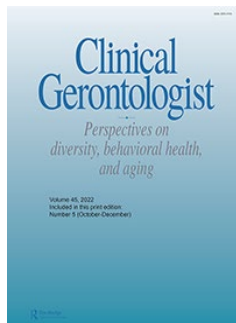# ARCHIVE

THE ARCH NEWSLETTER

NOVEMBER 2022

NEWS

Van Ta Park and Team Publish in *Clinical Gerontologist*

Dr. Van Ta Park and team published their article, "[A scoping review of dementia caregiving for Korean Americans and recommendations for future research](#)," in *Clinical Gerontologist*. We share our findings on the experiences of Korean Americans who are caregivers of individuals with dementia.

Arnab Mukherjea's Team Presents at APHA Annual Meeting

Arnab Mukherjea's research team presented at the 2022 APHA Annual Meeting. You can read the [abstract here](#).

Van Ta Park Attends Media Briefing

Dr. Van Ta Park was invited to a media briefing titled, "**Disaggregating AAPI Health Data - Key to Combating Health Disparities**" jointly organized by [Stanford Center for Asian Health Research](#) and Education and Ethnic Media Services on September 16th. Van discussed two of the ongoing projects, CARE Registry and Asian Cohort for Alzheimer's Disease. The organizers shared with us that there are 22 news articles that had come out of the media briefing

Recent Grants

[May Sudhinaraset](#) received a NIH R01 grant to conduct a national sexual and reproductive health study among Asian immigrant women.
For more information, please see:
[https://ph.ucla.edu/news/press-release/2022/oct/ucla-fielding-school-public-health-led-team-awarded-nih-grant-work](#)

[Van Ta Park](#) was recently awarded a new grant from NIH/NIA in which she will be serving as a Co-Investigator.
Grant #: 1RF1AG075904-01A1
Project Period: 09/30/2022 - 08/31/2025
Project Title: "Alzheimer's Disease and Related Dementias (ADRD) prevalence in American Samoa"
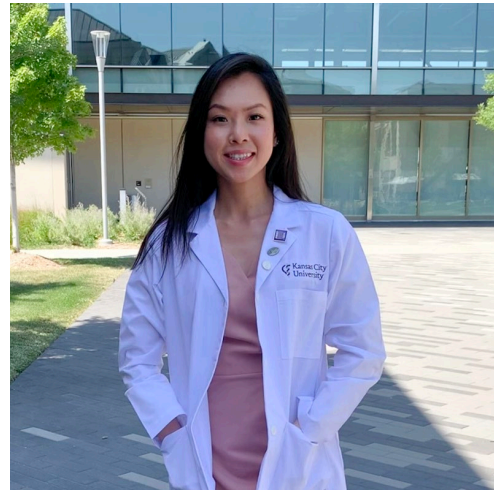
Intern Spotlight

Angeline Truong

Angeline Truong is a first year medical student at UC San Francisco School of Medicine. She graduated from Stanford University with a Master's in Community Health and Prevention Research and a Bachelor's in Human Biology.

She is interested in Vietnamese refugee health and narrative medicine. She is from San Jose, CA and loves spending time with her dog Lumi, reading, and making floral arrangements.

Feng Ming Li

I graduated from UCLA in 2019 with a B.S. in Biology. I am currently a first-year medical student at Kansas City University College of Osteopathic Medicine.

My interests include health disparities and the social determinants of health and I want to use that knowledge to better serve my community as a future healthcare provider.

Upcoming ARCH Meetings - Please Mark Your Calendars!

2022 ARCH Symposium

Co-Hosted by Asian American Research Center on Health and CSU East Bay

Thursday, November 17, 2022
10:00am to 2:00pm PST

Please register: ARCH Symposium Registration

2023 ARCH Quarterly Meetings
February 16; May 18; August 17; November 16, from 3-4:30pm

Send us updates for future ARCH newsletters!

Have a new grant, publication or good news to share? Send any updates for future newsletters to ARCH.sanfrancisco@gmail.com.

ABSTRACTS REVIEWS

June 30, 2022- September 30, 2022

ARCH members abstracts

- Yellow Horse and colleagues assessed the role of missing and murdered indigenous relatives (MMIR) relevant causes of death in the life expectancy gap between the American Indian and Alaska Native (AIAN) and non-Hispanic White populations: https://pubmed-ncbi-nlm-nih-gov.ucsf.idm.oclc.org/35585668/
- Yellow Horse and colleagues examined the associations between legal status, worries about deportation, and depression among Asian immigrants: https://pubmed-ncbi-nlm-nih-gov.ucsf.idm.oclc.org/34324125/
- Sabado-Liwag, Kwan, and colleagues reported on preliminary observations from The FILLED Project (FILipino Lived Experiences during COVID-19): https://pubmed-ncbi-nlm-nih-gov.ucsf.idm.oclc.org/36231606/
- Sabado-Liwag and colleagues observed that the overrepresentation of Filipinxs in healthcare contributes to COVID-19 mortality disparities among Asian Americans: https://pubmed-ncbi-nlm-nih-gov.ucsf.idm.oclc.org/36091528/
- Sabado-Liwag and colleagues described their efforts to organize a multidisciplinary, multigenerational, community-driven collaboration for FilAm community wellness: https://pubmed-ncbi-nlm-nih-gov.ucsf.idm.oclc.org/36062092/
- Park, Tsoh, Meyer and colleagues described racial bias beliefs related to COVID-19 from the COVID-19 Effects on the Mental and Physical Health of Asian Americans and Pacific Islanders Survey Study (COMPASS): https://pubmed-ncbi-nlm-nih-gov.ucsf.idm.oclc.org/35658091/
- Meyer and colleagues report on a qualitative study on the impact of war and resettlement on Vietnamese families facing dementia: https://pubmed-ncbi-nlm-nih-gov.ucsf.idm.oclc.org/35485807/
- Quach and colleagues described how Asian Health Services used data from their patient population to inform the rapid adoption of telehealth services: https://pubmed-ncbi-nlm-nih-gov.ucsf.idm.oclc.org/36186613/
- Park and colleagues published a protocol for the development of a social media-based intervention for Chinese American caregivers of persons with dementia: https://pubmed-ncbi-nlm-nih-gov.ucsf.idm.oclc.org/36173667/
- Saw and colleagues reported on social inequities in COVID-19 vaccine hesitancy among Native Hawaiians and Pacific Islanders: https://pubmed-ncbi-nlm-nih-gov.ucsf.idm.oclc.org/36081880/

- Wang, Ma, Li, Truong, Chu, Gomez, Nguyen, Tsoh and colleagues reported on patient-reported supportive care needs among Asian American cancer patients: https://pubmed-ncbi-nlm-nih-gov.ucsf.idm.oclc.org/36040670/
- Tseng and colleagues reported on disproportionate burden of COVID-19 cases and deaths among Pacific Islanders: https://pubmed-ncbi-nlm-nih-gov.ucsf.idm.oclc.org/34169488/
- Sudhinaraset and team publish on the association between immigration enforcement encounters and COVID-19 testing and delays in care in a cross-sectional study of undocumented young adult immigrants in California: https://pubmed-ncbi-nlm-nih-gov.ucsf.idm.oclc.org/35974358/

The Missing and Murdered Indigenous Relatives Crisis and the Life Expectancy Gap for Native Americans, 2010-2019

Aggie J Yellow Horse [1], Francesco Acciai [2], Kimberly R Huyser [3]
Affiliations expand

- PMID: 35585668
- DOI: 10.1097/EDE.0000000000001509

Abstract

Background: We assessed the role of missing and murdered indigenous relatives (MMIR) relevant causes of death in the life expectancy gap between the American Indian and Alaska Native (AIAN) and non-Hispanic White populations.

Methods: Using 2010-2019 National Center for Health Statistics Detailed Mortality files, we created multidecrement life tables and used the age-incidence decomposition method to identify (1) the causes of death that contribute to the gap in life expectancy between White and AIAN, and (2) the mechanisms through which these causes operate.

Results: Causes of death relevant to MMIR constituted 4.0% of all AIAN deaths, but accounted for almost one-tenth (9.6%; 0.74 of 8.21 years) of the overall AIAN-White life expectancy gap. MMIR-relevant causes accounted for 6.6% of the AIAN-White life expectancy gap for women and 11.9% of the for men.

Conclusions: This study suggests a critical agenda for research on racial inequities in mortality, with a focus on MMIR.

Legal Status, Worries About Deportation, and Depression Among Asian Immigrants

Aggie J Yellow Horse [1], Edward D Vargas [2]
Affiliations expand

- PMID: 34324125
- DOI: 10.1007/s10903-021-01252-1

Abstract

Although legal status and worries of deportation have been identified as key factors in immigrant health inequities for Latinx immigrants, how they impact health of Asian immigrants is largely unknown. Using 2016 Collaborative Multiracial Post-Election Survey, we used sets of logistic regressions to examine the relationships among legal statuses, worries about deportation, and depression for Asian immigrants (n = 1371). Asian immigrants who are in the process of applying for citizenship, those with visas, and those who are ineligible to apply for citizenship were significantly more likely to be depressed compared with naturalized citizens. The significant associations between legal status and depression were mediated by worries about deportation. Legal status and worries of deportation are important determinants of health for Asian immigrants. The results point to a critical need for systematic investment in data collection for data disaggregation.

Preliminary Observations from The FILLED Project (FILipino Lived Experiences during COVID-19)

[Melanie D Sabado-Liwag](#) [1], [Mayra Zamora](#) [1], [Shenazar Esmundo](#) [2], [Jake Ryann Sumibcay](#) [1], [Patchareeya P Kwan](#) [2]
Affiliations expand

- PMID: 36231606
- DOI: [10.3390/ijerph191912303](#)

Abstract

Health outcomes for Asian American subgroups are often aggregated, masking unique experiences and disparities exacerbated by the COVID-19 pandemic, specifically among Filipino Americans (FilAms). The FILLED (Filipino Lived Experiences during COVID-19) Project launched a cross-sectional online survey between April-August 2021 among FilAm adults in Southern California to document community issues and outcomes during the pandemic. Among 223 participants, 47.5% were immigrants, 50.9% identified as essential workers, and 40.6% had a pre-existing health condition before the pandemic. Despite high rates of health insurance (93.3%), 24.4% of the sample did not have a regular health care provider. During the pandemic, 32.7% needed mental health help but did not get it and 44.2% did not know where to get such services. Most respondents felt that the COVID-19 vaccination was a personal responsibility to others (76.9%) and the majority had received at least one dose of a COVID-19 vaccine (82.4%). Regarding COVID-19 impact, participants reported moderate-severe changes in their daily routines (73.5%), access to extended social support (38.9%), housing issues (15.4%), and access to medical care (11.6%). To our knowledge, this study is the first community-driven effort highlighting FilAm community experiences in Southern California, where the highest proportion of FilAms in the United States reside, specifically after the COVID-19 vaccine was made widely available. The observational findings may help community leaders, policy makers, and public health researchers in the design, development, and implementation of post-pandemic intervention strategies used by community-partnered projects that address FilAm and sub-Asian group health disparities at grassroots to societal levels.

