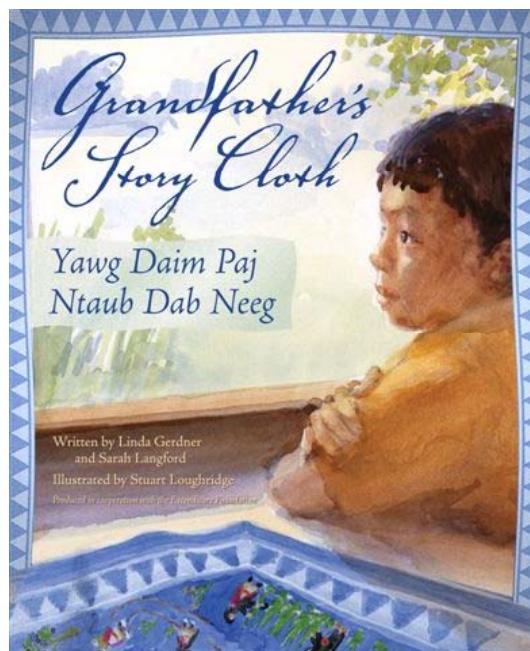


**Translating Research Findings Into a Hmong American Children's Book to Promote
Understanding of Persons with Alzheimer's Disease**

By

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Abstract

Findings from an ethnographic study identified dementia (i.e., Alzheimer's disease) as an important but often overlooked issue within the Hmong American community. Elders with dementia often lived in the home of a married son who had children of his own. Children were reported to have difficulty understanding the memory and behavioral changes associated with the progressive disease. This lack of understanding adversely affected the relationship between the child and elder. A bilingual illustrated children's book entitled *Grandfather's Story Cloth* has been developed to address this issue. General themes from the life experiences of family caregivers were used to provide a culturally meaningful storyline. The book introduces the idea of using a story cloth to stimulate Grandfather's remote memory thereby enhancing communication and understanding between Grandson and Grandfather. The educational value of the book is augmented with discussion questions and answers that support a family based approach to learning. To promote access, the Extendicare Foundation provided funds for the purchase and distribution of 1000 copies of this book to select organizations that serve the Hmong-American community. Initial feedback regarding the educational value and cultural appropriateness of *Grandfather's Story Cloth* by members of the Hmong American community, educators, elementary students, librarians, and health care professionals is presented.

Introduction

Overall it is estimated that more than 5 million Americans currently have a diagnosis of Alzheimer's disease (Alzheimer's Association, 2008). However, there are no statistics specific to the prevalence of this disease within the Hmong American community. Alzheimer's disease is characterized by severe cognitive and behavioral changes that progress over time. Although short-term memory is severely impaired in persons with Alzheimer's disease, remote memory (i.e. autobiographical memory) often remains intact well into the advanced stages of the disease process (Gluseppi, Snitz, Sorcinelli, & Daum, 2004).

Cultural values and beliefs about dementia (i.e. Alzheimer's disease) that are held by elders and their family affect caregiving and help-seeking behaviors (Janevic & Connell, 2001; Yeo & Gallager-Thompson, 2006). The majority of research on family caregiving of persons with dementia has focused on large ethnic groups who have a long-standing presence in the U.S. Other groups, such as Hmong Americans, have been a neglected focus of research. There is need for an increased understanding of Hmong elders with dementia and the family caregiving

experience to facilitate the development of educational materials and programs of care that are culturally responsive.

Gerdner (2001) conducted the first in-depth ethnographic study to explore the perception and care of Hmong American elders with dementia. The overall purpose of this article is to describe how the findings of this study were used to create a culturally meaningful illustrated book for Hmong American children and their families in an effort to promote understanding of and communication with an elder who has Alzheimer's disease.

