

Source:

Jenkins Morales, M., Robert, S. A. (2019). *Black-white disparities in moves to assisted living and nursing homes among older Medicare beneficiaries. The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences*. <https://doi.org/10.1093/geronb/gbz141>

Racial Disparities in Moving to Nursing Homes vs. Assisted Living

Historically, Black older adults have been less likely to use nursing homes than Whites, but recently the number of Black nursing home residents has increased more than can be explained due to population growth, while the number of White nursing home residents has decreased. Coinciding with this shift, the assisted living industry has experienced tremendous growth, primarily among White older

adults with greater financial resources. Although nursing homes generally provide the highest level of care, many older adults want to avoid nursing homes and assisted living settings might offer a preferred alternative.

A recent study by **IOA Affiliate Stephanie Robert** & co-author Meghan Jenkins Morales (both from the Sandra Rosenbaum School of Social Work, UW-Madison) used data from the National Health and Aging Trends Study (NHATS) to examine black-white disparities in moving to a nursing home vs. assisted living.

Systemic Racism & Inequities in Long-Term Care

Results showed that Black older adults had fewer financial resources (lower income; less likely

to own a home; more likely to be on Medicaid, which covers nursing home costs) and worse physical health, such as difficulty walking and completing activities of daily living (laundry, shopping, cooking). Racial disparities in health and economic opportunity might thus explain why *more* Blacks moved to nursing homes than Whites and possibly indicate that avoiding nursing home placement is a greater challenge for Black older adults.

However, having fewer financial resources and worse health did not fully explain why *fewer* Blacks moved to assisted living. This may be due to other factors related to systemic racism in long-term care options that were not measured in this study, such as discrimination and segregation. For instance, assisted living settings are more likely to be located in higher income areas with a lower proportion of Black residents. Black older adults are more likely to live in lower income areas even if they have incomes similar to Whites.

Other factors possibly contributing to inequities in access to long-term care options include state variations in whether Medicaid covers assisted living costs, stricter regulations in who can be admitted to nursing homes, and racial differences in care preferences.

Future studies need to address these issues, as well as the question of whether there are inequities in *quality* of care, in addition to access to care. Acknowledging that the long-term care system was built and continues to evolve within a context of systemic racism is a first step toward the development of more equitable long-term care options in the United States.

Assisted Living (AL) has seen increased use among Whites:

- AL is a residential setting that promotes maximum independence while providing personal care (housekeeping, bathing, meals).
- It is primarily available to older adults with greater financial resources.
- It is seldom covered by public financing options like Medicaid, so costs are normally paid out of pocket.

Nursing Homes (NH) have seen increased use among Blacks:

- NH provide less independence and are normally for those who need more medical care than is offered in assisted living.
- They are more expensive than AL, but costs are covered for low income adults by Medicaid.



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Midlife in the United States (MIDUS)



is an ongoing study administered by the Institute on Aging that follows behavioral, psychological, social, and biological aging of over 11,000 US residents. More than 1350 scientific publications have used MIDUS data.

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2020 Colloquium Rescheduled:

The 2020 Colloquium on Aging was cancelled due to COVID-19; however, it is rescheduled for:

Sept. 23, 2021

See more info at:
<https://aging.wisc.edu/annual-colloquium>

New Findings from MIDUS

Pervasive Discrimination Impairs Health, Especially for African Americans



Research has shown that African Americans are more likely to experience discrimination and have poor health than Whites. Although African Americans typically report different types of discrimination (based on race) than Whites (based on gender or appearance), prior studies have not shown racial differences in associations between discrimination and health. However, such studies have considered only one type of discrimination. This MIDUS study looked at multiple types: everyday discrimination (treated with less courtesy in restaurants), lifetime discrimination (prevented from renting an apartment), and workplace discrimination (passed up for promotions).

