

National Resource Center On Native American Aging

Organizational Capacity Form

Organization:

Center for Rural Health, University of North Dakota

Primary Funding Source(s):

Administration on Aging, DHHS

Founding Date:

February 1994

Other Grants:

Not Applicable

Mission:

Identify and increase awareness of evolving Native elder health and social issues.

Vision:

Empower Native people to develop community-based solutions.



Principal Investigator and Area of Specialization:

Twyla Baker-DeMaray (Mandan-Hidatsa) MS—Quantitative and qualitative research, elder abuse, restorative justice and conflict resolution, elder health and social status, American Indian veterans, and American Indian populations in general (contemporary and traditional culture, traditional and alternative medicine).

Staff Members and Area of Specialization:

Rick Ludtke, PhD, Consultant—Social gerontology, demography, and research methods
 Ann Miller, Administrative Assistant—Budgeting, software utilization, and arthritis wellness
 Kyle Muus, PhD, Research Associate and Assistant Professor—Native American health, health workforce supply and demand, health care access, emergency medical services, chronic diseases, cancer surveillance, and substance use surveillance
 Julie Arnold—Web designer and desktop publisher

Advisory Board Members and Organizational Affiliation:

Our advisory board has been dissolved. Previous members included:

- Loretta Beralas, Hawaii, Alu Like, Inc.
- Cynthia LaCounte (Chippewa Nation), Montana, currently working for Kauffman and Associates, Inc.
- Wendell McLester (Oneida Nation), Wisconsin, National Indian Council on Aging
- Art McDonald (Lakota Sioux Tribe), Montana, Ashland Community Health Center
- Sophie Two Hawk (Cheyenne River Sioux Tribe), California, Chief Medical Office, California Area Indian Health Service
- Margaret Dosedo (Bear Clan, Zuni Pueblo), New Mexico, Zuni Senior Center

Collaborative Organizations:

- Tribes, Alaska villages, Hawaiian Homesteads, and other tribal entities assisting with elders
- National Resource Center for American Indian, Alaska Native and Native Hawaiian Elders, Anchorage, Alaska
- Hā Kūpuna (National Resource Center for Native Hawaiian Elders), Honolulu, Hawaii
- National Society on American Indian Elders (NSAIE), Phoenix, Arizona
- Office of Technical Assistance Center for American Indian Elders, Phoenix, Arizona

Primary Objective:

One of the primary objectives for the National Resource Center on Native American Aging is to serve as a resource for tribes wishing to collect community-level data on Native elder social and health status. American Indian, Alaska Native, or Native Homesteads retain ownership of the data. The National Resource Centers on Native Aging use the data in aggregate format.

Descriptive statistics with national comparisons are provided to participating tribes. Analyses are conducted on the resulting national aggregate data file to identify, educate, advocate, and disseminate information related to the health and social status of Native elders throughout the United States.

A total of 15,565 Native elders from 127 service units representing 298 tribes, Alaska Native villages, and Hawaiian homesteads participated in Cycle III of the needs assessment conducted in 2007–2008.

Technical Assistance:

We provide resources to Native service providers to conduct needs assessments focused on Native elders. These resources include (1) a sample resolution to gain tribal council permission (2) instructions and technical assistance to determine sample size (3) a survey instrument—*Identifying Our Elders: A Survey of Elders*, (4) technical assistance to motivate participation, (5) data processing, (6) data management, (7) data analyses, and (8) needs assessment results. These results include community descriptive statistics, national population (all races) comparisons, and tribal comparisons from participating tribes.

The results are used at the state, regional, and national levels to advocate and educate policy-makers, tribal leaders, aging organizations, and the general population on the health and social status of Native elders. Various forms of literature such as factsheets, the *Native Aging Visions* newsletter and the *Journal of Native Aging and Health* are used to disseminate this important information.

We offer technical assistance by the following venues: a state of the art website: www.nrcnaa.org, a toll-free phone number: (800) 896-7628, and communication through e-mail nrcnaa@medicine.nodak.edu. Tele-chats, regional training sessions, and curriculum are provided through state, regional, and national partnerships.

