

TUBA CITY REGIONAL HEALTH CARE CORPORATION

2010 Community Needs Survey Project



Back Row: (L-R) – Vince Shirley (TCRHCC Grants Coordinator), Philbert Tso (Kaibeto Chapter), Franco Hosteennez (Bodaway/Gap Chapter), Kimberlee Williams (LeChee Chapter), Lillie Welch (Tuba City and Coalmine Chapters, Moenkopi & Southern San Juan Paiute areas), Nettie Prack (TCRHCC Survey Project Principal Investigator), Walter Phelps (TCRHCC Grants Administrator)

Front Row: (L-R) – Justina Saganitso (Tonalea Chapter), Lola Smith (Coppermine Chapter), Merle Beard (Cameron Chapter), Genice Colorado (Tuba City and Coalmine Chapters, Moenkopi & Southern San Juan Paiute areas)

Funding for this project was provided by the U.S. Department of Health and Human Services, Health Resources Services Administration, Bureau of Primary Care; Arizona Health Facility Authority; and St. Luke's Health Initiatives Primary Care Grants Program. Technical assistance and program support was provided by the Mel and Enid Zuckerman College of Public Health at the University of Arizona and the Arizona Association of Community Health Centers.

Introduction

Tuba City Regional Health Care Corporation (TCRHCC) is located in the western portion of the Navajo Nation in the state of Arizona, Coconino County. The Tuba City service area is 5,103 square miles plus an additional 3,000 square miles as the regional referral medical center.

TCRHCC, is a tribal organization and a 501(c)(3) nonprofit organization. Since September 2002, TCRHCC has had a P.L. 93-638 Indian Self-Determination Contract with the Secretary of the U.S. Department of Health and Human Services (USDHHS), Indian Health Service (IHS) and was granted Title V of the Indian Self Determination and Education Assistance Act (25 U.S.C. 450 et seq.) status in July 2010.¹ Today, TCRHCC is in its ninth year of 638 funding and operation, and it continues to grow as a regional, community based health care system. Title V certification allows for greater autonomy and flexibility in matching present and future services to resources and funding opportunities.

The *Tuba City Regional Health Care Corporation 2010 Community Needs Survey Project* was conducted from March through May 2010 with a survey team composed of eight community member surveyors. The surveyors conducted one-on-one surveys with members of all eight Chapters in the TCRHCC service area: Bodaway/Gap, Cameron, Coalmine Canyon, Coppermine, Kaibeto, LeChee, Tonalea, and Tuba City; as well as the Hopi community of Moenkopi. The San Juan Southern Paiute community members are included in the Tuba City Chapter data.

Purpose

The purpose of the *Tuba City Regional Health Care Corporation 2010 Community Needs Survey Project* was to clearly identify TCRHCC community member's needs and health status. The results of this project will be used by TCRHCC in planning for increased and targeted services. The data from this survey can be used for a number of different purposes, such as:

- identifying community needs
- defining health status
- guiding community planning
- address historical lack of accurate data.

This data will also be made available to the Chapters, the Hopi and San Juan Southern Paiute Tribes, and to other community organizations for their planning purposes.

¹ Congress passed the Indian Self-Determination and Education Assistance Act (Public Law 93-638, as amended) to provide tribes and tribal organizations the option of assuming from the IHS the administration and operation of health services and programs in their communities. Congress consequently and subsequently passed the Indian Health Care Improvement Act (Public Law 94-437) that is a health specific law that supports the options of P.L. 93-638. Under the 638 contract both Native American and non Native American patients can be and are seen.

Methodology

Survey Team

The *Tuba City Regional Health Care Corporation 2010 Community Needs Survey Project* was developed in conjunction and with the approval of TCRHCC Board of Directors and Senior Leadership Council.

The *Tuba City Regional Health Care Corporation 2010 Community Needs Survey Project* was conducted from March through May 2010 with a survey team composed of eight community member surveyors. There was at least one surveyor who was from each Chapter/community, so the surveyors knew where and how to find people.

The surveyors conducted one-on-one surveys with members of all eight Chapters in the TCRHCC service area: Bodaway/Gap, Cameron, Coalmine, Coppermine, Kaibeto, LeChee, Tonalea, and Tuba City; as well as the Hopi community of Moenkopi. The San Juan Southern Paiute community members are included in the Tuba City Chapter data.

All surveyors and project staff attended a two day training session facilitated by Ms. Agnes Attakai, Director, Health Disparities Outreach & Prevention Education, University of Arizona, Mel and Enid Zuckerman College of Public Health Arizona State Office of Rural Health. Assistance was also provided by TCRHCC project staff, Ms. Nettie Prack, Mr. Walter Phelps and Mr. Vincent Shirley. The latter two staff members and Ms. Attakai are fluent Navajo speakers. They, in collaboration with the surveyors, developed uniform translation of survey questions prior to the surveying of community members. The surveyors also received training on the surveying process, safety, and HIPAA confidentiality policies and procedures.

Enumeration and Statistical Methodology

The U.S. Census Bureau has historically missed a great number of the population during official Census counts.¹ The Census Bureau believes its 2000 undercount could be as high as 6.71% for all Native Americans.² It is believed that this undercount is much higher for Navajo for a myriad of reasons, including, but not limited to, the fact census takers were not from the area, didn't speak Navajo, didn't know how to find people, etc. The Native American undercount is the highest of any group in the country.

Because the U.S. Census Bureau has only had cursory data on the Navajo population and because a more current population count was required, TCRHCC conducted a data analysis of unduplicated users by place of residence utilizing Indian Health Service's Resource and Patient Management System (RPMS) to properly enumerate the survey population for the target population of adults to determine the number of respondents needed to obtain statistical significance and gain much needed demographic, health status and community needs data.

Two thousand, six hundred sixty-six (2,666) TCRHCC community members were surveyed resulting in a confidence level of 95% and a confidence interval of 2. Confidence level and confidence intervals were derived using standard formulas using SPSS statistical software. SPSS is the most widely used program for statistical analysis in social science and is used by health researchers to insure reliability and validity of data.

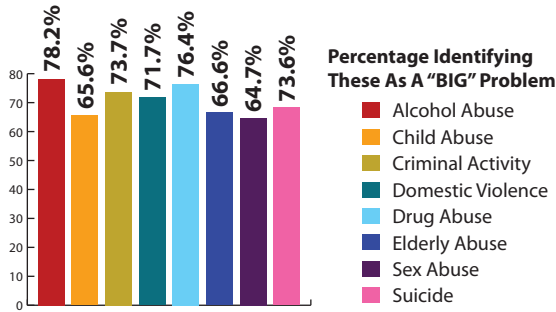
¹ Lujan, C. 1990. *Undercount Behavioral Research Group Staff Working Paper #2: As simple as one, two, three: Census underenumeration among the American Indians and Alaska Natives.*

² U.S. Census Bureau. February 2011. *Preliminary Estimated Coverage of Census 2000 Based on the Accuracy and Coverage Evaluation (A.C.E.) Survey.*

AGGREGATE DATA

Bodaway/Gap, Cameron, Coalmine, Coppermine, Kaibeto, LeChee, Tonalea, Tuba City, Hopi (Moenkopi)

Identified Community Problems

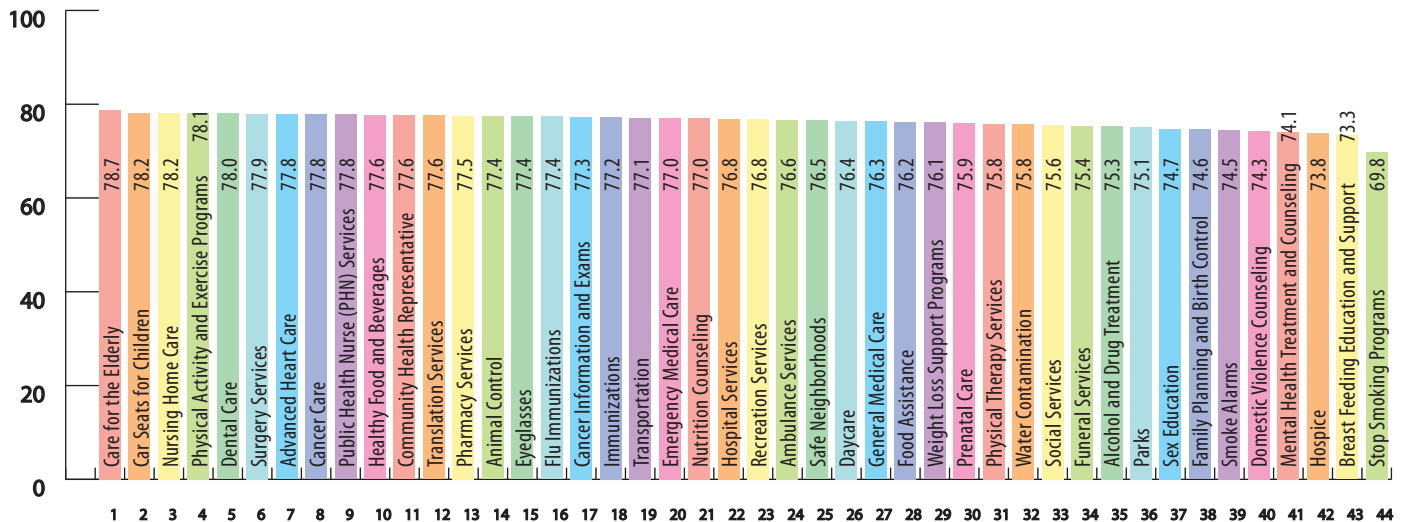


In your community, how would you rate the following issues?

