



Cultural and Language Considerations for Cognitive Assessments – Special Focus on Filipino Americans

Jessica de Leon, MD

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Introduction



Speaker

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Assistant Professor of Neurology at
the UCSF Memory and Aging Center



Moderator

Anna Chodos, MD, MPH

Primary Care & Geriatrics Clinician
Associate Professor, UCSF Department of Medicine,
Executive Director, Dementia Care Aware

Housekeeping



We will leave 10-15 minutes at the end of this session for Q&A. Throughout the webinar, you can put your questions into the Q&A/chat functions, and some may be answered in real time.



We will share instructions for claiming Continuing Education (CE) credit at the end of this webinar and via email within 48 hours.



You will receive the recording of this webinar via email within 48 hours



You can also access the webinar slides and recording from the Dementia Care Aware website and YouTube channel.

Dementia Care Aware Program Offerings



Warmline:

1-800-933-1789

A provider support and consultation service that connects primary care teams with Dementia Care Aware experts



Trainings:

- Online Trainings, e.g., Cognitive Health Assessment training
- Monthly Webinars
- Podcasts



Interactive Case Conferences:

- UCLA and UCI ECHO (Extension for Community Healthcare Outcome) conferences



Practice change support:

- UCLA Alzheimer's and Dementia Care Program
- Alzheimer's Association Health Systems

Our Training

Welcome!

Welcome to the Dementia Care Aware (DCA) learning management system. This site provides access to the training modules for the DCA program. When you registered, you were automatically enrolled in the "*The Cognitive Health Assessment: The Basics*" course. Select Start in the "The Cognitive Health Assessment: The Basics" block below to begin.



Screening for Dementia: The Cognitive Health Assessment (CHA)

Goal: Screen patients older than age 65 annually (who don't have a pre-existing diagnosis of dementia)

Part 1



Take a Brief Patient History

Part 2



Use Screening Tools

Part 3



Document Care Partner Information

Sign Up for Upcoming Live CHA Trainings

- Dementia Care Aware offers the CHA training as a **free one-hour live session** multiple times each month.
- Led by Dementia Care Aware partners at the Alzheimer's Association and UC, Irvine.
- Open for anyone who is interested.
- Eligible participants can claim **1 free CE/CME/MOC credit**.



Financial Disclosures

None



Outline

- The Philippines and the Filipino diaspora
 - Languages
 - History (in one slide)
 - Filipino diaspora: Across the world to California
 - Dementia and Filipino +/- Americans
- Language considerations for cognitive assessments
- Cultural considerations for cognitive assessments

Learning Objectives

1. Describe language considerations for cognitive testing of Tagalog speakers.
2. Identify best practices for cognitive testing of bilingual speakers.
3. Recognize cultural considerations for clinical interactions with Filipino Americans.

