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Exploring a Sense of Place Among Vietnamese American Elders

Giang and Lam

Abstract

Sense of place is the sense of belonging to an individual's community through social, economic, and residential means. For Vietnamese American elders (VAEs) developing a sense of place did not come easy. To overcome racial, linguistic, and cultural barriers they built their ethnic enclaves and created their communities that tread the line between assimilation and embracing their heritage and culture. This study was collected from years of continuous interaction with VAEs living in an urban city with a high concentration of Vietnamese. The literature reviewed was based on Asian, South East Asian, and/or Vietnamese attachment to place and sense of place. Using autoethnography, this article explores key factors that contribute to a VAE's sense of place and what is their outlook on developing a sense of place in America. Field notes were organized in recognition of specific themes that related to attitudes towards aging, creating a sense of place, and attitudes toward death. Common topics that were analyzed were loss of functional role, loss of social role, isolation, feeling out of place and displacement, home, connections with community, understanding of services, connection with the next generation, fear, preparation, and feeling complete. Key findings are on VAEs perceptions of their sense of place.

Introduction

Vietnamese Americans are the fourth largest Asian ethnicity after Chinese, Filipino, and Indian respectively (U.S. Census Bureau, 2017). The 2017 U.S. Census Bureau American Community Survey estimates 1,826,998 Vietnamese Americans are living in the United States. Vietnamese American elders (VAEs) are considered 65 years old and above and represent 12.3% of the Vietnamese American population, approximately 224,720 individuals (U.S. Census Bureau, 2017). These first-generation refugees helped create Vietnamese-American ethnic enclaves and developed their unique sense of place (SOP). Ethnic

enclaves are an important aspect of the immigrant experience (Zhou, 1992; Gold, 1992; Abrahamson, 1996). To have a SOP Vietnamese American refugees had to assimilate into American culture.

Initial barriers that first-generation Vietnamese refugees faced in the late '70s and early '80s were language barriers, employment, mental health, and familial issues (Nguyen & Henkin, 1984; Weider, 1996). The psychological trauma of coming from an oppressive war-torn country had effects on assimilation for many immigrants. Posttraumatic stress disorder and other mental health issues that arise from the traumas of losing everything lead to many refugees having issues assimilating more rapidly (Nguyen & Henkin, 1984; Weider, 1996). Many immigrants lost friends, families, their homes, and all that they hold dear to come to the United States. When these refugees arrived, they faced a different language that was difficult to pronounce and comprehend (Weider, 1996). Ngo, Tran, Gibbons, & Oliver (2001) express that English language proficiency has a direct relationship with levels of depression. The Vietnamese refugees that communicated with friends in English showed lower signs of traumatic depression (Ngo et al., 2001; Birman & Tran, 2008). Without the necessary language skills, many Vietnamese refugees had difficulty finding adequate employment (Weider, 1996). That many first-generation Vietnamese refugees were separated from their families through immigration and/or from the dire outcomes of warfare added to the trauma of loss.

For first-generation Vietnamese refugees' assimilation into American culture did not come easy. Refugees from South East Asia, which included the Vietnamese, were dispersed to various locations throughout the United States according to federal government guidelines at that time (Henslin, 1996). This dispersion of Vietnamese refugees prevented ethnic enclaves from forming, which would have reinforced their cultural values (Matsuoka, 1990). The first-generation Vietnamese refugees faced the task of assimilating to a different country with its own culture and customs, religion, and language (Nguyen & Henkin,

