

Caregiving Among Asian Americans and Pacific Islanders Age 50+

An AARP Report



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Asian Americans and Pacific Islanders (AAPIs) are among the fastest growing racial groups in the United States, yet these communities are understudied and underserved. As our communities grow, the need for quality data and research to help inform and educate are essential at all levels.

This report is the first in an ongoing series from AARP focused on topics in key advocacy areas that impact AAPI age 50+ populations. It is my hope that our reports help individuals, community-based organizations, non-profit groups, the media, funders, and policy makers to make informed decisions about the critical needs and concerns of AAPI communities.

Our report, “Caregiving Among Asian Americans and Pacific Islanders Age 50+”, includes original AARP research to help guide public policy conversations and better support nonprofits serving AAPI communities secure public and private funding for programs that fulfill our basic needs to enrich and empower us all.

Sincerely,

A handwritten signature in black ink that reads "Daphne Kwok". The signature is written in a cursive, flowing style.

Daphne Kwok

AARP Vice President of Multicultural Markets and Engagement
Asian American and Pacific Islander Audience

The care of elders among Asian Americans and Pacific Islanders (AAPIs) carries with it attitudes, beliefs, and practices that can be starkly different from those of the general population. Since most AAPIs age 50 and older are immigrants (two-thirds of AAPIs are immigrants), they have expectations brought from their home countries that may or may not be expressed, nor able to be met by their more acculturated children or grandchildren living in a different environment, and who would be facing the burden of care.

Filial piety and respect for elders is a value common to AAPIs. Physical family togetherness is desired and practiced, as seen in the higher incidence of multigenerational households among AAPIs.

An AARP nationwide study showed that the vast majority of Asian Americans and Pacific Islanders, more than any racial or ethnic group, believe that caring for parents is expected of them. A much higher percentage of Asian Americans and Pacific Islanders age 45-55 agree with this (73%) in comparison to just under half of the total population of the same age (49%). In fact, 42 percent of Asian Americans and Pacific Islanders in the survey were actually helping to care for elders, versus just 22 percent of the general population.

AAPIs in the AARP study are more likely to take charge of caregiving for their elders. They are more likely to talk to doctors or health providers (54% versus 36% for total population of the same age), contribute financially (51% versus 27%), and handle paper work or bills (41% versus 33%) than the total population of the same age or compared to Whites, Blacks, and Hispanics.

AAPI families are resistant to place their elders in institutional facilities. In their traditional culture, Asian Indians even go further by resisting home visits from health care providers because they would rather seek help from family and friends; while traditional Pacific Islander behavior show preference to being cared by family during illness rather than going to a doctor to return to good health.

Among the Chinese Americans, there is reluctance to discuss end of life related issues because of karma, the belief that mentioning something bad can make it occur. Caregivers with similar ethnicity and language may be desired by those who receive care, as was reported among older and less acculturated Japanese American adults.

Filipino Americans may move from one child's home to another to take care of grandchildren, while they themselves would be cared for later by their children. Housing alternatives provided by the community and church is seen among Korean Americans.

The AAPI community's caregiving needs are similar for all AAPI ethnic groups, and vary in many important areas as well. The common needs are:

- Care of family elders
- Long term care insurance
- Resources and tools in caring for elders
- Transportation and savings to access services
- Information on support and available services
- In-language services for some ethnic groups
- Culturally sensitive outreach and services for caregiving

It is important to determine the cultural nuances in each AAPI ethnic group that relate to their traditional cultures, beliefs, attitudes, and practices in relation to caregiving. Depending on their degree of acculturation, these cultural nuances have to be taken into account when providing care.

Friends, loved ones, and health care providers need to develop an awareness and understanding of the caregiving beliefs and practices of the ethnic groups they care for in order to be better equipped in caring for them. Bilingual providers will be needed as well.

Finally, there is a desperate need for empirical as well as in-depth, national disaggregated studies to learn more and understand today's AAPI elders. The need to understand the extent to which cultural attitudes remain and traditional practices persist; as well as the dynamics between AAPI cultural attitudes and practices in light of the changes brought by technology, exchange of information, advances in medical knowledge, and other 21st century trends. Research on the relationships and interactions among the older and younger generations of AAPIs are needed and would be very beneficial as well for caregiving.

ABOUT THIS REPORT

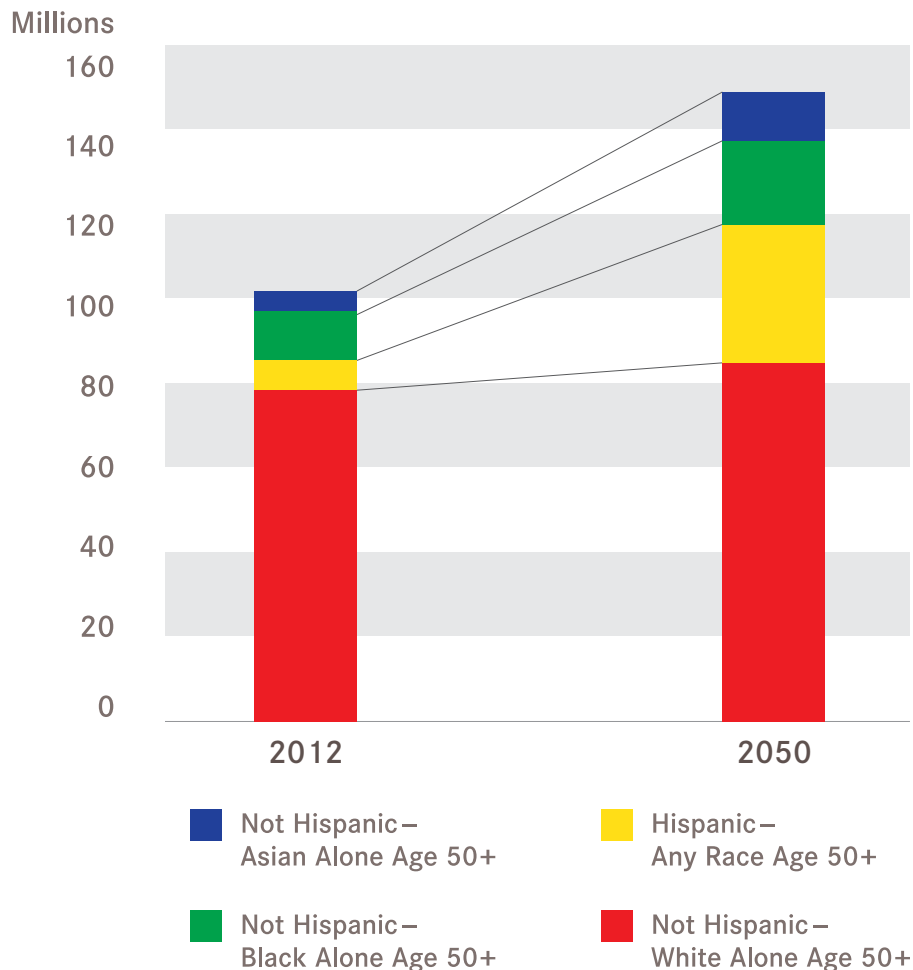
This report is a compendium of research information and data on Asian Americans and Pacific Islanders (AAPIs) at midlife and older in relation to caregiving.

We drew on Census data, AARP research, and external sources for information on the current state of caregiving among Asian Americans and Pacific Islanders, especially those age 50 and older. Most of the recent information are on health insurance coverage, a critical factor in getting access to health care. There is a paucity of other information related to health and caregiving. Most research are small or outdated, and national in-depth research as well as disaggregated data by Asian and Pacific Islander ethnic groups, especially in-language, is sparse as well.

It is our hope that this report will emphasize the large information gaps we have today, especially for more current, in-depth, and disaggregated data, and spur more work in this area. So that we may better and more properly address the needs of our beloved elders.

