



AIRRTC REPORT FACT SHEET

AMERICAN INDIAN REHABILITATION RESEARCH AND TRAINING CENTER

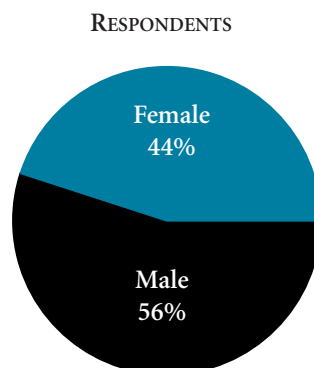
Institute for Human Development • Arizona University Affiliated Program

Independent Living Outcomes for American Indians with Disabilities: A Needs Assessment of American Indians with Disabilities in Northwestern New Mexico (Cibola, San Juan, and McKinley Counties)

Priscilla Lansing Sanderson, M.S., CRC,
Robert M. Schacht, Ph.D.,
Julie A. Clay, MPH

“I live out in the rural area and I haul water round trip – 25 miles and the only guys that help me are my kids. I have a boy and a girl and they are only small, and we tried to haul water out there, and I was just trying to get somebody to get water out there or even run a line out there or drill a well out there, but they never did. They never had time. I wrote letters to the IHS and I think there are a lot of handicapped people on the reservation that are just really neglected. I don’t know why but they could respond or say something, ‘I can’t do it’, ‘I can’t help you’, that would be good.”

–Navajo consumer with a disability



Introduction

The purpose of this study was to understand the needs of American Indians with disabilities who may have problems that limit their ability to carry out daily activities such as walking, talking, working, eating, bathing, or shopping. Thirty-two American Indians with disabilities were interviewed in three counties in northwest New Mexico. Respondents were asked about things they used or needed because of their disability.

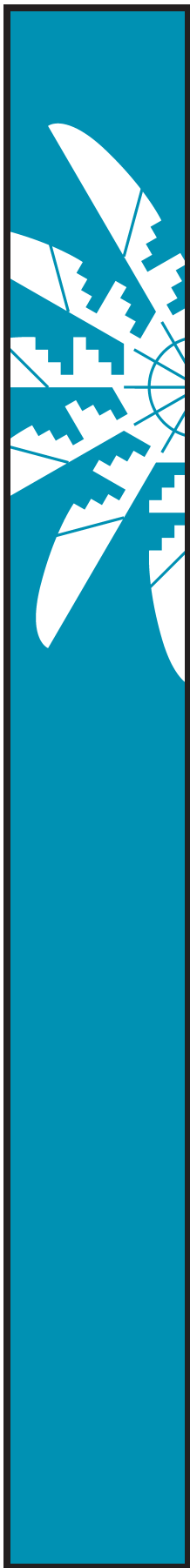
Results

The average age of the respondents was 49 years. Most (56%) of the respondents were male. Respondents’ affiliations were Navajo (75%), Zuni (13%) and Laguna (6%). Many had more than one disability (average of 2.2 disabilities each). The most common disabilities were blindness, hearing impairments, and hypertension. The three most common activities that are limited by the respondents’ disabilities were “working on a job” (69%), “taking care of things/responsibilities” (66%), and “driving” (63%). The services needed but not received in the past year were: help with services (66%), help with food (59%), dental care (53%), help with clothing (53%) and help with housing (50%). The three most common service agencies providing help were Social Security Administration, Indian Health Service (IHS), and Medicaid/Medicare.

Respondents needing personal assistance services indicated they had a person who helped them do activities of daily living. This person was usually a family member and usually female. Family members were preferred as personal assistants rather than someone paid by the government.

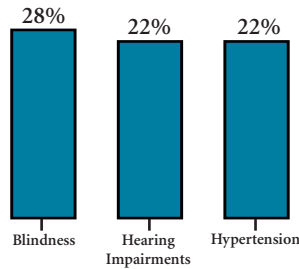
The top four consumer concerns in order of importance are:

1. Social Service providers should involve family members and extended family members in their rehabilitation.
2. You should feel safe in your own home and your neighborhood.
3. The Indian community understands the needs of its members with disabilities.
4. Information about legal rights and self advocacy is available to American Indians with disabilities.



The three most common disabilities are: blindness (28%), hearing impairment (22%), and hypertension (22%). Services needed but not received in the past year include: help with services (66%), help with food (59%), dental care (53%), help with clothing (53%), and help with housing (50%).

MOST COMMON DISABILITIES



Conclusions and Recommendations

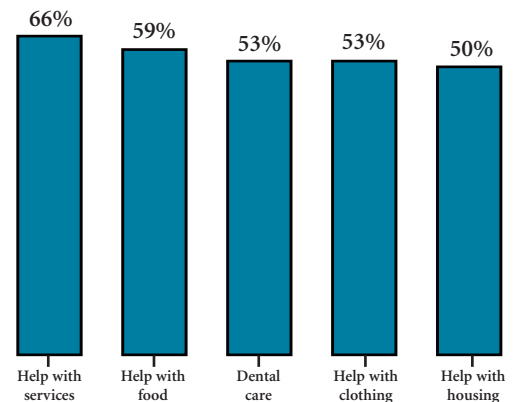
These results form a basis for a series of recommendations:

1. Arrangements made by the Centers for Independent Living in urban areas should emphasize the outreach aspects of providing services to American Indians with disabilities.
2. The New Mexico Statewide Independent Living Committee (SILC) should identify a minimum of six target communities and Pueblo villages in rural and reservation areas and hold at least one meeting a year in each of these communities.
3. The Centers for Independent Living, New Mexico Division of Vocational Rehabilitation and the Navajo Office of Special Education and Rehabilitative Services need to collaborate on providing services to American Indian consumers. Information

could be given to grassroots consumers on the reservation through the local radio station, tribal newspapers, culturally developed posters or setting up booths at fairs, tribal events or rodeos.

4. The New Mexico Technology Access Program should teach American Indian consumers in northwestern New Mexico to promote systematic change, legislation, policies, and practices.
5. Since the majority of the respondents did not know about many of the services that were available, the SILC plan should include dissemination of information about independent living services, designed for American Indian consumers, to Indian Health Service and Social Security Administration offices in American Indian communities.
6. Independent living counselors and SILC members need to be aware that the members of different tribal cultures, even if they reside in the same county, may have different basic needs.

SERVICES NEEDED BUT NOT RECEIVED IN THE PAST YEAR



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