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Call for Papers

"The Aging of Immigrant America"

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The Aging of Immigrant America

Background

Population aging is a global phenomenon. In 2026, the older adult population was about 800 million, accounting for 1 in 10 of the global population. This population is expected to double to 1.57 billion by 2054 (Teutem 2024). This demographic shift coincides with high and rising rates of international migration (Poutvaara 2021). Although 74 percent of international migrants are of working age (20 to 64), older adults make up a rapidly growing segment of the global migrant population (McAuliffe and Khadria 2019). In 2020, one in eight international migrants was an older adult—37 million in total (UN DESA 2020)—and this number is expected to double to 72 million by 2060 (INED 2024).

These global aging trends are evident in the U.S., a country with a long history of immigration (Foner 2026). Between 1960 and 2000, the number of immigrant older adults[1] remained stable, ranging from 2.7 to 3.3 million (Mizoguchi et al. 2019). From 2000 to 2024, the older immigrant population grew rapidly, nearly tripling to 9.1 million (Batalova 2026). Aging immigrant cohorts have driven this drastic increase (Kelley, Gubernskaya, and Saenz 2024a). Six decades after the passage of the 1965 Immigration and Nationality Act, immigrants who entered the U.S. as young adults (18 to 35) in 1965 are in their 80s and 90s in 2026. Those who arrived as children (under age 18) in 1965 have entered their "golden years" (ages 62 to 78) in 2026 (Carr 2019). By 2030, the first and oldest cohort of the post-1965 second generation will also approach retirement age.

[1] We use three terms interchangeably: immigrant older adults, older immigrants, and immigrant seniors to indicate foreign-born individuals aged 65 or above. Some studies also use an earlier cut-off age (e.g., 50-60) for older adults.

In 2022, one in six older adults in the U.S. was foreign-born (Batalova 2024), and their share is expected to reach one in four by 2050 (Mizoguchi et al. 2019). Despite their increased numbers, the experiences of immigrant older adults have yet to be fully included in academic and policy debates on aging (Kelley, Gubernskaya, and Saenz 2024b). Research on immigrant integration has overwhelmingly focused on the experiences of children and young adults, including the "new" second generation (Waters and Pineau 2015). Similarly, public debates on immigration's economic impacts have examined how the influx of immigrant workers affects the employment and wages of native-born workers, especially low-skilled workers who directly compete with immigrants (Blau and Mackie 2017). Research on immigration's fiscal impacts has shown that immigration slows population aging, supports labor force growth, strengthens the tax base for programs such as Social Security and Medicare, and contributes to overall economic dynamism.

This body of research assumes immigrants are *young adults* rather than *older adults*. To be sure, three-quarters of the U.S. immigrant population were of working age (18 to 64), but 1 in 6 were older adults in 2022 (Azari et al. 2024). From 2010 to 2022, the share of older adults among the immigrant population rose from 12.4% to 17.7%, whereas the shares of working-age immigrants (18 to 64) and immigrant children (under 18) declined. This trend will likely persist. According to the most recent projections, the share of immigrant older adults will rise to 25.5% in 2035 and 30.9% in 2050, before stabilizing at that level (US Census Bureau 2025). By contrast, the share of working-age immigrant adults will decline further to 69.3% in 2035 and 64.1% in 2050.

The aging of immigrant America reflects a recent but understudied demographic transition. As older immigrant adults account for a larger share of both the foreign-born and the total U.S. population, this CFP invites contributions that examine what this demographic shift means for older immigrants themselves, their families and ethnic communities, and, ultimately, for U.S. society and its institutions. This research agenda has policy implications for the political sphere, public health, and social service provision in support of "healthy aging."

This CFP builds on an emerging body of multidisciplinary research on immigrant older adults (Almuhaisen, Amuedo-Dorantes, and Furtado 2024; Calvo and Waters 2023; Park et al. 2025; Ro, Van Hook, and Walsemann 2022; Sun 2021; Torres and Hunter 2023; Yang and Woo 2025; Yin et al. 2026). Despite its multidisciplinary scope, this literature remains fragmented across fields such as social gerontology, health and retirement, and immigrant integration. We invite prospective contributors to consider how the following five conceptual questions might inform their projects. How might theoretical insights from these fields be integrated to guide empirical research on the transition into later life? How can we study this transition as a multidimensional process rather than a single event (e.g., retirement)? Beyond the outcome-based approach (i.e., focusing on specific life outcomes), how can a trajectory-based approach broaden the research? What mechanisms and processes perpetuate or exacerbate inequalities in aging? How distinct are the aging experiences of immigrant older adults from those of non-immigrant older adults?

Substantively, invited papers will address the following questions. What unique challenges and opportunities do immigrant older adults face as they transition into later life? Which individual resources (e.g., cultural, financial) and institutional resources (e.g., co-ethnic), if any, do they draw on to navigate this transition? What coping mechanisms do they use effectively to adapt to aging and acculturation? What policies, programs, and practices can support this population in this transition to facilitate healthy aging and human flourishing? How do country of origin, race, ethnicity, gender, sexual orientation, incarceration status, legal status, access to the social safety

net, and/or family support shape their well-being? Given the centrality of health and healthcare in old age, how has the "immigrant health paradox" changed over time, and how does immigrant health differ across subgroups and social contexts?

These questions apply to *all* older adults, not just immigrant older adults. For the latter group, however, a central question is *how they integrate into U.S. society as they enter old age*. Prior research on the integration of immigrants and their children in the U.S. has examined integration only among children and young adults of immigrant origin, not among immigrant older adults. When it comes to aging, the focus, at least in the press and popular accounts, is often on how immigrants make up a large proportion of service workers caring for the elderly, but not on the problems and challenges that immigrant seniors themselves might face in their own old age.

This CFP will examine aging from immigrants' perspectives. As immigrants, they bring cultural norms, values, orientations and resources from their home countries that shape their relationships with their children, family, co-ethnic community and other mainstream institutions (Foner 2009). Many immigrants maintain transnational ties to their home countries and relatives there (Levitt 2001; Smith 2006). Others might decide to return in old age or at retirement. In the Caribbean, for example, some eventually return—or spend part of the year in the home country, though not necessarily in the home community (Foner 2005). However, many who worked hard and sent money back to build houses, with the goal of spending their "golden years" in the home country, end up, for various reasons, remaining in the U.S.