Researchers looked at whether pervasive discrimination, defined as having experienced high levels of discrimination in all three categories, was associated with allostatic load (AL), a measure of “wear & tear” on the body. Higher AL has been associated with greater morbidity and higher mortality.

Results showed that more than twice the number of African Americans reported experiencing pervasive discrimination, although it was associated with greater allostatic load in both Blacks & Whites. African Americans who experienced the highest levels of pervasive discrimination showed the strongest link to AL, suggesting that experiencing discrimination past a certain threshold may be particularly detrimental for the health of African Americans.

Source: Van Dyke, M. E., Kau'i Baumhofer, N., Slopen, N., Mujahid, M. S., Clark, C. R., Williams, D. R., & Lewis, T. T. (2020). *Pervasive discrimination & allostatic load in African-American & White adults. Psychosomatic Medicine*, <https://dx.doi.org/10.1097/psy.0000000000000788>

Increased Pain May Fuel Drug Epidemic

Deaths related to drug abuse have increased dramatically in the US since the late 1990s. One explanation has been aggressive marketing of opioids by pharmaceutical companies, but other factors likely play a role. This MIDUS study looked at how growing drug misuse is related to changes in mental health and reported levels of pain over two decades. Chronic pain can increase negative emotions, both of which can be relieved by taking opioid painkillers. These drugs can change the brain's circuitry, making it difficult to gain pleasure from anything other than the drug, which can lead to addiction.

Results showed that between the mid-1990s and early 2010s **those who had lower incomes and less education (both Blacks and Whites), had the most difficulties:**

- Reported **misuse of drugs** (taking without a doctor's prescription or in larger amounts than prescribed) **increased, particularly among older adults (aged 50-76).**
- Mental health (depression and negative emotions) also deteriorated more among the disadvantaged, but showed little change among those with higher incomes.
- Overall reports of joint and back pain increased dramatically, especially among the disadvantaged. The number reporting daily back pain nearly doubled.



Pain explained drug misuse more than deteriorating mental health:

- Although mental distress increased over time and was strongly associated with drug problems, it accounted for only a small part of the growth in drug misuse.
- Increased pain explained a larger share of drug misuse, particularly for prescription painkillers. Among disadvantaged older adults, increased pain explained the increase in drug use three times more than did deteriorating mental health.

Obesity May Increase Pain:

Some suggest reports of chronic pain have increased because the population of older adults has grown, but increased pain has been observed in all adult age groups. The authors suggest obesity may be a more likely cause. Obesity rates have more than doubled in the last two decades, and being obese is known to increase risk of arthritis and lower back pain.



Thus, interventions to combat pain & obesity, as well as to improve mental health, may be needed to address the drug epidemic.

Having a Sense of Purpose May Help:

Another MIDUS study found that having a higher sense of purpose in life was linked with decreased likelihood of misusing drugs 10 years later. Those with a strong sense of purpose follow broader goals that give their lives direction and meaning. They may be less likely to misuse drugs because having a sense of purpose is associated with higher pain tolerance, less chronic illness, and less depression. Other studies suggest that cognitive behavior therapy and volunteering can increase sense of purpose.



Sources:

Glei, D. A., & Weinstein, M. (2020). Mental health, pain, and risk of drug misuse: A nationwide cohort study. *Addictive Behaviors*, <https://doi.org/10.1016/j.addbeh.2020.106467>

Kim, E. S., Ryff, C., Hassett, A., Brummett, C., Yeh, C., & Strecher, V. (2020). Sense of purpose in life and likelihood of future illicit drug use or prescription medication misuse. *Psychosomatic Medicine*, <https://doi.org/10.1097/psy.0000000000000842>

Aging Research Continues Despite Cancelled Conferences

Social distancing policies due to COVID-19 have cancelled nearly all scientific meetings. **IOA Affiliate Dudley Lamming** (Dept. of Medicine, UW-Madison) notes these cancellations reduce the sense of community among scientists and could have a negative impact on aging research, which is problematic since older people are particularly vulnerable to the virus. In response, he created a virtual community of biology of aging researchers.