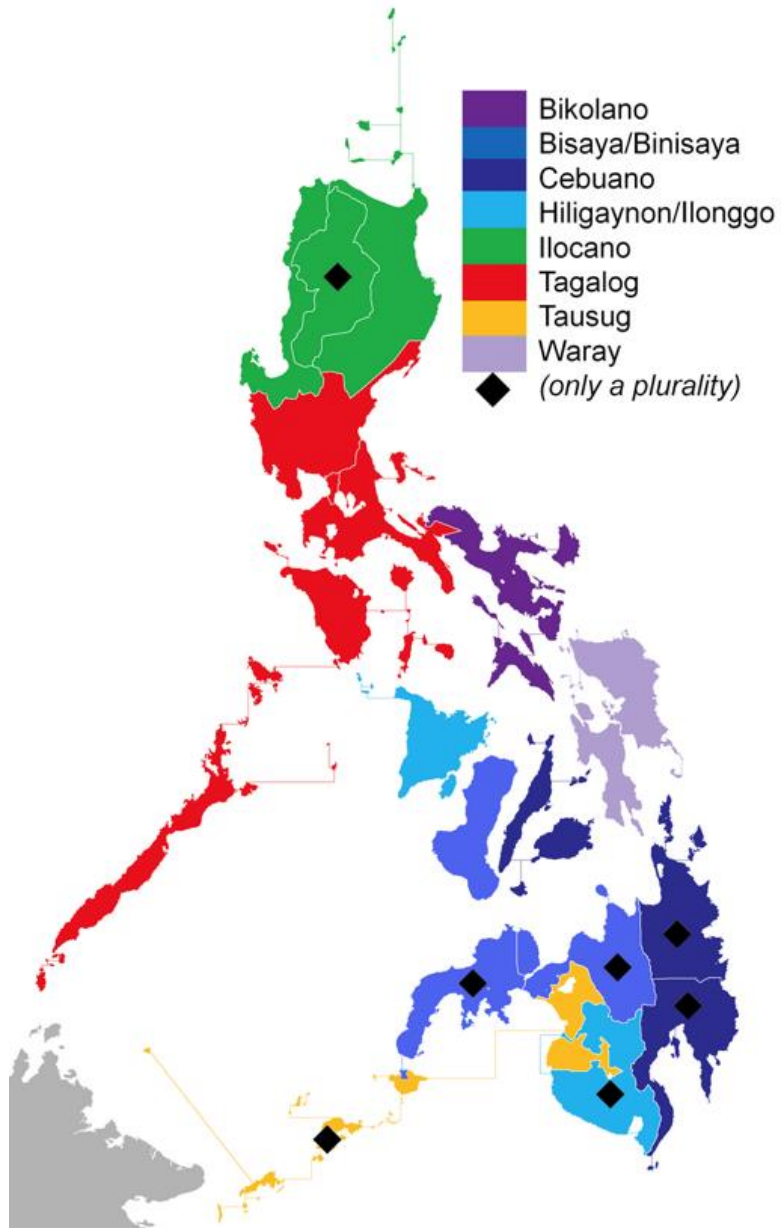




HEALTH CARE SERVICES

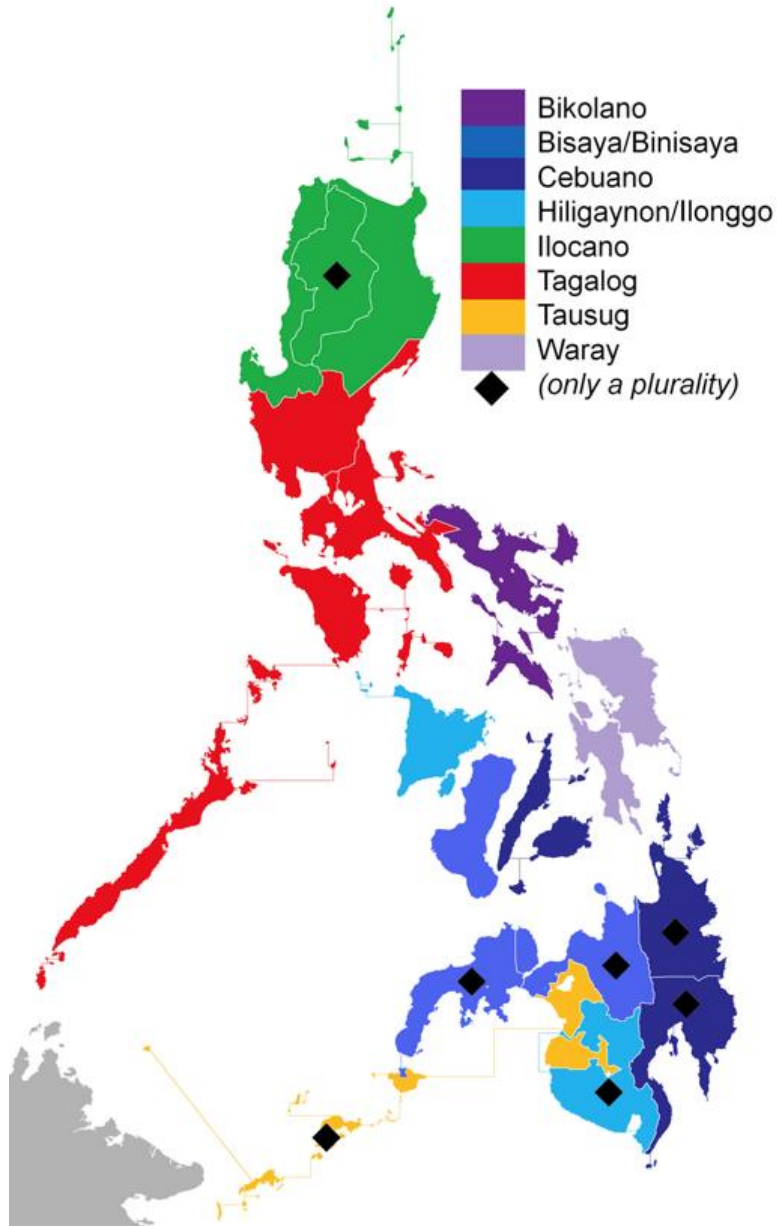


Philippine Languages

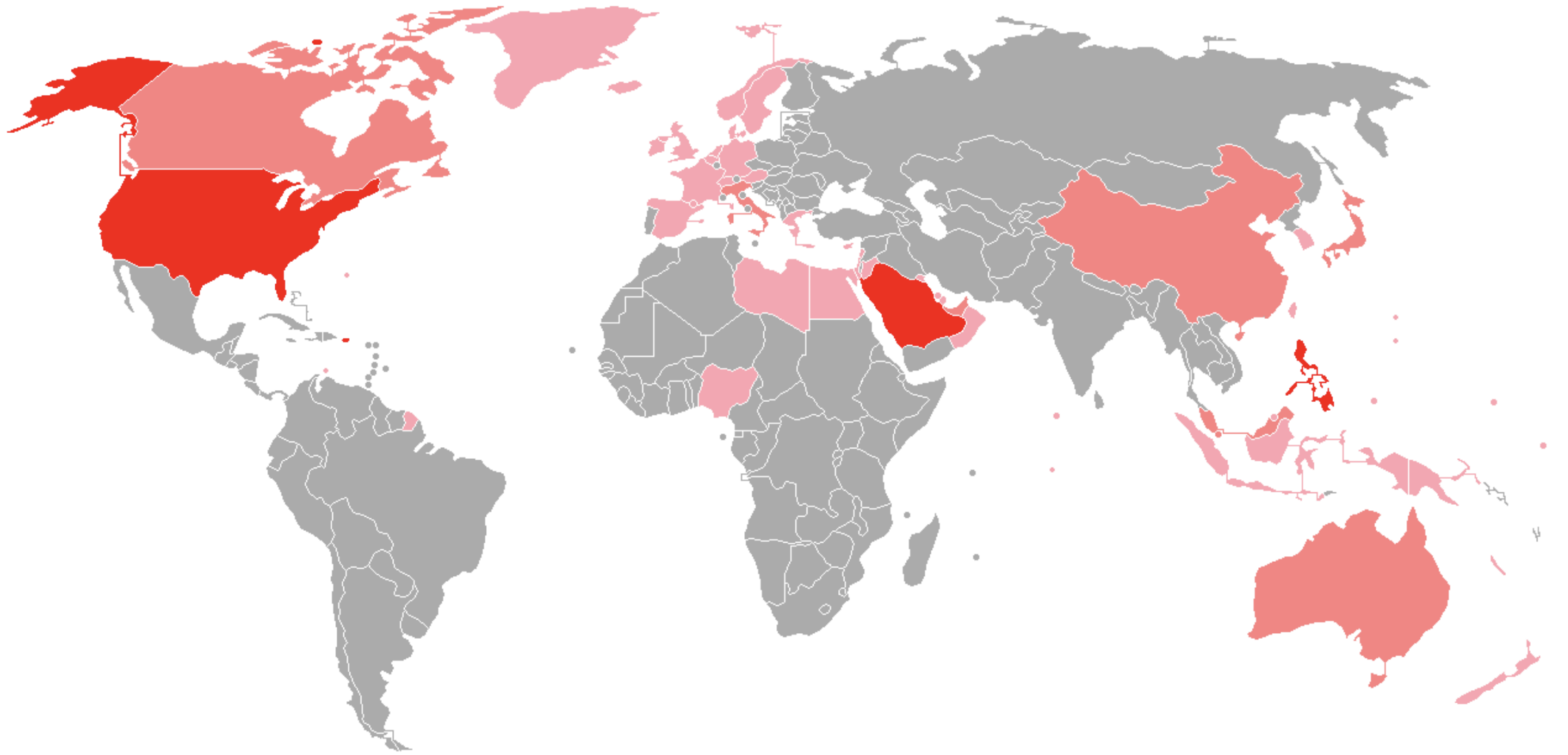


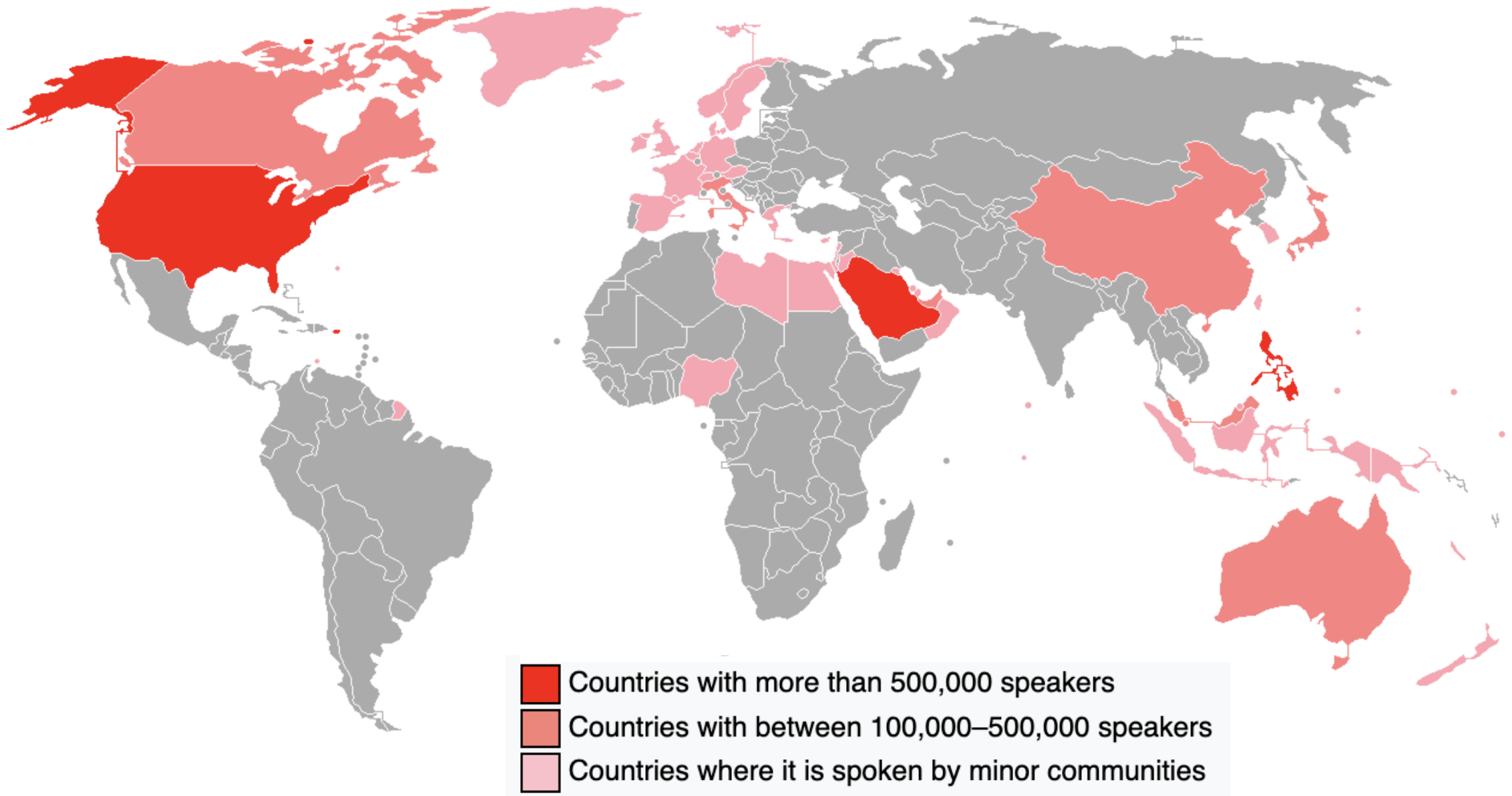
- >175 languages
- Official languages: Filipino (standardized Tagalog), English, (Spanish)
- Tagalog: Austronesian
 - 25% speak Tagalog as first language
 - 50% speak Tagalog as second language
- Tagalog (Filipino) 4th most spoken language in US
 - 20% Filipino Americans not English proficient