Immigrant older adults and the transition into old age

Heterogeneity among older immigrant adults

Heterogeneity—not homogeneity—is a defining characteristic of the older immigrant population. Older immigrant adults represent an internally diverse population (Hawkins et al. 2022) by time of arrival, country of origin, race and ethnicity, gender and sexuality, legal status, socioeconomic status, marital status, parental or grandparental status, and disability status, which in turn shape their access to healthcare and the safety nets (Anantapong et al. 2024; Calvo and Waters 2023). In 2022, older adults made up 22.1% of non-Hispanic Whites, 14.1% of non-Hispanic Asians, 13% of non-Hispanic Blacks, and 8.3% of Hispanics (Washington and Mba 2024). Significant disparities also exist in life and health outcomes among older immigrant adults by race, gender, nativity, and other characteristics (Brown 2018; Carr 2019; Hayward and Majmundar 2018; Larimore et al. 2021; Park et al. 2025).

A growing but overlooked segment comprises "late-arrivals," people who migrate later in life (age 50 or older) due to voluntary family reunification, economic hardship in their home country, or forced displacement (Yin et al. 2025). From 2000 to 2019, their share among "newly arrived immigrants"—those arriving in the survey year or the previous calendar year—doubled from 8 to 15 percent (Camarota and Zeigler 2021). This subpopulation is uniquely vulnerable because of limited language proficiency, weaker labor market integration, shorter employment histories, greater health challenges, higher risk of social isolation, and greater reliance on kinship networks (Maleku et al. 2022; Tonui, Miller, and Adeniji 2023). Moreover, age and life stage at arrival shape integration and sense of belonging among older immigrant adults. In a comparative study of Chinese older adults, "early-arrivals" (i.e., migrating before age 50) are more likely to report economic success and access to mainstream networks and resources, whereas "late-arrivals" of

the same age cohort report fewer resources, more isolation, and heavy reliance on families and co-ethnics for support (Sun and Newendorp 2024).

Intersectionality and life course transitions

A 2022 National Academies of Sciences report, *Understanding the Aging Workforce: Defining a Research Agenda* (Becker and Fiske 2022:3), notes that "[t]he experiences of vulnerable older populations, including women; racial and ethnic minorities; immigrants; those with less education, low income, or limited savings and wealth; those living in rural or economically disadvantaged areas; and those with multiple intersecting vulnerabilities remain understudied within the current literature." These themes strongly overlap with the experiences of multiple subpopulations of immigrant older adults.

Recent scholarship has adopted an *intersectional life-course framework* to analyze immigration and aging, recognizing that the aging process among diverse populations is shaped by the cumulative interplay of migration histories, race and ethnicity, gender, socioeconomic status, legal status, family and social relationships, co-ethnic communities, and neighborhood context across the life course (Brotman, Ferrer, and Koehn 2020; Holman and Walker 2021). This perspective takes the substantial heterogeneity of older immigrant populations seriously and cautions against one-size-fits-all policy approaches.

Moving beyond *deficit-based frameworks* for aging and immigration—which focus on functional decline and the increasing prevalence of age-associated diseases (Xiao et al. 2025)—research on resilience and "healthy aging" offers valuable insights for policy and program interventions (Thomas Tobin et al. 2023). For older adults, finding meaning through community involvement, grandparenting, and religion can significantly support well-being (Cojocaru et al. 2025). One review highlights the multidimensional nature of support for immigrant older adults as a critical factor. These include emotional support (from spouses, friends, and neighbors), financial support (from their children), appraisal support (e.g., advice from fellow congregants), informational support (from co-ethnic communities), and state-based support (Calvo and Waters 2023; Chen, Talwar, and Ji 2015).

Data infrastructure and limitations

Recent research has produced substantial insights into older immigrants, but significant gaps remain because data limitations constrain research on subgroups of "hard-to-reach" populations, such as Asian older adults (Tran 2024; Yin et al. 2026). As a diverse population facing cultural, economic, psychological, and social challenges, immigrant older adults remain persistently underrepresented in research (Wu and Qi 2022; Yi et al. 2021). Many national surveys still lack adequate sample sizes to distinguish immigrant older adults by key characteristics (e.g., national origin, low income, limited English proficiency, LGBTQ status, refugee status). Despite rising awareness of intragroup diversity, many studies continue to lump the immigrant older population together as a single group, focusing on broader racial or pan-ethnic categories (e.g., Asians, Blacks, Hispanics), without distinguishing subgroups by national origin, time of arrival, or within-group diversity, or limit the analysis to single groups such as Chinese, Mexican, and Jamaican immigrants—the largest national-origin group in the Asian, Hispanic, and Black immigrant population in the U.S.- precluding intra-racial comparisons within these categories.

Inadequate data infrastructure has severely limited research on certain subpopulations, especially Asian and Black immigrant older adults, given their size relative to the Hispanic population. The situation is even more challenging for the study of low-income Asian and Black older adults with limited English proficiency. Except for the American Community Survey (available in English and Spanish and offering language assistance in Chinese, Korean, Vietnamese, Japanese, and Haitian Creole), none of the national U.S. surveys of aging (e.g., Health and Retirement Study, National Health and Aging Trends Study) has adopted survey instruments in Asian languages or in those spoken by limited-English-speaking Black immigrants (e.g., Haitians). Their exclusion from survey research on limited English speakers renders them invisible to scholars, researchers, and policymakers (Tran 2024).

Recent work has also underscored the intersection between individual and structural drivers of population health among minority populations. This work points to the need for multi-level data that captures "legal, cultural, and ideological measures of structural oppression" to facilitate new research on the "social pathways and biological mechanisms" that link contextual factors to life and health outcomes, including temporal and spatial variations (Brown and Homan 2023:41, 46).

Key Themes for Prospective Contributors

We invite original, empirical contributions across social science disciplines and methodologies (e.g., qualitative, quantitative, spatial, computational, historical, comparative, community-based) that address the following key themes. We encourage articles that attend to the internal diversity of the immigrant older adult population—including differences in origin, age at arrival, race, ethnicity, gender, legal status, family supports and responsibilities, socioeconomic and health needs, incarceration, and other characteristics—and that examine how these dimensions might shape inequalities in later life. We also welcome contributions that thoughtfully examine the methodological and data-related constraints limiting progress in this field, including how these challenges point to new avenues for research and theoretical development. Contributors are also encouraged to reflect on the policy, programmatic, and practice implications of their findings for this population. Below, we provide a non-exhaustive set of examples illustrating the core themes, unanswered questions, and types of contributions that align with this thematic issue.

