

# Introduction http://geriatrics.stanford.edu/culturemed/overview/introduction/



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eCampus Geriatrics IN THE DIVISION OF GENERAL INTERNAL MEDICINE

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### DESCRIPTION

This first module in the Ethnogeriatric Curriculum:

- Introduces basic concepts in culturally competent care of older adults
- Summarizes sources and patterns of demographic data on the ethnic diversity of older adults in the United States
- Reviews central emphases in general geriatric care
- Presents ideas for increasing learners' understanding of the impact of culture on health through assignments to explore their own cultural background.

Information in the content section is based on evidence from research, and citations to the published studies are included.

### Course Director and Editor in Chief of the Ethnogeriatrics Curriculum and Training

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Stanford University School of Medicine This edition of the module is based on a version developed by Eunice E. Choi, RN, DNSc, Janet Enslein, RN, MA, Lisa Skemp Kelley, RN, and Toni Tripp-Reimer, RN, PhD and edited by Gwen Yeo, PhD, in 2002. It has been updated, edited, and revised by Gwen Yeo, PhD.

### LEARNING OBJECTIVES

After completion of this module, learners will be able to:

- I. Better understand the effect of their own cultural background on their attitudes toward health care
- 2. Define common terms used in ethnogeriatrics
- **3.** Identify the major sources of information on the sizes of ethnic populations of older adults in the U.S. and the categories that are used for the populations
- **4.** Better describe the sizes and growth trends in the major population categories of ethnic older adults
- **5.** Better describe factors that affect cross cultural interactions in geriatric health care in terms of the cultural backgrounds of the providers and patients and the culture of the setting
- 6. List the major components of cultural competence in health care on the system and provider levels
- 7. List three important principles of geriatric care

### **MODULE CHARACTERISTICS**



#### Time to Complete: 40 mins



Intended Audience: Doctors, Nurses, Social Workers, Psychologists, Chaplains, Pharmacists, OT, PT, MT, MFT and all other clinicians caring for older adults.



Peer-Reviewed: Yes

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### ETHNOGERIATRICS AS A FIELD

The field of ethnogeriatrics refers to:

- Health care for older adults from diverse ethnic backgrounds
- Intersection of the studies of aging, ethnicity, and health. **See Figure 1.**

### IMPORTANCE OF ETHNOGERIATRICS

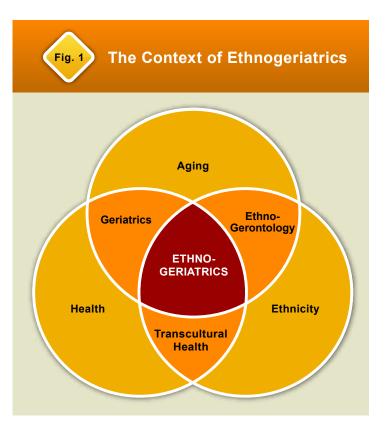
- **I.** Growing diversity of older Americans and of healthcare providers
- **2.** Increasing recognition of the importance of cultural issues in health:
  - Standards on cultural competence for health care organizations
  - Accreditation by the Joint Commission
  - Culturally and Linguistically Appropriate Service (CLAS) Standards from the Office of Minority Health
- **3.** Heterogeneity within the populations adds to the complexity for health care providers

### IMPACT OF CULTURAL FACTORS ON GERIATRIC CARE

### **Cultural Differences**

Culture works to create differences in explanations of disease and treatment:

Western biomedical allopathic health care has its own culture (e.g., knowledge, beliefs, skills, values) based



on scientific assumptions and processes, producing definitions and explanations of disease. Older patients familiar with other health traditions may rely more on factors such as balance (e.g. yin/yang), or spiritual interventions (e.g. soul loss, or God's will) to explain physical states.

People may identify conditions that do not match those found in biomedical references, such as susto (fright), or wind illness, yet these conditions can have a direct impact on health care, adherence to recommended treatment, and full communication between patient and provider. These culturally defined somatic disorders and culture-bound syndromes with their own beliefs about treatment (e.g. coining and cupping for wind illness, or animal sacrifice for soul loss) may make the practice of culturally appropriate geriatrics complex. For example, Western trained providers may not know whether the herbal medicines prescribed by a Chinese herbalist contain ingredients that might enhance or interfere with diabetic medications prescribed by Western physicians.

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Contrasting values of independence vs. community/ family may result in conflicting expectation of the involvement of others in providing care.

### **Effects of Ethnocentrism**

- Ethnocentrism is the belief or attitude that one's own cultural view is the only correct view. Western biomedical allopathic health care has its own culture (e.g., knowledge, beliefs, skills, values) based on scientific assumptions and processes, producing definitions and explanations of disease.
- 2. May lead practitioners to misinterpret cross cultural situations, using their own beliefs, which often are different from those with whom they are interacting. Thus, ethnocentrism leads to miscommunication, which leads to stereotypes and disrespect, which lead to breakdown in delivery of culturally competent care.
- **3.** If practitioners do not have experience working with individuals from a different culture, they may be likely to prejudge them, based on stereotypes, hearsay, and emotions. These judgments may lead practitioners to slight an attribute of a person's culture, either their language, beliefs, habits, or behavior, resulting in the patient taking offense and being less likely to adhere to treatment recommendations.

