



# Identifying our Needs: A Survey of Elders

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## National Resource Center on Native American Aging (NRCNAA)

- Nearly 25 years serving tribes, Alaska villages, and Hawaiian homesteads.
- Located at the University of North Dakota, School of Medicine & Health Sciences, Center for Rural Health.
- Funded by the Administration for Community Living (ACL).
- Two sister centers in Alaska and Hawaii.

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**Mission:** identify and increase awareness of evolving Native elder health and social issues.

**Vision:** is to empower Native people to develop community based solutions while honoring and helping to maintain cultural values.



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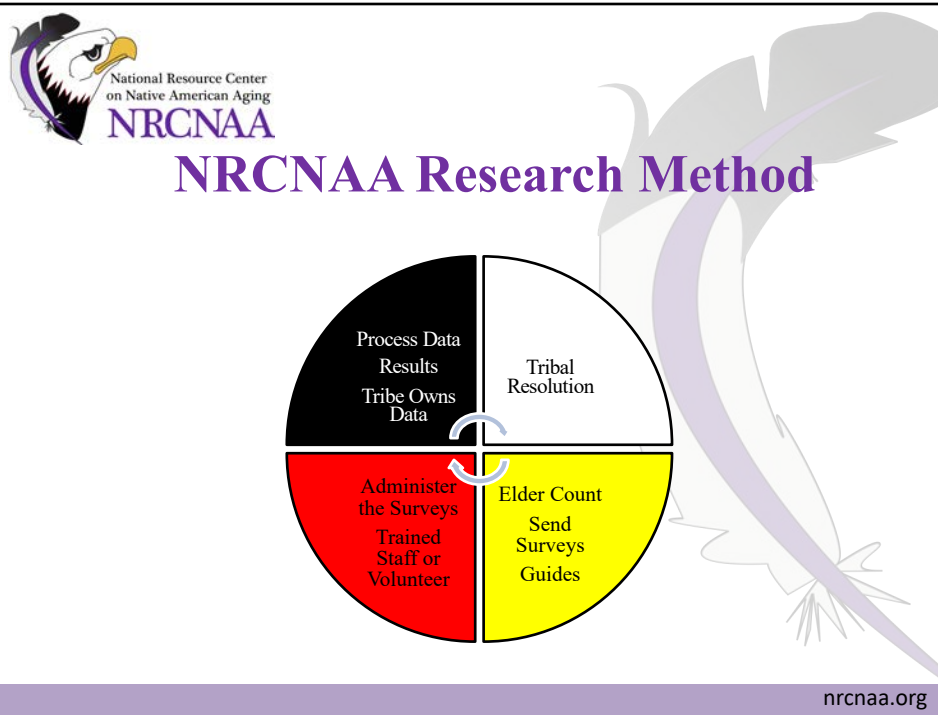
## Identifying our Needs: A Survey of Elders

- Needs assessed and documented
- 3 year cycles
- Provides insight on the gap between what is and what is desired.
- Provides information on health and social need trends.
- Shows an accurate picture of the Native elder population.



Image retrieved from:  
<http://www.wayne.k12.ms.us/News/12003#sthash.c7MrJw1UP.dobs>

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## Needs Assessment Data

- General health status of Native elders
- Indicators of chronic health
- Activities of Daily Living
- Screenings
- Indicators of visual, hearing, and dental
- Memory and Disability
- Health Care Access
- Tobacco and alcohol use patterns
- Diet, nutrition, and exercise
- Social support pattern and housing
- Social Functioning
- Use and acceptance of services
- Demographics

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## Identifying Our Needs: A Survey of Elders VII

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## Comparison Sheet

### Tribe Name (N= ) Comparison Data to Aggregate Tribal Data and National Data

Question	Response(s)	Tribal Data (55 and over)	Aggregate Tribal Data (55 and over)	National Data (55 and over)
General Health Status				
1. Would you say your health in general is excellent, very good, good, fair, or poor?	Excellent	2.3%	6.0%	13.8%
	Very Good	9.9%	19.9%	29.2%
	Good	29.2%	39.7%	32%
	Fair	35.1%	26.8%	16.8%
	Poor	23.5%	7.6%	7.8%

