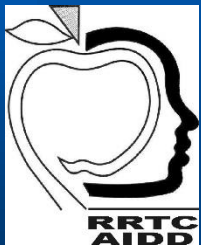


# Racial and Ethnic Disparities Among Adults with IDD and their Family Caregivers

Sandy Magaña, Miguel Morales

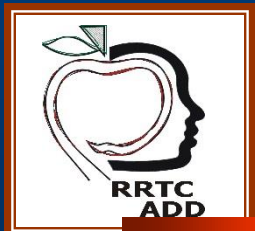
University of Illinois at Chicago

Research and Training Center on Health  
and Intellectual Disabilities



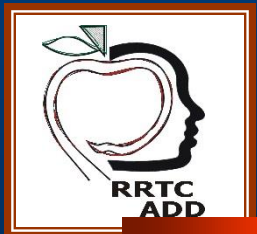
# Overview of presentation/ workshop

- Introduction
- Findings from study on health among Latino and African American mothers of children/adults with IDD
- Findings from study on racial and ethnic disparities of adults with IDD
- Policy and community-based interventions
- How agencies can address the health of people with IDD and their families



# Families of adults with developmental disabilities

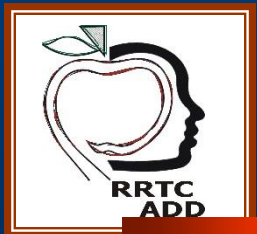
- More than half of adults with developmental disabilities live with their families
- Latino and African American persons with developmental disabilities are more likely to live with their families
- Parents are often involved with caring for as long as they are able



# Research on minority caregivers:

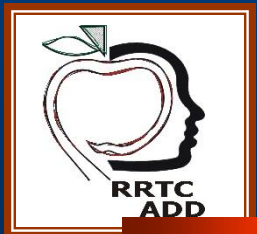
## Handful of studies

- **Studies on African American caregivers**
  - Report less burden, similar levels of depression compared to white caregivers
  - Religion an important coping resource
- **Studies on Latino caregivers**
  - Experience burden and depression at higher levels than their white counterparts
  - Family support and family well-being important for maternal well-being
- **Both groups have been found to be severely disadvantaged (low education, income and poor health).**



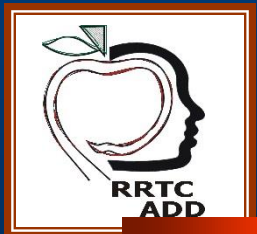
# People of color: unique experiences

- people of color experience environmental contexts and ecological circumstances that are not shared by whites
- Chronic exposure to many stressors
- Health disparities – especially chronic conditions



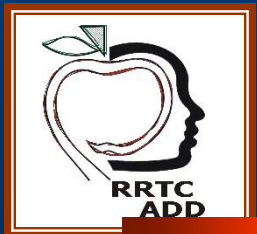
# Within group studies are important

- That compare African American caregivers to African American non-caregivers with similar socio-demographic characteristics
- Similarly for Latinos and other groups
- That examine not only emotional well-being, but physical health impacts
- That are based on representative samples



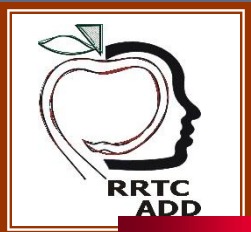
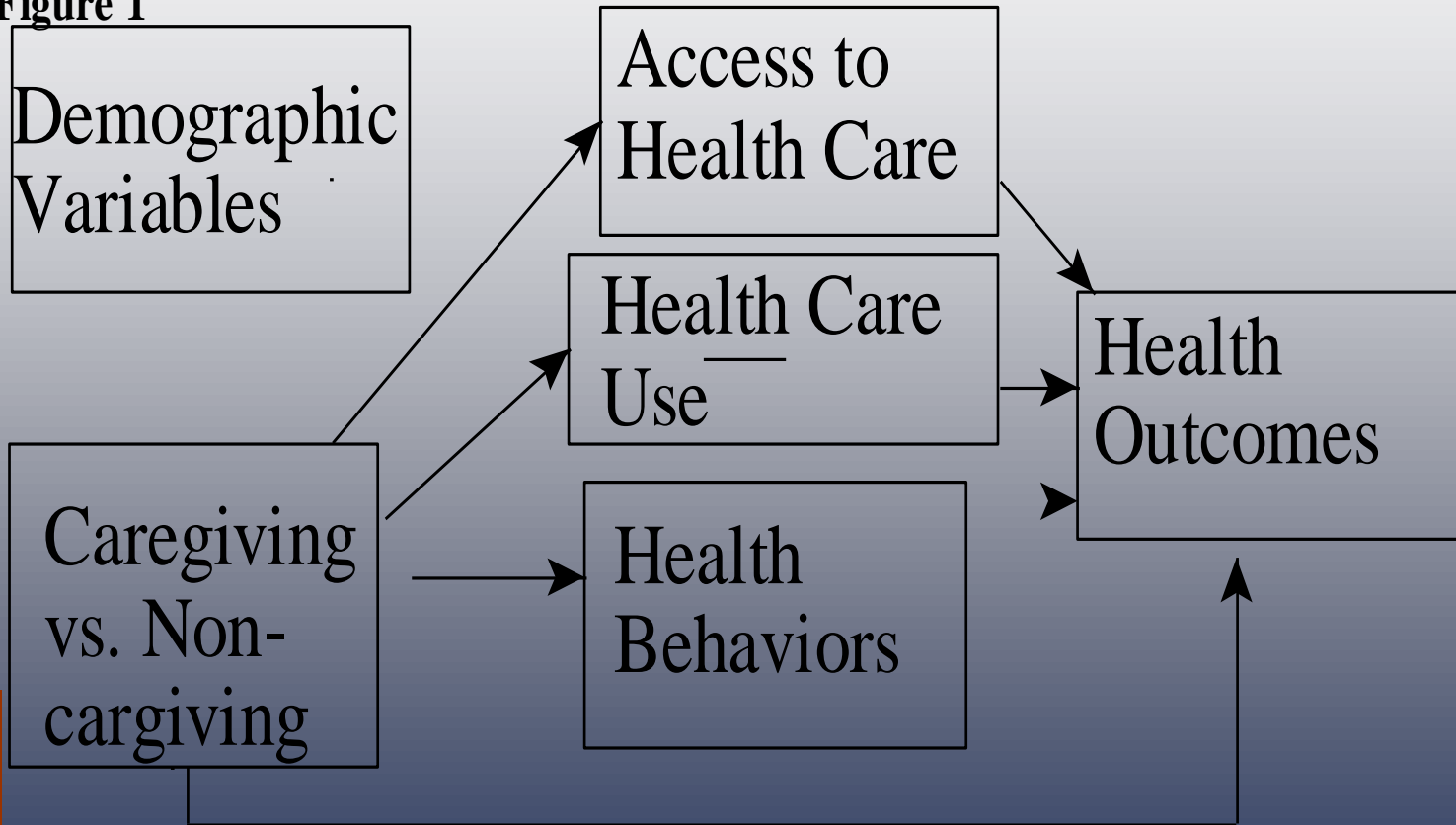
# Current study

