Racial, ethnic disparities in long-term care remain among older adults despite passage of Affordable Care Act: Study

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Credit: Craig Adderley from Pexels

Despite the raft of health care changes that occurred after the Affordable Care Act (ACA) was signed into law in 2010, racial and
ethnic disparities in aging needs among older adults persist today, a new study shows.

Researchers from the University of Michigan and Syracuse University found that wide disparities in difficulties with daily tasks—and who can afford to pay for care to help meet those needs—remain. However, those disparities were not present among the poorest Americans, they say.

The study, which uses data from U-M's Health and Retirement Study, was published in the journal *Health Affairs Scholar*.

"Hoping America's long-term care problems away won't work," said Geoffrey Hoffman, assistant professor in the School of Nursing. "Policies not directly targeting the millions of Americans with unmet needs won't do the job. We need direct solutions to ease burdens that disproportionately impact minority groups, older Americans and their family members."

The study examined how white, Black and Hispanic older adults differed in the need for and receipt of help with self-care, mobility and household activities from 2008 to 2018, a period marked by major health care changes spurred by the ACA. While the ACA brought forth large-scale policy changes and is believed to have reshaped U.S. health care, little is known about how it has altered long-term care, including the prevalence of older adults with functional difficulties and their use of family and paid care.

Key findings include:

- One-third of Black and Hispanic older adults had difficulties with daily tasks compared to one-fifth of white older adults.
- Black and Hispanic older adults who had difficulty with daily tasks were 1.5 times more likely to be without care support for
one or more tasks than white older adults.

- These racial and ethnic differences were not present among low-income older adults, where rates of people without care support were high for everyone.
- Even though more Black and Hispanic older adults had difficulty with daily tasks than white older adults, they were no more likely to receive paid help, but relied heavily on family and friends.
- These differences between groups were consistent over time.

"I was surprised by the prevalence of people with unmet needs who were not getting care support. Given all the hopes that we had with trying to equalize disparities (by expanding) many home and community-based services, we're still seeing these high rates," said study first author Jun Li, who received a doctorate from the U-M School of Public Health and is now an assistant professor at Syracuse University.

Hoffman said the lack of disparities for lower-income people offers hope that Medicaid is an equalizer.

"But the very high rates of need and unmet need for this group means much more is needed, as expanded Medicaid wasn't able to bring these rates down," he said.


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Provided by University of Michigan

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