

Executive Summary

Native Urban Elder Needs Assessment Survey (NUENAS 1.0)

Insight and awareness into the current health and social needs of urban Native Elders is incredibly important. In order to better understand and raise awareness of the needs of urban American Indian and Alaska Native Elders, the Coalition on Urban Indian Aging (CoUIA) was formed.

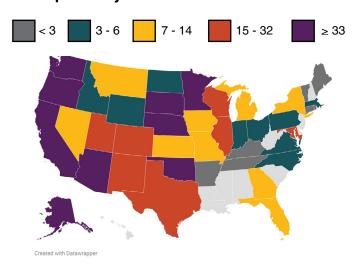
Through partnership with the National Resource Center on Native American Aging (NRCNAA), the Native Urban Elder Needs Assessment Survey (NUENAS 1.0) was subsequently developed. This survey assesses various health and social-related factors among urban Native Elders, such as general health, screenings, memory and disability, alcohol and tobacco use, and social activities, among others. To our knowledge, it is the first time a national survey has been administered among urban Native Elders, with the primary focus specifically designed to explore the unique issues that they face.

From March 2021 through November 2022, there were 1,023 urban Native Elders, ages 55 and older, who were surveyed through hard copy surveys at urban centers across the United States (located in Nebraska, Minnesota, Oklahoma, California, and Massachusetts; n = 299), as well as through an online Qualtrics survey (n = 724).

The data points listed in this Executive Summary provide only a brief overview of some of the health and social issues among urban Native Elders who participated in the survey. A final report and accompanying data booklet will be available with a more in-depth, detailed account of the results.

By providing tribes and Native organizations with this data, we can identify existing needs and work to address them through planning efforts, decision-making activities, policy development, and pursuit of resources.

Number of Native Urban Elder Participants By State



The map above shows the number of survey participants located in each state. States in dark grey, such as Arkansas, Connecticut, and Rhode Island (among others) had the smallest numbers of respondents, whereas states such as California, Minnesota, and Oklahoma had the most participants.

Demographics

- 83.3% were American Indian.
- 80.8% identified as female.
- 52.9% were between the ages of 60 and 69 years.
- Most were members of a federally-recognized (84.4%) or state-recognized (63.6%) tribe.

General Health Status

- Most urban Native Elders rated their health as good (40.4%) or fair (28.4%).
- 74.7% had not had a hospital stay in the past year.
- 46.6% reported having between 1 and 4 falls in the past year.
- 50.4% worried about falling.

Activities of Daily Living

• Most urban Native Elders reported struggling with heavy housework (42.7%), walking (34.7%), and bathing and showering (20.0%).



Screening

- 48.0% of female urban Native Elders had completed a mammogram in the past year.
- 40.1% of male urban Native Elders had never had a prostate-specific antigen (PSA) test performed.

Vision, Hearing, and Dental

- 38.3% reported difficulty in seeing, even when wearing corrective lenses.
- 19.8% had trouble hearing, even when wearing a hearing aid.
- 56.7% had seen a dentist or dental hygienist in the past year.

Memory and Disability

- 0.9% of urban Native Elders had been diagnosed with Alzheimer's Disease.
- 1.3% were diagnosed with dementia.
- 39.8% of urban Native Elders reported being diagnosed with a disability.

Healthcare Access

- 50.2% of urban Native Elders reported using Medicare and Indian Health Services (30.1%).
- Urban Native Elders were most likely to go to a doctor's office (47.6%) or clinic (39.8%).
- Cost (18.2%) and having too long of a wait for an appointment (15.0%) were common barriers to medical care.

Tobacco and Alcohol Use

- 74.5% of urban Native Elders did not smoke.
- Among smokers, the average number of cigarettes smoked per day was 8.24.

Weight and Nutrition

- 51.9% of urban Native Elders were obese; 28.7% were overweight.
- 28.9% were at a high nutritional risk.
- 34.9% consumed traditional foods regularly, with commonly listed items being wild rice, beans, corn, fry bread, fish, and salmon.

Social Support and Caregiving

- Smudging (49.7%) and powwows (49.5%) were the most common cultural practices.
- 26.3% reported socializing 1-2 times per week, although 25.9% never socialized.
- 35.5% of Elders took care of their grandchildren, with 14.8% being the primary caregiver.

Social Functioning

- Most of the time in the past month, urban Native Elders felt happy (50.8%) and calm (43.9%).
- Some felt nervous (32.7%) or downhearted and blue (37.1%) a little of the time.
- 59.9% reported feeling very safe in daily life.

Technological Connectedness

- 61.4% of urban Native Elders had access to the Internet all of the time.
- 70.3% reported using a smartphone.
- 82.8% reported using social media.

Social Challenges

- Nutrition was listed as being the greatest social challenge.
- Urban Native Elders were most likely to currently use pharmacy services (30.0%) and government-assisted housing (9.9%).
- If unable to meet their own needs, urban Native Elders would be most likely to consider using home-delivered meals (59.2%) and home health services (43.6%).

While each Elder's health status is unique, and additionally may differ from one location and tribe to the next, together these items provide a snapshot of urban Native Elder health in America. Together, they help us to better understand and raise awareness of the unique issues that the urban Native Elder population faces. We would like to sincerely thank all of the urban Native Elders who completed the survey, as well as each of the organizations serving urban Native Elders without whom this research would not be possible.

For questions about the report, please contact:

Dr. Collette Adamsen, NRCNAA Director (800) 896-7628, info@nrcnaa.org