Barriers to Healthcare Access Among the AI/AN population in the Great Lakes Region who Identify as having a Disability
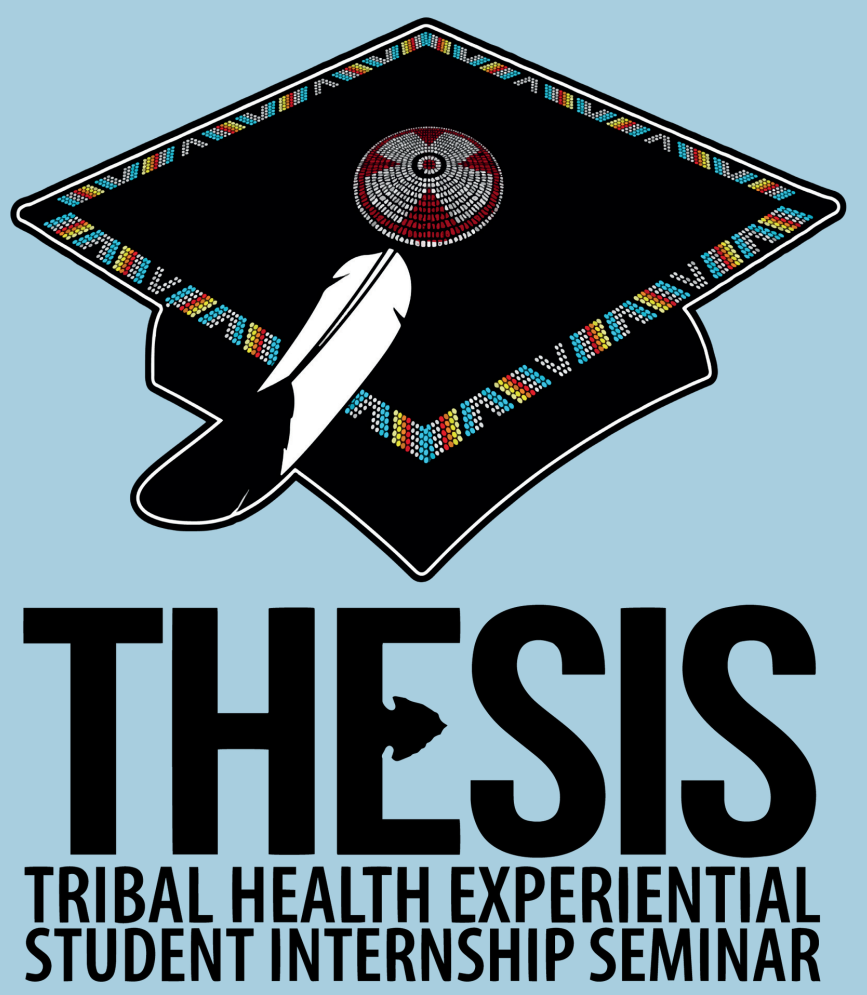
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THESIS
TRIBAL HEALTH EXPERIENTIAL STUDENT INTERNSHIP SEMINAR

Background

- The American Indian and Alaska Native (AI/AN) population faces a variety of barriers within the healthcare field when trying to access care [1].
- This issue is exacerbated among those AI/ANs who identify as having a disability as chronic health issues require more medical attention and higher healthcare costs on average [2].
- AI/AN have higher disability rates when compared to the US white population alongside facing these barriers to healthcare [5].
- There is significant research gap regarding disability in AI/ANs.
- Bringing light to issues faced by minority groups such as the AI/AN population is paramount to addressing them and achieving better in the near future.

