**RESEARCH SYMPOSIUM PRESENTER**

**PRESENTATION TIME: 4:15 PM – 4:25 PM**

**PRESENTER: Philip Huang**

**DEVELOPMENT OF AN EVIDENCE-BASED TOOLKIT TO IMPROVE ADVANCE CARE PLANNING FOR UNDERSERVED CHINESE-AMERICAN IMMIGRANTS**

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**BACKGROUND:** The Chinese-American population is rapidly growing and many are non-English-speaking and medically underserved. Advance care planning (ACP) which allows patients and families to engage in informed shared decision-making through documentation of advance directives that are legal and actionable are highly valued outcomes. However, little is known regarding their preferences for ACP.

**METHODS:** In this ongoing study, we evaluated knowledge and preferences for, and cultural influences on ACP in first-generation, community dwelling Chinese-American seniors. Participants completed a survey on ACP and other questionnaires administered in Chinese. The data will be used to create a toolkit to assist clinicians in ACP discussions with patients and their families.

**RESULTS:** In total, 81.8% of the sample is non-English speaking (30% Cantonese, 27% Mandarin, 26% Toisanese, 17% Fuzhounese), 60.2% had a high school degree or less, and 71.2% consider themselves to be “very Asian”/“mostly Asian.” When assessing traditional Chinese cultural beliefs about death and dying, the most commonly endorsed statement was “I would comply with all the rules and rituals of funeral” (strongly agree/agree: 87.2%) and “Bereaved families should not be socially active in the months following the death” (strongly agree/agree: 57.2%). Over 75% of patients in the study had little knowledge of ACP and over 90% did not have an ACP in place. When asked, 66.4% of patients would complete a healthcare proxy in the future, while 48.7% would complete a living will in the future. Although few patients in the study had knowledge of ACP, most were open to ACP discussion and completion.

**CONCLUSIONS:** Communication about ACP will likely need to start with the provision of education that explains the purpose and benefits of advanced directives to patients and families who are unfamiliar with these topics, and communication strategies that identify and address common beliefs that may be barriers to completion based on our survey results.

**CONTENT CATEGORY:** Patient care

**KEYWORDS:** *Ethnic Chinese, disparities, ACP, end-of-life, toolkit*