- Used a representative sample from which both comparison groups are drawn
- Examine similar issues within each group: African American and Latino caregivers
- Examine mental and physical health outcomes
- health behaviors, health care use and access of caregivers



# Conceptual Framework

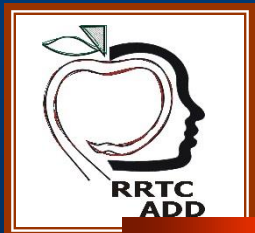
Figure 1





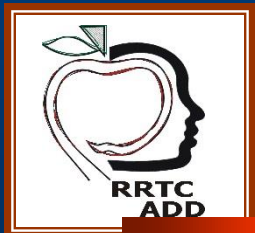
# Sample

- **National Health Interview Survey (NHIS)**
  - multi-purpose health survey conducted by the National Center for Health Statistics (NCHS), Center for Disease Control and Prevention (CDC)
  - over-sampled both Latino and African American populations
  - Used 3 years of the NHIS combined to ensure large enough DD minority sample



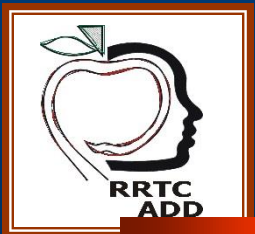
# Sample

- 83 Latina and 79 Black American mothers who were 40 and older and co-resided with a child with a DD
- Mean age of the persons with DD was 17.9 (SD = 11.3)
- 59.4% were male
- Majority identified as having mental retardation, or other developmental disability
- Comparison- 1667 Latina, 1087 Black



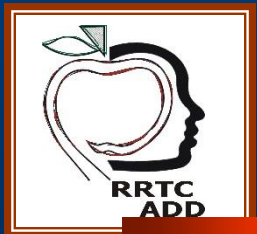
# Measures: health outcomes

- Outcome measures:
  - Diagnosed with hypertension, heart problems, asthma, diabetes
  - Conditions that limit activity: arthritis, hypertension, diabetes
  - 5 depressive symptom items

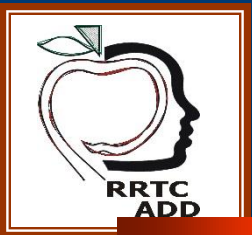
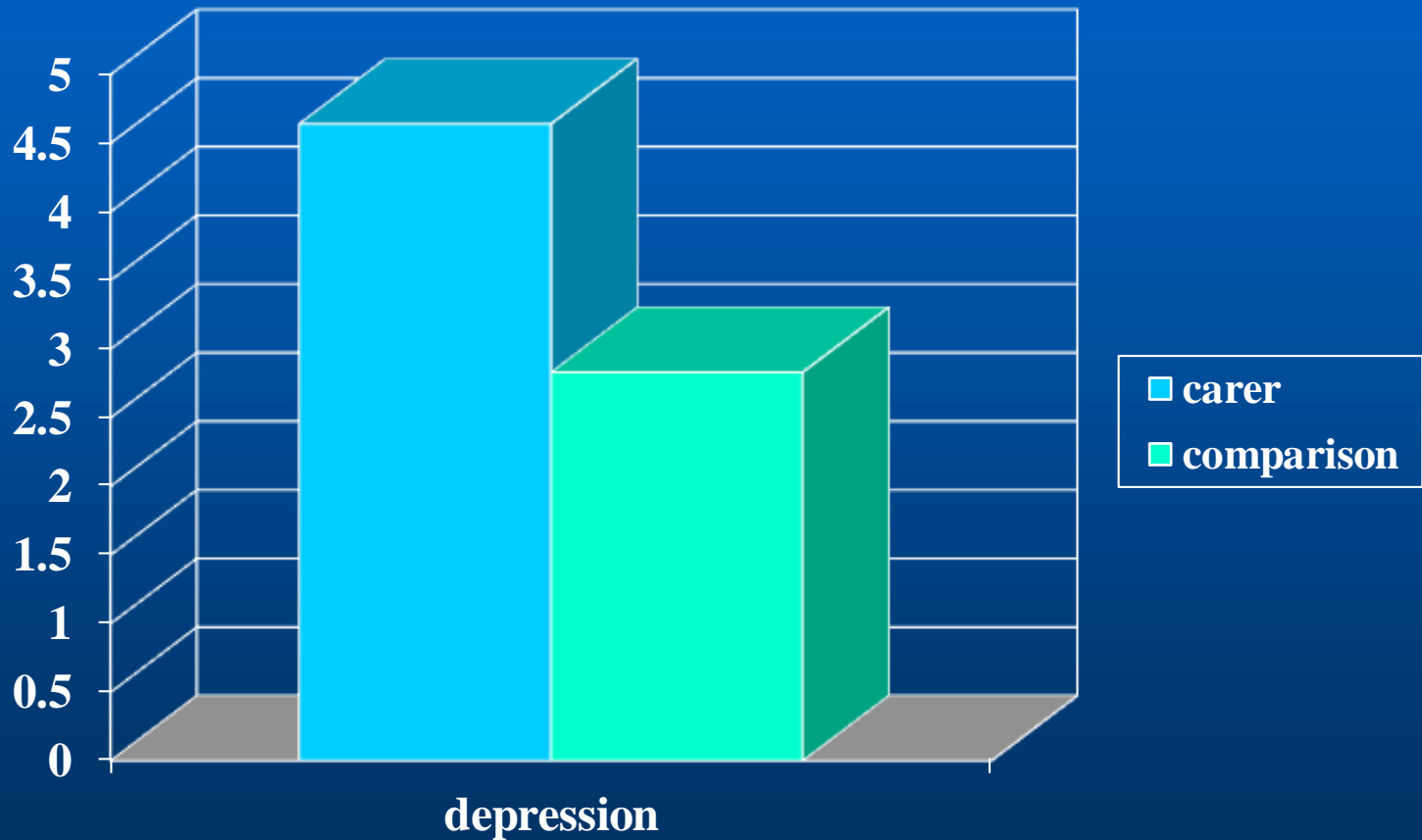