Literature Review

Utilized databases: Google Scholar, PubMed, and Great Lakes Inter-Tribal Epidemiology Center (GLITEC) Search terms: ["american indian/alaska native" OR "american indian" OR "native american"] AND ["barriers" OR "disability"] AND ["healthcare"]
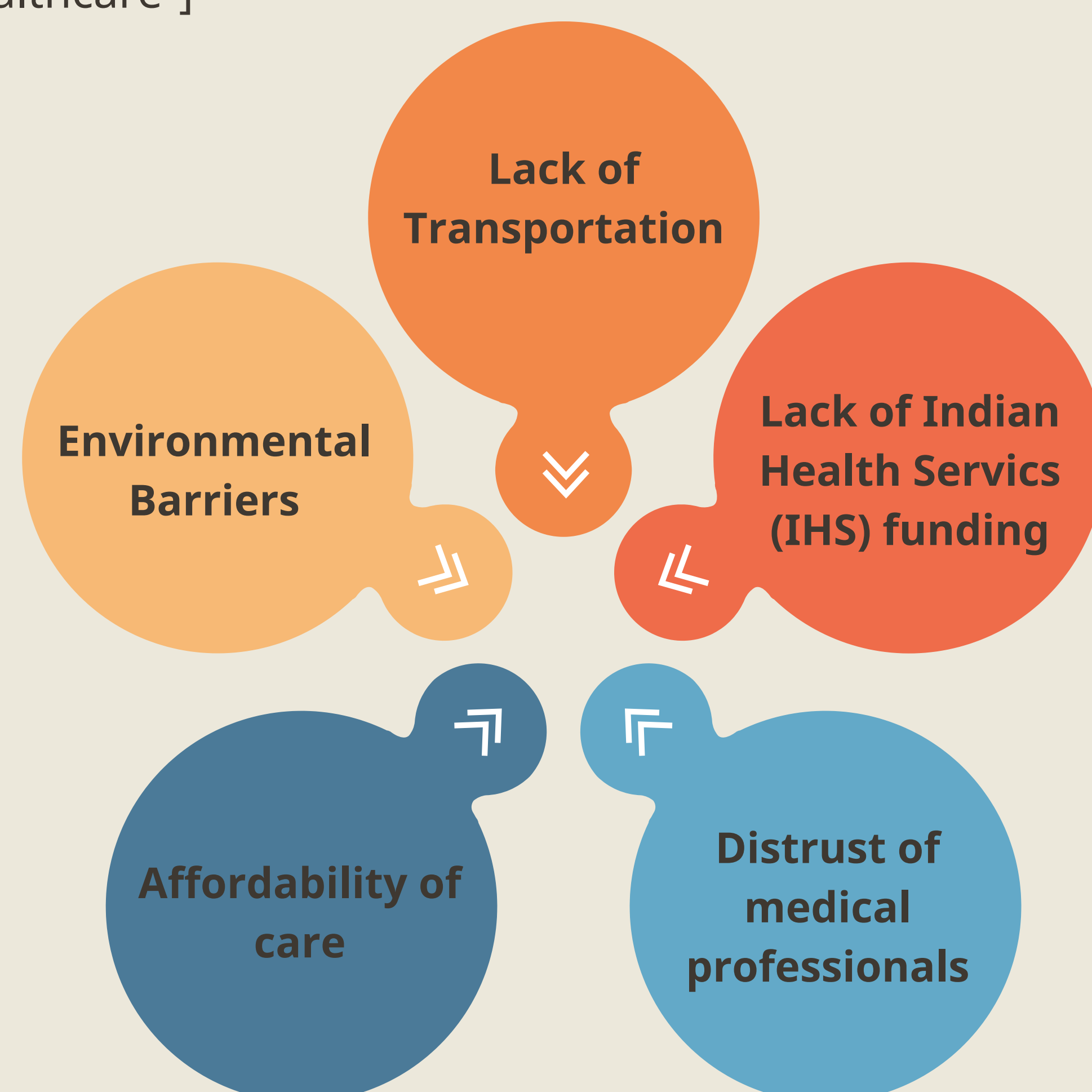