Growth and Diversity of the 50+ 2012-2050

- The 50+ population is shifting. By 2050, the Asian population in the United States will increase from 4.1% to 7.4% of the total 50+, while African Americans will increase from 10.1% to 12.5%; and Hispanics from 9.1% to 20.8%.
- The Asian American population is the second fastest growing segment of the age 50+ and will grow in number from 4.3 million to 13.2 million over the next 40 years.



Source: U. S. Census Bureau, 2012. National Population Projections, Population Division.

CARE GIVING

Asian Americans and Pacific Islanders





In general Asian Americans and Pacific Islanders' (AAPIs) caregiving attitudes and practices may differ from that of the general population because Asian immigrant groups bring with them attitudes and practices from their home countries. Depending on their degree of acculturation in the United States, the filial piety value, family togetherness, and unfamiliarity with the health care system are factors to consider. Models for AAPI groups have been shown in past research.

There are some differences among AAPI ethnic groups as well. It is necessary to examine these similarities and differences by ethnic group and the nuances for each. Many of the studies were conducted before the year 2000 and we need to know how prevalent these practices and values are today. The AARP Chinese American and Filipino American study conducted in 2013 shows that Filipino Americans have become assimilated into the American culture, but they are in fact bicultural, retaining their language and cultural practices, and want to stay connected with their culture.

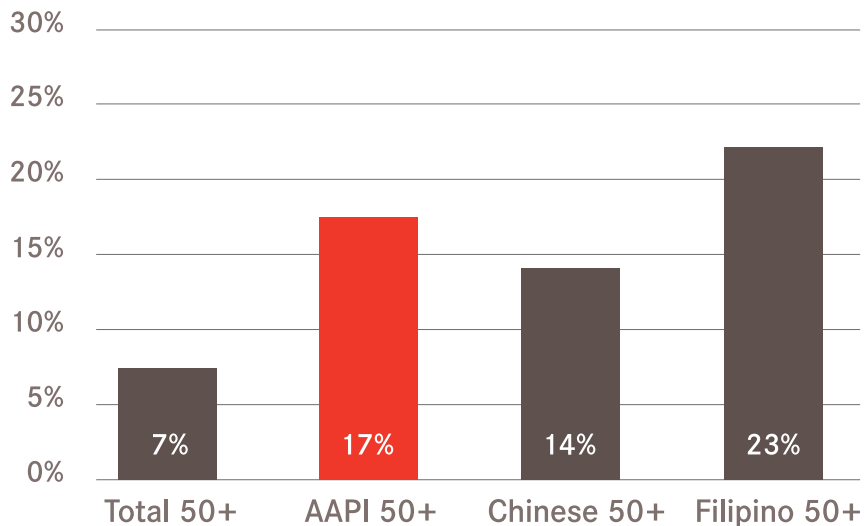
A landmark study by AARP on Baby Boomers and the sandwich generation shed light on the caregiving issues that beset those at midlife and older. With older parents that may require care, coupled by children who are not yet independent, the sandwich phenomenon becomes a Baby Boomer issue and Boomers are the first generation of Americans to face it en masse. Some of the AARP study participants, Baby Boomers age 45-55 in 2001, may themselves be at the receiving end of caregiving today; while others would still have elders to care for.

The AARP study significantly brought to light the changing demographics in the United States, impacting the attitudes, values, and practices related to caregiving. The study results showed many differences by race and ethnicity. Although the research was conducted many years ago, the literature on values and culture support the findings that these cultural differences persist today among AAPIs, the vast majority of whom are foreign born.

Increase in Multigenerational Household Enables Caregiving

There is a trend towards an increase of multigenerational households in the United States. In 2008, 16 percent of the U.S. Population lived in multigenerational households, compared to 12 percent in 1980. Asian Americans and Pacific Islanders are more likely to live in multigenerational households. They have heavy expectations for elderly care by one's own family. Multigenerational households may aid this process.*

Living in a Multigenerational Household**

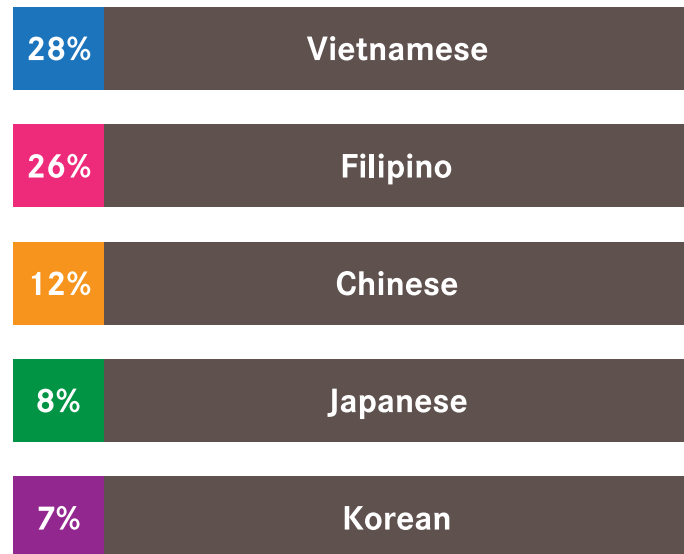


*Harrell, R. Kassner, E. And Figueiredo, C. 2011. AARP Public Policy Institute. Washington, D.C. Available at www.aarp.org/ppi

**U. S. Census Bureau, 2012. American Community Survey (ACS) Public Use Microdata Sample (PUMS). Prepared by the AARP Research Center.

Larger households are more likely among Asian American and Pacific Islander groups

Vietnamese Americans and Filipino Americans are the most likely to live in families with six or more members age 18+

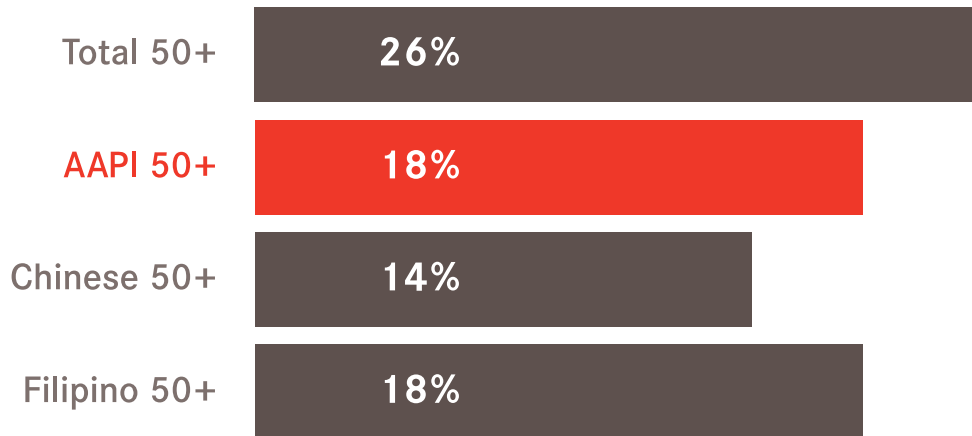


Source: Barnes, P., Adams, P., and Powell-Griner, E. Health Characteristics of the Asian Adult Population: United States, 2004-2006. Advance Data: Health and Vital Statistics, Number 394, January 22, 2006. Data from the NHIS (National Health Interview Surveys) in 2004-2006. Total sample = 87,029, 4 percent Asian.

The prevalence of disability among AAPIs age 50+ is lower than that of the general population of the same age.

Disability Status

% with a disability



An ethnographic (qualitative) study conducted for AARP demonstrated the familial Asian American model of aging and caregiving among Chinese, Korean, Vietnamese, and Filipino American families.

- There is a moral obligation for adult children to assume direct responsibility for aging parents.
- Parent(s) resign decision making to adult children.
- Aging parents reside with or nearby adult children.
- Social activities revolve around family.



