Abstract

This thesis examines the Lumbee Tribe of North Carolina's federal recognition status and its impact on health outcomes and healthcare access. This case study compares the Lumbee's health care access and health outcomes to those of the Eastern Band of Cherokee Indians. Given the poor health outcomes among American Indians, understanding the role of federal recognition, including access to the Indian Health Service, is crucial.

Using a mixed methods approach, interviews with Lumbee members and health assessments from the Cherokee and Robeson County, NC were used to compile findings.

Interviews revealed that the Lumbee are hopefully about the abundance of resources they would be open to with federal recognition, but they don't anticipate immediate or drastic changes.

Findings show that federal recognition could play a role, but it is not the only answer. Federal recognition also gives access to funds that in turn may lead to the ability to opt out of using the Indian Health Service.

Through these findings, conclusions can be made that in order to close these health disparities and health care access for American Indians, in this case the Lumbee, actions will need to go beyond federal recognition. Things such as trust, cultural education, encouragement of members, and other measures will need to be done. Access to federal recognition may provide grants and funds that can help address these root causes, but it is not the exclusive solution.