Jason Giang, MSW, is at Mental Health America of Los Angeles Brian Lam, PhD, is a Professor at California State University, Long Beach 1984; Weider, 1996). Refugees escaping the traumas of their homeland found new traumas in the form of racism, marginalization, and stigmatization as they struggled to assimilate (Lewis, 2001). Asian minorities realized that no matter how much they assimilated or how well they spoke English their physical appearance will always set them apart (Liu, 2015). Creating their communities was a challenge. However, these firstgeneration Vietnamese refugees persisted and managed to create their own ethnic enclaves in many major metropolitan areas such as San Jose, Houston, and Los Angeles. Ethnic enclaves are popular locations for new incoming immigrants with immigrant-owned businesses and immigrantfriendly places of employment that would not otherwise be available in other places of the country (Teranishi, 2004). Similar to other ethnicities who immigrated to the United States, Vietnamese Americans developed unique ethnic enclaves to create a sense of community and reflect their cultural heritage (Aguilar-San Juan, 2005; Mazumdar, Mazumdar, Docuyanan, & McLaughlin, 2000; Loo, 1991; Abrahamson, 1996).

While some Vietnamese Americans integrated into the existing Chinatowns, others wanted a community that was distinctly their own (Mazumdar et al., 2000). These early refugees wanted a place that embodied the culture of Vietnam that they lost when they had to flee their beloved homelands. The architecture, social life, religion, and ceremonial events in these communities were going to being distinctly Vietnamese (Mazumdar et al., 2000, Aguilar-San Juan, 2005). While the Vietnamese and Chinese have many similar customs, "Little Saigons" have a distinct Vietnamese flare, a Vietnamese American SOP (Aguilar-San Juan, 2005). Daily life and interaction such as going to the coffee shop to chat with other elders and adults is a Vietnamese custom (Aguilar-San Juan, 2005). This SOP changes when the first-generation Vietnamese refugee have become elders within their community. Aguilar-San Juan (2005) reveals that VAEs use these enclaves as a place for interaction to express their own identity while showing they belong. For these reasons, Vietnamese Americans were successful in becoming Americanized while staying Vietnamese (Aguilar-San Juan, 2005).

Literature Review

Continuity of Aging and Aging in Place

As first-generation Vietnamese refugees from the 1970s and 1980s age and are now considered as elders within their communities they play very different roles within the family and community itself. According to Atchley (1989), continuity of aging theory postulates that as individuals naturally age, they attempt to maintain a semblance of the activities they participated in during the course of their lives. Continuity of aging theory does not attempt to determine what is the ideal amount of social interaction but gives more credence to the relationship between behaviors and how it psychologically affects the individual (Nimrod & Kleiber, 2007). People's attitudes, opinions, personalities, preferences, and behaviors will typically remain stable during their life course (Nimrod & Kleiber, 2007). Through activities, individuals develop a stable pattern that they carry on as they age (Nimrod & Kleiber, 2007). However, the level of interaction with the community decreases with age (Wanka, 2018).

In the case of VAEs, many elders attempt to keep linkages to their communities by interacting amongst themselves in places such as coffee shops, but they play a less active role in their communities. First-generation Vietnamese American refugees' experiences with aging are much different than elders that have not experienced international-migration (Lewis, 2009). The systems and infrastructures created were suitable for native-born elders and not elders who have gone through immigration channels (Lewis, 2009).

When individuals "age in place" they stay put and age within their environment. Greenfield (2016) states that older adults like to age in place and live independently in their community as opposed to assisted living. Aging in place provides a level of comfort for people who grow older. Having built bonds to the sights and the people around them, naturally, elders would like to keep connected to those bonds (Greenfield, 2016). Maintaining independence and autonomy (Silverstone & Horowitz, 1992), living in a preferred location (Cutchin, 2003), and having an attachment to certain places (Rubinstein, 1998) are all components of aging in place. Ujang (2016) states that physical environments influence the social interactions within that environment. It is desirable to live in a community that more

closely resembles one's former homeland or new SOP to help foster more social interaction (Ujang & Zakariya, 2018). Elders who continue to engage in previous social activities in their community express more positive well-being (Banting, Sharpe, & St-Hilaire, 2001). Many VAEs want to continue to age within their ethnic enclaves. These elders want to keep their SOP they have developed over their lifetime.