To be clear, we invite contributions focused on *immigrant older adults from any background*. Given their internal heterogeneity, many are well educated, highly proficient in English, and often included in large, nationally representative federal datasets (e.g., ACS, CPS, NHIS, HRS). We welcome submissions that draw on these datasets to present broad descriptive trends through quantitative analyses, ideally spanning the last two decades (2000-2025)—the period when this population has grown most rapidly. Such analyses could systematically compare immigrant and non-immigrant older adults to clarify how outcomes differ across the two demographic groups, disaggregated by key characteristics (e.g., age, race, gender, origin). Another key dimension for disaggregation is early-arrival versus late-arrival immigrants.

Given the data coverage gap for "vulnerable" immigrant older adults (e.g., those with limited English proficiency, low-income, LGBTQ+, undocumented), we welcome submissions that use qualitative data or non-representative samples to provide valuable insights into subpopulations routinely excluded from existing survey data infrastructure.

Economic security, retirement income, and social safety net

Retirement can pose distinct financial challenges for immigrants: many report lower incomes, personal savings, and retirement resources than their native-born counterparts. Contributing factors include lower lifetime earnings, limited access to Social Security, inadequate private or employer-provided pensions, and fewer years in the U.S. labor force (Love and Schmidt 2019; Sevak and Schmidt 2014). Late-arrival immigrants, those who worked in the informal economy, and undocumented immigrants are particularly vulnerable because they are often ineligible for Social Security or receive reduced benefits due to limited years in the workforce, resulting in modest retirement income (Sevak and Schmidt 2014).

Many retirees lack adequate savings and instead rely on their children for financial support in their later years. For example, among the 4.3 million U.S. adults who provided financial support to parents, two-thirds were foreign-born, half were Hispanic, and one-third were born in three Latin American countries (Mexico, El Salvador, and the Dominican Republic) (Valle 2023).

Older immigrants, especially those with complex health care needs and limited resources, must navigate the safety net, many for the first time. We know little about how they find benefits, particularly if they have aged out of the traditional workforce or arrived late in life, or how interacting with the government contributes to their well-being and sense of belonging in American society (Calvo and Waters 2023).

How do older immigrant adults approach retirement savings and investments? How do they think about wealth accumulation and intergenerational transfers? Compared with non-immigrant older adults, are immigrant older adults more likely to continue working beyond retirement? If they do, what types of jobs do they hold? What strategies do they use to make ends meet?

How do older immigrant adults learn about benefits (Social Security, Medicaid, SSI, SNAP)? How does immigration status affect eligibility for benefits? How might eligibility vary across localities or over time? What role do ethnic institutions (employers, community-based centers, churches) and personal networks (children, peers, co-ethnics) play in helping older immigrants access the safety net?

What challenges and strategies do older immigrant adults use to navigate the safety net? How do their cultural beliefs, norms, values, and practices shape how they navigate the social safety net: applying for benefits, appealing decisions, or avoiding it altogether? How do these factors shape decisions about long-term care? How does interacting with bureaucrats and service providers impact older immigrants' wellbeing and sense of belonging to the U.S.?

Physical health, disability, and access to health care

The health status of immigrant older adults varies considerably due to health conditions in their countries of origin, pre- and post-migration socioeconomic status, age at arrival, legal status, and the immigration process itself (Hawkins et al., 2022). Some research documents an "immigrant paradox," which shows greater longevity among immigrant populations relative to their native-born counterparts, despite immigrants' sparse economic resources and heightened exposure to stress and discrimination. Although this "immigrant paradox" has been documented for Latino immigrants, researchers continue to debate whether this "paradox" holds for immigrants from other regions, for more recent cohorts, and for which health outcomes (Markides and Rote 2019).

Despite their internal diversity, many older immigrant adults face similar challenges, including inadequate access to healthcare because of Medicare ineligibility or a lack of private insurance, as well as difficulty navigating the complex healthcare system due to language barriers (Kim et al. 2011; Ponce, Hays, and Cunningham 2006). Other studies report differences in cultural understandings of illness causes and treatments, expectations of family caregiving obligations, and consequences of discrimination by healthcare providers (Grol-Prokopczyk et al. 2015; Nong et al. 2020; Williams et al. 2019).

Older immigrant adults needing assistance with activities of daily living (ADLs) may also face language barriers and a lack of shared cultural practices with those providing services and care (Ansari-Thomas 2023). For example, food services in senior residential communities are often unprepared to accommodate immigrant older adults' dietary preferences (Lillekroken et al. 2024; Peters-Nehrenheim et al. 2026). Recent research has identified individual, interpersonal, organizational, communal, and structural barriers to access and well-being (Hawkins et al. 2022).

What cultural and structural factors affect access to health care among older immigrant adults, including legal status, socioeconomic position, language barriers, and cultural practices? How might the "immigrant health paradox"—immigrants' health advantage over non-immigrants—apply to older adults, for which immigrant groups, and for which acute or chronic conditions?

How prevalent are physical disabilities and, more generally, functional limitations among this population? How do they compare to their non-immigrant counterparts? What are the impacts on daily living, including physical navigation, public transportation, and local access to services?

Mental health, social support, and social integration

Mental health and social integration are central to aging. Immigrant older adults encounter many stressors that affect their psychological well-being, including language barriers, social isolation, cultural adjustment and loss of social status or separation from family. On the one hand, many older immigrant adults report significantly lower rates of psychiatric disorders (e.g., depression, anxiety, PTSD) than U.S.-born counterparts, although their symptoms may not be adequately or accurately captured in clinical settings. On the other hand, immigrant older adults might be at a higher risk for psychiatric disorders compared to non-immigrant older adults.

Because of both overreporting and underreporting, standard mental health scales used in national surveys (e.g., CESD, PHQ, GAD) do not fully capture the true mental health burden (Benuto et al. 2021; Macintosh and Strickland 2010). This is especially true among Latino/a and Asian older adults (Bzostek et al. 2016; Tran and Yin 2026; Tse and Haslam 2021; Yang and Woo 2025).

At the same time, strong family and community ties often serve as protective factors (Kim et al. 2015, 2020). Refugees and undocumented migrants, however, are especially vulnerable due to trauma or social stigma linked to legal status and migration history (Canada 2018; Morales 2021; Ro et al. 2022). These challenges have undoubtedly become more acute under the current stricter immigration policies and recent cuts in refugee admissions.

Does the "immigrant health paradox" also extend to mental health? Does the lower prevalence of mental health disorders accurately reflect the mental health burden, and for which populations? How do culturally shaped reporting practices influence this lower rate? How might researchers disentangle genuine differences in mental health status from differences in how older immigrant adults from diverse racial backgrounds perceive, interpret, and report symptoms?

How might family and community ties serve as protective factors? What roles do informal social support (e.g., family, friends, and co-ethnics), as well as formal institutional support (e.g., ethnic institutions, community centers), play in facilitating their social integration?