Philippine Languages

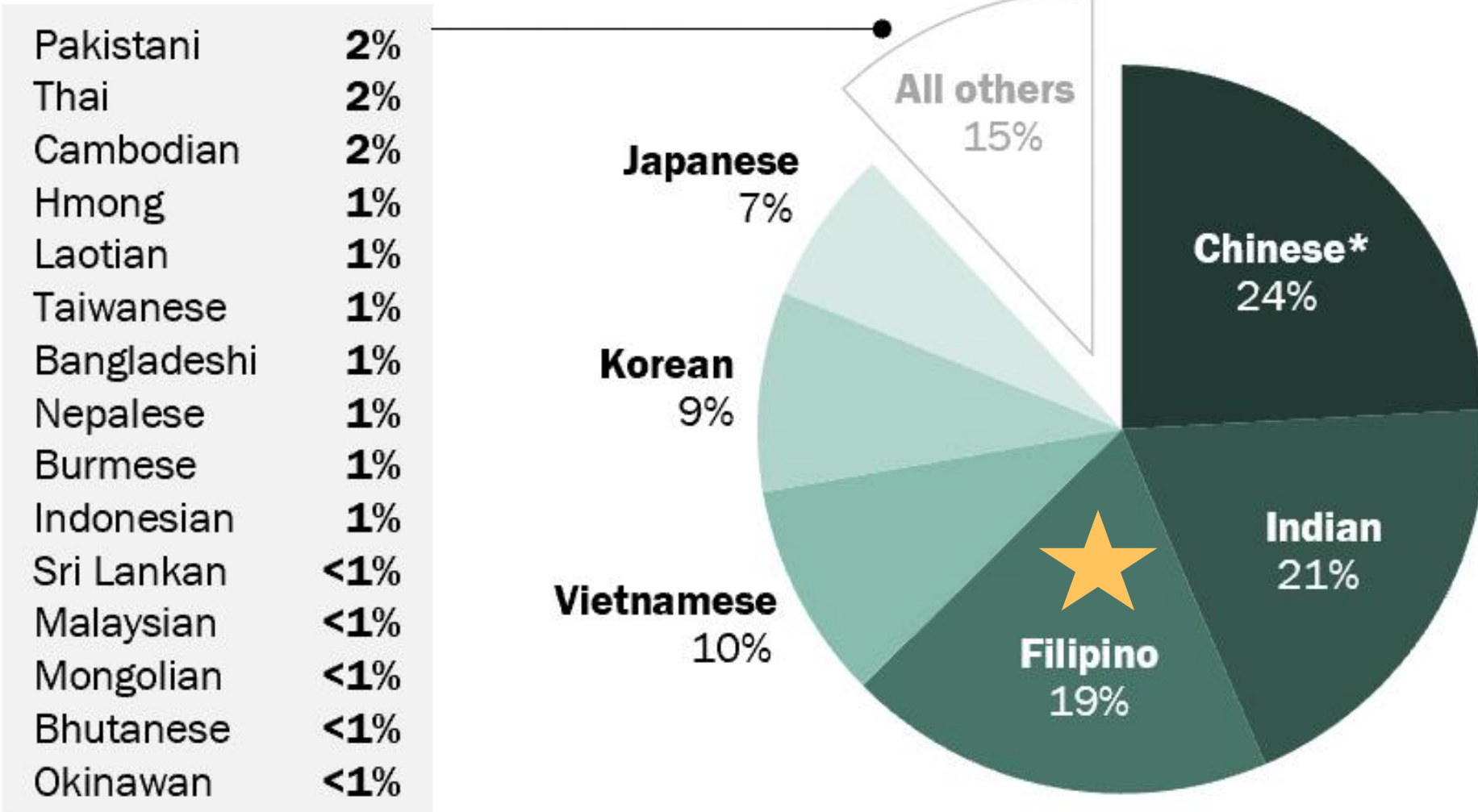


- Multilingualism is the norm
- *Taglish* is common
 - “**Finished** na ba ‘yung **dinner** mo?”
Have you finished your dinner?
- Many cognates (and false cognates) and borrowed words from Spanish and English
 - *Baño* (Spanish for bathroom) vs. *Banyo* (Tagalog for bathroom)
 - *Almorzar* (Spanish verb for lunch) vs. *Almusal* (Tagalog noun for breakfast)

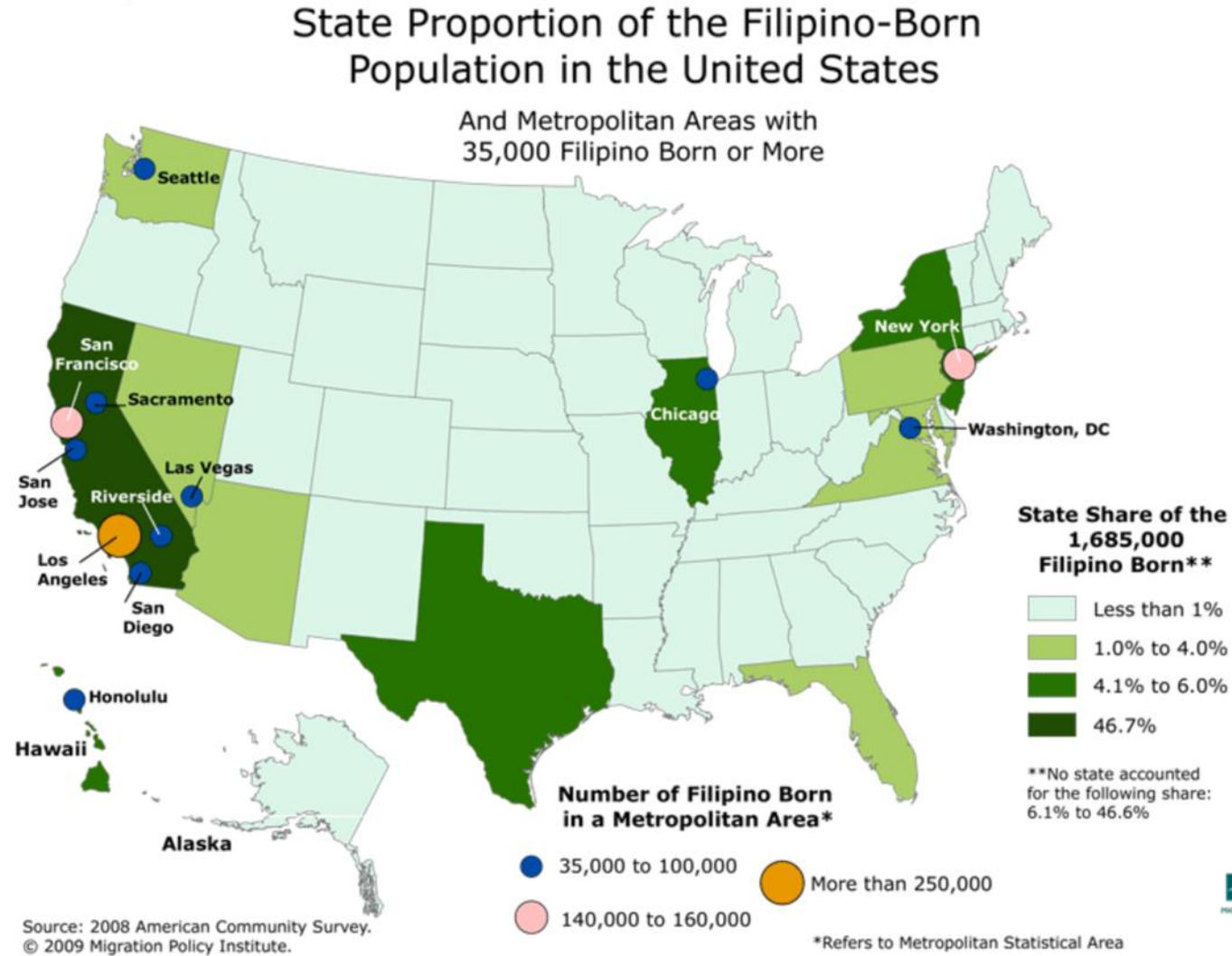




Filipinos in the US



Filipinos in the US



FILIPINOS IN CALIFORNIA

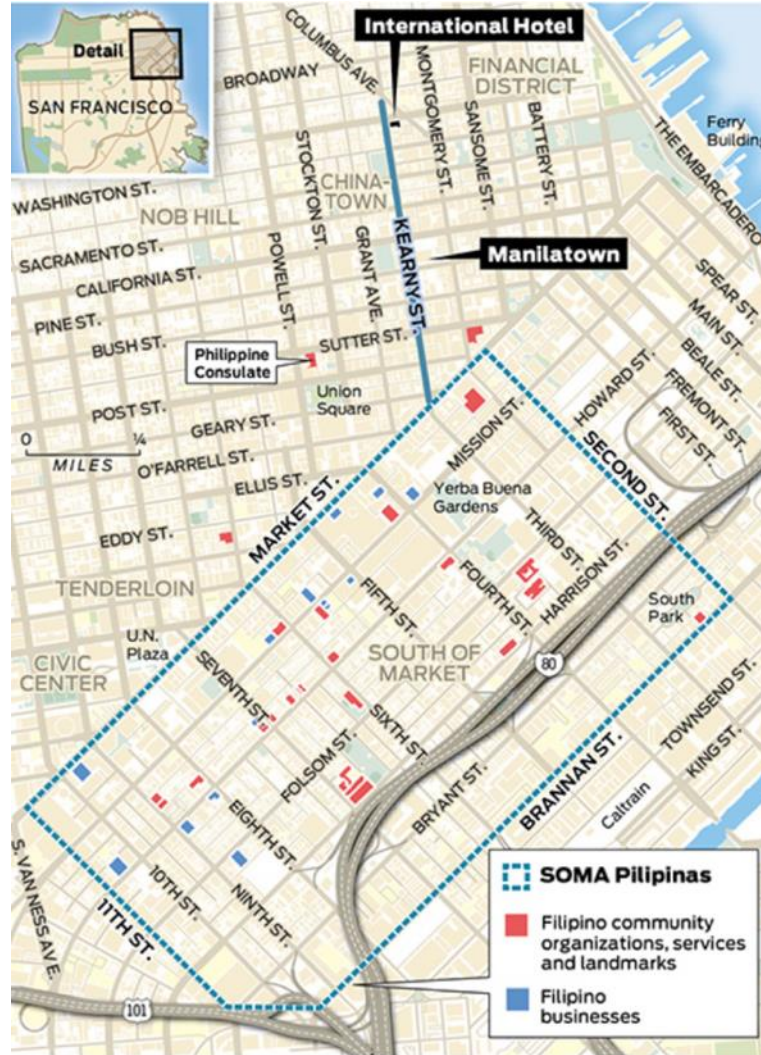


BAY AREA FILIPINO POPULATION RANKED FROM LARGEST TO SMALLEST IN NINE METRO COUNTIES:

- 1 Santa Clara: 104,234
- 2 Alameda: 99,665
- 3 San Mateo: 80,349
- 4 Contra Costa: 61,161
- 5 Solano: 52,641
- 6 San Francisco: 43,646
- 7 Napa: 6,915
- 8 Sonoma: 6,188
- 9 Marin: 3,058

Statistics from 2010 Census provided by the Philippine Consulate in San Francisco

Filipinos in San Francisco

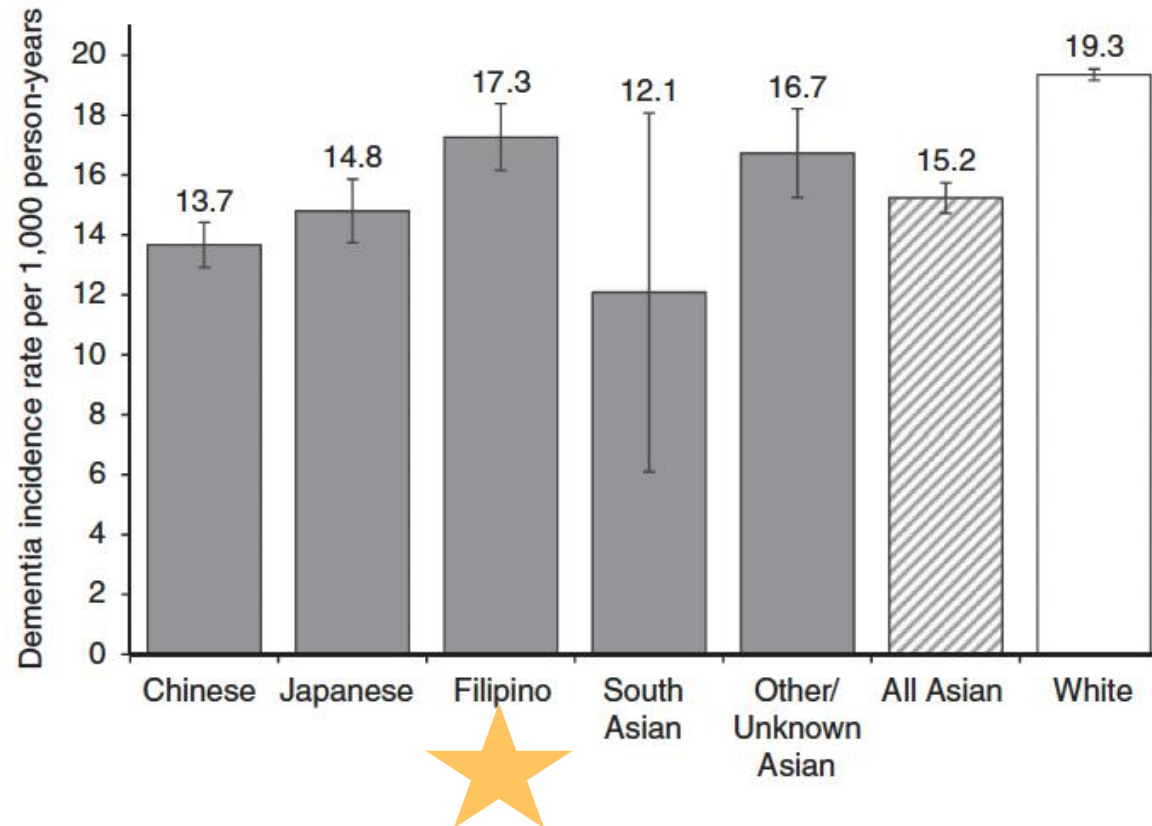


OUR DISTRICT PROGRAMS EVENTS & ACTIVITIES PRESS CONTACT



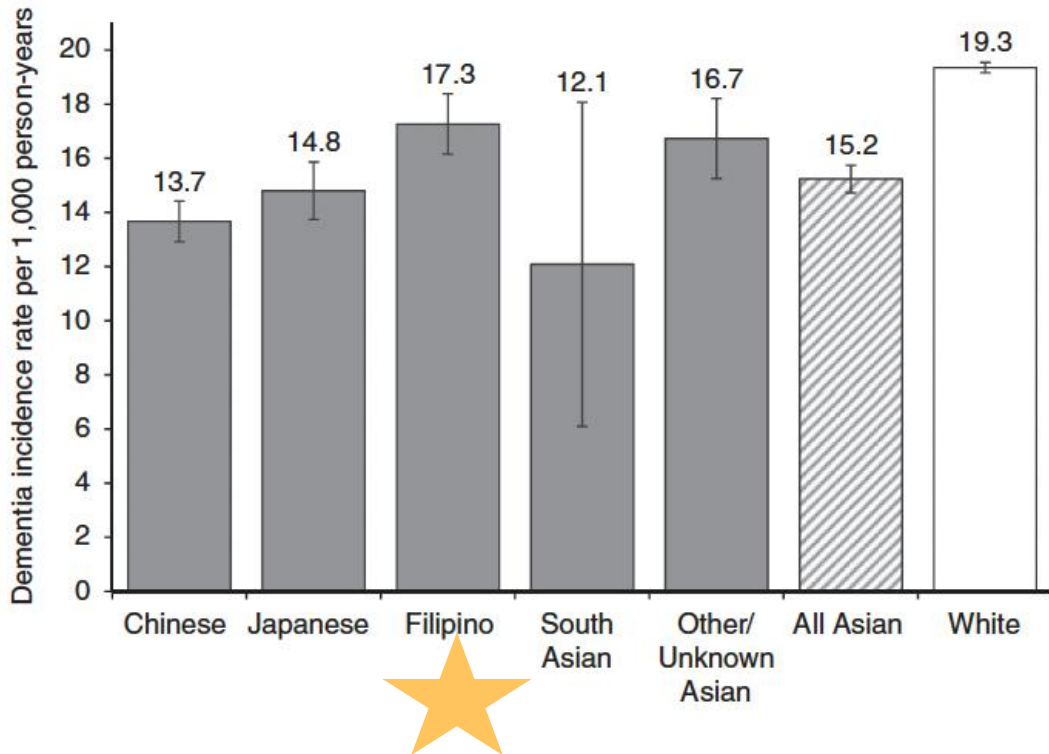
Dementia and Filipinos

- Highest dementia incidence among Asian Americans



Dementia and Filipinos

- Highest dementia incidence among Asian Americans



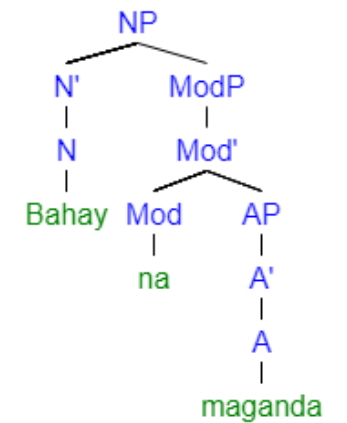
- Why?
 - Protective factors?
 - High education (53% bachelor degree)
 - Lower in Fil-Ams (44%)
 - Low poverty rate *
 - Many vascular risk factors
 - Depression (27-34%)
 - Low usage of mental health services
- Likely underreported
- Low knowledge about dementia
- Lack of disaggregated data

Cognitive Testing for Filipino Americans

Created/normed in the Philippines	Validated and/or translated Western-based
De-Westernized Dementia Screening Scale (DDSS)	Montreal Cognitive Assessment – Filipino (MoCA-P)
Neuropsychological Assessment for MCI (NAMCI)	Mini Mental Status Exam – Filipino version (MMSE-P)
Manila Motor-Perceptual Screening Test (MMPS)	Filipino Norming Project (FNP) Alzheimer’s Disease Assessment Scale – Cognitive (ADAS-Cog) Uniform Dataset Alzheimer’s Disease Center (UDS-ADC)
	Filipino Geriatric Depression Scale short-form
	Bilingual Aphasia Test (BAT)

