Abstract

The objectives of this study were to ascertain the extent of, and health-related characteristics associated with, travel to reservations in a low-income, urban American Indian and Alaska Native (AI/AN) population. We surveyed more than 500 AI/AN adults at a primary care clinic. Measures included time spent visiting a reservation during the past year, and sociodemographic, cultural, and clinical characteristics. More than half (52%) of the patients had not traveled, 34% had traveled up to 30 days, and 14% had spent more than 30 days traveling to reservations. Multivariate ordinal regression revealed that a strong Native American cultural identification, presence of lung disease, absence of thyroid and mental problems, and greater dissatisfaction with care were independently associated with more travel to reservations (p ≤ 0.05). This research begins to augment the paucity of information on such travel and its relationship to health status and use of health services among urban AI/ANs.