Lost on the frontline, and lost in the data: COVID-19 deaths among Filipinx healthcare workers in the United States

Loraine A Escobedo [1], Brittany N Morey [2], Melanie D Sabado-Liwag [3][4], Ninez A Ponce [3][5][6]

Abstract

Background: Filipinx Americans working in healthcare are at risk for COVID-19 death but lack consistent mortality data on healthcare worker deaths. The lack of disaggregated data for Asian subgroups proliferates anti-Asian structural racism as the needs of high-risk groups are systematically undetected to merit a proper public health response. We work around this aggregated data problem by examining how the overrepresentation of Filipinxs in healthcare contributes to COVID-19 mortality among Asian American populations.

Methods: To overcome the lack of COVID-19 mortality data among Filipinx American healthcare workers, we merged data from several sources: Kanlungan website (the only known public-facing source of systematically reported mortality data on Filipinx healthcare workers nationally and globally), National Center for Health Statistics, and 2014-2018 American Community Survey. We examined county-level associations using t-tests, scatterplots, and linear regression.

Findings: A higher percentage of Filipinxs among Asian Americans was correlated with a higher percentage of COVID-19 decedents who are Asian Americans ($r = 0.24$, $p = 0.01$). The percentage of Filipinx in healthcare remained a strong predictor of COVID-19 deaths among Asian Americans even after adjusting for age, poverty, and population density (coef = 1.0, $p < 0.001$). For every 1% increase in Filipinx among the healthcare workforce, the percentage of Asian American COVID-19 decedents increased by 1%.

Interpretation: Our study shows that the overrepresentation of Filipinxs in healthcare contributes to COVID-19 mortality disparities among Asian Americans. Our findings advocate for systems change by practicing anti-racist data agendas that collect and report on Asian subgroups for effective real-time targeted approaches against health inequities.

Learning to love ourselves again: Organizing Filipinx/a/o scholar-activists as antiracist public health praxis

Erin Manalo-Pedro [1][2], Andrea Mackey [1], Rachel A Banawa [1][2][3], Neille John L Apostol [1], Warren Aguiling [1][4], Arleah Aguilar [1], Carlos Irwin A Oronce [1][2][5], Melanie D Sabado-Liwag [1][6], Megan D Yee [1][7], Roy Taggueg [1][8], Adrian M Bacong [1][9], Ninez A Ponce [1][2][3]
Affiliations expand

Abstract

A critical component for health equity lies in the inclusion of structurally excluded voices, such as Filipina/x/o Americans (FilAms). Because filam invisibility is normalized, denaturalizing these conditions requires reimagining power relations regarding whose experiences are documented, whose perspectives are legitimized, and whose strategies are supported. in this community case study, we describe our efforts to organize a multidisciplinary, multigenerational, community-driven collaboration for FilAm community wellness. Catalyzed by the disproportionate burden of deaths among FilAm healthcare workers at the onset of the COVID-19 pandemic and the accompanying silence from mainstream public health leaders, we formed the Filipinx/a/o Community Health Association (FilCHA). FilCHA is a counterspace where students, faculty, clinicians, and community leaders across the nation could collectively organize to resist our erasure. By building a virtual, intellectual community that centers our voices, FilCHA shifts power through partnerships in which people who directly experience the conditions that cause inequities have leadership roles and avenues to share their perspectives. We used Pinayism to guide our study of FilCHA, not just for the current crisis State-side, but through a multigenerational, transnational understanding of what knowledges have been taken from us and our ancestors. By naming our collective pain, building a counterspace for love of the community, and generating reflections for our communities, we work toward shared liberation. Harnessing the collective power of researchers as truth seekers and organizers as community builders in affirming spaces for holistic community wellbeing is love in action. This moment demands that we explicitly name love as essential to antiracist public health praxis.

Racial Bias Beliefs Related to COVID-19 Among Asian Americans, Native Hawaiians, and Pacific Islanders: Findings From the COVID-19 Effects on the Mental and Physical Health of Asian Americans and Pacific Islanders Survey Study (COMPASS)

Van Ta Park [# 1 2 3], Janice Y Tsoh [# 2 3 4], Marcelle Dougan [5], Bora Nam [1], Marian Tzuang [1], Quyen N Vuong [6], Joon Bang [7], Oanh L Meyer [8]
Affiliations expand

Free PMC article

Abstract

Background: During the COVID-19 pandemic, there have been increased reports of racial biases against Asian American and Native Hawaiian and Pacific Islander individuals. However, the extent to which different Asian American and Native Hawaiian and Pacific Islander groups perceive and experience (firsthand or as a witness to such experiences) how COVID-19 has negatively affected people of their race has not received much attention.

Objective: This study used data from the COVID-19 Effects on the Mental and Physical Health of Asian Americans and Pacific Islanders Survey Study (COMPASS), a nationwide, multilingual survey, to empirically examine COVID-19-related racial bias beliefs among Asian American and Native Hawaiian and Pacific Islander individuals and the factors associated with these beliefs.

Methods: COMPASS participants were Asian American and Native Hawaiian and Pacific Islander adults who were able to speak English, Chinese (Cantonese or Mandarin), Korean, Samoan, or Vietnamese and who resided in the United States during the time of the survey (October 2020 to May 2021). Participants completed the survey on the web, via phone, or in person. The Coronavirus Racial Bias Scale (CRBS) was used to assess COVID-19-related racial bias beliefs toward Asian American and Native Hawaiian and Pacific Islander individuals. Participants were asked to rate the degree to which they agreed with 9 statements on a 5-point Likert scale (ie, 1=strongly disagree to 5=strongly agree). Multivariable linear regression was used to examine the associations between demographic, health, and COVID-19-related characteristics and perceived racial bias.

Results: A total of 5068 participants completed the survey (mean age 45.4, SD 16.4 years; range 18-97 years). Overall, 73.97% (3749/5068) agreed or strongly agreed with

≥1 COVID-19-related racial bias belief in the past 6 months (during the COVID-19 pandemic). Across the 9 racial bias beliefs, participants scored an average of 2.59 (SD 0.96, range 1-5). Adjusted analyses revealed that compared with Asian Indians, those who were ethnic Chinese, Filipino, Hmong, Japanese, Korean, Vietnamese, and other or multicultural had significantly higher mean CRBS scores, whereas no significant differences were found among Native Hawaiian and Pacific Islander individuals. Nonheterosexual participants had statistically significant and higher mean CRBS scores than heterosexual participants. Compared with participants aged ≥60 years, those who were younger (aged <30, 30-39, 40-49, and 50-59 years) had significantly higher mean CRBS scores. US-born participants had significantly higher mean CRBS scores than foreign-born participants, whereas those with limited English proficiency (relative to those reporting no limitation) had lower mean CRBS scores.

Conclusions: Many COMPASS participants reported racial bias beliefs because of the COVID-19 pandemic. Relevant sociodemographic contexts and pre-existing and COVID-19-specific factors across individual, community, and society levels were associated with the perceived racial bias of being Asian during the pandemic. The findings underscore the importance of addressing the burden of racial bias on Asian American and Native Hawaiian and Pacific Islander communities among other COVID-19-related sequelae.

Impact of War and Resettlement on Vietnamese Families Facing Dementia: A Qualitative Study

[Mengxue Sun](#) [1], [Duyen Tran](#) [1][2], [Anna Bach](#) [1][2], [Uyen Ngo](#) [1], [Tiffany Tran](#) [1], [Thuy Do](#) [3], [Oanh L Meyer](#) [2]
Affiliations expand

- PMID: 35485807
- DOI: [10.1080/07317115.2022.2071661](#)

Abstract

Objectives: Most Vietnamese immigrants in the U.S. today arrived as political refugees due to the Vietnam War in the late 20th century. Refugees are disproportionally affected by health and mental health disparities as a result of experiencing distress and potentially traumatic experiences before, during, and after their migration processes. This study involved Vietnamese families facing dementia and used a qualitative approach to investigate participants' experiences before, during, and right after their resettlement in the U.S.

Methods: In-person interviews were conducted with 11 Vietnamese adults who cared for their family member with dementia. A descriptive analysis approach was used.

Results: Five major themes emerged from the interviews:1) immigrating separately from family members, 2) difficult and unsafe journeys, 3) experiences of loss, 4) lack of support systems in the U.S., and 5) feelings of unhappiness, sadness, or signs of depression.

Conclusions: This study provides a close examination of Vietnamese refugees' unique backgrounds and how individuals with dementia and their caregivers from this population may be disproportionally impacted by stress.

Clinical implications: To reduce health disparities, we recommend that providers and policymakers allocate more resources for culturally appropriate routine assessment, treatment, and referrals of those with dementia and their caregivers.

Understanding and Addressing the Digital Health Literacy Needs of Low-Income Limited English Proficient Asian American Patients

George Lee [1], Anita Chang [1], Agnita Pal [1], Thu-An Tran [1], Xinyue Cui [1], Thu Quach [1]
Affiliations expand

- PMID: 36186613
- DOI: 10.1089/heq.2022.0045

Abstract

Introduction: During the pandemic, Asian Health Services (AHS), a federally qualified health center serving patients in 14 Asian languages, transformed rapidly to provide telehealth visits, developed an intensive remote patient monitoring program, and conducted a digital health literacy survey.

Method: This article describes how AHS collected and utilized descriptive data on our patient population to inform our rapid adoption of telehealth and assess our patients' response to these changes.

Results: Our experiences show that audio visits are invaluable for our patients. In addition, our remote monitoring program resulted in 96% of patients improving their blood pressure control.

Conclusion: Many barriers to widespread adoption of telehealth exist, including low digital literacy and the need for in-language digital training. Disaggregated data by ethnicity and language are needed to inform future work.

A Social Media-Based Intervention for Chinese American Caregivers of Persons With Dementia: Protocol Development

Y Alicia Hong [1], Kang Shen [1], Huixing Kate Lu [2], Hsiaoyin Chen [2], Yang Gong [3], Van Ta Park [4], Hae-Ra Han [5]
Affiliations expand

Abstract

Background: Racial/ethnic minority and immigrant caregivers of persons with dementia experience high rates of psychosocial stress and adverse health outcomes. Few culturally tailored mobile health (mHealth) programs were designed for these vulnerable populations.

Objective: This study reports the development of a culturally tailored mHealth program called Wellness Enhancement for Caregivers (WECARE) to improve caregiving skills, reduce distress, and improve the psychosocial well-being of Chinese American family caregivers of persons with dementia.