# Measures: health behaviors, health care use and access

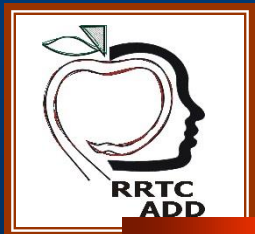
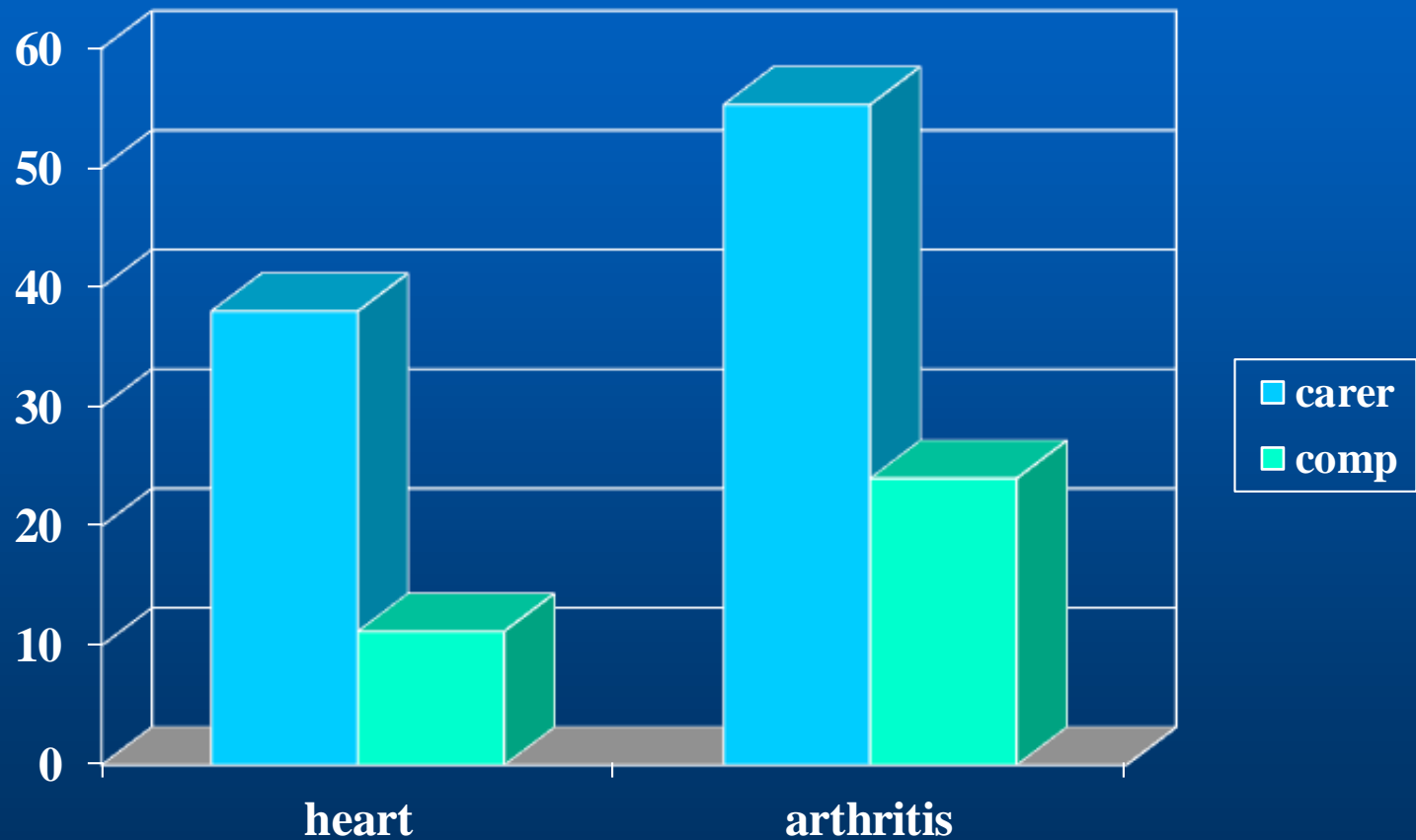
- Health behaviors: smoking, drinking, exercise, obesity
- Health care use: have seen mental health professional, general practitioner, OT or PT
- Access: can't afford MH care or prescription meds, have insurance



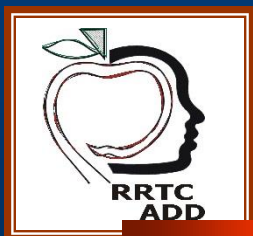
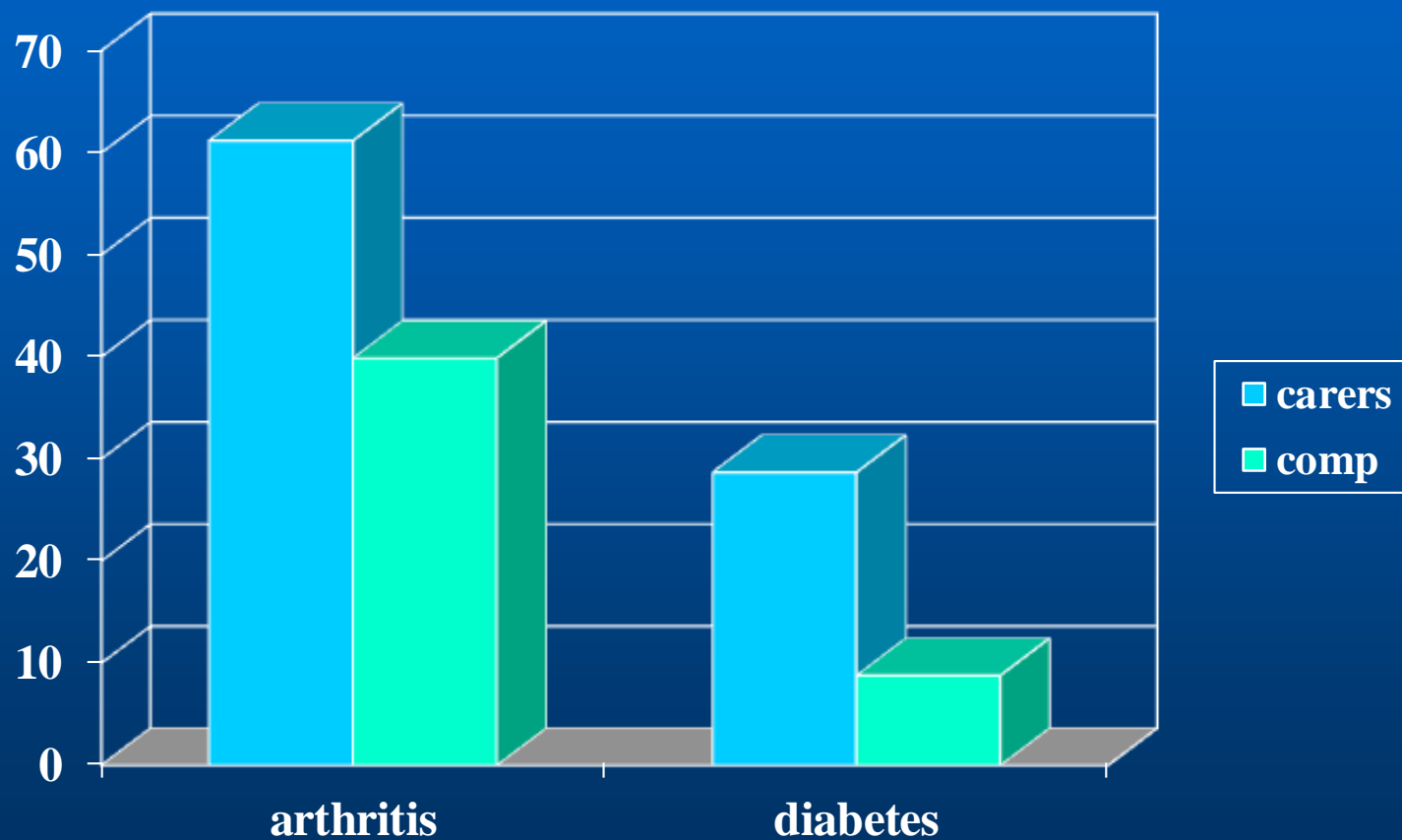
# Findings: Midlife Latinas mental health



