



# Underserved Populations: Urban American Indian and Alaska Native Elders

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## Overview

In this session we will discuss the following topics:

- The importance of collecting data among Urban Indian elders
- The research model the National Resource Center on Native American Aging (NRCNAA) utilizes when working with tribal partners
- Structuring and developing the NRCNAA research method to fit the Urban Indian elder population
- Using RUCA code classification to provide comparisons of urban vs. rural from the *Identifying Our Needs: A Survey of Elders VI*
- Benefits of Urban Indian elder data and how it can be utilized at the local, state, tribal, and federal levels.

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## Urban AI/AN populations

- It is estimated that 71 percent of AI/AN people reside in urban areas (Urban Indian Health Institute, 2013).
- As a result of racial and social inequities; high unemployment rates; cultural and historical trauma; and limited social, health, and cultural resources, urban AI/ANs experience worse health outcomes compared to the general population (Moy, Smith, Johansson, & Andrews, 2006; Weaver, 2012; Dennis, Momper, & the Circles of Care Project Team, 2016).
- Health care services are limited in providing culturally appropriate and competent services to a diverse population of AI/AN people; there is a need and want for more culturally competent programs among the AI/AN urban population (Dennis, Momper, & the Circles of Care Project Team, 2016).

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## Urban AI/AN population

- Receives only 1% of the Indian Health Service Budget, even though a large percentage of AI/ANs live in urban areas. (Dennis, Momper, & the Circle of Care Project Team, 2016).
- Entitled to health care services that are only available on reservations (Urban Indian Health Commission, 2007).
- Availability of specialized services is limited, leading to referrals, which tend to result in long waiting periods to be seen due to insurance coverage or other issues (Dennis, Momper, & the Circle of Care Project Team, 2016).
- One study conducted found that some AI/AN urban populations are unaware services are available in their area (Dennis, Momper, & the Circles of Care Project Team, 2016).

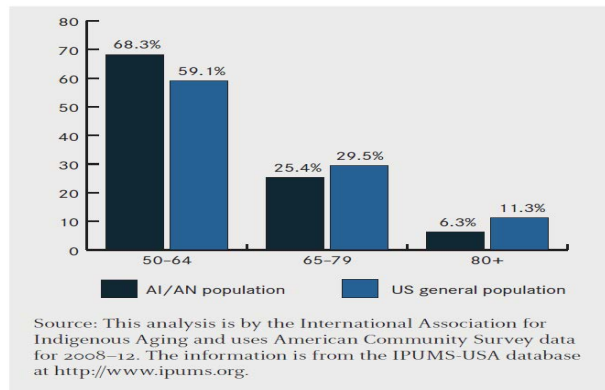
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## AI/AN Elder Population

**Figure 1**  
**Age Distribution of 50+ AI/ANs Compared with the US General Population**



Goins, R.T., Schure, M.B., Crowder, J., Baldrige, D., Benson, W., & Aldrich, N. (2015). Lifelong Disparities among Older American Indians and Alaska Natives. AARP Public Policy Institute (Research Report 2015-08). Retrieved from: <https://www.aarp.org/content/dam/aarp/ppi/2015/1/lifelong-disparities-among-older-american-indians-and-alaska-natives.pdf>

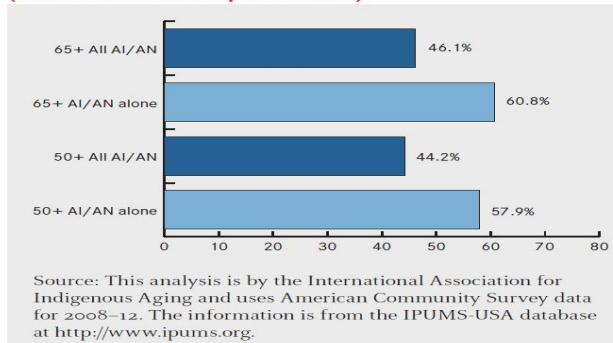
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## AI/AN Elder Population

**Figure 11**  
**Percentage of AI/ANs Living on Tribal Lands, by Age: AI/AN Alone Compared with All AI/AN (Alone and Multiple Races)**



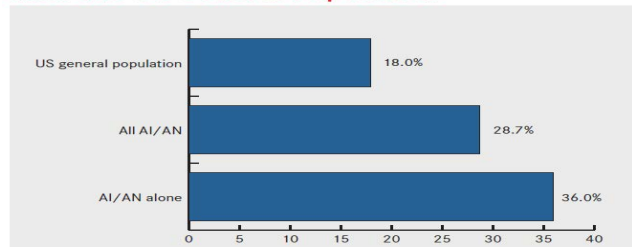
Goins, R.T., Schure, M.B., Crowder, J., Baldrige, D., Benson, W., & Aldrich, N. (2015). Lifelong Disparities among Older American Indians and Alaska Natives. AARP Public Policy Institute (Research Report 2015-08). Retrieved from: <https://www.aarp.org/content/dam/aarp/ppi/2015/1/lifelong-disparities-among-older-american-indians-and-alaska-natives.pdf>

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## AI/AN Elder Population

**Figure 12**  
**Nonmetropolitan Location of Americans Ages 50+: All AI/AN and AI/AN Alone Compared with the US General Population**



Source: This analysis is by the International Association for Indigenous Aging and uses American Community Survey data for 2008–12. The information is from the IPUMS-USA database at <http://www.ipums.org>.

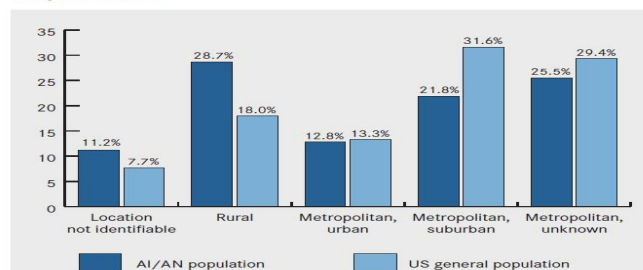
Goins, R.T., Schure, M.B., Crowder, J., Baldrige, D., Benson, W., & Aldrich, N. (2015). Lifelong Disparities among Older American Indians and Alaska Natives. AARP Public Policy Institute (Research Report 2015-08). Retrieved from: <https://www.aarp.org/content/dam/aarp/en/2015/11/lifelong-disparities-among-older-american-indians-and-alaska-natives.pdf>

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## Urban Indian elder population

**Figure 13**  
**Geographic Location of Americans Ages 50+: AI/ANs Compared with the US General Population**



Source: This analysis is by the International Association for Indigenous Aging and uses American Community Survey data for 2008–12. The information is from the IPUMS-USA database at <http://www.ipums.org>.

Goins, R.T., Schure, M.B., Crowder, J., Baldrige, D., Benson, W., & Aldrich, N. (2015). Lifelong Disparities among Older American Indians and Alaska Natives. AARP Public Policy Institute (Research Report 2015-08). Retrieved from: <https://www.aarp.org/content/dam/aarp/en/2015/11/lifelong-disparities-among-older-american-indians-and-alaska-natives.pdf>

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## Urban AI/AN elders

- “Among AI/ANs ages 50 and over, 12.8 percent reside in urban areas and 21.8 percent reside in suburban areas, compared with 13.3 percent and 31.6 percent for the same-age population” (Goins, Schure, Crowder, Baldrige, Benson, & Aldrich, 2015, p. 15).
- An invisible population we need to make visible. We need to fill the research gap for this population.

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## Challenges with Current Available AI/AN Urban Data

- Significant gaps in data exist for the AI/AN urban population, for example the 2006 National Health Disparities report found that 50% of available data for AI/ANs provide barriers including data was not available, was unreliable, small sample sizes affecting statistical significance, and two-thirds of the utilization data was usable (Dennis, Momper, & the Circles of Care Project Team, 2016).
- Other issues for national data sets are misclassification of race/ethnicity, inadequate numbers limiting analysis capabilities, and lack of attention to collecting specific AI/AN urban data by national surveys (Urban Indian Health Commission, 2007).

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## Importance of Data

- Today, many decisions are based on data; therefore, populations with little or no data are easily overlooked (Urban Indian Health Commission, 2007).
- Provides an accurate picture of the Native elder population
  - Collecting custom fit data
- Helps set goals and priorities
- Identifies specific areas of health and social needs
  - Resource allocation
- Relevant actionable data
  - Assists policymakers, tribal/urban Indian organization leadership, directorship, and management make decisions based on facts and numbers.

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## History of the NRCNAA

The NRCNAA is one of three centers that are funded through the Administration for Community Living (ACL).

The other two centers are:

- The National Resource Center for American Indian, Alaska Native and Native Hawaiian Elders (Alaska)
- National Resource Center for Native Hawaiian Elders (Hawaii)

The NRCNAA was established in 1994

- Center for Rural Health, University of North Dakota, School of Medicine & Health Sciences.

