

**Research Question:** Are there still barriers to Native American Veterans in receiving benefits within the healthcare system after the Memorandum of Understanding (MOU). MOU is between The Veterans' Administration and Indian Health Services.

## Abstract

Many American Indian Veterans struggle in navigating the Veteran Affairs Assistance. This research looked at if there are still barriers to Native American Veterans in receiving benefits within the healthcare system even after the Memorandum of Understanding (MOU) between the Department of Veterans Affairs (VA) and Indian Health Services (IHS) and other programs aiming at bridging the gaps in needs. Participants consisted primarily of Veterans and Active Service Members throughout Minnesota and Wisconsin. The research focused on six key issues addressed in previous research as areas of improvement (Access to Specialty Services, Family Care, Culturally Competent Care, Outpatient Care, Tele-Health, and Transportation). The response rate was low; however themes were identified from the data collected. There will need to be further research conducted for a better representation.

## Results

### Background & Literature

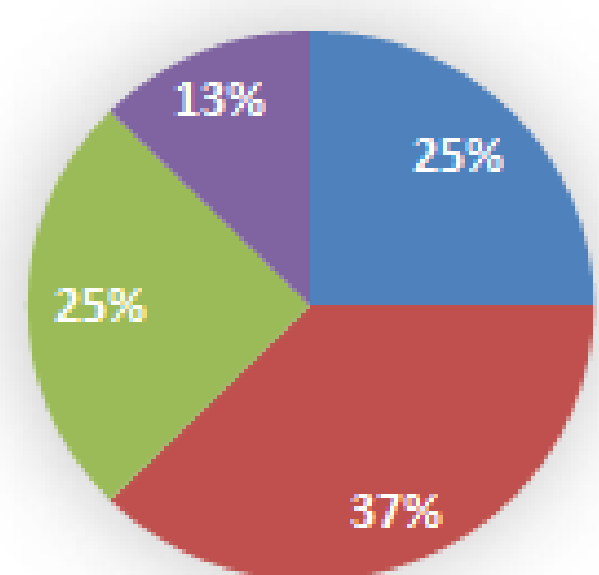
- Not a large analysis for the specific population
- Memorandum of Understanding
- Past research has examined disparities existing for Native Americans, Veterans, and Native American Veterans.
- Lack of research in the past 6 years

**Purpose:** Are there still issues present today here in the Minnesota, Wisconsin and neighboring areas?

### Method

- Qualtrics Survey
- Quantitative data collection with 2 expansion options
- Distributed through Tribal Veteran Service Officers through WI. & MN., Facebook, and emails to tribes through WI. & MN. (additional to MI.)

### Health Care Coverage Combination



- 1 of the 4 (IHS, VA, Private, and Public)
- 2 of the 4 combined (IHS, VA, Private, and Public)
- 3 of the 4 combined (IHS, VA, Private, and Public)
- Combination of IHS, VA, Private, and Public



Key (for above 6 graphs):

- Indian Health Services (IHS)
- Veterans Affairs (VA) Health Care Services
- Private Health Care
- Public (Medicare and Medicaid)
- Other: Tricare

### Discussion

- Hypothesis was not supported by the themes
- There were issues with distribution
  - COVID19 related
- Small variety of demographics within participants
- Would be more conclusive at a larger scale

### Conclusion

- Access to Specialty Services, Family Care, and Outpatient Care appear to be being met
- Tele-Health though not a strong theme leans more towards being met
- Culturally Competent Care and Transportation appear to be continued needs as the spread of the data is across the board. Because they were all over the place, no real theme could be drawn.

### Acknowledgements

- Mentor – Cherie Dakota
- McNair – Monte Stewart, Aaron Wainman, Deb Provost, & my cohort
  - Those who helped distribute the survey
  - Tribal Veteran Service Officers & Tribes
  - The University of Wisconsin- Superior

### Some additional Points made:

“there is no reasonable transportation... Specialized services are far. Unless you drive its quite difficult to receive services”.

“The electronic records between VA, Tricare and tribe are incompatible this makes managing care harder than it should be in the digital age.”

“Needs to be better culturally competent care. Integration of Native medicines and ceremonies as an option.”

“Teach VA and Tribal Health Directors how to advertise and strengthen use of their facilities”

“VA telehealth is great!”

### Contact information:

Researcher: Madison Hale – [mhale3@uwsuper.edu](mailto:mhale3@uwsuper.edu)  
Mentor: Cherie Dakota – [cdakota@uwsuper.edu](mailto:cdakota@uwsuper.edu)

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