

**PERSPECTIVES ON DIVERSITY:
WHY CULTURE MATTERS IN ALZHEIMER'S CARE**

8th Annual Kansas Education Conference on Dementia
Amy Drissen Han, PhD, MPH



WHY DOES CULTURE MATTER?

- Institute of Medicine Publications
 - Crossing the Quality Chasm: A New Health System for the 21st Century (2001)
 - Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care (2003)
- Outcome
 - Disparity
- Recommendations
 - Care customized to patient needs and values
 - Patients as source of control

OBJECTIVES

- EXPLORE ETHNIC AND RACIAL DISPARITIES IN ALZHEIMER'S DISEASE OUTCOMES
- EXPAND KNOWLEDGE OF POPULATION DIVERSITY
- INTRODUCE RECOMMENDATIONS FOR ADDRESSING DISPARITIES IN HEALTH AND HEALTH CARE

THE FACE OF ALZHEIMER'S DISEASE IS CHANGING WITH THE GRAYING OF OUR DIVERSE NATION



DISPARITIES IN ALZHEIMER'S DISEASE OUTCOMES

- Whites = majority of cases
- Females = 2/3 of all cases
- Black and African Americans and LatinX or Hispanics populations = higher risk
- Genetic factors = do not account for differences among racial groups
- Social determinants of health and risk factors for vascular diseases = likely account for increased risk
- Black and African Americans = less likely to have a diagnosis, quality treatment and planning
- LGBT older adults = 2X as likely to remain single as they age, 2X as likely to live alone and 3-4X less likely to have children for support
- Stigma and discrimination

INCREASES IN DIAGNOSES ESCALATES DEMAND FOR CULTURALLY-APPROPRIATE SERVICES AND INTERVENTIONS



WHAT IS POPULATION DIVERSITY?

- Spoken language
- Values
- Socioeconomic status
- Race
- Gender and gender orientation
- Age
- Ethnicity
- Sex and sexual orientation
- Religious affiliation
- Mental and physical abilities
- Historical experiences
- Class
- Communication styles
- Educational background
- Marital status
- Military experience
- Work experience
- Parental status

THE CHALLENGE AHEAD: IMPROVING FRAMEWORKS OF CARE THAT ARE APPROPRIATE AND CONTEXTUAL



RECOMMENDATIONS FOR ADDRESSING DISPARITIES IN HEALTH AND HEALTH CARE

- Organizational leaders
 - Assess organizational culture
 - Consider Healthcare Equality Index recognition
 - Model cultural responsiveness
 - Connect to the community
 - Bolster adaptive legal and financial planning
- Clinical health care professionals
 - Respect limitations of assessment tools
 - Expand ideas of family
 - Learn from narratives
- People with mild cognitive impairments and care partners
 - Demand system response