Response options included "big problem, little problem, no problem"

Identified Community Needs

In your community, how important are these services to you? Percentage responding "Absolutely Needed."

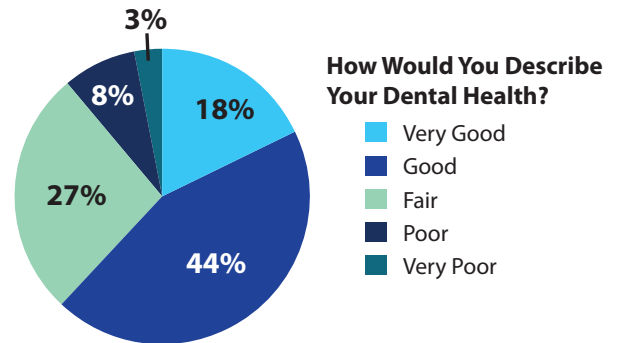
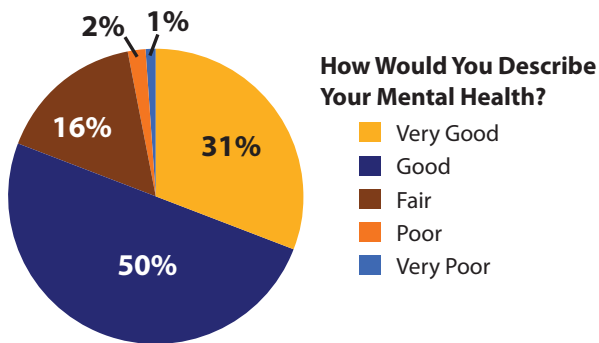
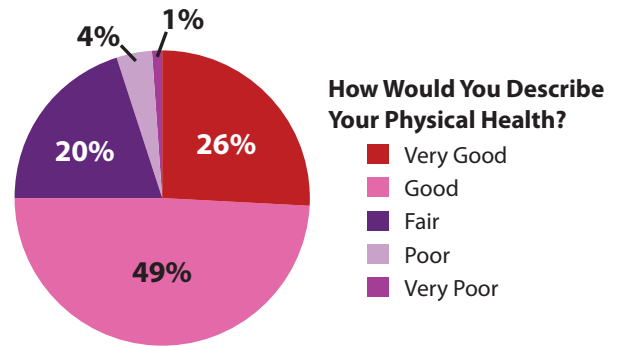
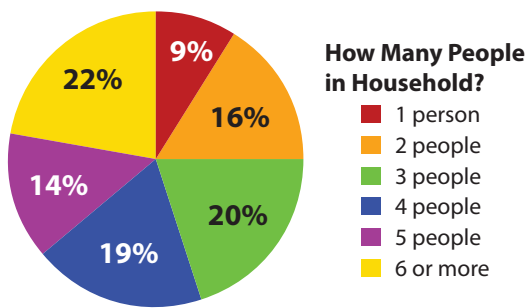
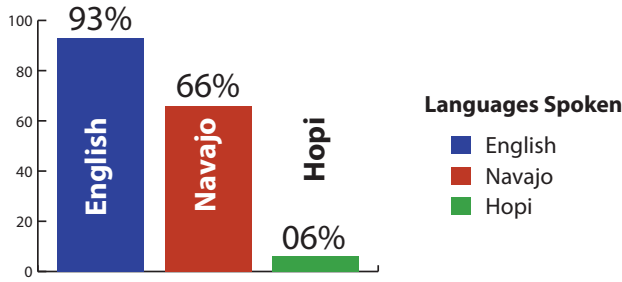


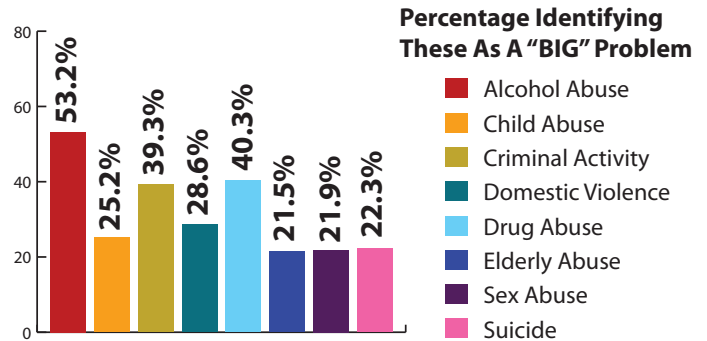
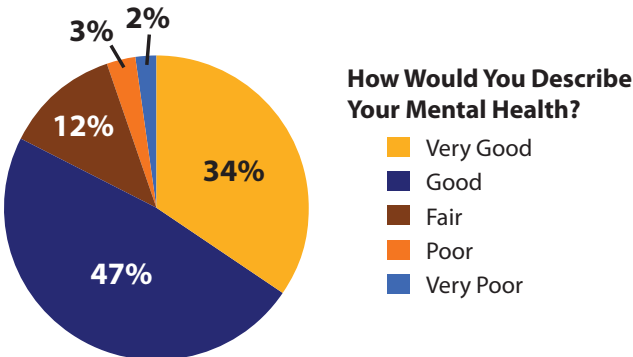
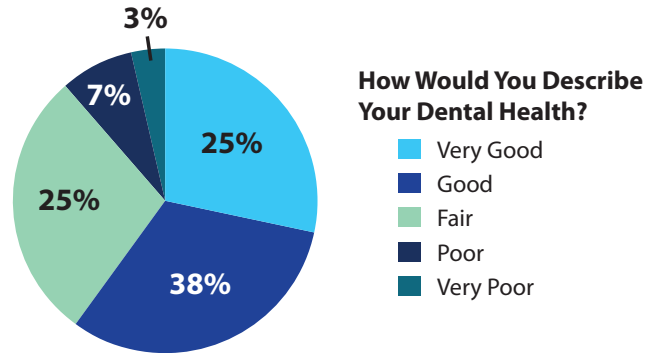
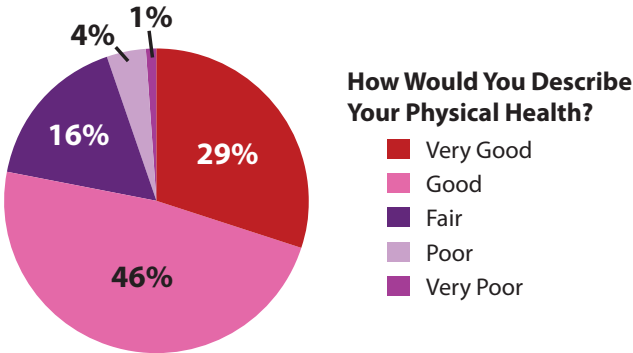
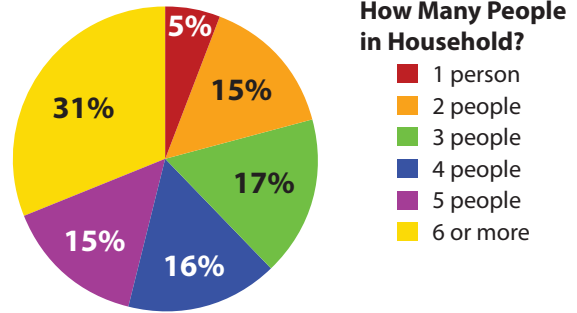
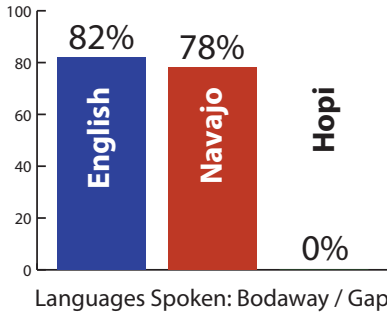
In your community, how important are these services to you? Percentage Reporting "Absolutely Needed"

Response options included "somewhat needed, needed and absolutely needed"

