

Based on interviews with Navaho patients in an outpatient clinic, light is thrown on some of their attitudes to medical care and health services.

Some Navaho Attitudes Toward Available Medical Care

Introduction

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The Navaho Indian Reservation is organized by the U.S. Public Health Service into eight districts, called service units, for the purpose of administering health care. Each district has either a central hospital or a central clinic operating continuously. The central hospital or clinic maintains the medical records of only the Navahos within its district. In addition to the central medical facility, the PHS runs field clinics which are generally open one day a week. Furthermore, field nurses cover each district for the purpose of administering immunizations and for patient follow-ups.

This study was conducted by interviewing Navahos waiting to be seen in the outpatient clinic at the Shiprock PHS Hospital. The purpose of the study was severalfold. First, it was my intention to find some patterns in Navaho attitudes toward available medical care. The available medical care was arbitrarily divided into three types: 1) that obtained from private physicians living just outside the reservation, 2) that administered by the PHS Hospital, and 3) that obtained from Navaho medicine men. Because the Shiprock district forms part of the border of the reservation and is contiguous to a sizeable city of about 25,000 (Farmington), the Navaho people in this area have had considerable exposure to the white culture. Hence, many of them have become aware of the medicine practiced by the private physicians living off the reservation in addition to the on-reservation medicine which comprises the other two types of medical care mentioned.

One of the objectives of the study was to determine the relative importance of the three types of medical care to Navahos in the Shiprock area. Relative importance was measured in several ways. First, frequency of utilization of the types of medical care was recorded. In addition, during the interviews inquiry of the effectiveness of the different kinds of medical care was made. It must be emphasized that I recorded the opinion of the person being interviewed and not the doctors' opinions. I also asked each patient interviewed where he would prefer to go to be treated for a sickness assuming he had all the money he needed. The stipulation of wealth was made because the Navaho medicine man and the private physician charge considerable fees for their services while the PHS hospital offers its services free to the Navaho.

When I first came to Shiprock some of the doctors and other personnel working at the PHS Hospital told me that the private doctors located in the towns just outside the reservation tend to give unneeded shots to Navahos, and that the Navahos feel that the private physicians are better

doctors than the PHS physicians because of this greater frequency of shot administration. In addition, I was told that the Navahos look down upon the PHS doctors and the medicine they prescribe because their services are free. An attempt to test the validity of these two theories was made in this study.

Another important aspect of the interviewing involved inquiring about the major problems the Navaho people confront in utilizing the PHS hospital. For reasons to be explained later on, I feel that the Navaho people should have a much greater opportunity to voice their complaints about the Public Health Service.

It must be admitted that when an investigator makes an attitudinal study in a culture different from his own, he may expect to experience numerous problems, his own naïveté being one of them. Indeed, I found it quite difficult to compose a questionnaire on attitudes after having spent only two weeks on the Reservation. Many questions I would have liked to have asked I did not include in the questionnaire for fear that questions which were too self-judgmental in nature would bias the answers. Another problem involved in this study was the fact that I found it necessary to use a Navaho interpreter in a majority of the interviews because of the language barrier. Unfortunately, none of the people who interpreted for me had any previous interpreting experience and hence found difficulty in translating some of my questions. In fact, a couple of weeks of rehearsing was necessary before the actual interviewing could begin. Another problem confronted was cutting my questionnaire down to a suitable length in order to counter any possible boredom or discomfort in the people I would interview.

Method of Investigation

As mentioned before, only Navahos waiting to be seen in the outpatient clinic were interviewed. Obviously, this created a major bias in the results as will be explained later. The ideal procedure would have been to take a random sample of people living in the Shiprock area and to have interviewed them at their homes. However, making home visits was too impractical for me to attempt. So, the procedure was to haphazardly interview Navahos of both sexes and older than 21 years of age in the clinic. Because many Navahos speak little or no English, an interpreter was frequently used during the interviews. All the patients inter-

viewed were asked the same questions except when the answer to a certain question negated the need to ask another question. The interviewing was done in a separate room for the sake of privacy. The answers to the questions asked were written down immediately after the conclusion of each interview in order to allow me to communicate more effectively with the patient during the interview. Furthermore, I made it clear to each patient that I am a medical student and not a PHS doctor.