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## *Identifying Our Needs: A Survey of Elders*

- Identifies the health and social needs of American Indian/Alaska Native/Native Hawaiian elders (AI/AN/NH)
- 3 year cycles
- Allows the tribe the opportunity to collect information for their communities



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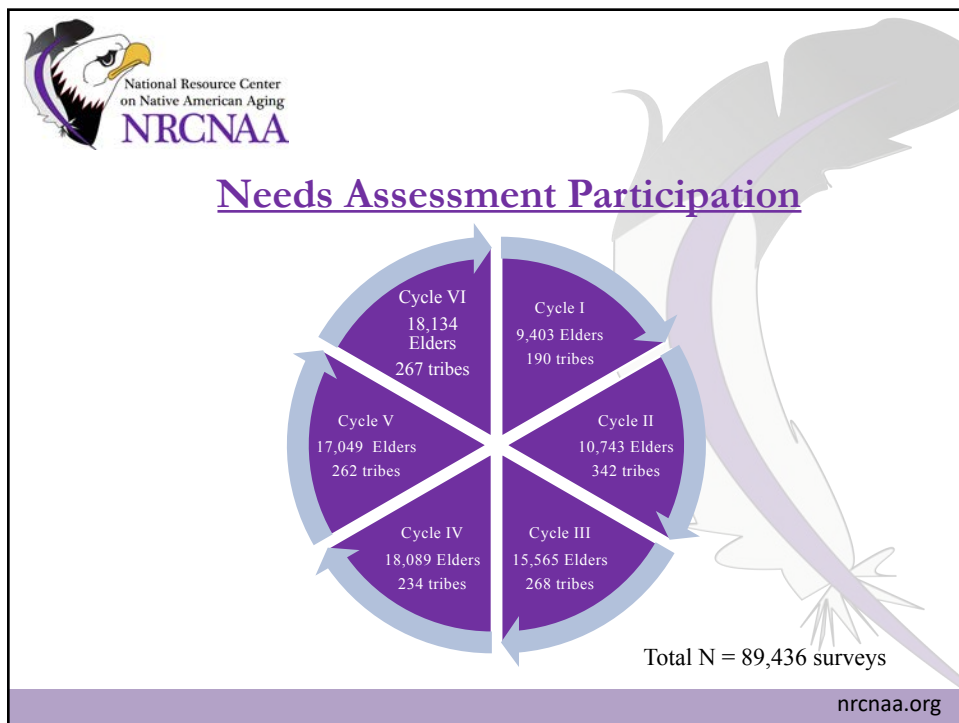
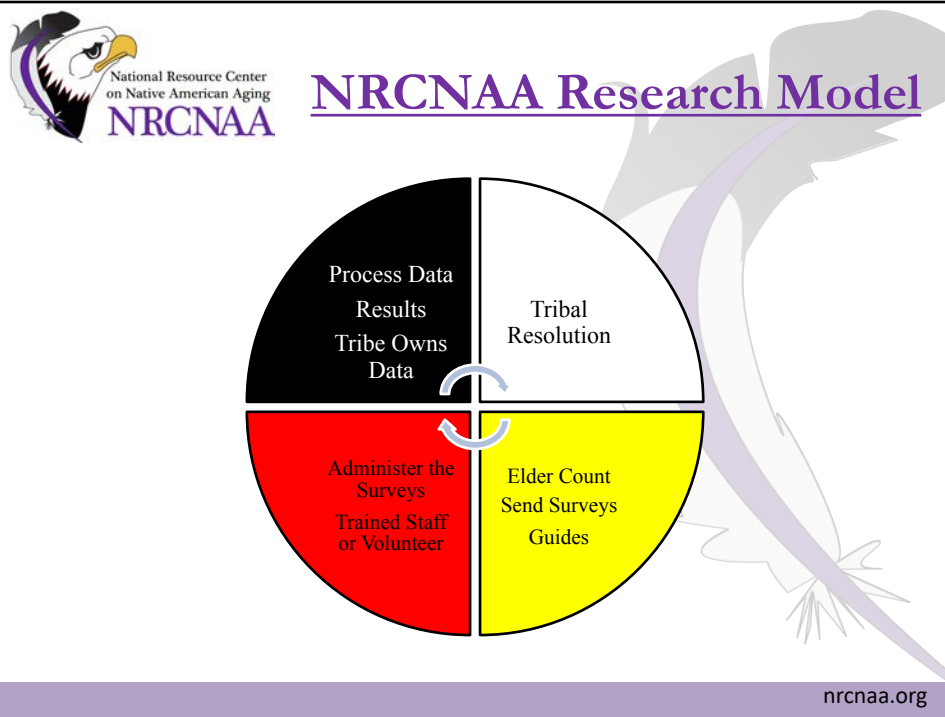


## Population

- Native elders eligible for Title VI services.
- Age 55 years and older
- Important to note:
  - Age 55 years and over for Native elders is considered comparable to non-Native elders 65 years and older in the general population.

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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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## Survey Needs Data

- General Health Status
- Diagnosis of Chronic Disease
- Falls
- Activities of Daily Living (ADL's)
- Instrumental Activities of Daily Living (IADL's)
- Screening
- Vision, Hearing, & Dental
- Memory and Disability
- Health Care Access
- Tobacco and Alcohol Use
- BMI, Nutrition, and Exercise
- Social Support/Housing
- Social Functioning
- Now Use and Would Use
- Demographics

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## Identifying our Needs: A Survey of Elders VII

**Identifying Our Needs: A Survey of Elders VII**

Funding for this project is provided by Cooperative Agreement 9000088 from the Administration For Community Living, AGA - Older Americans National Resource Centers (an agency within the US Department of Health and Human Services).

• Use black or blue pen or a number 2 pencil.  
• Make dark marks that fill the oval completely.

• Do not use pens with ink that smudge through the paper.  
• Make no stray marks and do not bend survey.

Correct: ☒ Incorrect: ☐

**GENERAL HEALTH STATUS**

1. Would you say your health in general is excellent, very good, good, fair, or poor?  
☐ Excellent ☐ Very good ☐ Good ☐ Fair ☐ Poor

2. During the past 12 months, how many different times did you stay in the hospital overnight or longer?

3. Has a doctor ever told you that you had any of the following diseases... (Please mark all that apply)  
☐ Arteriosclerosis ☐ Rheumatic Disease  
☐ Congestive Heart Failure? ☐ Lung Cancer? ☐ Diabetes? ☐ Long-Term Cancer? ☐ Gallbladder? ☐ Breast Cancer? ☐ High Blood Pressure? ☐ Cervical Cancer? ☐ Depression? ☐ Parkinson's Disease? ☐ Kidney Disease? ☐ Do you take insulin?  
☐ Do you take medicine?  
☐ Was this only during a pregnancy?  
☐ Are you a diabetic amputee?

4. How many falls, if any, have you had in the past year?

**ACTIVITIES OF DAILY LIVING (ADL'S)**

5. Because of a health or physical problem that lasted more than 3 months did you have any difficulty... (Please mark all that apply)  
☐ Bathing or showering?  
☐ Getting in or out of bed?  
☐ Eating?  
☐ Walking?  
☐ Using the toilet, including getting to the toilet?

**SCREENING**

6. Because of a health or physical problem that lasted longer than 3 months, did you have any difficulty... (Please mark all that apply)  
☐ Pressing your own needs?  
☐ Shopping for personal items (such as toilet items or food)?  
☐ Doing heavy housework (such as scrubbing floors, or washing windows)?  
☐ Doing light housework (such as doing dishes, sweeping up, or light clean up)?  
☐ Getting outside?

