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DEMENTIA IN THE SOUTH ASIAN IMMIGRANTS: A SYSTEMIC LITERATURE REVIEW

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Ctatement of the Problem: Dementia needs to be detected early and managed well to delay the transition to declining health and • If frailty for as long as possible. Factors like poverty and barriers to health care access put ethnic minority groups such as the South Asians, at an even greater risk of severe and early onset dementia compared to the white population. The cultural norms of these communities also influence their knowledge, beliefs and help-seeking behaviours. Hence, the disease goes underdiagnosed, and associated health care services remain highly underutilized. Aim: to provide a critical appraisal of the empirical research on dementia, i.e., knowledge of norms and beliefs, pathways to a diagnosis, the experience of caregiving and the provision of services within South Asian immigrant communities in the western countries. Methodology: The databases Google Scholar, Web of Knowledge, Psychinfo, Pub Med and Ovid were searched for peer-reviewed articles, using the inclusion criteria. The common themes emerging from the 14 qualitative and quantitative research papers were analysed by two authors. Findings: The majority of the studies reported a limited understanding of symptoms and causes; the presence of stigma/shame; delayed diagnosis; lower Service utilization and, unwillingness to access formal caregiving for dementia among South Asians as compared to the general population. Interestingly, there is a huge gap in the literature from the USA despite the presence of a large South Asian diaspora whereas; the UK is found to promote and lead the research in this area. Conclusion & Significance: The existing literature body on South Asian Mental health in general and, dementia, in particular, is significantly undersized. As multiple markers of inequality can indeed have a multiplicative negative effect on people with dementia from ethnic minority groups. Further research is strongly recommended, to understand the reasons for these disparities, not just their occurrence and, to improve the equity of access to healthcare.

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