

# Working with Asian American Elders: Culturally-Competent Approaches

*Lessons Learned from the  
Asian American Federation of New York  
9/11 Mental Health Project*

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## Asian American Federation of New York

### About Us

The Asian American Federation of New York (AAFNY) is a nonprofit leadership organization that works to advance the civic voice and quality of life of Asian Americans in the New York metropolitan area. Established in 1990, the Federation supports and collaborates with 39 member agencies to strengthen community services, promotes strategic philanthropy within the Asian American community, and conducts research and advocacy concerning critical issues.

### What We Do

- [Strengthening Community Service Organizations](#)
- [Asian American Philanthropy & Community Fund](#)
- [Policy and Research](#)
- [Special Projects](#)

## Challenges to Working with Asian American Elders

- Population Growth & Demographics Trends
- Limited Language Access
- Stigma Attached to Mental Health
- Service Capacity Issues
- Other Barriers to Services

## Demographics of American Elders and Implications

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- Asians Americans make up 6% of New York State's population; 75% live in NYC.
- 11% of total NYC population are Asians (2000).
- Asian Americans are the fastest growing racial group in NYC: From 1990 to 2000, this population increase by 71%.
- Asian American older adults (over 65) are the fastest growing elderly racial group: Asian elders population in NYC increased 91% from 1990 to 2000 (Census 2000).
- According to NYS Office of Mental Health: Asian American elders population to grow by 110% between 2000 and 2015 (followed by 76% for Hispanics and 27 % for Blacks).

# Demographics of American Elders and Implications

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- US Census Bureau: Asian older adults population (over 65) in US will quadruple from 800,000 in 2000 to 3.2 million by 2030
- 94% of NYC Asian elders are foreign born; 54% arrived in the last 20 years.
- 59% of Asian elders did not complete high school; 45% did not complete high school.
- 73% have limited English Proficiency.
- 24 % live in federal poverty level ; mean per capita income is \$17,261—far below income for all NYC senior citizens (\$30,694).

## State of Mental Health for Asian Elders

- Asian elders with mental health disorder will quadruple from 160,000 in 2000 to 640,000 in 2030 (US Surgeons General Report).
- Asians and Asian elders underutilize mental health services—even though Asians comprise of 6% of NY population, they represent only 1% of total persons using New York's public mental health services.
- Asian women in US over 65 have the highest suicide rate of all elderly women of that age group.
- Asian elders in NYC experience higher rates of depression and dementia than any other racial elderly groups.

## Barriers to Services for Asian Elders

- Stigma and lack of knowledge about mental health
- Lack of linguistically appropriate/culturally-compatible service settings
- Lack of bilingual providers
- Lack of service coordination and follow-up
- Lack of primary care providers trained in mental health
- Cost of mental health care

## Stigmatized Perception of Mental Illness in Chinese Culture

- Bodily complaints are rooted in physiological illnesses, and should be treated by primary care physicians.
- Intrusive and irrational thoughts should be repressed and distracted by activities. The inability to “dispel” irrational thoughts and behavior is perceived as personal weakness and a negative reflection of one’s familial heritage;
- Infliction of mental illness is a punishment by supernatural powers for previous wrong deeds.

## Common Cultural Behavior in Coping with Personal Stressor and Problem:

- Uncomfortable with disclosing personal problems to others;
- Avoid “burdening” others; self-sacrifice is a virtue;
- Prefer to keep busy to distract from negative thoughts and worries;
- Prefers to discuss concrete solutions to problems versus negative emotions;
- May experience physical complaints that are caused by stress versus medical reasons.

## Asian American Federation 9/11 Mental Health Project

### The MHP has the following objectives:

- Provide direct mental health services to Asian American victims’ families and affected Chinatown elders;
- Increase awareness of mental health issues;
- Bolster the process for connecting individuals in need with appropriate service providers; and
- Enlarge the pool of qualified professionals to serve targeted Asian American populations via service coordination and institutional arrangements.

## Lessons Learned from the Asian American Federation 9/11 Mental Health Project



## Culturally-Competent Ways of Working with Asian Elders

- Bilingual and “culturally-compatible” services are critical;
- Utilize community-based settings for outreach and services;
- Start with what is familiar and culturally-relevant;
- Reframe mental health into “wellbeing” and focus on activities fostering overall health;
- Take advantage of primary care providers;
- Focus on meeting concrete needs to build trust;
- Understand culturally-specific manifestations of distress, ways of coping, and help-seeking patterns;
- Educate and work closely with families.

## Policy and Recommendations

- Providers need to be trained and educated on aging issues; stigma exists in providers as well;
- Integrate mental health with health, primary care, and other aging services;
- Train primary care providers on how to provide effective mental health screenings and basic interventions;
- More resources are needed for workforce development and recruiting of bilingual workers;
- Increased research is essential to document needs and develop innovative practices.

## Questions