7. About how long ago has it been since you last visited a doctor/health care provider for a routine check-up?  
☐ Never had a checkup ☐ Within the past 3 years ☐ Within the past 5 years ☐ 5 or more years ago

8. How long has it been since you had your blood tested for blood using a home kit?  
☐ Never had a checkup ☐ Within the past 3 years ☐ Within the past 5 years ☐ 5 or more years ago

9. (FOR WOMEN ONLY) How long has it been since you had your last mammogram?  
☐ Never had a checkup ☐ Within the past 3 years ☐ Within the past 5 years ☐ 5 or more years ago

10. (FOR WOMEN ONLY) How long has it been since you had your last pap smear?  
☐ Never had a checkup ☐ Within the past 3 years ☐ Within the past 5 years ☐ 5 or more years ago

11. (FOR MEN ONLY) How long has it been since you had your last PSA, prostate specific antigen test, a blood test used to check MEN for prostate cancer?  
☐ Never had a checkup ☐ Within the past 3 years ☐ Within the past 5 years ☐ 5 or more years ago

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## Identifying our Needs: A Survey of Elders VII

**VISION, HEARING & DENTAL**

12. Do you have total blindness in one or both eyes?  
☐ Yes ☐ No

13. Do you use glasses or contact lenses?  
☐ Yes ☐ No

14. Do you have trouble seeing (even when wearing corrective lenses)?  
☐ Yes ☐ No

15. Have you seen an optometrist (eye doctor) in the past year?  
☐ Yes ☐ No

16. Do you now have total deafness?  
☐ Yes ☐ No

17. Do you use a hearing aid?  
☐ Yes ☐ No

18. Do you have trouble hearing (even when wearing your hearing aid)?  
☐ Yes ☐ No

19. Have you had a hearing test in the past year?  
☐ Yes ☐ No

20. Have you seen a dentist or dental hygienist in the past year?  
☐ Yes ☐ No

21. What type of dental care do you need now? (Please mark all that apply)  
☐ Teeth, filled or repaired (for example, fillings, crowns, and/or bridges)  
☐ Teeth pulled  
☐ Dentures  
☐ Partial or full dentures  
☐ Work to improve appearance (for example, braces or bonding)  
☐ Other

**MEMORY & DISABILITY**

22. Have you been diagnosed with Alzheimer's disease, dementia or other problems with memory or thinking?  
☐ Yes ☐ No

23. Has someone you are helping care for been diagnosed with Alzheimer's disease, dementia or other problems with memory or thinking?  
☐ Yes ☐ No (If you answer NO to questions 22 & 23, skip to question 26)

24. I or the person I am helping care for was diagnosed in a timely way once we started noticing problems.  
☐ Yes ☐ No

25. I know what to do to help myself or the person I'm caring for and I know where to get help if I need it.  
☐ Yes ☐ No

26. The people helping me care for myself or me if I'm a caregiver feel well supported.  
☐ Yes ☐ No

27. My wishes for the kind of care I want to get are listened to and respected.  
☐ Yes ☐ No

28. Are you disabled?  
☐ Yes ☐ No (If you answer NO, skip to question 30)

29. How were you disabled?  
☐ Congenital (from birth)  
☐ In military service  
☐ Due to chronic disease  
☐ Due to accident/injury

**HEALTH CARE ACCESS**

30. What type of health care coverage do you have? (Please mark all that apply)  
☐ Medicare ☐ Indian Veterans Administration  
☐ Medicaid ☐ Indian Health Services  
☐ Private Insurance ☐ American Indian Health  
☐ Long-term care ☐ Indian Health/Tribal Insurance  
☐ None

31. Do you have one person you think of as your personal doctor or health care provider?  
☐ Yes, only one ☐ No ☐ More than one ☐ Don't know/not sure

32. When you are sick or need professional advice about your health, to which of the following places do you usually go? (Please mark all that apply)  
☐ A doctor's office ☐ Urgent care center  
☐ A clinic ☐ Community health department  
☐ A hospital outpatient department ☐ Traditional healer  
☐ A hospital emergency room

33. Have any of the following kept you from medical care in the past 12 months? (Please mark all that apply)  
☐ Cost ☐ No child care  
☐ Distance ☐ No transportation  
☐ Office wasn't open when I could get there ☐ No records for people with disabilities  
☐ No one speaks my language ☐ No one speaks my language  
☐ No one speaks my language ☐ No one speaks my language

**TOBACCO & ALCOHOL USE**

34. Do you smoke tobacco now?  
☐ Yes, everyday (If so, please mark all that apply)  
☐ Social/occasional ☐ Yes, former smoker (If so, please mark all that apply)  
☐ No, never smoked ☐ No, former occasional ☐ No, never smoked (skip to question 36)

35. How many cigarettes do you smoke per day?

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36. Do you use chewing tobacco or snuff?

☐ Yes ☐ No

37. How many containers of snuff or chewing tobacco per week do you use?

NUMBER OF CONTAINERS

38. The next few questions are about drinks of alcoholic beverages. By a "drink," we mean a can or bottle of beer, a glass of wine or a wine cooler, a shot of liquor, or a mixed drink with liquor in it. How long has it been since you last drank an alcoholic beverage?

☐ Within the past 30 days  
☐ More than 30 days ago but within the past 12 months  
☐ More than 12 months ago but within the past 5 years  
☐ More than 5 years ago  
☐ I have never had an alcoholic drink in my life  
(If you have never had an alcoholic drink, skip to question #40.)

39. During the past 30 days, on how many days did you have five or more drinks on the same occasion? (By "occasion," we mean at the same time or within a couple hours of each other.)

☐ None ☐ 1 or 2 days ☐ 3 or 5 days ☐ 6 or more days

**WEIGHT & NUTRITION**

40. How tall are you without shoes?

FEET INCHES

41. How much do you weigh today?

POUNDS

42. Are you presently trying to lose or gain weight?

☐ Yes, trying to lose weight  
☐ No, trying to gain weight

43. Over the past 30 days, what vigorous exercises did you do? (Please mark all that apply.)

☐ Aerobics ☐ Walking  
☐ Bicycling or bicycling ☐ Swimming  
☐ Gardening ☐ Yard Work  
☐ Fishing ☐ Unleashed Hunting  
☐ Hunting ☐ Horse-riding, Fencing

44. Please mark all that apply to your nutritional health.

☐ I have any disease or condition that made me change the kind and/or amount of food I eat.  
☐ I eat few fruits or vegetables or milk products.  
☐ I have 3 or more drinks of beer, liquor or wine almost everyday.  
☐ I have teeth or mouth problems that make it hard for me to eat.  
☐ I don't always have enough money to buy the food I need.  
☐ I eat alone most of the time.  
☐ I take 3 or more different prescriptions or over-the-counter drugs at the same time.  
☐ Since the beginning of 1990, I have lost or gained 10 pounds in the past 6 months.  
☐ I am not always physically able to shop, cook and/or feed myself.

**SOCIAL SUPPORT/HOUSING**

45. Do you participate in cultural practices that include traditional food, music, and customs?

☐ All of the time ☐ Some of the time  
☐ Most of the time ☐ None of the time

46. How often do you get out and socialize (attend church/religious meetings, clubs, organizations you belong to or cultural activities/traditional ceremonies)?

TIMES PER MONTH

47. How long have you lived at your present address?

☐ Less than 5 years  
☐ 5-10 years  
☐ Over 10 years

48. What type of housing do you presently have?

☐ Single family residence  
☐ An apartment  
☐ Sleeping room/boarder house  
☐ Retirement home  
☐ A health facility (available medical personnel)  
☐ Hospice  
☐ Other

49. Are you living with family members, non-family members, or alone?

☐ With family members  
☐ With non-family members  
☐ With both family and non-family members  
☐ Alone

50. How many (INCLUDING YOURSELF) live in your household?

NUMBER OF HOUSEHOLD

51. Do you have a family member who provides care for you?

☐ Yes ☐ No

52. Do you take care of grandchildren?

☐ Yes ☐ No

53. Are you the primary caregiver of grandchildren?

☐ Yes ☐ No

**SOCIAL FUNCTIONING**

54. During the past month, how much of the time were you a happy person?

☐ All of the time ☐ Some of the time  
☐ Most of the time ☐ None of the time

55. How much of the time, during the past month, have you felt calm and peaceful?

☐ All of the time ☐ Some of the time  
☐ Most of the time ☐ None of the time

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56. How much of the time, during the past month, have you been a very nervous person?

☐ All of the time ☐ Some of the time  
☐ Most of the time ☐ None of the time

57. How much of the time, during the past month, have you felt downhearted and blue?

☐ All of the time ☐ Some of the time  
☐ Most of the time ☐ None of the time

58. How much of the time, during the past month, have you felt so down in the dumps that nothing could cheer you up?

☐ All of the time ☐ Some of the time  
☐ Most of the time ☐ None of the time

59. We would like to ask the extent to which you feel you can personally influence things by what you do or say. How much influence do you feel over your life in general?

☐ Almost no influence ☐ A lot of influence  
☐ Little influence ☐ Total influence  
☐ Some influence

60. Are you now using, or if at some point you become unable to meet your own needs, would you be willing to use the following services? (Please mark all that apply.)

(Interviewer, please see guide for definitions.)