Living independently provides elders with more freedom and independence that they seek as they age; however, living independently does come with challenges. For example, as elders age access to transportation may be problematic and other needs arise. Due to depression, the need for human contact may increase when elders age (Cheng, Fung, & Chan, 2008; Chui, 2008). When living independently elders do not have the financial and emotional support of family (Ha, 2008). For Southeast Asians, it is customary for children to support and live with parents and grandparents (Knodel, Chayovan, Graisurapong, & Suraratdecha, 2000). Vietnamese American families value independence as well but also value their elders and have obligations to care for their parents (Pyke, 2000). There is a sense of moral duty and obligation to support one's kin through residence and finances (Lewis, 2009). This type of familial caretaking is cultural and influences an elder's SOP; the elder may or may not feel a stronger sense of belonging based on how much attention their families give them. Ye and Chen (2014) state there is a positive association with well-being and living with children, and elders who live with their children tend to be in better mental health. Another challenge of aging in place is that it requires adequate healthcare if elders are not living in residential or assisted living.

Healthcare access grows more important as elders age and even more important when elders age in place. Trang (2008) reveals that all elders feel that healthcare is the most important and most desired issue they face. Serving the Vietnamese American community is uniquely challenging due to linguistic and cultural issues and the need for government-community agencies to gain the trust of VAEs (Trang, 2008). Language comprehension is paramount when dealing with healthcare providers. VAEs, like Chinese Americans, have concerns that range from structural elements of the American healthcare system to difficulty finding transportation, language barri-

ers, and cost (Torsch & Ma, 2000). SOP coincides with healthcare availability. Vietnamese elders have a general trust in the American healthcare system as a whole but routinely prefer Vietnamese American doctors and Vietnamese American agencies. Language barriers are common for many ethnic communities across the nation, and Vietnamese American communities struggle with similar issues (Truong, 2019). Having family members translate is not preferable due to privacy concerns (Torsch & Ma, 2000); conversely, some VAEs may feel shame using public services because it is the children's "duty" to help their parents (Trang, 2008). Truong (2019) states that even in Little Saigon in the Los Angeles metropolitan area, the largest diaspora of Vietnamese Americans in the United States, VAEs have trouble finding healthcare clinics that meet their language needs. A contributing factor is that VAEs believe that younger generations of Vietnamese Americans are seemingly losing their ability to fluently speak Vietnamese (Lam, 2015).

Sense of Place and Place Attachment

SOP is a theory that postulates that individuals will develop characteristics of their surroundings to make them their own. A combination of architectural elements, cultural events, rituals, and social and commercial interactions create a community's identity and a person's SOP (Mazumdar et al., 2000). Predictors of SOP include income, age, length of residence in the neighborhood, and city of residence (Gallina & Williams, 2015). SOP is related to place attachment, sense of community, community satisfaction, and place identity (Gallina & Williams, 2015). Vietnamese American refugees have developed their own SOP over the decades of living in America through the establishment of ethnic enclaves. Vietnamese Americans assimilated in the United States but remain closely tied to their cultural roots and ethnic self-identity through participation in coethnic activities and interactions with coethnic communities and mainstream society (Phinney, 2003). Cultural identities are expressed through ethnic festivals, and the items sold in stores create their own atmosphere (Ujang & Zakariya, 2018). Traditional foods and community events are ways to optimize interactions within the community (Lewis, 2009). While VAEs have developed a SOP in America, they have lower evaluations when it comes to SOP compared to native-born

counterparts (Gallina & Williams, 2015). This is largely due to the fact that VAEs are still connected to their homelands and face many different layers of intersectional marginalization in the United States such as language, racism, and classism.

VAEs, like many South East Asian elders, must face the challenge of being raised in cultures that value family units and community compared to their children and grandchildren who are raised in a society that values individualism (Lewis, 2009). Cultural differences created difficulty in the assimilation of Vietnamese Americans refugees. These same cultural differences also created challenges when creating a SOP for VAEs. Immigrant families try to balance their desires to stay traditional and maintain their cultural values while assimilating socially, economically, and culturally (Lewis, 2009).