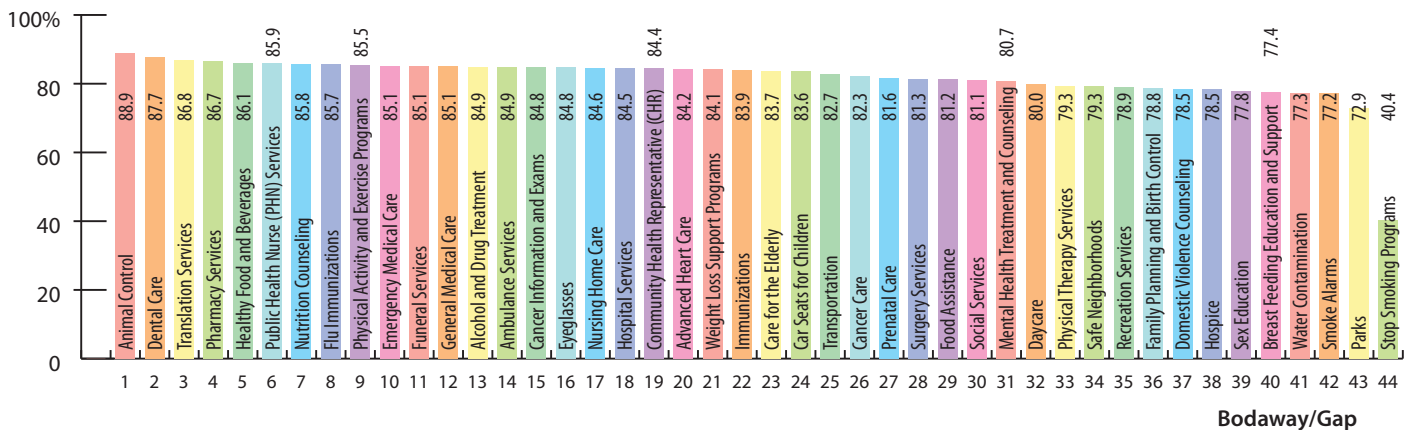
AGGREGATE DATA

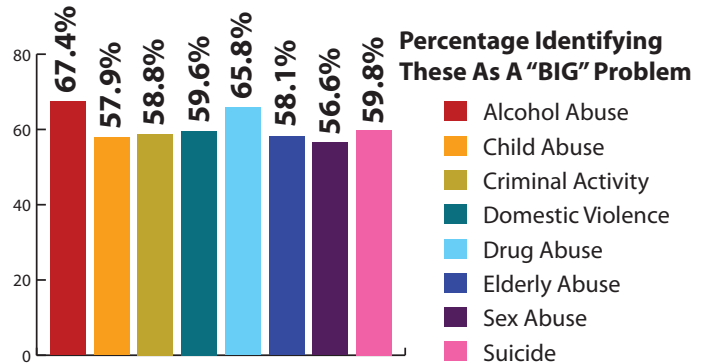
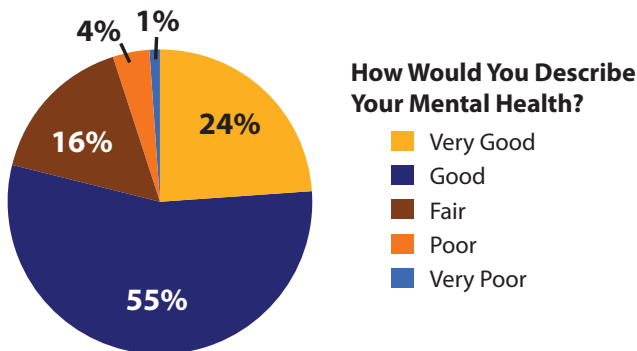
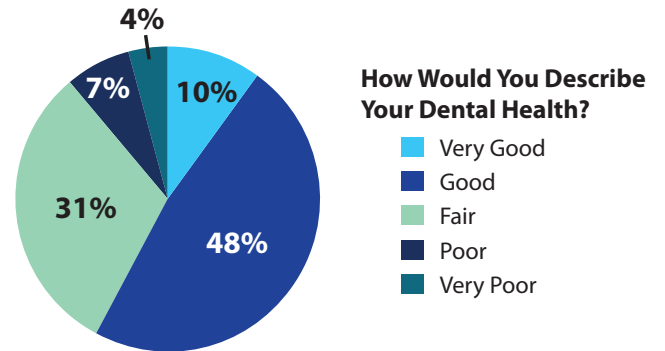
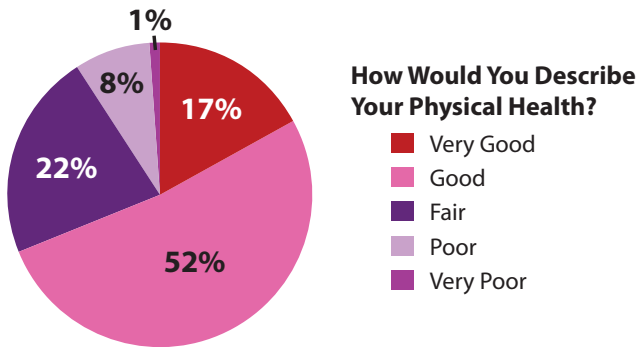
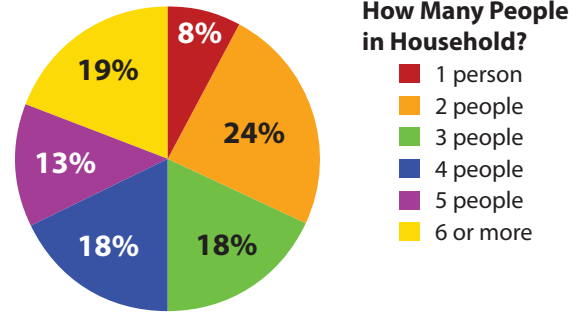
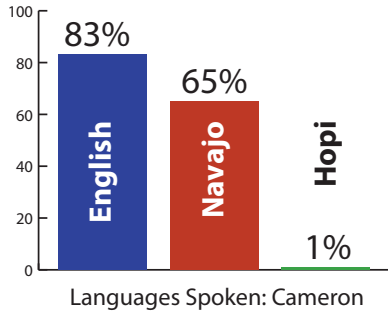
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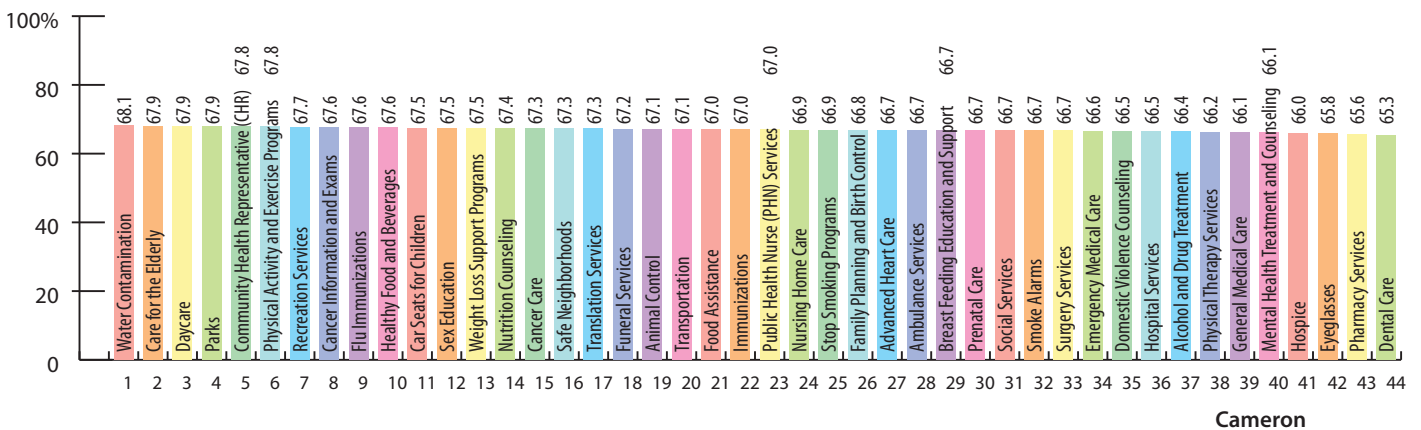