BOOK USING	W/ORDS OF USE
<input type="checkbox"/>	Adult Day Care
<input type="checkbox"/>	Caregiver Programs
<input type="checkbox"/>	Case Management Programs
<input type="checkbox"/>	Emergency Response Systems
<input type="checkbox"/>	Elder Abuse Prevention Programs
<input type="checkbox"/>	Home Assistance
<input type="checkbox"/>	Home Health Services
<input type="checkbox"/>	Information and Referral Assistance
<input type="checkbox"/>	Legal Assistance
<input type="checkbox"/>	Long-term Care
<input type="checkbox"/>	Meals
<input type="checkbox"/>	Personal Care
<input type="checkbox"/>	Pharmacy
<input type="checkbox"/>	Respite Services
<input type="checkbox"/>	Senior Center Programs
<input type="checkbox"/>	Senior Housing
<input type="checkbox"/>	Senior Center Programs
<input type="checkbox"/>	Transportation
<input type="checkbox"/>	Volunteer Services
<input type="checkbox"/>	Long-term Care Services

**DEMOGRAPHICS**

61. Gender

☐ Male ☐ Female

62. Age

ENTER AGE

63. Current marital status

☐ Married or living with partner  
☐ Divorced or separated  
☐ Widowed

64. What is your individual annual income?

☐ \$0 - \$4,999 ☐ \$20,000 - \$24,999  
☐ \$5,000 - \$9,999 ☐ \$25,000 - \$29,999  
☐ \$10,000 - \$14,999 ☐ \$30,000 - \$34,999  
☐ \$15,000 - \$19,999 ☐ \$35,000 or more

65. Have you been employed full or part-time during the past 12 months?

☐ Full-time ☐ Part-time ☐ Retired ☐ No

66. What is the highest grade or year of school you completed?

☐ Never attended or kindergarten only  
☐ Elementary ☐ High School ☐ College/Technical School ☐ Graduate/Professional School

67. What zip code do you currently reside in?

ZIP CODE

68. What county/borough do you currently reside in?

COUNTY/BOROUGH

69. Are you American Indian, Alaska Native, Native Hawaiian, Descendant or other?

☐ American Indian ☐ Alaska Native  
☐ Native Hawaiian ☐ Other  
☐ Descendant (grandparent or parent is an enrolled tribal member)

70. Do you reside on/in a reservation, trust land, Alaska village, or Hawaiian homestead?

☐ Yes ☐ No

71. Are you an enrolled member of a federally recognized tribe?

☐ Yes ☐ No

72. Have you ever served on active duty in the U.S. Armed Forces, Military Reserve, or National Guard?

☐ Yes ☐ No

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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 <sup>a</sup> (55 and over)
General Health Status				
1. Would you say your health in general is excellent, very good, good, fair, or poor?	Excellent			13.8% <sup>1</sup>
	Very Good			29.2% <sup>1</sup>
	Good			32% <sup>1</sup>
	Fair			16.8% <sup>1</sup>
	Poor			7.8% <sup>1</sup>

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## Identifying Our Needs: A Survey of Elders VI Urban vs. Rural Data

- Rural-Urban Commuting Areas (RUCA) codes
  - “A Census tract-based classification scheme that utilizes the standard Bureau of Census Urbanized Area and Urban Cluster definitions in combination with work commuting information to characterize all of the nation’s Census tracts regarding their rural and urban status relationships.” (RUCA Rural Health Research Center, 2018).
  - Zip codes were used for determination of Rural-Urban Commuting Area (RUCA) codes. These are a widely applied national geographic taxonomy based on city/town population (Census Bureau designation as an urban place/cluster) and on work commuting patterns. This taxonomy classifies locations into one of four categories: urban, large rural, small rural, and isolated rural. Urban areas are defined as those with a core city population of 50,000 or greater. Large rural areas have a population between 10,000 and 49,999; small areas are between 2,500 and 9,999, and isolated small rural areas have populations less than 2,500 (United States Department of Agriculture, 2018; RUCA Rural Health Research Center; 2018).

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## Identifying Our Needs: A Survey of Elders VI Urban vs. Rural Data

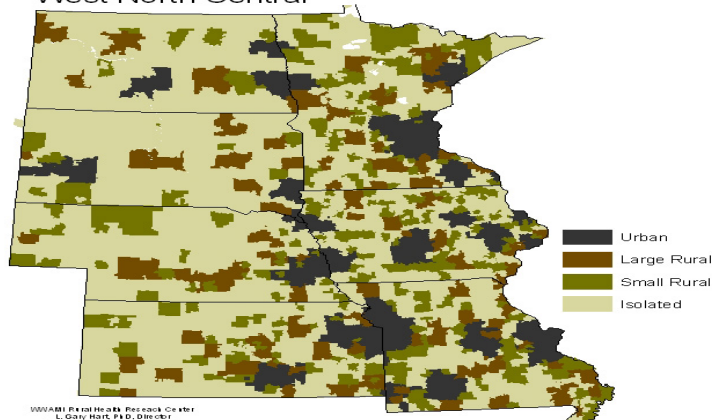
- RUCA codes for *Identifying Our Needs: A Survey of Elders VI* data
- AI/AN/NH elders who utilize Title VI services who reside within, near, or a certain radius of a defined urban area
  - Important to note: May live on the reservation or off the reservation, but reside in a certain proximity of an urban area.

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## RUCA Maps

Census Division Four:  
West North Central



WVUABU Rural Health Research Center  
L. Gary Hart, Ph.D., Director  
Urban & Rural Health, 2006

Hart, G.L. (2006). Maps: Census Division Four: West North Central. RUCA Rural Health Research Center.  
Retrieved from: [http://depts.washington.edu/urhrcnaa/map\\_4\\_divisions.php](http://depts.washington.edu/urhrcnaa/map_4_divisions.php)

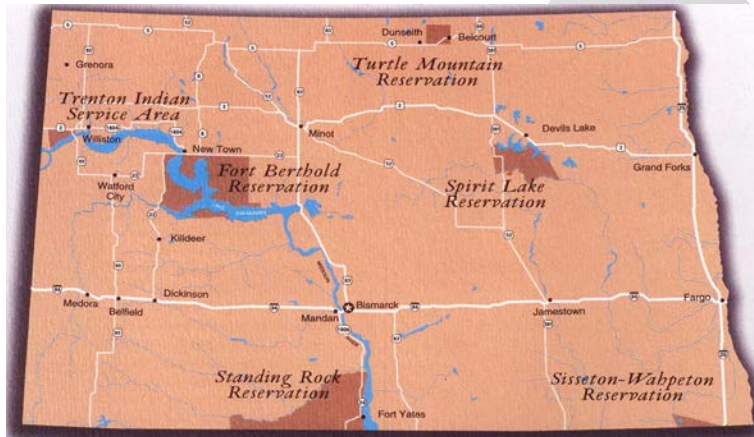
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## Map of North Dakota Tribes



North Dakota Indian Affairs Commission (2018). Tribal Nations. Official Portal for North Dakota State Government. Retrieved from: <http://indianaffairs.nd.gov/tribal-nations/>

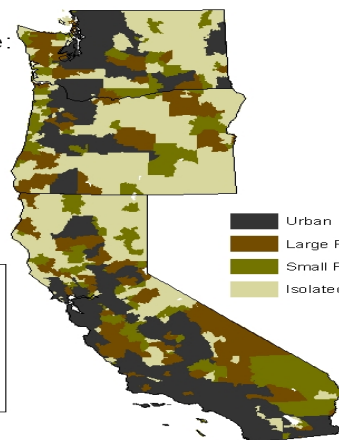
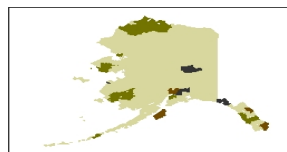
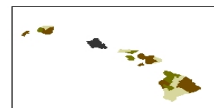
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## RUCA Map Census Division Nine: Pacific

Census Division Nine:  
Pacific



Urban  
Large Rural  
Small Rural  
Isolated

WUCCABE PLANNING RESEARCH CENTER  
11. GARY HART, P.D. DIRECTOR  
UNDER THE OTTOLENGHI INSTITUTE, 2006

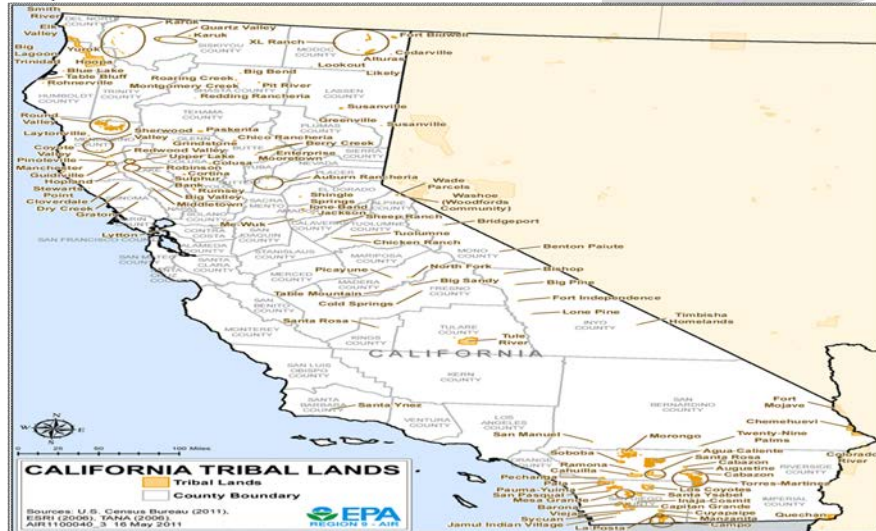
Hart, G.L. (2006). Maps Census Division Nine: Pacific. RUCA Rural Health Research Center. Retrieved from:  
[http://depts.washington.edu/uwruca/map\\_4\\_divisions.php](http://depts.washington.edu/uwruca/map_4_divisions.php)

