

RESEARCH: Diabetes Among Native Veterans

“During National Native American Heritage Month, we also honor our Native Americans veterans and service members who have courageously served and continue to serve in our Armed Forces — including the brave Native American Code Talkers in World War I and World War II. For over 200 years, Native Americans have defended our country during every major conflict and continue to serve at a higher rate than any other ethnic group in the Nation. Because of their selflessness, every generation of Americans receives the precious gift of liberty — and we owe each of them and their families a debt of gratitude for their sacrifice and dedication.”
 – President Biden (October 29, 2021ⁱ)



American Indian/Alaska Native (AIAN) veterans are a segment of the population with high health, social and economic disparities in comparison to their peers. Their needs are pervasive, impacting all parts of their lives, and while many Veterans suffer, the challenges of American Indian Veterans are often above the norm. American Indian and Alaska Native veterans have lower incomes, lower educational attainment and higher unemployment than veterans of other races. They are also more likely to lack health insurance and have a disability (service-connected or otherwise) than veterans of other races. About 19 percent of American Indian and Alaska Native veterans had a service-connected disability rating in 2010, compared with 16 percent of veterans of all other races, according to the Department of Defense.ⁱⁱ

The American Indian and Alaska Native population, alone and in combination, increased from 5.2 million in 2010 to 9.7 million [alone or in combination with other races] in 2020... 2.9 percent of the U.S. population.ⁱⁱⁱ

The 2019 US Census American Community Survey shows nearly 143,000 American Indians/Alaska Native are Veterans, and of this group, 40% are Elders^{iv} (aged 65 and up) ...with many facing the consequences of war and its long-term effects. For instance, it is known that Native Americans exposed to Agent Orange are more likely to get adult-onset Type 2 diabetes than non-Natives. They are also more likely to have nervous system damage from Agent Orange and DMZ (demilitarized zone) action, which can contribute to onset or instability of diabetes.

Age of Veteran	Male	Female	Total	%
18-34	9518	3152	12670	9%
35 to 54	33288	9168	42456	30%
55 to 64	26696	3881	30577	21%
65 to 74	33539	2330	35869	25%
75 and up	<u>20264</u>	<u>1136</u>	<u>21400</u>	<u>15%</u>
Total	123305	19667	142972	100%

According to the 2020 Demographics Report from the U.S. Department of Defense, 12,796 enlisted service members and 1,571 officers on active duty identified as American Indian/Alaska Native – just over 1% of DOD’s 1,333,822 active-duty members. Approximately one-third (31.1%) of active-duty members (415,414) identify themselves with a racial minority group (i.e., Black, or African American,

Asian, American Indian or Alaska Native, Native Hawaiian or Other Pacific Islander, Multi-racial or Other/Unknown).^v

2.24 | Number of Active Duty Enlisted Members and Officers by Race and Service Branch

In total, there are 415,414 Active Duty members who self-identify with groups in the racial minority. Over one-half identify as Black or African American.

Service Branch	American Indian or Alaska Native		Asian		Black or African American		Native Hawaiian or Other Pacific Islander		Multi-racial	
	Enlisted	Officers	Enlisted	Officers	Enlisted	Officers	Enlisted	Officers	Enlisted	Officers
Army	3,072	478	18,326	5,852	90,854	11,454	4,987	593	N/A*	N/A*
Navy	5,974	575	16,739	3,159	55,503	4,425	3,726	287	19,836	2,664
Marine Corps	1,682	204	4,977	806	17,467	1,229	1,810	139	1,952	407
Air Force	2,067	314	10,561	3,468	45,013	4,025	3,630	335	12,771	2,072
Subtotal	12,795	1,571	50,603	13,285	208,837	21,133	14,153	1,354	34,559	5,143
Total DoD	14,366		63,888		229,970		15,507		39,702	

Service Branch	Other/Unknown		Racial Minority Total		White		Total DoD	
	Enlisted	Officers	Enlisted	Officers	Enlisted	Officers	Enlisted	Officers
Army	12,064	6,764	129,303	25,141	258,671	68,139	387,974	93,280
Navy	13,919	1,901	115,697	13,011	170,640	42,648	286,337	55,659
Marine Corps	4,211	1,609	32,099	4,394	127,409	17,056	159,508	21,450
Air Force	7,444	4,069	81,486	14,283	183,883	49,962	265,369	64,245
Subtotal	37,638	14,343	358,585	56,829	740,603	177,805	1,099,188	234,634
Total DoD	51,981		415,414		918,408		1,333,822	

* The Army does not report "Multi-racial."