The article begins by providing a brief historical background of the Laotian Hmong who are living in the U.S. This is followed by pertinent demographic information. The article advances to a summary of ethnographic research findings that identified culturally-based values associated with the care and treatment of Hmong American elders with dementia, misconceptions surrounding diagnostic terms used by Western medicine, and the intergenerational conflicts that occurred between young children and elders with dementia. These findings are supplemented and placed in the context of a greater body of research within the general population to further explore the interface between young children and persons with dementia. Next, a review of the literature regarding the potential educational and therapeutic effects of illustrated books to assist children in coping with a grandparent who has dementia is presented. The article advances to a discussion of how the knowledge acquired through original research was translated into a bilingual illustrated book to serve as a teaching tool for children and their families. Initial feedback evaluating the book's educational value and cultural appropriateness by members of the Hmong American community, educators, elementary students and health care professionals is presented.

Historical Background

The Hmong are an ethnic minority from China and Southeast Asia who have fought to maintain their independence and cultural identity throughout history. Those living in the U.S. originated from the remote highlands of Laos where they lived in small villages with extended patrilineal households (Cooper, Tapp, Lee, & Schwoerer, 1998). Grandparents were treated with great respect and were revered for the wisdom they had acquired over a lifetime. In part, they contributed to the household by caring for their grandchildren. Generally elders retained the oral custom of passing their rich cultural heritage to younger generations of family members. The Hmong people lived a relatively peaceful agrarian lifestyle until the war in Vietnam extended into Laos. As a result, Hmong men and boys were recruited by the Communist Pathet Lao on one side, and the Royal Lao Army and United States (U.S.) Central Intelligence Agency (CIA) on the other side. Those serving the U.S. effort monitored the Ho Chi Minh Trail, gathered intelligence information for the CIA and rescued U.S. pilots who had been shot down by the communists. Following the communist takeover of Laos in 1975, those Hmong who had served the U.S. were forced to flee Laos or suffer severe punishment and/or death by the Communist Pathet Lao. Many escaped by crossing the Mekong River and fleeing to refugee camps in Thailand until resettlement opportunities became available in host countries, such as the U.S., France, and Canada. (Hamilton-Merritt, 1993).

While living in refugee camps, Hmong women used their superior needlework skills to develop a new form of textile art, referred to as story cloths. During their time of confinement, some men joined the women in making story cloths. The process of creating a story cloth begins by selecting a square or rectangular piece of fabric, with light blue being a popular color. Outlined images are drawn onto the fabric to convey the intended story. These stories reflect the unique history and culture of the Hmong people (i.e., village life, war, and escape to Thailand).

Long satin stitches of multi-colored threads are used to fill in these images. Intricate stitches are then added to apply detail. A border of triangles is often used to finish the cloth. The sale of these story cloths provided refugees with money to buy needed supplies (i.e., food, medicine) (Long, 1993; MacDowell, 1989).

Demographics

The Hmong began arriving in the U. S. in the mid 1970's and are a rapidly growing segment of the population. The 2000 census reported 186,310 Hmong living in the U.S., a 97% increase from 1990 to 2000 (Lee and Pfeifer, 2004). Leaders within the Hmong American community believe these statistics to be a 50% to 60% under representation, primarily due to the language barrier confronting the Hmong when completing the census report (Doyle, 2001). More recently the 2006 American community survey estimates 209,000 Hmong living in the U.S. (U.S. Census Bureau, 2006). However, Hmong National Development based in Washington D. C. believes the actual population is closer to 275,000 (Lee, & Pfeifer, 2007). Hmong Americans live in 26 states with the highest populations residing in California, Minnesota, Wisconsin, North Carolina, and Michigan (Lee and Pfeifer, 2004).

Traditionally Hmong people tend to have large families. The average Hmong American household is 6.51 persons compared to 3.14 persons for the total population (Lee and Pfeifer 2004). Eighty percent of Hmong American households contain children under 18 years of age compared to 31.3% of the total U.S. population (U.S. Census Bureau, 2006). Almost 16% of elder Hmong Americans are living in the same household with their grandchildren compared to 3.5% of the total population. The overwhelming majority (97.2%) of Hmong Americans speak their native language at home (U.S. Census Bureau, 2006).