Caregiving: AAPIs age 45-55

- Compared to other groups, AAPI caregivers report the highest degree of stressful impact on all their relationships (33% felt impact on husband/wife vs. 20% in general population)
- AAPIs are more likely to reduce their amount of time at work to make it easier to help care for family members
 - AAPIs: 21% vs. total: 17%

The most recent comprehensive study with an AAPI segment that relates to caregiving was conducted by AARP in 2001 among a cohort of baby boomers who were then age 45-55. The findings showed that AAPIs as a group had varying attitudes compared to the general population of the same age.

- AAPIs feel a higher sense of responsibility for children in the family to care for elderly parents, than do other Americans
 - 73% vs. 49%
- Foreign-born Asian Americans are more likely than their American-born counterparts to believe they are expected to care for older relatives
 - 74% vs. 65%

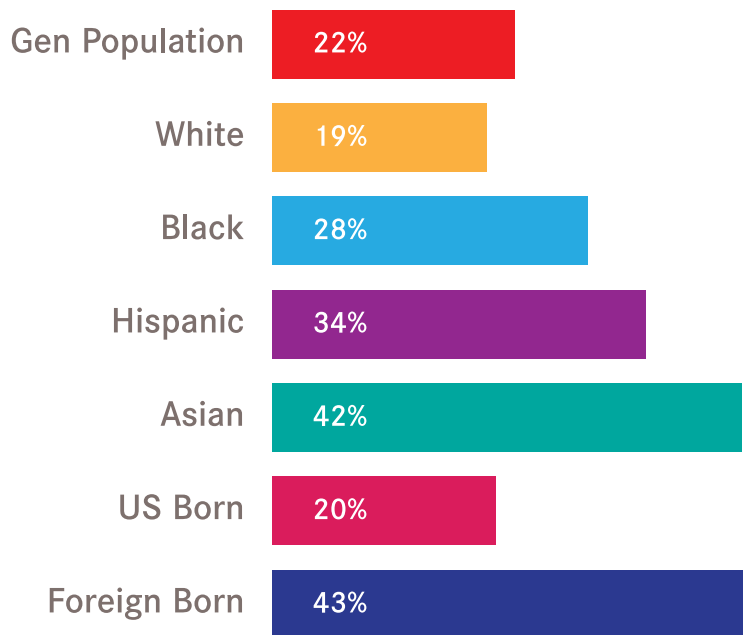
Source: Ethnoworks, 2012. Qualitative Study among Chinese, Korean, Vietnamese, and Filipino Families. Conducted for AARP, 2012

Source: Belden, Russonello & Stewart and Research/Strategy/Management, 2001. "In the Middle: A Report on Multicultural Boomers Coping With Family and Aging Issue". AARP Research Report.

Incidence of caregiving for elders (Age 45-55)

AAPIs, typical of the foreign born, are almost twice more likely to care for elders than the general population of the same age

% of Caregivers



Do you help care for your parents, in-laws or other older relatives?
Do you help support your parents, in-laws or other older relatives financially – that is, help pay their expenses? (Yes to one or both)

Caregiving: AAPIs (Age 45-55)

Expectation to care for parents in their old age is markedly higher for AAPIs

In my family, children are expected to take care of their parents in their old age

	Agree				Disagree	
	Agree	Disagree	Strongly	Somewhat	Strongly	Somewhat
Total	49%	46%	24%	25%	23%	23%
White	47%	49%	21%	26%	25%	24%
Black	52%	43%	30%	22%	20%	23%
Hispanic	57%	39%	34%	23%	19%	20%
Asian	73%	22%	41%	32%	7%	15%
Born in US	48%	48%	22%	26%	24%	24%
Foreign born	62%	33%	39%	23%	16%	17%

The want for one's children to provide care is higher among AAPIs

I want my children to plan to take care of me when I am old

	Agree				Disagree	
	Agree	Disagree	Strongly	Somewhat	Strongly	Somewhat
Total	22%	69%	9%	13%	48%	21%
White	19%	72%	6%	13%	50%	22%
Black	23%	68%	13%	10%	50%	18%
Hispanic	31%	60%	19%	12%	43%	17%
Asian	38%	49%	16%	22%	24%	25%

Caregiving: AAPIs (Age 45-55)

Even as they feel more responsibility, the majority of AAPIs, like other ethnic groups, feel they have the ability to handle family responsibilities; at the same time, they are more likely to feel they should or should have provided more care (72% vs. 48%)

Which of the following statements best describes how you feel about your family responsibilities: I feel ...

	Family responsibilities are piling up so high that I cannot handle them all (%)	Family responsibilities are piling up and I am just able to handle them all (%)	I can comfortably handle all my family responsibilities (%)
Total	6%	20%	73%
White	5%	19%	75%
Black	10%	24%	63%
Hispanic	8%	19%	71%
Asian	8%	23%	67%

Asian American Pacific Islander family caregivers are more likely to believe they provided more care than their parents expected (70% vs. 62%)

I do or did more for my parents than they expect

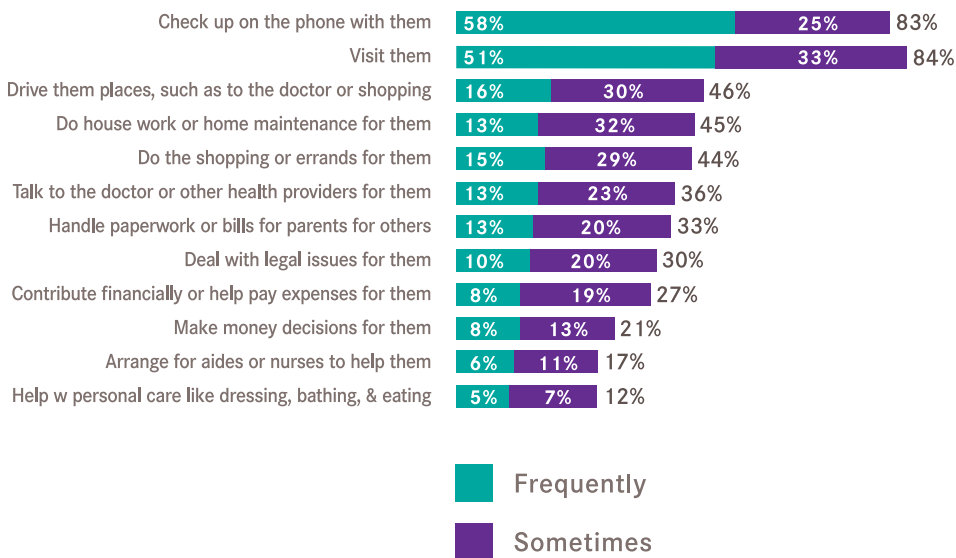
	Agree				Disagree	
	Agree	Disagree	Strongly	Somewhat	Strongly	Somewhat
Total	62%	29%	30%	32%	9%	20%
White	61%	30%	27%	34%	9%	21%
Black	65%	29%	39%	26%	11%	18%
Hispanic	64%	30%	38%	26%	10%	20%
Asian	70%	19%	38%	32%	5%	14%

Caregiving: AAPIs (Age 45-55)

AAPIs feel guilt—should be doing or should have done more for parents

I should be doing or should have done more for my parents						
	Agree				Disagree	
	Agree	Disagree	Strongly	Somewhat	Strongly	Somewhat
Total	48%	47%	23%	25%	25%	22%
White	44%	51%	19%	25%	27%	24%
Black	54%	41%	29%	25%	24%	17%
Hispanic	65%	31%	38%	27%	15%	16%
Asian	72%	24%	43%	29%	10%	14%

Care and tasks done for parents, older relatives and friends (all racial/ethnic groups)



Source: Belden, Russonello & Stewart and Research/Strategy/Management, 2001. "In the Middle: A Report on Multicultural Boomers Coping With Family and Aging Issue". AARP Research Report.