SOP entails a sense of belonging. To invoke a sense of belonging an individual should be comfortable in their environment. Place identity is an individual's thoughts about their surroundings (Mazumdar, et al., 2000). Self-esteem and selfefficacy contribute to the development of a person's place identity (Mazumdar et al., 2000). Expanding on an individual's place identity and developing a SOP takes a connection and bond to one's environment. One's particular environment, both their household and their community, reflects on their understanding of who they are as an individual and a group (Brown & Perkins, 1992). Reflective of one's environment and community is the architecture of that environment. The architecture of ethnic enclaves serves as an agent of communication for social and cultural groups (Mazumdar et al., 2000). Vietnamese -American communities have developed distinctive Vietnamese architecture to remind them of the past and their Asian heritage (Mazumdar et al., 2000). These aspects of place identity are a part of VAEs' sense of belonging, and memories of the past are engrained in new landscapes.

Social life is an important aspect for VAEs. The people, cultural/religious events, holidays, shops, and interactions cumulatively are an aspect of ethnic identity and community (Mazumdar et al., 2000). VAEs, who may have poor comprehension of the English language, can remain in their ethnic enclaves and interact with other elders. Local Vietnamese language newspapers are easily accessible where elders can read about

Vietnam and their community (Mazumdar et al. 2000). Vietnamese coffee shops where men come to gather and converse are a staple of the Vietnamese American community which is reminiscent of life in Vietnam (Mazumdar et al, 2000). Such coffee shops thrive in Vietnamese American communities but would not function in the same way if they were in a different ethnic community (Mazumdar et al., 2000). VAEs also coalesce at community senior centers where they can take English language classes, converse with other elders, play mahjongg, smoke water pipes, and read the newspaper (Mazumdar et al., 2000).

Place attachment is a bond that a person creates with their surroundings; they become attached to places that have economic, social, and cultural significance and memories to their daily lives (Ujang & Zakariya, 2018). To reinforce their SOP and place attachment as they age, VAEs prefer that their kin and relatives purchase homes near each other for easy access. Lewis' (2009) findings state that families will attempt to purchase adjacent and nearby homes to form a familial housing community within their own ethnic community. As VAEs age they become more attached to their SOP, as memories have been created in their communities. These elders also want to keep bonds strong with their family since family connections are important values in Vietnamese culture.

Place attachment is one of the key reasons why elders like to age in place (Davey, 2006; Davies & James, 2011). There is a positive correlation between place attachment and health and wellness for elderly individuals (Wiles et al., 2017). For elderly individuals place attachment and SOP coincide with health and well-being (Cutchin, 2003). Having a location where they feel a connection is important. Cutchin (2003) expresses that place attachment is not simply the motivation but how people adapt and change themselves to their environments. As VAEs age their communities change. During times of urban growth, there are significant community changes that affect an individuals' place attachment (von Wirth, Grêt-Regamey, Moser & Stauffacher, 2016). In the past Vietnamese refugees adapted to their new homes and created ethnic enclaves. As time progresses and new generations adapt and assimilate to life in Western society elders must adapt to their changing environment as well. Communities become more important when people age

(Gilleard, Hyde, & Higgs, 2007). The impact of aging on SOP and placement is profound for rich or poor communities respectively (Gilleard et al., 2007).

Diversity is of the utmost importance when taking place attachment and SOP into account. Gitlin (2003) recognizes that there is not enough credence paid towards diversity in attachment theory, and vulnerable groups and those living in undesirable neighborhoods have greater challenges developing a SOP. Lewicka (2011), reveals that socio-economic and racial diversity in communities is attributed to lower levels of place attachment. There is a negative relationship between trust in neighbors and diversity (Lewicka, 2011). A community with many highly attached people will foster more community collaboration for the desired outcome (Brown, Reed, & Harris, 2002). Attachment to place plays a role in how individuals interpret changes with their community (Anton & Lawrence, 2016). For Vietnamese refugees coming from a war-torn oppressive country to the United States brought them new opportunities. A psychological need that promotes and invokes change is created after many individuals witness a need for adaption in their community (Clarke, Murphy, & Lorenzoni, 2018). Motivated individuals came together to form ethnic enclaves that have grown into place attachment and SOP.