Spirituality

Traditionally, the majority of Hmong practice a combination of animism and ancestor worship. These spiritual beliefs are strongly linked to concepts of health, illness and care of elders. In this belief system each human has multiple souls. A basic element of the animistic belief system is that these souls must remain in harmony to sustain health. Spiritual illness occurs when one or more of these souls are separated from the physical body (Cha, 2003). It is estimated that 70% of the Hmong population in the U.S. continue to practice this traditional belief system (Pfeifer & Lee, 2005).

Ethnographic Research

A focused ethnographic study was conducted over a 30-month period using participant-observation and in-depth interviews to explore the perceptions and care of Hmong American elders with dementia (Gerdner, 2001). Key informants included family caregivers (n=15), traditional healers (n=5), and community leaders (n=5) living in St. Paul / Minneapolis, Minnesota and Eau Claire, Wisconsin. The majority of interviews (n=17) were conducted in the Hmong language with the assistance of a certified health care interpreter. Findings reported here are limited to those that pertain specifically to the need for and development of an illustrated children's book on Alzheimer's disease. For a detailed description of methods and findings of the entire study refer to Gerdner, Tripp-Reimer, & Yang (2008).

Findings revealed that overall community leaders identified dementia as a neglected issue within the Hmong American community. Elders with dementia often lived in the home of a married son, with the daughter-in-law providing the actual hands-on care. The provision of care was generally viewed as being reciprocal for the love and care that elders had provided to the younger generation of family members. Caregivers who had children of their own emphasized the need to preserve these values for future generations by serving as role models.

The role and spiritual orientation of the informant influenced the perceived cause of the elder's condition. Primary explanatory models identified by family caregivers included advanced age and/or a spiritual cause (i.e. soul loss). Consequently, treatment from a physician was not generally sought, unless accompanied by a health crisis (e.g., cerebral vascular accident). Regardless of the personal beliefs of the family caregiver, traditional healers were consulted when the elder retained beliefs of animism/ancestor worship.

Even when the elder was seen by a physician and given a formal diagnosis of dementia there was often either a lack of understanding or a misunderstanding of medical terminology. One caregiver reported that the physician said her mother-in-law had dementia but added, "many of us do not know what that [diagnostic term] means." Later during the conversation this caregiver stated,

In America, they give this diagnosis [dementia] to crazy people, but I don't think she is crazy – it is her memory. She doesn't remember when she has eaten. She doesn't remember what people have told her or what people have done for her – so her memory is not there.

Because of the behavioral symptoms associated with dementia, several informants expressed concern that some members of the Hmong community would label the elder as being "crazy." Consequently, efforts were made to limit the elder's exposure to the outside community in an effort to protect him or her from potential criticism.

Adult children, who served as primary caregivers, often had young children of their own, who had difficulty understanding the progressive memory and behavioral changes associated with the disease process. These difficulties were compounded when the grandparent was no longer able to recognize the child. The child's response often had a negative impact on the elder. During data collection for this study, interviews with two separate families were interrupted by a loud verbal disagreement between grandchild and grandparent that warranted intervention by the

caregiver. Each family reported that this was not an isolated incident. These verbal confrontations were reported to be upsetting to both the child and the grandparent.

Interface Between Children and Persons with Dementia

The experience of elder Hmong Americans with dementia, living in multigenerational homes, can not be viewed in isolation from other family members. The response of family members, including children, will directly or indirectly impact the elder. This perspective is consistent with the traditional Hmong values of family interdependence rather than independence (Frye, 1995, Hall, 1990; Keown-Bonar, 2004). Consequently, the individual is not defined in isolation from but in relationship to the family (Gerdner, Xiong, & Yang, 2006).