### DEMOGRAPHIC DATA ON OLDER ADULTS FROM DIVERSE ETHNIC POPULATIONS

#### Sources of U.S. Data and their Limitations

#### I. Federal Census Data (www.census.gov)

- LIMITATION: Traditionally undercounts ethnic subpopulations
- LIMITATION: Federally defined minority categories used in most analyses (American Indian and Alaska Native; Asians; Pacific Islanders; Black or African American; Hispanic or Latino) lump different populations together making data on individual ethnic groups (e.g., Chinese American, Navajo, Mexican American) difficult to access.
- LIMITATION: Differentiating race and ethnicity: Overlap and confusion between the racial categories used in census data (American Indian/Alaska Native, Asian; Pacific Islander; Black; and White) and Hispanic, which is an ethnic category; individuals in Hispanic category can be of any race and are counted in those categories as well unless the data are labeled "non-Hispanic" (e.g., non-Hispanic White).
- LIMITATION: Demographic characteristics available include age, gender, housing, income/ poverty, marital status, living arrangements, education, language spoken at home, and English fluency.

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#### (DEMOGRAPHIC DATA CONT'D)

#### 2. Other Sources

- A. National Data Sets from Government Sources
  - National Health Interview
  - Health Care Financing Administration
  - Social Security Administration
- B. National Data Sets from Individual Organizations
  - AARP Surveys
  - University of Michigan Institute for Social Research
- C. LIMITATION: Community or regional data sets are extremely varied based on the size of the sample and the quality of the research.
- D. LIMITATION: Immigration and Naturalization Service provides only immigration data.
- E. National Vital Statistics System provides data on births and deaths.

U.S. CENSUS FORM To view sample U.S. Census Form, please go to page 16.



#### **Recent Data**

Most recent numbers and percentages of older Americans in major ethnic populations are available from census data at www.census.gov. **To see data on numbers and characteristics of individuals aged 65 and over from specific populations from 2000 census,** <u>see Table 1-1 on page 22.</u>

#### **Future Projections of Changes in Sizes**

See Table 1-2 below and Figure 1-1 on page 7.

Table	
1-2	)

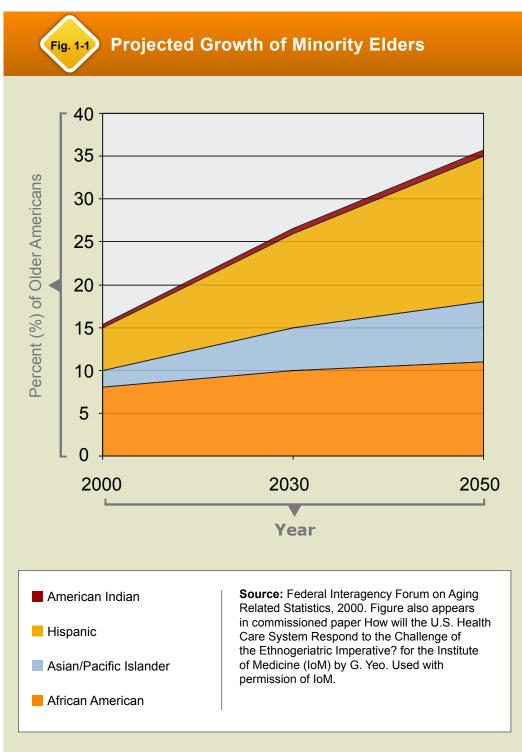
U.S. Population Age 65 and Over By Race and Hispanic Origin 2003 and Projected 2050

Deep and Uispania Ovisin	2003 Esti	mates	2050 Projections			
Race and Hispanic Origin	Number	Percent	Number	Percent		
Total Older Population	36,293,985		86,705,637			
Non-Hispanic White Alone	29,732,252	81.9%	53,259,961	61.3%		
Black Alone	3,046,896	8.4%	10,401,575	12.0%		
Asian Alone	1,048,030	2.9%	6,776,033	7.8%		
All Other Races Alone or in Combination	429,464	1.2%	2,326,390	2.7%		
Hispanic of Any Race	2,164,987	6.0%	15,178,025	17.5%		

**Source:** US Census Bureau, Population Estimates and Projections 2004; Federal Interagency Forum on Aging-Related Statistics

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#### (DEMOGRAPHIC DATA CONT'D)



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### THEORIES USED IN ETHNOGERIATRICS: DEARTH OF THEORETICAL BASES

### **Explanatory Models of Health and Illness**

Introduced by Arthur Kleinman and colleagues in the 1970s to recognize and validate patients' conceptions, explanations, and expectations of their own illness experiences, many of which are based on cultural beliefs.

### History of Double and Triple Jeopardy Hypotheses of Minorities, Aging, and Health

Discussed extensively in the geriatric literature in the 1970s and 1980s suggesting that as minorities grow older they are even more disadvantaged in health than at younger ages. Studies and discussions in the 1990s generally suggested there is little documented additional disadvantage with age among minority older adults (Markides, Liang, & Jackson, 1990).

### Bronfenbrenner's Ecological Approach

**MICROSYSTEM:** Including any person or environment with which the person has direct day-to-day contacts (e.g., family, friends).