Prof. Lamming, along with Dr. William Mair of Harvard, established an interactive online seminar called *Aging Science Talks: Science for the Community*. The seminars use technologies broadly available at academic institutions that are generally low-cost to anyone with internet access.

Speakers thus far have been from over 44 different institutions, 15 states, and 9



countries. The range of topics has been expansive, with presentations by both senior investigators and those ear-

lier in their careers. Dr. Lamming has received feedback praising the community feeling the seminars have inspired, and attendance has been comparable to many national meetings. He plans to continue the seminars as long as scientists need to socially isolate, and possibly afterwards.

For an FAQ about the online tools used to host the interactive seminar community see: <http://www.lamminglab.org/agingscitalks.html>

Source: Lamming, D. W., Carter, C. S. (2020). *Maintaining a scientific community while social distancing. Translational Medicine of Aging*, <https://doi.org/10.1016/j.tma.2020.05.002>



Impact of Cancelled Conferences:

If researchers can't meet face-to-face, they:

- lose the ability to share published and non-published data through talks and poster presentations
- miss making new connections that may lead to collaborations & breakthroughs.

Conferences may be particularly important for early career researchers:

- who need to stay connected with the scientific community to develop their research programs and find collaborators & mentors.
- Conferences are also a venue for job interviews for those who have recently completed their doctoral degrees.
- In these uncertain times, virtual seminars may help maintain confidence that scientific careers can continue.

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*Worry is like a rocking chair:
It gives you something to do
but never gets you anywhere.*

~ Erma Bombeck

Pandemic Increases Awareness of Undervalued Nursing Home Staff

The pandemic has shown that many workers who are underpaid & undervalued are providing essential services to our society. Included are nurses & nurse assistants working at nursing homes. **IOA Affiliate Barb Bowers** (School of Nursing, UW-Madison) co-authored an article that looked at how longstanding devaluation of these workers has contributed to a nursing home crisis that is affecting both residents and staff:

- Experts predict that most healthcare worker deaths from COVID-19 will be among nursing home staff.
- In some states, as many as 82% of virus-related deaths have been among nursing home residents.

Chronic Staffing Problems Impair Pandemic Response:

- Prevalence of low pay and part-time positions among nursing home staff have led to chronic understaffing problems, which make it hard to reliably monitor residents for COVID-19 symptoms and ensure social distancing, especially among those with dementia.
- Some are forced to work at multiple nursing homes to make a living wage, which may spread the virus between locations, in spite of best efforts.
- Understaffing problems have worsened due to staff being out sick with the virus and loss of assistance from family & volunteers who can no longer help due to bans on visitors.

To Improve Working Conditions at Nursing Homes:

- Provide more engagement between supervisors & staff with an emphasis on staff appreciation.
- Support morale by displaying letters of gratitude from families and the public in walkways.
- Offer free stress management & grief support services.
- Provide staff meals & snacks as well as a “quick market” so staff can buy food on their way home.
- To avoid burnout, assure staff get rest periods and don’t have to work overtime.
- Offer full-time employment, hazard pay, and paid sick leave so staff can stay home if they are ill.
- Provide personal protective equipment to the 70% of nursing homes unable to get sufficient supplies.
- Longer-term solutions need to address the broken funding system and begin an essential redesign of nursing homes to combat their poor public image.



If working conditions are not improved, future recruitment of staff may be an even greater challenge, which could fuel the next health care crisis.

Source: McGilton, K. S., Escrig-Pinol, A., Gordon, A., Chu, C. H., Zúñiga, F., Sanchez, M. G., . . . Bowers, B. (2020, June 11). Uncovering the devaluation of nursing home staff during COVID-19: Are we fuelling the next health care crisis? *Journal of the American Medical Directors Association*, <https://doi.org/10.1016/j.jamda.2020.06.010>