



Implications of Diversity in Dementia Care, Services and Supports

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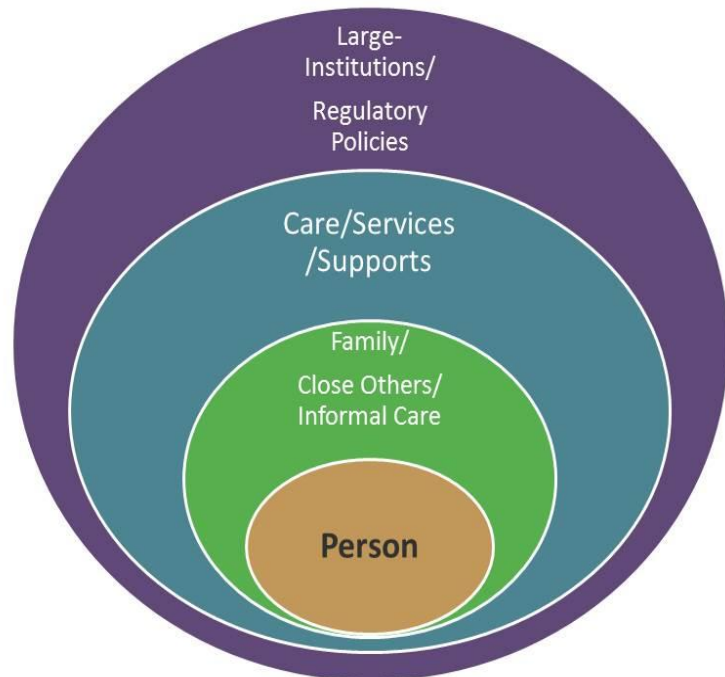
*National Research Summit on Care, Services, and
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School of Social Work

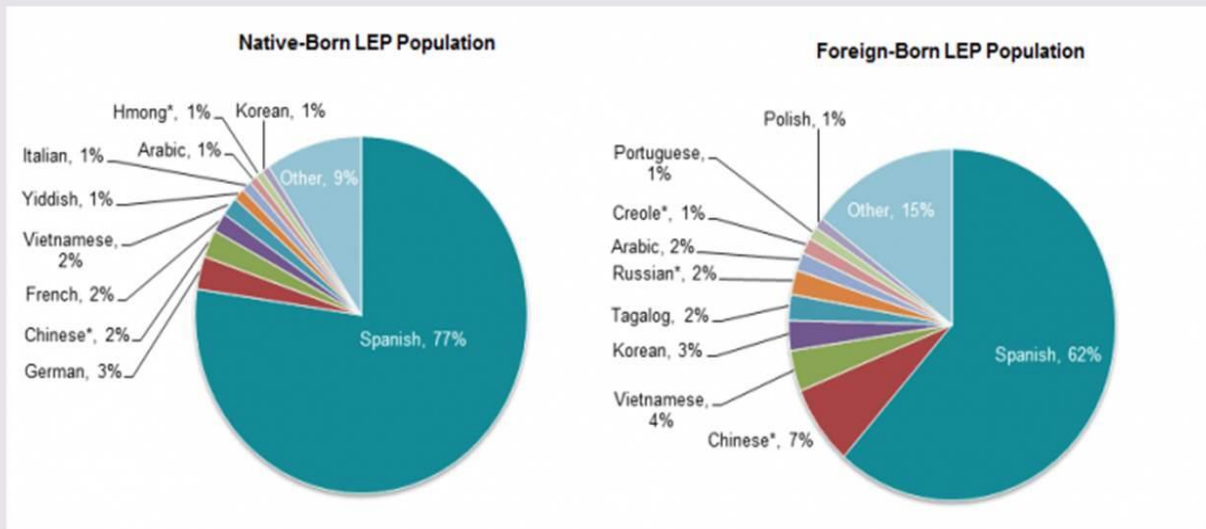
University of Southern California

“Diversity is the realization that the person is much more than a disease, condition, or circumstance.”



Multisystemic Approach to Dementia Care Research

Figure 3. Top Ten Languages Spoken by Native- and Foreign-Born LEP Individuals, 2013



Notes: Chinese includes Chinese, Mandarin, and Cantonese; Creole includes French and Haitian Creole; and Hmong includes Miao-Yao, Mien, and Miao.

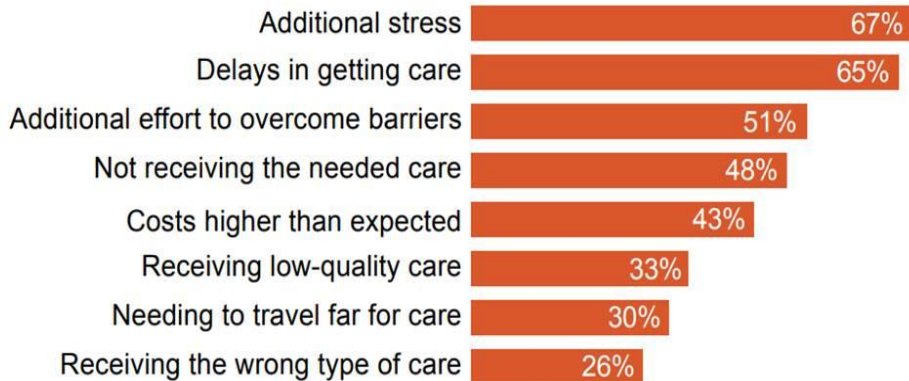
Source: MPI tabulation of data from the U.S. Census Bureau 2013 ACS.