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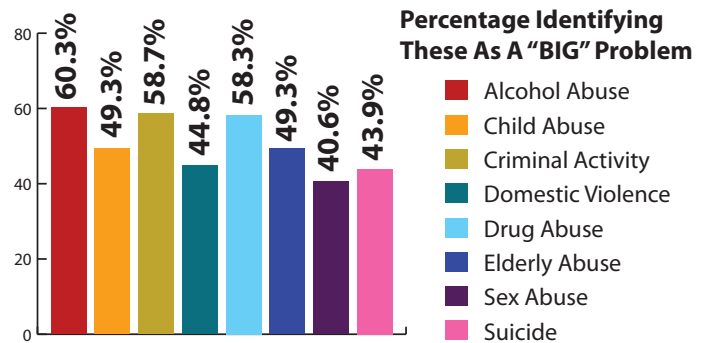
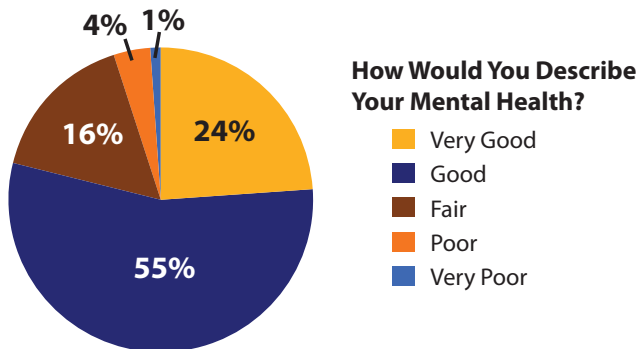
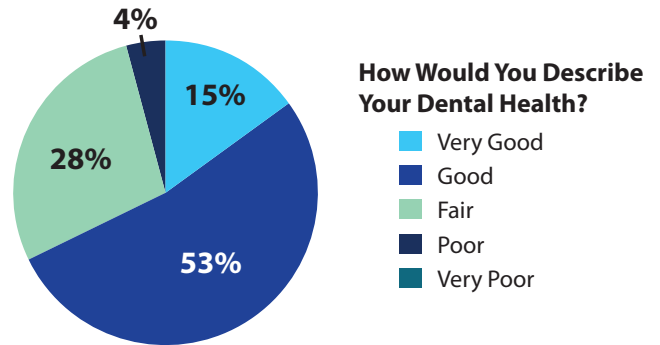
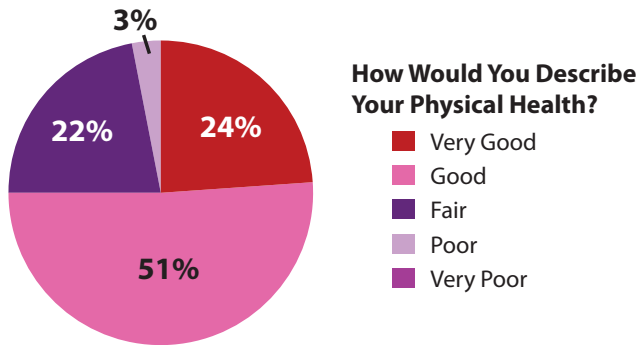
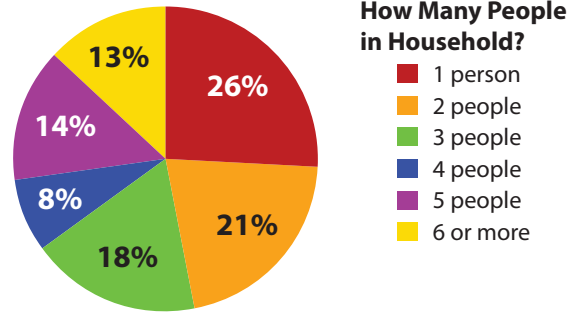
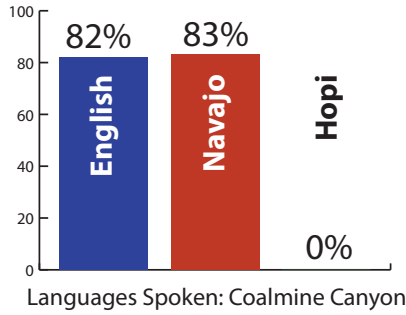




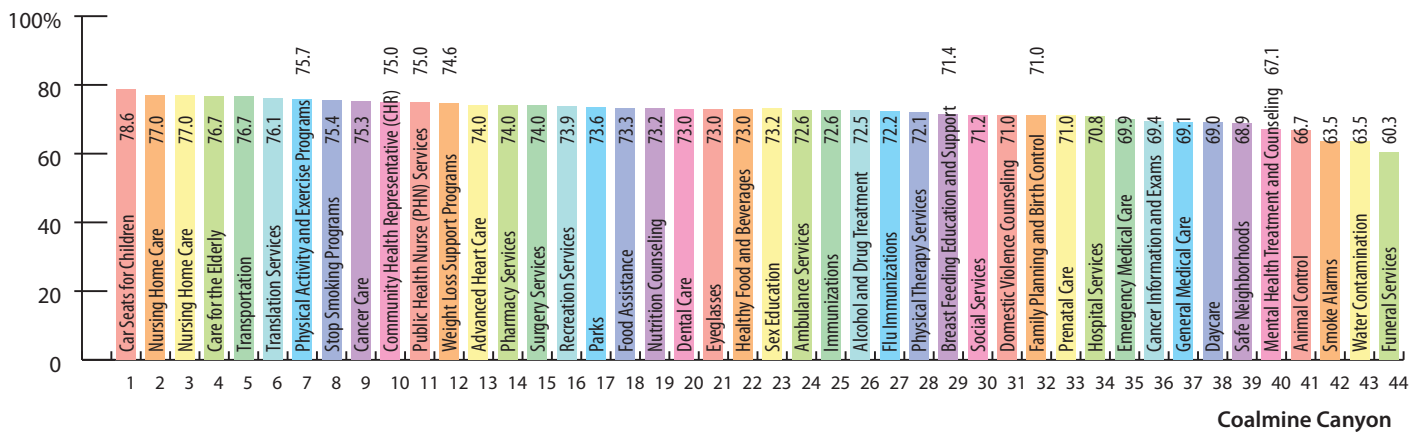
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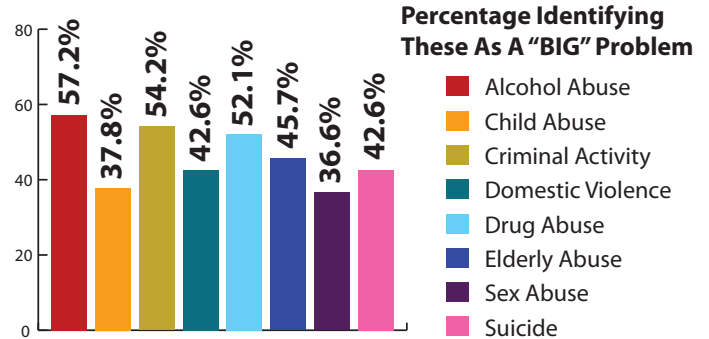
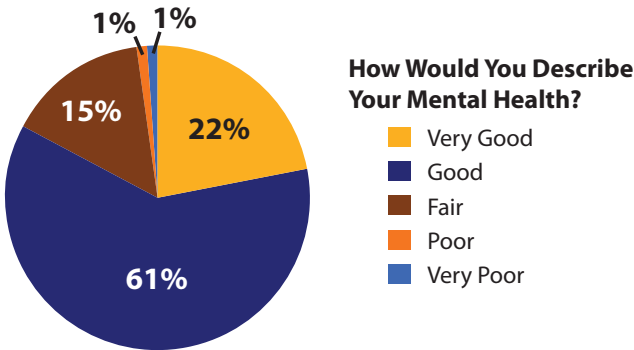
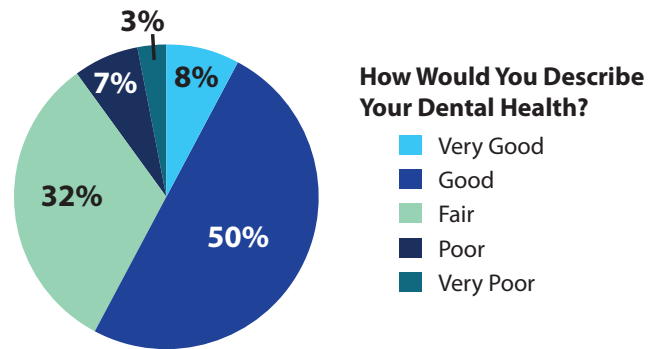
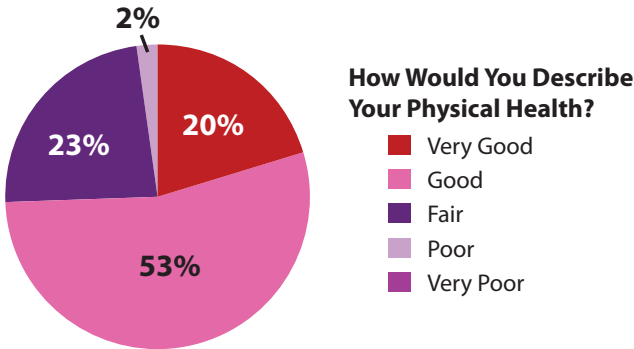
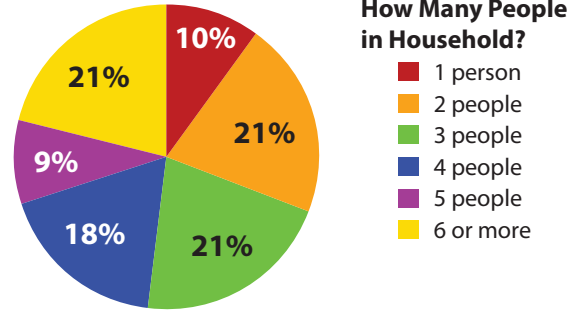
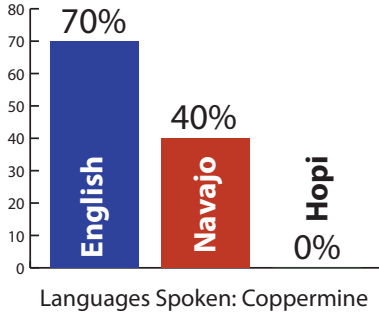


