NEW REPORT: How Older Adults View Racial and Ethnic Discrimination in the U.S. Health Care System

One in Four Older Adults of Color Say Health Care Professionals Have Treated Them Unfairly or Ignored Their Health Concerns Because of Race or Ethnicity

NEW YORK (April 21, 2022) — Racial and ethnic discrimination in the U.S. health care system is taking a toll on the health of older Americans and preventing them from getting needed care, according to a new Commonwealth Fund report.

The report finds that one in four Black and Latinx/Hispanic adults age 60 and older reported they have experienced discrimination from health professionals, who either treated them unfairly or did not take their health concerns seriously because of their race or ethnicity. More than a quarter (27%) of older adults who reported experiencing discrimination said they did not get the care they felt they needed as a result.

The authors also find that older adults who report health care discrimination are more likely to have worse health, face economic hardships, and be more dissatisfied with their care than those who have not experienced discrimination.

The report, How Discrimination in Health Care Affects Older Americans, and What Health Systems and Providers Can Do, offers unique insights about the consequences of perceived health care discrimination for older adults, who tend to use more health services than younger populations. Among other key findings:

• Across 11 high-income countries, U.S. older adults were the most likely to report that the health system treats people differently because of their race or ethnicity. Thirty-two percent of U.S. older adults made this statement, nearly double the percentage of older adults in Canada (17%), the country with the next-highest rate.

U.S. Black women and men are the most likely of any group to believe the health care system discriminates based on race and ethnicity. Across racial and ethnic groups, more women than men reported this.

• Nearly half of U.S. older adults who experienced racial or ethnic discrimination said they were in fair or poor health — twice the rate of those who did not experience discrimination. In fact, three-quarters of adults who believe they have been discriminated against have three or
more chronic conditions or need help with daily activities. They are also far more likely than other older adults to feel socially isolated, have a mental health diagnosis, or undergo financial hardship.

The authors note that the rapid aging of the U.S. population and older adults’ high use of health care services make it imperative to end discrimination across the health care system. Their policy recommendations include:

- **Promote transparency and accountability by calling out discrimination and publicly reporting discrimination data.** Providing patients with the opportunity to report experiences with discrimination in standard satisfaction surveys is one way to do this.

- **Educate medical professionals on the history of racism in health care and train them in how to address their own implicit biases.** Health care professionals must learn to recognize and discard stereotypes that can affect treatment decisions.

- **Diversify the U.S. health care workforce.** For example, medical schools should be accountable for improving diversity among faculty and students. One way to diversify is by focusing recruitment efforts on historically Black colleges and universities and Hispanic-serving institutions.


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**About the Commonwealth Fund**

The mission of the Commonwealth Fund is to promote a high-performing health care system that achieves better access, improved quality, and greater efficiency, particularly for society’s most vulnerable, including low-income people, the uninsured, and people of color. Support for this research was provided by the Commonwealth Fund. The views presented here are those of the authors and not necessarily those of the Commonwealth Fund or its directors, officers, or staff.

**FROM THE EXPERTS:**

Michelle M. Doty, lead study author and Commonwealth Fund Vice President for Organizational Effectiveness, Survey Research, and Evaluation

“The consequences of health care discrimination against older adults of color are serious. People are not getting the care they need, their concerns are being ignored, and their health is suffering as a result. As a society, we can work to end discrimination in the health system, first by recognizing discrimination and then actively working to dismantle it.”

Laurie Zephyrin, M.D., study coauthor and Commonwealth Fund Vice President for Advancing Health Equity

“What we’re seeing is that racial and ethnic discrimination in the U.S. health care system is not uncommon — in fact, it is dramatically more common than in other high-income countries. Biases against older people of color are experienced throughout the health care system, and they need to be intentionally rooted out. Health care organizations must be accountable for treating all patients equitably. Policies and practices can help ensure this accountability.”