**MESOSYSTEM:** Involving the interactions of multiple Microsystems, (e.g., family members' lack of agreement with diet prescriptions).

**EXOSYSTEM:** Involving the larger community, especially decision-making bodies.

**MACROSYSTEM:** The overarching cultural belief systems which influence how individuals in each context interact with one another (e.g., health care providers' attitudes about aging, ethnic older adults' view of themselves).

**CHRONOSYSTEM:** The dimension of time, (e.g., the historical embeddedness of aging, health care, and ethnicity).

### **KLEINMAN'S QUESTIONS\***

What do you call the problem?

What do you think has caused the problem?

Why do you think it started when it did?

What do you think the sickness does? How does it work?

How severe is the sickness?

What kind of treatment do you think the patient should receive?

What are the chief problems the sickness has caused?

What do you fear most about the sickness?

\*Adapted from Kleinman A, 1978.

### INTERCULTURAL DYNAMICS

## Importance of Cultural Factors in Health Care Encounters and Settings

- Culture of the health care organizations
- Diversity among organizations
- Diversity among older patients

### Acculturation Continuum

The degree to which older adults from particular ethnic backgrounds have incorporated the cultural attributes (e.g. values, beliefs, language, skills) of the mainstream culture. Providers should be aware of the vast range in acculturation found among older adults within each ethnic population.

#### (DYNAMICS CONT'D)

There are different domains of culture; one person may differ in the degree to which s/he is acculturated in the different domains affecting health care, such as:

- Belief in existence of non-biomedical illnesses or in the efficacy of scientific treatments
- Importance of family decision-making
- Respect/deference to medical professionals
- Knowledge of bureaucracies and skills in navigating them

#### Levels of Culture and their Expression in a Health Care Encounter

The health care encounter takes place within numerous levels of cultures and subcultures. Examples of influences of those levels include the following:

- 1. **COMMUNITY:** The norms, values, traditions of the community in which the encounter takes place
- 2. **HEALTH CARE SYSTEM:** The roles and hierarchy of different staff and providers within the bureaucratic organization, the norms of making and keeping appointments, the emphasis on time, the overarching value of science and an antiseptic environment.
- 3. **ETHNIC GROUP:** The customs of the cultural group, expected roles of family members, and norms of behavior toward health care professionals
- 4. **PERSONAL**:
  - Unique to individual provider
  - Unique to individual older patient
  - Different parts of one's culture may be expressed or not expressed in different situations and at different times
  - Some of culture is implicit, embedded, and unrecognized by the individual
- 5. INTERCULTURAL DYNAMICS OF THE PATIENT/ PROVIDER: Interaction within the health care system and community

### POLICY AFFECTING HEALTH CARE FOR ETHNIC OLDER ADULTS

- **1.** Major implications of federal, state, and local policies on health care and support for older adults from diverse ethnic backgrounds, for example:
  - Lack of access to SSI and Medicaid by non-citizen immigrants
  - Lack of reimbursement for interpreting services
- **2.** Policies of health settings that differentially affect ethnic older adults, for example:
  - Lack of interpreters or written health education materials in older adult's language
  - Lack of ethnic diets in nursing homes
- **3.** Changes in immigration policies that affect potential family caregivers' chances of residing in the U.S.

### CULTURAL COMPETENCE IN ETHNOGERIATRIC CARE

### A Continuum

Based on degree of effectiveness of skills and service delivery in caring for older adults from diverse ethnic backgrounds.

### 1. System or Institutional-Level Components

- A. Implementation of Standards of Culturally and Linguistically Appropriate Services (CLAS Standards) developed by Office of Minority Health.
- B. Adequate interpreter services and availability of translated forms
- C. Diversity of policy-making board and staff
- D. Use of cultural guides or cultural brokers: bicultural members of older adult's ethnic

community to help providers understand cultural issues in the health care interaction and help older adults understand and navigate the health care system

- E. Training of staff for intercultural interactions
- F. Multicultural expertise in ethics committees
- G. Institutional multicultural task force to identify needs and recommend innovations

#### 2. Individual Provider Level

- A. Awareness of one's personal biases and their impact on practice
- B. Knowledge base
  - Risk factors for disease by ethnic population among older adults
  - Major systems of culturally based health values, beliefs, and behaviors
  - Variations in response to treatment by ethnic population
- C. Skills
  - Ethnically appropriate methods of showing respect
  - Assessment of older adults' position on the acculturation continuum
  - Methods of eliciting and acknowledging older adults' health beliefs or explanatory models
  - Culturally appropriate assessment techniques
  - Working effectively with families from diverse ethnic backgrounds
  - Recognition of culturally related values and needs in terminal care, including spiritual care

#### 3. Ethnic-Specific vs. Multi-Ethnic Models of Health Care

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## PRINCIPLES OF GERIATRIC CARE

Major emphases in geriatric health care as they relate to ethnically diverse older adults:

- 1. Biopsychosocial approach: the integration of consideration of physical, psychological, and social factors in providing health care
- 2. Use of multidisciplinary teams
- 3. Importance of chronic illnesses and geriatric syndromes
- 4. Importance of showing respect to older patients
- 5. Goal of maximizing function Awareness and sensitivity to sensory changes
- 6. Age-appropriate dosing and avoidance of interactions of multiple medications
- 7. Continuity of care through the different components of geriatric care
  - a. Geriatric primary care
  - b. Geriatric acute care
  - c. Geriatric rehabilitation
  - d. Geriatric long-term care
    - i. Community based
      - Home care
      - Adult day care/day health care
      - Respite care
    - ii. Residential Services
      - Assisted living, board & care, adult care, or residential care
      - Nursing homes
      - Combinations of levels of care— Continuing care retirement communities
    - iii. Geriatric managed care: integration of primary, acute, and long term care
      - On Lok/Program of All-inclusive Care for the Elderly (PACE)
      - U.S. Department of Veterans Affairs geriatric programs

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### INSTRUCTIONAL STRATEGIES

### A. Written Exercises

Especially recommended for this module are techniques encouraging learners to examine their own cultural attitudes and values that could affect their interactions with older adults from diverse backgrounds. This can be done by assigning:

- A paper asking learners to examine the influence of their own cultural background on attitudes towards people of different cultures
- Use of reflection (journaling), (See Eyler, Giles, and Schmeide, 1996), and/or
- Reflective narratives about their own ethnic background, values and beliefs about health, health care, the interaction between spirituality and health, and death. In-class reports from these assignments and class discussions of similarities and differences are also valuable, especially in a class with learners from diverse backgrounds

### **B.** Case Histories

In addition to lecture, discussion, and reading assignments, case histories can be used to emphasize the importance of:

- Spirituality in the health of ethnic older adults
- Cultural competence in the health care setting.

#### C. Research

Have learners research the health beliefs, customs, and family systems of different ethnicities.

### **D.** Interview

Have learners interview an older adult person from an ethnic background other than their own to recognize cultural and religious beliefs and practices.

### E. Data Analysis

Ask groups to analyze census data and report the variations in characteristics WITHIN ethnic populations.

### F. Health Care Analysis

Have learners analyze the system level indicators of cultural competence within a health care system in their own community.

### G. Illustration of Acculturation Continuum

Assignments to interview members from different generations or times of immigration in the same ethnic population can help illustrate the acculturation continuum.

### **EVAULATION STRATEGIES**

Evaluation of student performance can be based on the following factors for this module:

- Objective tests (true/false, multiple choice)
- Essay questions
- Assigned papers, especially to reflect increased self-knowledge of learners' own cultural attitudes and values

- Reports from individual or group projects
- Evaluation strategies to use for specific learning objectives are listed below. Refer to Instructional Strategies on the previous page for descriptions of suggested projects.

### **Evaluation Strategies for Specific Learning Objectives**

Learning Objectives	Suggested Evaluation Strategies
More nearly understand the effect of their own cultural background on their attitudes toward health care.	Project A
Define major terms used in ethnogeriatrics	Objective Test; Project C; Project G
Identify the major sources of information on the sizes of ethnic populations of older adults in the U.S. and the categories that are used for the populations.	Essay Question; Paper; <b>Project E</b>
Describe the sizes and growth trends in the major population categories of ethnic older adults.	Objective Test; Paper; <b>Project E</b>
List the major components of cultural competence in health care on the system and provider levels	Project A; Project C; Project D; Project F; Project G; Paper/Essay (case histories, journal, reflective narratives); Class Discussion/Participation
List three important principles of geriatric care.	Objective Test; <b>Project F</b> ; Essay/Paper (case histories, reflective narratives) Class discussion/participation

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#### LINKS

### Demographic Information from U.S. Administration on Aging:



http://www.aoa.gov/AoARoot/Aging\_Statistics/ index.aspx

#### Website of U.S. Census

http://www.census.gov

U.S. Department of Health and Human Services, Health Resources and Services Administration Resources on Cultural Competence

http://www.hrsa.gov/culturalcompetence/

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hus2003excerpt.pdf

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### Sample U.S. Census Form http://2010.census.gov/2010census/pdf/2010\_Questionnaire\_Info.pdf