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## California Tribes



United States Environmental Protection Agency (2018). Air Quality Analysis California Tribal Lands and Reservations: Pacific Southwest, Region 9. Retrieved from: <https://www3.epa.gov/region9/air/analysis/tribe.html>

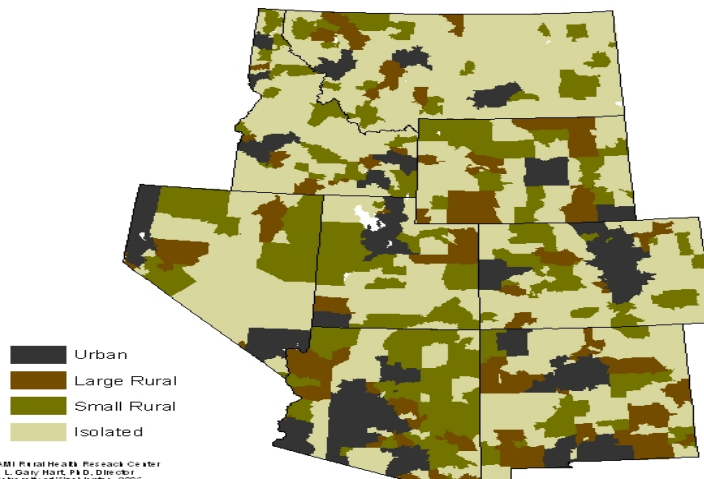
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## RUCA Map Census Division Eight: Mountain

Census Division Eight: Mountain

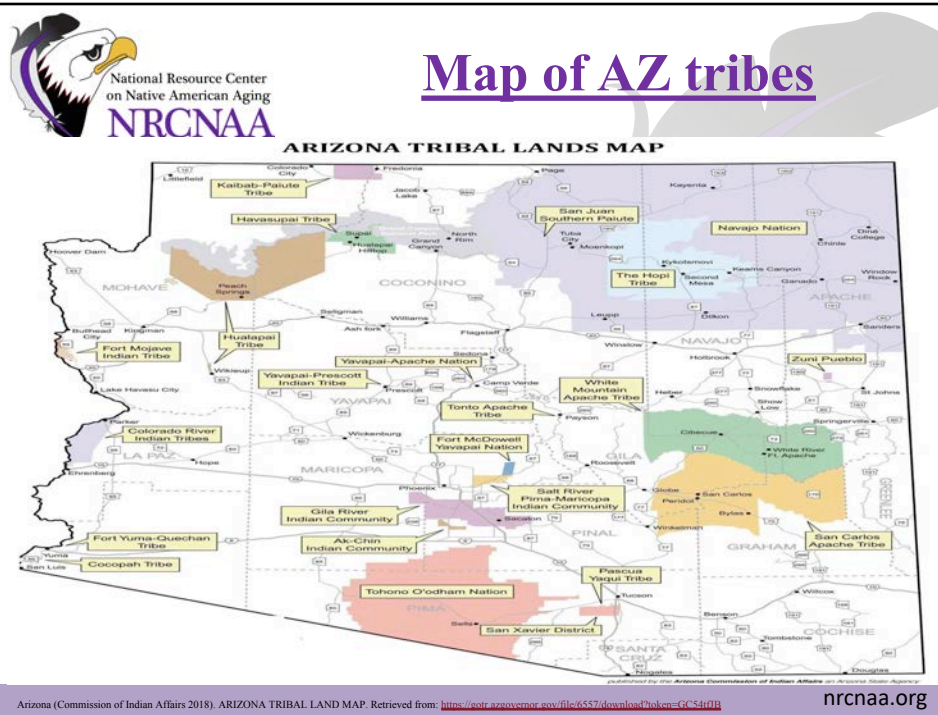


WWAMI Rural Health Research Center  
University of Washington  
Seattle, WA 98195

Hart, G.L. (2006). Maps Census Division Eight: Mountain. RUCA Rural Health Research Center. Retrieved from: [http://depts.washington.edu/wwami/man\\_4\\_divisions.php](http://depts.washington.edu/wwami/man_4_divisions.php)

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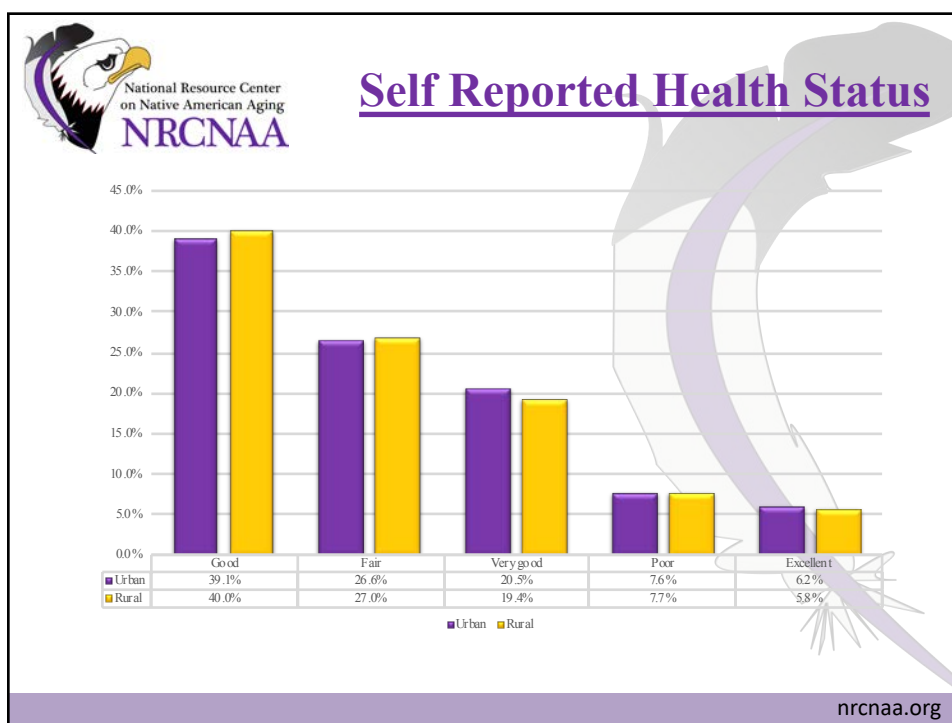
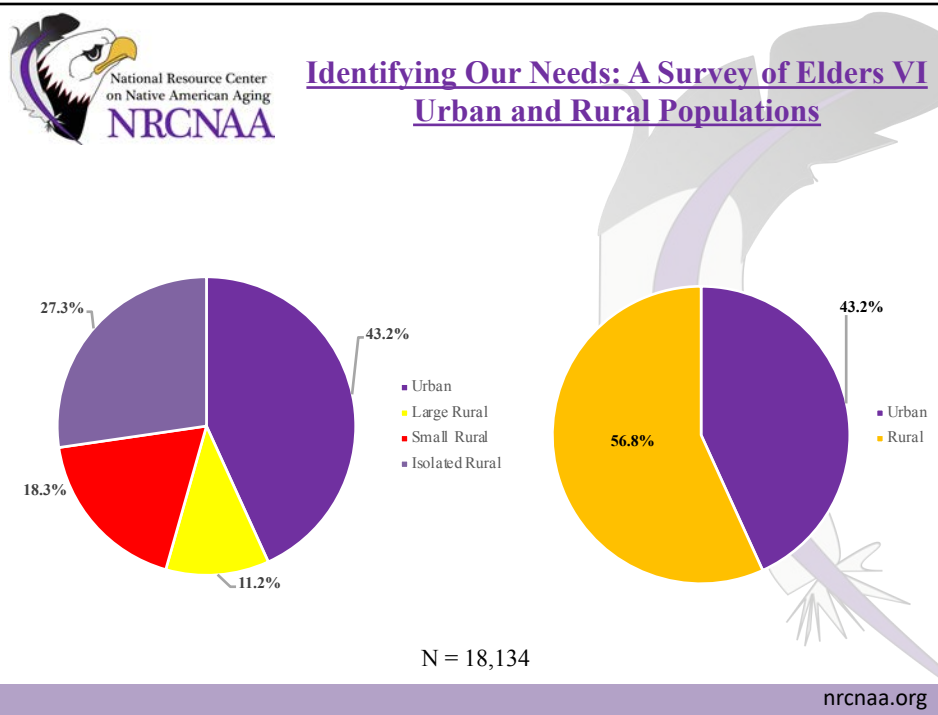