The questionnaire used for all of the interviews is given on the following two pages. Unfortunately, because of numerous difficulties I was able to interview only 25 people. As a consequence, some of the results may not be statistically meaningful. In addition, the results of a few of the questions included in the questionnaire will not be presented because I now feel that they will not be meaningful to the discussion. These questions, however, were helpful in eliciting responses to the other questions.

SOME NAVAHO ATTITUDES TOWARD AVAILABLE MEDICAL CARE

Name _____ Sex: _____

Number _____ Age: _____

Interpreter needed: Yes _____ No _____

1. I understand that there are several types of medical care available to you. These are the medicine men, the doctors here at the Public Health Service Hospital, and the private doctors living off the reservation.

If you were very wealthy, where would you go first to be cured of a sickness?

Where would you go next?

Then next?

2. How many times during the past year have you been to a medicine man in order to be cured of a sickness?

When was the last time you went to a medicine man because of sickness?

What was your sickness the last time you went to the medicine man?

Were you completely cured?

Did the medicine man make you feel better the last time you went to him?

Do the medicine men usually cure you completely?

Do the medicine men usually make you feel better?

3. How many times during the past year have you been to this hospital in order to be cured of a sickness?

When did you come to the hospital last because of sickness?

What was your sickness the last time you came here?

Were you completely cured?

Did the doctors make you feel better the last time you were here?

Do the doctors here usually cure you completely?

Do they usually make you feel better?

4. How many times during the past year have you been to private doctors outside the reservation in order to be cured of a sickness?

Where?

When was the last time you went to a private doctor because of sickness?

Where?

What was your sickness the last time you went to a private doctor?

Did this doctor completely cure you the last time you went to him?

Did he make you feel better?

Do the private doctors usually cure you completely?

Do the private doctors usually make you feel better?

5. Do you think shots help you when you are sick?

Where do you get more shots—here, or from the private doctors?

Do you think the doctors here should give shots more often?

6. What are the biggest problems you have in using this hospital?

7. Do you think that medicine which costs a lot of money is always better than medicine which costs only a little bit of money?

Comments:

Results

13 females and 12 males were interviewed. The mean age of the 25 patients was 45 years and the median age was 42 years. An interpreter was needed for 17 of the 25 interviews.

1. To the question "If you were very wealthy, where would you go first to be cured of a sickness?" the results were as follows:

- 15 (60%) indicated private physician as first choice
- 9 (36%) indicated PHS Hospital as first choice
- 1 (4%) indicated medicine man as first choice
- 2 (11%) indicated private physician as second choice
- 12 (66%) indicated PHS Hospital as second choice
- 4 (22%) indicated medicine man as second choice

Note: The percentages are determined from the total number of persons who answered the particular question.

2. The number of patients interviewed who had ever been to a Navaho medicine man in order to be cured of a sickness: 15 (60%)

The number of patients who had been to a medicine man in the past year in order to be cured of a sickness: 6 (24%) Of the 15 who had ever been to a medicine man in order to be cured of a sickness, the attitudes toward the curative powers of the medicine man were as follows:

Medicine man usually cures: 9 (60%)
 Medicine man usually makes patient feel better but does not usually cure: 3 (20%)
 Medicine man does not help much: 3 (20%)

Of the same 15, the preferences for medical care were as follows:

6 (40%) indicated private physician as first choice
 8 (53%) indicated PHS as first choice
 1 (7%) indicated medicine man as first choice

Of the 10 patients who had never been to a medicine man in order to be cured of a sickness, the preferences for medical care were as follows:

9 (90%) indicated private physician as first choice
 1 (10%) indicated PHS as first choice
 0 (0%) indicated medicine man as first choice

3. The number of patients interviewed who had ever been to the Shiprock PHS Hospital previously in order to be cured of a sickness: 25 (100%)

The number of patients interviewed who had been to the Shiprock PHS Hospital at least once in the past year in order to be cured of a sickness: 23 (92%)

