

## *Racial and Ethnic Diversity and Eliminating Disparities in Care*

### Issue

U.S. Census Bureau data show that America's population is growing increasingly diverse. In 1900, only one in eight Americans was of a race other than white – today, that ratio is one in four. By 2070, an estimated one in two Americans will be African-American, Hispanic, Native American or Asian/Pacific Islander. Not only is the United States' minority population growing, but its composition is changing dramatically as well. As recently as 1970, non-African-American minorities made up less than 2 percent of the population. However, by 2004, Hispanics made up 14.1 percent of the population and surpassed African-Americans (13.4 percent) as the largest minority group in the United States.

The melding of these populations has created a rich cultural texture in America, but it has also brought challenges to the health care community, with implications for every aspect of health care – our workforce, management, governance, and most importantly, the patients we serve.

Research by the Institute of Medicine, the Kaiser Family Foundation and The Commonwealth Fund suggests that differences in treatment and health care outcomes exist and persist based on race and ethnicity. The sources of racial and ethnic differences and disparities are many: differences in socioeconomic factors such as income and education level; differences in the health behaviors of consumers in both seeking care and adhering to treatment regimens; lack of multi-cultural knowledge and sensitivity among providers; actual discrimination and stereotyping by health care providers; language barriers; lack of diversity in the health care workforce; and payment and coverage differences, to name just a few. The growing body of evidence documenting these disparities has led to a national goal of eliminating racial and ethnic disparities in treatment and outcomes.

### AHA View

The AHA supports this growing national focus on eliminating racial and ethnic disparities in health care treatment and outcomes. In addition, the AHA supports its Institute for Diversity in Health Management to increase the number of racial and ethnic minorities in health care administration. To understand and address disparities effectively, all health care stakeholders – patients, hospitals, physicians, other providers, government, insurers, employers and others – need to work collaboratively and on many fronts.

**On Capitol Hill.** Lawmakers have introduced legislation that seeks to address the inequities in health care.

- **The Healthcare Equality and Accountability – Family Care Act of 2005** (S. 1580/H.R. 3561) aims to reduce health disparities by improving access to health coverage for minority populations, increasing cultural proficiency and diversity in the workforce, and funding research that enables greater understanding of



health disparities. The bills were introduced by Sen. Daniel K. Akaka (D-HI) and Rep. Michael M. Honda (D-CA).

- **The Faircare Act of 2005** (S. 1929), introduced by Sens. Joseph Lieberman (D-CT), Thad Cochran (R-MS) and Orrin Hatch (R-UT), aims to reduce health care disparities and improve health care quality and expand current federal programs seeking to eliminate health disparities.
- A Senate leadership bill also is expected to be introduced in May.

**In Hospitals.** The AHA is working with hospitals to better understand both the patient-related and health-system-related factors that contribute to disparities, and to marshal the talent and commitment of hospitals to work with others to eliminate health care disparities in the United States. Specifically, the AHA:

- Collects and shares best practices, highlighting how other hospitals and health care organizations are working to erase disparities in health care outcomes within their communities.
- Created a clearinghouse of case examples, research, data, evaluation tools, and expertise to help hospitals understand diversity, the nature and causes of care disparities and ways to provide culturally-sensitive and medically-appropriate care. The resources can be found at [www.aha.org](http://www.aha.org), under “Racial and Ethnic Disparities.”
- Created A Diversity and Cultural Proficiency Assessment Tool for Leaders in conjunction with the National Center for Health Care Leadership, Institute for Diversity in Health Management and American College of Healthcare Executives. The tool provides health care leaders with a self-assessment, follow-up action steps and case studies to help ensure that hospitals have a diverse and culturally proficient workforce to deliver appropriate care.
- Sponsors the Institute for Diversity in Health Management, which promotes greater racial and ethnic diversity in the management and executive ranks of health care organizations. Its Web site is [www.DiversityConnection.org](http://www.DiversityConnection.org).
- Supports Health Research and Educational Trust research projects, including one that seeks to provide a uniform approach to collecting race, ethnicity and primary language data in hospitals.