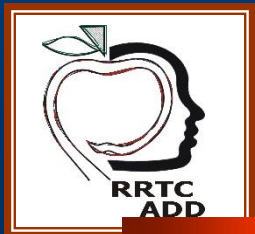
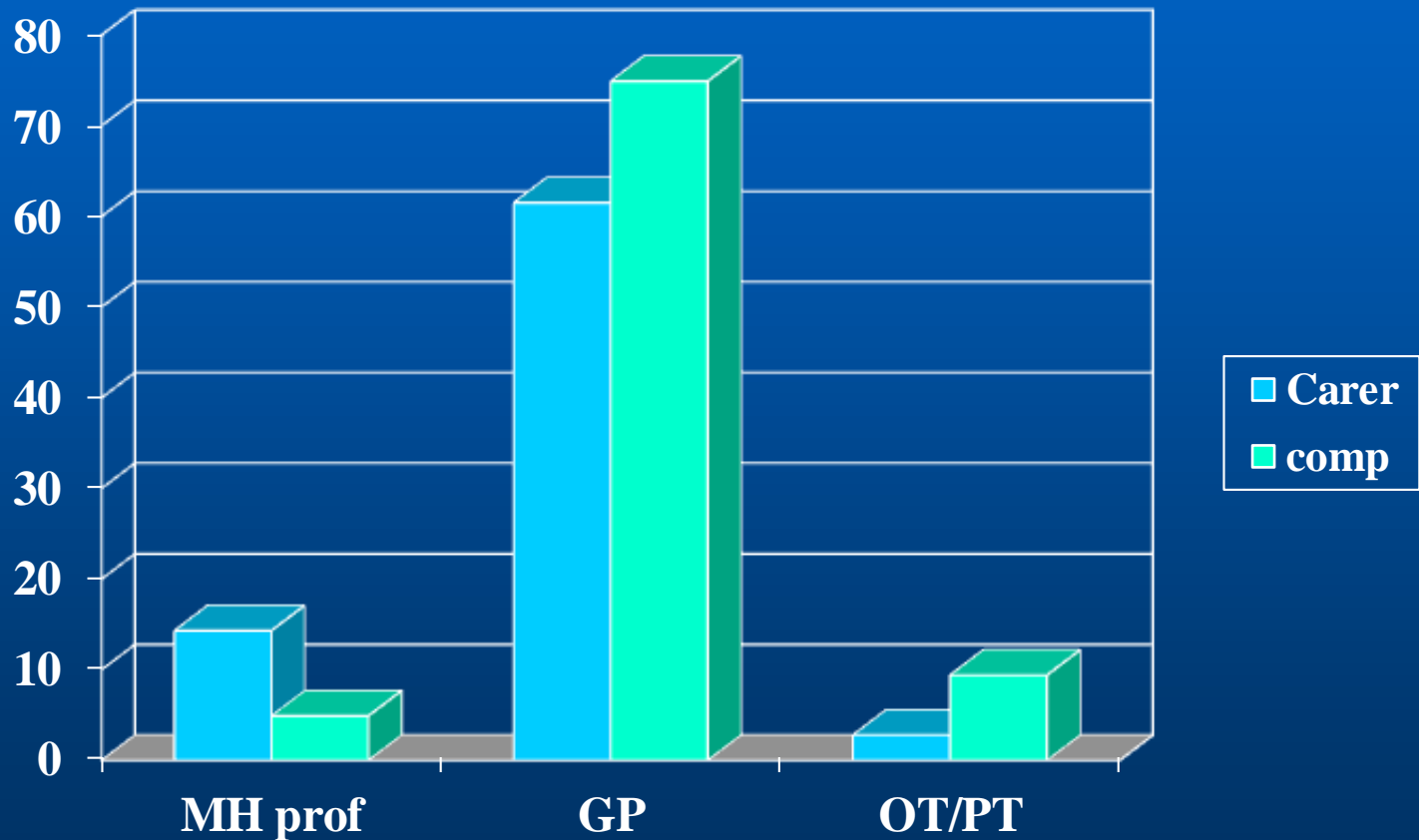
# Older Latinas: physical health



# Older Black American women

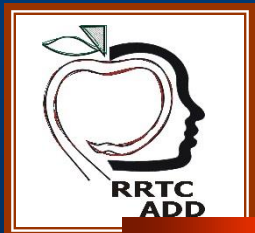
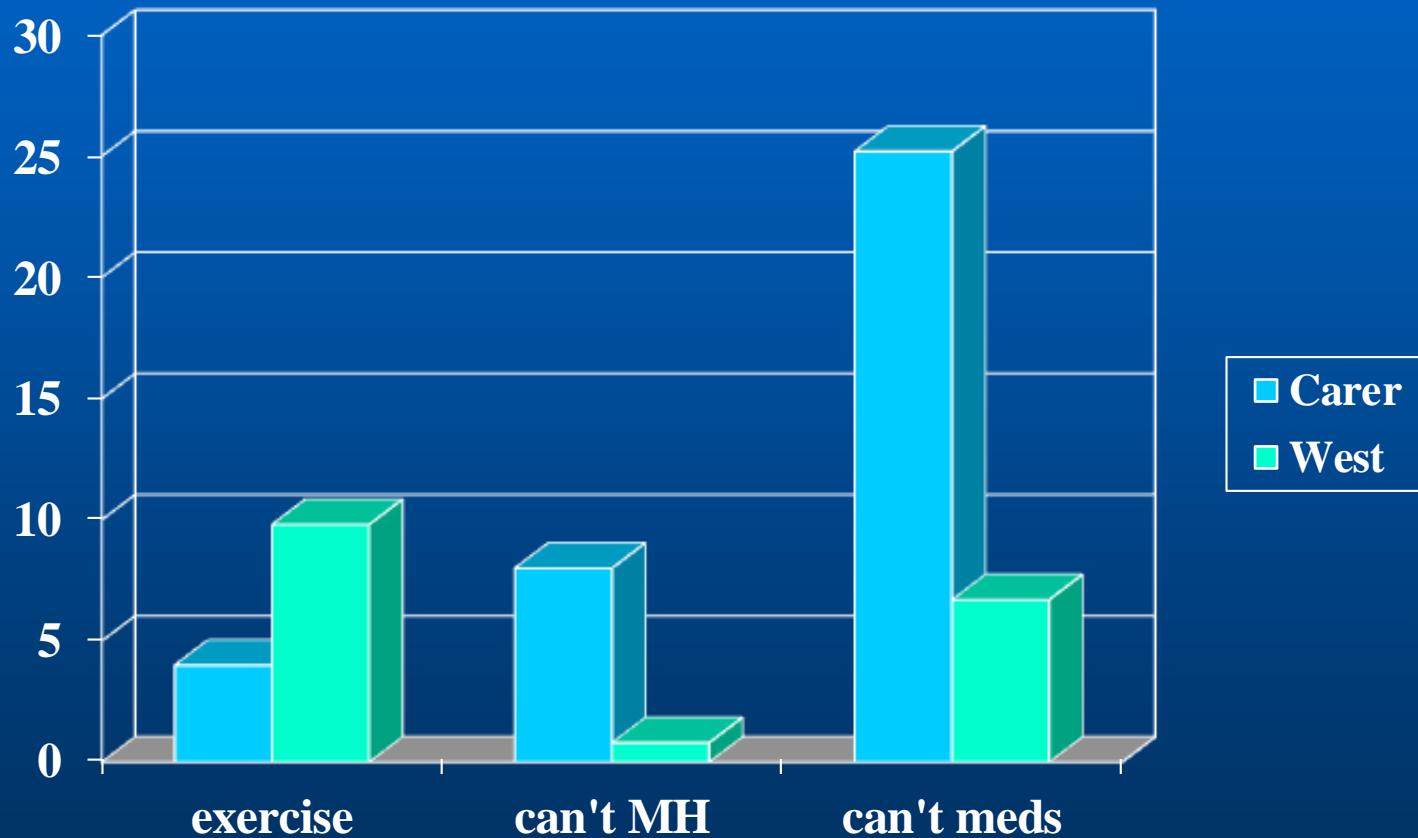