What mental health conditions are understudied in this population (e.g., dementia, Alzheimer's)? What about cognitive abilities (e.g., memory, attention, executive functioning, language, processing speed, and reasoning)?

Civic engagement and political participation

Despite their growing numbers, immigrant older adults face barriers to political incorporation. Legal hurdles, such as non-citizenship, exclude many from voting, whereas language barriers, cultural attitudes, and socioeconomic challenges can dampen both electoral and non-electoral participation (Torres and Serrat 2019; Zemba and Mehrotra 2023). Some come from countries with different political systems, including limited traditions of free elections or long histories of authoritarian rule, conflict, or widespread corruption (Wong and Ramakrishnan 2023).

As a result, immigrant older adults may lack the habit of democratic engagement or distrust the political process (McCann and Jones-Correa 2020). Moreover, they may encounter bureaucratic and procedural hurdles in the U.S. voting system that can discourage their participation (Jones-Correa 1998; Xu 2005). Political parties, candidates, and advocacy groups have often overlooked immigrants—including older immigrants—in their mobilization efforts (Wong 2006), resulting in the underrepresentation of immigrant seniors in the political sphere.

How and to what extent do immigrant older adults participate in the U.S. political system? How might their participation differ from that in their younger years? What mechanisms facilitate or hinder their civic engagement and political participation?

How do their political attitudes and voting behaviors vary by demographic characteristics, such as race, ethnicity, gender, and socioeconomic status? More importantly, what factors contribute to their political alignment and polarization?

What constitutes the digital information ecosystem in which older immigrant adults live? Where do they get their daily news (e.g., YouTube, WeChat)? What roles do ethnic and/or mainstream news media play in shaping their political views?

How does mistrust of institutions, or past experiences with government and other institutions, shape access to the supports needed to remain in the community later in life?

Cultural dynamics and intergenerational relationships

Family and cultural norms play a central role in how immigrant older adults experience aging. In many cultures, family-centered aging is a strong tradition, and many people live with their children in multigenerational households (Keene and Batson 2010). Adult immigrant children often care for their aging parents while also relying on them for childcare support (Kasinitz et al. 2008). These intergenerational relationships can involve both exchanges and conflicts, but they may be harder to sustain in the U.S. context (Cao 2021).

Moreover, older immigrants with significant health problems (e.g., dementia) may require care that extends beyond what family members can provide. However, high costs and cultural norms

may limit their access to long-term care or to moving to nursing homes (Patterson et al., 2026). Immigrant families, by and large, show a strong commitment to their elders—a strength policy can build on (e.g., by providing caregiver support programs in multiple languages). Successful aging for immigrant older adults often involves balancing home-country cultural values with adaptation to a new environment (Sun 2021; Yoo and Kim 2014).

Cultural factors also shape co-residential arrangements. For example, "long-term immigrants" are more similar to U.S.-born individuals in their living arrangements in old age, whereas "late-arrivals" are more likely to live with their children (Gubernskaya and Tang 2017). Other studies find that older Latino immigrants continually renegotiate ideals of *familismo* within a value system that prioritizes individualism, the nuclear family, and autonomy (Gouveia Marques et al. 2017; Ruiz and Ransford 2012; Treas and Mazumdar 2002).

How do cultural values and practices influence the experience of aging among diverse immigrant populations, as well as their relations with children, grandchildren, and other relatives? What are the benefits and drawbacks of intergenerational and transnational relationships?

How do they negotiate competing ideals of independence and autonomy versus interdependence in later life, including multigenerational living, financial transfers, reciprocal assistance, caring for grandchildren, and adult children's involvement in healthcare decision-making?

How do older immigrants navigate the constantly evolving landscape of home health aides and personal care attendants? How does the availability of culturally and linguistically matched caregivers and providers affect older immigrants' ability to age in place or in their communities?

Housing, neighborhoods, and aging-in-place

A systematic review of "aging-in-place" highlights key neighborhood characteristics that connect immigrant older adults to their local community, including walkability, accessibility, amenities, neighborhood safety, social cohesion, and sense of community, as well as their impacts on life satisfaction (Au et al. 2024).

Transportation barriers (i.e., affordability, accessibility, availability, and acceptability) are associated with higher risks of social isolation and lower quality of life (Dabelko-Schoeny et al. 2021). Capturing these experiences and narratives can enrich understanding and inform the design of strength-based and place-based interventions.

Many initiatives by government agencies and community-based nonprofits—from senior centers targeting immigrants to co-ethnic caregivers—exist (Kim and Kim 2021; Tonui et al. 2023), yet research on their effectiveness and limitations remains limited.

How do we provide access to community centers and other community programs to reduce isolation and support mental health? How effective are social service or healthcare navigators in increasing benefit enrollment or healthcare access among immigrant seniors?

How do language barriers, mobility limitations, and lack of family support increase isolation and reduce access to supports, shaping older adults' ability to age in place? What are best practices to provide safe, stable, and affordable housing options for immigrant seniors?

How can service providers overcome the cultural expectation among some older immigrants that family members alone should provide care and support?

Editorial Team

Our editorial team brings together significant expertise in aging and immigration. We have approached our research from a multidisciplinary perspective and collaborated extensively with scholars from other disciplinary backgrounds. Calvo trained in social work and has additional experience in population and development studies. Carr trained as a sociologist and social demographer and has expertise in life-course studies and population health. Foner was trained as a cultural anthropologist but adopts a deeply historical perspective to the study of immigration. Tran was trained as a sociologist with expertise in social policy and population health.

We include a brief bio for the editorial team below. More information is available in their CVs.

Rocío Calvo is Professor of Global Practice, Assistant Dean for Community Engagement, and Founding Director of the Latinx Leadership Initiative at the Boston College School of Social Work. Her scholarship focuses on immigration, immigrant integration, social welfare policy, community well-being, and equity-centered social service systems. Through her research and public engagement, she has examined how social institutions and service organizations shape immigrant incorporation and access to opportunity, with particular attention to Latinx communities. Her work bridges research, policy, and practice, advancing evidence-based approaches to reducing structural inequities and strengthening community capacity. She serves as Vice President of the Society for Social Work and Research and has earned national recognition for her contributions to social work education and immigration scholarship.