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## Data Output Frequency Tables

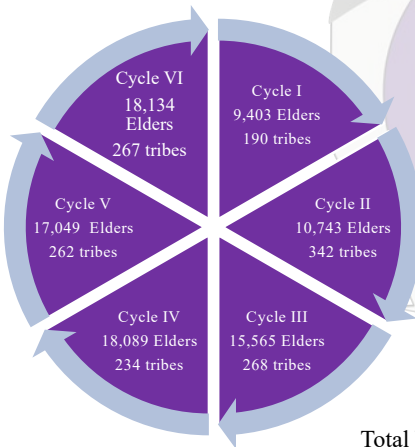
**Health Status**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Excellent	1079	6.0	6.0	6.0
	Very Good	3581	19.7	19.9	25.8
	Good	7157	39.5	39.7	65.5
	Fair	4841	26.7	26.8	92.4
	Poor	1377	7.6	7.6	100.0
	Total	18035	99.5	100.0	
Missing	System	99	.5		
Total		18134	100.0		

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## Needs Assessment Participation



Total N = 89,436 surveys

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## Cycle VI Summary

- Data collected in the time span of April 1, 2014 to March 31, 2017
- 18,134 AI/AN elders
- 164 sites
- 267 tribes
- Representation from:
  - 11 out of 12 Indian Health Service (IHS) Regions
  - 9 out of 10 Department of Health and Human Services (DHHS) regions
  - 28 out of 50 states

\*Cycle VII began April 1, 2017 and will end March 31, 2020

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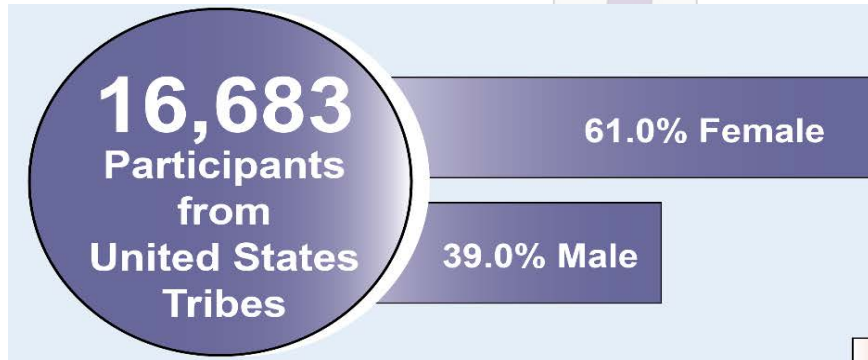
## **Tribal Aggregate Results Cycle VI Needs Assessment**

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## Participation by Gender 55 years and older