Census 2010 This is the official form for It is quick and easy, and y	for all the people at this address.
Use a blue or black pen.	5. Please provide information for each person living here. Start with a
Start here	person living here who owns or rents this house, apartment, or mobi home. If the owner or renter lives somewhere else, start with any adu living here. This will be Person 1. What is Person 1's name? Print name below.
The Census must count every person living in the United States on April 1, 2010.	Last Name
Before you answer Question 1, count the people living in this house, apartment, or mobile home using our guidelines.	First Name MI
Count all people, including babies, who live and sleep here most of the time.	6. What is Person 1's sex? Mark X ONE box.
The Census Bureau also conducts counts in institutions and other places, so:	7. What is Person 1's age and what is Person 1's date of birth? Please report babies as age 0 when the child is less than 1 year old.
Do not count anyone living away either at college or in the Armed Forces.	Age on April 1, 2010 Print numbers in boxes. Month Day Year of birth
• Do not count anyone in a nursing home, jail, prison, detention facility, etc., on April 1, 2010.	→ NOTE: Please answer BOTH Question 8 about Hispanic origin and
<ul> <li>Leave these people off your form, even if they will return to live here after they leave college, the nursing home, the military, jail, etc. Otherwise, they may be counted twice.</li> </ul>	Question 9 about race. For this census, Hispanic origins are not race 8. Is Person 1 of Hispanic, Latino, or Spanish origin?
The Census must also include people without a permanent place to stay, so:	<ul> <li>No, not of Hispanic, Latino, or Spanish origin</li> <li>Yes, Mexican, Mexican Am., Chicano</li> </ul>
<ul> <li>If someone who has no permanent place to stay is staying here on April 1, 2010, count that person. Otherwise, he or she may be missed in the census.</li> </ul>	<ul> <li>Yes, Puerto Rican</li> <li>Yes, Cuban</li> <li>Yes, another Hispanic, Latino, or Spanish origin — Print origin, for example.</li> </ul>
<ol> <li>How many people were living or staying in this house, apartment, or mobile home on April 1, 2010?</li> </ol>	Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on. 굳
Number of people =	9. What is Person 1's race? Mark X one or more boxes.
2. Were there any <u>additional</u> people staying here April 1, 2010 that you <u>did not include</u> in Question 1? Mark X all that apply.	<ul> <li>White</li> <li>Black, African Am., or Negro</li> <li>American Indian or Alaska Native — Print name of enrolled or principal tribe.</li> </ul>
<ul> <li>Children, such as newborn babies or foster children</li> <li>Relatives, such as adult children, cousins, or in-laws</li> </ul>	
<ul> <li>Nonrelatives, such as roommates or live-in baby sitters</li> <li>People staying here temporarily</li> </ul>	Asian Indian Japanese Native Hawaiian Chinese Korean Guamanian or Chamorro
<ul> <li>No additional people</li> <li>Is this house, apartment, or mobile home — Mark X ONE box.</li> </ul>	<ul> <li>Filipino</li> <li>Vietnamese</li> <li>Samoan</li> <li>Other Asian — Print race, for example, Hmong, Laotian, Thai,</li> <li>Cother Pacific Islander — P race, for example, Fijian, Tonga</li> </ul>
Owned by you or someone in this household with a mortgage or loan? Include home equity loans.	Pakistani, Cambodian, and so on. $\overrightarrow{r}$ and so on. $\overrightarrow{r}$
<ul> <li>Owned by you or someone in this household free and clear (without a mortgage or loan)?</li> <li>Rented?</li> </ul>	□ Some other race — Print race. ₹
Occupied without payment of rent?	
4. What is your telephone number? We may call if we don't understand an answer.	<b>10.</b> Does Person 1 sometimes live or stay somewhere else?
Area Code + Number	In college housing For child custody
OMB No. 0607-0919-C: Approval Expires 12/31/2011.	In the military     In the military     At a seasonal     In a nursing home
Form <b>D-61</b> (1-15-2009)	or second residence Granother reason

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#### (SAMPLE U.S. CENSUS FORM CONT'D)

Print name of Person 2	1. Print name of Person 3
Last Name	Last Name
First Name MI	First Name MI
How is this person related to Person 1? Mark X ONE box.	2. How is this person related to Person 1? Mark X ONE box.
Husband or wife Parent-in-law	Husband or wife Parent-in-law
Biological son or daughter Son-in-law or daughter-in-law	Biological son or daughter Son-in-law or daughter-in-law
Adopted son or daughter Other relative	Adopted son or daughter Other relative
Stepson or stepdaughter Roomer or boarder	Stepson or stepdaughter Roomer or boarder
Brother or sister     Housemate or roommate       Father or mother     Unmarried partner	Brother or sister     Housemate or roommate     Father or mother     Unmarried partner
Grandchild Other nonrelative	Grandchild Other nonrelative
What is this person's sex? Mark X ONE box.	3. What is this person's sex? Mark X ONE box.
Male Female	Male Female
What is this person's age and what is this person's date of birth?	4. What is this person's age and what is this person's date of bird
Please report babies as age 0 when the child is less than 1 year old. Print numbers in boxes.	Please report babies as age 0 when the child is less than 1 year ole Print numbers in boxes.
Age on April 1, 2010 Month Day Year of birth	Age on April 1, 2010 Month Day Year of birth
<ul> <li>NOTE: Please answer BOTH Question 5 about Hispanic origin and Question 6 about race. For this census, Hispanic origins are not races.</li> <li>Is this person of Hispanic, Latino, or Spanish origin?</li> </ul>	→ NOTE: Please answer BOTH Question 5 about Hispanic origin and Question 6 about race. For this census, Hispanic origins are not ra 5. Is this person of Hispanic, Latino, or Spanish origin?
<b>No,</b> not of Hispanic, Latino, or Spanish origin	<b>No,</b> not of Hispanic, Latino, or Spanish origin
Yes, Mexican, Mexican Am., Chicano	Yes, Mexican, Mexican Am., Chicano
<ul> <li>Yes, Puerto Rican</li> <li>Yes, Cuban</li> </ul>	Yes, Puerto Rican Yes, Cuban
<ul> <li>Yes, Cuban</li> <li>Yes, another Hispanic, Latino, or Spanish origin — Print origin, for example,</li> </ul>	Yes, another Hispanic, Latino, or Spanish origin — Print origin, for exar
Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.	Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.
What is this person's race? Mark X one or more boxes.	6. What is this person's race? Mark X one or more boxes.
U White	U White
Black, African Am., or Negro	Black, African Am., or Negro
American Indian or Alaska Native — Print name of enrolled or principal tribe.	American Indian or Alaska Native — Print name of enrolled or principal trib
Asian Indian Japanese Native Hawaiian	Asian Indian Japanese Native Hawaiian
Chinese     Korean     Guamanian or Chamorro       Filipino     Vietnamese     Samoan	Chinese Guamanian or Chamorro
Other Asian — Print race, for Other Pacific Islander — Print	Other Asian — Print race, for Other Pacific Islander —
example, Hmorg, Latian, Thai, Pakistani, Cambodian, and so on.	example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on. → and so on.
Some other race — Print race. $$	Some other race — Print race.
Does this person sometimes live or stay somewhere else?	7. Does this person sometimes live or stay somewhere else?
No Yes — Mark 🗴 all that apply.	No Yes — Mark X all that apply.
□ In college housing □ For child custody	□ In college housing □ For child custody
In the military In jail or prison	In the military In jail or prison
	At a seasonal In a nursing home
At a seasonal In a nursing home	or second residence
At a seasonal In a nursing home or second residence For another reason If more people were counted in Question 1 on the front page,	or second residence For another reason