Very little research has been done to explore the effects that a grandparent with dementia has on a grandchild and how the child's response affects the grandparent. Creasey, Myers, and Epperson (1989) were the first to explore this topic, with the primary finding being that children having a grandparent with dementia perceived a poorer relationship with that grandparent compared to children whose grandparent did not have dementia. Werner and Lowenstein (2001) expanded these efforts by exploring the meaning of parenthood, within the context of dementia, from the perspective of both the grandparent and grandchild. Grandparents with dementia and their corresponding grandchildren reported talking less about important topics when compared to grandparents without dementia. Based on clinical experience, Hall, Buckwalter, and Crowe (1990) reported that family caregivers sought counsel for children who acted out, expressed fear and anger, and avoided the PWD (persons with dementia). It is expected that the child's adverse behavioral and emotional response would adversely affect the PWD given their lowered tolerance to external stressors (Hall & Buckwalter, 1987) and increased sensitivity to nonverbal communication expressed by others.

Cohen and Eisnorfer (2001) point out that a child's response to a PWD will vary depending on factors such as: the child's age, the number of other children in the family, the closeness of the relationship between the child and the PWD, the availability of other family members, and the cultural background of the child.

Overall, children should be encouraged to ask questions, express feelings openly (Mace & Rabins, 2006) and remain involved with the PWD at a level that is appropriate to their ability and understanding (Cohen & Eisdorfer, 2001). Illustrated children's books with stories that describe children's reactions to Alzheimer's disease can be used to model ways for them to interact with people who have the disease (Holland, 2005; Manthorpe, 2005).

At the onset of this project, a number of illustrated books were available to assist children of other ethnic backgrounds (persons of European descent [Laminack, 1998; Shriver, 2004; Frantti, 1999], African Americans [Altman, 2002], Japanese Americans [Sakai, 1990], Mexican Americans [Cruise, 2006], Jewish [Karkowsky, 1989] but there were no culturally responsive resources to assist Hmong American children who had a grandparent or other significant adult in their life with Alzheimer's disease. To fill this void, a bilingual (English/Hmong), illustrated children's book entitled, *Grandfather's Story Cloth* (Gerdner, & Langford, 2008) was created to serve as a family-based educational tool for Hmong Americans. We strove to create a culturally meaningful story that would provide an honest and respectful depiction of an elder with dementia to promote understanding and enhance coping strategies.

Grandfather's Story Cloth

Illustrated children's books are a "complex, carefully planned work of art that creates a satisfying interplay between text and pictures to tell a story that a small child can understand" (Horning, 1997, p. 120). The article proceeds by discussing the translation of research findings into an illustrated bilingual book entitled, *Grandfather's Story Cloth* (Gerdner & Langford,

2008). The book's reading level is approximately 5 to 10 years of age but is not limited to that age range. The underlying message of love, respect, and reciprocity transcends to persons of all ages.

The book focuses on the relationship between a grandfather (suffering from Alzheimer's disease) and his 10-year old grandson (Chersheng). General themes from the life experiences of family caregivers were used to develop a culturally meaningful storyline. Characters were developed to reflect strong family bonds and interdependence. The storyline was created to mirror the values identified by family caregivers and community leaders during qualitative interviews. For example, adult children viewed caregiving as reciprocal of the love and care that was given to them as they were growing up with an emphasis on respect and patience for the PWD. Grandfather's confusion is portrayed in several scenes throughout the book. The examples provided are representative of the types of behaviors that were reported by caregivers.

The story begins with Chersheng running home from school eager to show Grandfather his 3rd grade art project. Chersheng finds Grandfather in the backyard gathering wood to build a fire so that his daughter-in-law can cook the evening meal. Chersheng realizes that Grandfather has forgotten that mother cooks on a gas stove. Through past experience Chersheng has learned to redirect Grandfather during periods of confusion. In this example, he does so by focusing Grandfather's attention on a bitter melon* growing on a vine that is climbing along a tall "privacy fence" that encloses the backyard. The story provides a brief explanation that the fence was built to provide a secure environment so that Grandfather could continue to participate in outdoor activities that he enjoys (i.e., gardening), without fear of him wandering away and becoming lost. Gardening is an activity reflective of the agrarian lifestyle that was valued by Grandfather during his early years in Laos.

