APRIL 25, 2016 THE IMPACTS RACE IN HEALTH CARE

ealth care is among one of the

most important topics across the globe. However, many parts of the world handle health care differently for various reasons. While race has played a role in the treatment in health for individuals in the past, it still continues to play a vital role in the experience individuals undergo in the health care system because of their race. Not only can we study the affects of race and individuals' experiences solely based on race but more factors such as their socio-economic status (SES) is a playing factor on the disparities of race in health care.





RACE AND Health care

Many people may not think about how race plays a role in health care and who receives it adequately. This isn't just a black and white topic and takes more analysis than the idea of race.

Generalizations are avoided to handle this issue equally without biases. Research clearly demonstrates that African Americans and other minorities do, in fact, suffer disproportionately from certain diseases and are poorer compared to white Americans. Disadvantaged individuals can find themselves struggling to receive the proper care. Disadvantaged individuals sometimes find

themselves in

unfortunate situations and can't find the proper resources.

Obesity is a huge problem in the United States and certain people suffer more than others for many reasons. According to The State of Obesity, families in predominantly minority and low-income neighborhoods have limited access to supermarkets and fresh produce. These issues are solely not based off of race and are intertwined with

many more such as class and socioeconomic status.

SOCIOECONOMIC AFFECTS ON HEALTH

Class independently influences health and the gap in wealth between whites and racial minorities continues to widen-the median wealth of white households is now 20 times that of African American households

FACTS

- African American adults are nearly 1.5 times as likely to be obese compared with White adults
- Lower-incomes and poverty correlate strongly with an increase in obesity, since less nutritious, calorie-dense foods are less expensive than healthier foods
- A study of selected communities found that only 8 percent of African American residents lived in areas with one or more supermarkets, compared with 31% of White residents
- 1 in 4 African American families are food insecure

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The potential power of the socioeconomic status (SES) paradigm in understanding health disparities—including racial/ethnic disparities—is evident in the fact that socioeconomic differences in health outcomes have been widely documented for most health conditions in most countries.

Addressing these disparities requires making healthier choices easier in people's daily lives by removing obstacles that make healthy, affordable food less accessible and ensuring communities have more safe and accessible places for people to be physically active.

HOSPICE CARE

Hospice care is among one of the few places where one can receive supportive and compassionate care during their end of life. However disparities in health care still affect those in hospice care because of their race According to Barbara Noah a professor from Harvard, Much of the explanation for these disparities in end-of-life care appears to lie in problems with

the inadequate health care options African Americans receive compared to White Americans has more to do than just race. Many doctors, according to Barbara Noah, struggle with necessary skills, time pressure, discomfort about confronting death and dying, biases and assumptions

communication between the doctors and the patients so that this issue in hospice care does not happen. Each resident deserves equal treatment despite of race and physicians should be informed about their patient's background to ensure the proper care is being achieved.



communication and trust between physician and patient, although broader influences of culture and religious belief also play a role. The reasoning behind

about patients, or simply a lack of awareness of the issues involved in end-of-life care. Residents and families should ensure that there is ease The long-term goal is to teach and support communication skills at the end of life that will foster understanding and trust between physician and patient, regardless of the race of either. NEWSLETTER ISSUE