Caregiving: AAPIs (Age 45-55)

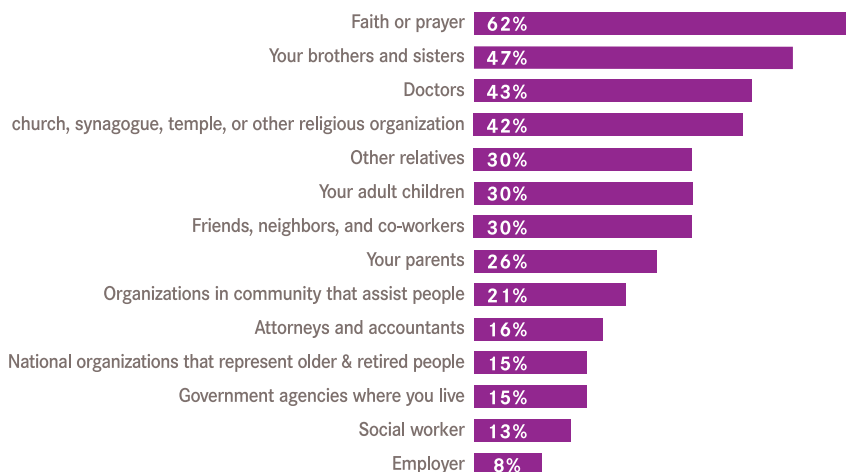
Taking Charge: AAPIs more frequently talk to doctors, contribute financially, handle paper work or bills

Please tell me if you do each of these frequently, sometimes, rarely, or never

	Talk to doctors or other health providers (%)	Handle paperwork or bills (%)	Deal with legal issues (%)	Make money decisions (%)	Contribute financially (%)	Arrange for aides or nurses (%)	Help with personal care, like dressing, bathing and eating (%)
Total	36%	33%	30%	21%	27%	17%	12%
White	33%	30%	30%	20%	22%	15%	10%
Black	41%	43%	33%	25%	40%	21%	19%
Hispanic	48%	38%	33%	24%	40%	22%	21%
Asian	54%	41%	36%	33%	51%	24%	17%

Help from professional and institutional sources (all racial/ethnic groups). There are no significant differences by racial/ethnic group.

Has each of the following helped you in taking care of older family members?



Source: Belden, Russonello & Stewart and Research/Strategy/Management, 2001. "In the Middle: A Report on Multicultural Boomers Coping With Family and Aging Issue". AARP Research Report.

Caregiving: AAPIs (Age 45-55)

Help from Professional and Institutional Sources – AAPIs not significantly different

Has each of the following helped you in taking care of older family members?

	Social workers (%)	Doctors (%)	Governmental agencies where you live (%)	Organizations in your community (%)	National organizations representing older or retired (%)	Attorneys and accountants (%)
Total	13%	43%	15%	21%	15%	16%
White	11%	43%	14%	21%	15%	17%
Black	19%	50%	23%	24%	17%	12%
Hispanic	14%	38%	20%	19%	9%	10%
Asian	16%	46%	16%	20%	13%	13%

All ethnic groups varied little in desire to help parents regardless of capacity to pay

Even if my parents could afford to hire help to do what I do for them, I would still want to do it myself

	Agree		Disagree			
	Agree	Disagree	Strongly	Somewhat	Strongly	Somewhat
Total	76%	20%	53%	23%	6%	14%
White	75%	22%	51%	24%	7%	15%
Black	83%	13%	63%	20%	5%	8%
Hispanic	78%	19%	59%	19%	8%	11%
Asian	81%	15%	51%	30%	3%	12%

Asian Indians

Depending on their acculturation level, services provided by social workers and home care nurses may be unfamiliar to some Asian Indian older adults. They may resist home visits and would rather seek help from family members and friends. Like other ethnic groups, Asian Indians are less open to placing their elders in a nursing home except as a last recourse.

Although the extent of dependence is not known, many older Asian Indian immigrants are often financially dependent on their children, so children are likely to provide financial as well as physical care to their parents.

Chinese Americans

Like other Asian American and Pacific Islander groups, Chinese American attitudes toward caregiving may vary from the general population depending on degree of acculturation.

Some Chinese Americans may be reluctant to discuss end of life related issues in the belief that if one talks about something bad it could occur (karma).*

Out of respect for their elders and filial piety, some may also be reluctant to place parents in long-term care facilities. Daughters often care for parents and decisions are not made until a health situation becomes severe.**



Source: Alagiakrishnan, K. and Chopra, A. Health and Health Care of Asian Indian American Elders. No date. <http://web.stanford.edu/group/ethnoger/asianindian.html>

*Yeo, February 1995. Clinics of Geriatric Medicine-Ethnogeriatrics, 11(1), 139-151. Available at: <http://web.stanford.edu/group/ethnoger/chinese.html>

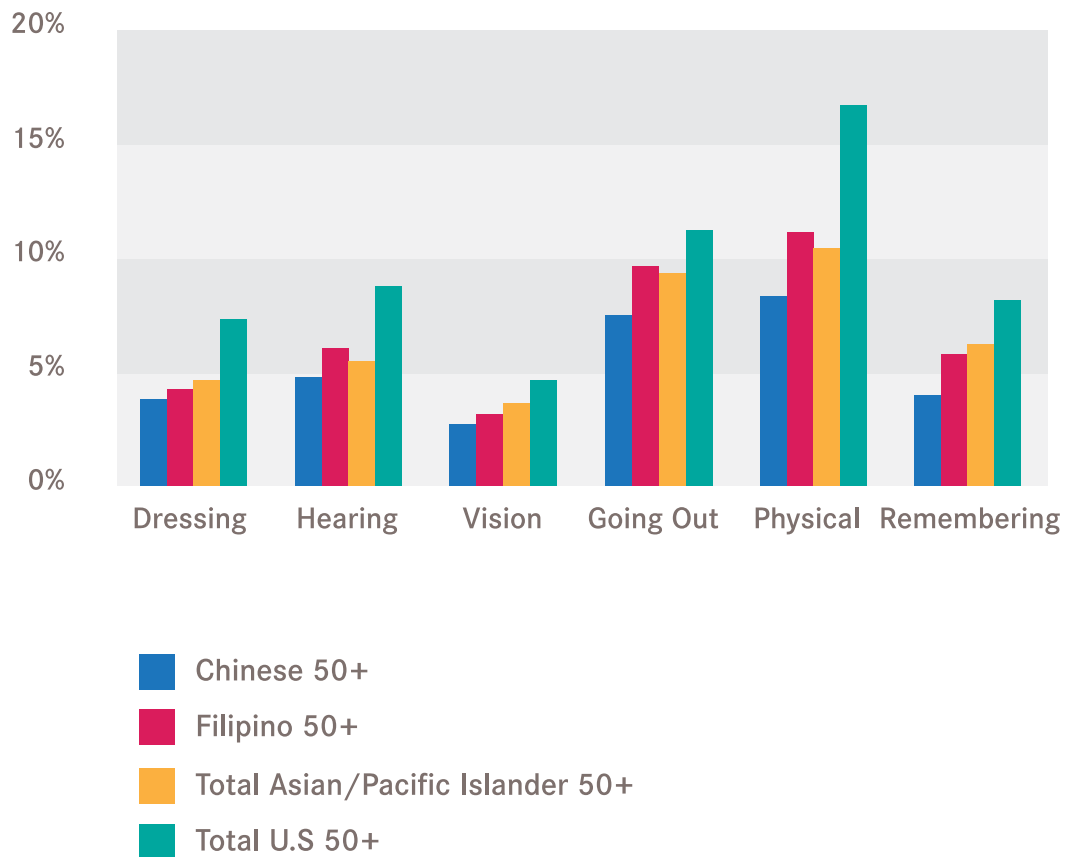
**McLaughlin, L. And Braun, K. May 1998. Asian and Pacific Islander Cultural Values. Considerations for Health Care Decision Making. Health and Social Wrok, 23 (2), 116-126.

