

The Journey of Older Vietnamese Immigrants Seeking Care for Cognitive Impairments in the United States

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Background

- Non-English speaking older immigrants in the U.S. face high risks of undiagnosed dementia. This leads to lost opportunities for disease-modifying therapies.
- Older Vietnamese in U.S. are 98% foreign-born and 50% speak limited English.
- Understanding the care-seeking experiences of Vietnamese Americans is essential to designing interventions for improving early dementia detection.

Objective

To examine experiences and challenges of Vietnamese immigrants in the U.S. when seeking care for memory loss.

Methods

- Qualitative focus group study
- Partnered with a bilingual cultural mediator and Vietnamese Senior Group
- N = 40 Vietnamese adults (ages 64+) with memory concerns.
- Analyses using deductive-inductive thematic approach.

Results

Appraisal



Awareness:

Participants recognized memory decline due to increasing difficulties with everyday tasks.



Emotions:

Participants felt frustrated and worried with their memory decline.



Attribution:

Participants attributed their memory loss to normal aging or medication side effects.

Help-seeking



Motivating Factors:

Participants' perceived severity of their memory decline and desire for solutions motivated help-seeking for formal care.



Delaying Factors:

Participants' limited awareness of dementia and forgetting appointments delayed help-seeking.



Cultural Factors:

Family, friends, and belief in self-management influenced participants' decision to seek help.

Diagnostic & Treatment Initiation



Dismissal from clinicians:

Participants' memory concerns were dismissed by some clinicians as normal aging.



Use of cognitive tests:

Participants reported receiving cognitive tests to assist with diagnosis.



Preference for lifestyle-based approaches to care:

Participants prioritized living a healthy lifestyle over getting a diagnosis.

Discussion

The findings reveal gaps in dementia awareness, knowledge, and support about seeking formal care among older Vietnamese adults. Culturally responsive interventions that improve dementia detection for older Vietnamese adults should address misconceptions of aging vs dementia, support clinician competency in discussing memory concerns, and integrate peer/family involvement and patient preferences for holistic care.

*Adapted from the Model of Pathways to Treatment (Scott et al 2013)
Participants' supporting quotes can be found via QR code*