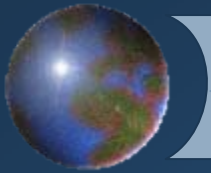


# *Our Ethnogeriatric Imperative*

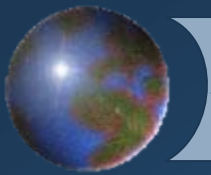
*Gwen Yeo, PhD*

*Stanford Geriatric Education Center*



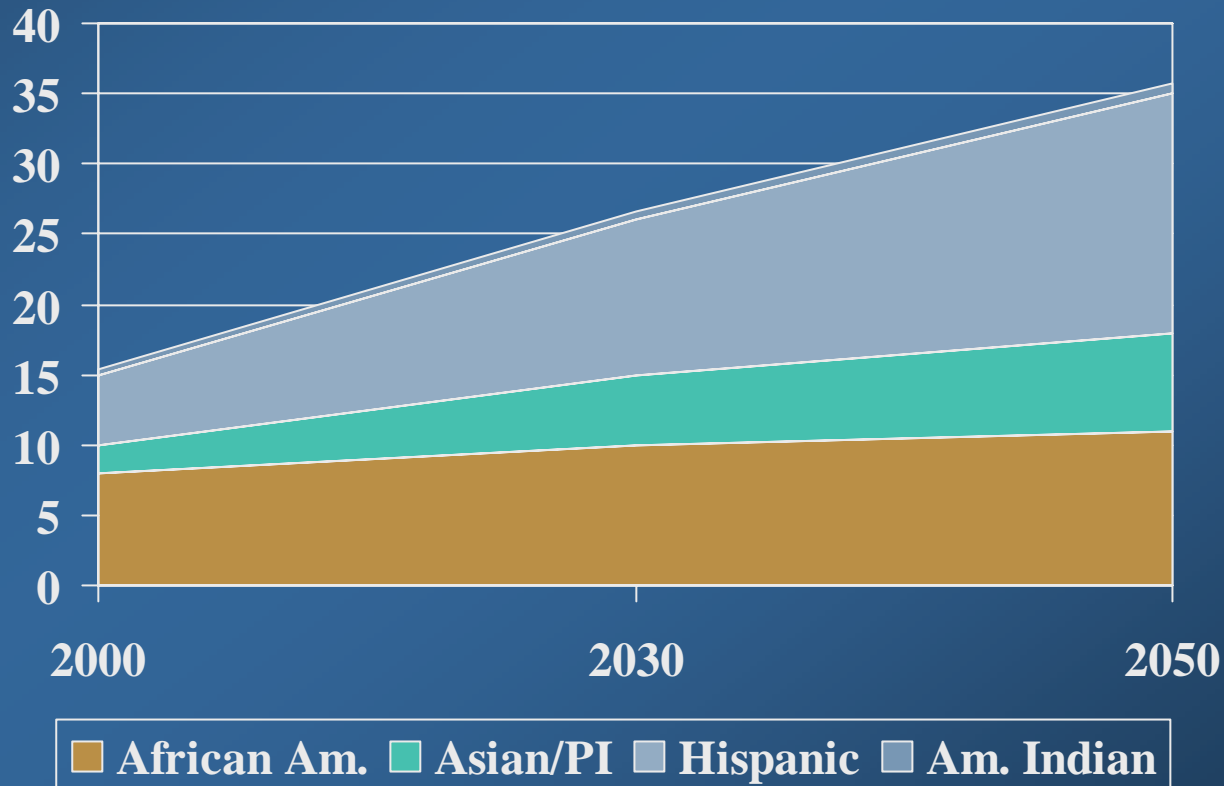
# *Ethnogeriatric Imperative*

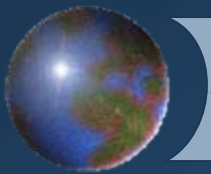
- Increasing numbers of elders from diverse ethnic backgrounds
- Increasing heterogeneity within older ethnic populations
- One-third of U.S. population 65+ are projected to be from one of the four minority categories



# *The Ethnogeriatric Imperative*

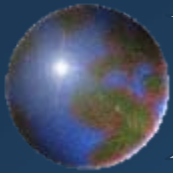
## *Projections of Percent of Ethnic Elders in U.S.*





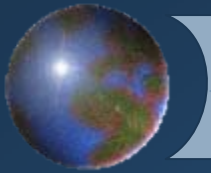
# *Consequences Of Diversity for Geriatric Care Providers*