**Urban vs. Rural Comparisons**

**Identifying Our Needs: A Survey of Elders Data**

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## Top 5 Chronic Conditions

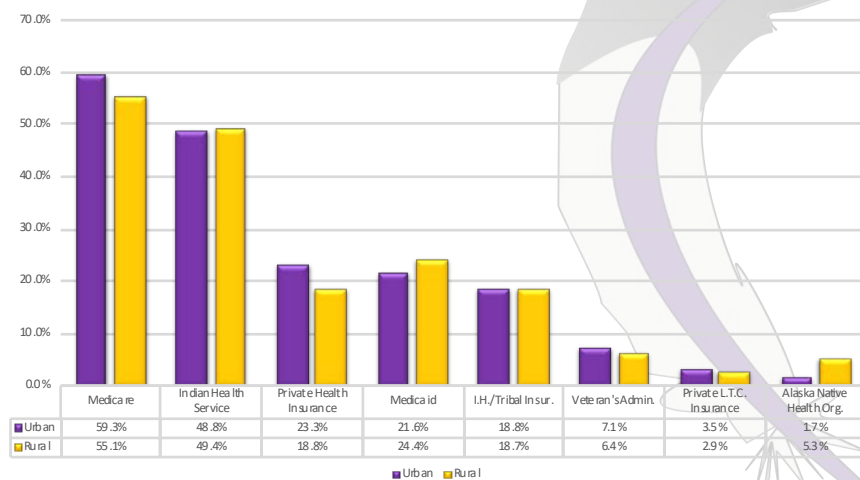


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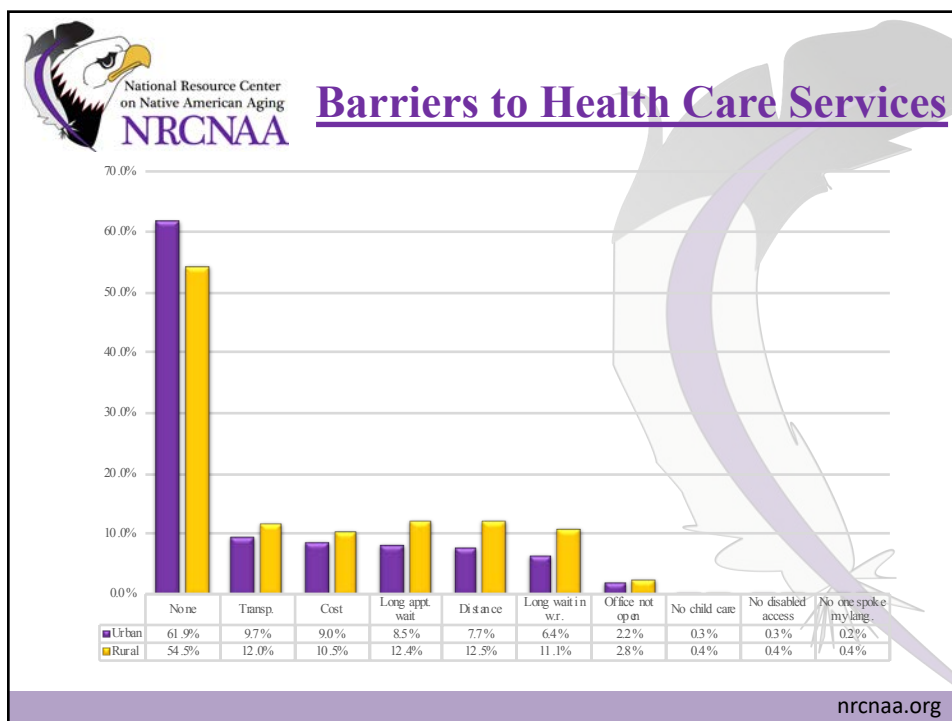
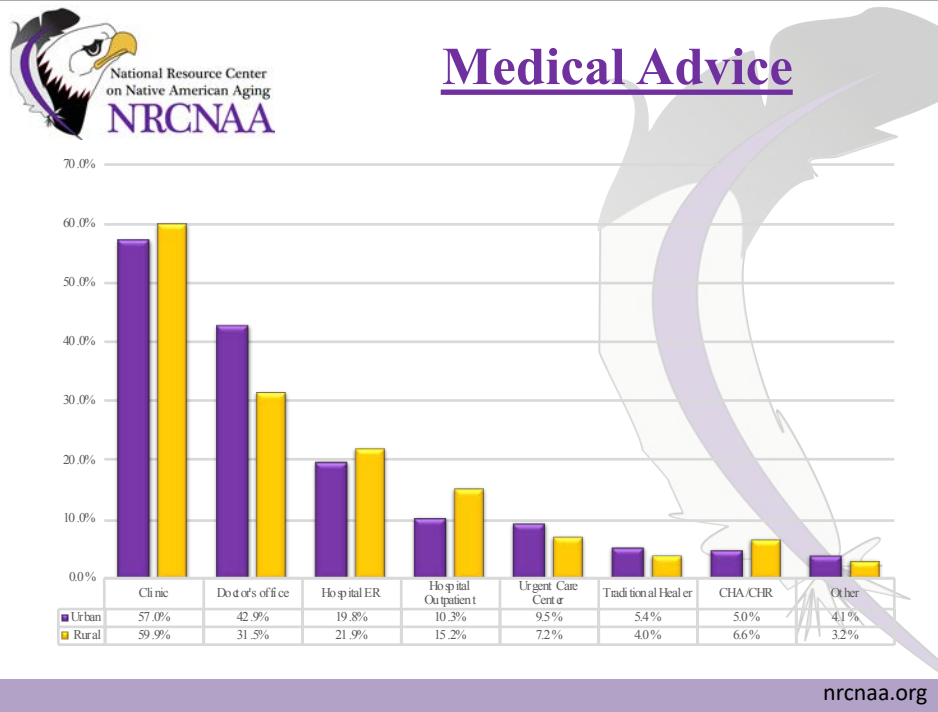