# Health care utilization: Black American women

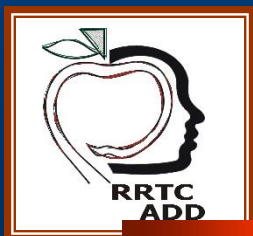
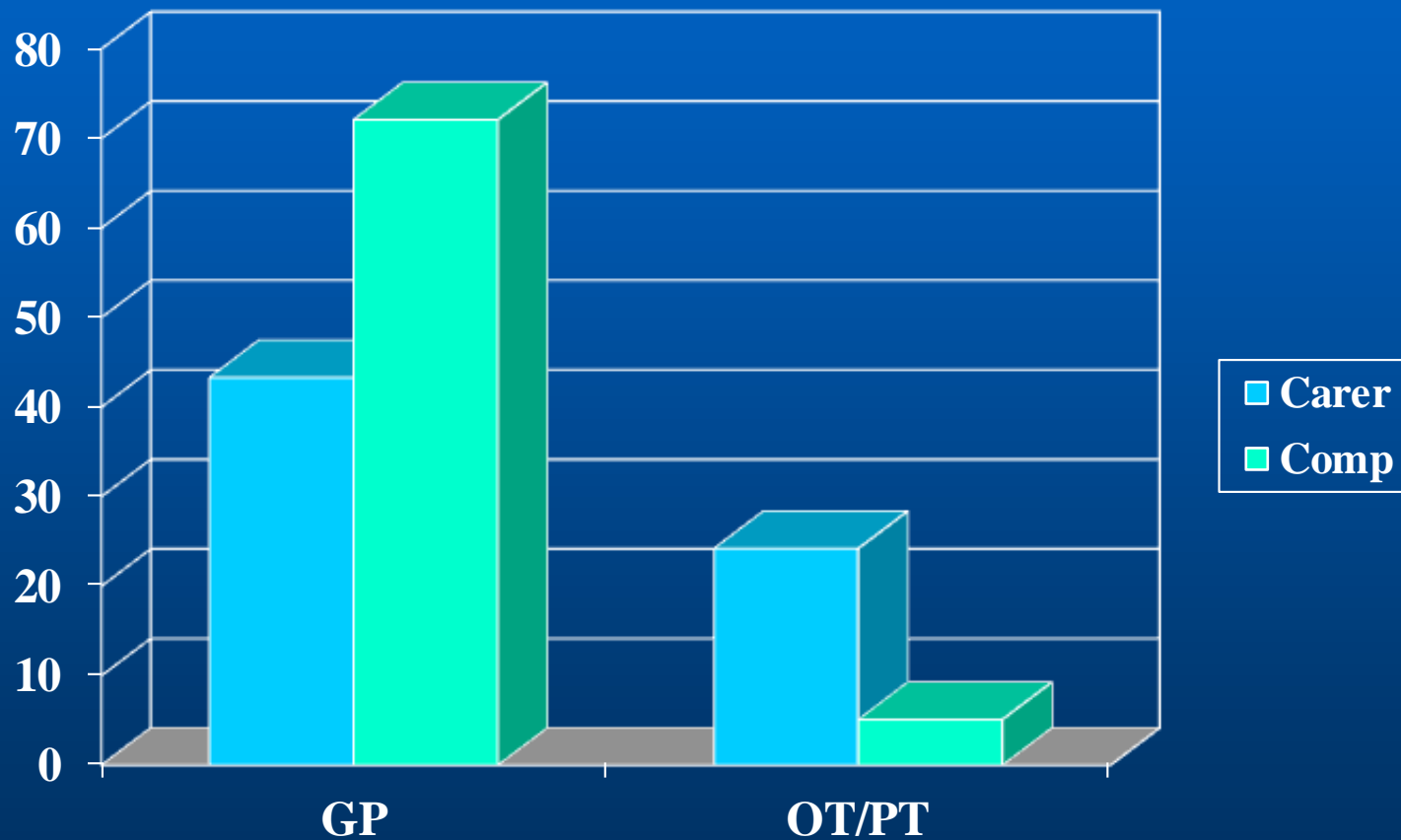