Of the 25 patients interviewed, the attitudes toward the curative powers of the Shiprock PHS Hospital were as follows:

PHS usually cures: 13 (52%)
 PHS usually makes patient feel better but does not usually cure: 10 (40%)
 PHS does not help much: 2 (8%)

4. The number of patients interviewed who had ever been to a private doctor in order to be cured of a sickness: 10 (40%)

The number of patients interviewed who had been to a private physician at least once in the past year: 5 (20%)

Of the 10 patients who had been to a private doctor, the attitudes toward the curative powers of the private doctor were as follows:

Private doctor usually cures: 7 (70%)
 Private doctor usually makes patient feel better but does not usually cure: 3 (30%)
 Private doctor does not help much: 0 (0%)

Of the same 10 patients the preferences for medical care were as follows:

7 (70%) indicated private doctor as first choice
 2 (20%) indicated PHS as first choice
 1 (10%) indicated medicine man as first choice

Of the 15 patients who had never been to a private doctor the preferences were as follows:

8 (53%) indicated private doctor as first choice
 7 (47%) indicated PHS as first choice
 0 (0%) indicated medicine man as first choice

5. The results to the question "Do shots help when you are sick?" were as follows:

Yes	No	Depends on situation
21 (87%)	0 (0%)	3 (13%)

Only the 10 patients who had been to a private physician were asked where they received more shots. The results were:

1 (10%) felt the PHS Hospital gave more shots

7 (70%) felt the private doctors gave more shots
 2 (20%) felt the private doctors and the PHS gave about the same number of shots

Among the 14 patients who indicated the private physician as their first choice for medical care, the question of whether or not the PHS doctors should give more shots had the following results:

Yes (more shots should be given)	No or not necessarily
10 (71%)	4 (29%)

Among the 11 patients who did not indicate the private physician as their first choice, the results to the same question were as follows:

Yes (more shots should be given)	No or not necessarily
6 (55%)	5 (45%)

6. To the question "What are the biggest problems you have in using this hospital?", 20 of the patients interviewed felt that waiting for long periods of time to be seen in the outpatient clinic is a major problem. 9 stated that lack of transportation is a major inconvenience. 2 patients thought that the hospital is too impersonal. There were also 2 patients who felt that there were no major problems in using the hospital.

7. The answers to the question "Do you think that medicine which costs a lot of money is always better than medicine which costs only a little bit of money?" were as follows:

Yes	No	Not necessarily
13 (52%)	4 (16%)	8 (32%)

The medical care preferences of the 15 patients who answered "yes" were as follows:

6 (46%) indicated private doctor as first choice
 6 (46%) indicated PHS as first choice
 1 (8%) indicated medicine man as first choice

The preferences of the 12 patients who answered "no" or "not necessarily" were as follows:

8 (66%) indicated private doctor as first choice
 4 (33%) indicated PHS as first choice
 0 (0%) indicated medicine man as first choice

Discussion

Before discussing the results, it must be noted that this survey suffers from several biases. First, the interviewing was done only in the outpatient clinic. Hence, those Navahos who use the clinic most frequently were the most likely to be interviewed. Those people who rely primarily on the medicine men or the private physicians and who use the PHS Hospital infrequently had a low probability of being interviewed. In addition, the very fact that the interview was conducted in the PHS Hospital may have induced some of the patients to give answers which were more favorable to the Public Health Service than were their true beliefs.

Another problem confronted was the language barrier. As indicated in the results, 68 per cent of the interviews required use of an interpreter. Consequently, slight misunderstandings of some of the questions were always a possibility. Finally, I must admit that most of my conclusions must not be taken as definitive because, as I

mentioned before, some of my results may not be statistically meaningful.

