Executive Summary

Family caregiving in the Asian American, Native Hawaiian, and Pacific Islander (AANHPI) population presents a complex landscape with unique challenges and opportunities. The recent release of the National Strategy to Support Family Caregivers (the Strategy) and the White House Initiative to Advance Equity, Justice, and Opportunity for the AANHPI Communities (White House Initiative) provides an opportunity to analyze their alignment and impact on family caregiving in the AANHPI community. This crosswalk analysis serves several purposes, including identifying areas of convergence, improving coordination and collaboration, evaluating policy priorities, and providing a blueprint for addressing caregiving needs in other populations. The results of the crosswalk analysis identify a direct relationship between the Strategy's cross-cutting principle of advancing equity, accessibility, and inclusion for family caregivers in underserved communities and all the fourteen guiding principles of the White House Initiative.

Background

Every year, more than 53 million family caregivers play a vital role in supporting older individuals and people with disabilities, helping them maintain their independence within their communities. Furthermore, there are at least 2.7 million grandparents and other kin and relative caregivers who take on primary caregiving responsibilities when parents are unable to do so. These family caregivers often step in as informal support systems when formal caregiving options are lacking, assuming a wide range of duties such as meal provision, transportation, household tasks, personal care, educational assistance, medical responsibilities, administrative tasks, language translation, and even information technology (IT) support, often with minimal notice. Although family caregiving can be fulfilling, accurately capturing the comprehensive nature associated with family caregiving presents considerable challenges.

Existing data collection efforts have been inadequate in capturing the full scope of caregiving experiences. These efforts have primarily focused on specific caregiving scenarios, such as post-hospital discharge care, neglecting certain caregiver populations like kin and grandparent caregivers, as well as those providing care from a distance. Additionally,
comprehensively capturing the enduring and lengthy nature of caregiving, particularly for individuals with long-term needs like dementia and other chronic conditions, poses challenges.

Further, various caregiver outcomes, including social isolation, loneliness, stress, depression, and overall quality of life, often go unnoticed and understudied. Recent attention has focused on quantifying the financial implications of family caregiving, revealing significant losses in wages for caregivers and their employers. Prioritizing support and resources for family caregivers is essential to preserve the autonomy and quality of life of care recipients and curb rising healthcare costs. Recognizing and addressing the challenges faced by caregivers is crucial for policymakers and healthcare professionals. By understanding caregivers’ experiences, steps can be taken to alleviate their challenges and enhance the well-being of both the caregivers and care recipients.

The National Strategy to Support Family Caregivers

“As the overall number of diverse older adults grows, there will also be a corresponding increase in the number of caregivers grappling within multiple intersection challenges. When caregivers experience multiple challenges, they are not merely additive, but rather have a compound effect that hampers a person’s ability to provide quality care over time. As people age, these issues are often further exacerbated. These challenges have only been intensified during the pandemic, worsening preexisting stressors, strains and both physical and mental health outcomes for diverse caregivers and their older loved ones. The impact of the pandemic has been particularly significant in the caregivers in communities of color. As a result, when it comes to addressing disparities, recommendations that suggest a universal approach should be avoided. Despite the ubiquity of caregiving, caregivers are not a monolith, and their needs must be addressed individually.”

- The 2022 National Strategy to Support Family Caregivers’ First Principles: Cross-Cutting Considerations for Family Caregiver Support

The Recognize, Assist, Include Support, and Engage (RAISE) Family Caregivers Act and the Supporting Grandparents Raising Grandchildren (SGRG) Act were enacted by the U.S. Congress in 2017 and 2018, respectively to address the challenges faced by family caregivers. These acts led to the creation of the RAISE and SGRG Caregiving Advisory Councils, which developed the National Strategy to Support Family Caregivers in 2022 (“the Strategy”). The Strategy aims to provide a comprehensive action plan and roadmap to recognize, assist, support, and engage family caregivers.

The Strategy has five overarching goals, which include (a) increasing awareness, (b) advancing partnership and engagement, (c) strengthening services and support, (d) ensuring financial and workplace security, and (e) expanding data, research, and evidence-based practices. These goals are supported by 27 outcomes that outline specific action items and benchmarks for measuring success. The Strategy emphasizes the interconnectedness of these outcomes and goals, recognizing the complex nature of caregiving.

The Strategy also includes First Principles: Cross-Cutting Considerations for Family Caregiver Support that describes four essential elements that must be at the core of developing, delivering, and evaluating family caregiver services and supports: (1) the need for person- and
family-centered approaches; (2) trauma and its impact; (3) diversity, equity, inclusion, and accessibility; and (4) direct care workforce.