Methods: Community-based user-centered design principles were applied in the program development. First, the structure and curriculum of the WECARE program were crafted based on existing evidence-based interventions for caregivers with input from 4 experts. Second, through working closely with 8 stakeholders, we culturally adapted evidence-based programs into multimedia program components. Lastly, 5 target users tested the initial WECARE program; their experience and feedback were used to further refine the program.

Results: The resulting WECARE is a 7-week mHealth program delivered via WeChat, a social media app highly popular in Chinese Americans. By subscribing to the official WECARE account, users can receive 6 interactive multimedia articles pushed to their WeChat accounts each week for 7 weeks. The 7 major themes include (1) facts of dementia and caregiving; (2) the enhancement of caregiving skills; (3) effective communication with health care providers, care partners, and family members; (4) problem-solving skills for caregiving stress management; (5) stress reduction and depression prevention; (6) the practice of self-care and health behaviors; and (7) social support and available resources. Users also have the option of joining group chats for peer support. The WECARE program also includes a back-end database that manages intervention delivery and tracks user engagement.

Conclusions: The WECARE program represents one of the first culturally tailored social media-based interventions for Chinese American caregivers of persons with dementia. It demonstrates the use of community-based user-centered design principles in developing an mHealth intervention program in underserved communities. We call for more cultural adaptation and development of mHealth interventions for immigrant and racial/ethnic minority caregivers of persons with dementia.

Socioeconomic Inequities in Vaccine Hesitancy Among Native Hawaiians and Pacific Islanders

[Raynald A Samoa](#) [1], [Lan N Đoàn](#) [2], [Anne Saw](#) [3], [Nia Aitaoto](#) [4], [David Takeuchi](#) [5]
Affiliations expand

- PMID: 36081880
- DOI: [10.1089/heq.2022.0033](#)

Abstract

Purpose: COVID-19 vaccine hesitancy exists in communities of color who are disproportionately impacted by COVID-19. In many states, Native Hawaiians and Pacific Islanders (NHs/PIs) experience the highest rates of COVID-19 confirmed cases and mortality among U.S. ethnic/racial groups. National trends regarding vaccine hesitancy among NHs/PIs are currently lacking.

Methods: Data were derived from the Asian American and NH/PI COVID-19 Needs Assessment Project, a national survey conducted during January-April 2021. The final analytic sample included 868 NH/PI adults. Logistic regression analyses were conducted to estimate odds ratios for vaccine hesitancy.

Results: Vaccine hesitancy ranged from 23% among Other PIs to 56.3% among Tongan adults. Younger adults (18-24 and 25-44 years), those with lower educational attainment, and those with lower income were more vaccine hesitant. Overall, education and income showed a strong association with vaccine hesitancy in bivariate logistic models. However, the associations between vaccine hesitancy and education and income varied by NH/PI groups. NHs, Samoans, and Multiethnic NHs/PIs showed the most consistent associations between the socioeconomic position variables and vaccine hesitancy.

Conclusions: The examination of vaccine hesitancy among NHs/PIs follows the socioeconomic gradient for some ethnic groups but not others. More studies are needed to determine what other socioeconomic indicators may be associated with health among specific NH/PI ethnic groups.

Policy implications: Reforms are needed to overcome structural racism underlying NH/PI evidence production, which currently renders NHs/PIs invisible. Innovative solutions based on successful community efforts can help deconstruct racist data inequities experienced by NHs/PIs.

Patient-reported supportive care needs among Asian American cancer patients

Katarina Wang [1][2], Carmen Ma [1], Feng Ming Li [1], Angeline Truong [1], Salma Shariff-Marco [2][3], Janet N Chu [1][4], Debora L Oh [2], Laura Allen [2], Mei-Chin Kuo [2], Ching Wong [1][3][4], Hoan Bui [1][4], Junlin Chen [1][4], Scarlett L Gomez [2][3], Tung T Nguyen [1][3][4], Janice Y Tsoh [5][6][7]
Affiliations expand

- PMID: 36040670
- DOI: 10.1007/s00520-022-07338-2

Abstract

Purpose: Cancer is the leading cause of death for Asian Americans. However, few studies have documented supportive care needs from the perspective of Asian American cancer patients. This study describes the needs reported by Asian American patients with colorectal, liver, or lung cancer over a 6-month period during their treatment.

Methods: Participants were recruited through the Greater Bay Area Cancer Registry and from cancer care providers in San Francisco. Participants self-identified as Asian or Asian American; were age 21 or older; spoke English, Chinese, or Vietnamese; and had stage I-III colon, rectum, liver, or lung cancer. Participants were matched with a language concordant patient navigator who provided support during a 6-month period. Needs were assessed by surveys at baseline, 3, and 6 months.

Results: Among 24 participants, 58% were 65 years or older, 42% did not complete high school, and 75% had limited English proficiency (LEP). At baseline, the most prevalent needs were cancer information (79%), nutrition and physical activity (67%), language assistance (54%), and daily living (50%). At the 3- and 6-month follow-up surveys, there was a higher reported need for mental health resources and healthcare access among participants.

Conclusion: In this pilot study of Asian American cancer patients who predominantly had LEP, participants reported many needs, with cancer information and language assistance as the most prominent. The findings highlight the importance of culturally and linguistically appropriate patient navigators in addressing supportive care needs among cancer patients with LEP.

Pacific Islanders in the Era of COVID-19: an Overlooked Community in Need

Leah Cha [1], Thomas Le [2], Taunuu Ve'e [3], Natalie T Ah Soon [4], Winston Tseng [5]
Affiliations expand

Abstract

Background: Pacific Islanders (PIs), an indigenous, diverse population in the USA, have endured generational burdens of Western colonization and institutional racism that placed this population at socioeconomic and health disadvantages, such as in poverty, chronic disease, and now COVID-19. However, little is known about the impact of COVID-19 on this historically disadvantaged population. This study assessed the extent US PIs have been adversely affected by COVID-19 across the 50 states.

Methods: Using state-level national data as of September 9th, 2020, we conducted a secondary-data analysis of COVID-19 cases and deaths in PIs relative to their population representation and other racial groups, case odds ratios, and age-adjusted standard mortality ratios.

Key results: Only 46% of states reported PI cases and 36% of states reported PI deaths. Of 23 states with available data on PIs, PIs were overrepresented in COVID-19 cases and deaths relative to their population representation in 21 and 14 states, respectively. The proportion of COVID-19 cases and deaths to the PI population was highest among all racial groups in 15 and 9 states, respectively. PIs had higher odds of exposure to COVID-19 than Whites in 21 of 23 states, and higher number of observed deaths than expected in 6 of 7 states with available PI data.

Conclusions: Engaging PI community-based and faith-based organizations in medical and public health outreach efforts, health workforce employment and training programs, along with granular data collection and reporting, are vital to mitigate the disproportionate effects of COVID-19 on this population.

Association between immigration enforcement encounters and COVID-19 testing and delays in care: a cross-sectional study of undocumented young adult immigrants in california

May Sudhinaraset [1], Hye Young Choi [2], Ezinne Nwankwo [3], Maria-Elena De Trinidad Young [4]
Affiliations expand

- PMID: 35974358
- DOI: 10.1186/s12889-022-13994-0

Free PMC article

Abstract

Background: Undocumented immigrants are expected to face increased risks related to COVID-19 due to marginalizing restrictive immigration policies. However, few studies have assessed the prevalence of direct encounters with the immigration enforcement system among the undocumented and its impacts on their COVID-related health behaviors and outcomes. In this study, we quantify undocumented immigrants' lifetime exposure to various immigration enforcement tactics and their association with delays in COVID-19 testing and healthcare behaviors.

Methods: This cross-sectional study included a non-random sample of 326 Asian and Latinx undocumented immigrants in California from September 2020 to February 2021. The primary exposure was immigration enforcement encounter scores ranging from 0-9, assessed through self-reports of direct experiences with the immigration system, immigration officials, and law enforcement. The main outcomes were positive test for COVID-19, had or suspected having COVID-19, and delayed or avoided testing and/or treatment for COVID-19 due to immigration status. We used multivariable logistic regression models to examine the association between the primary exposure and outcomes of interest.

Results: Among 326 participants, 7% had received a positive COVID-19 test result, while 43% reported having or suspected having COVID-19. Almost 13% delayed or avoided COVID-19 testing and/or treatment because of their immigration status. Overall, an increase in immigration enforcement encounters was associated with higher odds of suspecting having had COVID-19 (aOR = 1.13; 95% CI: 1.01,1.26). Reporting an additional enforcement encounter was associated with higher odds of delaying or avoiding testing and/or treatment because of immigration status (aOR = 1.53, 95% CI: 1.26,1.86). Compared to their Latino counterparts, Asian respondents were more likely to report higher odds of delaying or avoiding testing and/or treatment (aOR = 3.13, 95% CI: 1.17,8.42). There were no significant associations between the enforcement score

and testing positive for COVID-19. Additionally, while Latinxs were more likely to report immigration enforcement encounters than Asians, there were no differences in the effects of race on COVID-19 testing and healthcare behaviors in models with race as an interaction term ($p < 0.05$).

Conclusions: Immigration enforcement encounters compound barriers to COVID-19 testing and treatment for undocumented immigrants.

Representation of Asian American Populations in Medical School Curricula

Peter Sang Uk Park [1], Eda Algur [1], Sweta Narayan [1], William B Song [1], Matthew D Kearney [2][3], Jaya Aysola [3][4][5]
Affiliations expand

- PMID: 36149654
- DOI: 10.1001/jamanetworkopen.2022.33080

Abstract

Importance: Despite being one of the fastest-growing populations in the US, the Asian American population is often misrepresented in and omitted from health research and policy debate. There is a current lack of understanding of how Asian American populations are portrayed in medical school curricula.

Objective: To assess how Asian American populations and their subgroups are represented in medical school curricula.

Design, setting, and participants: In this qualitative study, the content of 632 lectures from all 19 courses of the preclinical curriculum at a single US institution from the academic year 2020 to 2021 was analyzed to identify and characterize unique mentions of race and ethnicity as well as granular ethnicity. Among the 632 lectures, we identified 256 nonrepetitive, unique mentions of race and ethnicity or granular ethnicity. These unique mentions were coded and analyzed for emerging patterns of use.

Main outcomes and measures: Study outcomes included (1) the frequency of specific racial and ethnic categories mentioned in the curriculum, (2) the relative proportion of mentions of race and ethnicity that involved or included Asian American data by courses and context, and (3) key themes representing emerging patterns found from qualitative analysis of curriculum content for mentions of Asian American populations or lack thereof.