Deborah Carr is A&S Distinguished Professor of Sociology at Boston University and Director of the Center for Innovation in Social Science. A leading life-course sociologist and demographer, her research focuses on aging, health and well-being, social inequality, family relationships, and end-of-life experiences. Using large-scale survey data and quantitative methods, she advances understanding of how social and economic conditions shape health and quality of life across the life course and into older adulthood. Carr has published more than 130 peer-reviewed journal articles and authored several books on aging, including *Aging in America* (University of California Press, 2023) and *Golden Years? Social Inequality in Later Life* (Russell Sage Foundation, 2019). She serves as Editor-in-Chief of the *Journal of Health and Social Behavior* and is a member of the American Academy of Arts and Sciences.

Nancy Foner is Distinguished Professor of Sociology at Hunter College and the Graduate Center, City University of New York. An internationally recognized scholar of migration, race, ethnicity, and urban life, her work has shaped our understanding of immigrant incorporation, transnational migration, and comparative immigration across historical periods and national contexts. Her work examines immigration to New York City, immigrant families, race relations, and the experiences of immigrant minorities in the U.S. and Europe. Foner is the author or editor of 20 books and more than 120 articles and book chapters, including *From Ellis Island to JFK (*Yale University Press, 2000), *Immigration: How the Past Shapes the Present* (Polity Press, 2026), *One Quarter of the Nation* (Princeton University Press, 2022), and *One Out of Three: Immigrant*

New York in the Twenty-First Century (2013). She has served in leadership roles in several major professional associations. Foner is a member of the American Academy of Arts and Sciences.

Van Tran is Professor of Sociology and Founding Director of the Ph.D. Program in Black, Race, and Ethnic Studies at the CUNY Graduate Center. His research examines immigration, race and ethnicity, urban inequality, intergroup relations, and social mobility, with particular attention to immigrant incorporation and the experiences of Asian and Latino communities, and the data challenges of studying smaller, vulnerable immigrant groups. Adopting quantitative, qualitative, and spatial methods, he has published in leading journals, including *Proceedings of the National Academy of Sciences*, *Annual Review of Sociology*, *Social Forces*, *International Migration Review*, and *RSF: The Russell Sage Foundation Journal of the Social Sciences*.

Anticipated Timeline

Prospective contributors should submit a CV and an abstract (up to two pages in length, single or double spaced) of their study along with up to three pages of supporting material (e.g., tables, figures, pictures, etc.) no later than 5 PM EST on January 19, 2027, **to:**

https://rsf.fluxx.io

In other words, your submission may be up to five pages in length. This includes everything, **abstract, references, etc.** Note that if you wish to submit an abstract and do not yet have an account with us, it can take up to 48 hours to get credentials, so please start your application **at least two days before the deadline.** All submissions must be original work that has not been previously published in part or in full. Only abstracts submitted to **https://rsf.fluxx.io** will be considered. Each paper will receive a $1,000 honorarium when the issue is published. All questions regarding this issue should be directed to Suzanne Nichols, Director of Publications, at journal@rsage.org. Do not email the editors of the issue.

A conference will take place at the Russell Sage Foundation in New York City on September 24, 2027 (with a group dinner of the night of the 23rd). The selected contributors will gather for a two-day workshop to present draft papers (due a month prior to the conference on 8/24/27) and receive feedback from the other contributors and editors. Note that submission of the draft prior to the conference is mandatory for participation. Travel costs, food, and lodging for one author per paper will be covered by the foundation. Papers will be circulated before the conference. After the conference, the authors will submit their revised drafts by 1/9/28. The papers will then be sent out to three additional scholars for formal peer review. Having received feedback from reviewers and the RSF board, authors will revise their papers by 8/14/28. The full and final issue will be published open access on the RSF journal website in spring 2029, as well as in several digital repositories, including JSTOR and UPCC/Muse.

All papers are subject to RSF's AI guidelines: The Russell Sage Foundation does not consider the use of artificial intelligence (AI) generated text to meet the standard of authorship. Fair use of AI tools (e.g., ChatGPT, large language models, machine learning, or similar technologies) includes the checking of spelling, grammar, and citations. Authors are considered the sole creators of their work. As such, authors are responsible for the content of their manuscripts, including any portions produced by AI tools. Authors are liable for any ethical breaches that may result from the use of AI. We ask all authors to provide a written disclosure that describes the use of AI in the preparation of their manuscript.

References

Almuhaisen, Abdulmohsen, Catalina Amuedo-Dorantes, and Delia Furtado. 2024. "Immigration Enforcement and the Institutionalization of Elderly Americans." *Journal of Health Economics* 94:102859. doi:10.1016/j.jhealeco.2024.102859.

Anantapong, Kanthee, Pichet Udomratn, Antonio Ventriglio, Max Pemberton, Daniel Poulter, and Dinesh Bhugra. 2024. “Migration and Mental Health Problems of Older Adults: Challenges and Proposed Solutions.” *Industrial Psychiatry Journal* 33(Suppl 1):S236. doi:10.4103/ipj.ipj_29_24.

Ansari-Thomas, Zohra. 2023. “Care Needs and Arrangements of Aging Immigrants in the United States.” *Journal of Aging and Health* 35(3–4):191–208. doi:10.1177/08982643221120701.

Au, Alesia, Sadaf Murad-Kassam, Vestine Mukanoheli, Sobia Idrees, Esra Ben Mabrouk, Khadija Abdi, Megan Kennedy, Kyle Whitfield, and Jordana Salma. 2024. “Immigrant Older Adults’ Experiences of Aging in Place and Their Neighborhoods: A Qualitative Systematic Review.” *International Journal of Environmental Research and Public Health* 21(7):904. doi:10.3390/ijerph21070904.

Azari, Shabnam Shenasi, Virginia Jenkins, Joyce Hahn, and Lauren Median. 2024. *The Foreign-Born Population in the United States: 2022*. *American Community Survey Briefs*. ACSBR-019. Washington D.C.: US Census Bureau. https://www.census.gov/library/publications/2024/acs/acsbr-019.html.

Batalova, Jeanne Batalova Jeanne. 2024. “Frequently Requested Statistics on Immigrants and Immigration in the United States.” https://www.migrationpolicy.org/article/frequently-requested-statistics-immigrants-and-immigration-united-states-2024.

Batalova, Jeanne Batalova Jeanne. 2026. “Frequently Requested Statistics on Immigrants and Immigration in the United States.” https://www.migrationpolicy.org/article/frequently-requested-statistics-immigrants-and-immigration-united-states.

Becker, Tara, and Susan Fiske, eds. 2022. *Understanding the Aging Workforce: Defining a Research Agenda*. Washington (DC): National Academies Press (US). http://www.ncbi.nlm.nih.gov/books/NBK588541/.