While the Strategy acknowledges the diverse experiences and support needs of family caregivers, there is a need to further explore how different populations and cultural groups experience family caregiving. As an important public health issue, understanding this myriad of experiences associated with family caregiving is crucial for addressing disparities, promoting inclusivity, and tailoring resources and support systems to meet cultural needs and values of diverse communities.

**Family Caregiving in the Asian American, Native Hawaiian, and Pacific Islander (AANHPI) Community**

Certain populations, including racial and ethnic minorities, Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ+) individuals, and immigrant communities, often face barriers and discrimination that affect their caregiving experiences. The AANHPI population is a diverse and rapidly growing segment of the U.S. population. It encompasses various ethnicities, languages, socioeconomic backgrounds, and historical experiences. Cultural norms, traditions, and social structures significantly influence family caregiving in the AANHPI community. Filial piety, intergenerational support, and communal caregiving are common, with family members and extended networks playing essential roles in providing care.

However, the AANHPI community also encounters distinct challenges in family caregiving. Linguistic and cultural barriers, immigration-related issues, and limited awareness of available resources can hinder access to formal support systems. Cultural competency gaps among healthcare and service providers can lead to disparities in care quality. Socioeconomic factors, such as income disparities and limited access to healthcare and social services, further exacerbate caregiving challenges.

Recognizing and addressing the unique needs of diverse communities is essential to ensure equitable and culturally responsive support for family caregivers. Culturally competent services, language assistance, targeted outreach, and increased access to resources are crucial for effectively supporting family caregivers in the AANHPI community.

**The White House Initiative to Advance Equity, Justice, and Opportunity for the AANHPI Communities**

“Asian American, Native Hawaiian, and Pacific Islander (AA and NHPI) communities, some of the fastest growing groups in the Nation, represent a multitude of ethnicities, languages, and experiences that enrich America and strengthen our Union. Yet far too long, systemic barriers to equity, justice, and opportunity have put the American Dream out of reach of many AA and NHPI communities.”

-White House Initiative on Asian American, Native Hawaiian, and Pacific Islanders

The White House identified that the COVID-19 pandemic has had a significant impact on the AANHPI community, revealing health disparities, economic hardships, increased mental health challenges, and escalating reports and incidents of discrimination and xenophobia. In response, President Biden took action by establishing the White House Initiative on Asian
American, Native Hawaiian, and Pacific Islanders (“White House Initiative”) through Executive Order (EO) 14031.

The White House Initiative outlines fourteen guiding principles and focuses on seven strategic priority areas. These priorities include promoting inclusion, combating anti-Asian hate and discrimination, data disaggregation, language access, equitable COVID-19 response and recovery efforts, capacity building, federal workforce diversity, and outreach and engagement with AANHPI communities. The initiative also formed three subgroups to address specific areas requiring strong interagency coordination: combating hate and discrimination, promoting language access, and prioritizing data disaggregation.

By prioritizing these strategic areas and fostering interagency collaboration, the White House Initiative aims to promote a sense of belonging, combat discrimination, improve data collection, and enhance access to services and resources for the AANHPI community.

A Crosswalk Analysis of Two National Strategies

The release of the Strategy and the White House Initiative provides an opportunity to analyze their alignment and impact on family caregiving in the AANHPI community. Conducting a crosswalk analysis between the two strategies serves several purposes, including identifying areas of convergence, improving coordination and collaboration, evaluating policy priorities, and providing a blueprint for addressing caregiving needs in other populations.

The analysis involves reviewing the foundational principles, goals, and priorities of both strategies to determine their alignment and relationship. By examining how the Strategy supports family caregiving in the AANHPI community, the crosswalk analysis aims to foster better coordination, resource allocation, and interagency collaboration. It also helps evaluate the impact and effectiveness of policies and provides insights for addressing caregiving concerns in other populations.

Findings and Implications

The crosswalk analysis demonstrates a direct relationship between the Strategy's cross-cutting principle of advancing equity, accessibility, and inclusion for family caregivers in underserved communities (Cross-Cutting Principle 3) and all the fourteen guiding principles of the White House Initiative. Further, there is convergence on the White House Initiative’s seven priorities (Priority) and the Strategy’s five goals (Goal) (see Table 1): Priority 1 relates with all the Strategy’s Five Goals; Priority 2 relates with Strategy Goal 5; Priority 3 relates with Strategy’s Goals 1, 2, 3 and 5; Priority 4 relates with all the Strategy’s Five Goals; Priority 5 relates with Strategy Goals 2, 3 and 4; Priority 6 relates with Strategy Goal 5; and Priority 7 relates with Strategy Goals 1, 2, 3, and 5.