Methodology

Autoethnography can be used to examine researchers' personal experiences to better understand a collective cultural experience (Ellis, Adams, & Bochner, 2011). Researchers explored VAEs' culture, needs, perspective, and sense of place through utilizing an autoethnography modality because observing researchers allow the participants of the research study to dictate the themes arising from their SOP. Autoethnography allowed for critical analysis and self-reflection on the data that was collected from observation. No direct interview questions or surveys were given to participants, but rather the researcher observed what the participants said and kept detailed notes. Rapport has been built for this population and their community for over 19 years of professional interactions with the community. Within the context of autoethnography, the researchers' longterm interactions with this community are being

explored with an emphasis on self-reflection via journal notes. This autoethnographic study involves a critical examination of the experience of the authors' interaction and connection with their culture. Autoethnography utilizes constant analysis to uncover trends, issues, themes, and patterns within the population as they unfold (Bernard, 1995). As the themes and patterns unfolded with VAEs the researchers noted common issues that arose during clinical sessions.

Field notes were organized in recognition of specific themes that related to attitudes towards aging, the creation of a SOP, and attitudes towards death. Both authors would share their experiences and then analyzed field notes to come up with common topics discussed with VAEs. The common topics that were analyzed were loss of functional roles, loss of social roles, isolation, feelings of being out of place and displacement, their perceptions of home, connections with community, understanding of services, connections to the next generation, their fears, preparation for death, and feelings of being complete.

Goals

The primary goal of this reflection is to establish how creating a SOP for VAEs affects the elders within that community. The complex interweaving social structures, American and Vietnamese cultural values, and self-reflections of VAEs aim to give the reader better insight into the VAEs' experience and how to better serve this aging population of refugees and immigrants, and how they create a SOP as they age in place. Little investigation and empirical research have been conducted on this population, and with the Vietnamese American population burgeoning such critical reflection may prove to be beneficial for Vietnamese American communities to be better tasked at providing assistance to their elders. It is also paramount to consider the historical, political, and social context, as well as their refugee experiences, because their sense of place is a reflection of their unique experiences (Mills, 1959). By conducting this research study, the researchers aim to provide knowledge about the most pressing needs of VAEs as they age. When researchers explored SOP for VAEs it was important to note what themes emerged from our observations.

Themes

Attitude toward aging

With aging comes a decline in daily activities. For example, some Vietnamese elders complained that they were not able to conduct their daily activities. They were irritated about their inability. In addition, some VAEs seem to feel isolated from aging while others have not accepted their aging processes. However, that is not to say all VAEs feel this way. VAEs may prefer to stay in an assisted living community for safety reasons. Researchers encountered several elders who indicated that they appreciated community support such as senior or assisted living homes or adult day healthcare. Coming to accept the fact that they have aged, and 'their inalterability, some have learned to use smartphones to help stay connected. Accepting and moving to adapt is a factor towards aging in place. Healthcare is an important issue for VAEs; many elders lament taking numerous amounts of medication and struggle with the challenges of getting to their numerous doctors' appointments while trying to keep up with their daily activities without the ability to drive. Losing one's functional role is a challenge for elders as they age in place. A common theme for all of these VAEs is adjusting to an ever-changing lifestyle and learning how to adapt.

For VAEs adapting may mean relying on their families and caretakers as well as dealing with isolation. Some VAEs may feel dependent on others but have learned to accept that this is their new reality and thus learn how to be useful once again. Relying on the community can be helpful for VAEs who are dealing with the loss of social roles. They may have their families support them but also do not want to bother them. In my journal notes, a VAE man expressed his pride in having successful children and appreciated their support, while he also expressed sadness from his fear of being a burden to his children. For those that do not have families, this is ever more challenging. In these instances, the community may serve as a surrogate. VAEs may feel isolated at times but often go to places within the community to fill the void. Family, caretakers, and community members are components that help VAEs cope with isolation.