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#### (SAMPLE U.S. CENSUS FORM CONT'D)

1. Print name of <b>Person 4</b>	1. Print name of Person 5
Last Name	Last Name
First Name MI	First Name MI
2. How is this person related to Person 1? Mark X ONE box.	2. How is this person related to Person 1? Mark X ONE box.
Husband or wife Parent-in-law	Husband or wife Parent-in-law
Biological son or daughter Son-in-law or daughter-in-law	Biological son or daughter Son-in-law or daughter-in-law
Adopted son or daughter     Other relative     Stepson or stepdaughter     Roomer or boarder	Adopted son or daughter     Other relative     Stepson or stepdaughter     Roomer or boarder
Brother or sister	Brother or sister
□ Father or mother □ Unmarried partner	Father or mother Unmarried partner
Grandchild Other nonrelative	Grandchild Other nonrelative
<b>3.</b> What is this person's sex? Mark X ONE box.	3. What is this person's sex? Mark X ONE box.
Male Female	Male Female
4. What is this person's age and what is this person's date of birth?	4. What is this person's age and what is this person's date of birth?
Please report babies as age 0 when the child is less than 1 year old. Print numbers in boxes.	Please report babies as age 0 when the child is less than 1 year old. Print numbers in boxes.
Age on April 1, 2010 Month Day Year of birth	Age on April 1, 2010 Month Day Year of birth
→ NOTE: Please answer BOTH Question 5 about Hispanic origin and	→ NOTE: Please answer BOTH Question 5 about Hispanic origin and
Question 6 about race. For this census, Hispanic origins are not races. 5. Is this person of Hispanic, Latino, or Spanish origin?	Question 6 about race. For this census, Hispanic origins are not races. 5. Is this person of Hispanic, Latino, or Spanish origin?
No, not of Hispanic, Latino, or Spanish origin	No, not of Hispanic, Latino, or Spanish origin
Yes, Mexican, Mexican Am., Chicano	Ves, Mexican, Mexican Am., Chicano
Yes, Puerto Rican	Yes, Puerto Rican
Yes, Cuban	Yes, Cuban
Yes, another Hispanic, Latino, or Spanish origin — Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.	Yes, another Hispanic, Latino, or Spanish origin — Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.
Algentinean, colonnoian, bonnincan, Nicaraguan, Salvauoran, Spaniaru, and so on.	
6. What is this person's race? Mark X one or more boxes.	6. What is this person's race? Mark X one or more boxes.
U White	White
Black, African Am., or Negro	Black, African Am., or Negro
American Indian or Alaska Native — Print name of enrolled or principal tribe.	American Indian or Alaska Native — Print name of enrolled or principal tribe. 7
🗌 Asian Indian 🔲 Japanese 📃 Native Hawaiian	🗆 Asian Indian 🛛 Japanese 🔷 Native Hawaiian
Chinese Korean Guamanian or Chamorro	Chinese Korean Guamanian or Chamorro
Filipino Vietnamese Samoan	Filipino Vietnamese Samoan
Other Asian — Print race, for example, Hmong, Laotian, Thai, Other Pacific Islander — Print race, for example, Fijian, Tongan,	Other Asian — Print race, for example, Hmong, Laotian, Thai, Other Pacific Islander — Print race, for example, Fijian, Tongan,
Pakistani, Cambodian, and so on. 🟹 and so on. 🏹	Pakistani, Cambodian, and so on. $\mathbf{z}$ and so on. $\mathbf{z}$
Some other race — Print race.	Some other race — Print race.
7. Does this person sometimes live or stay somewhere else?	7. Does this person sometimes live or stay somewhere else?
No Yes — Mark X all that apply.	□ No □ Yes — Mark 🗴 all that apply.
In college housing For child custody	In college housing For child custody
In the military In jail or prison	In the military In jail or prison
At a seasonal In a nursing home or second residence	At a seasonal In a nursing home
If more people were counted in Question 1 on the front page,	If more people were counted in Question 1 on the front page,
continue with Person 5.	continue with Person 6.