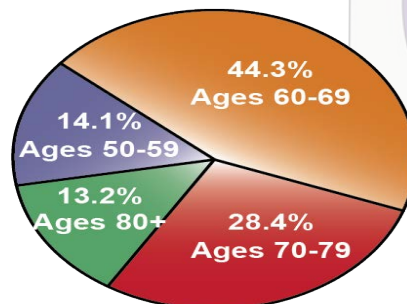


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## Age Groups

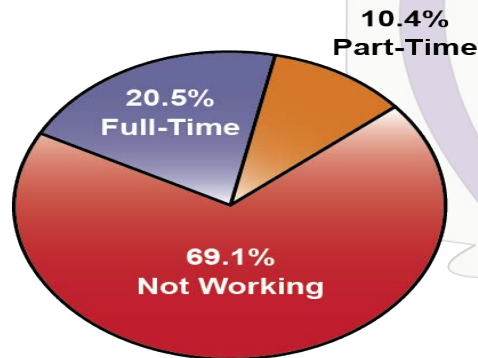


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## Employment Status

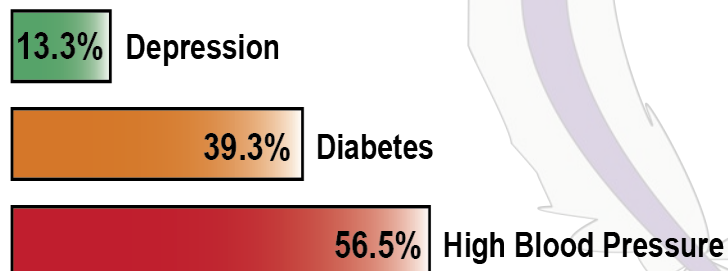


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## Health Conditions



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## Falls in the past 12 months

**34.4%** reported having 1-4 falls in the past year.  
An additional 3.3% reported 5-8 falls.

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## Activities of Daily Living

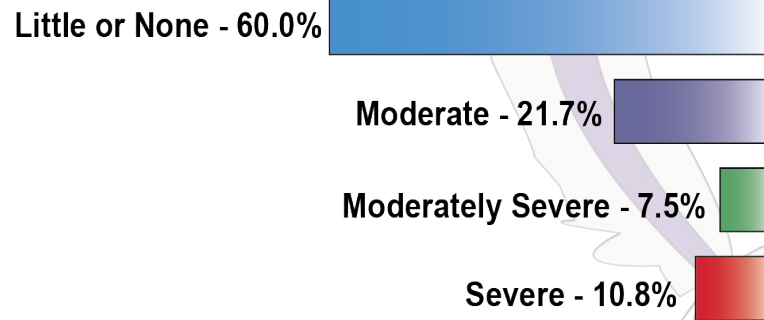
- 34.9%** had difficulty doing heavy housework
- 29.0%** had difficulty walking
- 15.2%** had difficulty doing light housework
- 14.9%** had difficulty preparing their own meals

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## Long-Term Care Need

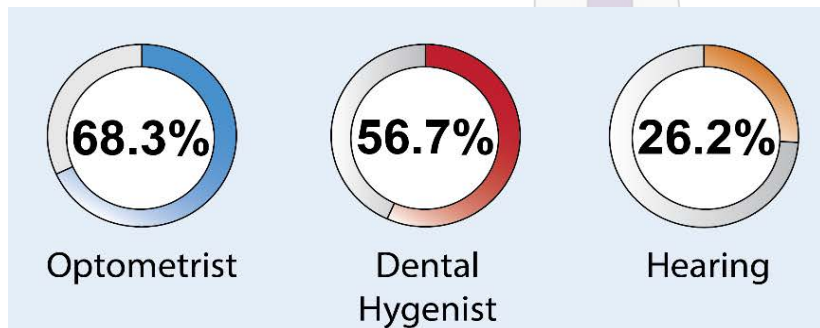


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## Screenings



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## Disability and Causes

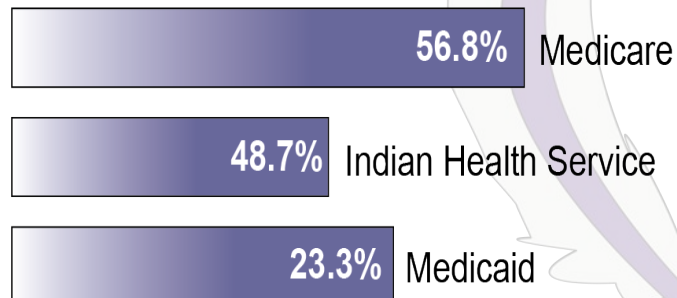
Of the 29.3% of Elders who are disabled, causes include:



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## Type of Healthcare Coverage



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## Health Care Provider

**48.1%**

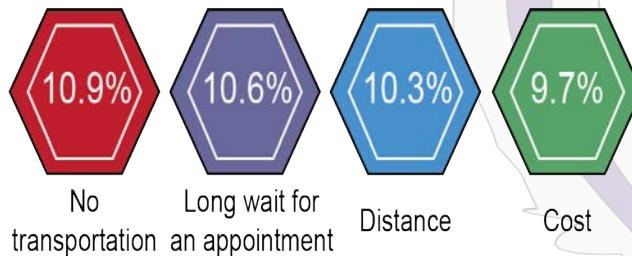
of Elders had one person they thought of as their personal doctor or health care provider. Elders were most likely to go to a clinic (58.5%) or doctor's office (36.1%).