Figure 1. Identified barriers to healthcare in AI/AN populations

Quantitative Analysis

- Extracted data from the CDC Behavioral Risk Factor Surveillance System (BRFSS) 2022 Survey using RStudio Programming
- Selected 7 variables for analysis based on barriers identified in literature review [Supplemental Materials 1]
- Filtered participants to members of Great Lakes Region [Supplemental Materials 2]
- 6 questions defining disability status from American Community Survey (ACS) [Supplemental Materials 3]
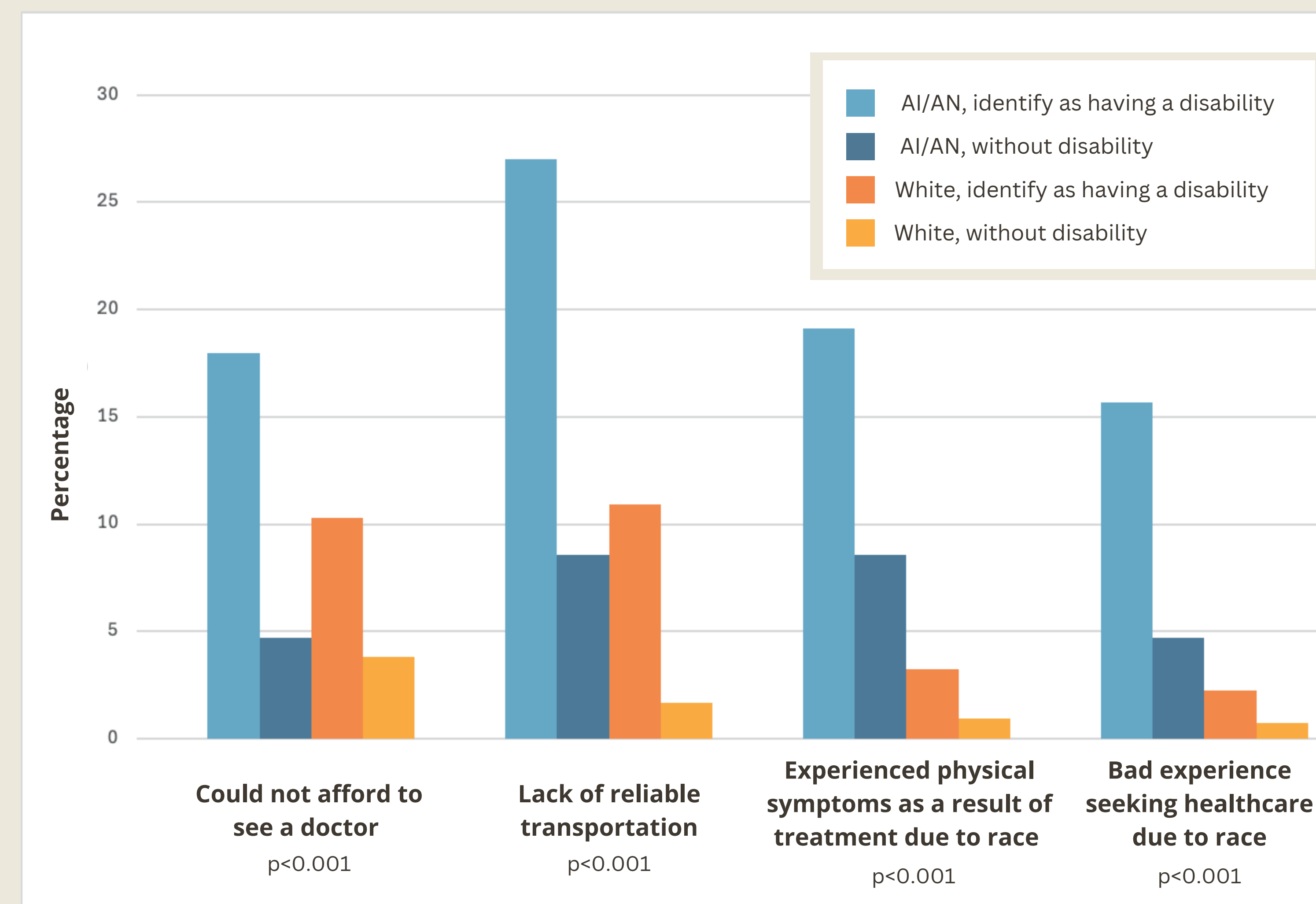- p-values calculated with Chi-square test of independence

Figure 2a. Significant barriers to healthcare in AI/AN and White populations in the Great Lakes Region who identify as having a disability from BRFSS Survey. *Additional variables available in supplemental Figure 2b.*

Acknowledgements

Supplemental Materials and References

Conclusions

- **AI/ANs who identify as having a disability disproportionally face barriers to healthcare.** Significant barriers identified include lack of transportation, inability to afford care, and mistreatment due to race.
- **Gaps in insurance and affording care.** Even though AI/ANs showed similar rates of having insurance, there was still a significant disparity in being able to afford a doctor when needed. This speaks to the limited coverage of insurance especially for disability services.
- **Distrust of healthcare systems.** AI/ANs identifying with a disability not only disproportionately experience discrimination, they are more susceptible to physical symptoms as a result of that discrimination. Historical mistreatment by the federal government also contributes to this distrust [6].

Future Direction

- **Increase IHS funding.** Previous literature suggests that IHS services in the Great Lakes Region face immense underfunding [2]. With a focus on increased IHS funding, resources such as transport services, insurance education, and treatment coverage could be implemented and expanded.
- **Research cultural protective factors.** Literature shows an increased AI/AN population is associated with reducing prevalence of disability [5]. Cultural traditions act as protective factors that contribute to a sense of belonging that helps treat negative effects of disability-related discrimination [7].

Limitations

The AI/AN population faces a lack of representation in state and federal data sets, like BRFSS, due to the small percentage of the United States population that they comprise, wide geographic spread, and high heterogeneity[4]. This study also fails to consider other ethnic groups and the state-wide rates limited ability to draw conclusions on the individual level.