18.1D: Aging and Race

Individuals with different racial backgrounds tend to have different experiences with old age.

Learning Objectives

• Examine the racial implications of aging, particularly for minority groups

Key Points

• Minority populations are more likely to experience elder abuse from relatives and caretakers.
• Minority populations are also more likely to experience health problems associated with old age.
• Many of the medical differences between different racial groups are better explained by differences in socioeconomic status rather than race.

Key Terms

• elder abuse: Elder abuse is a general term used to describe certain types of harm to older adults.
• social determinants of health: The economic and social conditions that influence individual and group differences in health status.
Aging and its Trials: Are the problems the elderly face a result of their age, or are their other, more influential, factors involved, such as race?

Individuals of different racial backgrounds experience aging—and the health issues associated with it—differently. Before turning to the medical concerns that accompany aging, one should note that elders of different racial backgrounds also experience different frequencies of elder abuse. Elder abuse is a general term to describe certain types of harm that are inflicted upon older adults. The most common form of elder abuse is neglect or improper care for vulnerable seniors. Unfortunately, this is usually inflicted by people whom the elder trusts and who are responsible for caring for the elder, such as family members or caretakers at elder homes. Research indicates that black senior citizens are more likely to be abused than white citizens.

Further, medical concerns present differently for white seniors and minority seniors. Black and Hispanic seniors are more likely to encounter cardiac problems earlier than white seniors. However, these outcome disparities are not usually the result of biological determinants of health, which means that minority populations are not biologically less healthy than white populations. Rather, the disparity in medical outcomes is more likely attributed to social determinants of health, which are socioeconomic conditions that bear on health.

For example, black and Hispanic populations are more likely to encounter financial hardship and therefore eat less healthy food, which potentially leads to health problems. In addition, individuals from a poorer socioeconomic background are less likely to have had access to healthcare throughout their whole lives. This lack of access ultimately
leads to medical concerns in old age. Thus, while one can make generalizations about elder health by comparing racial categories, these differences are frequently caused by differences in socioeconomic status rather than race.