Table 1. The White House Initiative’s Seven Priorities and the Strategy’s Five Goals
These findings highlight the alignment between the Strategy's goals and the priorities important to the AANHPI community in promoting equity, justice, and opportunities. The results of the crosswalk analysis also highlighted opportunities to support AANHPI family caregivers. To achieve meaningful and successful outcomes in family caregiving for the AANHPI community, it is important to comprehend the nature of family caregiving and the components of equitable access for this diverse community. To illustrate these points further, the discussion below explores how the White House Initiative Priority 3 (Language Access for AANHPI Communities) can be utilized to support Goals 1, 2, 3, and 5 of the Strategy to enhance support and understanding of the unique needs of AANHPI family caregivers.

**Addressing the Linguistic and Cultural Needs of the AANHPI Family Caregivers**

The AANHPI community comprises a diverse population, encompassing more than 100 distinct languages and dialects. Approximately one-third of AANHPI individuals face challenges with English proficiency, and this percentage is even higher among certain segments of the population, such as recent immigrants and refugees. Language barriers present significant hurdles when it comes to accessing federal, states, and local resources and services, including those intended to support family caregivers. The Strategy discusses several strategies under Goals 1, 2, 3, and 5 to address cultural and linguistic barriers to support family caregivers from diverse communities that could be tailored to meet the specific needs of the AANHPI family caregivers.

For Goal 1, raising awareness and outreach, tailored communication channels and methods are essential to effectively reach the AANHPI population. Collaborating with relevant federal and state agencies and community-based organizations can ensure that outreach materials consider language preferences, cultural values, and various types of family caregiving within each community. For example, the National Asian Pacific Center on Aging, AARP, and Diverse Elders Coalition have developed resources that can assist various stakeholders such as state agencies and community-based organizations to address the linguistic and cultural needs of the AANHPI family caregivers. Dissemination methods should encompass electronic, in-person, print, and podcast formats to accommodate diverse access needs.

Under Goal 2, advancing partnerships and engagement, caregiver assessment tools should be developed specifically for the AANHPI community, considering linguistic and cultural needs.
Resource guides, such as the one developed by the US Department of Health and Human Services Office of Minority Health, offer best practices for interpretation and translation to ensure language concordance for the AANHPI community. These guides could be adopted by stakeholders at the state and local levels to develop caregiver assessment tools that address the language and communication barriers of AANHPI community.

Goal 3 focuses on strengthening services and support. Financial and human resource investments at the federal, state, and local levels are necessary to provide equal access to customized services, training programs, support networks, respite care, and counseling for AANHPI family caregivers. These resources must be linguistically and culturally appropriate to meet the diverse needs of the community.

Goal 5 emphasizes the importance of data, research, and evidence-based practices. Robust data collection mechanisms should be developed to capture unique caregiving experiences within AANHPI communities, including surveys and data collection available in major languages spoken in the community.

Summary and Conclusions
The analysis of the crosswalk between the Strategy and the White House Initiative reveals an alignment and shared priorities in advancing family caregiving within the AANHPI community. Both strategies recognize the importance of equity, accessibility, and inclusion that are important in addressing and disparities faced by AANHPI family caregivers. The process used in the crosswalk analysis also provides a blueprint for understanding and addressing family caregiving experiences and challenges in other populations.

The AANHPI population is diverse, with various ethnicities and cultural backgrounds, leading to unique challenges in caregiving. The White House Initiative’s strategic priorities, such as combating discrimination and promoting language access, directly tackle these challenges. The Strategy's focus on equity complements the White House Initiative's goals by identifying the need for culturally responsive supports, addressing disparities, and promoting inclusivity. By aligning their priorities and resources, the strategies can improve coordination, collaboration, and resource allocation, ultimately enhancing support for AANHPI family caregivers at the federal, state, and local levels.

To achieve meaningful outcomes, it is also crucial to further explore the meaning of belonging and inclusion among AANHPI family caregivers and to comprehensively understand the implications of equitable access to this community. By recognizing and addressing barriers, promoting inclusion, and utilizing data disaggregation, these strategies can advance opportunities for AANHPI family caregivers at the federal, state, and local levels leading to improved well-being and quality of care for both the caregiver and the care recipient.

About the Project and Author
This project was part of the author’s 2022-2023 Health and Aging Policy Fellowship with the Administration of Community Living. Ea is a health equity scholar, a curricular innovator, and a community leader in the Filipino American community. He is a co-investigator for the Community Engagement Core of the Rutgers-NYU NIH P50 Center for Asian Health Promotion and Equity (CAHPE), and chair of Kalusugan Coalition, a community-based organization that aims to enhance the health and well-being of Filipino Americans in the New York/New Jersey area. He is a Clinical Professor and Associate Dean for Clinical and Adjunct Faculty Affairs at
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