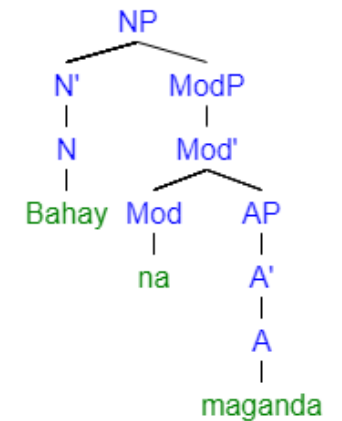
Cognitive Testing for Filipino Americans

- *Some* normative data and (adapted) tests for Tagalog speakers in the Philippines



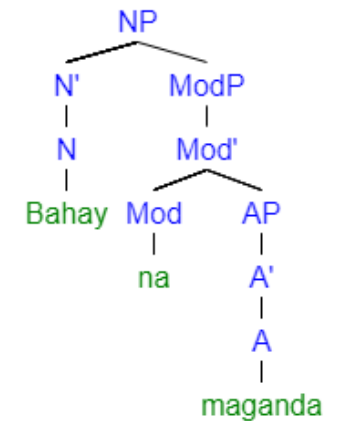
Cognitive Testing for Filipino Americans

- *Some* normative data and (adapted) tests for Tagalog speakers in the Philippines
- Translated/adapted tasks can be culturally or linguistically unsuitable
 - Syntax - differences between English grammar and Tagalog grammar
 - MMSE-P, but some items not for Filipinos living in US



Cognitive Testing for Filipino Americans

- Some normative data and (adapted) tests for Tagalog speakers in the Philippines
- Translated/adapted tasks can be culturally or linguistically unsuitable
 - Syntax - differences between English grammar and Tagalog grammar
 - MMSE-P, but some items not for Filipinos living in US
- No studies to date have validated measures for ADRD in Filipino Americans
 - **MAJOR BARRIER TO HEALTH CARE**



Cognitive Testing for Filipino Americans

Brain Health & Language Study



Do the languages you speak impact brain health?


Help UCSF researchers find out.
Your information is kept private.

What will participants be asked to do?
You will be asked to do tests that measure memory, thinking, speech, and language. For more information, please visit deLeonLab.ucsf.edu.

Who can join?
You can take part if you are between ages 45- 90.

Earn up to \$400.

Brain Health & Language Study



Nahihirapan ba kayo o isa sa mahal ninyo sa paaalala?

Tulungan niyo ang UCSF malaman.
Ang iyong impormasyon ay pinananatiling pribado.

Ano ang hihilingin sa aking gawin ko?
Hihilingin sa iyo na gumawa ng mga iksamen sa memorya, pag-iisip, pagsasalita, at wika.

Sino ang maaaring sumali?
Maaari kang sumali kung ikaw ay nasa edad 45 – 90.
Maaari kang makatanggap ng hanggang \$400.

For more information, please visit deLeonLab.ucsf.edu.

Cognitive Testing for Filipino Americans

alzheimer's
association

Alzheimer's & Dementia

Translational Research & Clinical Interventions

RESEARCH ARTICLE |  Open Access |   

The development of the Cognitive Assessment for Tagalog Speakers (CATS): A culturally and linguistically tailored test battery for Filipino Americans

Jessica de Leon , Ivan Bondoc, Eugenie Mamuyac, Lainie Posecion, Eduardo Europa, Lolita C. Kintanar, Niecholle Roco, Mikkael Lamoca, Danielle P. Escueta, Van M. Ta Park

First published: 01 September 2023 | <https://doi.org/10.1002/trc2.12418>

Language considerations for cognitive assessments



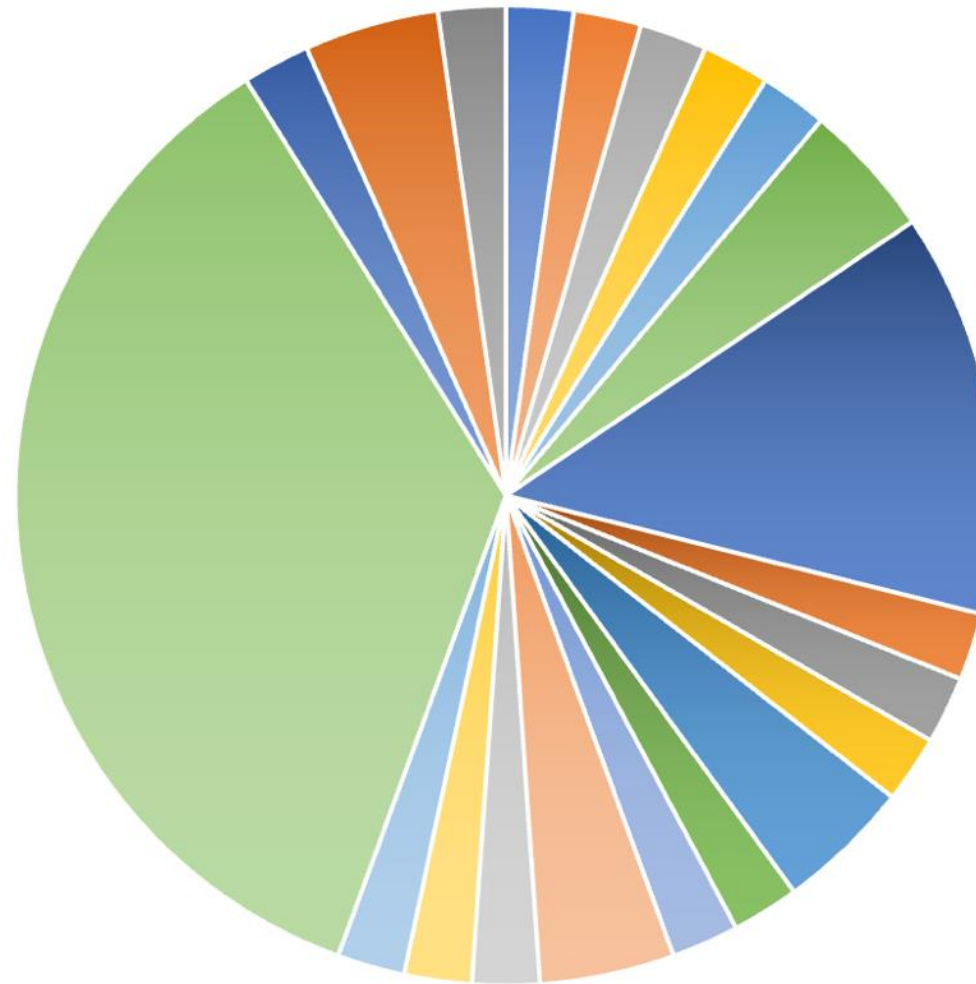
Language considerations for cognitive assessments

- High levels of bilingualism
 - But 20% are not English proficient
 - Tagalog not always L1
- Code-switching and Taglish
- Consider accepting responses in Tagalog, English, or Spanish
- Effects of education, bilingualism, immigration, culture, and acculturation/enculturation on testing
- No gender in Tagalog language



Language considerations for cognitive assessments

- 42 Tagalog/English bilingual Filipino Americans
- English acquisition: 3.6 years
- Number of languages: 3.3
- Most living in US for 20+ years
- Self-rated English proficiency: 5.6 out of 6 (range 3-6)



- Aklanon
- Arabic
- Bahasa
- Bikol
- Bisaya
- Cebuano
- French
- Fulanese
- German
- Hiligaynon
- Ilocano
- Ilonggo
- Japanese
- Kapampangan
- Mandarin
- Nippongo
- Russian
- Spanish
- Vietnamese
- Waray
- Ybanag

MMSE-P (Philippines)