Results: Among the 632 lectures, 256 nonrepetitive mentions of race and ethnicity or granular ethnicity were identified; of these, Asian American populations and/or their subgroups were mentioned in 79 of the instances (30.9%). The most common terms used to denote Asian American populations were Asian, with 36 mentions (45.6%); followed by Japanese, with 10 mentions (12.7%); and Chinese, with 8 mentions (10.1%). Overall, there were 26 mentions (10.2%) of American Indian or Alaska Native populations, 12 mentions (4.7%) of Asian and Pacific Islander or Asian American and Pacific Islander populations, 67 mentions (26.2%) of Asian or Asian American populations, 143 mentions (55.9%) of Black or African American populations, 62

mentions (24.2%) of Hispanic or Latino populations, 4 mentions (1.6%) of Native Hawaiian or Pacific Islander populations, and 154 mentions (60.2%) of White populations. During the analysis of the curriculum for representation of Asian American populations, the following 5 key themes emerged from the data: (1) omission, (2) aggregation, (3) inconsistent categorization, (4) misidentification of granular ethnicity, and (5) association of race and ethnicity with disease.

Conclusions and relevance: This qualitative study suggests that the curriculum from a single US medical school largely mirrors the inappropriate use of race and ethnicity found in published health literature and clinical guidelines. Solutions with long-term results will require collaboration among diverse groups of interest to adopt inclusive research programs and design. Such solutions could better equip students in combating race-based medicine and could promote community outreach programs built based on trust.

Establishing a National Engagement Strategy for Recruiting Asian Americans and Other Minorities into Biomedical Research

Fornessa T Randal, Siya Qi, Paula Lozano, Yicklun Mo, Jennifer Oh, Susan Choi, Ange Hwang, Angie Lobo, Kate Hilton-Hayward, Helen Sun, Darling Richiez, Anthony Nguyen, Kate Moraras, Helen Lam, Karen E Kim

Abstract

Background: The All of Us Research Program seeks to advance precision medicine and reduce health disparities by recruiting people in demographic categories that are underrepresented in biomedical research. Asian Americans, Native Hawaiians and Pacific Islanders are the most understudied of all racial/ethnic groups in the United States. We propose a national engagement strategy for the recruitment of Asian Americans, Native Hawaiians and Pacific Islanders into biomedical research using a community-based participatory research approach.

Methods: We partnered with Asian serving community-based organizations across the United States to increase education and awareness and developed a culturally and linguistically tailored approach for the engagement of AANHPIs into All of Us Research Program.

Results: In the first year, our national engagement strategy reached more than 35,000 AANHPIs through promotional events and educational sessions.

Conclusions: Our success is a result of our equal and mutually beneficial partnership with community-based organizations who have access to rich, local knowledge and hold a unique role within the community.

Fetal Maturation and Intrauterine Survival in Asian American Women by Ethnicity

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Affiliations expand

- PMID: 36055652
- DOI: 10.14423/SMJ.0000000000001443

Abstract

Objectives: Although there are multiple ethnic subgroups of the Asian race, this population is usually treated as homogenous in public health research and practice. There is a dearth of information on fetal maturation and perinatal outcomes among Asian American women compared with their non-Hispanic (NH) White counterparts. This study aimed to determine whether fetal maturation, as captured by gestational age periods, influences the risk of stillbirth in Asian American fetuses, in general, as well as within different ethnic subgroups: Asian Indian, Korean, Chinese, Vietnamese, Japanese, and Filipino, using NH Whites as referent.

Methods: We included singleton births within 37 to 44 gestational weeks occurring in Asian American and NH White mothers from 2014 to 2017. Adjusted logistic regression models were used to quantify the association between mother's race/ethnicity and risk of stillbirth by gestational age phenotypes: early-term, full-term, late-term, and postterm.

Results: Compared with NH Whites, Asian Americans had 35% (adjusted odds ratio 0.65, 95% confidence interval 0.53-0.76) and 28% (adjusted odds ratio 0.72, 95% confidence interval 0.59-0.85) lower risk of early-term and full-term stillbirths, respectively.

Conclusions: Our study suggests the existence of differential maturation of the fetoplacental unit as explanation for the decline in intrauterine survival advantage with advancing gestational age among Asian American subgroups.

A Qualitative Analysis of a Caregivers' Experience of Complementary Feeding in a Population of Native Hawaiian, Other Pacific Islander and Filipino Infants: The Timing of the Introduction of Complementary Foods, and the Role of Transgenerational Experience

Kara Mulville [1] [2], Jessie Kai [3], John M Kearney [1], Jacqueline Ng-Osorio [4], Carol J Boushey [5], Marie K Fialkowski [3]
Affiliations expand

- PMID: 36014772
- DOI: 10.3390/nu14163268

Abstract

The aim of this study was to investigate caregivers' experiences of complementary feeding (CF) among the Native Hawaiian and Other Pacific Islander (NHPI), and Filipino populations. Research focused on the timing of CF commencement, and the influence of transgenerational experience on feeding practices. The experiences and practices of those who fed human milk exclusively (HME), were compared to those who included infant formula (F&HM). Caregivers of a subset of 32 infants who were participating in a larger longitudinal study relating to CF and diet diversity, took part in voluntary in-depth interviews relating to CF practices. Interviews were recorded and transcribed. Two researchers analyzed interview transcripts. Interrater reliability and saturation were established. Institutional Review Board exemption was confirmed prior to study commencement. Interviews with 29 caregivers of infants were included in this study. Only infants of the F&HM group had an early introduction to complementary foods (<4 months of age). Caregivers reported receiving conflicting advice from healthcare professionals (HCPs) in relation to timing of the introduction of complementary foods. Nonetheless, the majority of caregivers reported following the advice of HCPs. Extended family (including grandparents) played less of a role in infant feeding, compared to previous generations. While transgenerational practices were valued and included, ultimately, the perceived health and safety of the practice for infants influenced decisions.

South Asians Active Together (SAATH): Protocol for a multilevel physical activity intervention trial for South Asian American mother and daughter dyads

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Affiliations expand

Abstract

South Asian (SA), including Asian Indian and Pakistani Americans, have a high burden of cardiometabolic risk factors and low levels of physical activity (PA). Increasing PA in the U.S. population is a national priority; however, SA American women and girls experience unique barriers to PA that are not addressed by current promotion efforts. To address this gap, our community-based participatory research partnership developed the South Asians Active Together (SAATH) intervention. This study is a two-arm randomized clinical trial to evaluate the effects, mediators, and implementation of the 18-week SAATH intervention. A total of 160 mother-daughter dyads will be randomized in a 1:1 ratio to the SAATH intervention and control groups. The intervention was designed for mother-daughter dyads and targets individual, interpersonal, and family levels through (1) group exercise classes, (2) mother-daughter discussions, and (3) peer group discussions. The intervention targets the environment level through community partner meetings aimed at creating environment changes to enhance PA opportunities for SA women and girls. The control group will receive PA education materials. We hypothesize that dyads who receive the intervention will have significantly greater increases in moderate- and vigorous-intensity PA (MVPA) from baseline to 4 months, compared to the control group. MVPA will be measured at 12 months in intervention participants to examine if changes are sustained. A process evaluation will use the reach, effectiveness, adoption, implementation, and maintenance (RE-AIM) framework. This study will fill knowledge gaps about the effectiveness and implementation of culturally adapted, community-based PA interventions for SA women and girls.

Moral parochialism and causal appraisal of transgressive harm in Seoul and Los Angeles

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Affiliations expand

Abstract

The evolutionary fitness payoffs of moral condemnation are greatest within an individual's immediate social milieu. Accordingly, insofar as human moral intuitions have been shaped by adaptive design, we can expect transgressive harms to be perceived as more wrong when transpiring in the here and now than when occurring at a distance, or with the approval of local authority figures. This moral parochialism hypothesis has been supported by research conducted in diverse societies, but has yet to be tested in an East Asian society, despite prior research indicating that East Asians appraise transgressive acts as being caused by situational and contextual factors to a greater extent than do Westerners, who tend to emphasize dispositional factors (i.e., the transgressor's personal nature). Here, in a quasi-experiment using field samples recruited in Seoul and Los Angeles, we tested (i) the moral parochialism hypothesis regarding the perceived wrongness of transgressions, as well as (ii) the extent to which these wrongness judgments might be influenced by cross-cultural differences in causal appraisals. Despite notably large differences across the two societies in situational versus dispositional appraisals of the causes of the transgressions, replicating previous findings elsewhere, in both societies we found that transgressions were deemed less wrong when occurring at spatial or temporal remove or with the consent of authorities. These findings add to the understanding of morality as universally focused on local affairs, notwithstanding cultural variation in perceptions of the situational versus dispositional causes of (im)moral acts.

A Systematic Review of Ethnoracial Participation in Randomized Clinical Trials of Behavioral Activation

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- PMID: 35987549

Abstract

As of the last available NIH report, people of color (POC) constituted 28.1% of enrollment across all U.S. domestic clinical trials. The literature on prevalence rates of depression among POC is mixed. While the prevalence rates of depression may vary across POC, it remains unknown to what degree POC have been included in outcome clinical trials of depression since NIH's mandates for inclusion of minorities in clinical outcome research. Following PRISMA guidelines, the present review identified randomized controlled trials of behavioral activation from 1989 to 2021 using the following search engines: PsycINFO, EMBASE, and Cochrane Central Register of Controlled Trials. We reviewed 5,247 articles and included 28 articles that met full inclusion criteria (n = 5,169 participants). Across studies included in this review, 70% were non-Latinx White, 14.1% were African American, 8.9% were Latinx, 0.5% were Asian, 2.9% were other, and 3.7% were unknown. Results indicated an increase in representation of ethnoracial inclusion rates across time and that recruitment method was not associated with adequate inclusion of POC. However, the university setting was associated with inadequate representation of POC.

Ethnic differences in fast-food advertising exposure and body mass index among Asian American/Pacific Islander and White young adults

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Affiliations expand

- PMID: 35970742
- DOI: 10.1016/j.orcp.2022.07.004

Abstract

Background: Fast-food advertising (FFA) is a potential contributor to obesity. Few studies have examined the relationship between FFA exposure and body mass index (BMI) among young adults. Furthermore, these studies have rarely examined ethnic differences in the relationship between FFA exposure and BMI, specifically across Asian American/Pacific Islander (AAPI) subgroups.

Objective: This study aimed to investigate ethnic differences in the association between FFA exposure and BMI in a sample of predominantly AAPI young adults.

Methods: Cross-sectional data were collected in 2018 from 2622 young adult college students (ages 18-25 years; 54% women) on O'ahu, Hawai'i. FFA exposure was assessed using a cued-recall measure. Multiple regression and analysis of covariance were used to analyze the data.