Aging has left some VAEs feeling out of place. This displacement is difficult for VAEs; VAEs do not have a sense of belonging and hope

that moving to an assisted living facility can fill this void. Feeling out of place can lead to stress and unease for these elders. Many elders lived alone in a rented room and felt that they drifted from one place to another. Some elders experienced difficulties in renting rooms to VAEs. Landlords often feared that their health conditions could get worse. This constant displacement has led some VAEs to say they hoped they could go back to Vietnam. Others felt like they could not go back home (Vietnam) and were unsure how long they could last here (United States). Similarly, some VAEs said they could not pass the citizenship test and have to rely on their children. This, in turn, caused a lowered sense of usefulness.

Creation of sense of place

With the loss of social and functional roles creating a new SOP starts at the home. It is common in Vietnamese culture to have an altar to honor and pay respect to one's parents. The burning of incense to those who have lost their lives goes hand in hand with honor and paying respect. Vietnam War-era refugees may decorate their homes with pictures of their youth or items from the war, such as medals, or have little gardens for planting vegetation. For those VAEs who do not reside in assisted living facilities or live with their children, Section 8 vouchers support their housing needs.

SOP also includes the community. Many VAE elders have relocated to Vietnamese ethnic enclaves within urban areas in their old age to be closer to family. Ethnic enclaves meet the needs of many VAEs. VAEs like to gather and play chess and talk with each other. In my journal entries, many elders gathered at coffee shops and chatted about politics in Vietnam and America. At the time, it was often heated due to differing perspectives. VAEs take pride in their ethnic enclave because many of these places remind them of Vietnam. Festivals and holidays like Tet provide the community with live performances and a chance for VAEs to dress up and wear their favorite clothes, including traditional ethnic garb. Local senior centers make VAEs feel appreciated, and local elections make them feel heard. In my journal entry, several VAEs expressed their satisfaction with the Vietnamese ethnic enclave and felt a sense of nostalgia when they vacationed briefly in other places.

Services play an important role in the VAEs'

community. The author observed an 80-year-old VAE participating in English as a Second Language (ESL) classes at a local adult day health care center. VAEs are appreciative of the bilingual staff in the many agencies they utilize in their ethnic enclaves. VAEs learn about services through radio and talking to people in the locales they frequent. Medical professionals such as one's primary care physician are also a common referral source for services.

Connecting with the next generation is important for VAEs. They want to be able to share their experiences so the younger generations can learn about their experiences coming to America. A Vietnam War veteran elder shared with me his experiences as a poet and his work in collecting poems that help the young generation learn more about the Vietnam War and Vietnamese history. Sharing talents and skills leave elders with a sense of accomplishment. Learning how to do a skill again helps keep elders motivated and makes them feel good. For instance, a female elder was excited to recount her experience as a seamstress and her work in making beautiful "ao dai," a traditional Vietnamese gown.

Attitude toward death

A common theme was the lack of fear of dying for VAEs. In my journal entry, many VAEs that I encountered express a sense of life satisfaction. They felt a sense of completeness and trusted in a higher power to take care of them. They offered to pray for leaving this world without suffering or illness. The majority of the elders I encountered made funeral arrangements with their children or loved ones. Some chose cremation. Others insisted that they do not need to be buried in Vietnam and stated that America is their home now.

In my interactions with VAEs, they expressed feeling at ease if death were to come. The majority of the elders mentioned no regrets about their past. Singing and getting involved in community activities help to connect them to their past in Vietnam and present life in America. It's a coalescence of both worlds. Other VAEs want to celebrate their past and enjoy their present.