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## Barriers to Medical Care

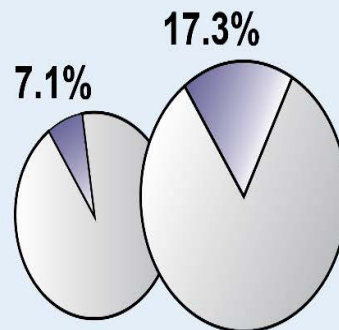


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## Tobacco Usage

17.3% of Elders reported smoking tobacco everyday, and 7.1% smoked some days (ceremonially/socially)



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## Types of Exercise Reported

Most common type of exercise reported in the past 30 days



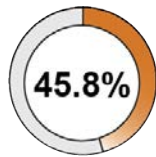
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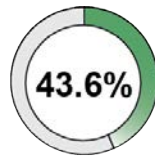
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## Emotional Health

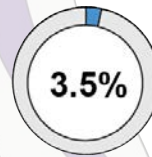
### Most of the Time in the Past Month, Elders Felt:



Happy



Calm & Peaceful



Nervous

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## General Facts



of Elders had visited a doctor or healthcare provider for a routine checkup in the past year



of Elders said that transportation had kept them from medical care in the past 12 months.



of Elders took care of their grandchildren. Approximately 10.1% were their primary caregivers.



of Elders were obese. Approximately 34.9% were overweight, and 21.9% were at a normal weight.



of Elders continued to work full-time during the past year. Approximately 10.3% worked part-time.



of Elders reported that their last alcoholic beverage was more than three years ago.

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# Tribal Aggregate Data vs. National Data Comparison

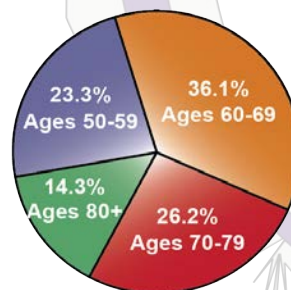
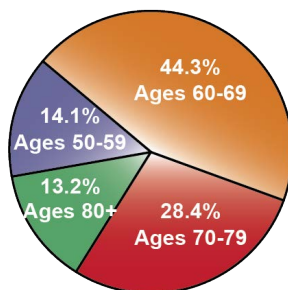
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## Age Groups

Aggregate Data

National Data



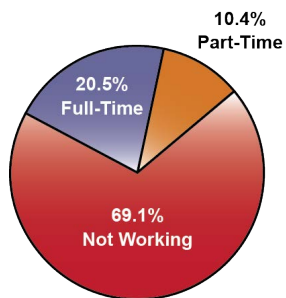
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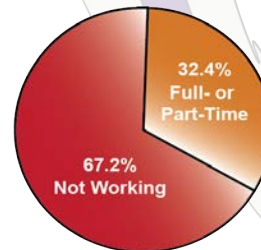
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## Employment Status

### Aggregate Data



### National Data



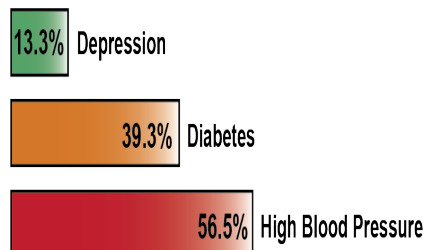
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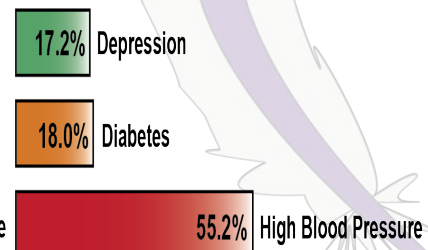
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## Health Conditions