Benuto, Lorraine T., Martha Zimmermann, Jena Casas, Frances Gonzalez, Rory Newlands, and Francisco Reinosa Segovia. 2021. “¡No Me Duele Cuando Me Deprimo!: An Examination of Ethnic Differences in Depression Symptoms Among Latinx and Non-Latinx Primary Care Patients.” *Journal of Immigrant and Minority Health* 23(5):917–25. doi:10.1007/s10903-021-01238-z.

Blau, Francine D., and Christopher Mackie, eds. 2017. *The Economic and Fiscal Consequences of Immigration*. Washington, D.C.: National Academies Press.

Brotman, Shari, Ilyan Ferrer, and Sharon Koehn. 2020. “Situating the Life Story Narratives of Aging Immigrants within a Structural Context: The Intersectional Life Course Perspective as Research Praxis.” *Qualitative Research* 20(4):465–84. doi:10.1177/1468794119880746.

Brown, Tyson H. 2018. “Racial Stratification, Immigration, and Health Inequality: A Life Course-Intersectional Approach.” *Social Forces* 96(4):1507–40. doi:10.1093/sf/soy013.

Brown, Tyson H., and Patricia Homan. 2023. “The Future of Social Determinants of Health: Looking Upstream to Structural Drivers.” *The Milbank Quarterly* 101(Suppl 1):36–60. doi:10.1111/1468-0009.12641.

Bzostek, Sharon, Narayan Sastry, Noreen Goldman, Anne Pebley, and Denise Duffy. 2016. "Using Vignettes to Rethink Latino-White Disparities in Self-Rated Health." *Social Science & Medicine (1982)* 149:46–65. doi:10.1016/j.socscimed.2015.11.031.

Calvo, Rocío, and Mary C. Waters. 2023. "The Impact of the COVID-19 Pandemic on Older Latino Immigrants." *RSF: The Russell Sage Foundation Journal of the Social Sciences* 9(3):60–76. doi:10.7758/RSF.2023.9.3.03.

Camarota, Steven A., and Karen Zeigler. 2021. "Immigrants Coming to America at Older Ages." https://cis.org/Report/Immigrants-Coming-America-Older-Ages.

Canada, Employment and Social Development. 2018. *Social Isolation of Seniors: A Focus on New Immigrant and Refugee Seniors in Canada*. *program descriptions*. Canada: Employment and Social Development Canada. https://www.canada.ca/en/employment-social-development/corporate/seniors-forum-federal-provincial-territorial/social-isolation-immigrant-refugee.html.

Cao, Xuemei. 2021. "Intergenerational Relations of Older Immigrants in the United States." *Sociology Compass* 15(8):e12908. doi:10.1111/soc4.12908.

Carr, Deborah S. 2019. *Golden Years? Social Inequality in Later Life*. Rose Series in Sociology. New York, New York: Russell Sage Foundation.

Chen, Xuewei, Divya Talwar, and Qian Ji. 2015. "Social Network and Social Support among Elderly Asian Immigrants in the United States." *Global Journal of Anthropology Research* 2(2):15–21. doi:10.15379/2410-2806.2015.02.02.03.

Cojocaru, Lăcrămioara, Camelia Soponaru, Daniela Muntele-Hendreș, and Ciprian Ceobanu. 2025. "Meaning in Life Among Aged People: A Qualitative Study of an Institutionalized Elderly Sample." *European Journal of Investigation in Health, Psychology and Education* 15(6):91. doi:10.3390/ejihpe15060091.

Dabelko-Schoeny, Holly, Arati Maleku, Qiuchang Cao, Katie White, and Basar Ozbilen. 2021. "'We Want to Go, but There Are No Options': Exploring Barriers and Facilitators of Transportation among Diverse Older Adults." *Journal of Transport & Health* 20:100994. doi:10.1016/j.jth.2020.100994.

Foner, Nancy. 2005. *In a New Land: A Comparative View of Immigration*. New York: NYU Press.

Foner, Nancy, ed. 2009. *Across Generations: Immigrant Families in America*. New York: New York University Press.

Foner, Nancy. 2026. *Immigration: How the Past Shapes the Present*. Cambridge ; Hoboken: Polity Press.

Grol-Prokopczyk, Hanna, Emese Verdes-Tennant, Mary McEniry, and Márton Ispány. 2015. "Promises and Pitfalls of Anchoring Vignettes in Health Survey Research." *Demography* 52(5):1703–28. doi:10.1007/s13524-015-0422-1.

Gubernskaya, Zoya, and Zequn Tang. 2017. "Just Like in Their Home Country? A Multinational Perspective on Living Arrangements of Older Immigrants in the United States." *Demography* 54(5):1973–98. doi:10.1007/s13524-017-0604-0.

Hawkins, Maren M., Daniel D. Holliday, Lance S. Weinhardt, Paul Florsheim, Emmanuel Ngui, and Tala AbuZahra. 2022. “Barriers and Facilitators of Health among Older Adult Immigrants in the United States: An Integrative Review of 20 Years of Literature.” *BMC Public Health* 22(1):755. doi:10.1186/s12889-022-13042-x.

Hayward, Mark D., and Malay K. Majmundar, eds. 2018. *Future Directions for the Demography of Aging: Proceedings of a Workshop*. Washington, D.C.: National Academies Press.

Holman, Daniel, and Alan Walker. 2021. “Understanding Unequal Ageing: Towards a Synthesis of Intersectionality and Life Course Analyses.” *European Journal of Ageing* 18(2):239–55. doi:10.1007/s10433-020-00582-7.

INED. 2024. “2024: The United Nations Publishes New World Population Projections.” https://www.ined.fr/en/everything_about_population/demographic-facts-sheets/focus-on/2024-les-nations-unies-publient-de-nouvelles-projections-de-population-mondiale/?utm_source=chatgpt.com.

Jones-Correa, Michael. 1998. *Between Two Nations: The Political Predicament of Latinos in New York City*. Ithaca: Cornell University Press.

Kasinitz, Philip, John H. Mollenkopf, Mary C. Waters, and Jennifer Holdaway. 2008. *Inheriting the City : The Children of Immigrants Come of Age*. New York: Russell Sage Foundation.

Keene, Jennifer Reid, and Christie D. Batson. 2010. “Under One Roof: A Review of Research on Intergenerational Coresidence and Multigenerational Households in the United States.” *Sociology Compass* 4(8):642–57. doi:10.1111/j.1751-9020.2010.00306.x.

Kelley, Jessica A., Zoya Gubernskaya, and Joseph L. Saenz. 2024a. “Lives in Motion: New Frontiers in Research on Immigration and Aging.” *The Journals of Gerontology: Series B* 79(3):gbad190. doi:10.1093/geronb/gbad190.