**McBride, M., Morioka-Douglas, N., and Yeo, G. 1996. Aging and health: Asian and Pacific Islander American elders (2nd ed.). SGEN Working Paper Series#3, Ethnogeriatric Reviews. Stanford, CA: Stanford Geriatric Education Center.

Available at: <http://web.stanford.edu/group/ethnoger/chinese.html>

Chinese Americans and Filipino Americans

Chinese & Filipino Age 50+: Activities for which help is provided by caregivers



Source: U. S. Census Bureau, 2012. American Community Survey (ACS) Public Use Microdata Sample (PUMS). Prepared by the AARP Research Center

Filipino Americans

Older Filipinos live in or among multiple communities. Retirees living in the Philippines or Las Vegas who travel to Los Angeles, San Francisco, or New Jersey often live and stay with their family to take care of grandchildren.*

Multigenerational households are common—23 percent of families among Filipino American households are multigenerational, the highest among all Asian American groups reported.**

Japanese Americans

Older Japanese American adults with lower levels of acculturation prefer to seek (caregiving) help from someone with some similar ethnic and linguistic background and preferably of the same sex.*

Korean Americans

- Older Koreans Americans prefer to remain with their families as they age—multi-generation households are not unusual.
- Korean American community and church based facilities provide housing alternatives for seniors in larger urban areas and are the most relied upon system for activities and support.
- Traditional expectations for caregiving at home are more difficult to implement in the U.S.



*AARP Research and Strategic Analysis. 2011. Asian American Cultural Reports. Filipino Americans in the U.S.

**U. S. Census Bureau, 2012. American Community Survey (ACS) Public Use Microdata Sample (PUMS). Prepared by the AARP Research Center

Oregon Historical Society. Oregon Encyclopedia. No date.

*http://www.oregonencyclopedia.org/entry/view/japanese_american_in_oregon_immigrants_from_the_west/

Source: Shin, K.R., Shin, C. and Blanchette, P.L. No date. Health and Health Care of Korean American Elders. <http://web.stanford.edu/group/ethnoger/korean.html>

Vietnamese Americans

- Extended families are common with 2 or 3 generations residing in one household.
- Elders stay with the family for mutual support and comfort.
- Sick elders are cared for at home. Institutionalizing an older relative is believed to be disrespectful.

Pacific Islanders

Like other Asian cultures, Pacific Islander societies revere their elders and believe in filial piety, while placing emphasis in the group and hierarchy within the group.

Traditional behavior tends to gravitate toward avoiding doctors, thus they tend to visit the doctor less frequently and not take medicines prescribed for the long term. Younger family members may tend to elders with severe illness to make them comfortable for the rest of the elders' lives rather than help them return to full functioning and independence.



Source: AARP Research and Strategic Analysis. 2011. Asian American Cultural Reports. Vietnamese Americans in the U.S.

Source: Wergowske, G. And Blanchette, P. L. No Date. Health and Health Care of Elders from Native Hawaiian and Other Pacific Islander Backgrounds.

Available at <http://web.stanford.edu/group/ethnoger/nativehawaiian.html>.

CARE GIVING

Needs



Asian American and Pacific Islanders age 50+ caregiving needs:

- Care of family elders
- Long term care insurance
- Resources and tools in caring for elders
- Transportation and savings to access services
- Information on support and available services
- In-language services for some ethnic groups
- Culturally sensitive outreach and services for caregiving

AARP research on Chinese Americans and Filipino Americans indicate similar needs. The results from this study empirically and more specifically identify these needs and differentiates them by the various segments within the Chinese and Filipino American demographic spectrum.

Chinese Americans

Chinese Americans age 50+ have similar needs as 50+ Asian American and Pacific Islanders. Physical and mental fitness also emerged from the AARP research study as needs.

- Care of family elders
- Long term care insurance
- Resources and tools in caring for elders
- Transportation and savings to access services
- Information on support and available services
- In-language services
- Culturally sensitive outreach and services for caregiving

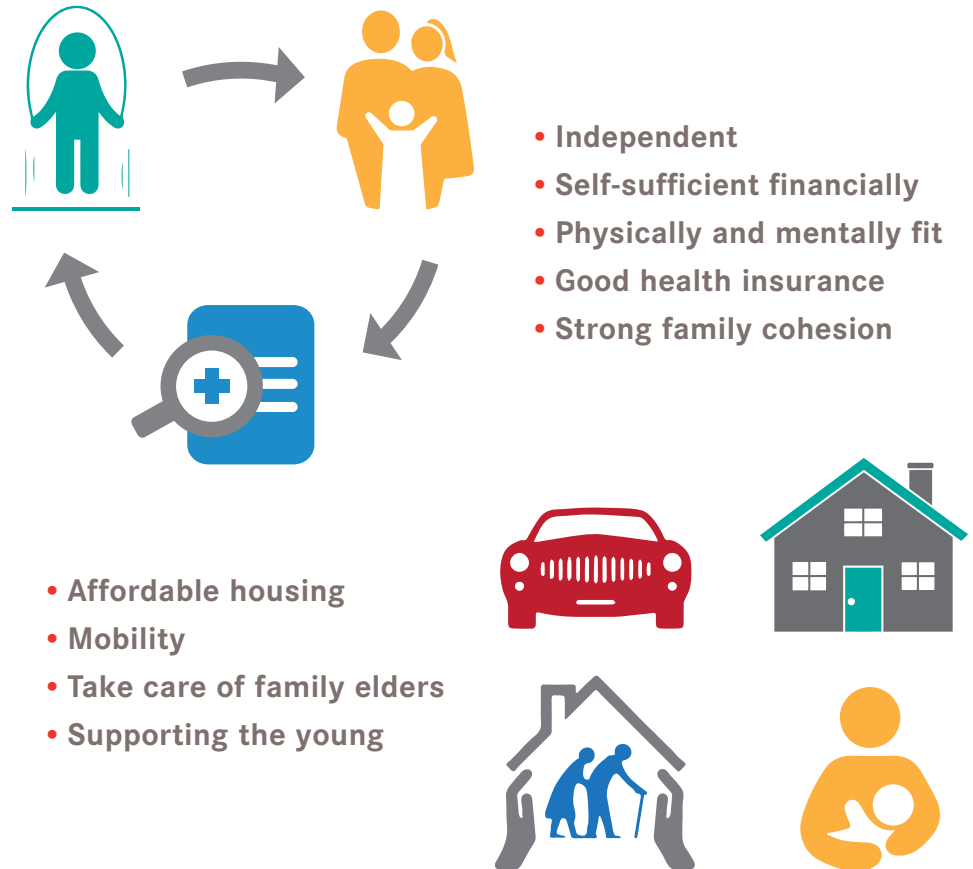


Chinese Americans

Important needs & wants for living a good life

Chinese Americans have strong **family values**. The family's well-being is always on their mind.

- **Independence** is important - they don't want to be a burden to the next generation.
- **Health, financial independence, family, security, housing, and mobility** are, overall, the most important factors of a good life for Chinese Americans.