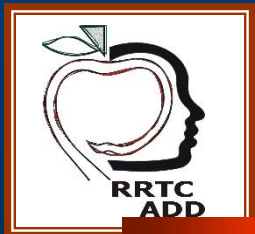
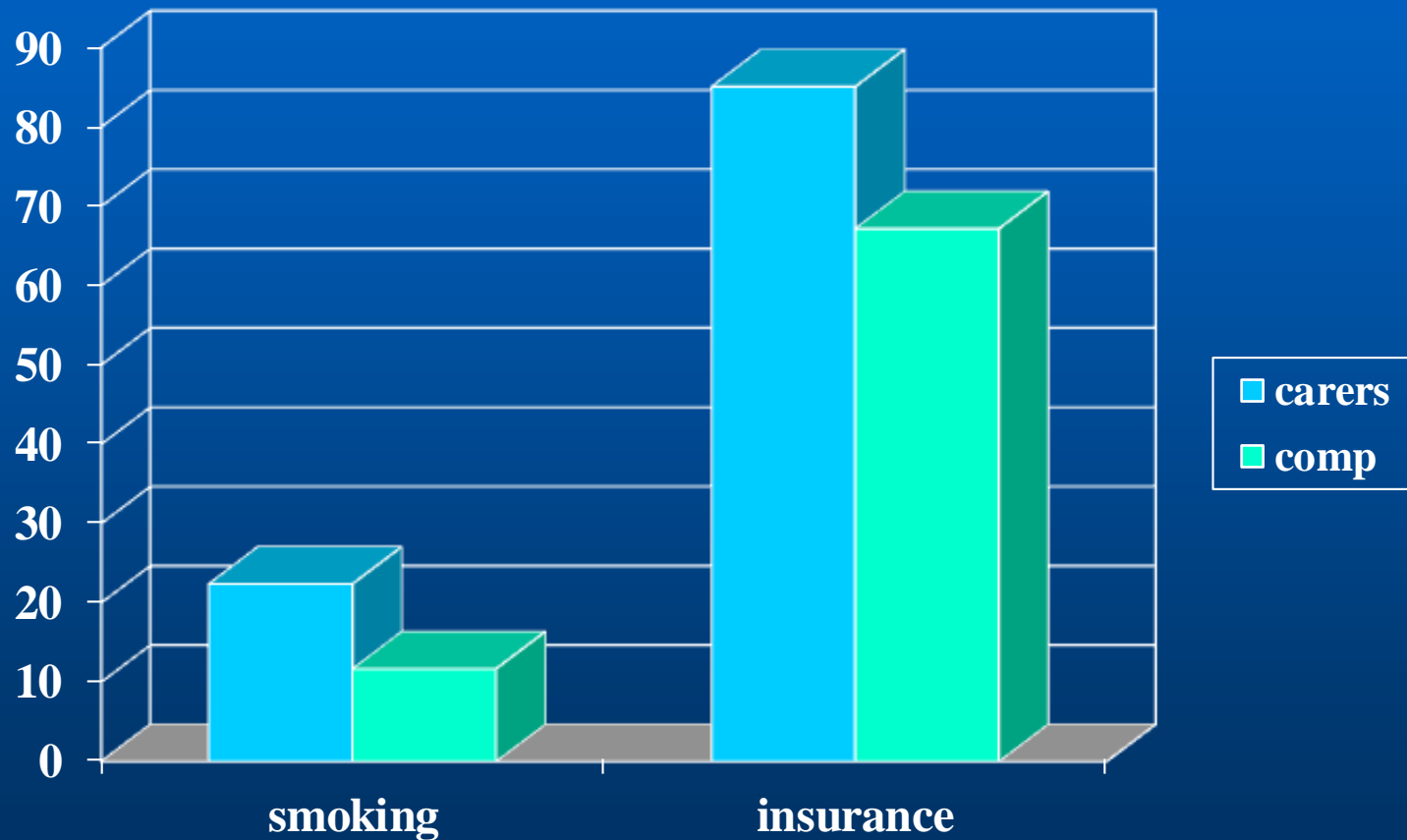
# Black American women: health behaviors and health care access



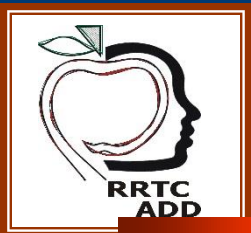
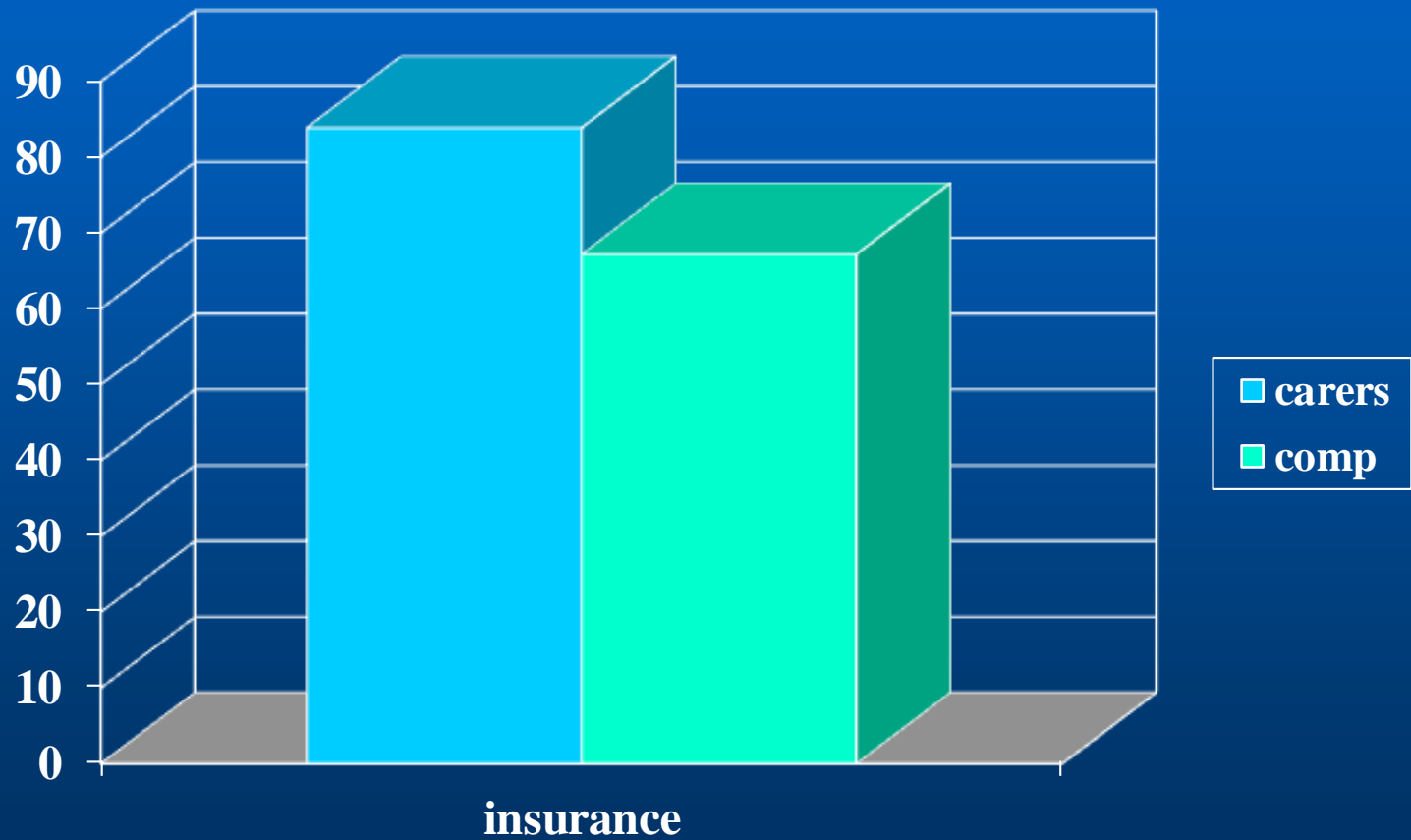
# Older Latinas: Utilization