Cameron

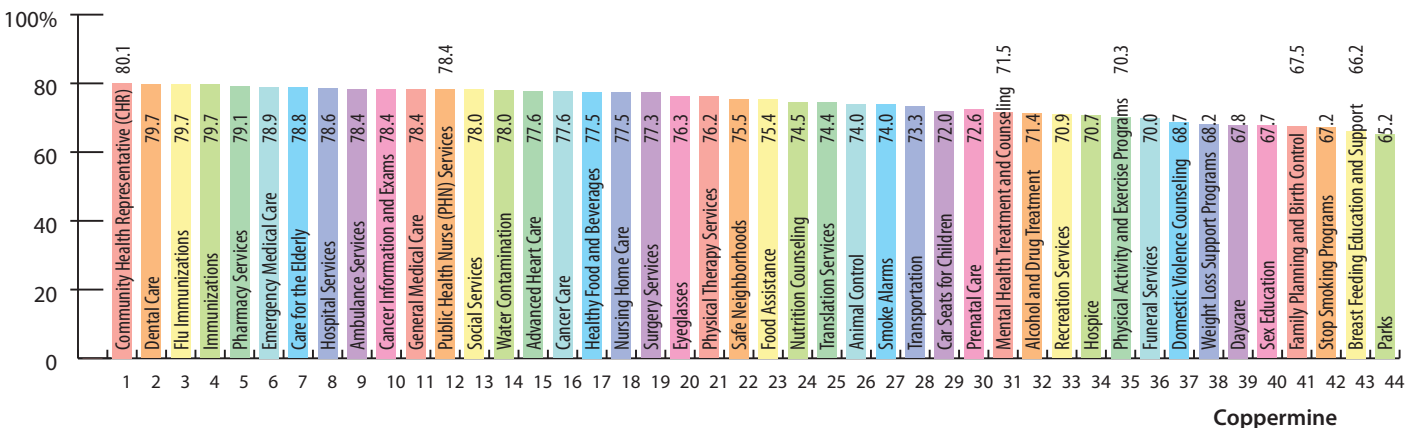


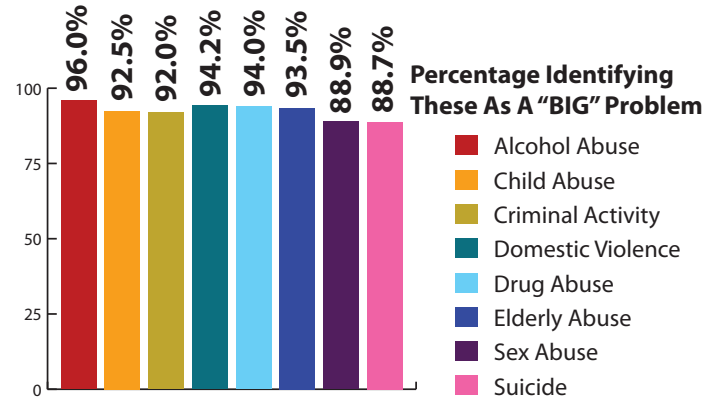
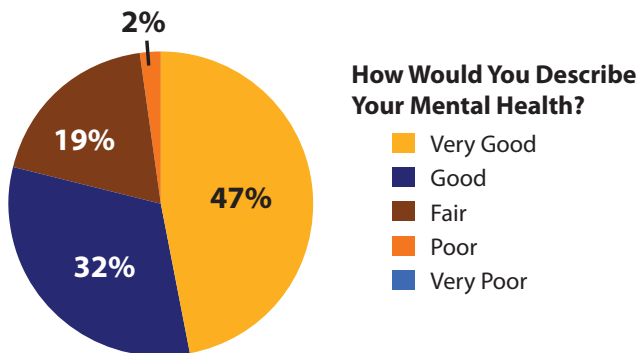
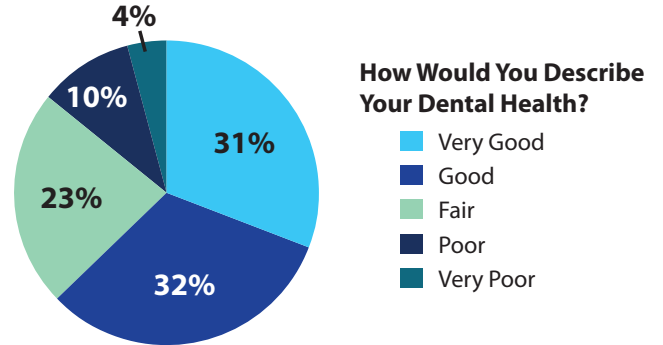
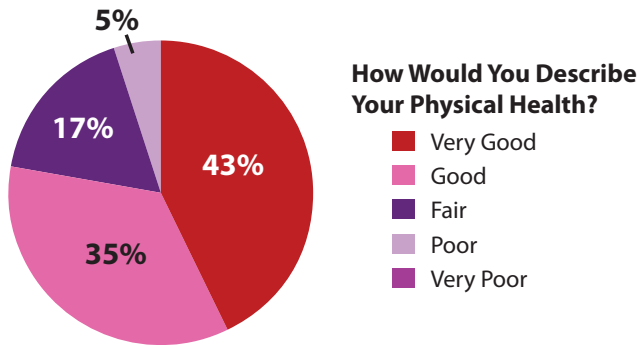
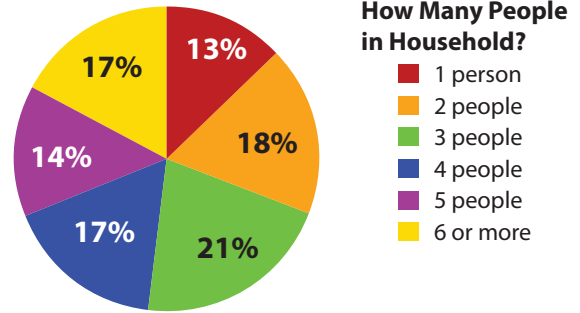
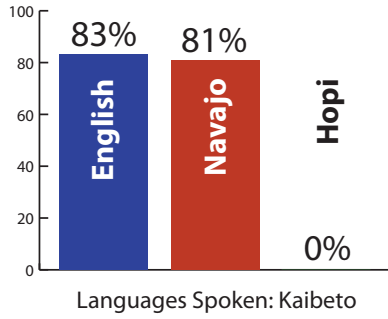
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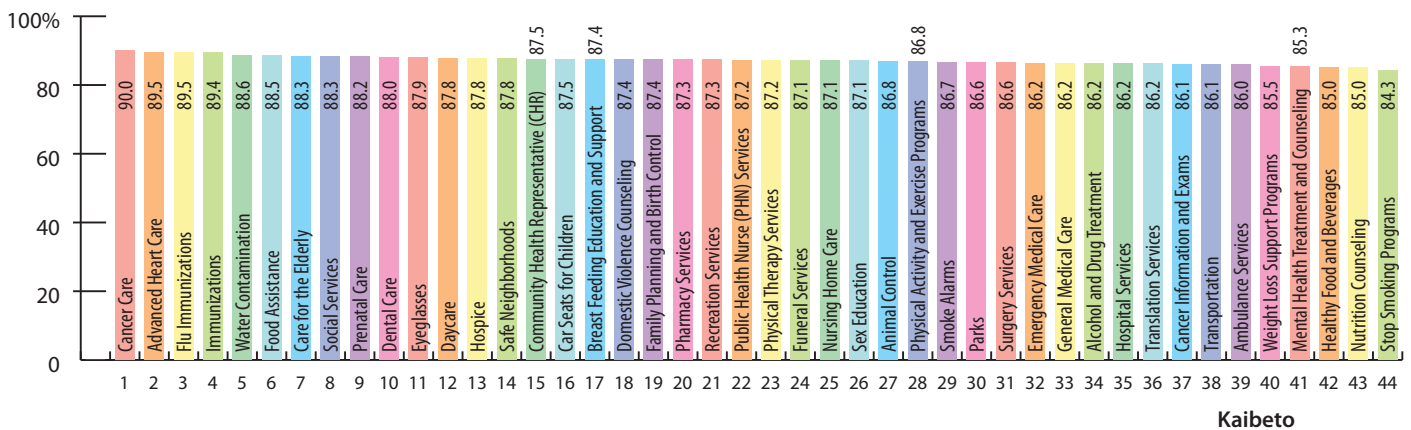


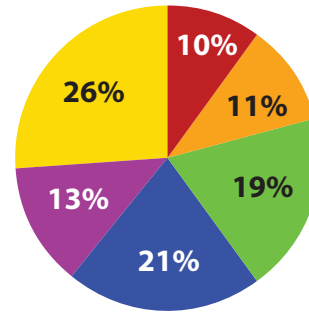
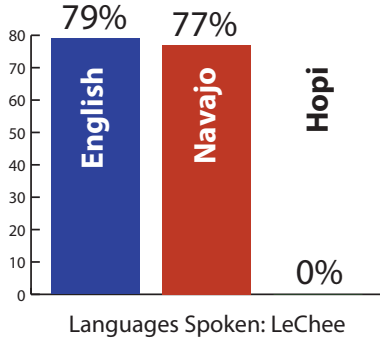
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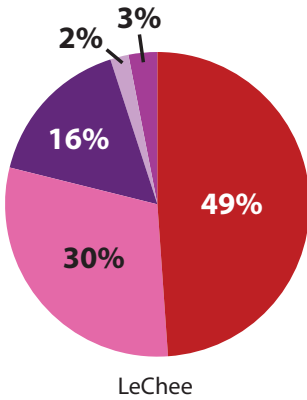
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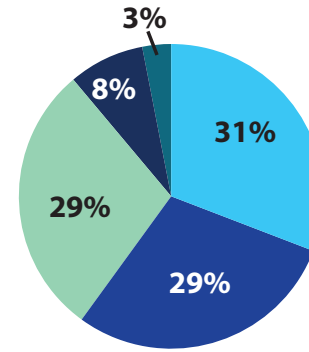
How Many People in Household?