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#### (SAMPLE U.S. CENSUS FORM CONT'D)

	Last Name	
	First Name MI	
	How is this person related to Person 1? Mark X ONE box.	
	Husband or wife Parent-in-law	
	Biological son or daughter D Son-in-law or daughter-in-law	
	Adopted son or daughter Other relative	
	Stepson or stepdaughter Roomer or boarder	
	Brother or sister     Housemate or roommate       Father or mother     Unmarried partner	
	Grandchild Other nonrelative	
	What is this person's sex? Mark X ONE box.	
	Male Female	Π
,	What is this person's age and what is this person's date of birth?	
	Please report babies as age 0 when the child is less than 1 year old.	$\bigcirc$ $>$
	Print numbers in boxes.	
	Age on April 1, 2010 Month Day Year of birth	_ (( _ )) ~
		$\mathcal{C}$
	NOTE: Please answer BOTH Question 5 about Hispanic origin and	
	Question 6 about race. For this census, Hispanic origins are not races.	$\sim$
	Is this person of Hispanic, Latino, or Spanish origin?	
	No, not of Hispanic, Latino, or Spanish origin	> <sup>1</sup> /
	<ul> <li>Yes, Mexican, Mexican Am., Chicano</li> <li>Yes, Puerto Rican</li> </ul>	
	Yes, Cuban	
	<ul> <li>Yes, another Hispanic, Latino, or Spanish origin — Print origin, for example,</li> </ul>	→ If more people
	Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on. Z	live here, turn
		the page and
,	What is this person's race? Mark X one or more boxes.	continue.
	U White	
	Black, African Am., or Negro	
	American Indian or Alaska Native — Print name of enrolled or principal tribe. 7	
	Asian Indian     Japanese     Native Hawaiian     Chinese     Guamanian or Chamorro	
	Chinese     Korean     Guamanian or Chamorro     Filipino     Vietnamese     Samoan	
	Other Asian — Print race, for Other Pacific Islander — Print	
	example, Hmong, Laotian, Thai, race, for example, Fijian, Tongan,	
	Pakistani, Cambodian, and so on. 🏹 🛛 and so on. 🏹	
	Some other roop $\square$	
	Some other race — Print race.	
	Does this person sometimes live or stay somewhere else?	
	No Ves — Mark X all that apply.	
	In college housing For child custody	
	□ In the military □ In jail or prison	
	At a seasonal In a nursing home	
	or second residence  For another reason	
	If more than air nearly were equated in Question 1 on	
	If more than six people were counted in Question 1 on the front page, turn the page and continue.	

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#### (SAMPLE U.S. CENSUS FORM CONT'D)

Person 7	Last Name		First Name	МІ
Sex Male Female	Age on April 1, 2010	Date of Month	Birth Day Year	Related to Person 1?  Yes No
Person 8	Last Name		First Name	МІ
Sex Male Female	Age on April 1, 2010	Date of Month	Birth Day Year	Related to Person 1? Yes No
Person 9				
	Last Name		First Name	MI
Cau	Ago on Anvil 1, 2010	Date of	Diath	Related to Person 1?
Sex Male	Age on April 1, 2010	Month	Day Year	Yes
Female				No
Person 10	Last Name		First Name	МІ
Sex	Age on April 1, 2010	Date of	Birth	Related to Person 1?
Male Female		Month	Day Year	Yes No
Person 11	Last Name		First Name	МІ
Sex Male Female	Age on April 1, 2010	Date of Month	Birth Day Year	Related to Person 1? Yes No
Person 12	Last Name		First Name	МІ
Sex Male	Age on April 1, 2010	Date of Month	Birth Day Year	Related to Person 1?
E Female				🔲 No
Thank	you for com 2010 Cen		ng your official form.	FOR OFFICIAL USE ONLY JIC1 JIC2

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MAL If your enclosed postage-paid envelope is missing, please mail your completed form to: U.S. Census Bureau National Processing Center 1201 East 10th Street Jeffersonville, IN 47132 If you need help completing this form, call 1-866-872-6868 between 8:00 a.m. and 9:00 p.m., 7 days a week. The telephone call is free. TDD — Telephone display device for the hearing impaired. Call 1-866-783-2010 between 8:00 a.m. and 9:00 p.m., 7 days a week. The telephone call is free. ¿NECESITA AYUDA? Si usted necesita ayuda para completar este cuestionario, llame al 1-866-928-2010 entre las 8:00 a.m. y 9:00 p.m., 7 días a la semana. La llamada telefónica es gratis. The U.S. Census Bureau estimates that, for the average household, this form will take about 10 minutes to complete, including the time for reviewing the instructions and answers. Send comments regarding this burden estimate or any other aspect of this burden to: Paperwork Reduction Project 0607-0919-C, U.S. Census Suratu, AMSD-3K188, 4600 Silver Hill Road, Washington, DC 20233. You may e-mail comments to <Paperwork@census.gov>; use "Paperwork Project 0607-0919-C" as the subject. Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget.