Note: Racial minority groups include American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, Multi-racial, and Other/Unknown.

Source: DMDC Active Duty Military Personnel Master File (September 2020)

The Office of Health Equity under the Veterans Health Administration (VA), U.S. Department of Affairs, reports that almost three-quarters (74.3%) of service-connected AIANs utilize VA health care.^{vi}

- Roughly 33% of those using VA care access mental health services.
- AIAN vets using the VA experience PTSD at a greater rate than all other veteran group – and nearly twice the rate of PTSD as non-Hispanic white veterans (20.5% versus 11.6%).
- AIAN veterans are more likely to suffer depression symptoms (18.7% compared to 15.2% non-Hispanic whites) and major depressive disorder (7.9% vs. 5.8% for non-Hispanic whites).

Two factors exacerbate the issues of diabetes have a high incidence in AIAN populations:

- AIAN adults are nearly three times more likely than non-Hispanic white adults to be diagnosed with diabetes.^{vii}
- AIAN adult obesity rates are 60% higher than their non-Hispanic white counterparts.

Data from a 2004-2014 CDC study cites the overall prevalence of diabetes at 20% for the general U.S. population but nearly 25% for veterans, according to the National Health and Nutrition Examination Survey (NHANES). The study authors emphasized, "Diabetes is more prevalent among U.S. veterans than among the general population." This is "primarily attributable to the high prevalence of obesity among this population. Obesity and diabetes are genetically linked. People with obesity are more prone to the major contributors to Type 2 diabetes – insulin resistance and β cell dysfunctions." The study found:

- Diabetes was the most prevalent among veterans aged 65 years or older (27%), male veterans (22%), veterans with less than 12 years of education (33.5%) and veterans with an annual income below the 100% federal poverty level (FPL) (23.8%).

- Obesity was the most prevalent among veterans aged 45 to 64 (53.1%), male veterans (41.1%), veterans with less than 12 years of education (51.4%) and veterans living below the 100% FPL (47.2%).^{viii}

An FAQ developed by the VA for the Office of Rural Health is states:

“All veterans who live in rural settings have lower health-related quality of life than their urban counterparts. Higher poverty and uninsured rates, hospital closures, travel distances [and] limited broadband internet are barriers to services for many rural residents. These barriers are exacerbated for rural Native Americans, who tend to live in even more remote areas. In addition, rural Native American veterans have higher rates of post-traumatic stress disorder than white non-Hispanic veterans, a difference explained by rural Native American veterans’ greater exposure to war-zone stress (e.g., combat). In focus groups, rural Native American veterans have cited compounding challenges to receiving services and benefits from the US Department of Veterans Affairs, lack of outreach to Native American veterans, distrust of the VA system and staff, a cumbersome benefits process, lack of culturally competent care, and difficulties qualifying for care. American Indian women veterans identify similar barriers. These challenges are offset in part by rural Native American veterans’ strong respect for veterans, family commitment to navigating care services, dedicated spaces, and advocates for veterans in the community, and recent efforts to facilitate veterans’ access to health care.”^{ix}

Although PWNA does not track the military status of its program partners or their clients, we know every pillar of our services (Food and Water, Education, Health and Holiday) reaches AIAN veterans supported by reservation partners who use our materials and long-term solutions services.

ⁱ <https://www.whitehouse.gov/briefing-room/presidential-actions/2021/10/29/a-proclamation-on-national-native-american-heritage-month-2021/>

ⁱⁱ https://www.va.gov/tribalgovernment/docs/aian_report_final_v2_7.pdf

ⁱⁱⁱ <https://www.census.gov/library/stories/2021/08/improved-race-ethnicity-measures-reveal-united-states-population-much-more-multiracial.html>

^{iv} <https://data.census.gov/cedsci/table?q=ACSDT1Y2019.B21001C&t=American%20Indian%20and%20Alaska%20Native%3ACivilian%20Population&tid=ACSDT1Y2019.B21001C&hidePreview=true>

^v <https://download.militaryonesource.mil/12038/MOS/Reports/2020-demographics-report.pdf>

^{vi} https://www.va.gov/HEALTHEQUITY/docs/American_Indian_Heritage_Month_Fact_Sheet.pdf

^{vii} <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlID=33>

^{viii} <https://www.usmedicine.com/clinical-topics/diabetes/diabetes-prevalence-higher-among-veterans-than-general-population/>

^{ix} https://www.mentalhealth.va.gov/communityproviders/assets/docs/populations/Rural_NA_FAQ_sheet.pdf