



INDIAN HEALTH PRIORITIES ACCESS TO HEALTHCARE

CALIFORNIA TRIBAL EPIDEMIOLOGY CENTER

Indian Health Priorities

2008-2009

As Indian people we have been conducting our own health studies for hundreds of years. Finding ways to heal our bodies is part of our culture. The California Tribal Epidemiology Center (CTEC) goals are the same as ours. CTEC wants healthier communities and to do that together we need good health information.

CTEC has been seeking input from American Indian community members as to what they think are the most important health concerns in their community. In a survey, people were asked to rank their top 10 health concerns out of a list of 27 health topics. An 'other' option was provided for people to fill in if a concern was not listed.

CTEC priorities are a combined result of the 499 surveys collected as of June 2009 at consultations with CTEC-member tribal health programs, and at various California Indian conferences and gatherings. People could choose more than one category: 204 respondents stated they were clinic staff, 97 were health board members, 59 were tribal council members, and 247 were community members.


Access to healthcare is often insufficient in rural and Native communities. Access to care helps to prevent illness and reduce the complications of many illnesses by identifying health conditions early and providing treatment. The types of healthcare access issues vary by community. Transportation to and from doctor's appointments, the availability of medicine and treatment options, having clinics open and fully staffed, and having culturally competent healthcare are all challenges throughout Indian Country.

Access to Medications

Getting and paying for medications was ranked as a high concern in our communities, with a ranking of number 9. More than one-third (38% or 188) of the people surveyed ranked access to medications as a top 10 health concern in their community. Medications are used to treat and prevent disease and complications. The cost or availability of certain medications is often an issue in receiving proper care and treatment. The California Health Interview Survey shows that in California, about 25% (95% Confidence Interval (CI): 18.3%-30.7%) of American Indians and Alaska Natives delayed or did not obtain prescriptions because they could not afford it, compared to 17% (CI: 14.8%-18.2%) of non-Hispanic Whites.

Availability of Traditional Indian Medicine

The availability of traditional Indian medicine had an overall rank of number 11 for CTEC health priorities. More than one-third (34% or 168) of those surveyed ranked the availability to traditional Indian medicine as a top 10 health concern. Honoring and practicing our traditional ways helps our communities to be healthy, strong and balanced. Barriers in our communities could include inadequate availability to traditional medicines or herbs and limited access to a medicine person or spiritual leader. Often there is limited knowledge and data on the effectiveness of traditional treatments, therefore clinics may not offer these services nor have a referral system in place.



Access to the Clinic

Access to medical care is important in remaining healthy and preventing illness. Respondents to the CTEC survey ranked access to the clinic as the 14th health concern for the community, with 29% or 146 of the people ranking it as a top 10 health concern. Barriers to access include: not having health insurance, not having enough money to cover payments, lack of providers or specialists, not knowing when or how to seek care, and lack of transportation and telephone service in rural areas and on tribal lands. Survey respondents mentioned that limited funding and access to specialty care was a high concern in the community.

In California, almost 19% of American Indians and Alaska Natives have no medical insurance.

People with health are more likely to seek needed healthcare. The California Health Interview Survey reported almost 19% (CI: 16.6%-20.8%) of American Indians and Alaska Natives in California do not have medical insurance compared to 7% (CI: 6.8%-7.5%) of non-Hispanic Whites.

Comments made by people on Access to Healthcare in Indian Country:

Without access none of the treatments or resources can be delivered, and without funding everything else is just a empty promise.

Our traditional medicines teach us our spiritual ways and help us reconnect to our spirits.

Our people go without medication because they can't pay or have no insurance. Getting appointments is difficult in economic times, no funds from IHS/State, so not enough funds to pay doctors, dentists, etc.

We have made good inroads in providing health service through our clinics. However, the whole area of traditional medicine is fading away fast. There is vast knowledge there, we need to preserve.

We are in hard times now. Cost of prescriptions are extremely high even with insurance. When you must take multiple medications it can literally come down to choosing between eating and having medication.

We talk Traditional Medicine, and the Doctor gives us pills and shots, that is not Traditional.

There are all kinds of ills: broken bones, injuries, spiritual illness, mental illness—the medical community really hasn't got it, we have been healing for thousands of years.

Thank you for those who took the time to fill out a survey. Your answers help us focus our work to provide better services to American Indians.