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Table 1-1

#### Selected Demographic Characteristics of Older Americans by Ethnicity– Age 65 and Over, U.S. Census, 2000

		Percent In	With	Living	Education***		Speak Little or	
Populations	Number 65+	of 65+	Poverty§	Disability	Alone	< 9 yrs.	college +	No English**
Total Older Americans	34,991,753	100%	9.9%	41.9%	27.8%	16.7%	33.5%	4.0%
Ethnic Categories								
African American/ Black* (Non-Hispanic)	2,822,950	8.0%	22.2%	52.7%	29.0%	30.5%	20.6%	0.8%
American Indian*	138,439	0.4%	22.4%	57.8%	22.9%	36.5%	21.7%	10.6%
Asian Americans*	800,795	2.3%	11.9%	40.8%	12.9%	30.9%	34.0%	41.0%
Asian Indian	66,834		8.3%	42.1%	6.0%	31.6%	40.0%	35.4%
Cambodian	6,570		22.7%	62.3%	4.4%	73.7%	9.5%	79.7%
Chinese	235,995		15.7%	36.8%	14.0%	38.0%	33.3%	59.8%
Filipino	164,768		8.2%	47.1%	6.7%	29.4%	42.3%	22.6%
Hmong	4,698		27.4%	59.2%	5.1%	91.6%	3.0%	83.8%
Japanese	161,288		5.6%	33.0%	21.9%	11.3%	33.5%	10.7%
Korean	68,505		20.9%	40.0%	19.0%	31.7%	32.1%	63.9%
Laotian	6,106		18.0%	54.9%	3.8%	72.9%	7.3%	79.2%
Pakistani	4,804		12.7%	45.2%	2.6%	30.7%	38.9%	39.8%
Vietnamese	58,241		15.0%	54.2%	7.0%	30.7%	38.9%	73.5%
Native Hawaiian & Other Pacific Islanders*	20,821	<0.1%	9.8%	48.5%	12.7%	24.6%	23.5%	12.1%
White (Non-Hispanic)*	29,244,860	83.6%	7.4%	40.4%	28.6%	12.9%	35.8%	15.8%
Two or More Races	366,845	1.0%	16.5%	51.8%	25.5%	28.6%	28.3%	16.9%

#### Developed by Wendy King, MS & Gwen Yeo, PhD for Institute of Medicine

\* Alone (as opposed to in combination with other races)

- \*\* Speaks English "not well" or "not at all"
- \*\*\* Reported as "less than 9 years" and "some college no degree, associate degree, bachelor's degree, or graduate or professional degree"

§ Income below poverty, 1999



Individuals who identify themselves as "Hispanic/Latino" or in one of the populations listed as "Ancestry categories" also identify themselves in one of the racial categories.

**Source:** U.S. Census Bureau, Census 2000 Summary Files 1, 2, 3, & 4, Table also appears in commissioned paper *How will the U.S. Health Care System Respond to the Challenge of the Ethnogeriatric Imperative?* for the Institute of Medicine (IoM) by G. Yeo as background for the report Retooling for an Aging America. Paper available from <u>tharris@nas.edu</u>.

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Selected Demographic Characteristics of Older Americans by Ethnicity– Age 65 and Over, U.S. Census, 2000 (continued)

	N 1 05	Percent	In	With	Living	Education***		Speak Little or
Populations	Number 65+	of 65+	Poverty§	Disability	Alone	< 9 yrs.	college +	No English**
Total Older Americans	34,991,753	100%	9.9%	41.9%	27.8%	16.7%	33.5%	4.0%
Hispanic/Latino	1,733,591	5.0%	18.8%	48.5%	18.2%	51.1%	15.8%	38.4%
Mexican	809,842		18.3%	48.5%	15.8%	59.0%	11.6%	35.1%
Cuban	228,677		19.8%	45.7%	19.7%	42.6%	23.1%	59.6%
Puerto Rican	191,295		23.2%	55.1%	25.5%	48.0%	15.1%	33.8%
Dominican	36,648		28.5%	51.2%	15.2%	66.8%	7.3%	69.6%
Central American	54,151		19.0%	44.6%	12.8%	53.0%	17.3%	55.5%
South American	76,791		15.7%	39.8%	15.0%	32.3%	26.3%	53.3%
Ancestries								
Arab	85,822		10.2%	40.1%	23.8%	16.9%	38.7%	15.8%
Armenian	57,922		10.2%	44.2%	23.9%	21.1%	36.7%	29.1%
Haitian	28,050		20.9%	44.7%	12.5%	36.9%	20.0%	51.5%
Russian	416,139		7.1%	36.3%	28.2%	5.5%	59.5%	7.9%
SubSaharan African	88,922		22.5%	50.0%	30.1%	31.3%	22.5%	6.7%
Ukranian	154,057		11.2%	44.5%	31.0%	17.0%	36.1%	17.4%

Developed by Wendy King, MS & Gwen Yeo, PhD for Institute of Medicine

- \* Alone (as opposed to in combination with other races)
- \*\* Speaks English "not well" or "not at all"
- \*\*\* Reported as "less than 9 years" and "some college no degree, associate degree, bachelor's degree, or graduate or professional degree"
- § Income below poverty, 1999



Individuals who identify themselves as "Hispanic/Latino" or in one of the populations listed as "Ancestry categories" also identify themselves in one of the racial categories.