Chinese Americans

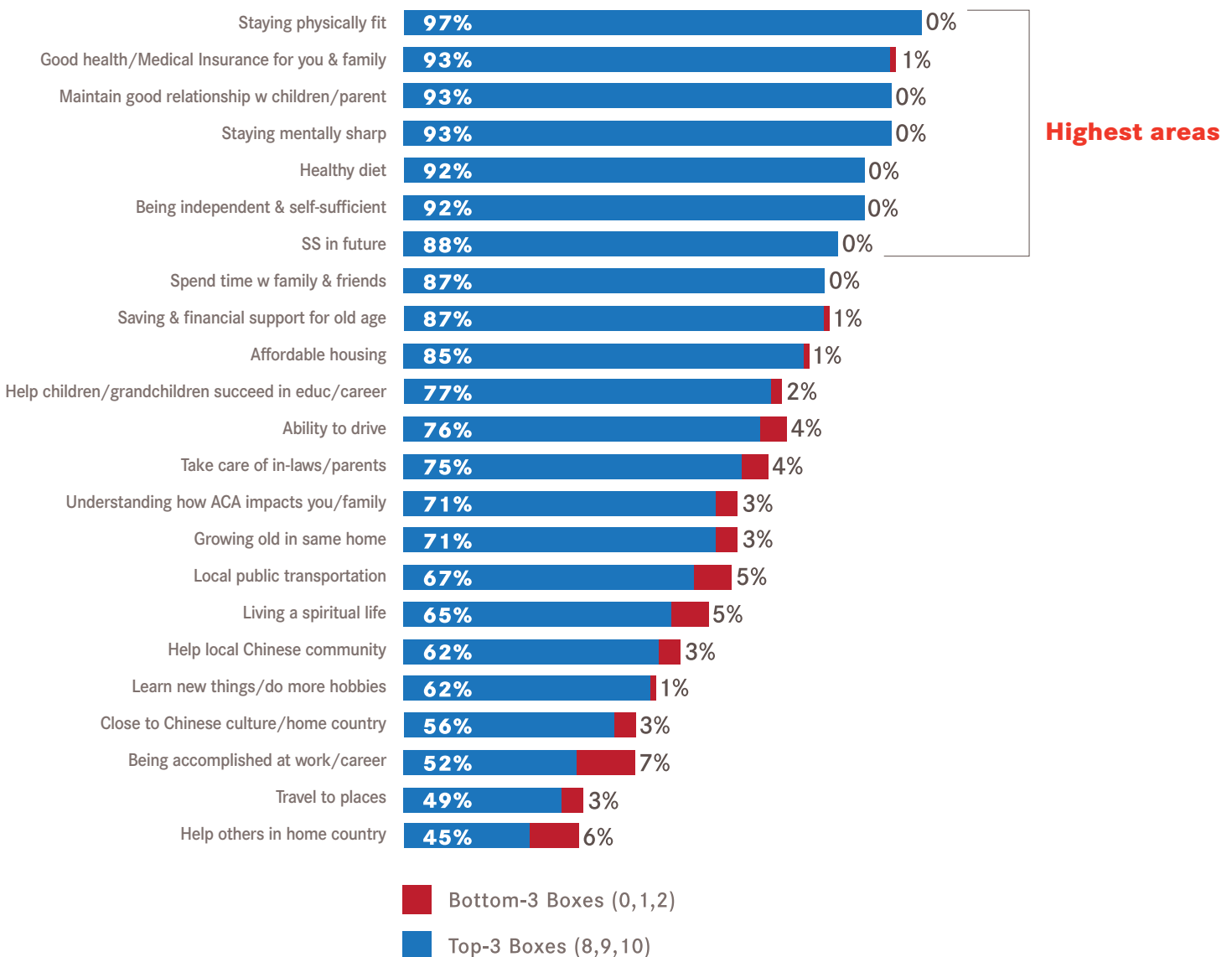
Important **needs & wants** for living a good life

Needs & Wants for Living a Good Life

Top-3 (8,9,10) and Bottom-3 Boxes (0,1,2) on 11-Point Scale

Base: Total, N=811

% of Respondents

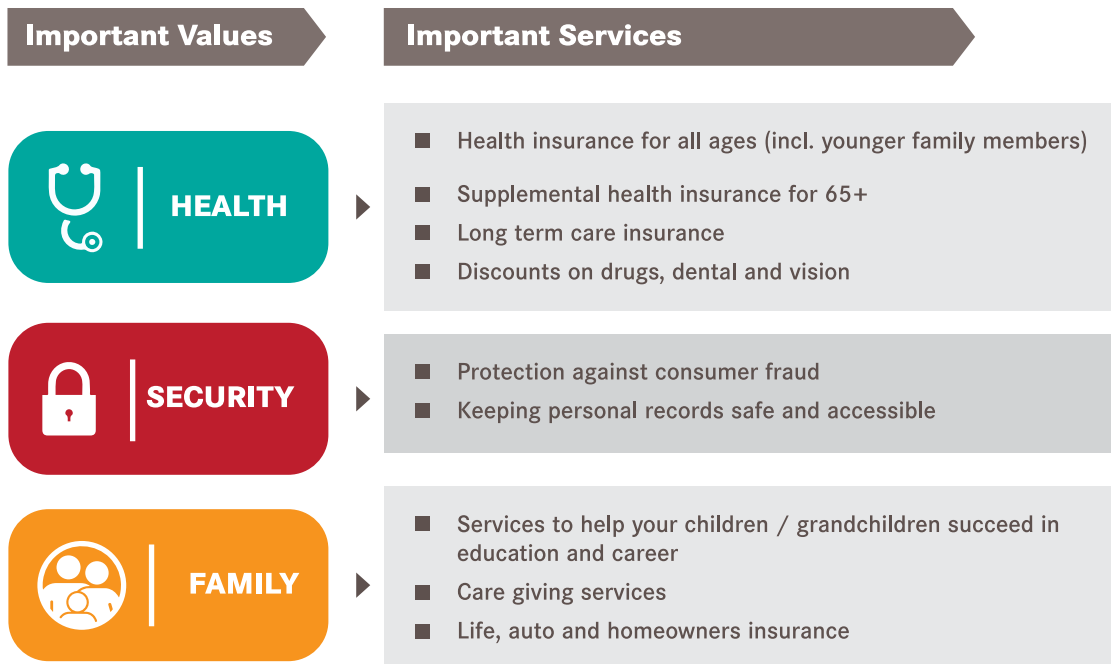


Source: AARP Research Center, 2013. Chinese Americans and Filipino Americans Study. Age 50-75 Chinese and Filipinos in Los Angeles, San Francisco, and New York

Chinese Americans

Important **services** for living a good life

- To live a good life, the Chinese Americans believe in **good health** and **peace of mind**.
- They desire services that align with their values and empower them to live a confident and **independent** life.