### Aggregate Data



### National Data



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## Falls

### Aggregate Data

**34.4%** reported having 1-4 falls in the past year.  
An additional 3.3% reported 5-8 falls.

### National Data

**10.6%** reported having 1-4 falls in the past year.  
An additional 3.4% reported 5-8 falls.

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## Activities of Daily Living

### Aggregate Data

**34.9%** had difficulty doing heavy housework  
**29.0%** had difficulty walking  
**15.2%** had difficulty doing light housework  
**14.9%** had difficulty preparing their own meals

### National Data

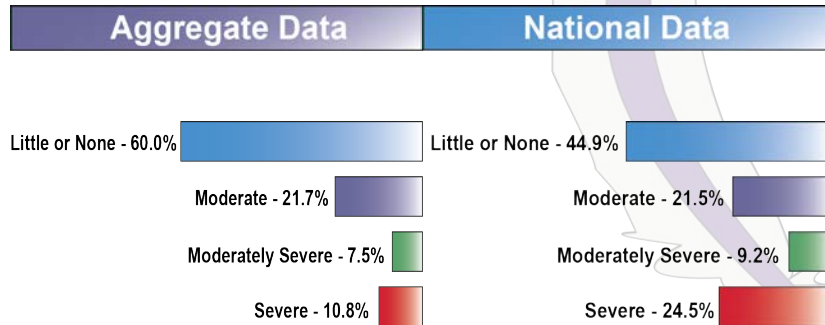
**51.6%** had difficulty doing heavy housework  
**33.7%** had difficulty walking  
**44.2%** had difficulty getting outside  
**34.8%** had difficulty shopping for personal items

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## Long-Term Care Need

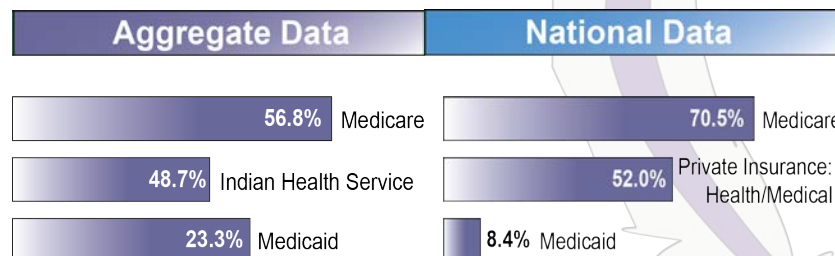


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## Type of Healthcare Coverage



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## Health Care Provider

### Aggregate Data

**48.1%**

of Elders had one person they thought of as their personal doctor or health care provider. Elders were most likely to go to a clinic (58.5%) or doctor's office (36.1%).



### National Data

**81.8%**

had one person they thought of as their personal doctor or health care provider. Most were likely to go to a doctor's office (75.0%) or clinic (18.9%).



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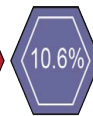
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## Barriers to Medical Care

### Aggregate Data



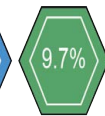
No transportation an appointment



Long wait for an appointment



Distance



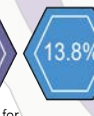
Cost



Cost



No access for people with disabilities



Long wait for appointment



Office wasn't open during availability

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## Utilization of Data for Tribes

- **Local Tribal/State/National Level**
  - Assist in program planning, grant writing, and advocacy
    - Tribal planning (budget, infrastructure)
    - Renewal of Title VI grants
    - Strengthen grant proposals
    - Advocating for resources at the state and national levels
  - Document health and social disparities
  - Identify strength based programs and interventions
  - Empowers the tribes with information to identify and address health needs
  - Training for Native elder service providers
  - Filling the research gap for Native elder information
  - Training Native researchers in aging field
  - Decision-making and policy

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## Contact Information

For more information contact:  
*National Resource Center on  
Native American Aging*  
Center for Rural Health  
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Grand Forks, ND 58202-9037  
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<http://www.nrcnaa.org>

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## Questions?



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