Results: A significant association was found between higher FFA exposure and higher BMI ($p < 0.05$; 2-tailed) in the entire sample, adjusting for ethnicity, other demographic variables, and levels of physical activity. However, when examined by ethnic group, the association between FFA exposure and BMI was not statistically significant. A statistically significant main effect of ethnicity on BMI was found. Native Hawaiian/other Pacific Islanders (NHPI) reported the highest mean BMI [27.07 (SD ± 7.74) kg/m^2] compared with the other four ethnic groups ($p < 0.001$). The effect of ethnicity on FFA exposure was not found to be statistically significant.

Conclusion: FFA exposure appears to adversely influence BMI in a population of predominantly AAPI young adults. Although we did not find ethnic differences in FFA exposure or in the association between FFA exposure and BMI, the current data make a case for similar future investigation with larger subgroup sample sizes. Regulations that curtail FFA exposure among young adults may be needed.

Disparities in Survival and Comorbidity Burden Between Asian and Native Hawaiian and Other Pacific Islander Patients With Cancer

Kekoa Taparra [1], Vera Qu [1], Erqi Pollom [1][2]

- PMID: 35960520
- DOI: 10.1001/jamanetworkopen.2022.26327

Abstract

Importance: Improper aggregation of Native Hawaiian and other Pacific Islander individuals with Asian individuals can mask Native Hawaiian and other Pacific Islander patient outcomes. A comprehensive assessment of cancer disparities comparing Asian with Native Hawaiian and other Pacific Islander populations is lacking.

Objective: To compare comorbidity burden and survival among East Asian, Native Hawaiian and other Pacific Islander, South Asian, and Southeast Asian individuals with non-Hispanic White individuals with cancer.

Design, setting, and participants: This retrospective cohort study used a national hospital-based oncology database enriched with Native Hawaiian and other Pacific Islander and Asian populations. Asian, Native Hawaiian and other Pacific Islander, and White individuals diagnosed with the most common cancers who received treatment from January 1, 2004, to December 31, 2017, were included. Patients younger than 18 years, without pathologic confirmation of cancer, or with metastatic disease were excluded. Data were analyzed from January to May 2022.

Main outcomes and measures: The primary end points were comorbidity burden by Charlson-Deyo Comorbidity Index and overall survival (OS).

Results: In total, 5 955 550 patients were assessed, including 60 047 East Asian, 11 512 Native Hawaiian and other Pacific Islander, 25 966 South Asian, 42 815 Southeast Asian, and 5 815 210 White patients. The median (IQR) age was 65 (56-74) years, median (IQR) follow-up was 58 (30-96) months, and 3 384 960 (57%) were women. Patients were predominantly from metropolitan areas (4 834 457 patients [84%]) and the Southern United States (1 987 506 patients [34%]), with above median education (3 576 460 patients [65%]), and without comorbidities (4 603 386 patients [77%]). Cancers included breast (1 895 351 patients [32%]), prostate (948 583 patients [16%]), kidney or bladder (689 187 patients [12%]), lung (665 622 patients [11%]), colorectal (659 165 patients [11%]), melanoma (459 904 patients [8%]), endometrial (307 401 patients [5%]), lymphoma (245 003 patients [4%]), and oral cavity (85 334 patients [1%]) malignant neoplasms. Native Hawaiian and other Pacific Islander patients had the

highest comorbidity burden (adjusted odds ratio [aOR], 1.70; 95% CI, 1.47-1.94) compared with Asian and White groups. Asian patients had superior OS compared with White patients for most cancers; only Southeast Asian patients with lymphoma had inferior survival (adjusted hazard ratio [aHR], 1.26; 95% CI, 1.16-1.37). In contrast, Native Hawaiian and other Pacific Islander patients demonstrated inferior OS compared with Asian and White patients for oral cavity cancer (aHR, 1.56; 95% CI, 1.14-2.13), lymphoma (aHR, 1.35; 95% CI, 1.11-1.63), endometrial cancer (aHR, 1.30; 95% CI, 1.12-1.50), prostate cancer (aHR, 1.29; 95% CI, 1.14-1.46), and breast cancer (aHR, 1.09; 95% CI, 1.00-1.18). No cancers among Native Hawaiian and other Pacific Islander patients had superior OS compared with White patients.

Conclusions and relevance: In this cohort study, compared with White patients with the most common cancers, Asian patients had superior survival outcomes while Native Hawaiian and other Pacific Islander patients had inferior survival outcomes. Native Hawaiian and other Pacific Islander patients had significantly greater comorbidity burden compared with Asian and White patients, but this alone did not explain the poor survival outcomes. These results support the disaggregation of these groups in cancer studies.

Trends in Collection of Disaggregated Asian American, Native Hawaiian, and Pacific Islander Data: Opportunities in Federal Health Surveys

Kevin H Nguyen [1], Kaitlyn P Lew [1], Amal N Trivedi [1]
Affiliations expand

- PMID: 35952328
- DOI: 10.2105/AJPH.2022.306969

Abstract

Collection of data for Asian American, Native Hawaiian, and Pacific Islander (AANHPI) persons that is disaggregated by ethnic subgroup may identify disparities that are not apparent in aggregated data. Using content analysis, we identified national population surveys administered by the US Department of Health and Human Services (HHS) and evaluated trends in the collection of disaggregated AANHPI data between 2011 and 2021. In 2011, 4 of 15 surveys (27%) collected disaggregated data for Asian American, 2 of 15 surveys (13%) collected data on Native Hawaiian, and 2 of 15 surveys (13%) collected disaggregated data for Pacific Islander people. By 2019, 14 of 21 HHS-administered surveys (67%) collected disaggregated data for Asian American (6 subgroups), 67% collected data on Native Hawaiian, and 67% collected disaggregated data on Pacific Islander (3 subgroups) people. Collection of disaggregated AANHPI data in HHS-administered surveys increased from 2011 to 2021, but opportunities to expand collection and reporting remain. Strategies include outreach with community organizations, increased language assistance, and oversampling approaches. Increased availability and reporting of these data can inform health policies and mitigate disparities. (*Am J Public Health*. 2022;112(10):1429-1435. https://doi-org.ucsf.idm.oclc.org/10.2105/AJPH.2022.306969).

Effects of language and acculturation on neurocognitive performance of Japanese Americans

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Affiliations expand

Abstract

Objective: Despite significant work in African and Hispanic American populations, little information is available regarding performance of Japanese Americans on neuropsychological tests. The aim of this study was to examine the effects of dominant language and acculturation levels on the performance of Japanese Americans on selected neurocognitive tests.

Method: Based on their self-identified dominant language, 48 English-dominant speaking (ES) Japanese Americans (M_{age} = 64.48, SD = 10.52) and 52 Japanese-dominant speaking (JS) Japanese Americans (M_{age} = 60.17, SD = 11.15) were assessed on a neurocognitive battery.

Results: Significant differences in test performance were observed between the groups, with the JS group performing poorer on the measures of naming ability, verbal and olfactory learning/memory, and language, compared to the ES group. Levels of acculturation explained that group difference. The Brief Visuospatial Memory Test-Revised (BVMT-R) showed no group differences, suggesting lack of language proficiency and acculturation biases in this ethnic sample. Within the JS group, self-reported English proficiency and years of education obtained in Japan explained variance in addition to age, education, and gender, in performance on the Boston Naming Test and the Letter Fluency Test, respectively.

Conclusions: The present study highlights the need for culturally sensitive evaluation in the neuropsychological assessment of this population. The variability in backgrounds contributed to the variability in performance between and within groups. Factors in addition to age and education, including the effects of primary language and acculturation, warrant consideration when evaluating the neuropsychological performance of Japanese Americans in research and clinical settings. (PsycInfo Database Record (c) 2022 APA, all rights reserved).

Leading causes of death in Asian Indians in the United States (2005-2017)

Claudia Fernandez Perez [1][2][3], Kevin Xi [1][4], Aditya Simha [1][5], Nilay S Shah [1][6], Robert J Huang [1][7], Latha Palaniappan [1][8], Sukyung Chung [1], Tim Au [1][9], Nora Sharp [1][10], Nathaniel Islas [1][11], Malathi Srinivasan [1][8]
Affiliations expand

Abstract

Objective: Asian Indians are among the fastest growing United States (US) ethnic subgroups. We characterized mortality trends for leading causes of death among foreign-born and US-born Asian Indians in the US between 2005-2017.

Study design and setting: Using US standardized death certificate data, we examined leading causes of death in 73,470 Asian Indians and 20,496,189 non-Hispanic whites (NHWs) across age, gender, and nativity. For each cause, we report age-standardized mortality rates (AMR), longitudinal trends, and absolute percent change (APC).

Results: We found that Asian Indians' leading causes of death were heart disease (28% mortality males; 24% females) and cancer (18% males; 22% females). Foreign-born Asian Indians had higher all-cause AMR compared to US-born (AMR 271 foreign-born, CI 263-280; 175.8 US-born, CI 140-221; p<0.05), while Asian Indian all-cause AMR was lower than that of NHWs (AMR 271 Indian, CI 263-278; 754.4 NHW, CI 753.3-755.5; p<0.05). All-cause AMR increased for foreign-born Asian Indians over time, while decreasing for US-born Asian Indians and NHWs.

Conclusions: Foreign-born Asian Indians were 2.2 times more likely to die of heart disease and 1.6 times more likely to die of cancer. Asian Indian male AMR was 49% greater than female on average, although AMR was consistently lower for Asian Indians when compared to NHWs.

The mental health burden of racial and ethnic minorities during the COVID-19 pandemic

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Free PMC article

Abstract

Racial/ethnic minorities have been disproportionately impacted by COVID-19. The effects of COVID-19 on the long-term mental health of minorities remains unclear. To evaluate differences in odds of screening positive for depression and anxiety among various racial and ethnic groups during the latter phase of the COVID-19 pandemic, we performed a cross-sectional analysis of 691,473 participants nested within the prospective smartphone-based COVID Symptom Study in the United States (U.S.) and United Kingdom (U.K). from February 23, 2021 to June 9, 2021. In the U.S. (n=57,187), compared to White participants, the multivariable odds ratios (ORs) for screening positive for depression were 1·16 (95% CI: 1·02 to 1·31) for Black, 1·23 (1·11 to 1·36) for Hispanic, and 1·15 (1·02 to 1·30) for Asian participants, and 1·34 (1·13 to 1·59) for participants reporting more than one race/other even after accounting for personal factors such as prior history of a mental health disorder, COVID-19 infection status, and surrounding lockdown stringency. Rates of screening positive for anxiety were comparable. In the U.K. (n=643,286), racial/ethnic minorities had similarly elevated rates of positive screening for depression and anxiety. These disparities were not fully explained by changes in leisure time activities. Racial/ethnic minorities bore a disproportionate mental health burden during the COVID-19 pandemic. These differences will need to be considered as health care systems transition from prioritizing infection control to mitigating long-term consequences.