# Latina mid-life: health behaviors and access

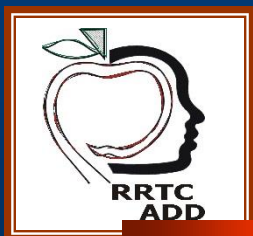


# Foreign born Latinas



# Summary of findings

- Older caregivers were more likely to report having physical health problems than noncaregivers
- Caregiving was associated with more depressive symptoms for Latinas
- Caregivers less likely to see doctor
- Black caregivers less likely to afford prescriptions and mental health care and less likely to exercise
- Latina caregivers more likely to have insurance and to smoke



# Intersection of Race & IDD

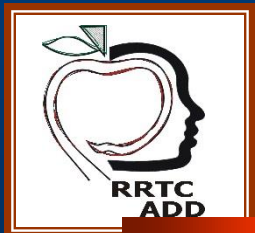


<http://floridaphotomatt.com/wp-content/photos/2013/06/Intersection.jpg>



# Research Question

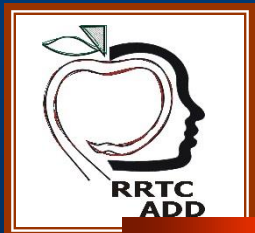
- Are there racial and ethnic disparities in health status among adults with IDD?
- Are there differences in health status among Latinos and Blacks with IDD compared to Latinos & Blacks without IDD?
- Outcomes: health status, mental health status, obesity & diabetes



# Methods

- Sample

- National Health Interview Survey (2000-2010)
- Medical Expenditure Panel Survey (2002-2011)





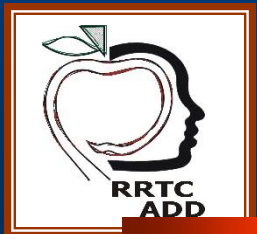
# Methods

- **Demographic variables**

- Age
- Race/ethnicity
- Family income
- Urban vs. rural
- Marital status
- Education
- Insurance status

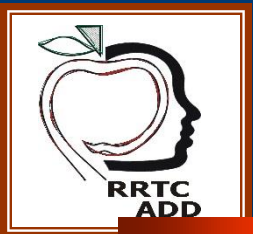
- **Outcome variables**

- Health status
- Mental health status
- Obesity
- Diabetes



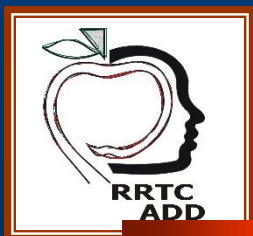
# Methods

- Data analysis:
  - Racial & ethnic differences
  - Disparities between minorities and Whites among adults with IDD
  - Disparities within Latinos & Blacks (comparing adults with IDD to those without IDD)

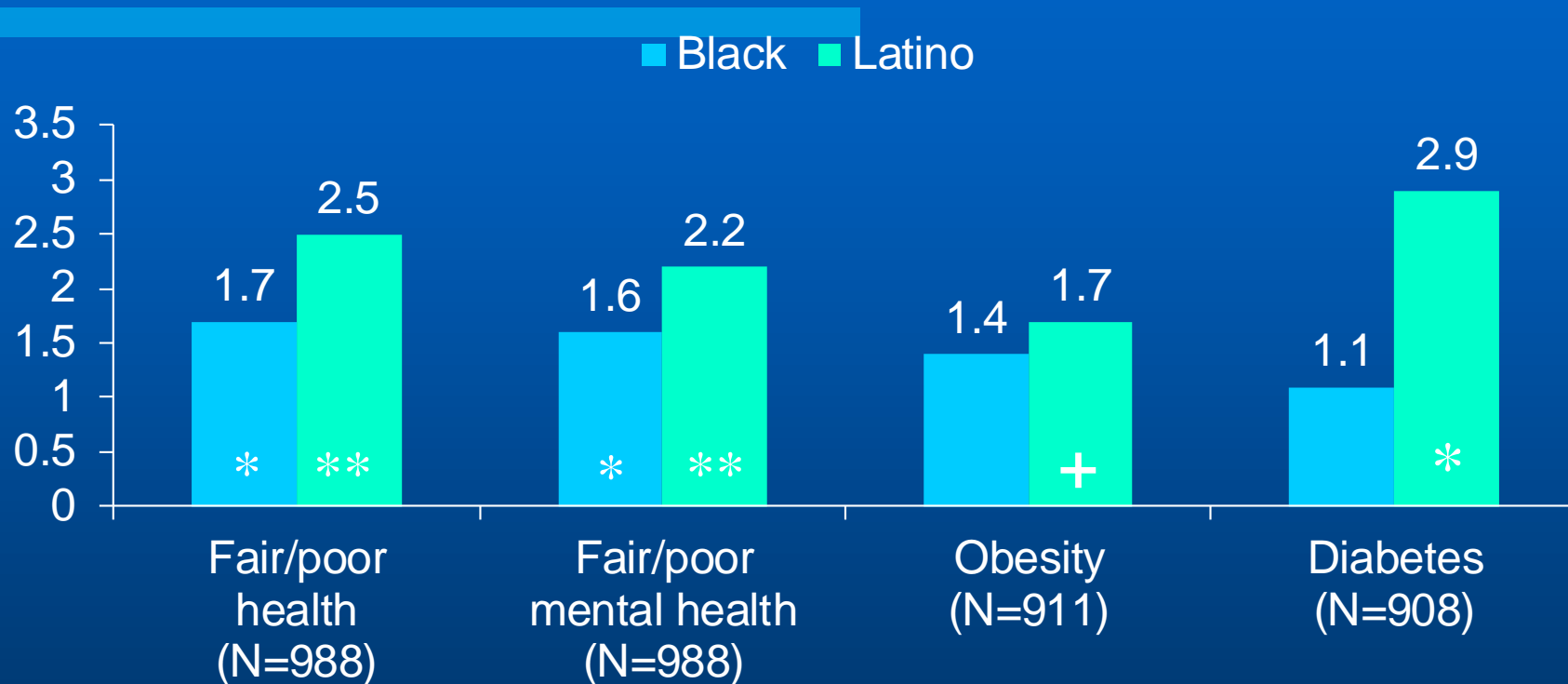


# Table 1: Demographic Characteristics Adults with IDD

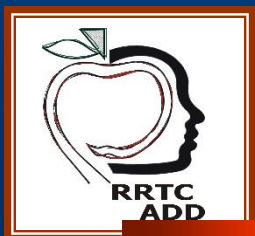
	White (N = 615)	Black (N = 293)	Latino (N = 223)
Age	35.3	36.9	32.0
Less than HS	37.7%	51.6%	58.7%
Income <125% FPL	28.5%	46.3%	39.6%
Male	44.5%	39.6%	30.7%
Urban	74.3%	84.4%	96.1%
Married	11.6%	5.14%	7.9%
Insured all year	85.9%	86.9%	75.5%



