

Health Impact Assessment: Indian Health Services Budget and Urban Indian Budgeting Decisions: Preliminary Report

Health Impact Assessments (HIAs) evaluate the impact of a public policy with the goal of promoting health, health equity, and social justice. This HIA examined the impact of the underfunding of the Santa Fe Service Unit Indian Health Service (IHS) Hospital on the inter-tribal community of American Indian and Alaska Natives in the metropolitan Santa Fe area. We refer to this community as the **Urban Indian community**.

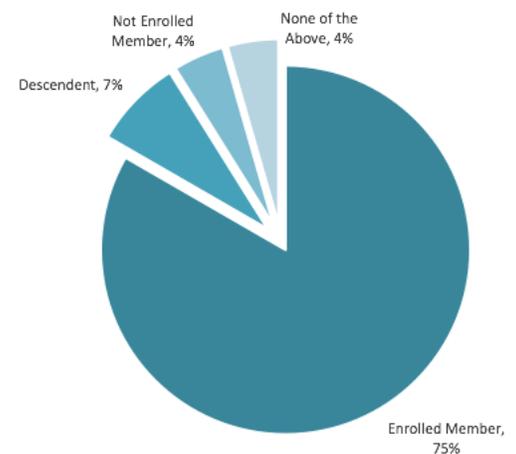
From 1998-2010, the Indian Health Service was forced to operate on its 1998 budget, during a time when healthcare spending per capita more than doubled. This underfunding forced the IHS to make serious cuts to available services at facilities throughout the country.

During the summer of 2016 the Santa Fe Indian Center (SFIC) HIA, in collaboration with Emily Haozous, PhD, RN, FAAN, collected a total of 164 surveys and 17 interviews asking the Urban Indian community about their own health and their opinions on the health of the community.

What we learned:

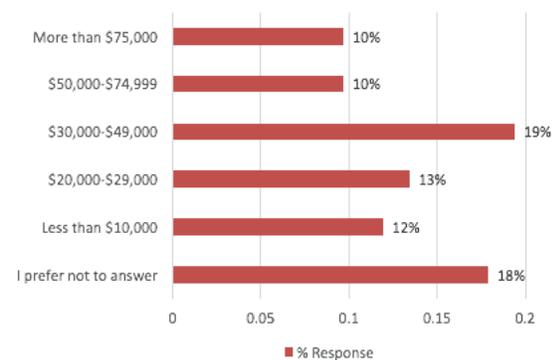
Over **156 different tribes** were represented, 58% from Southwest tribes, 10% from the Southern Plains, 1% from the Pacific Northwest, and 12% from the Northern Plains. The participants were all ages, from age 18-74, with the most respondents between the ages of 35-44 (24%). The participants were **well educated**, with almost 40% holding a high school diploma, 48% having earned an associate's degree or bachelor's degree, and 7% having earned a masters or professional degree. Unfortunately, in spite of the level of earned education, **the median income was between \$20,000-\$29,000**. For context, the median income in Santa Fe county for 2010-2014 was \$53,000 (Census.gov).

Self Identified Tribal Enrollment



*“I’m a college educated person, I’m working full time, and cannot provide enough medical coverage through my job. It would cost me more than \$150 PER PAYCHECK to cover my kids. That’s \$300.00 a month, and I can’t pay rent, own and drive a car, keep the utilities on, **and feed them and pay medical insurance. Yet I don’t qualify for Medicaid for them either.**”*

Income of Survey Participants



<http://nmhiep.org/resources/hia-reports>

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Health of the Community

When surveyed, the Santa Fe Urban Indian community identified **diabetes** as the most important health problem for the community, **being overweight** as the least healthy behavior, and **chronic disease** (such thyroid conditions or chronic pain) as the problem that most negatively affects the community.

The top health problem participants present in participant's households was **obesity**. The most common diagnosis reported was **prediabetes**. Likewise, the leading health-related concern for participants was **weight control**.

“Our treaty rights gave us that care. My address limits me from having access from the things that my fellow tribal members have access to. That really bothers me. I just think, overall, it’s a 19th century way of looking at a 20th century problem.”

Healthcare Coverage, Use, and Satisfaction

- 34% of participants had Medicaid/Centennial Care, 25% had employer-provided insurance
- 66% go to IHS as their **1st choice for healthcare** when sick or need advice about health-related questions.
- **Half** (49%) were **satisfied** with their healthcare, only 12% dissatisfied, 40% neutral.
- **More than half of respondents (53%) had put off seeking healthcare** in the past because it couldn't be treated at the Santa Fe Service Unit Hospital.

Participant and Community Health, Ranked by Importance					
Community Health					
Most Important Health Problem	%	Least Healthy Behavior	%	Most Negative Problem	%
1 Diabetes	62.79	1 Overweight	44.27	1 Chronic Disease	66.26
2 Heart Disease/Stroke	29.84*	2 Lack Exercise	41.54*	2 Poor Nutrition	52.76
3 Obesity	37.98	3 Alcohol and drugs	42.86	3 No access to quality healthcare	44.17
4 Suicide	28.57*	4 Poor Diet	37.3	4 Mental Illness	44.17
5 Cancer	31.5	5 Loss of traditional language	30.4	5 Lack of respect for AI/AN culture	36.2
Household Health					
Top Health Problem in Household	%	Most Commonly Reported Diagnoses	%	Leading Health-Related Concerns	%
1 Overweight	54.94	1 Pre-diabetes	25.77	1 Weight	46.91
2 Diabetes	38.27	1 High Blood Pressure	25.77	2 Stress	46.3
3 Depression	34.97	2 Depression/mental illness	19.02	3 Affordable healthy eating/ cost of food	29.63
4 Cancer	14.72	3 Other	13.5	4 Out of shape, Barriers to exercise	27.28
5 Heart Disease/Stroke	12.27	4 High cholesterol	12.27	5 Diabetes/ kidney	15.48

*Ranking includes first and second choice scores (second choice not shown).

Recommendations from Survey and Interview Participants

- **Fund IHS at 100% of need.** Participant utilization and satisfaction scores indicate that IHS is the medical provider of choice for this community. Funding must support the hospital with dollars earmarked for the Urban Indian community
- **Eliminate Contract Health/ Purchased-Referred Care.** Participants felt that the tiered system of payment for referred healthcare services was discriminatory and violated their treaty-obligated rights to healthcare.
- **Increase IHS Hospital services.** Participants provided a wide range of suggestions for services they would like to see offered by the IHS. Suggestions ranged from adding clinical services such as same day surgery and dental specialists to building a playground and creating a café and community area for events and meetings.
- **Increase mental health support and advocacy.** Mental and behavioral health was identified as an urgent need in the community, with emphasis on de-stigmatizing mental health care and improving access to behavioral health services such as drug and alcohol detox.

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