Protocol and baseline characteristics for a community health worker-led hypertension and diabetes management program for South Asians in Atlanta: The DREAM Atlanta study

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Affiliations expand

- PMID: 35940551
- DOI: 10.1016/j.cct.2022.106864

Abstract

Background: South Asians are disproportionately affected by type 2 diabetes (DMII) and comorbid hypertension (HTN). Community health worker (CHW) interventions have been shown to improve chronic disease outcomes, yet few have been tailored for South Asians. This paper describes the study protocol and baseline characteristics of an evidence-based CHW intervention to improve blood pressure (BP) control among South Asian adults with diabetes and comorbid HTN in Atlanta, GA.

Methods: A total of 195 South Asian adults were randomized to treatment and control groups, and of these 190 completed baseline surveys (97 treatment group and 93 control group). The treatment group receives five group education sessions on DMII and HTN management and two one-on-one goal setting sessions.

Measures: Primary outcomes include feasibility, acceptability, and BP control (systolic blood pressure [SBP] <130 and diastolic blood pressure [DBP] <80). Secondary outcomes included changes in glycated hemoglobin (HbA1c), weight, diabetes self-efficacy, diet, and physical activity.

Baseline results: Of the enrolled sample, 56% are female and mean age is 56.0 (±11.7). All participants are foreign-born. Mean SBP was 139.2 ± 4.3 and mean DBP was 84.7 ± 9.5. Intervention outcomes are measured at baseline and 6-month endpoint for both study groups.

Conclusions: To our knowledge, this study is the first to document the efficacy of a HTN and DMII management intervention among South Asian adults in Atlanta, GA. Future findings of the submitted protocol will fill an important gap on the translation and adaption of evidence-based interventions that have relevance to immigrant and minority populations.

Diabetes Prevalence, Risk Factors, and Care in Asian American and Pacific Islanders of Texas: Data From the 2015-2019 Behavioral Risk Factors Surveillance System

Angelina P Nguyen [1], Alona D Angosta [1], Weiming Ke [1], Thy M Khong [1], Connie C Tran [1], Miyong T Kim [2]

Affiliations expand

Abstract

Purpose: The purpose of this study was to investigate the health status and needs of the Asian American/Pacific Islander (AAPI) population with diabetes in Texas.

Methods: This was a cross-sectional secondary analysis of data collected from the Behavioral Risk Factors Surveillance System in Texas from 2015 to 2019 for non-Hispanic White (NHW) and AAPI adults.

Results: Although the overall crude diabetes prevalence was lower in AAPI adults, age-adjusted diabetes prevalence was higher than in NHWs. Significant risk factors associated with diabetes in the AAPI group included being male, marital status, lower education levels, lower income, being overweight/obese, and having a sedentary lifestyle. Engagement in self-management activities (checking blood glucose, checking feet, attending a diabetes management course) was lower in AAPIs than in NHWs.

Conclusions: Given stiff barriers to adequate screening and self-management support in diabetes care among ethnic populations such as AAPIs, targeted efforts to improve diabetes screening and effective care are warranted. Because today's AAPI populations are predominantly first-generation immigrant groups who suffer from language barriers, efforts should be made to develop health surveys in multiple languages for wider inclusion of understudied groups like AAPIs in diabetes-related research.

HPV vaccination and factors influencing vaccine uptake among people of Indian ancestry living in the United States

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Affiliations expand

Abstract

Approximately one-quarter of annual global cervical cancer deaths occur in India, possibly due to cultural norms promoting vaccine hesitancy. We sought to determine whether people of Indian ancestry (POIA) in the USA exhibit disproportionately lower human papilloma virus (HPV) vaccination rates than the rest of the US population. We utilised the 2018 National Health Interview Survey to compare HPV vaccine initiation and completion rates between POIA and the general US population and determined factors correlating with HPV vaccine uptake among POIA. Compared to other racial groups, POIA had a significantly lower rate of HPV vaccination (8.18% *vs.* 12.16%, 14.70%, 16.07% and 12.41%, in White, Black, Other Asian and those of other/mixed ancestry, respectively, $P = 0.003$), but no statistically significant difference in vaccine series completion among those who received at least one injection (3.17% *vs.* 4.27%, 3.51%, 4.31% and 5.04%, $P = 0.465$). Among POIA, younger individuals (*vs.* older), single individuals (*vs.* married), those with high English proficiency (*vs.* low English proficiency), those with health insurance and those born in the USA (*vs.* those born outside the USA) were more likely to obtain HPV vaccination ($P = 0.018$, $P = 0.006$, $P = 0.029$, $P = 0.020$ and $P = 0.019$, respectively). Public health measures promoting HPV vaccination among POIA immigrants may substantially improve vaccination rates among this population.

Diagnostic Process and Barriers Among Chinese-American and Korean-American Parents of Children with Autism

Irang Kim [1], Sarah Dababnah [2], Yao Wang [2], Charina Reyes [3]
Affiliations expand

- PMID: 35880793
- DOI: 10.1097/DBP.0000000000001070

Abstract

Objective: We sought to understand the experiences of Chinese-American and Korean-American parents of children with autism, including their initial concerns regarding their child's development, reported health professionals' responses to these concerns, diagnostic barriers, and factors associated with early autism diagnosis.

Method: We designed a survey with support from an expert advisory group and Asian-American parents of children with autism. We measured 3 time points of diagnostic history, areas of parents' concerns, professionals' responses to their concerns, 15 types of diagnostic barriers, and professionals' helpfulness. We used descriptive and independent t tests to analyze data from 28 parents of children with autism.

Results: Most of the parents (86%) had early concerns about their children's developmental delays and expressed their concerns to health professionals. However, approximately 60% of the parents reported that the professionals did not conduct developmental screenings or make referrals to specialists. The most common diagnostic barrier was the stress of the diagnostic process, followed by navigating health care systems. Parents who required interpreters noted poor quality and unavailability. Early child developmental concerns were associated with early autism diagnoses.

Conclusion: Although many Chinese-American and Korean-American parents had early concerns regarding their child's development and shared their concerns with health care professionals, parents encountered many barriers, including the stress of the diagnostic process. Chinese-American and Korean-American parents with limited English proficiency required additional support. Health care professionals' active listening and responses to parents' concerns can promote early diagnosis.

How I Learned to Speak Up About Anti-Asian Racism

Jason Eric Cheng [1]
Affiliations expand

Abstract

As a psychiatry residency program director of Asian descent at a historically Black institution, I provided forums for my majority-Black residents to process their feelings about the racial turmoil of the past couple of years. At the same time, I was downplaying anti-Asian racism. This tendency slowed my response to the recent rise of anti-Asian violence and how it affected my Asian residents and others. It comes in part from the flawed stereotype that Asians are model minorities, which influences both Asians and non-Asians alike. I was aware of this stereotype and educated others on it years ago, but it still led to me suppress my own feelings about the violence. Reviewing my past experiences with racism and discussing these issues in my various communities helped me acknowledge my feelings and learn to speak up about this significant issue. Taking anti-Asian racism seriously will validate the experience of a significant proportion of the American population and the medical workforce, and it is one of multiple steps necessary to address it.

American Indian/Alaska Native and black colon cancer patients have poorer cause-specific survival based on disease stage and anatomic site of diagnosis

V Shane Pankratz [1], Mikaela Kosich [2], Nicholas Edwardson [3], Kevin English [4], Prajakta Adsul [5], Yiting Li [6], Gulshan Parasher [6], Shiraz I Mishra [7]
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- PMID: 35872382
- DOI: 10.1016/j.canep.2022.102229

Abstract

Objectives: Studies of race-specific colon cancer (CC) survival differences between right- vs. left-sided CC typically focus on Black and White persons and often consider all CC stages as one group. To more completely examine potential racial and ethnic disparities in side- and stage-specific survival, we evaluated 5-year CC cause-specific survival probabilities for five racial/ethnic groups by anatomic site (right or left colon) and stage (local, regional, distant).

Methods: We obtained cause-specific survival probability estimates from National Cancer Institute's population-based Surveillance, Epidemiology, and End Results (SEER) for CC patients grouped by five racial/ethnic groups (Non-Hispanic American Indian/Alaska Native [AIAN], Non-Hispanic Asian/Pacific Islander [API], Hispanic, Non-Hispanic Black [NHB], and Non-Hispanic White [NHW]), anatomic site, stage, and other patient and SEER registry characteristics. We used meta-regression approaches to identify factors that explained differences in cause-specific survival.

Results: Diagnoses of distant-stage CC were more common among NHB and AIAN persons (>22 %) than among NHW and API persons (< 20 %). Large disparities in anatomic site-specific survival were not apparent. Those with right-sided distant-stage CC had a one-year cause-specific survival probability that was 16.4 % points lower (99 % CI: 12.2-20.6) than those with left-sided distant-stage CC; this difference decreased over follow-up. Cause-specific survival probabilities were highest for API, and lowest for NHB, persons, though these differences varied substantially by stage at diagnosis. AIAN persons with localized-stage CC, and NHB persons with regional- and distant-stage CC, had significantly lower survival probabilities across follow-up.

Conclusions: There are differences in CC presentation according to anatomic site and disease stage among patients of distinct racial and ethnic backgrounds. This, coupled with the reality that there are persistent survival disparities, with NHB and AIAN persons experiencing worse prognosis, suggests that there are social or structural determinants of these disparities. Further research is needed to confirm whether these CC cause-

specific survival disparities are due to differences in risk factors, screening patterns, cancer treatment, or surveillance, in order to overcome the existing differences in outcome.

Social isolation and psychological well-being among older Chinese Americans: Does resilience mediate the association?

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Affiliations expand

- PMID: 35866312
- DOI: 10.1002/gps.5791

Abstract

Objectives: Social isolation imposes risks to an individual's psychological well-being. However, few studies have examined the role of resilience on these associations among older Chinese Americans, the fastest-growing aging population across all racial/ethnic groups in the United States. We aim to examine the associations of social isolation with indicators of psychological well-being and the mediating role of resilience in these associations.

Methods: Data were derived from 398 Chinese older adults aged over 55 residing in Honolulu, Hawaii, in 2018. Psychological well-being was measured by psychological distress, life satisfaction, and happiness. Multivariate linear regressions and ordered logistic regressions were conducted.

Results: Social isolation was positively associated with psychological distress and negatively associated with life satisfaction and happiness (all p < 0.05). By contrast, resilience was associated with lower levels of psychological distress and higher levels of life satisfaction and happiness (all p < 0.05). Moreover, the findings supported our hypothesis that resilience mediated the association between social isolation and psychological well-being. With regard to social isolation, resilience contributed to 32.0% of its association with distress, 24.9% of the association with life satisfaction, and 16.3% of the association with happiness.