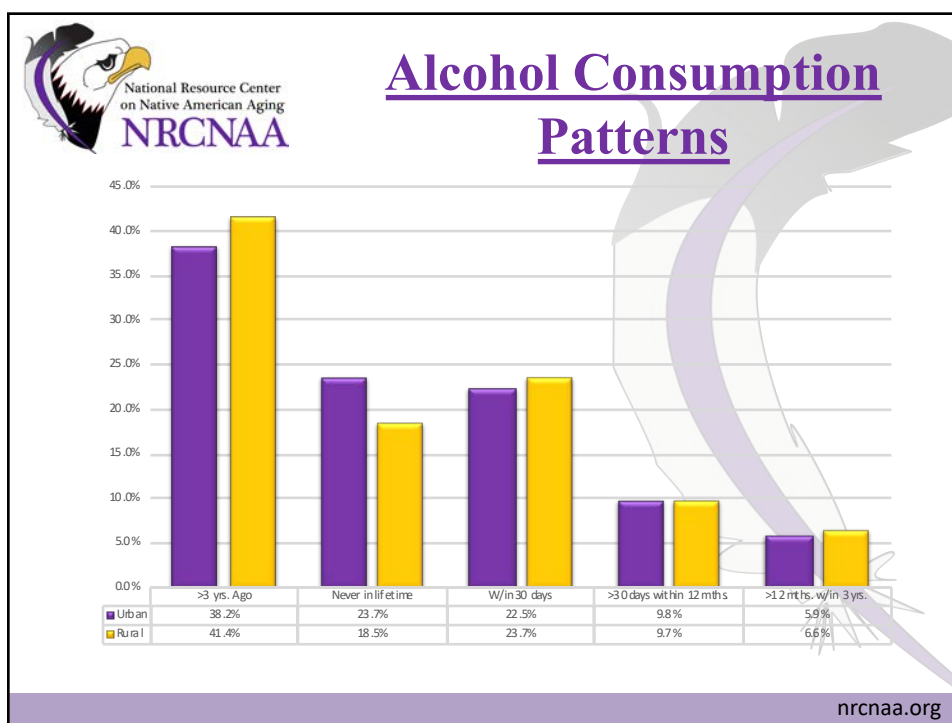
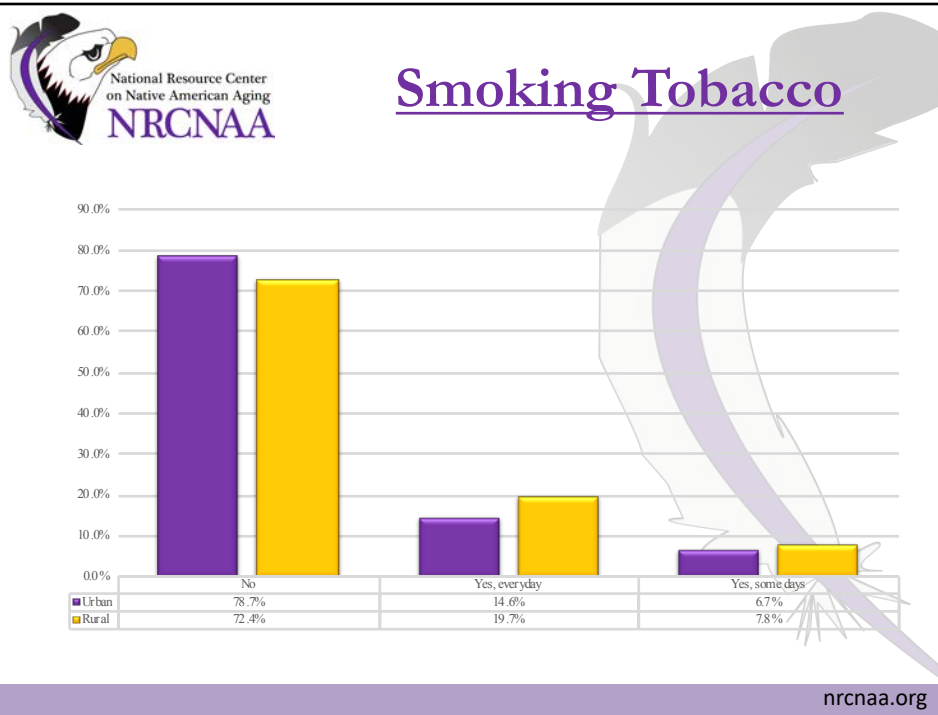
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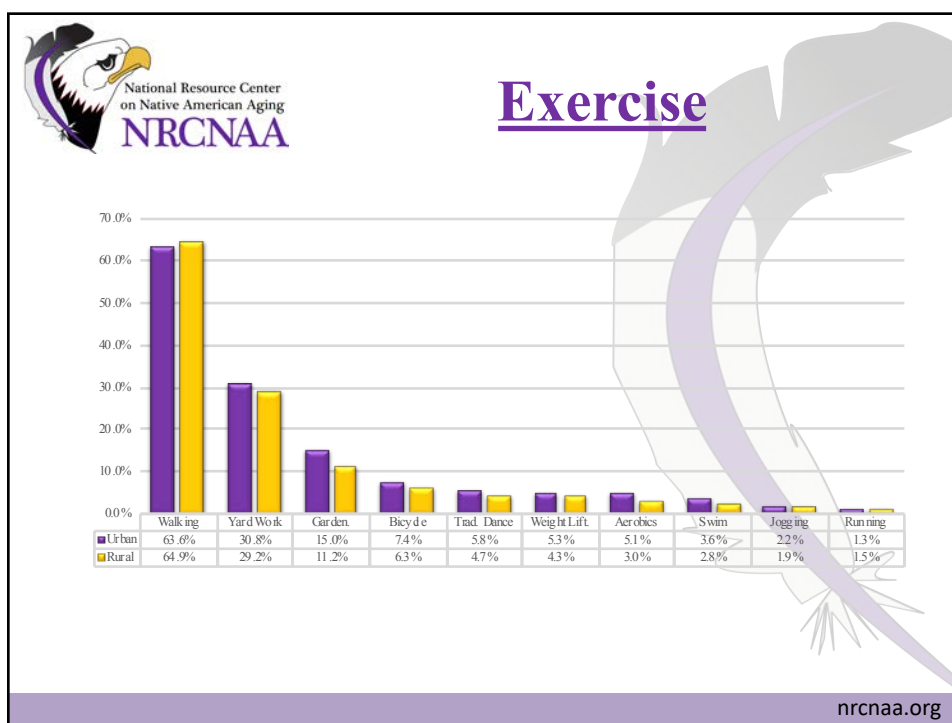
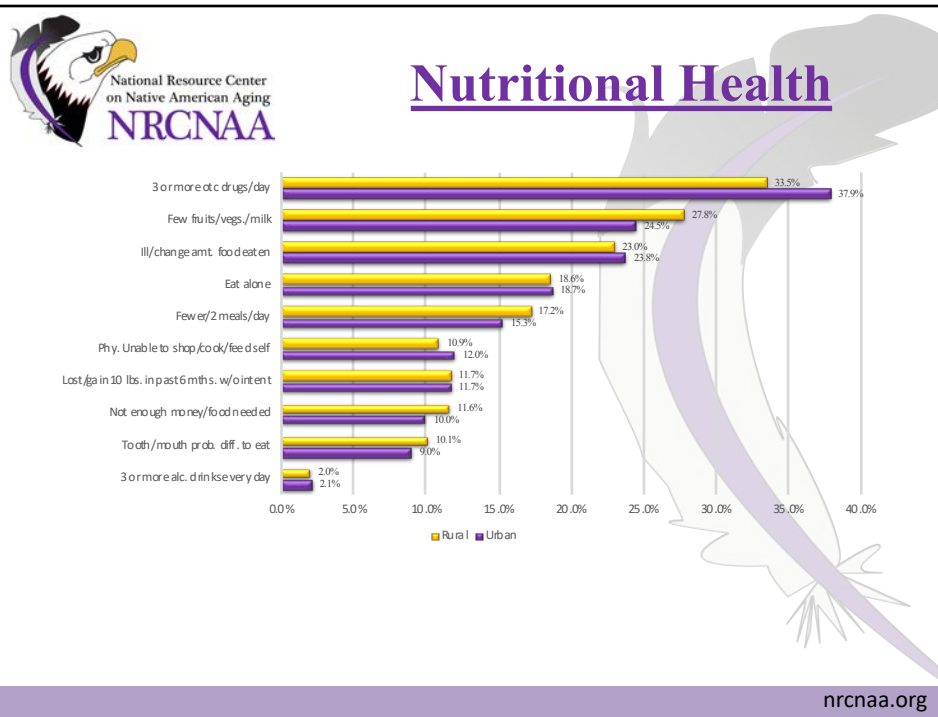
## Health Care Coverage



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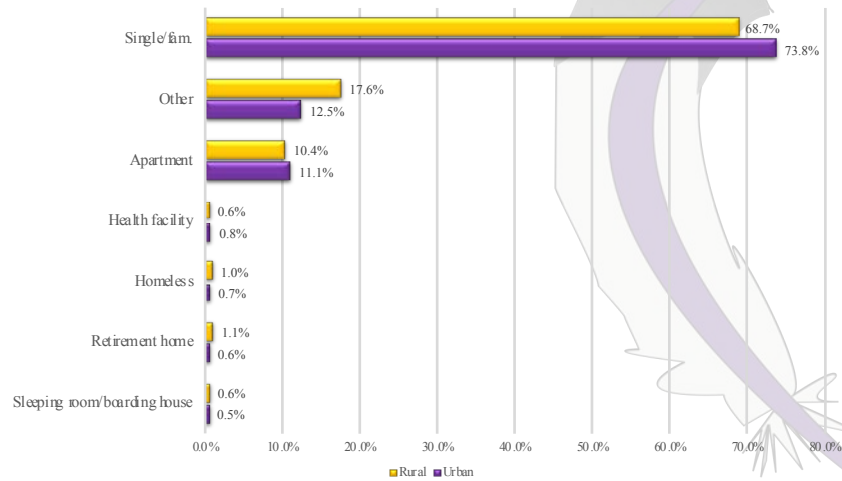