Allow English, Spanish, or Tagalog response for the date

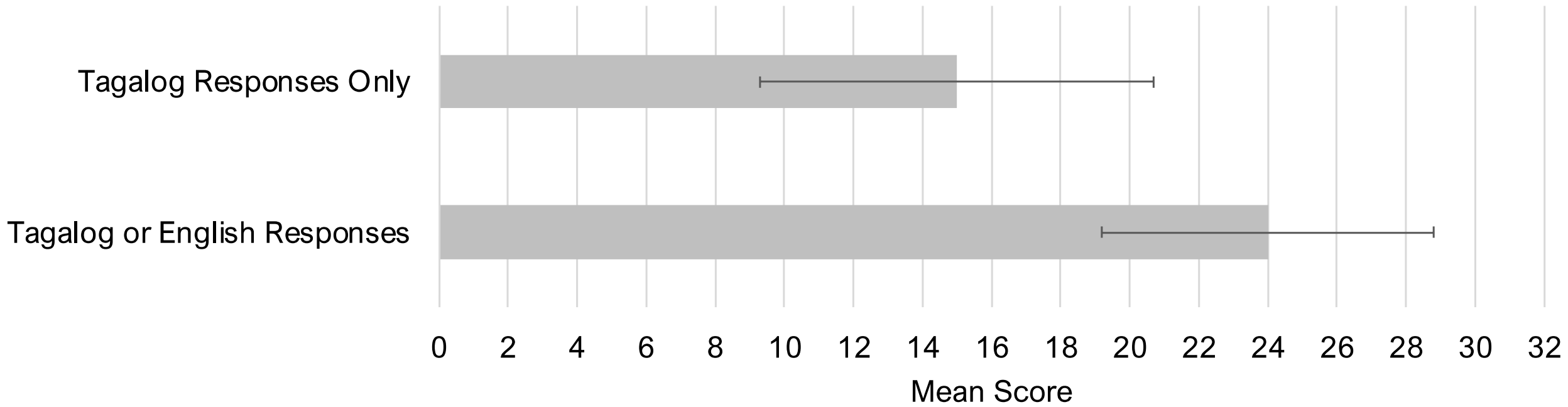
Allow English response for season ("wet" or "dry" in MMSE-P)

Replaced street / *barangay* and country with county and state

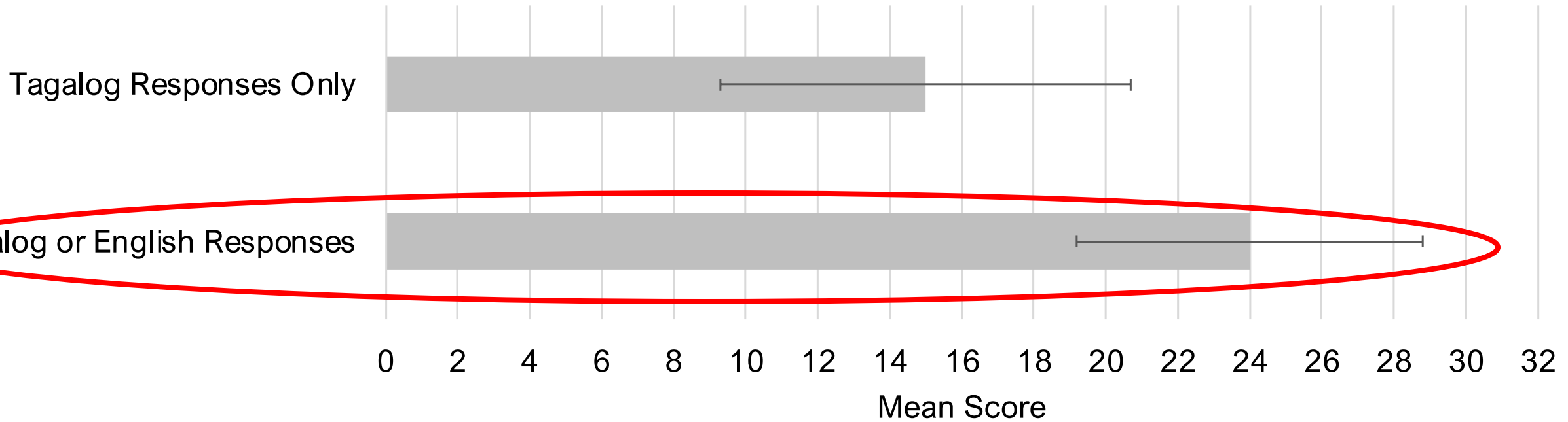


"August ninth, twenty twenty-two; agosto nueve, agosto siyam, dalawang libo bente dos"

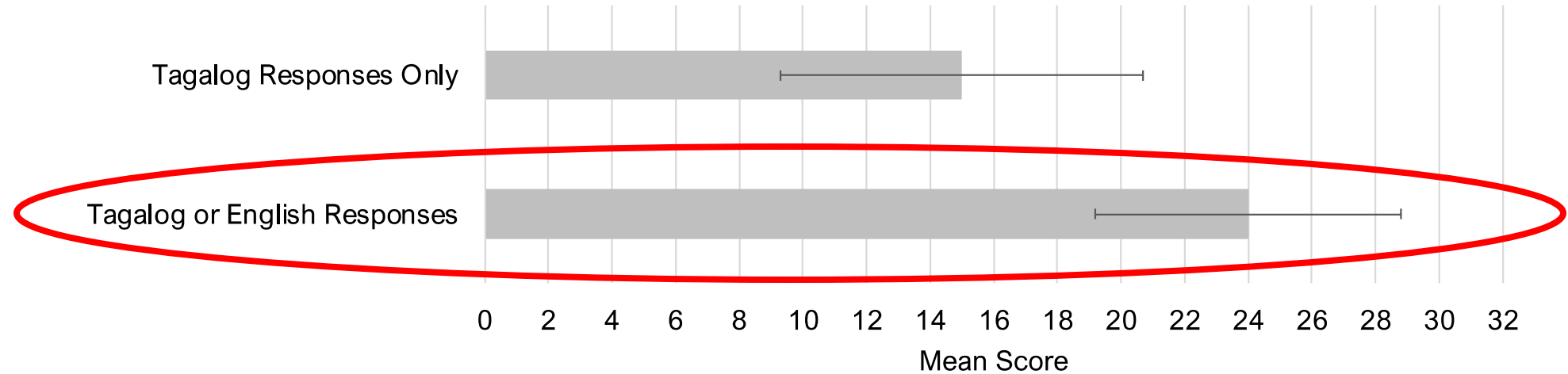
Multilingual Naming Test (MINT) (n=15)



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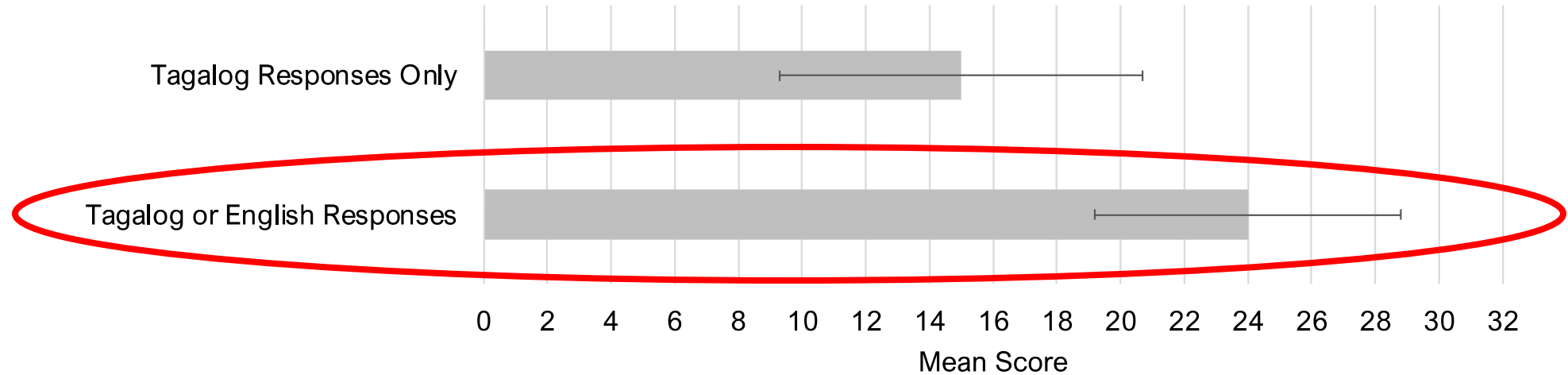
Multilingual Naming Test (MINT) (n=15)



Many cognates

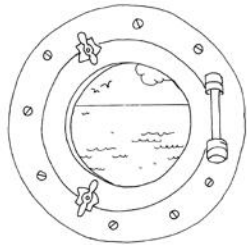
- 7 English cognates
- 14 Spanish cognates

Multilingual Naming Test (MINT) (n=15)