Conclusion: Our findings revealed a significant association between social isolation and psychological well-being and the mediating role of resilience in the association of older Chinese Americans in Hawaii. The study findings expand our understanding of psychological resources in older Chinese Americans and emphasize the importance of developing intervention programs to foster social connection and resilience among an understudied population.

Sexual and Reproductive Health Knowledge, Attitudes, and Self-Efficacy Among Young Adult Filipino American Women

Jamille Nagtalon-Ramos [1] [2], Cynthia Ayres [1], Brooke Faught [3]
Affiliations expand

Abstract

Introduction: Little is known about Filipino American women's (FAW) sexual and reproductive health (SRH). The purpose of this study was to examine the SRH knowledge, attitudes, and self-efficacy among young adult FAW.

Method: This was a qualitative, descriptive interpretive design. Four focus group interviews and one individual interview were conducted. Purposive sampling was used for this study. Inclusion criteria were female, Filipino American, between the ages 18 and 24 years old, and be able to understand and speak English.

Results: Twelve participants (n = 12) were recruited. Three themes emerged from this study: (a) sources of SRH information; (b) influence of cultural values, religion, and intergenerational factors; and (c) facilitators of and barriers to women's health services.

Discussion: Themes emerged from the content analysis identifying SRH disparities within the Filipino American community, which may inform future interventions and research on this topic.

Next Gen Hawai'i: Collaborative COVID-19 Social Media Initiative to Engage Native Hawaiian, Other Pacific Islander, and Filipino Youth

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Abstract

The Next Gen Hawai'i social media project was initiated in the fall of 2020 to address ongoing public health concerns and the need for accessible and reliable information across Hawai'i's diverse communities by strategically amplifying the voices of Hawai'i's youth in their Native languages. The collaborative effort arose from conversations within the Hawai'i's Native Hawaiian & Pacific Islander COVID-19 Response, Recovery, and Resilience Team, composed of diverse public and private organizations involved in statewide COVID-19 response efforts for Native Hawaiian and Pacific Islander communities. Next Gen Hawai'i's focus was on Native Hawaiian, Pacific Islander, Filipino, and other populations disproportionately suffering from COVID-19. Five social media platforms were developed to spread messaging to youth and young adults about COVID-19. Public Health Ambassadors (from high school to young adults) were recruited and engaged to create culturally and linguistically rooted messaging to promote public health and prevention-based social norms. This strength-based approach recognized youth as important community leaders and ambassadors for change and empowered them to create content for dissemination on platforms with national and global reach. Messaging was designed to build individual, community, and digital health literacy while integrating core cultural values and strengths of Native Hawaiian, Pacific Islander, and Filipino communities. Over 250 messages have been delivered across Next Gen Hawai'i social media channels on topics including vaccine information, mask-wearing, staying together over distances, mental health, and in-languages resources in Chuukese, Chamorro, Marshallese, Samoan, Hawaiian, Ilocano, Tagalog, and other Pacific-basin languages. Reach has included more than 75 000 views from various social media channels, media features, successful webinars, and relevant conference presentations. This Public Health Insights article provides an overview of Next Gen Hawai'i's activities and achievements as well as lessons learned for other youth-focused public health social media campaigns and organizations.

Adaptation of diabetes prevention program for Chinese Americans - a qualitative study

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Affiliations expand

- PMID: 35820882
- DOI: 10.1186/s12889-022-13733-5

Abstract

Background: Studies have demonstrated that a culturally and linguistically tailored Diabetes Prevention Program (DPP) can be effective in reducing diabetes risk in Chinese Americans. The purpose of this study was to explore the cultural and linguistic acceptability of the Centers for Disease Control and Prevention's Prevent T2 curriculum in an online format in the Chinese American community in New York City (NYC).

Methods: Three focus groups among a total of 24 Chinese Americans with prediabetes and one community advisory board (CAB) meeting with 10 key stakeholders with expertise in diabetes care and lifestyle interventions were conducted. Each focus group lasted approximately 1 to 1.5 h. All groups were moderated by a bilingual moderator in Chinese. The sessions were audiotaped, transcribed and translated to English for analysis. Using Atlas.ti software and open coding techniques, two researchers analyzed transcripts for thematic analysis.

Results: Five key themes were identified: barriers to behavioral changes, feedback on curriculum content and suggestions, web-based intervention acceptability, web-based intervention feasibility, and web-based intervention implementation and modifications. Participants with prediabetes were found to have high acceptability of web-based DPP interventions. Suggestions for the curriculum included incorporating Chinese American cultural foods and replacing photos of non-Asians with photos of Asians. Barriers included lack of access to the internet, different learning styles and low technology self-efficacy for older adults.

Conclusion: Although the acceptability of web-based DPP in the Chinese American community in NYC is high, our focus group findings indicated that the major concern is lack of internet access and technical support. Providing support, such as creating an orientation manual for easy online program access for future participants, is important.

End-of-Life Preparedness Among Japanese Americans: A Community Survey

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Affiliations expand

Abstract

The purpose of this study was to investigate the level of preparedness among Japanese American older adults for life's end by examining their knowledge, preferences, and arrangements for end-of-life issues. A total of 248 community dwelling Japanese Americans aged 50 and older participated in the study. The cross-sectional survey results indicated that participants believed they were well-informed about end-of-life issues and well-prepared for their lives' end. While most participants were in favor of making end-of-life arrangements, particularly with regard to making a *will/living trust*, creating an *advance health care directive*, appointing a *health care agent*, and *funeral planning*, relatively few favored *life-prolonging treatment* or planning for *organ donation*. They placed a high value on natural death and family-centered decision-making processes. These findings highlight the importance of awareness and cultural humility for social workers when providing culturally informed services at life's end to diverse Americans, including Japanese American older adults and their families.

Identity and weight-related beliefs among Black, Black/White biracial, East Asian, Hispanic/Latino, Native American, South Asian, and White U.S. Americans

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Abstract

In the current study we move away from bias-focused, White-centric research to examine relationships between gender, race/ethnicity, and weight-related attitudes, identity, and beliefs among Black, Black/White Biracial, East Asian, Hispanic/Latino, Native American, South Asian, and White U.S. Americans who self-identify as higher weight. The results showed that: (1) women identify as fat more than men do, (2) fat identity, operationalized as feelings of similarity to fat people (self-stereotyping) and importance of weight to one's sense of self (identity centrality) are relatively similar across races and ethnicities, and (3) fat identity and weight-related beliefs are related to positivity toward fat people across the racial/ethnic groups sampled in this study.

Physical Violence and Psychological Distress Among Asian and Pacific Islander Sexual Minority Men in the United States Before and During the COVID-19 Pandemic

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Affiliations expand

- PMID: 35766962
- DOI: 10.1089/lgbt.2021.0418

Abstract

Purpose: This study examined differences in self-reported physical violence and psychological distress among Asian American and Pacific Islander (AAPI) sexual minority men (SMM) before and during the 2019 novel coronavirus (COVID-19) pandemic (2019 vs. 2020). *Methods:* We used data from 1127 AAPI SMM who completed the 2019 (August 2019-December 2019) and 2020 (August 2020-January 2021) cycles of the American Men's Internet Survey (AMIS). We assessed differences in experiencing physical violence and serious psychological distress by year of survey completion. We used Poisson regression with robust variance estimation to examine whether physical violence was associated with serious psychological distress before and during COVID-19. Multivariate analyses adjusted for sociodemographic characteristics and the interaction between year and violence. *Results:* A greater percentage of AAPI SMM had serious psychological distress in 2020 during the pandemic relative to 2019 before the pandemic (56.6% vs. 35.64%, *p* < 0.001). AAPI SMM who experienced physical violence in the last 6 months were more likely to experience serious psychological distress than those who never experienced physical violence. The association between violence and psychological distress among AAPI SMM was not significantly different before and during the COVID-19 pandemic. *Conclusions:* Violence against AAPI SMM in the United States is widespread. Although we did not find significant differences in exposure to physical violence among AAPI SMM before and during the COVID-19 pandemic, the increase in serious psychological distress during the pandemic among AAPI SMM may indicate heightened need of mental health services.

A Qualitative Exploration of End-of-Life Care Planning With Korean Americans: Awareness, Attitudes, Barriers, and Preferences

Michin Hong, Hyunjin Noh, Kyeongmo Kim

Abstract

This study aimed to explore how Korean American older adults viewed and anticipated engaging in end-of-life (EOL) care planning. An exploratory qualitative research design was adopted for the study, and data were collected through 3 focus group interviews. A total of 30 Korean American older adults 65 years or older participated in the study. A total of 10 themes emerged and were organized into 5 categories: (1) awareness (varying experience in EOL care planning and insufficient understanding about advance directives), (2) attitudes (comfort with talking about EOL and favorable views toward EOL planning), (3) barriers (concerns about noncompliance and concerns about change of mind), (4) preference for natural dying (life-sustaining treatment as added pain and suffering and no meaning of life when relying on life-sustaining treatment), and (5) preference for EOL planning process (EOL planning initiated by physicians and involvement of close family members). This exploratory study provides crucial insights into awareness and concerns regarding EOL care planning among Korean American older adults, updating existing evidence about their EOL needs. These findings support a culturally grounded approach to promote EOL planning for ethnic/racial minority groups.

A Digital Storytelling Intervention for Vietnamese American Mothers to Promote Their Children's HPV Vaccination

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Affiliations expand

- PMID: 35314854
- DOI: 10.1158/1940-6207.CAPR-21-0618

Abstract

Despite higher rates of human papillomavirus (HPV)-associated cancer in Vietnamese Americans (VA), their vaccination rate remains low. Culturally grounded narratives incorporating culture-specific beliefs and practices may be a promising approach to promote HPV vaccination and potentially mitigate HPV-associated cancer disparities experienced by VAs. We codeveloped personal, audiovisual digital stories about HPV vaccination with VA mothers of vaccinated children, and examined the effects of the digital storytelling (DST) intervention on vaccination intention among VA mothers of unvaccinated children ages 11-14. The stories (3 minutes each) were produced in both English and Vietnamese through a 2-day workshop in collaboration with two VA first-generation immigrant mothers. A community sample of 114 VA mothers of unvaccinated children viewed the stories and filled out an anonymous survey before and after the intervention. Of these mothers (mean age = 41.5 years; SD = 5.4), 35.2% were immigrants, and about half (51%) reported having a child who received free or reduced-price lunch at school. After the intervention, changes in two items indicating mothers' positive attitudes toward HPV vaccination were significant. Mothers' intention to vaccinate their children increased from 53% to 74%; the difference was large (OR = 9.12; Cohen g = 0.40) and statistically significant, $\chi2(1, N = 114) = 17.63, P < 0.001$. Mothers' scores on the narrative quality assessment scale were high, suggesting high levels of identification and engagement with the stories. This brief intervention using digital stories was feasible and showed preliminary effects on promoting VA mothers' intention to vaccinate their children against HPV.

