Mental Health Aspects of Diabetes in Elders from Diverse Ethnic Backgrounds

African American Elders

Prepared by:
Rita Hargrave, MD

Based on work by:
Rita Hargrave, MD; Caroline Fee, MA;
Irene Lewis, APN, DNS, FAAN; Gwen Yeo, PhD

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Diabetes and Relative Risk

- African Americans are at increased risk for diabetes
  - Older African American women are twice as likely to have diabetes as older white women (Table 1)
  - For men, the young old (65-74 yrs) African Americans have more diabetes, but for those age 75 and over the rates are about the same. (Table 2)
TABLE 1: Age-Specific Prevalence of Diabetes per 100 Population by Race and Sex in the U.S., 2002

Source: Centers for Disease Control and Prevention, National Center for Health Statistics
TABLE 2: Age-Specific Prevalence of Diabetes per 100 Population by Race and Sex in the U.S., 2002

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Black Males</th>
<th>White Males</th>
</tr>
</thead>
<tbody>
<tr>
<td>45-64</td>
<td>10</td>
<td>6</td>
</tr>
<tr>
<td>65-74</td>
<td>25</td>
<td>18</td>
</tr>
<tr>
<td>75+</td>
<td>15</td>
<td>12</td>
</tr>
</tbody>
</table>

Source: Centers for Disease Control and Prevention, National Center for Health Statistics
Diabetes and Risk for Co-morbid Illness

- African Americans have higher prevalence of stroke (Ness et al. 1999)
- African American women and Mexican American women are at greater risk of Cardiovascular disease than other groups (Ness, Nassimiha, Feria et al. 1999)
- African American and Latino Americans have more end stage complications from diabetes (Harris et al. 1998, Lavery 1999)
- 25% of African Americans aged 65-75 are obese, a major risk factor for diabetes (Sundquist, Winkleby & Pudaric 2002)
Strategies for Culturally Appropriate Diet

- Make Healthy Food Choices
  - Low fat food, increased intake of complex carbohydrates, fresh fruits and vegetables, low fat sources of fat (e.g. beans, lean meats, fish and poultry)

- Control Food Portions
  - Use food replicas to teach serving sizes
  - Use food guide pyramid in “Diabetes Meal Planning for the Southern Traditional Client”
Strategies for Culturally Appropriate Diet

- Modify Traditional African American Recipes
  - Healthy versions of traditional “soul” food to reduce fat, calories and sodium
  - Healthy cooking methods - non-stick pans, oven frying, grilling, baking or stewing
- Organize Health Specific Group Cooking Classes
Traditional “Soul” Foods

- “Soul Food” refers to African American cooking, derived from the African slave tradition, is considered a symbol of ethnic identity.
- Soul food is a style of cooking with usually involves frying, boiling and stewing.
Traditional Foods

- **Fruits**: Peaches, berries, apples, watermelon
- **Vegetables**: Greens, squash, sweet potato, yams, okra, tomatoes
- **Dairy products**: Milk used in deserts, buttermilk in baking
Traditional Foods

- **Protein Sources:** Meats (pork and pork variety cuts), chicken, fish (catfish, crab and crawfish), legumes (black eyed peas, red beans, peanuts)

- **Grains:** greens, squash, sweet potato, yams, okra, tomatoes

- **Dairy products:** milk, buttermilk

- **Fats:** Meat drippings, lard, pork fat back, bacon
Nutrition Resources

Depression in African Americans - Prevalence Rates

- It is not clear if there are racial differences in the prevalence of depression
- Several studies report that AA compared to white elders have higher rates of depression (Blazer et al. 1998, Cochran et al 1999)
- Other studies report either no difference or lower prevalence of depression among African American elders (Gallow et al 1998; Blazer 2000)
Depression in African Americans - Obstacles to diagnosis and treatment

- Reduced efficacy of identification of mental health problems at primary care visits
- Reduced access to mental health care for chronically mentally ill African American patients
- Limited knowledge/sensitivity of mental health concerns by physicians
- Severe time constraints/competing clinical demands in primary care encounters
Depression in African Americans -
Obstacles to diagnosis and treatment

- Inadequate time for clinicians to address mental health issues
- Financial barriers
- African Americans mistrust of medical providers
- Stigma associated with having a mental illness
- African Americans perception of racism or discrimination

Borowsky, Rubenstein, Meredith et. al.2000; Unutzer et al. 2003
Prevalence rates of depression among African Americans maybe inaccurate due to limitations of psychological measures. Limitation of psychological measures include:

- Most measures validated on middle class white subjects
- No adjustments for differences in language, culture or cultural framework
- Ethnic differences in language and culture may affect subjects understanding or response patterns on test items
Depression in African Americans - Psychological Testing

- Response patterns on CES-D by African Americans on individual items suggested that:
  - Subjects merged depressive and somatic symptoms into one unidimensional factor
  - Certain test items which included statements of failure and talk appeared to have little meaning for respondents

(Foley, Reed, Mutran et al. 2001)
Depression in African Americans – Culturally Appropriate Treatments and Interventions

- Intervention/Treatment studies of African American suggest
  - AA underutilize specialized mental health services (Borowsky et al. 2000)
  - AA elders are more likely to delay treatment (Zubenko, Mulsant et al 1994)
  - One study reported that AA subjects preferred psychotherapy to treatment with antidepressants
Depression in African Americans – Psychopharmacology

- AA compared to Whites
  - May respond more rapidly to tricyclic antidepressants (Raskin & Crook 1975; Ziegler & Biggs 1977)
  - May be more sensitive to medication side-effects due to higher plasma rates and slower metabolic rate (Raskin & Crook 1975; Ziegler & Biggs 1977)
  - May have a better response to Sertraline, a serotonin-reuptake inhibitor (Steinberg, Munro, Samus et.al. 2004)
Depression in African Americans – Treatment Preferences

- AA compared to Whites and Hispanics *
  - Less likely to find antidepressants acceptable
  - More likely to believe that antidepressants are addictive
  - More likely to believe that counseling brings up bad feelings
  - More likely to state a preference for seeing an African American health professional

* U.S. Department of Health and Human Services, 2001
Depression in African Americans –
Treatment and Decisions

- Antidepressants are used less often in African Americans as compared to whites (Brown, Salive, Guralnick 1995)
- AA are less likely to receive treatment concordant with APA practice guidelines (Borowsky et al. 2000)
- A study be Blazer et al. 2000 revealed that whites compared to African Americans were 8x more likely to be treated with SSRIs and the newer antidepressants
- This difference may be related to
  - Under diagnosis of depression in African Americans
  - Prescribing practices that were influenced by the race of the patient
Dementia and African American - Prevalence

- Studies present conflicting reports about whether African Americans are at increased risk for cognitive impairment (Froehlich, Bogardus & Inouye 2001)
- Manly et al. 1998 reported African American compared to white elders had lower scores on specific areas of cognitive testing (e.g. memory, abstract thinking, verbal fluency and visual spatial ability)
Dementia and African American - Education, Cognitive Testing

- Many researchers suggest that ethnic differences in performance on cognitive testing is due to lower educational levels of African American elders.
- A recent study suggested that years of education is an inadequate measure of educational experience in multicultural elders.
- The authors suggested that adjusting for quality of education would be more accurate and appropriate.

(Manly, Jacobs DM, Koradji et al. 2002)
Dementia and African American - Behavioral Disturbances

- Delusions and hallucinations may be more common among African Americans with dementia (Cohen & Carlin 1993; Hargrave, Stoeklin, Haan et al. 1998, Jeste 1996)

- African Americans with dementia may be more likely to be treated with antipsychotics (particularly older neuroleptics) than white with dementia (Akpffiong et al. 1999)

- Other researchers report that racial differences in behavioral disturbances disappear when structured interviews and standard assessment scales are used (Akpffiong, Kunig, Hale et al. 1999)
Dementia and African American - Ethnicity and Psychological Testing

- Properties and cultural biases of commonly used screening tests for cognitive impairment are reviewed by Lampley-Dallas, Mold and Flori (2001).
- The sensitivity and reliability of the Mini-Mental State (even after adjustments for education) among ethnic minorities is controversial.
- Some studies suggest that the Modified Mini-Mental State Examination (3MS) may offer greater reliability, sensitivity and validity than the MMSE.
- Normative tables (for African American elders) are available for 3MS; stratified by age, with adjustments for education and gender (Brown, Schinka, Mortimer et al. 2003).
Dementia and African American - Ethnicity and Genetic Testing

- The presence of the Apo-E allele has been less predictive of Alzheimer’s disease among African Americans (Farrar, Cupples, Haines et al. 1997)
- Other authors report that African Americans
  - Showed less interest in genetic testing
  - Endorsed fewer reasons for pursuing it
  - Anticipated fewer negative consequences from a positive test result (Hipps, Roberts, Farrar et al. 2003)
- Cultural factors should be incorporated in the design of genetic testing and counseling services