In another scene Grandfather is having a nightmare that wakes Chersheng and his parents. Nightmares have special meaning within the traditional belief system of the Hmong culture. For example, dreaming of a deceased person may be interpreted as impending death. Nightmares were a reoccurring theme that family caregivers identified as distressing to elders with dementia. Chersheng runs to Grandfather's room, but Grandfather confuses Chersheng with his brother who had died many years ago. This is distressing to Chersheng who seeks solace by fleeing to his room and begins drawing a picture of Grandfather as he used to be prior to the onset of Alzheimer's disease. This sets the scene for introducing the idea of using a story cloth to stimulate Grandfather's remote memory thereby providing a means of enhancing communication between Grandfather and Grandson. Grandfather created the story cloth while living in a refugee camp in Thailand, during the mid 1970's. The grandson points to an embroidered image of a rice pounder prompting Grandfather to discuss his life as a farmer, until events of the war forced him to become a soldier. Through these stories Chersheng learns more about his cultural heritage and of Grandfather's courage and the sacrifices that he has made for his family over the years. This provides Chersheng with a deeper understanding and respect for Grandfather and his life. Consequently, the story cloth serves as an intergenerational activity that supports Grandfather's personhood.

The following day Chersheng runs home from school wanting to hear more of Grandfather's stories. Instead, he finds Grandfather burying a silver bar in the garden. Grandfather thinks that he is still in Laos and is attempting to hide the family's wealth from the enemy. The story concludes with Chersheng coming to the painful realization that Grandfather would not be getting better. Chersheng copes with these feelings through his artwork, as he did earlier in the story, but this time he has a dual purpose. Chersheng creates a story collage (an adapted version

* A vegetable whose flavor is especially appreciated by elder Hmong.

of the Hmong story cloth) with photos and drawings that depict Grandfather's "American memories." Working on this project provides Chersheng with the opportunity to reflect on the happy times shared with Grandfather before the onset of Alzheimer's disease. Chersheng gives the collage to Grandfather in the hope that it would elicit these same happy memories in him. Throughout the book Chersheng learns the importance of loving, respecting, and caring for Grandfather in return for the many sacrifices that Grandfather has made for his family.

Stuart Loughridge used watercolor to create illustrations that would compliment, extend, and highlight *Grandfather's Story Cloth*. Watercolor is a popular medium because it allows diverse expression of the desired moods reflected in the storyline (Horning, 1997). For example, in select scenes Loughridge used a palette of blue and beige to depict serenity. The artistic style mirrors efforts to create a textual style that conveys sensitivity and respect. In a contrasting scene, Loughridge uses brooding colors of red and brown to visually emote Grandfather's nightmare.

Illustrations were created using a realistic style that incorporates representations of folk art. For example, the narrative focuses on the story cloth created by Grandfather. The story cloth symbolizes Grandfather's roots and serves as a source of illumination for both he and Chersheng. Loughridge symbolically reinforces this idea by creating scenes in which the story cloth appears to be a source of illumination that casts a glow onto Chersheng's face as he studies the embroidered images.

Select illustrations also serve to expand upon the written words. Most notably one illustration goes beyond the text to convey a deeper understanding of Grandfather's spiritual beliefs. Often elder Hmong Americans retain the traditional beliefs of animism and ancestor worship. The illustration shows a side view of Grandfather in a confused state burying a silver bar in the garden. Upon closer examination a multicolored appliqué is noted on the back of Grandfather's

shirt. This appliqué is not mentioned in the text but indicates that a shamanic healing ceremony has been performed. It therefore is symbolic of Grandfather's traditional animistic belief system. The implication is that even though the family has chosen to seek medical care for Grandfather they have supplemented his care with traditional healing practices in an effort to satisfy Grandfather's spiritual needs.

