Understanding how the U.S. Healthcare System can Better Serve Indigenous People Through the Lived-Experiences of Five Indigenous Women

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United States of Care’s (USofCare) mission is to ensure that everyone has access to quality, affordable health care regardless of health status, social need, or income. As part of our mission and commitment to equity, we engage in authentic listening research to lift voices in communities that have historically been ignored. As a commitment to our mission, we spoke with five people from various tribal backgrounds to understand how the U.S. healthcare system can better serve Indigenous people.

**Background**

★ Current data shows that Indigenous people (American Indian/Alaska Native) experience high rates of:
  - Stroke, heart disease, type II Diabetes, and dementia
  - Mental health diagnoses and associated deaths
  - Maternal/infant mortality & preterm birth
  - The Life Expectancy of Indigenous Peoples is >5 years less than the national average.

★ The chronic underfunding of the Indian Health Service (IHS) is the most frequently cited driver of Indigenous health inequities.

The IHS was established in the 1950s to fulfill the U.S. government’s trust responsibility to provide healthcare to federally recognized tribal members. However, federally recognized tribal members are not the only people who self-identify as Indigenous in the U.S., and not all federally recognized tribal members utilize IHS clinics and services.

**Purpose**

★ Despite advancements to insurance coverage & healthcare accessibility since the IHS was established, disparities persist between Indigenous people and their white counterparts.

★ While research has traditionally limited its scope to the perspectives of federally recognized tribal members who utilize IHS facilities, we spoke with five Indigenous women with various Indigenous identities and insurance coverages across the nation to capture how Indigenous people experience accessing and receiving the healthcare they need in the U.S.

★ Listening to Indigenous people helps us understand how the U.S. healthcare system can better serve these communities, which may help reduce the high rates of health issues and concerns that have historically affected Indigenous communities.

2 Kruse et al., 2022. The Indian Health Service & American Indian/Alaska Native Health Outcomes. [Link to publication]
3 Heck et al., 2021. Maternal Mortality Among American Indian/Alaska Native Women: A Scoping Review. [Link to publication]
4 Warne & Frizzell, 2013. American Indian Health Policy: Historical Trends & Contemporary Issues. [Link to publication]
6 The Indian Health Service. Tribal Self-Governance. 2016 [Link to publication]
So We Asked About...

★ Accessing Care
  - Ex: How do you go about getting the healthcare you need?
★ Receiving & Quality of Care
  - Ex: What would healthcare providers that are culturally competent to Indigenous peoples look like to you?
★ How the U.S. Healthcare System can Better Serve Indigenous People
  - Ex: Given all of the experiences you have shared with me today and what you know about Indigenous health & wellness, if you had to identify the top 2-3 ways the US healthcare system can better serve Indigenous people, what would they be?

Key Findings

Drivers of Hesitancy to Seek Healthcare

★ Mistrust
  - 4/5 participants (80%) experienced some form of mistrust in healthcare. For all (100%) of these participants, mistrust served as a driver of hesitancy to seek care.
  - Mistrust primarily manifested as historical trauma and intergenerational mistrust in healthcare and medicine.

"In [U.S. territory], a bunch of our Indigenous and African women were sterilized in the 1900s... so I don’t think that healthcare is something to really trust."

- Indigenous Woman, Member of an Indigenous Tribe in one of the U.S. territories

★ Mistreatment
  - 4/5 participants (80%) discussed that they personally and/or someone in their community experienced stereotyping in healthcare. For all (100%) of these participants, mistrust served as a driver of hesitancy to seek care.
  - Stereotyping was primarily based on associations between Indigenous people and risky health behaviors.

“... my dad’s had health issues, and nobody could really figure out what it was... and the doctor was just asking ‘how much alcohol consumption do you do?’... Well I’m just trying to figure this part out because... you’re Native American, you know alcoholism is very prominent.”

- Indigenous Woman, Member of a Northeastern Federally Recognized Tribal Nation

  - 3/5 participants (60%) discussed that they personally and/or someone in their community experienced being dismissed and/or not feeling believed by providers
Barriers to Healthcare Utilization

★ Cost of Care
- 2/5 Participants (40%) discussed cost-of-care as a barrier to healthcare access

“[It's like] a tribal family plan that I'm on... it usually works, but sometimes it just doesn't. And sometimes it takes a really long time and so I'll end up paying costs up front and then getting reimbursed by my insurance... that's a barrier, and so sometimes I just ignore it.”

- Indigenous Woman, Member of a Northeastern Federally Recognized Tribal Nation

★ Proximity to Care
- 2/5 Participants (40%) discussed proximity to healthcare services as a barrier to healthcare access

“We only had one IHS clinic, and our reservation is like the size of Rhode Island, so we had to travel very far.”

- Indigenous Woman, Member of a Southwestern Federally Recognized Tribal Nation

How the U.S. Healthcare System Can Better Service Indigenous People

★ Train Culturally Competent Healthcare Providers
- Cultural competence in a medical setting is as vital as any other life saving procedure or device, and Indigenous people have historically been inadequately included in the Cultural Competence framework.
- Participants shared that having culturally competent providers would help ease feelings of mistrust that serve as a driver of hesitancy to seek healthcare.

“... Having someone who has even the slightest cultural competence I think would help us erase that hesitancy to go... they're more willing to sit down and build relationships with us and understand where we're coming from instead of giving us the standard of care that is just constantly happening but nothing ever works from it.”

- Indigenous Woman, Member of a Southwestern Federally Recognized Tribal Nation

★ Invest in Pathways to Medical Careers for Indigenous Youth
- As of 2018, only ~0.4% of the physician workforce are Indigenous
- Participants shared that lack of Indigenous providers also serves as a driver of hesitancy to seek healthcare.
“I’ve thought about just getting a therapist again... and I haven’t because I think a lot of my issues are central to my identity. And I just know my school will not have a therapist or anyone who gets that and I think in order, in my opinion, to get that, you have to be a part of that. Right? Like so for me, ideally I would want an Indigenous person, an Indigenous woman as well... somebody that maybe has similar experiences to me...”

- Indigenous Woman, Member of a Northeastern Federally Recognized Tribal Nation

★★ Promote the Acceptance & Inclusion of Traditional Healing

- Traditional healing ceremonies are among the many ways Indigenous people promote wellness in connection to their culture.
- Participants shared that traditional healing through ceremony, sweat lodges, burning sage, peyote meetings, and more are central to their health and wellness.

"I think a part of [cultural competence] could be ensuring that there’s a baseline foundational understanding of traditional medicine in Indigenous communities and breaking down stigma about that as like ‘alternative’ medicine, because there is no alternative medicine–it’s all just medicine... and so breaking down stigma there.”

- Indigenous Woman, Member of a Northeastern Federally Recognized Tribal Nation

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