Kelley, Jessica A., Zoya Gubernskaya, and Joseph L. Saenz. 2024b. “Lives in Motion: New Frontiers in Research on Immigration and Aging.” *The Journals of Gerontology: Series B* 79(3):gbad190. doi:10.1093/geronb/gbad190.

Kim, Giyeon, Claudia X. Aguado Loi, David A. Chiriboga, Yuri Jang, Patricia Parmelee, and Rebecca S. Allen. 2011. “Limited English Proficiency as a Barrier to Mental Health Service Use: A Study of Latino and Asian Immigrants with Psychiatric Disorders.” *Journal of Psychiatric Research* 45(1):104–10. doi:10.1016/j.jpsychires.2010.04.031.

Kim, Giyeon, Sylvia Y. Wang, Soohyun Park, and Stacy W. Yun. 2020. “Mental Health of Asian American Older Adults: Contemporary Issues and Future Directions.” *Innovation in Aging* 4(5):igaa037. doi:10.1093/geroni/igaa037.

Kim, Hee Jun, EunMi Park, Carla L. Storr, Katherine Tran, and Hee-Soon Juon. 2015. “Depression among Asian-American Adults in the Community: Systematic Review and Meta-Analysis” edited by M. Voracek. *PLOS ONE* 10(6):e0127760. doi:10.1371/journal.pone.0127760.

Kim, Junhyoung, and Jaehyun Kim. 2021. “Exploring Health Benefits through Senior Center Engagement: A Qualitative Investigation of Older Korean Immigrants.” *Activities, Adaptation & Aging* 45(1):1–13. doi:10.1080/01924788.2019.1698121.

Larimore, Savannah, Mosi Ifatunji, Hedwig Lee, Jane Rafferty, James Jackson, and Margaret T. Hicken. 2021. “Geographic Variation in Reproductive Health Among the Black Population in the US: An Analysis of Nativity, Region of Origin, and Division of Residence.” *Population Research and Policy Review* 40(1):33–59. doi:10.1007/s11113-020-09629-0.

Levitt, Peggy. 2001. *The Transnational Villagers*. 1st ed. University of California Press.

Lillekroken, Daniela, Asta Bye, Liv Halvorsrud, Laura Terragni, and Jonas Debesay. 2024. “Food for Soul—Older Immigrants’ Food Habits and Meal Preferences After Immigration: A Systematic Literature Review.” *Journal of Immigrant and Minority Health* 26(4):775–805. doi:10.1007/s10903-023-01571-5.

Love, David, and Lucy Schmidt. 2019. “The Comprehensive Wealth of Older Immigrants and Natives.” *Social Security Bulletin* 79(4):25–68.

Macintosh, Randall C., and Oriel J. Strickland. 2010. “Differential Item Responses on CES-D Inventory: A Comparison of Elderly Hispanics and Non-Hispanic Whites in the United States and Item Usage by Elderly Hispanics across Time.” *Aging & Mental Health* 14(5):556–64. doi:10.1080/13607860903421045.

Maleku, Arati, Megan España, Shannon Jarrott, Sharvari Karandikar, and Rupal Parekh. 2022. “We Are Aging Too! Exploring the Social Impact of Late-Life Migration among Older Immigrants in the United States.” *Journal of Immigrant & Refugee Studies* 20(3):365–82. doi:10.1080/15562948.2021.1929643.

Markides, Kyriakos S., and Sunshine Rote. 2019. “The Healthy Immigrant Effect and Aging in the United States and Other Western Countries.” *The Gerontologist* 59(2):205–14. doi:10.1093/geront/gny136.

McAuliffe, Marie, and Binod Khadria. 2019. *World Migration Report 2020*. Geneva, Switzerland: International Organization for Migration (IOM). https://publications.iom.int/books/world-migration-report-2020.

McCann, James, and Michael Jones-Correa. 2020. *Holding Fast: Resilience and Civic Engagement Among Latino Immigrants*. New York, NY: Russell Sage Foundation.

Mizoguchi, Nobuko, Laquitta Walker, Edward Trevelyan, and Bashiruddin Ahmed. 2019. *The Older Foreign-Born Population in the United States: 2012-2016*. Washington, D.C.: US Census Bureau. https://www.census.gov/content/dam/Census/library/publications/2019/acs/acs-42.pdf.

Morales, Josefina Flores. 2021. “Aging and Undocumented: The Sociology of Aging Meets Immigration Status.” *Sociology Compass* 15(4):e12859. doi:10.1111/soc4.12859.

Nong, Paige, Minakshi Raj, Melissa Creary, Sharon L. R. Kardia, and Jodyn E. Platt. 2020. “Patient-Reported Experiences of Discrimination in the US Health Care System.” *JAMA Network Open* 3(12):e2029650. doi:10.1001/jamanetworkopen.2020.29650.

Park, Sung S., Anne R. Pebley, Noreen Goldman, Boriana Pratt, and Mara Getz Sheftel. 2025. “Racial and Ethnic Disparities in Functional Limitations Among US-Born Older Adults: Examining the Role of Physically Demanding Work.” *Demography* 62(3):1003–28.

Peters-Nehrenheim, Viktoria, Mike Rommerskirch-Manietta, Hürrem Tezcan-Güntekin, and Martina Roes. 2026. “Care Preferences of Older Migrants and Minority Ethnic Groups with Various Care Needs: A Scoping Review.” *PLOS One* 21(1):e0341147. doi:10.1371/journal.pone.0341147.

Ponce, Ninez A., Ron D. Hays, and William E. Cunningham. 2006. “Linguistic Disparities in Health Care Access and Health Status among Older Adults.” *Journal of General Internal Medicine* 21(7):786–91. doi:10.1111/j.1525-1497.2006.00491.x.

Poutvaara, Panu. 2021. *Population Aging and Migration*. *IZA Discussion Papers*. 14389. IZA Network @ LISER.

Ro, Annie, Jennifer Van Hook, and Katrina M. Walsemann. 2022. “Undocumented Older Latino Immigrants in the United States: Population Projections and Share of Older Undocumented Latinos by Health Insurance Coverage and Chronic Health Conditions, 2018–2038.” *The Journals of Gerontology: Series B* 77(2):389–95. doi:10.1093/geronb/gbab189.

Sevak, Purvi, and Lucie Schmidt. 2014. “Immigrants and Retirement Resources.” *Social Security Bulletin* 74(1):27–45.

Smith, Robert C. 2006. *Mexican New York: Transnational Lives of New Immigrants*. Berkeley: University of California Press.

