Cognitive impairment is a critical global public health issue. Recent studies have highlighted that cognitive impairment in older adults is strongly associated with increased healthcare costs. To address this, we conducted a comprehensive analysis of the predictors of cognitive impairment incidence in a large, diverse population. We found that factors including biological sex, residential zone, smoking, and increased carbohydrate intake were significantly associated with cognitive impairment. Common Activities of Daily Living (OR=1.70; 95% CI, 1.23-2.28) in this population. We also observed greater age (OR=1.09; 95% CI, 1.06-1.13), and more challenges with Instrumental Activities of Daily Living (OR=0.60; 95% CI, 0.22-3.91) were associated with cognitive impairment. Greater age (OR=1.09; 95% CI, 1.06-1.13), comorbidities, and low health literacy were also significant predictors of cognitive impairment.

The older immigrant population, characterized by unique attributes such as diverse cultural backgrounds, health beliefs, health behaviors, language barriers, and low health literacy, requires a specific focus on identifying factors that influence frailty. This study aims to explore the influencing factors of frailty among older Korean American immigrants (OKIs) residing in suburban areas with limited Korean healthcare infrastructure. Semi-structured interviews were conducted with 9 OKIs residing in Lee County, Alabama, focusing on four factors associated with frailty: health literacy, physical activity, diet, and mental health. Qualitative content analysis was employed to analyze the data. Validated assessment tools for frailty, health literacy, physical activity, nutrition, depression, and cognitive impairment were also used to gather participant characteristics and complement the qualitative findings. Participants exhibited significant differences in health literacy scores between the Korean and English versions. Content analysis yielded seven categories and twenty-two sub-categories were derived from the eighty identified codes. In addition to typical age-related changes observed among older adults in general, their social activities, health behaviors, and healthcare visits were constrained by different environments/healthcare systems compared to Korea, as well as limited English proficiency and healthcare resources. Participants expressed a need for Korean healthcare providers or interpreters during their healthcare visits and emphasized their preference for Korean food and sought ways to maintain vitality. To prevent and manage frailty among OKIs, interventions need to consider their unique characteristics, facilitators, and barriers. This approach may also benefit other ethnic minority populations facing similar challenges, thus enhancing healthcare for these communities.