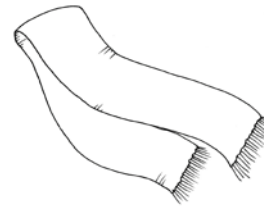


Many cognates

- 7 English cognates
- 14 Spanish cognates



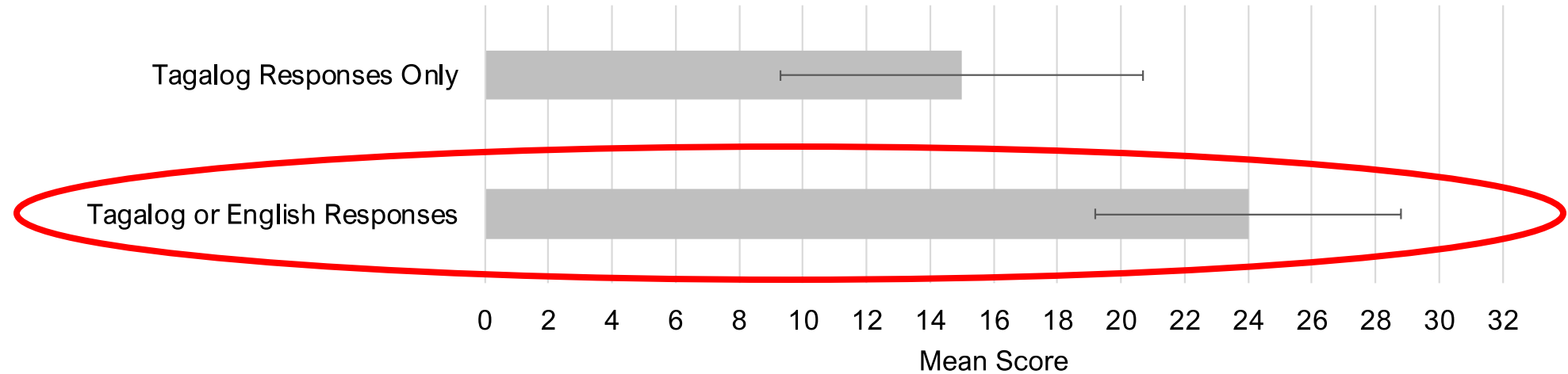
*"I have never encountered
this word in Tagalog"
(porthole)*



*"I have never seen this
in the Philippines"
(scarf)*

*"This is so
American"*

Multilingual Naming Test (MINT) (n=15)



Important to ask if:

Name in either English or Tagalog?

Familiar with the item?

Phonemic cues may not be helpful

Respecting how people feel about their languages

Importance of language-based norms

	Bilingual Tagalog	Bilingual English	Monolingual English	P-value
MMSE	27.2 +/- 2.5	27.7 +/- 2.1		
Letter fluency (B words / D words)	13.8 +/- 5.6	15.1 +/- 5.2	16.3 +/- 4.5	0.34
Animal fluency	12.7 +/- 6.1	19.1 +/- 5.3	23.5 +/- 5.0	0.002*
Digits forward	4.7 +/- 1.3	6.2 +/- 1.1	7.5 +/- 1.0	<.0001*
Digits backward	4.3 +/- 1.5	5.1 +/- 1.1	5.8 +/- 1.2	0.02*
MINT	15.1 +/- 5.4	27.0 +/- 3.7	30.5 +/- 1.8	<.0001*
Stroop Color Naming	54.5 +/- 11.0	68.5 +/- 14.5	91.3 +/- 13.4	<.0001*
Stroop Interference	40.4 +/- 13.2	47.1 +/- 11.2	51.9 +/- 10.6	0.09
Rey figure copy	15.9 +/- 1.3	16.2 +/- 0.7	15.5 +/- 1.1	0.01*
Rey figure recall	11.5 +/- 3.7	12.2 +/- 2.2	11.5 +/- 2.8	0.31
VOSP	8.6 +/- 2.1	8.5 +/- 1.6	9.0 +/- 1.2	0.19
CVLT SF 10 min	4.5 +/- 1.9		7.8 +/- 1.4	

Same individuals

Differences in performance depending on language of testing

Importance of language-based norms

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Same tasks

Differences in performance depending on bilingual status

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Don't use F words when testing in either language

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Insects should probably be scored as correct

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Related to #syllables/word in Tagalog?

Use different languages for different contexts (e.g. time, date, shopping)

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Interference from other language?

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Cultural differences?

Best practices for cognitive testing in bilingual speakers



Best practices for cognitive testing in bilingual speakers

L1 influences L2, but L2 also influences L1

Best practices for cognitive testing in bilingual speakers

L1 influences L2, but L2 also influences L1

Bilingual disadvantages

- Picture naming: even in dominant language
 - Balanced bilinguals name fewer than unbalanced bilinguals
- Verbal fluency
- Tasks that increase interference between languages (production in the less dominant language)

Best practices for cognitive testing in bilingual speakers

Evaluation in both languages preferred

- But lack of standardized tests

Best practices for cognitive testing in bilingual speakers

Evaluation in both languages preferred

- But lack of standardized tests

Determine language proficiency/dominance

- Subjective info/self-rating is probably OK, but:
 - Individuals immersed in L2 tend to underestimate L2 abilities
 - Older bilinguals tend to underestimate their own proficiency levels in both languages

Best practices for cognitive testing in bilingual speakers

Evaluation in both languages preferred

- But lack of standardized tests

Determine language proficiency/dominance

- Subjective info/self-rating is probably OK, but:
 - Individuals immersed in L2 tend to underestimate L2 abilities
 - Older bilinguals tend to underestimate their own proficiency levels in both languages
 - Best practice: professionally trained bilingual, sociolinguistically competent neuropsychologist or refer out
- Backup: professional interpreters

Notes on bilingualism of the examiner

- Verify examiner's proficiency
 - Could they enroll in a college graduate program in that language?
 - ACTFL proficiency guidelines
- Could still collect factual info (e.g., interview and history)
- Sociocultural competency is just as important

Best practices for cognitive testing in bilingual speakers



Repeat testing in one year



Patterns on testing (e.g. memory vs frontal/executive tasks)



Imaging and other diagnostic tools



Ask about ADLs/IADLs, changes in everyday life

Summary: Language considerations for cognitive assessments

- Cognitive testing scores are influenced by language(s)
- Bilingualism affects testing in both languages
- Best to evaluate in both languages and with sociolinguistically competent neuropsychologist
- If not possible-> get a good history, look for patterns on testing, use other diagnostic tools, consider repeat testing

Cultural considerations for cognitive assessments



Core Filipino cultural values and clinic

Core value	Definition	Intersection with clinic
Kapwa	Togetherness, the other person is also yourself, treat others as equal fellow human beings	Others' needs (especially family) come first, family as caregivers/ involved in decisions
Pakikisama	Conformity with, deference to the majority, prioritize smooth interpersonal relationships	Non-confrontational, will not correct or interject
Pakikiramdam	Sense feelings/needs of others, more than sympathy or empathy, put others before yourself	Conversations about personal mood and feelings
Utang na loob	Norm of reciprocity, return favors	Caregiving- will be paying back/ supporting parents for their lifetimes
Hiya	"shame"?, sense of propriety, social norms	Minimize symptoms, stigma of dementia
Lakas ng loob	Endurance, bearing hardships, faith-based country	Resilience, courage in the midst of problems and uncertainties

Colonial mentality / Internalized oppression

The perception of ethnic and cultural inferiority
A form of internalized racial oppression



Colonial mentality / Internalized oppression

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Preference to use English

- List as primary language in Apex
- Decline use of a translator



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May find it unusual to be tested in Tagalog

- Explanation for why they are testing in Tagalog?



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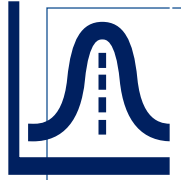
May find it unusual to be tested in Tagalog

- Explanation for why they are testing in Tagalog?

Preference/deference to "American" providers



Filipinos and dementia beliefs



Memory loss is
“normal aging”