- 1 person
- 2 people
- 3 people
- 4 people
- 5 people
- 6 or more



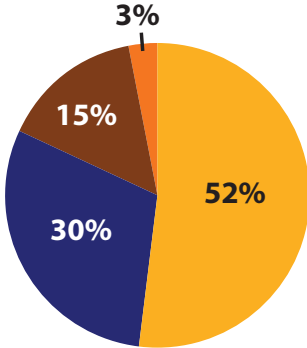
How Would You Describe Your Physical Health?

- Very Good
- Good
- Fair
- Poor
- Very Poor



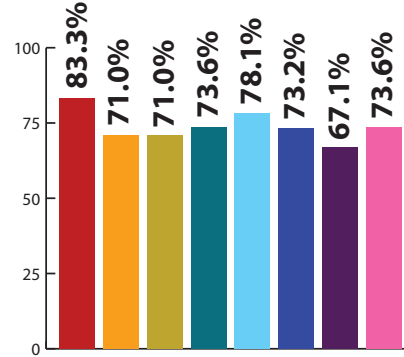
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How Would You Describe Your Mental Health?

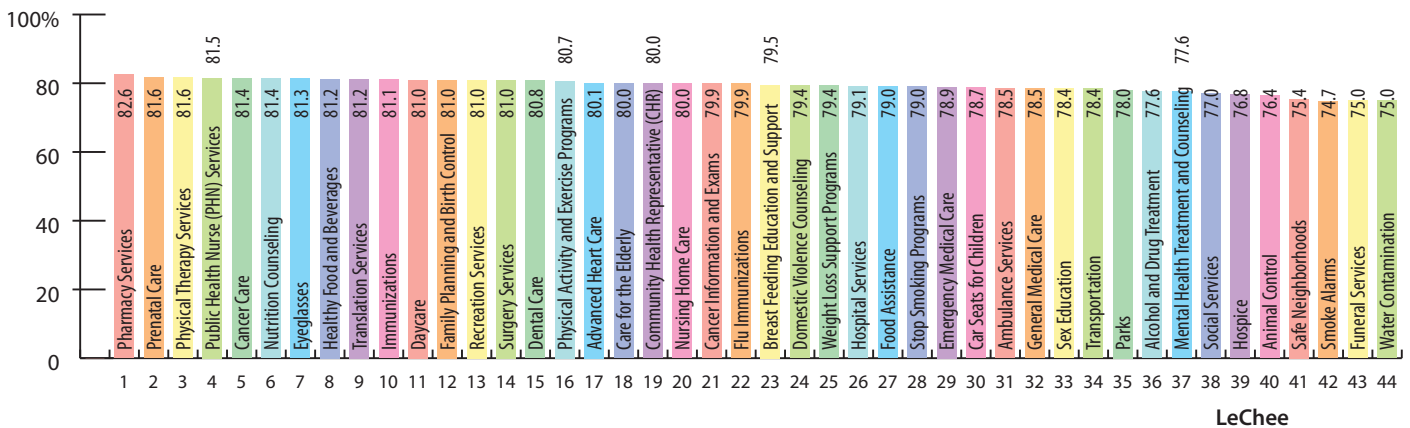
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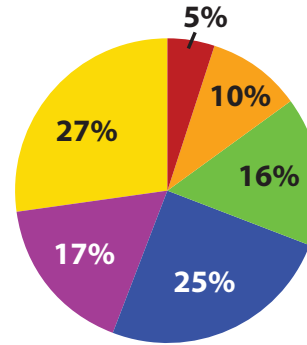
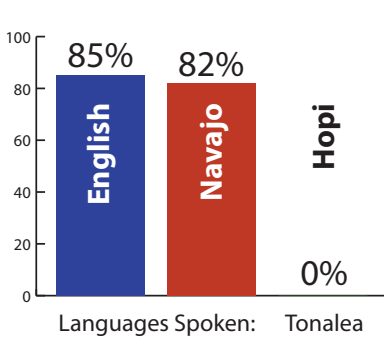


Percentage Identifying These As A "BIG" Problem

- Alcohol Abuse
- Child Abuse
- Criminal Activity
- Domestic Violence
- Drug Abuse
- Elderly Abuse
- Sex Abuse
- Suicide