In addition to personal artistic style and use of color, Loughridge also used composition to enhance the desired mood. For example, following Grandfather's nightmare Chersheng runs to his room and begins drawing. Mother is shown sitting on the bed next to Chersheng in an effort to console him. A triangular composition conveys the mother's protection of her son and symbolizes the stabilizing effect of her presence. Consistent with the text, the illustrations portray the father as a background element, allowing the adult male presence to predominate in Grandfather.

In the beginning of the book, illustrations are created from a vantage point over Chersheng's shoulder. This is done in an effort to assist the viewer in understanding Chersheng's perspective. As the book advances, Chersheng experiences a growing love and respect for Grandfather. To convey this feeling of closeness, Loughridge zooms the focus of the illustrations on the faces of Grandfather and Chersheng. An essential element in all the illustrations is Loughridge's detail to creating facial features and expressions that emit convincing characters.

Enhancing the Book's Educational Value

Two sets of author notes are included at the back of the book. The first provides background information on the Hmong and story cloths. This information is intended to be of particular value to health care professionals and educators who may use this book as a teaching tool for Hmong American children. A second set of notes is used to inform readers about dementia and

Alzheimer's disease and to dispel misconceptions and any negative stigma that may exist within the lay community.

While children will enjoy reading *Grandfather's Story Cloth* on their own, it is also suggested that the experience be shared with the guidance of an adult who can answer questions and initiate discussion. To assist adults in this interactive learning process with the child, the author (Linda Gerdner) has developed a list of in-depth discussion questions and answers specific to the storyline. The purpose is to provide adults with an enhanced understanding of both the behavioral / psychological symptoms exhibited by Grandfather and the use of appropriate management strategies to support his safety and well being. Content also highlights the need to create activities that utilize Grandfather's preserved abilities and personal interests in an effort to promote his quality of life. These in-depth answers give adults a broader base of knowledge about the book, and they in turn can discuss the ideas at the child's level of understanding. This method is consistent with the family-based approach to health education that is recommended when working with Hmong Americans (Frye, 1995). Supplemental discussion questions and answers may be obtained complementary from the author at lgerdner@gmail.com, the publisher at www.shens.com or the Southeast Asian Ministry at www.seam-stpaul.org.

Distribution

The author in collaboration with the Southeast Asian Ministry, a non-profit organization located in St. Paul, Minnesota, obtained funding from the Extendicare Foundation in Milwaukee, Wisconsin for the purchase and distribution of 1000 copies of *Grandfather's Story Cloth* to select organizations in geographic areas where there are high concentrations of Hmong Americans living. The purpose is to increase the accessibility of the book to members of the Hmong American community and those who serve them. Organizations include but are not limited to: elementary schools, public libraries, Hmong Cultural Centers, local chapters of the

Alzheimer's Association, and clinics / hospitals that serve the Hmong American Community. In addition, copies have been provided to the Greenfield Library at the National Alzheimer's Association and affiliates of the International Alzheimer's Association in English speaking countries that have large populations of Hmong (i.e, Canada, Australia). *Grandfather's Story Cloth* is also available for purchase through Shen's Books at <http://www.shens.com> and major book sellers.

The distribution of *Grandfather's Story Cloth* is being accompanied by a series of speaking engagements in an effort to further promote awareness and understanding of Alzheimer's disease within the Hmong American community. Highlighted events include presentations and book readings at various Hmong American Charter schools, the Hmong Cultural Center in St. Paul, and a special fund raising event for *Healthy House* (a non-profit organization that serves the Hmong American community in Merced, California).

Evaluation

Grandfather's Story Cloth was released in June 2008. Initial feedback has been positive and includes members of the Hmong American community, educators, elementary students, librarians, and health care providers. For example, after reading the book one Hmong American leader responded, "It's a wonderful book and very insightful. What a great way to bring understanding to our community about the illness." A school principal provided similar comments regarding the storyline. She was equally impressed with the illustrations that she described as authentic depictions of a typical Hmong American home and garden.