Burden to others



Bahala na, God's
will



Stigma



Hope for the
future



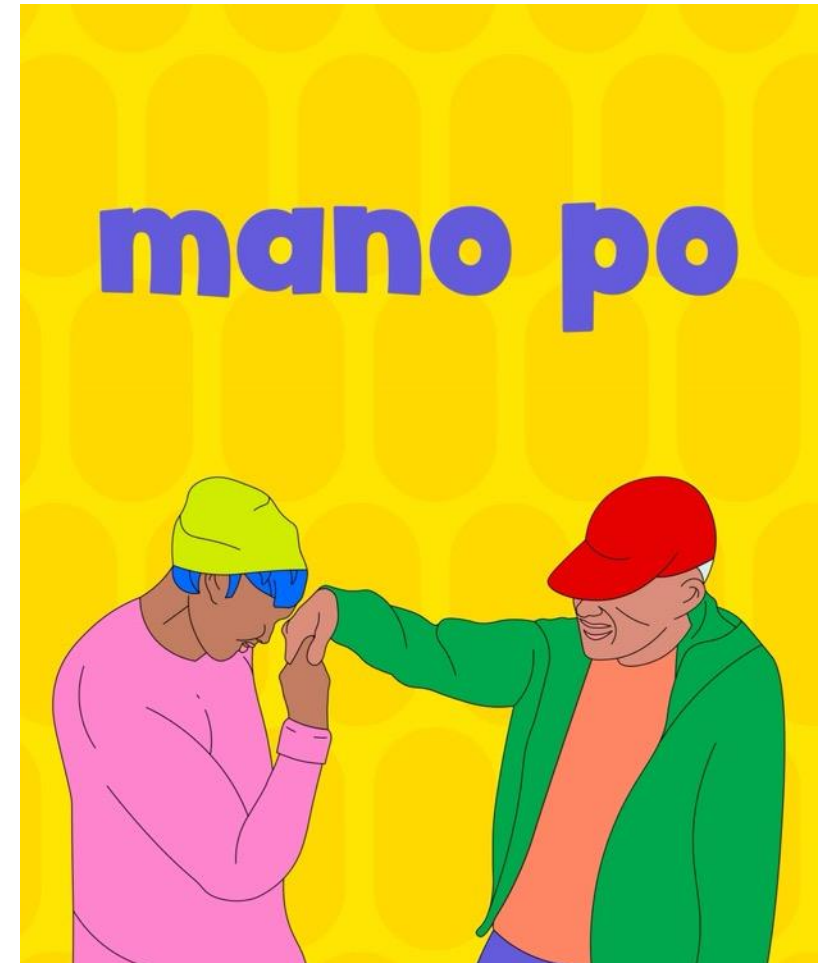
Resilience and
strength



Word choice

Clinical considerations for clinic

- Hospitality



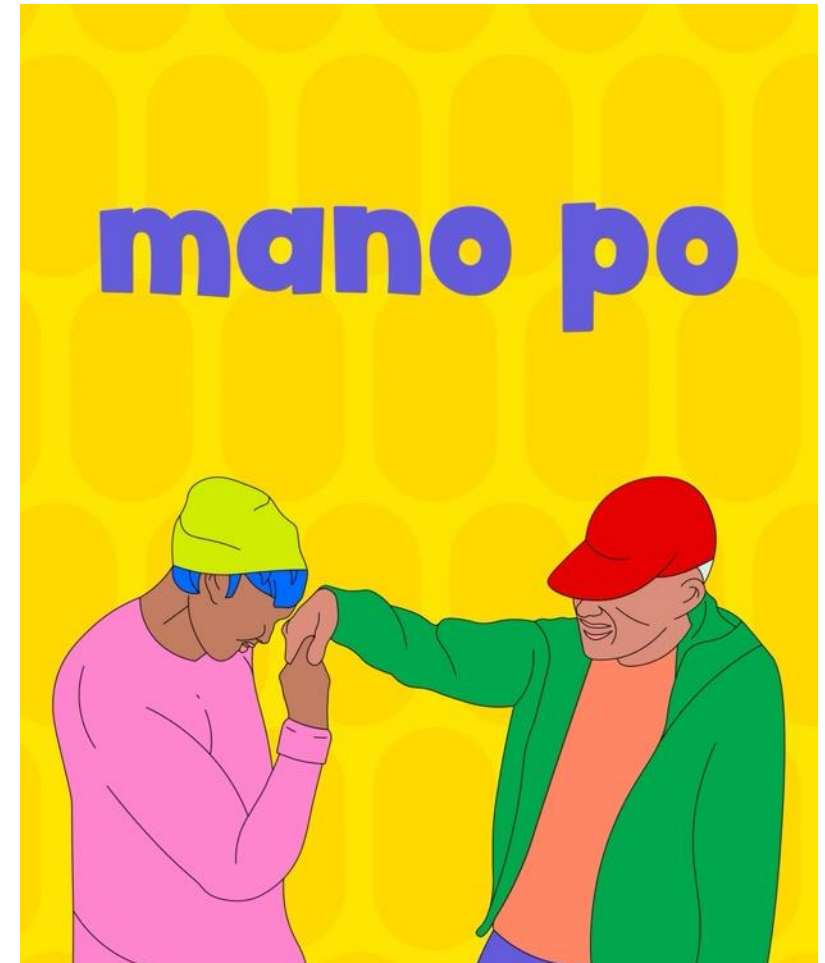
Clinical considerations for clinic

- Hospitality
- Be respectful
 - Requests to elders
 - Tagalog has “honorifics”



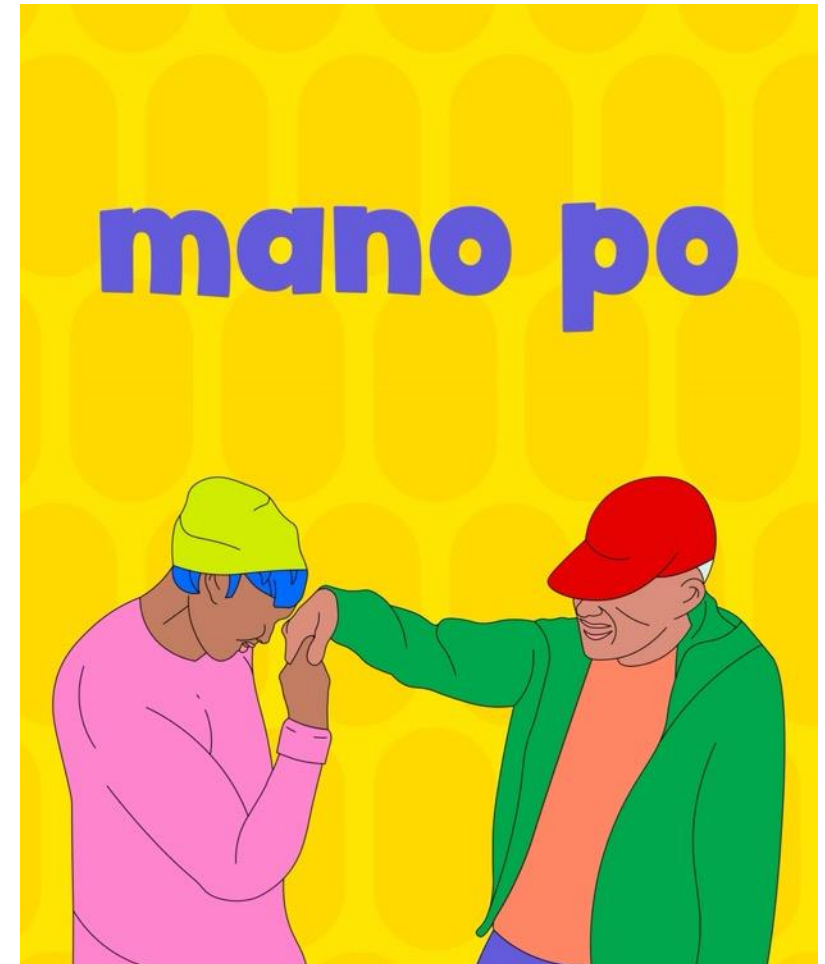
Clinical considerations for clinic

- Hospitality
- Be respectful
 - Requests to elders
 - Tagalog has “honorifics”
- Non-verbal cues
 - Won't voice discomfort
 - Tone of voice, facial expressions, body language
 - Very polite ways of saying no
 - e.g., “we will think about it,” “we shall see”



Clinical considerations for clinic

- Hospitality
- Be respectful
 - Requests to elders
 - Tagalog has “honorifics”
- Non-verbal cues
 - Won't voice discomfort
 - Tone of voice, facial expressions, body language
 - Very polite ways of saying no
 - e.g., “we will think about it,” “we shall see”
- Filipinos may be reserved/formal with strangers



Summary: Cultural considerations for cognitive assessments

- Cultural values may influence clinic interactions
- Colonial mentality may affect care
- Filipino values can shape dementia beliefs
- Ways to show cultural humility in clinic

Case study

Mrs. Cortez is a 60yo Filipina American. She moved to the US with her family at age 18 from Iloilo, Philippines. She grew up speaking Ilongo, a Filipino language. In grammar school in the Philippines, she was taught Tagalog and English. In the US, she earned an associate's degree in health science, her highest level of education. She works as a caregiver at a nursing home. She never drives and always relies on family for transportation.

Mrs. Cortez is presenting with reported word finding difficulties and short-term memory loss. She complains of "high blood" at work. Hypertension is controlled with medication. Neuro exam is normal. Her daughter says that she always made some mistakes when speaking English, such as mixing up pronouns or using the wrong verb tense, but she has always understood her. Mrs. Cortez would often describe common objects or point instead of naming them when giving instructions but maybe it's happening more frequently.

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DISCUSSION QUESTIONS

- Should you use an interpreter? If so, which language?
- What factors are important to consider when interpreting her testing results?
- What factors should you document in your note?
- What is the "high blood" that Mrs. Cortez describes?

Summary

- Many Filipino / Filipino Americans in the US
- High incidence of dementia
- Language considerations for cognitive assessments
 - Lack of appropriate, normed cognitive tasks for Filipinos in the US
 - Bilingualism affects testing performance
- Cultural considerations for cognitive assessments
 - Cultural values affect clinic interactions and dementia beliefs
 - Cultural humility in clinic

Maraming salamat po!

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Have more questions? Get answers through our
Warmline @ **1-800-933-1789** or our [support page!](#)



Here are some examples!

What do I prioritize if my patient tests positive for cognitive impairment?

What medications should I avoid if my patient has cognitive complaints?

What cognitive assessment should I use for a Spanish speaking patient experiencing homelessness?

Open your phone camera and scan the QR code to submit questions:



Or visit: www.dementiacareaware.org

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