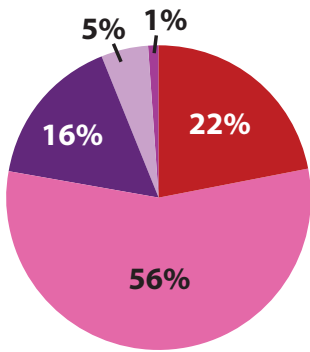
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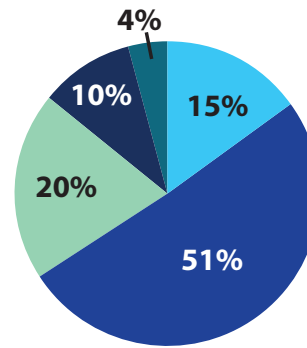
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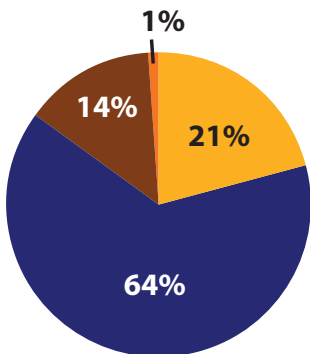
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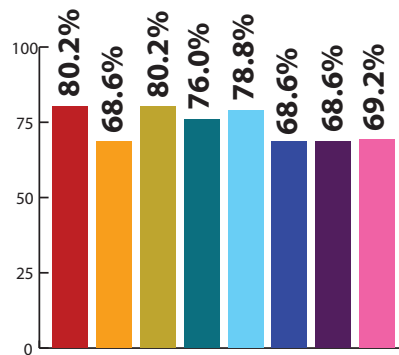
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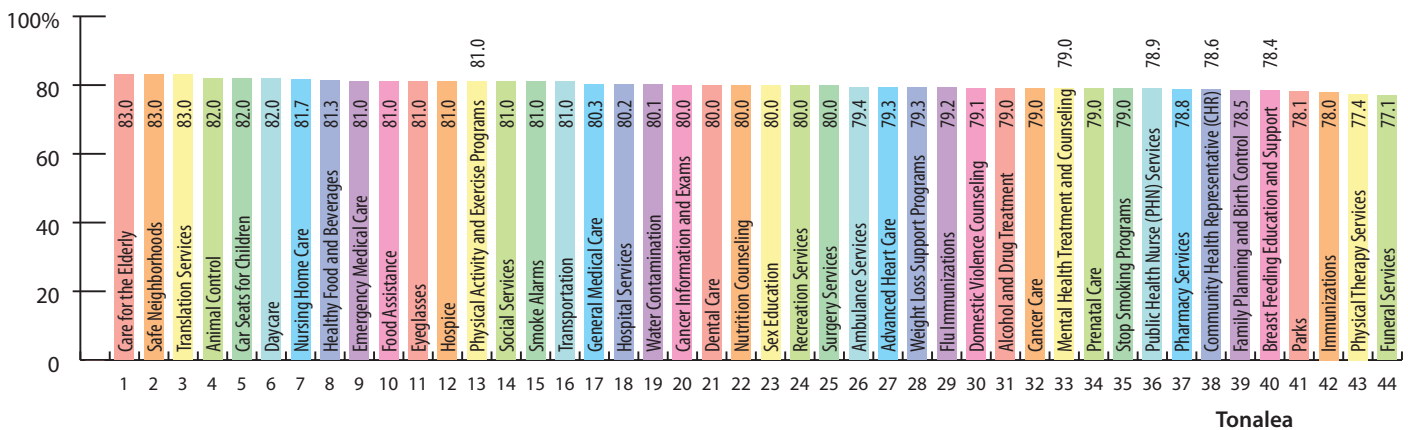
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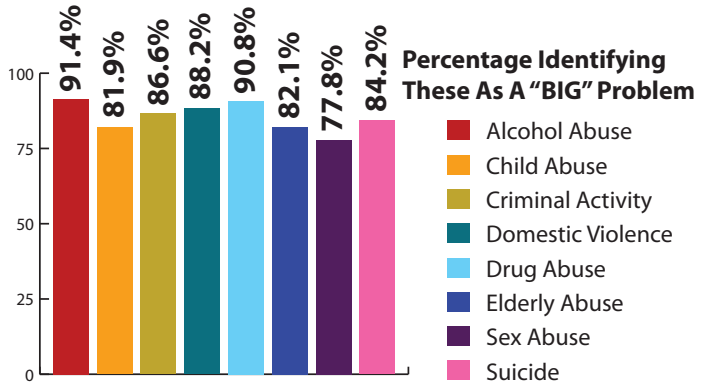
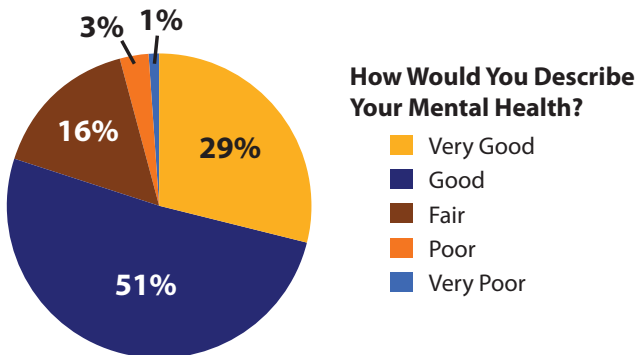
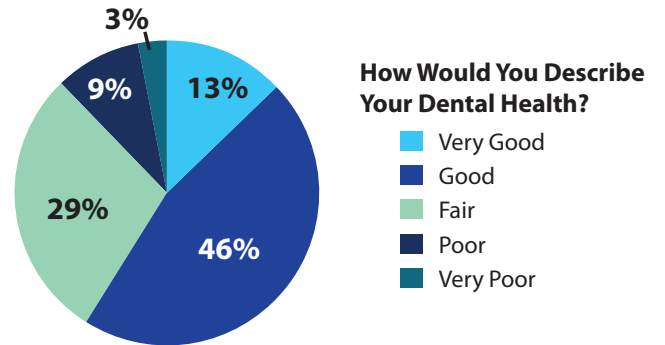
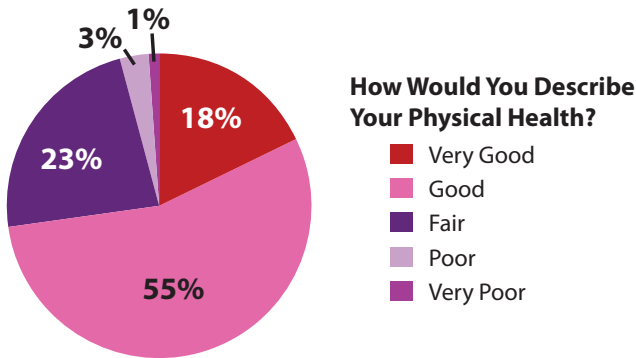
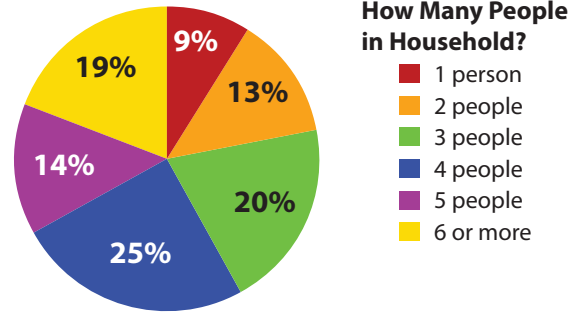
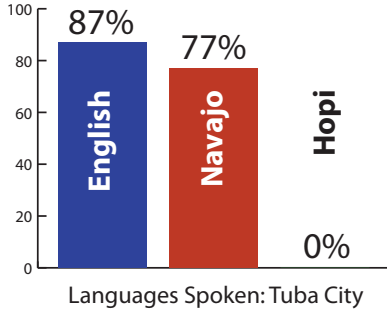
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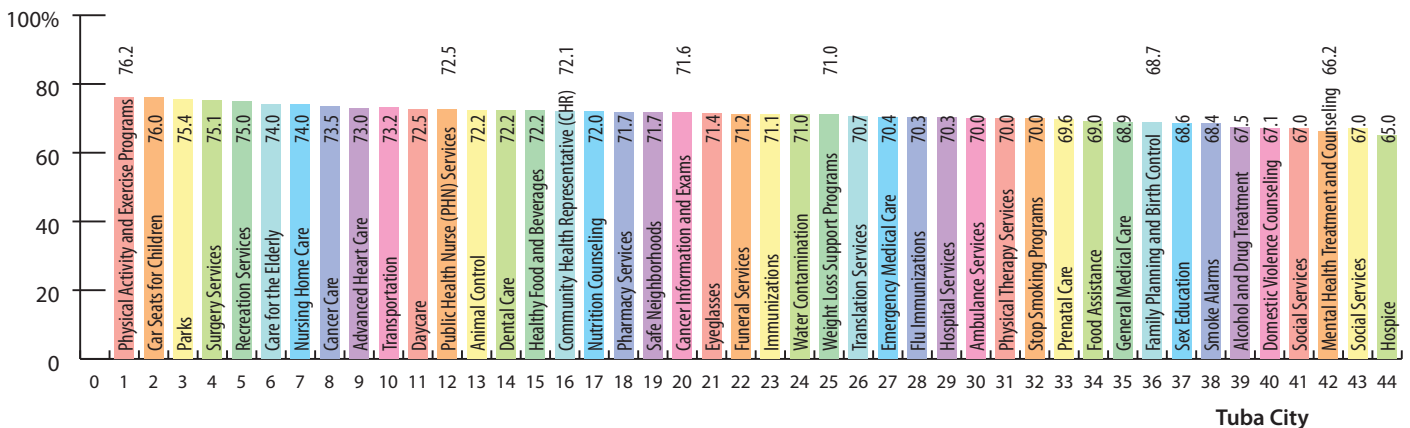
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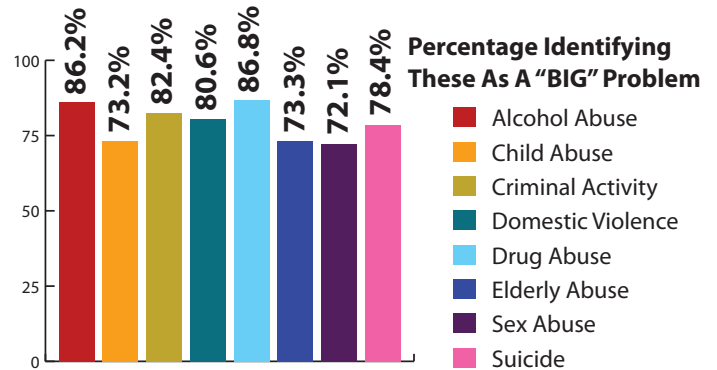
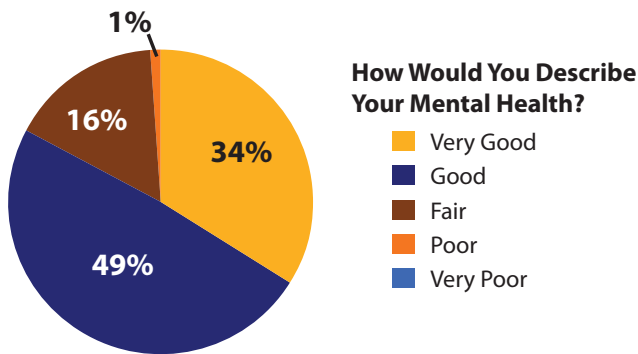
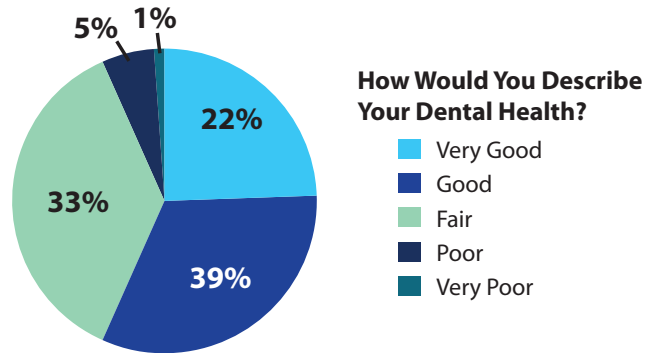
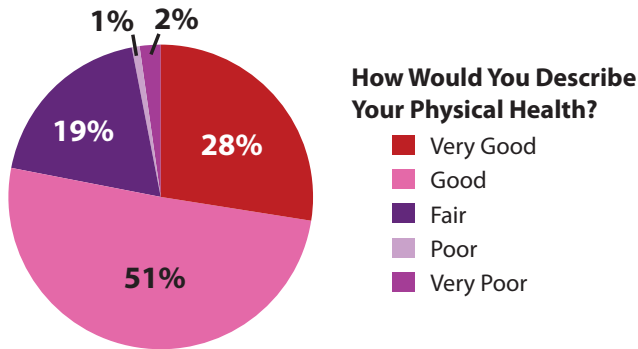
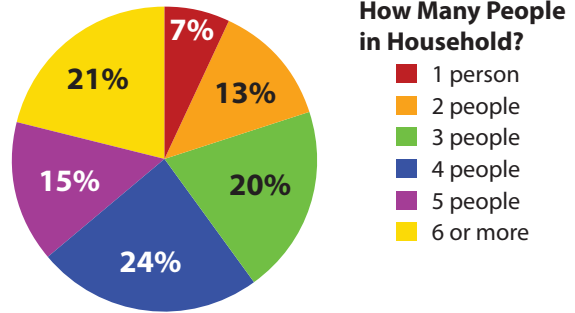
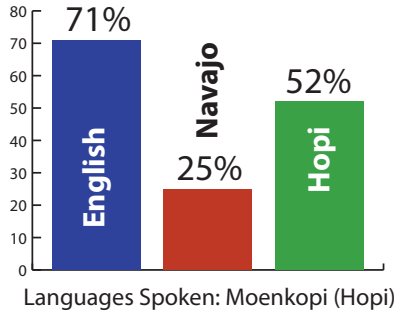