Presentations and book readings have been given to Hmong American elementary school children. The students were attentive and asked pertinent questions. A few shared stories of having a Grandparent with "memory problems." Elder members of the Hmong American community have provided positive feedback as well. Those who followed the traditional belief

system of animism, were particularly pleased by the illustration that shows the appliquéd on the back of Grandfather's shirt, indicating that his spiritual beliefs had been supported through a shamanic healing ceremony.

Clinicians and scholars with expertise in family care of elders with dementia and ethnogeriatrics have been favorably impressed with *Grandfather's Story Cloth*. The comment of a geriatric nurse practitioner follows, "what a great way to explain dementia to adults as well as children." Excerpts from a media review written by Dr. Gwen Yeo (2008, p. 50) and published in *The Journal of Gerontological Nursing* follows, "a beautiful children's book that helps grandchildren understand the illness while educating the adults in the family at the same time."

Dr. Yeo concludes,

Gerdner has an extensive research background in ethnogeriatrics and dementia and, with her nursing student co-author [Sarah Langford], has used that background to develop a new model of support for families from diverse cultural backgrounds who find themselves in a new country trying to cope with the debilitating gradual loss of an important family member. Perhaps the model can be replicated by other populations.

A librarian in Australia was impressed by the way in which a serious topic could be presented in a meaningful and engaging way that was appropriate to a child's level of understanding. She concluded that *Grandfather's Story Cloth* was a wonderful addition to the health science library where she worked.

Summary/Conclusions

Researchers have a responsibility to disseminate and translate research findings in a meaningful way that will benefit the community from which the data originated. This is particularly true within the health science professions (i.e., nursing) where there is an emphasis on translating original research findings into knowledge that can be applied to clinical practice. Without application, research has been described as an "interesting academic exercise that is not worth the time and money being invested in it" (Shriver, de Burger, Brown, Simpson, &

Meyerson, 1998, p. 192). Published literature provides examples of ways in which ethnographic research findings have been effectively translated into culturally responsive educational materials for children (Jordan, 1985) and creative mediums to promote understanding and care of elders with dementia (Kontos & Naglie, 2006).

Grandfather's Story Cloth is an innovative example of how ethnographic research findings can be translated into a family-based educational tool for children. Gerdner (2001) conducted the first focused ethnographic study to explore the perception, care, and preferred treatment, of elder Hmong Americans with dementia. Generally, elders lived in multigenerational homes of a married son. Young children were reported to have difficulty understanding the behavioral and psychological symptoms associated with dementia. This lack of understanding led to negative interactions between child and elder. There was an expressed need for teaching materials to promote understanding of Alzheimer's disease within the Hmong American community.

Facilitating a child's understanding of the behavioral and psychological symptoms associated with dementia helps to "foster continuing intergenerational relationships" (McCrea, 1993, p. 3), that are so valued within the Hmong community. *Grandfather's Story Cloth* models intergenerational activities in an effort to promote communication and understanding between Grandson and Grandfather. Research findings support the benefits of intergenerational activities for persons with dementia. An exploratory study conducted by Jarrett and Bruno (2003) found that during intergenerational activities with children (6 weeks to 5 years), persons with dementia showed both positive affect and increased participatory behaviors

The educational value of the book is augmented by discussion questions and answers that support a family-based approach to learning. Access to the book is facilitated by funding from a non-profit organization that provided the free distribution of a prescribed number of books to select organizations in geographic areas where there are large populations of Hmong Americans

living. It is hoped that *Grandfather's Story Cloth* will serve as a valuable resource to families, educators, and health care professionals who serve Hmong Americans, a rapidly growing segment of the U.S. population. The use of *Grandfather's Story Cloth* is encouraged as an impetus for the development of a comprehensive family-based educational program to assist in the care of Hmong American elders with dementia (i.e. Alzheimer's disease).

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