What Providers Should Know About Chinese and Korean American Family Caregivers

The umbrella group "Asian American and Pacific Islander" or AAPI consists of more than 50 different ethnicities with over 100 languages spoken.

 Chinese are the largest Asian American ethnic group aged 55 and older (NAPCA, 2013).



OF THE CHINESE POPULATION ARE FOREIGN BORN (PEW, 2015)



OF THE FOREIGN-BORN POPULATION IS AGED 50 AND OLDER

HEALTH DISPARITIES

- Historically, AAPI communities have faced significant barriers to accessing affordable health insurance and quality health services, and these barriers have contributed to health disparities.
 - Asian American, Native Hawaiian, and other Pacific Islander communities are likely to lack health insurance coverage
 - Health conditions that are common in the AAPI community like diabetes, obesity, cancer, HIV/AIDS and mental illness often go undiagnosed and untreated. (WHIAAPI)

CULTURAL COMMITMENT TO CARE

- On average, Chinese American caregivers agree that cultural obligation is a reason they provide care for their relative or friend.
- AAPI caregivers are more likely to adopt or be influenced by expectations related to the concept of filial piety (virtue of respect, care, obedience).
- Chinese and Korean American family caregivers reported that caring for ill or disabled family members (Scharlach et al., 2006):
 - Fulfilled cultural norms
 - Maintained cultural continuity
 - Strengthened family ties

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HOW CAN PROVIDERS BETTER SUPPORT CHINESE AND KOREN AMERICAN FAMILY CAREGIVERS?

- Utilize culturally competent, trained Medical Interpreters when speaking to AAPI family caregivers
 - Limited English proficient patients were 27% more likely to be readmitted (Diamond et al., 2017)
- Assess for difficulty with cultural tasks in caregiver & patient screening
 - Caregivers who reported high difficulty with cultural tasks had poorer health outcomes
 - Edit caregiver burden screening tools to collect information about caregiving responsibilities

IN OUR SURVEY OF CHINESE AND KOREAN AMERICAN FAMILY CAREGIVERS:



report some or a great deal of difficulty assisting with cultural tasks, such as:

- Overcoming language barriers when talking with healthcare or service providers
- Translating health-related information into main language
- Legal issues related to immigration or naturalization procedures



report some or a great deal of difficulty with healthcare tasks such as medication management and caring for wounds



report some or great deal of difficulty with coordinating or arranging for care or services from doctors, nurses, social workers, etc.



of Korean American caregivers agreed or strongly agreed that caregiving had negative effects on their emotional health



Caregivers who report more difficulties performing cultural tasks:

- Have higher levels of four types of caregiver strain and depression
- Provided lower ratings of the quality of healthcare provided to their care recipients
- Report feeling less satisfied with support from family members or friends

HOW CAN PROVIDERS BETTER SUPPORT CHINESE AND KOREAN AMERICAN FAMILY CAREGIVERS?

continued

- Develop translated in-office materials for disease knowledge, treatments, and training
 - In-language materials help mitigate the limited opportunities to speak to providers due to time constraints
 - In-office materials are seen by AAPI older adults as the most impactful in providing health-related information (AARP, 2018)
- Provide culturally competent referrals and resources
 - Dissemination of culturally competent in-office material for training and information
 - Affordable and in-language referrals
- Develop in-language caregiver support groups
 - Resolve social and linguistic isolation
 - Provide support network for older adult LEP caregivers
- Develop in-language caregiver education/ training workshops
 - Advertisements and materials that reflect
 AAPI older adults and caregivers
 - Ensure that materials are translated both linguistically and culturally

FOREIGN-BORN CAREGIVERS IN THE US ARE OLDER, HAVE LOWER EDUCATIONAL DEGREES, LOWER INCOME, AND ASSIST MORE WITH CULTURE-RELATED TASKS, LIKE TRANSLATING HEALTHCARE INFORMATION FROM ENGLISH.





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