Refugee-related trauma patterns and mental health symptoms across three generations of Hmong Americans

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Affiliations expand

Abstract

Hmong adults who are Vietnam War refugees have been exposed to refugee-related trauma, but little is known about associations between patterns of trauma exposure and mental health outcomes in Hmong adults. We examined patterns of trauma exposure and mental health symptoms (i.e., somatization, depression, anxiety, and probable posttraumatic stress disorder [PTSD]) in three generations of Hmong adults (N = 219). Trauma exposure and probable PTSD were measured using the Harvard Trauma Questionnaire-Hmong Version. Somatization, depression, and anxiety symptoms were measured using the Brief Symptom Inventory. Latent class analysis (LCA) and auxiliary analysis of sociodemographic characteristics and mental health symptoms were performed. The best-fitting LCA model described three distinct classes: complex and pervasive trauma (60.3%), combat situation and deprivation trauma (26.0%), and low exposure to refugee-related trauma (13.7%). Participants in the complex and pervasive trauma class were the oldest, had the shortest U.S. residency, were the least proficient in English, and reported the most severe mental health symptoms; those in the combat situation and deprivation trauma class were the youngest, moderately proficient in English, and reported moderate mental health symptoms; and those in the low exposure to refugee-related trauma class were the most proficient in English, had the longest U.S. residency, and reported the least severe mental health symptoms. Our findings call for surveillance and a trauma-informed approach for Hmong elders with limited English proficiency, who have a high risk of experiencing accumulative effects of refugee-related trauma and are susceptible to poor mental health outcomes.

Novel Functional, Health, and Genetic Determinants of Cognitive Terminal Decline: Kuakini Honolulu Heart Program/Honolulu-Asia Aging Study

Jennifer A Margrett [1], Thomas Schofield [1], Peter Martin [1], Leonard W Poon [2], Kamal Masaki [3][4], Timothy A Donlon [3][4], Kalpana J Kallianpur [4][5], Bradley J Willcox [3][4]
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- PMID: 34918073
- DOI: 10.1093/gerona/glab327

Abstract

To investigate interindividual differences in cognitive terminal decline and identify determinants including functional, health, and genetic risk and protective factors, data from the Honolulu Heart Program/Honolulu-Asia Aging Study, a prospective cohort study of Japanese American men, were analyzed. The sample was recruited in 1965-1968 (ages 45-68 years). Longitudinal performance of cognitive abilities and mortality status were assessed from Exam 4 (1991-1993) through June 2014. Latent class analysis revealed 2 groups: maintainers retained relatively high levels of cognitive functioning until death and decliners demonstrated significant cognitive waning several years prior to death. Maintainers were more likely to have greater education, diagnosed coronary heart disease, and presence of the apolipoprotein E (APOE) ε2 allele and FOXO3 G allele (SNP rs2802292). Decliners were more likely to be older and have prior stroke, Parkinson's disease, dementia, and greater depressive symptoms at Exam 4, and the APOE ε4 allele. Findings support terminal decline using distance to death as the basis for modeling change. Significant differences were observed between maintainers and decliners 15 years prior to death, a finding much earlier compared to the majority of previous investigations.

Online Health Information-Seeking Behavior Among Korean American Immigrants in Rural Alabama: Dose Discrimination Matter?

Hee Yun Lee [1], Zhichao Hao [2], Eun Young Choi [3]
Affiliations expand

Abstract

Little attention has been paid to online health information seeking (OHIS) among immigrants residing in rural areas. This study examines the intensity of OHIS among Korean American (KA) immigrants living in rural Alabama. A total number of 261 KA immigrants aged 23 to 75 participated in the study. Multiple linear regression analyses were conducted. Age (B = - 0.044, $p < 0.05$), marital status (B = 1.132, $p < 0.05$), race/ethnic discrimination (B = 0.821, $p < 0.05$), having computer or tablet (B = 1.286, $p < 0.05$), and access to internet (B = 1.778, $p < 0.01$) were associated with the intensity of OHIS. Substantial efforts should be devoted to narrowing the access gap by providing offline health information services for those without internet access and with limited health literacy. Moreover, culturally competent healthcare services and information should be provided to serve racial/ethnic minority populations better.

Examining the Potential Effect of a Salt Sensitivity Biomarker in Korean American Immigrants: A Pilot Study

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Affiliations expand

Abstract

The genetic factors involved with salt sensitivity (SS) have been studied using a genetic approach to identify individuals at high risk for developing hypertension and could benefit from a low sodium diet intervention, but this has not been well-studied in Korean American immigrants (KAIs). The purpose of this pilot study was to investigate the influence of SS that moderates blood pressure (BP) in KAIs (n = 34). KAIs were recruited from local communities and completed a blood draw, a 8-day food log, and BP testing. The dietary sodium intake was measured using the Fitbit mobile app, and an SS biomarker was assessed using targeted genotyping. out of five GNAI2 single nucleotide polymorphisms (SNPs) tested, rs4547694 significantly moderated the relationship of dietary sodium intake on BP in KAIs. Conclusions: Further studies are warranted to test the effect of a reduced sodium diet on BP while accounting for the moderating influence of an SS genotype.

SNAP participation moderates the association between household food insecurity and HbA1c among Cambodian Americans with depression

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Affiliations expand

Abstract

Objectives: We tested whether participation in the Supplemental Nutrition Assistance Program (SNAP) moderated the relation between household food insecurity and HbA1c among Cambodian Americans with depression enrolled in a diabetes prevention trial.

Methods: Community health workers assessed household food insecurity and SNAP participation. HbA1c was ascertained using direct enzymatic assay.

Results: Among the n = 189 respondents, 19% were food insecure, 41% received SNAP benefits, and mean HbA1c = 5.5%. There was a significant interaction between SNAP and food insecurity. HbA1c was highest among participants without SNAP who were food insecure. Simple effects analysis revealed a significant difference within the no SNAP group [Mean (SD): Secure = 5.38 (0.38), Insecure = 5.78 (0.36)] and no difference within the SNAP group [Secure = 5.61(0.44), Insecure = 5.61(0.55)]. Differences remained significant after controlling for demographic, socioeconomic, and clinical indicators.

Conclusions: SNAP may protect against the deleterious association between household food insecurity and HbA1c.

Family type and cognitive function in older Chinese Americans: acculturation as a moderator

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- PMID: 34038643
- DOI: 10.1080/13607863.2021.1926426

Abstract

Objectives: Acculturation to the mainstream culture and the settlement contexts could shape cognitive function of older immigrants. Guided by ecological theory, this study examines the interaction effect between individual acculturation and ecology of family on cognitive function among older Chinese Americans.

Methods: Data were derived from the Population Study of Chinese Elderly in Chicago (*n* = 3,019). Family types included *tight-knit (high solidarity and low conflicts), unobligated-ambivalent (high solidarity and conflicts), commanding-conflicted (low solidarity and high conflicts)*, and *detached (low solidarity and low conflicts)*. Acculturation was measured via language ability, media use, and ethnic social relations. Cognitive function was evaluated by global cognition, episodic memory, working memory, processing speed, and mini-mental state examination. Multiple regression analyses and interaction terms were used.

Results: Older adults in the commanding-conflicted type had the lowest cognitive function. After controlling confounding variables, higher levels of acculturation (*b* = 0.009, SE = 0.003, *p* < .01) were associated with higher levels of global cognition. Acculturation buffered the negative impact of having a commanding-conflicted relationship with children on global cognition (*b* = 0.070, SE = 0.016, *p* < .001). Language ability, media use, and ethnic social relations played a unique role in the relationships between family types and cognitive domains.

Conclusion: Acculturation to the dominant culture is identified as a cultural asset for cognitive function in older Chinese Americans. Social services could protect cognitive function of older immigrants in the commanding-conflicted type through enhancing cultural participation. Future research could test how affective and cognitive aspects of acculturation affect health.

Community leaders' perceptions of depression and the perceived barriers in seeking mental health services for older Korean Americans

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Affiliations expand

- PMID: 33845704
- DOI: 10.1080/13557858.2021.1910627

Abstract

Objectives: This study explored community leaders' understanding of depression among older Korean Americans and barriers to seeking mental health services. Depression is prevalent among older Korean Americans, but they are less likely to seek help from professionals and prefer to use informal methods. Older Korean Americans strongly prefer to maintain their ethnic traditions and use community service agencies provided by their same ethnicity. In this regard, community leaders who provide services for older adults play a significant role in not only advocating for the population but also in developing services and programs for their communities.

Design: In this qualitative study, 12 Korean community leaders who provide services for older adults were interviewed. Data were analyzed thematically, and Nvivo 12 was used to organize the data and to detect relevant themes.

Results: Findings showed that community leaders had an in-depth understanding of the causes of depression from environmental and cultural contexts including isolation, losing independence, cultural factors, and lack of family support. However, although the leaders were aware of the severity of depression among older Korean Americans, they did not understand biologically-based factors; rather, they considered it a natural part of aging. Findings indicated that they were biased towards older adults like older Korean Americans, attributing depressive symptoms to personality issues. They also heavily rely on personal experiences to understand depression instead of on having educational training. Barriers to getting help for older adults include lack of the perceived need of older adults, lack of professionals, and a prevalent stigma against depression that encourages individuals to hide their illness.

Conclusions: The findings indicated that community-based educational training is necessary to increase understanding of depression not only for the community leaders but also for individuals and families.

Health of Vietnamese Older Adults and Caregiver's Psychological Status in the United States: Result from the Vietnamese Aging and Care Survey

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Affiliations expand

Abstract

Objective: We examined the association between care recipient's physical, mental, and cognitive health conditions and caregivers' psychological distress in Vietnamese older care recipients and their caregivers.**Methods**: The Vietnamese Aging and Care Survey was developed for care recipients, and adult-child and spousal caregivers, and inquired about their sociodemographics and health-related variables.**Results**: Data were collected on 58 caregiver-care recipient dyads. Adult-child and spousal caregivers were on average 43 and 70 years-old respectively. The vast majority were female (76%) and born in Vietnam (97%). Adult-child caregivers reported more caregiver burden than spousal caregivers. Care recipients were on average 75 years-old. Care recipients of adult-child caregivers reported more depressive symptoms than care recipients of spousal caregivers and were more likely to have mild dementia. Care recipients' health had no effect on caregiver depressive symptoms but their educational attainment was associated with caregiver burden and depressive symptoms.**Conclusions**: This study showed care recipients and caregivers' years of education were positively associated with caregivers' psychological distress. Vietnamese families lived in ethnic enclaves and shared caregiving responsibilities within the family. However, using available outside resources may alleviate psychological distress of not only caregivers but also families as a whole.**Clinical Implications**: Healthcare professionals should encourage educated caregivers and educated care recipients to use outside resources to ease caregiving duties.