Selected Publications:

Muus, Kyle, Twyla Baker-Demaray, Leander R. McDonald, Richard Ludtke, Alan Allery, Andy Bogart, Jack Goldberg, Scott Ramsey, and Dedra Buchwald. "Body Mass Index and Cancer Screening Among Older American Indian and Alaska Native Men." *The Journal of Rural Health* 25.1 (2009): 104–108.

- Results: Colon and prostate cancer screening rates were very low for American Indian and Alaska Native males. Younger men (ages 55–64) were less likely than older men (ages 65+) to have recently received these cancer tests.

Ruthig, Joelle, and Alan Allery. "Native American Elders' Health Congruence: The Role of Gender and Corresponding Functional Well-being, Hospital Admissions, and Social Engagement." *Journal of Health Psychology* 13.8 (2008): 1072–1081.

- Results: Elders who have multiple or severe chronic diseases benefit from optimistic health appraisals in terms of greater functional ability, greater social engagement, and fewer hospitalizations.

Baker-Demaray, Twyla, Richard Ludtke, Alan Allery, Leander R. McDonald, Mary Gattis, Kim Ruliffson, and Joelle Ruthig. "Conducting Needs Assessments: Form the Title VI Director's Manual—2007." *Journal of Native Aging and Health* 2.2 (2008): 37–39.

- This article explains the purpose, the reasons, and the process for conducting a local needs assessment, and data use.

Muus, Kyle J., Leander R. McDonald, Richard L. Ludtke, Alan J. Allery, Alana Knudson, and Patricia Moulton. "Arthritis Among American Indian and Alaska Native Elders: Prevalence, Demographic Patterns, and Comorbidities." *Journal of Native Aging and Health* 2.1 (2007): 5–13.

- Results: Arthritis prevalence was slightly higher in AI/AN elders when compared to similar estimates for US elders. In addition, the majority of AI/AN elders with arthritis had one or more other chronic conditions. Chronic conditions found to commonly coexist with arthritis included osteoporosis, asthma, high blood pressure, congestive heart failure, and depression.

Conway, Pat, Richard L. Ludtke, Leander R. McDonald, Jessica Handran, Jennifer Wages, Jennifer Boeckel, and Lisa Shuster. "Reciprocal Relationship Between Grandparent Caregivers and Their Grandchild's Parent." *Journal of Native Aging and Health* 2.1 (2007): 19–30.

- Results: The most common family pattern for caregiving was a maternal grandmother caring for her daughter's children. When a grandchild had a disability, the relationship between the grandparent caregiver and grandchild's parent was more likely to be stressed. Grandparent caregivers reported a higher level of burden if their grandchildren had a disability. The most common disabilities of the children were emotional issues, hyperactivity disorder, and learning disability. Higher rates of stress between grandparent caregiver and parents were reported when the child's parent had emotional or substance abuse issues.

A complete listing of NRCNAA publications is available at:

<http://ruralhealth.und.edu/projects/nrcnaa/publications.php> or www.nrcnaa.org (click the publications tab).

Projects

- **Identifying Our Needs: A Survey of Elders**
Assists tribes, villages, and homelands in creating a record of the health and social needs of their elders. This can help tribes with data needed for their Title VI nutrition and caregiving grants awarded from the Administration on Aging (AoA) and can also help with tribal planning, long-term care discussions, and grant-writing.
- **WELL-Balanced (Wise Elders Living Longer)**
A health promotion program targeting Native elders with diabetes, arthritis, and hypertension as well as community based elders that have an interest in gaining knowledge and skills to reduce their risk of falling. The project will be piloted in summer 2009, and more information will be available in the coming months.
- **Heroes Project**
The project seeks to honor individuals who have dedicated their time, talent, and energy to help our elders, to solve local problems, and to build stronger communities. There are 45 awardees for 2009 and this project will repeat every six years.
- **Native Service Locator Project**
That NRCNAA hosts and monitors a nationwide interactive map that shows the location of Native elderly services at Title VI sites.
- **Native American Map for Elder Services (NAMES): A Long-Term Care Planning Tool Kit**
This tool kit fully describes the spectrum of long-term care. NAMES was developed to assist American Indian and Alaska Native groups with planning, developing, and implementing long-term care services for their elderly within their communities (Developed in 2002).

Contact Information:

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