CARE GIVING

Needs

Chinese Americans

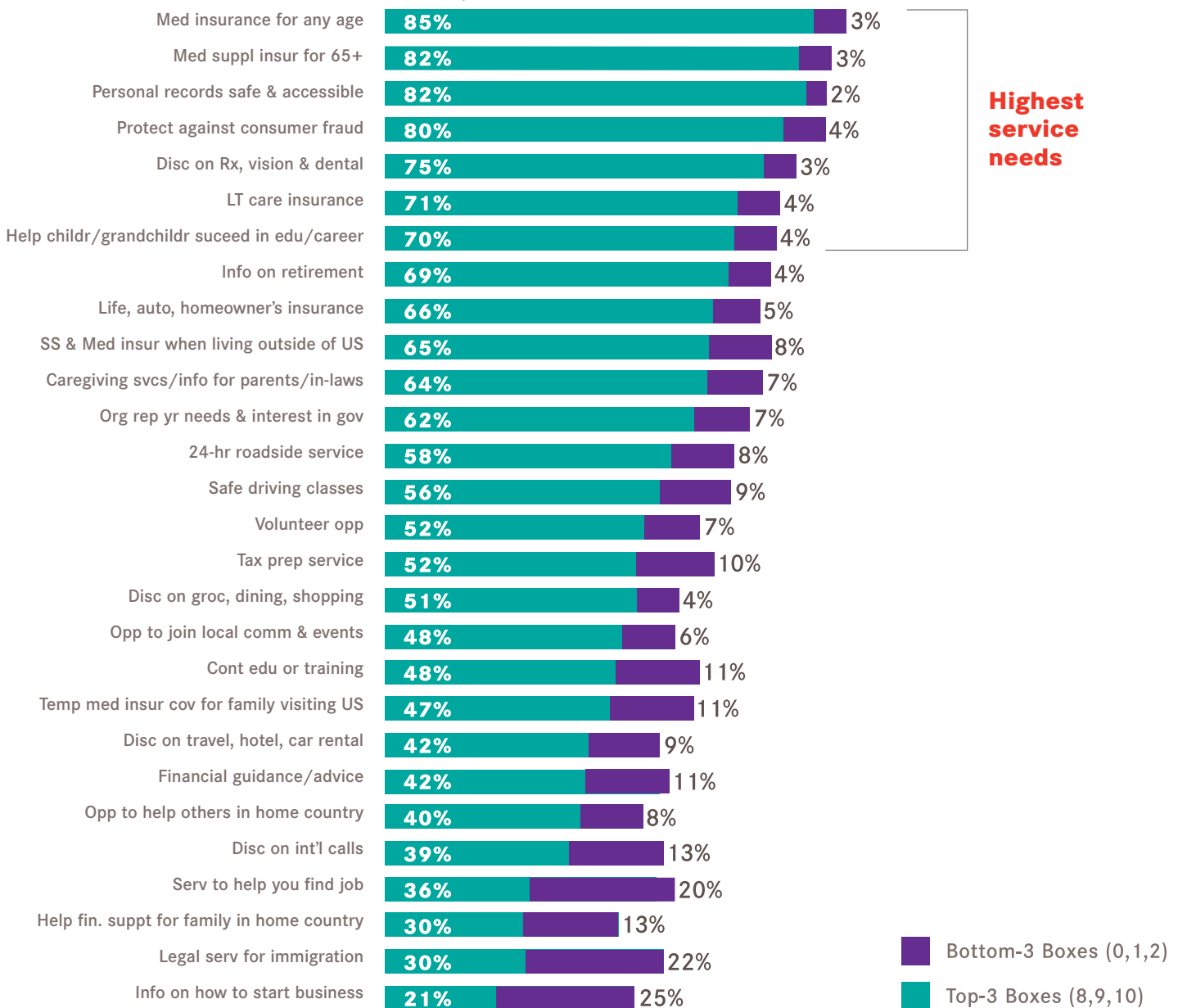
Important **services** for living a good life

Service Needs for Living a Good Life

Top-3 (8,9,10) and Bottom-3 Boxes (0,1,2) on 11-Point Scale

Base: Total, N=811

% of Respondents



Chinese Americans

Age 50-75 consumer segments Needs and wants (LA, SF, and NY)



39% Affluent, bicultural, engaged

- Affluent, educated, bi-lingual
- Socially mobile and engaged

Needs and Wants:

- Travel, hobbies, interests
- Care for family
- Care for previous generation
- Professional advancement
- Mobility and protection
- Spiritual fulfillment

28% Aging and Needy

- Mainly SF and NY
- Older and economically “vulnerable”
- Little interest in social life
- Rely heavily on in-language media for information

Needs and Wants:

- Health and wellness
- Independence and self sufficiency
- Family cohesion and support
- Protection and daily life management
- Helping the next generation to succeed, and taking care of family in home country

19% Self Reliant Middle Class

- Disengaged
- Self reliant
- Acculturated, some born in US

Needs and Wants:

- Healthcare policy
- Take care of older gen
- Mobility



11% Working Immigrant Families

- Middle class working families
- Heavy in-language usage
- Busy working, little interaction with community or society

Needs and Wants:

- Protection, daily life management
- Next generation a priority
- Self sufficiency and independence
- Family cohesion
- Professional advancement
- Mobility with protection

3% Aging within Means

- Older retirees with family support

Needs and Wants:

- Mobility with protection
- Understanding policies

Filipino Americans

Filipino Americans age 50+ have similar needs as 50+ Asian American and Pacific Islanders. In addition, living a spiritual life is also very important for them. Physical and mental fitness also emerged from the research study.

While in-language services and information are not as important because the vast majority are English proficient, any English language materials would greatly benefit from an infusion of common in-language words or headlines that resonate very well with the Filipino American community. Caregiving needs include:

- Care of family elders
- Resources and tools in caring for elders
- Long term care insurance
- Ways to save on medical costs
- Transportation and savings to access services
- Information on support and available services
- Culturally sensitive outreach and services for caregiving



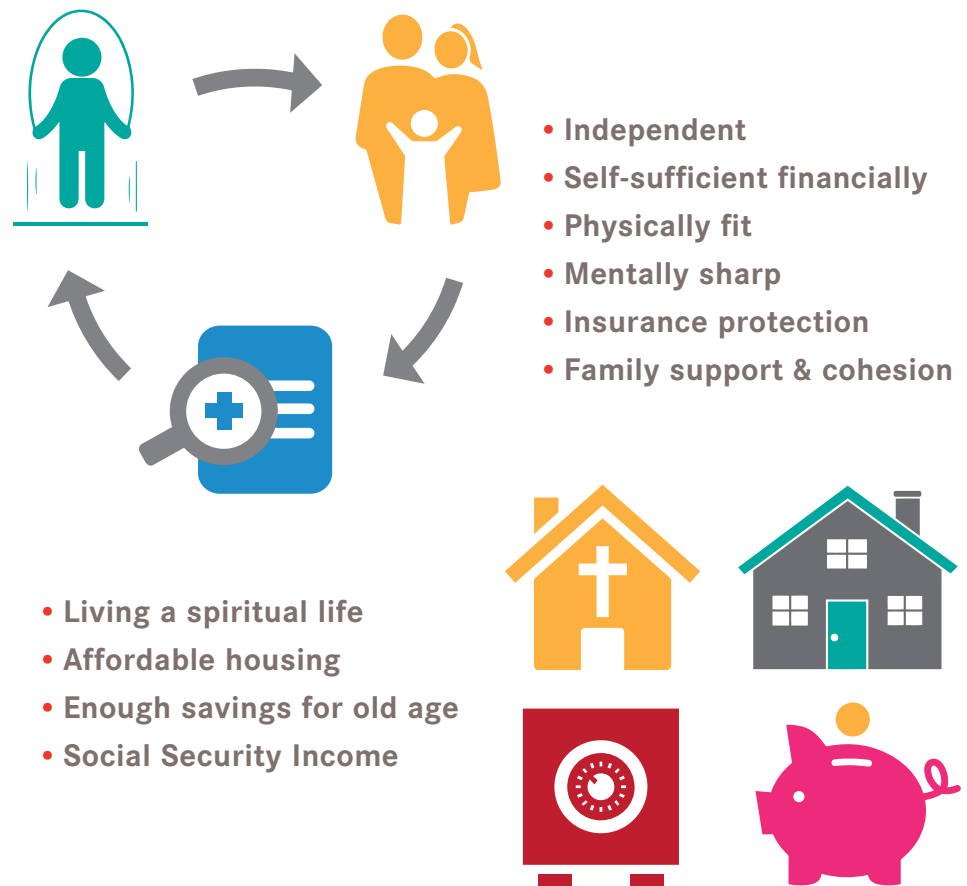
Filipino Americans

Important needs & wants for living a good life

A good life for Filipino Americans is built on three foundations:

- **Health & mental fitness** to live an independent life
- Cohesive and mutually supportive **family**
- **Protection**

A **faith-based culture, spirituality** is as important as “having enough savings” and “an affordable home to live” when they get old.



