

Health care for older adults should honor diversity

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By 2050, the number of older adults representing minority groups is projected to rise to 39%, up from nearly 21% in 2012. The largest increases in the proportion of older adults are projected to be among Asian, Native Hawaiian, and other Pacific Islander populations. What's more, the proportion of older Hispanic adults is projected to more than double over the next 40 years.

Delivering high-quality health care for this ethnically diverse group means that all clinicians, no matter where they practice, should develop interpersonal skills that enable them to navigate culture to meet healthcare needs. To that end, the American Geriatrics Society's Ethnogeriatrics Committee has developed a set of culturally sensitive indicators to help healthcare providers deliver the best possible care. The AGS committee suggests that these indicators can help practitioners improve health outcomes in this diverse older adult population and can also help curb ineffective care.

The AGS recommends that practitioners ask these questions of all older adult people and document answers in medical records.

1. What is your ethnicity?
2. What is your preferred language?
3. Do you know that interpreter services are available free of charge?

4. Do you want to choose one of the available interpreter services (online, telephone, in person)?

5. How much education did you complete (None; less than 7th grade; 7th grade or higher)?

Since the language a patient speaks is closely linked to his or her culture, assessing a patient's preferred language and effectively using interpreter services is essential for enhancing communications. Practitioners should seek qualified interpreters—not family members. The most effective collaborators are trained medical interpreters who are consistently better at communicating medical information to people whose English skills may be limited.

Aside from language, other factors may come into play for practitioners who treat minority [older adults](#). For example, many people of various ethnicities use complementary or alternative health practices, including home healing therapies and techniques.

The AGS committee also noted that practitioners should be self-aware of their own biases and perceptions by considering how personal cultural groups have influenced practitioner values. What's more, practitioners should consider how their perceptions are different than those of people from other cultural backgrounds.

Provided by American Geriatrics Society

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