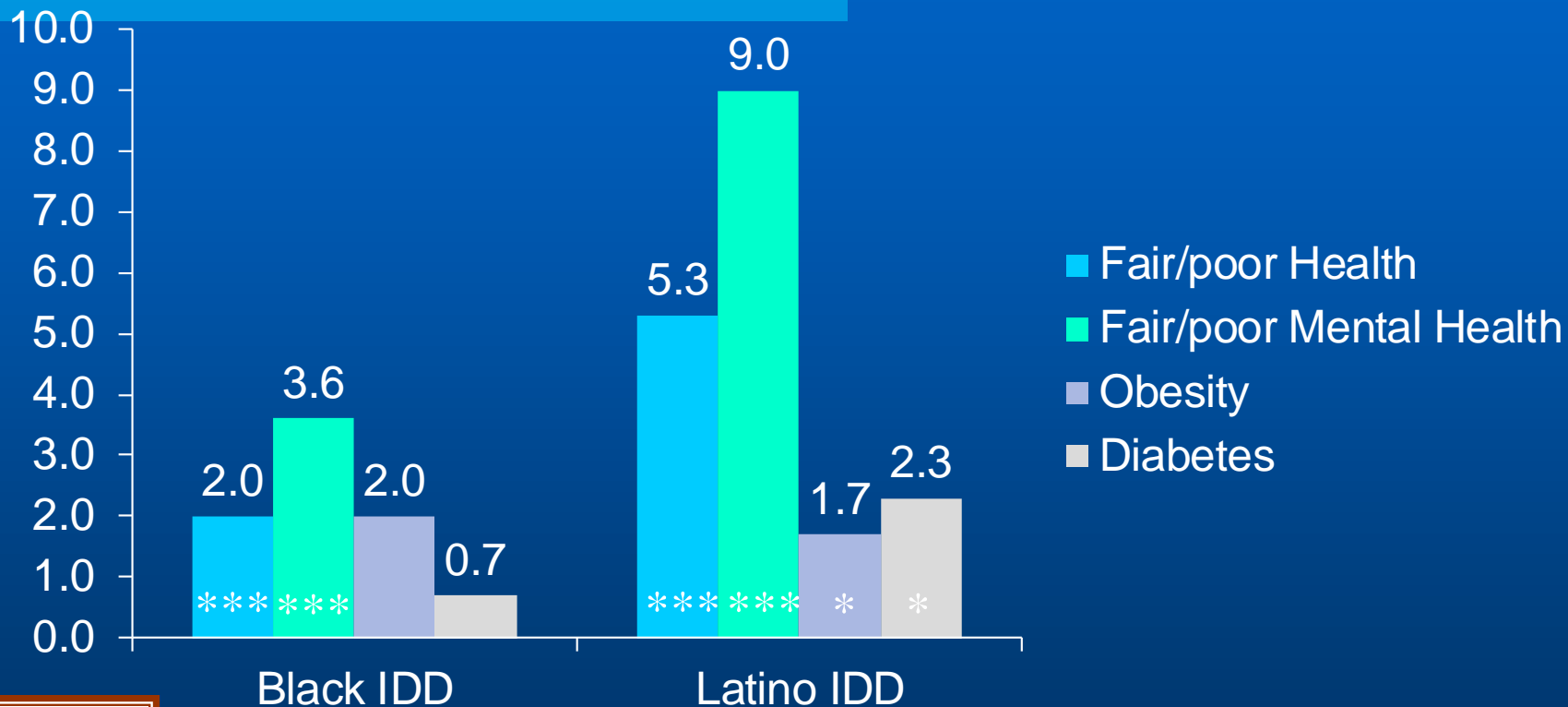
**Table 2: Adjusted odds of health status outcomes among adults with IDD**



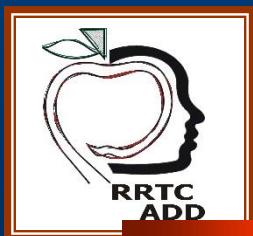
Reference group = White; + < .10 \* < .05 \*\* < .01



**Table 3: Adjusted odds of health status outcomes within Black and Latino adults (N= 137,857)**

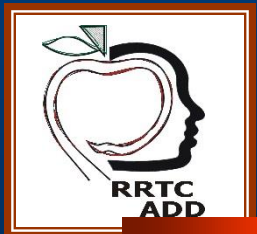


Reference group = Non IDD; \* $<.05$  \*\*\* $<.001$



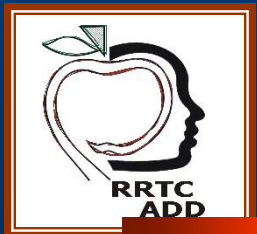
# Summary of Findings

- Among adults with IDD
  - Latinos and Blacks were more likely to be in fair/poor health and fair or poor mental health than Whites
  - Latino adults with IDD were more likely to have diabetes compared to whites with IDD.
- Within Black and Latino adults:
  - Blacks and Latinos with IDD were more likely to report fair/poor health and fair/poor mental health than Blacks and Latinos without IDD.
  - Latino with IDD were more likely to have obesity and diabetes than non-IDD Latinos.

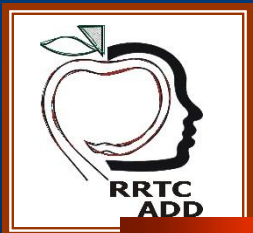


# Policy and programs

- There has been more focus on health of people with IDD, CDC funding, etc.
  - Health Matters is making inroads with respect to dissemination
- No policies that focus on health of family caregivers (or PWD and caregivers)



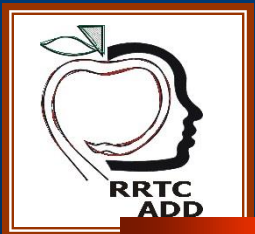
- No policies that focus on health of family caregivers (or whole family)
- Problem is that IDD services are aimed at the person but not their families
- Could be cost-effective to engage the whole family in health promotion





# What can agencies do to promote health of families

- Engage family caregivers and PWIDD in health promotion programs
- Ask family caregiver how they are doing and assist them in navigating health services for themselves



# Acknowledgements

- **Rehabilitation Research and Training Center on Aging with Developmental Disabilities at the University of Illinois at Chicago (NIDRR)**
- **John A. Hartford Foundation Geriatric Social Work Faculty Scholars Program**
- **Rehabilitation Research and Training Center on Developmental Disabilities and Health**
  - United States Department of Health and Human Services, Administration for Community Living (ACL), National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) Grant # 90RT5020-01-00