Sun, Ken Chih-Yan. 2021. *Time and Migration: How Long-Term Taiwanese Migrants Negotiate Later Life*. Ithaca [New York]: Cornell University Press.

Sun, Ken Chih-Yan, and Nicole Newendorp. 2024. “How Age and Life Stage of Relocation Fosters Social Belonging: Comparing Two Groups of Older Migrants in the United States.” *The Journals of Gerontology: Series B* 79(3):gbad071. doi:10.1093/geronb/gbad071.

Teutem, Simon van. 2024. “The Global Number of People Aged 65 Years and Older Is Set to Double within the next Thirty Years.” https://ourworldindata.org/data-insights/by-2060-the-number-of-people-aged-65-and-older-will-be-more-than-four-times-what-it-was-in-2000.

Thomas Tobin, Courtney S., Ángela Gutiérrez, Heather R. Farmer, Christy L. Erving, and Taylor W. Hargrove. 2023. “Intersectional Approaches to Minority Aging Research.” *Current Epidemiology Reports* 10(1):33–43. doi:10.1007/s40471-022-00317-5.

Tonui, Betty C., Vivian J. Miller, and Dolapo O. Adeniji. 2023. “Older Immigrant Adults Experiences with Social Isolation: A Qualitative Interpretive Meta Synthesis.” *Aging & Mental Health* 27(6):1068–76. doi:10.1080/13607863.2022.2068131.

Torres, Sandra, and Alistair Hunter. 2023. “Migration and Ageing: The Nexus and Its Backdrop.” Pp. 1–12 in *Handbook on Migration and Ageing*. Edward Elgar Publishing.

Torres, Sandra, and Rodrigo Serrat. 2019. “Older Migrants’ Civic Participation: A Topic in Need of Attention.” *Journal of Aging Studies* 50:100790. doi:10.1016/j.jaging.2019.100790.

Tran, Van C. 2024. “Asian American Diversity and Growth.” *Annual Review of Sociology* 50(50):581–601. doi:10.1146/annurev-soc-031021-012617.

Tran, Van, and Na Yin. 2026. “Depression Self-Reporting among Chinese Older Adults: A Vignette Study.” *Journal of Social Issues* 82(4):e70084. doi:10.1111/josi.70084.

Tse, Jesse S. Y., and Nick Haslam. 2021. “Inclusiveness of the Concept of Mental Disorder and Differences in Help-Seeking Between Asian and White Americans.” *Frontiers in Psychology* 12. doi:10.3389/fpsyg.2021.699750.

UN DESA, ed. 2020. *International Migration 2020: Highlights*. New York: United Nations.

US Census Bureau. 2025. “2023 National Population Projections Tables: Main Series.” Washington D.C. https://www.census.gov/data/tables/2023/demo/popproj/2023-summary-tables.html.

Valle, Liza C. 2023. “Number Who Helped Parents Financially Almost as High as Number Who Paid Child Support.” Washington D.C.: US Census Bureau. https://www.census.gov/library/stories/2023/06/adults-provided-support-to-parents.html.

Washington, Chanell, and Line Nana Mba. 2024. “By 2060, Less Than 60% of Non-Hispanic White Population and About 65% of Non-Hispanic Multiracial Population Will Be Working Age.” https://www.census.gov/library/stories/2024/07/population-projections.html.

Waters, Mary C., and Marisa G. Pineau. 2015. *The Integration of Immigrants into American Society*. Washington, D.C.: National Academies Press.

Williams, David R., Jourdyn A. Lawrence, Brigette A. Davis, and Cecilia Vu. 2019. “Understanding How Discrimination Can Affect Health.” *Health Services Research* 54(Suppl 2):1374–88. doi:10.1111/1475-6773.13222.

Wong, Janelle. 2006. *Democracy's Promise: Immigrants and American Civic Institutions*. University of Michigan Press.

Wong, Janelle S., and Karthick Ramakrishnan. 2023. “Asian Americans and the Politics of the Twenty-First Century.” *Annual Review of Political Science* 26(Volume 26, 2023):305–23. doi:10.1146/annurev-polisci-070621-032538.

Wu, Bei, and Xiang Qi. 2022. “Addressing Health Disparities Among Older Asian American Populations: Research, Data, and Policy.” *The Public Policy and Aging Report* 32(3):105–11. doi:10.1093/ppar/prac015.

Xiao, Na, Bo Xia, Laurie Buys, Connie Susilawati, Martin Larbi, and Qing Chen. 2025. “Comparative Analysis of 16 Aging Concepts and Their Influence on Aging Narratives: Bibliometric and Content Analysis.” *JMIR Aging* 8:e72011. doi:10.2196/72011.

Xu, Jun. 2005. “Why Do Minorities Participate Less? The Effects of Immigration, Education, and Electoral Process on Asian American Voter Registration and Turnout.” *Social Science Research* 34(4):682–702. doi:10.1016/j.ssresearch.2004.11.002.

Yang, Chiana Q., and Benjamin K. P. Woo. 2025. “Mental Health of Older Asian Americans: Current Issues, Updates, and Future Directions.” *World Journal of Psychiatry* 15(8):106806. doi:10.5498/wjp.v15.i8.106806.

Yi, Stella S., Lan N. Đoàn, Juliet K. Choi, Jennifer A. Wong, Rienna Russo, Matthew Chin, Nadia S. Islam, M. D. Taher, Laura Wyatt, Stella K. Chong, Chau Trinh-Shevrin, and Simona C. Kwon. 2021. "With No Data, There's No Equity: Addressing the Lack of Data on COVID-19 for Asian American Communities." *eClinicalMedicine* 41. doi:10.1016/j.eclinm.2021.101165.

Yin, Na, Yu-Jhen Chen, Peter Cheng, and Van Tran. 2026. "Mental and Physical Health Impacts of Anti-Asian Violence on Chinese Older Adults." *Journal of Racial and Ethnic Health Disparities*. doi:10.1007/s40615-026-02872-9.

Yin, Na, Yu-Jhen Chen, Joelle Saad-Lessler, Yiyi Wu, and Ruth K. Finkelstein. 2025. "Understanding Late Arriving Immigrants' Social Security Eligibility and Retirement Security." *Generations* 49(3):1.

Yoo, Grace J., and Barbara Kim. 2014. *Caring across Generations: The Linked Lives of Korean American Families*. New York: University Press.

Zemba, Stephanie, and Meeta Mehrotra. 2023. "'What's Your Accent, Where Are You from?': Language and Belonging among Older Immigrants." *Journal of Aging Studies* 67:101189. doi:10.1016/j.jaging.2023.101189.