Migration Policy Institute, 2015. <https://www.migrationpolicy.org/article/limited-english-proficient-population-united-states#Language%20Diversity>

Older Hispanics who have faced cultural or language barriers say these difficulties have led to a variety of complications

49%

Two-thirds who have experienced language or cultural barriers say they led to additional stress or delays in getting needed care.



AP-NORC; <http://www.longtermcarepoll.org/Pages/Polls/Long-Term-Care-in-America-Hispanics-Cultural-Concerns-and-Difficulties-with-Care.aspx>

Few think long-term care services in their area will be able to accommodate the cultural needs of older Hispanics

Less than a quarter think nursing homes, assisted living communities, and home health care aides in their area will be able to accommodate the cultural needs of older Hispanics. More have confidence in hospitals.



AP-NORC; <http://www.longtermcarepoll.org/Pages/Polls/Long-Term-Care-in-America-Hispanics-Cultural-Concerns-and-Difficulties-with-Care.aspx>

Hispanics are less likely to be planning for long-term care needs.†

CATEGORY	% HISPANICS	% NON-HISPANICS
→ Discussing funeral arrangement preferences*	47	68
→ Creating a living will or advance directive*	30	55
→ Discussing ongoing living assistance preferences*	26	43
Modifying their home	22	28
→ Setting aside money to pay for long-term care*	15	34
Looking for information about aging	10	22
Making plans to move into a community or facility designed for older adults	4	8

*Statistically significant difference from non-Hispanics ($p < .05$).

AP-NORC; <http://www.longtermcarepoll.org/Pages/Polls/Long-Term-Care-in-America-Hispanics-Cultural-Concerns-and-Difficulties-with-Care.aspx>¹²³

Jang et al., 2017	Total N=2,609	Chinese n=640 (ref.)	Asian Indian n=574	Korean n=471	Vietnamese n=513	Filipino n=265	Other Asian n=146
AD LITERACY							
Perceived AD knowledge (somewhat/very much) (%)	55.5	38.1	48.8***	70.8***	62.2***	68.3***	61.4***
Awareness of local AD- programs & services (yes/no) (%)	7.8	6.9	4.5	7.1	7.3	16.2***	13.4*
CULTURAL BELIEFS							
AD is a normal process of aging	49.3	49.1	43.0*	48.6	63.2***	42.6*	40.6*
AD is a matter of fate	14.0	13.3	15.2	11.2	15.0	16.0	14.7
Not right to place family member with AD in nursing home	30.0	27.1	35.8**	15.8***	36.1**	38.0**	31.4
OUTCOME							
Plans for possibility of AD	11.6	8.6	2.3***	12.2*	25.2***	14.0*	7.0

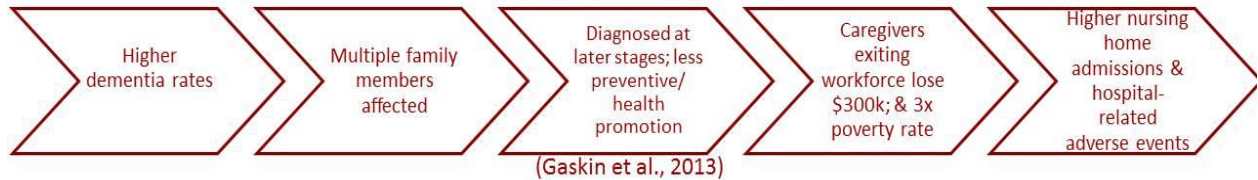
The Aging and Health Report
Disparities and Resilience among Lesbian, Gay, Bisexual, and Transgender Older Adults
By Karen I. Fredriksen-Goldsen, PhD, Hyun-Jun Kim, PhD, Charles A. Emlet, PhD, Anna Muraco, PhD, Elena A. Eroshova, PhD, Charles P. Hoy-Ellis, MSW, Jayn Goldsen, BS, Heidi Perry, PhD

<http://age-pride.org/wordpress/wp-content/uploads/2012/10/Full-report10-25-12.pdf>

“The LGBT community has stepped up in the past to address coming out, AIDS, and civil rights. The next wave has to be aging.”
63-year-old gay man

- Discrimination in continuum of care & social services
- Low access to senior centers & meal programs
- Denial of healthcare or received inferior care
- Victimization and threats of disclosure of sexual and gender identity

Retooling the Provider & Scientific Workforce African Americans



Values

Rights

Thrive

Transform provider and scientific workforce, education, & training programs

Increase number of providers and scientific workforce across systems

Integrate African-American centric beliefs and values, beliefs, preferences for care

Collaboration between key informants & programs with expertise with African Americans care AND dementia care training programs

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Recommendations

- Increase **AD and dementia research funding** to further investments in diversity-focused **research on care, services and supports.**
- **Coordinate public awareness & outreach efforts** with **culturally tailored** brain health messaging and information on health, long-term care, and community-based services.
- Improve access to **quality care, services and supports in multiple languages, for at-risk or underserved groups, geographical regions, etc.**
- Grow the enrollment of underrepresented groups in clinical trials and services research through recruitment strategies and study designs that **better reflect community and organizational realities.**

Recommendations (cont.)

- Recruit and train **a more diverse provider and scientific workforce to address delays in diagnosis, improve treatment, and quality care, supports, and services.**
- Decrease the gap in translation of research to sustained practice based on latest findings in **dissemination, implementation, and improvement sciences.**
- Examine **large-scale policies that promote person-, family-, and community-centered care across multiple systems:** educational; employment/workplace; economic; health and long-term care; environmental; immigration; etc.