- CELEBRATE THE DIVERSITY----
- APPRECIATE THE COMPLEXITY!
- NEED FOR CULTURAL COMPETENCE



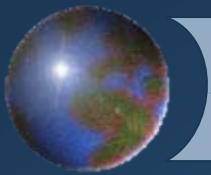
# *Definition of Cultural Competence*

**A set of integrated attitudes,  
knowledge and skills that enable a  
health care professional or  
organization to care effectively for  
patients from diverse cultures,  
groups and communities**



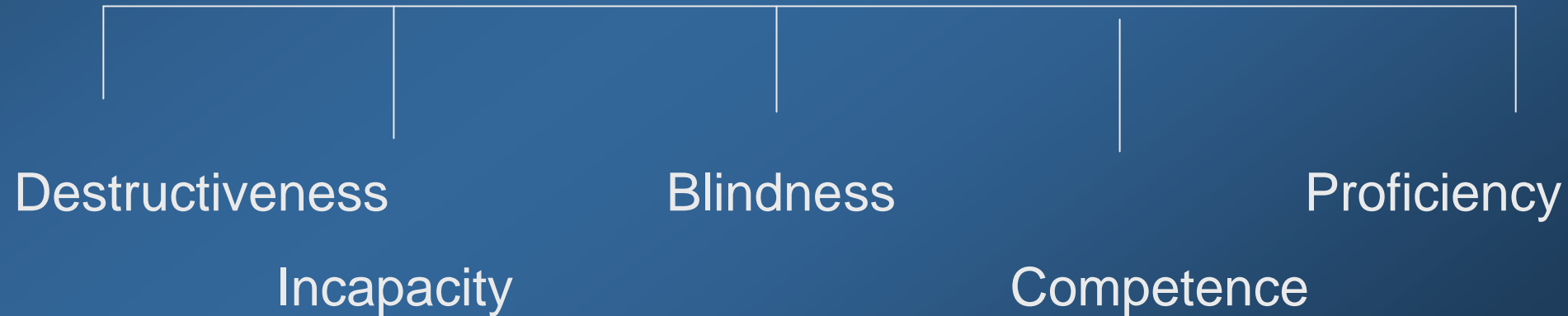
## *Complexities of Culture*

- Individual embedded in multiple layers of social systems, each with its own culture or subculture
- Different parts of culture are expressed at different times
- Some parts of culture or unrecognized
- Continuum of acculturation
- Health care has its own culture

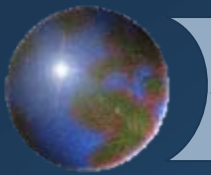


# *Institutional Cultural Competence*

## CONTINUUM OF CULTURAL PROFICIENCY



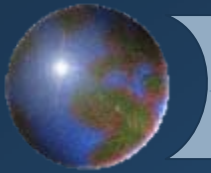
*Cross et al, 1989*



# *Standards for Culturally and Linguistic Appropriate Services (CLAS)*

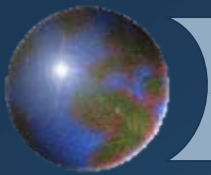
- 14 Standards for Health Care Organizations
- 4 Mandated – Language Services
- 9 Recommended as Mandates – Cultural Competence
- 1 Voluntary-Public Information

**<http://www.omhrc.gov/CLAS>**



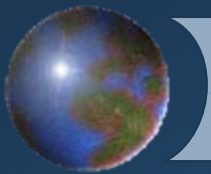
# *Strategies for Organizations to Reduce Cultural Barriers*

- Hire ethnically diverse staff
- Provide adequate interpreter services
- Train staff on history and culture of clients, cultural competencies
- Recruit ethnic guides and consultants from patient populations
- Diversify board and administrators