Filipino Americans

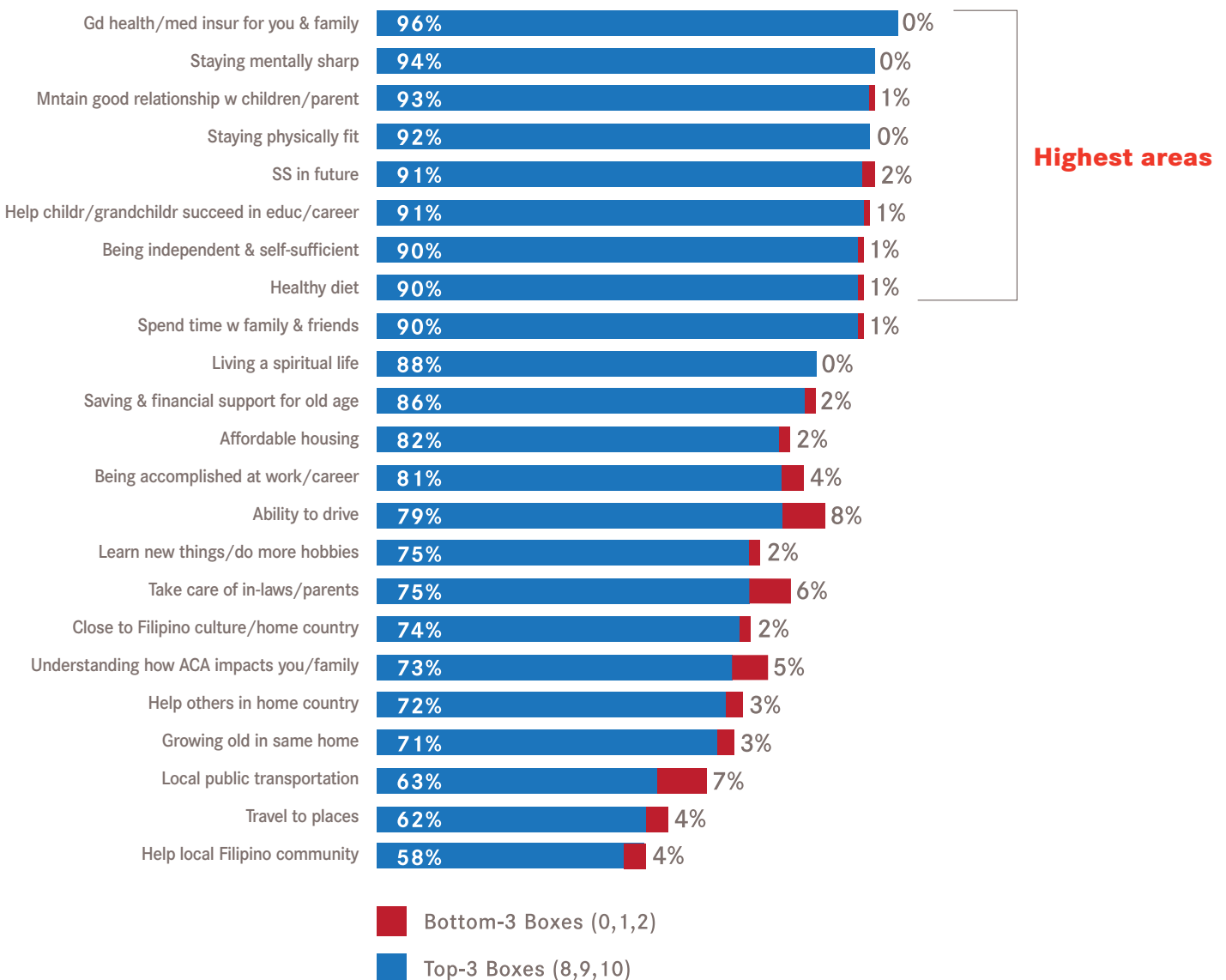
Important **needs & wants** for living a good life

Needs & Wants for Living a Good Life

Top-3 (8,9,10) and Bottom-3 Boxes (0,1,2) on 11-Point Scale

Base: Total, N=716

% of Respondents

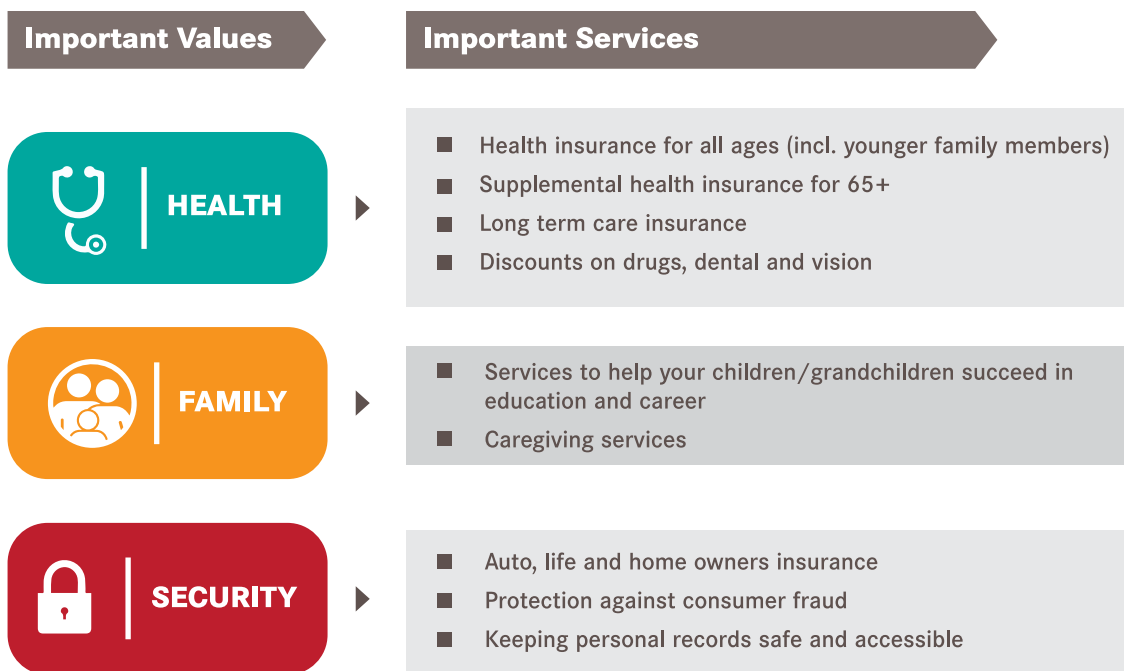


Source: AARP Research Center, 2013. Chinese Americans and Filipino Americans Study. Age 50-75 Chinese and Filipinos in Los Angeles, San Francisco, and New York

Filipino Americans

Important **services** for living a good life

- To live a good life, Filipino Americans believe in having **peace of mind**.
- They desire services that align with their values and empower them to live a good life



CARE GIVING

Needs

Filipino Americans

Important **services** for living a good life

Service Needs for Living a Good Life

Top-3 (8,9,10) and Bottom-3 Boxes (0,1,2) on 11-Point Scale

Base: Total, N=716

% of Respondents



Filipino Americans

Age 50-75 consumer segments Needs and wants (LA, SF, and NY)



40% Affluent, bicultural, engaged

- Well educated, bi-lingual, upper HHI and pre-retirement
- Stay connected with the Filipino culture
- Active and engaged

Needs and Wants:

- Mental and physical fitness
- Mobility
- Family cohesion
- Growing old in the US

34% Filipino Centric, Educated Middle Class

- Older, average HHI & education
- Prefer Filipino language and media
- Active and connected with Filipino culture (churches, hometown groups, volunteer groups)

Needs and Wants:

- Protection and cost of living
- Filipino culture
- Family in home country
- Career & education
- Family cohesion

13% Working Immigrant Families

Education

- Spiritual
- Stronger dependence on Filipino language and media
- Trying to make ends meet
- Low participation in social activities

Needs and Wants:

- Family in home country
- Physical and mental fitness
- Family cohesion
- Filipino culture

7% Self Reliant Working Families

- Acculturated
- Younger & higher HHI, disconnected with Filipino culture

Needs and Wants:

- Housing & transportation
- Family cohesion & support

3% Active Singles

- Living alone
- Active
- Bilingual
- Culturally connected

Needs and Wants:

- Protection
- Cost of living
- Physical & mental fitness



3% Family Supported Blue Collar

- Low education
- Filipino speaking
- Unacculturated and unengaged
- Rely on and supported by family

Needs and Wants:

- Protection
- Cost of living
- Home country
- Filipino culture
- Physical and mental fitness
- Housing and transportation

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