Discussion

Continuity of aging theory postulates that elders attempt to coalesce their past and present

when adapting to aging (Atchley, 1989). This is seen in the VAEs who feel a sense of usefulness and accomplishment when they can teach their skills or tell their stories of what life was like for Vietnamese Americans in Vietnam and the United States. As these VAEs age in place, their loss of social and functional use leaves them feeling isolated and depressed. Housing instability is an important concern for VAEs. Those with familial support have the benefit of extra cash flow, a mode of transportation, and interpersonal connections (Lewis, 2009). However, those who do not have the necessary stable housing or familial support may drift from one housing location to another. Centralized within an urban environment and surrounding areas exist many assisted living facilities with Vietnamese-speaking staff to serve the needs of the VAE population (Mazumdar et al. 2000). VAEs who have lost the ability to drive find assisted living facilities within the Vietnamese community also assist in serving their needs for companionship.

Upon reflection, my interactions with the urbanized VAEs provide perspective on their values and needs as they age in their ethnic communities. A sense of community allows elders opportunity to meet others who face the same struggles (Aguilar-San Juan, 2005). Sitting around and interacting with other elders at coffee shops or adult service agencies provides VAEs with the comradery they would not otherwise have (Mazumdar et al. 2000). Since their children and grandchildren may have lost or not gained the ability to fluently speak Vietnamese their peers help serve their needs for companionship.

Family plays an important role in this transition for elders (Lewis, 2009). Family provides VAEs with a sense of purpose and a conduit in which they can pass on their knowledge, skills, and stories. Keeping close to their roots is important for VAEs. Many of these VAES do not have savings, and their social security is not enough to keep them housed in a suitable location. Family provides the supplemental cash needed to house and provide for their basic needs. If a VAE does not have the financial means they may be forced to relocate constantly, renting rooms from people. Assisted living facilities are an acceptable alternative; however, those can be quite costly. Another issue is the availability of beds at these facilities. Even with supplemental familial assistance, VAEs may find it difficult to find suitable assisted living on their fixed income.

Aging in place requires adapting to change (Greenfield, 2016). VAEs' loss of functionality and social roles, as well as an evolving community around them, forces VAEs to adapt. Acceptance is key for elders (Greenfield, 2016). Some VAEs have to accept their new roles not as the bread earner or head of the household but as a dependent of their children and grandchildren. Acceptance of the inevitability of death was also a common theme amongst the VAEs.

Implications

VAEs are a growing population in the United States, and to meet their needs research needs to be conducted. This empirical research study records first-hand accounts of the needs of VAEs in an urban surrounding. Even though there are social structures are in place for Vietnamese Americans, VAEs' needs have changed as they age. Medical needs, isolation, connection with their community, rapport building, an understanding of the younger generation's attitudes and values, overcoming isolation and loneliness, and finding purpose are the needs of this aging generation. Vietnamese-speaking adult day care agencies help provide some services. To help further the support of VAEs such agencies can offer services in newspapers, television, radio, and collaborate with medical providers to spread the word that VAEs are not alone in their transitions. Many of the local temples that are situated in the Little Saigon area can collaborate with agencies to raise awareness. Many implications exist for practice and policy can be extrapolated from this research. Practitioners can promote culturally sensitive programs that will more align with the needs of VAEs.

Conclusion

Aging refugees have endured difficult and traumatic experiences; their present needs require more understanding to develop a SOP (Lewis, 2009). Cultural ideologies and adaptations are important to consider when thinking about the VAE experience (Lewis, 2009). The different foundational beliefs and behaviors of newer Americanized generations are a stark contrast to the upbringing and struggles that VAEs endured. At their core, the needs of VAEs are not complex.

They are similar to the basic needs of most individuals: a sense of purpose, usefulness, companionship, health care needs, and stable housing. Customarily, Vietnamese people honor and take care of these parents in old age (Mazumdar et al. 2000). Intergenerational exchanges between vouth and elders serve to satisfy VAEs' need for usefulness and companionship (Lewis, 2009). Mutual exchanges serve to bond with VAEs and educate youth about their culture. Even though families can placate these social needs, the younger generations have been losing typical Vietnamese customs and language thus creating barriers in socializing. Adult daycare agencies and assisted living facilities to help fill these gaps in social bonding. This research study has shown needs VAEs experience, however, more research must be done to find out better and effective solutions...

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