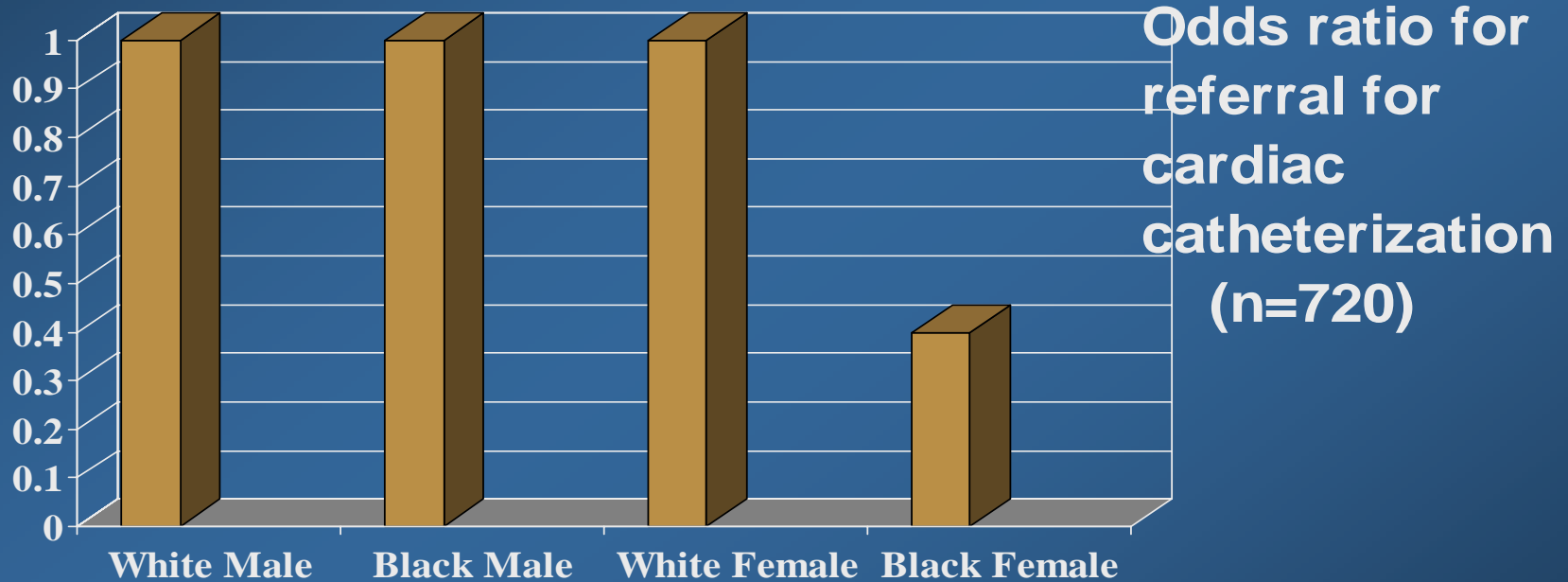


# *Provider Cultural Competence in Ethnogeriatrics: ATTITUDES*

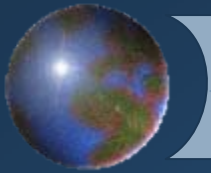
- Recognize your own cultural background and expectations, and that of your health care system
- Recognize and expect within group differences



# *Effects of Race and Sex on Physician Referrals*



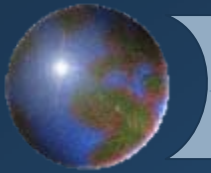
Source: Schulman et al., NEJM 340:8, 1999



# *Cultural Competence in Ethnogeriatrics: KNOWLEDGE*

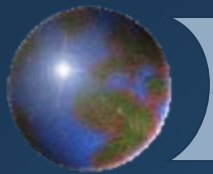
- 1) population-specific health-related cultural values
- 2) disease incidence, prevalence or mortality rates
- 3) population-specific treatment outcomes

*R. Lavizzo-Mourey & E. MacKenzie, 1998*



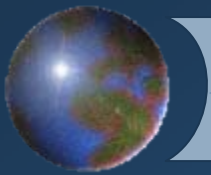
# *Provider Cultural Competence:* *KNOWLEDGE*

- Know the historical experiences of your older patients' ethnic groups



# *Ethnogeriatric Skills/Competencies*

- Show elders culturally appropriate respect
- Nonverbal communication
- Assessments: history, physical exam, cognitive and affective status
- Eliciting explanatory models of illness



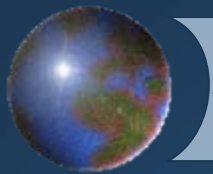
# *Explanatory Models: Chief Complaint*

*(76 Cambodian Elders in San Jose)*

## Contributory: Multiple EMs Cited

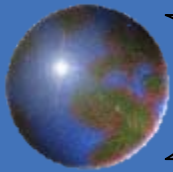
<i>Pruiy chiit kiit chraen</i>	68%
Physical Stress	67%
Aging	57%
Imbalance of the elements	53%
Karma	53%
Excess "hot" element	45%
"Wind illness"	41%
<i>Saasey</i> (misalignment)	37%

Source: Handelman & Yeo, 1994



# *Ethnogeriatric Skills/Competencies*

- Working with translators/interpreters
- Treatment, alternative therapies
- Working with family members
- End-of-life care



# *End of Life Issues*

## ADVANCE DIRECTIVES

Giving up Hope

God's Timing

Family Decision

Hospice Model

Talking about  
Death

Beliefs about  
Pain Relief

Autopsy &  
Organ  
Donation

Rituals