



Facility Differences in Nursing Homes Affect Quality of Life for Minnesota Minorities

CHARLIE PLAIN | JUNE 26, 2015

A new study from the School of Public Health, in collaboration with the Minnesota Department of Human Services, found racial differences in nursing home residents' quality of life (QOL).

QOL refers to non-medical aspects of residents' care such as relationships with staff, satisfaction with food, and social engagement. Minority residents reported lower QOL compared to white residents, but much of the difference was due to different health needs of minority residents. The data also showed nursing homes with higher proportion minority residents scoring lower on overall quality of life scores compared to facilities that were predominantly white.

The findings were published today in the *Journal of Aging and Health* (<http://jah.sagepub.com/content/early/2015/06/24/0898264315589576.full>).

“The study sought to better understand if minority nursing home residents experience lower quality of life than their white counterparts,” said [Tetyana Shippee](http://www.sph.umn.edu/faculty1/name/tetyana-shippee/), lead author and assistant professor of health policy and management in the School of Public Health. “Minnesota is one of two states to have validated, multi-domain measures of quality of life and is also nationally known for excellent nursing home care so we were surprised there were significant racial differences.”

Historically, nursing home populations have been predominantly white while minorities relied upon family and social networks for care. However, over the last decade or so, there has been a shift in trends for care among minorities. With more care choices, whites are increasingly utilizing assisted living facilities and using care in the community and minorities are increasingly using nursing home facilities, in part due to fewer financial resources and reliance on Medicaid.

Shippee believes this trend will continue to grow over time as reflected by the nation's changing demographics.

Study findings also include:

- Minority nursing home residents had different health needs compared to white residents. On average, minorities were 13 years younger than whites and had higher prevalence of mental illness.
- Payment and staffing emerged as key facility-level predictors of resident QOL. Nursing homes with high proportion of Medicaid-only patients may have fewer resources to provide adequate staffing and care compared to those who rely on Medicare and private pay, negatively impacting QOL.
- Nursing home facilities serving predominantly non-white residents may lack the capacity to adequately meet minority residents' non-medical needs. These facilities also tended to be located in poorer communities, where minority individuals are more likely to live.

“With these study findings in mind, it will be important for nursing homes to develop a new plan of action to address differences in program services and staffing issues for minorities in nursing homes,” said Shippee.

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