Tonalea

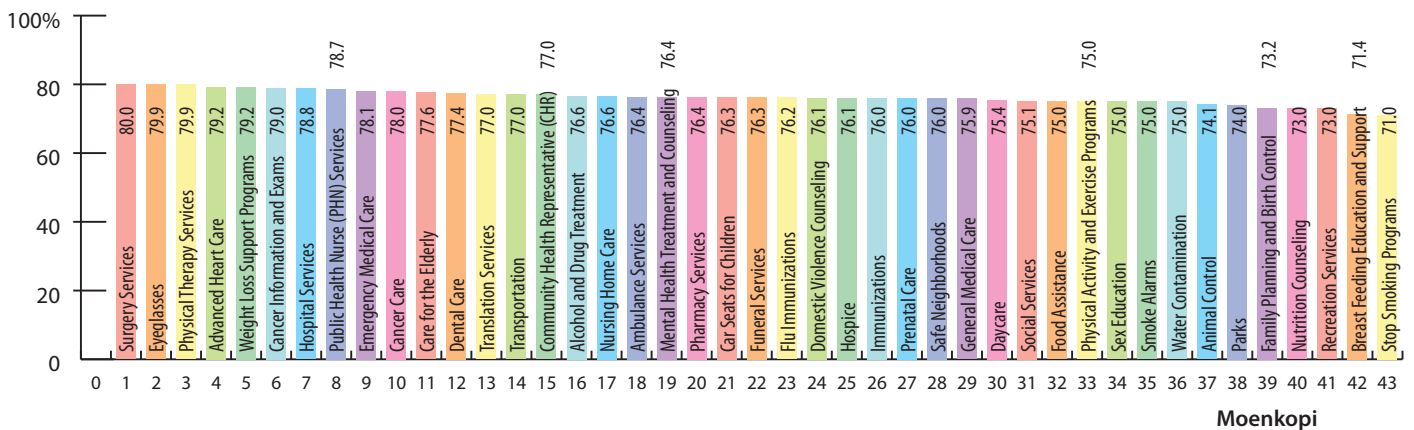


In your community, how important are these services to you? Percentage responding "Absolutely Needed."





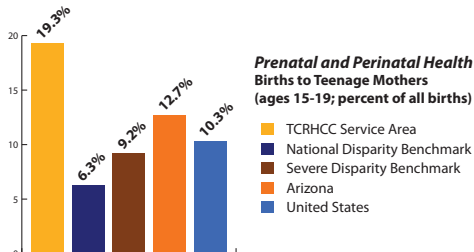
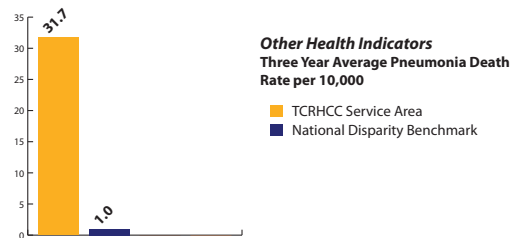
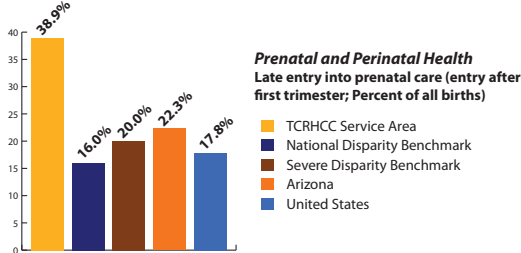
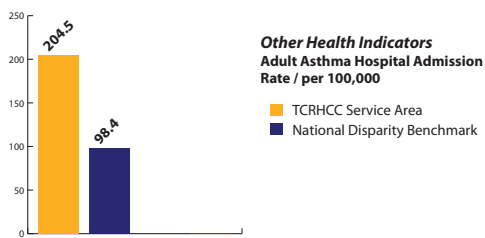
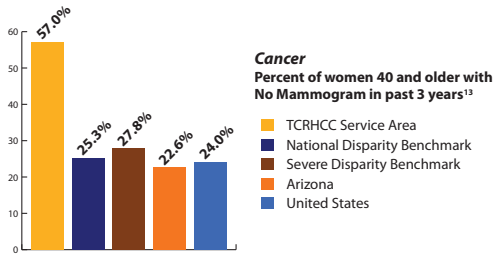
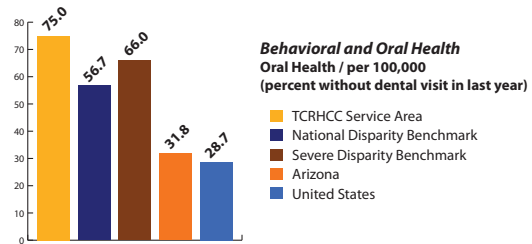
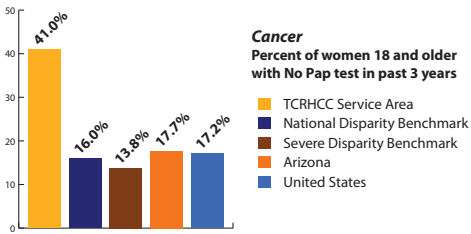
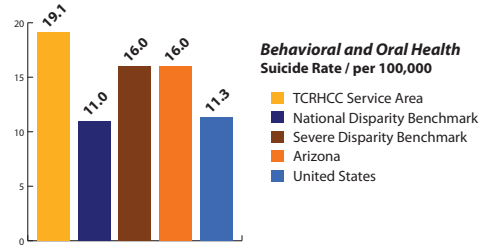
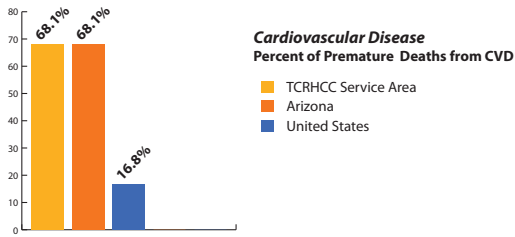
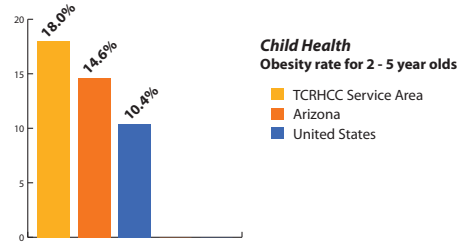
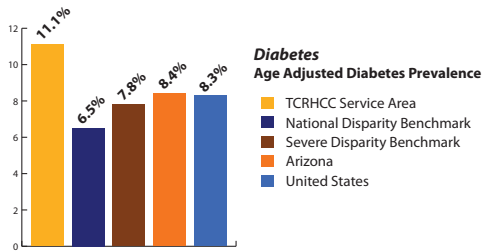
In your community, how important are these services to you? Percentage responding "Absolutely Needed."



COMPARATIVE DATA

Service Area Health Disparity Indicators with State and National Comparative Data

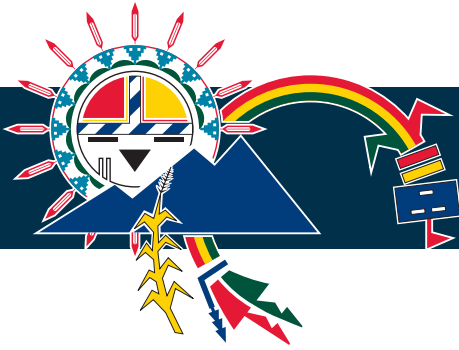
- TCRHCC Service Area¹
- National Disparity Benchmark²
- Severe Disparity Benchmark³
- Arizona
- United States



¹ Data sources for all data elements available upon request.

² Established by U.S. Department of Health and Human Services, Health Resources Services Administration, Bureau of Primary Health Care.

³ ibid.



Tuba City Regional Health Care Corporation 2010 Community Needs Survey Project

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