

## Marginalized Communities Experience Challenges Stemming From Cultural Differences, Stigma, And Gaps In Care

### LIMITED ACCESS TO CARE

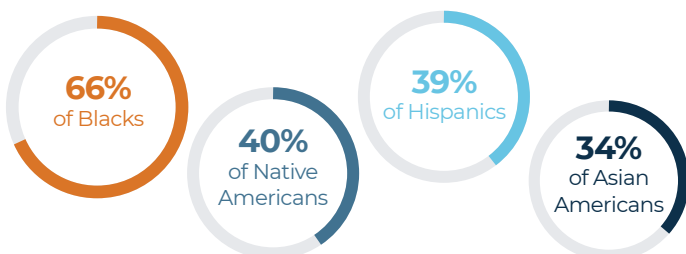


Marginalized communities often have limited access to quality care and experience delays in how long it takes to receive a diagnosis, including less likelihood of receiving a diagnostic work-up for cognitive impairment and being referred for neuropsychological testing compared to non-Hispanic white Americans<sup>1</sup>



Insurance limitations, financial barriers, and geographical isolation can delay diagnosis and treatment, leading to more behavioral changes<sup>2,3</sup>

**Believe their race/ethnicity will affect the quality of dementia care for Alzheimer's<sup>2</sup>**



### STIGMA AND DISCRIMINATION



Stigma around mental health and dementia often leads to denial, reduced social support, and a reluctance to seek professional help, especially among Asian Pacific Islander American groups<sup>3</sup>



Discrimination in health care settings may result in suboptimal treatment and lower quality of care as well as reluctance to seek professional help<sup>13</sup>

### LANGUAGE BARRIERS



Language barriers and limited multilingual tools for neuropsychological evaluation can lead to misunderstandings and errors in diagnosis, treatment, and caregiving strategies, and may play a role in increased agitation<sup>17,8</sup>

### CULTURAL DIFFERENCES

Marginalized communities, including less than half of Blacks and Native Americans, may feel less confident that they have access to providers who understand their ethnic or racial backgrounds<sup>4</sup>

**Culture has a crucial role in health behaviors, perception of illness, and even the etiology of dementia, all of which can contribute to delays in diagnosis and treatment.** Some may even think their symptoms are part of normal aging<sup>23</sup>

- Family-centered cultural values, such as filial piety and familism, have a direct effect on cultural beliefs and knowledge about dementia, such as keeping dementia-related problems in the privacy of the family unit<sup>3</sup>



**Black and Hispanic older adults are burdened by a disproportionately high prevalence of Alzheimer's disease and related dementias<sup>5</sup>**

- Older Black adults are twice as likely, and Hispanic adults are one and one-half times as likely, to have Alzheimer's disease in comparison to older White adults
- Native Americans and Asian adults have lower rates of Alzheimer's disease diagnoses, but this may be due to underdiagnosis

**Immigrants living with dementia are found to be more likely to present with agitation than non-immigrants.** Loneliness, boredom, language barriers, and cultural considerations are significant contributors to behavioral and psychological symptoms of dementia<sup>7</sup>

**Patients in marginalized communities may present with agitation differently from others, such as:**

- Destructive and hoarding behaviors found in Taiwanese patients<sup>6</sup>
- Hallucinations, night-time behavior, and elation in patients with Hispanic backgrounds<sup>7</sup>



#### References:

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