

Age-related discrimination can add to healthcare woes

March 12 2015

Being discriminated against by the healthcare profession or system can cause much more than just mere distress to older people. Such experiences can literally be bad for their health. A national survey shows that one in every three older Americans who are on the receiving end of age-related discrimination in the healthcare setting will likely develop new or worsened functional ailments in due course. This follows a study¹ led by Stephanie Rogers, a fellow in geriatrics at UC San Francisco in the United States, and published in the *Journal of General Internal Medicine*², published by Springer.

It is the first to specifically investigate the health effects that discrimination in the health setting has on older adults. Rogers and her colleagues analyzed data from 6,017 Americans older than 50 who took part in the 2008, 2010 and 2012 nationally representative Health and Retirement Study. The survey assessed important aspects of the aging process, and included questions about healthcare discrimination.

One in every five respondents experienced healthcare-related discrimination. Age was the most common reason cited for being on the receiving end of such behavior by respondents of all sexes and age groups, as well as those who have difficulty completing daily tasks. It was also the number one reason given by members of most racial or ethnic groups, with African American being the exception. Follow-up studies further showed that almost a third of older adults (28.5 percent) who frequently experienced such discrimination subsequently developed new or worsened disabilities over the course of the four years. In

contrast, participants who never or seldom experienced such treatment were more likely to maintain their health status.

According to Rogers, the results suggest that healthcare discrimination differs from discrimination outside of the medical setting. She believes it is more strongly linked to the development of disability among [older patients](#) and their increased inability to care for themselves.

"Reducing experiences of discrimination and the perception of discrimination should be a priority in its own right," says Rogers, who calls for more research into the reasons, sources and precise nature of the relationship between healthcare discrimination and the development of disability.

"Providers and healthcare workers can aim to treat each patient with respect, dignity and fairness regardless of age, race or socioeconomic status, and this in turn may improve the function of our aging society," she adds. "Hopefully, we will find that reducing experiences of [discrimination](#) improves the function and well-being of [older adults](#), sparing them, their family, caregivers and society of financial, physical and emotional distress."

More information: Rogers, S. et al. (2015). Discrimination in Healthcare Settings is Associated with Disability in Older Adults: Health and Retirement Study, 2008-2012, *Journal of General Internal Medicine*. [DOI: 10.1007/s11606-015-3233-6](https://doi.org/10.1007/s11606-015-3233-6).

Provided by Springer

Citation: Age-related discrimination can add to healthcare woes (2015, March 12) retrieved 20 April 2024 from

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