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## Housing Type

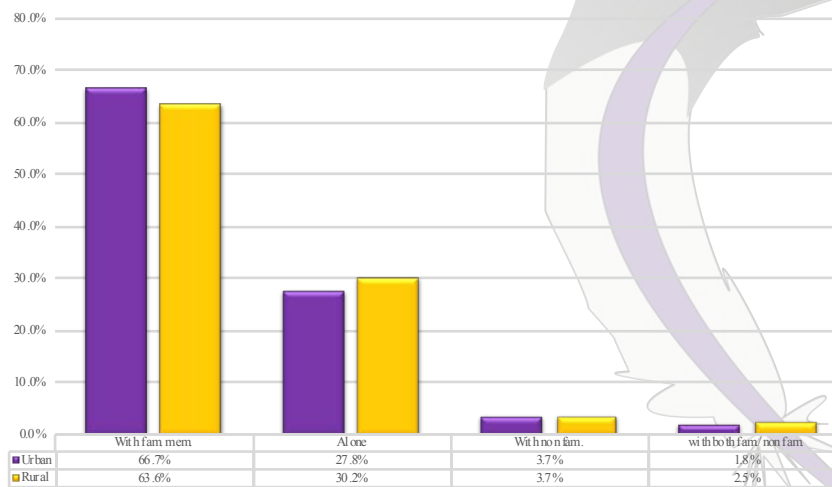


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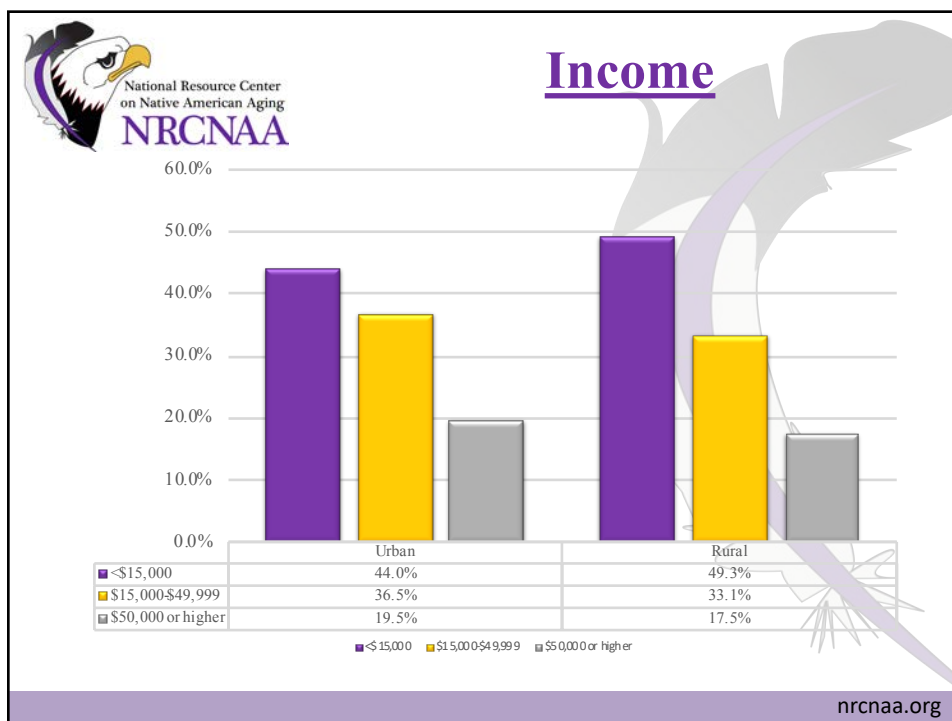
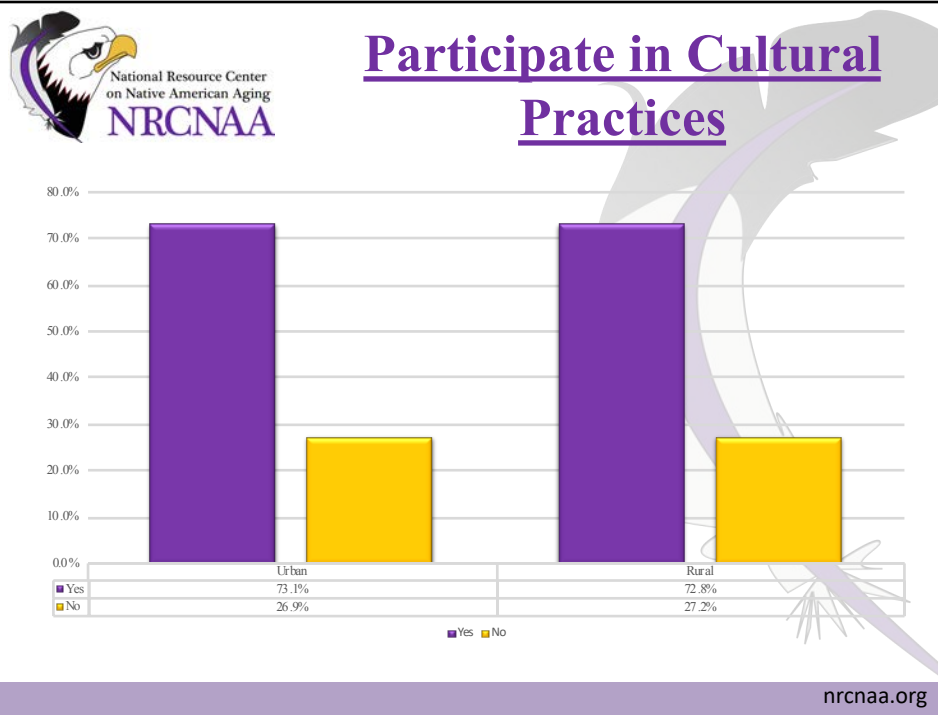
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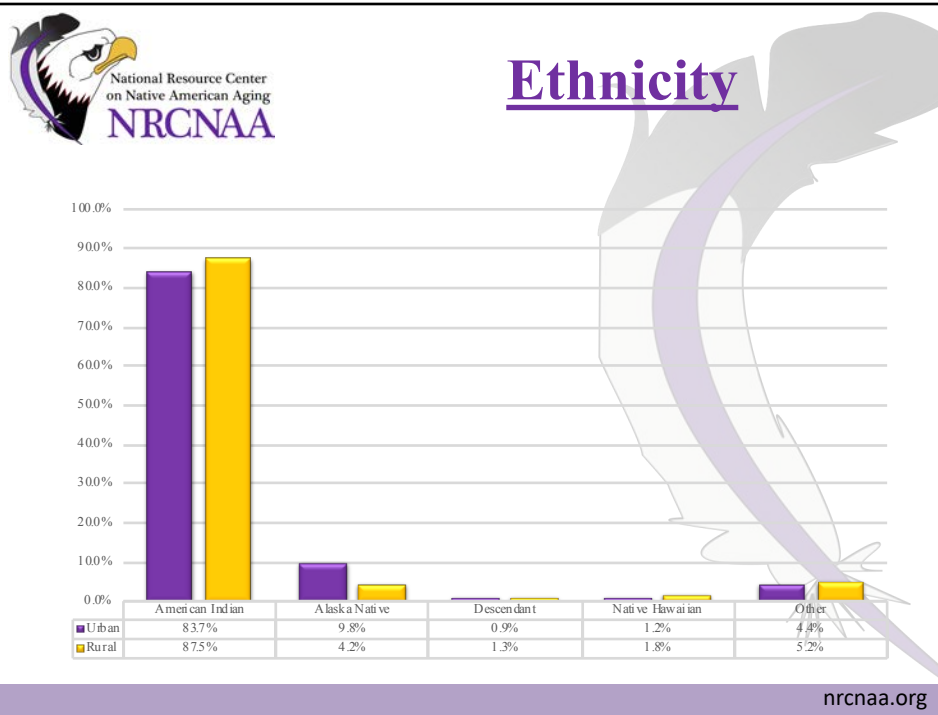
## AI/AN/NH elders residing with family members, non-family members, or alone




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## Utilization of Data for the AI/AN/NH Population

- Local Level (rural and urban areas)
  - Renewal of Title VI Grants
  - Strengthen Grant Proposals
  - Document health and social disparities
  - Tribal/Urban Indian organization planning and infrastructure
  - Empowers the tribe and urban Indian organizations with information to identify and address health needs
- National Level
  - Training for Native elder service providers
  - Advocating for resources and funding at the state, regional, and national level
  - Filling the research gap for Native elder information
- Training Native researchers in aging field
- Decision-making and policy

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## Summary of Data Process

- *Partnership with the Tribe/Urban Indian Organization/Urban Indian Health Center/Coalitions/Other Urban Indian elder based social and health organizations/programs*
  - Open communication and transparency about the research and data
- *Building Tribal/Urban Indian Organization Capacity*
  - People within the community/Urban Indian organizations administering surveys and assisting in conducting the research.

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## Summary of the Data Process

- *Obtaining proper permission to conduct research within tribal community/Urban Indian Organizations/Urban Indian Health Centers/Coalitions/Other*
  - Tribal community permissions
    - Tribal Resolutions
    - Tribal IRB or RRBs
    - Verbal consent from participating AI/AN/NH elder
  - Urban Indian Organizations/Urban Indian Health Centers/Coalitions/Other Urban Indian elder social and health organizations/programs permissions
    - Potential permission/approvals
      - Organizations IRB/other permissions
      - Indian Health Service IRB/other permissions
      - Consent from participating AI/AN/NH elder
      - Potential permissions from enrolled tribe
- *Benefits to the partners (tribe/urban Indian organization/health centers/coalitions/other programs and researcher)*
  - Data assists in bringing additional resources or funding to address health and social issues or disparities. Helps to change policy relating to the AI/AN elder population. Provides an invaluable rich data source.
- *Tribe owns data/urban organizations/health centers/coalitions/other programs/IHS/research partners own data with urban Indian organization partner.*

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## The NRCNAA Team



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Cole Ward, M.A., Research Specialist

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## Contact Information

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<http://www.nrcnaa.org>

[nrcnaa.org](http://nrcnaa.org)



## Questions?



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<http://dx.doi.org/10.1080/10705422.2012.732001>

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