

## **Advance Directives Completion among Asian American Church Communities**

Angela Sun, PhD, MPH; Quynh Bui, MD, MPH; Janice Y. Tsoh, PhD; Tung T. Nguyen, MD; Stephen McPhee, MD; Virginia Gildengorin, PhD; Ky Lai, MD, MPH; Joyce Cheng, MS; Joanne Chan, BA

**Background and Purpose:** Asian Americans have low rates of advance directive (AD) completion. Few studies have examined Asian Americans' experiences with AD. This study used a single group pre-post intervention design to pilot test the efficacy of a church-based intervention to increase AD completion among Chinese and Vietnamese Americans. **Methods:** Participants who had not completed an AD were recruited from 4 churches. All participants received 2 group sessions over a 1 month period that provided culturally and spiritually tailored education on ADs and guided support on how to complete an AD. All sessions were conducted at the participants' churches in Chinese or Vietnamese. **Results:** A total of 174 participants (Chinese n=100; Vietnamese n=74) were enrolled; 85% (n=147) attended both sessions and completed pre- and post-intervention surveys. Participants' mean age was 63.7 years; 88% were foreign-born; 70% read English less than "well"; and 50% had annual household income <\$25,000. Compared to pre-intervention, there were marked increases ( $p<0.001$ ) in:(1) Awareness of AD (Chinese:25.0%pre to 88.3% post; Vietnamese: 21.6% pre to 90.0%% post);(2) In-depth or casual conversations with a healthcare proxy regarding their wishes for medical care (Chinese:10.3% to 55.4%;Vietnamese:25.4% to 73.2%); (3)Completion of AD (Chinese:5.4% pre to 84.4% post;Vietnamese:20% pre to 74.3% post). About one-quarter had given their AD to a healthcare proxy (Chinese: 27.0%; Vietnamese: 32.1%) and/or to a physician (Chinese: 28.6%; Vietnamese: 31.7%). **Conclusion:** Churches are promising venues for promoting AD awareness and increasing AD completion among Asian Americans.