In spite of the fact that the survey was conducted in the PHS Hospital, 60 per cent of the patients interviewed indicated that they would prefer to go to a private doctor in order to be cured of a sickness if they had enough money while only 36 per cent gave the PHS Hospital as their first choice and 4 per cent indicated the Navaho medicine man as first choice. Furthermore, 66 per cent of the patients interviewed indicated the PHS as their second choice. Thus, it seems that a substantial majority of the patients who use the PHS Hospital would prefer to be treated by a private physician. It is most likely that the lack of money is responsible for the fact that only 20 per cent of the patients interviewed had been to a private physician at least once in the past year while 92 per cent had been to the PHS Hospital in the past year.

The question arises as to why a majority of the Navaho patients interviewed indicated that they preferred the private doctor to the PHS Hospital and the PHS Hospital to their own medicine men. One obvious approach was to determine the opinions of the patients in regard to the curative powers of the three types of medicine.

While 60 per cent of all the patients interviewed had been to a Navaho medicine man some time in their lives, only 24 per cent had been to one in the past year in order to be cured of a sickness. This in conjunction with the fact that only 4 per cent indicated the medicine man as their first choice for medical treatment and only 22 per cent as their second choice might at first glance lead one to believe that the influence of traditional Navaho medicine has become rather diminished in the Shiprock area. However, when the 15 patients who had been to a medicine man were asked how effective the treatment was, 60 per cent stated that the medicine man *usually* cured them and another 20 per cent felt that the medicine man *usually* helped them. Thus, 12 of the 15, or nearly half of all the patients interviewed, felt that the medicine man is beneficial. Furthermore, because of the bias of interviewing a select population in the PHS Hospital rather than a random sample in the Shiprock district, the actual utilization of traditional Navaho medicine is probably much greater in the general population than the survey indicated. In light of the rather favorable attitude regarding the effectiveness of the medicine men, it is a possibility that either fear or embarrassment prevented many of the patients from indicating Navaho medicine as their first choice. In sum, I feel that the results indicate that the traditional Navaho medicine still has a strong influence on the thinking of the Navaho people in the Shiprock district, a relatively acculturated area.

It appears that the Navahos can use both their own medicine and the white man's medicine without much conflict for the patients interviewed indicated that they also believed strongly in the effectiveness of the private doctors and the PHS. Ninety-two per cent of all the patients interviewed felt that the PHS Hospital usually cured or usually helped them while all ten of the patients who had been to private doctors felt that the private physicians usually cured or helped. One interesting bit of data is that while 52 per cent of the patients felt that the PHS Hospital usually cured them, 70 per cent of those patients who had been to a private doctor felt that the private physician usually cured. Now, while this may not be statistically significant, it could

very well be one of the factors responsible for the greater popularity of the private doctors. Of course, the belief that the private doctors are more effective healers than the PHS doctors may be derived from the greater popularity which, in turn, may be due to other factors.

Another interesting statistic is that of the ten patients who had been to private doctors, 70 per cent gave the private doctors as their first choice, and only 20 per cent indicated a preference for the PHS. This suggests that the *experience* of visiting a private physician is somehow more satisfying than visiting the PHS Hospital. However, of the 15 patients who had never been to a private doctor, a smaller but still considerable percentage (53%) indicated the private physician as their first choice while 47 per cent designated the PHS Hospital. Of course the question arises as to why so many people who had never been to a private doctor preferred to go to one. Most likely, word of mouth is chiefly responsible. It is interesting that of the 15 patients who had been to a medicine man, a slight majority indicated a preference for the PHS. On the other hand, of the ten who had never been to a medicine man, 90 per cent picked the private doctor as first choice. A possible explanation is that perhaps those persons who tend to see the medicine man do not hear much about the private doctors because they are either physically or socially isolated from the more acculturated Navahos.

When I first came to Shiprock, I was informed by some of the doctors at the PHS Hospital that the private physicians located just outside the reservation tend to give Navahos more shots than the PHS Hospital because many of the Navahos think that shots are a cure-all for all diseases. I attempted to determine the validity of this theory in my survey. When asked whether shots helped in curing sickness, 87 per cent of all the patients interviewed answered "yes," 0 per cent answered "no," and 13 per cent said it depended on the situation. Thus, it would seem that the Navahos (at least those Navahos who use the PHS Hospital regularly) have an overwhelming faith in the effectiveness of shots. The next step was to ascertain whether or not the private physicians around the reservation really do administer more shots than the PHS doctors. The results show that they do. Seven of the ten patients who had been to a private doctor stated that from their own experiences they felt that private doctors do give more shots. Only one person indicated the PHS as giving more shots and the remaining two said there was no difference. Finally, each of the 25 patients interviewed was asked whether or not the PHS doctors should give more shots. Among the 14 who indicated the private doctor as first choice (which I will call Group I), 71 per cent felt that the PHS physicians should give more shots and only 29 per cent answered "no" or "not necessarily." Among the 11 remaining patients (to be called Group II), 55 per cent felt the PHS should give more shots and 45 per cent believed otherwise. Because a larger percentage of Group I than of Group II felt that the PHS physicians should administer more shots, it appears that the theory under question may have some validity. However, the difference in the percentages is not large enough to indicate that the frequency of shot administration is one of the major factors responsible for the popularity of the private doctors.

Another theory espoused by some of the personnel at the Shiprock PHS Hospital is that many Navahos have

little faith in the treatment and medication they receive there because these services are free. On the other hand, according to the theory, the Navahos feel that the private doctors are much superior to the PHS doctors because they charge high fees. To test this theory I asked the question whether expensive medicine is always better than inexpensive medicine. Fifty-two per cent of all the patients interviewed answered "yes" (expensive medicine is better than inexpensive medicine) and 48 per cent answered "no" or "not necessarily." This in itself is not very significant. However, of the 13 patients who answered "yes," 6 indicated the PHS Hospital as their first choice, 6 indicated the private physician, and one stated he preferred the medicine man. Of the 12 who answered "no" or "not necessarily," 4 gave their preference as the PHS Hospital and 8 indicated the private physician. These results are definitely in disagreement with the theory, for a majority of the patients who preferred the private doctor felt that expensive medicine was not necessarily better than inexpensive medicine. As a matter of fact, many of the patients interviewed could see around my question and told me that they realized that the medicine given out by the PHS Hospital was the same as that given by the private doctors.

In order to allow the patients to express themselves openly, I simply asked them to cite the biggest problems they faced in using the Shiprock PHS Hospital. Almost all of the patients complained about how long they had to wait in order to be seen in the outpatient clinic. More than a third of the patients felt that transportation to the hospital was a major problem. Two persons complained that the hospital was too impersonal. One woman in particular was very bitter and complained that not only the Anglo doctors but also the Navaho nurses and office employees were rude and insensitive. In fact, she told me that she always takes her children and her husband to a private doctor in Durango because of this hostile atmosphere. Several other patients told me that they never have to wait long when they go to a private physician. Thus, it seems probable that the waiting and the unfriendly setting in the outpatient clinic are major reasons that the private doctors are preferred to the PHS Hospital.

Summary

A majority of the Navahos in the Shiprock Service Unit who use the PHS Hospital would prefer to be treated

by the private physicians located just outside the reservation. Yet, of the three types of medical care discussed in this report, the private physicians seem to be the least utilized because of the expense.

Although only one of the patients interviewed indicated the medicine man as his first choice, almost half of the patients believed that the medicine man can help a sick person. This would indicate that the traditional Navaho medicine still plays an important role in the lives of the Navahos in the Shiprock area.

There seem to be several reasons for the preference of the private doctors to the PHS Hospital. The general disgust with the waiting in the outpatient clinic and the unfriendly atmosphere in the hospital is probably a major reason. The greater use of shots by the private physicians seems to be another factor. However, the evidence does not suggest that the private doctors are more respected simply because they charge fees.

It is my opinion that if the PHS would make more of an effort to win the respect of the Navaho people the administration of health care would become much more effective. In order to accomplish this, an attempt should be made to create a friendlier atmosphere in the outpatient clinic. In addition, because most of the Navaho people are forced economically to use the PHS and thus cannot choose their family physician, they should have an opportunity to voice their complaints about the PHS. Indeed, quite to my surprise, most of the people I interviewed seemed to be eager to answer my questions because they felt someone was interested in their opinions.

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