



Haliwa Saponi Pow WOW 2018



➤ <https://m.facebook.com/100021881361345/posts/240627760009934/>



NIHB

2021 National Tribal Health Summit

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California Rural Indian Health Board

Session Goals

- Native Country and IPV
- Pandemic Changes/Challenges
- New World
- Closing Questions/Comments





Intimate Partner Violence

- We define Intimate Partner Violence as a pattern of abusive behavior in any relationship that is used by one partner to gain or maintain power and control over another intimate partner.

But what is Intimate Partner Violence???

Intimate Partner Violence can be physical, sexual, emotional, financial, or spiritual actions or threats of actions that influence another person.

-Verbal abuse is often classified under emotional abuse.

IPV Affects the whole Native Community





Violence Against American Indian and Alaska Native Women

- ▶ **More than 4 in 5 American Indian and Alaska Native women (84.3%) have experienced violence in their lifetime, including:**
 - 56.1% who have experienced sexual violence
 - 55.5% who have experienced physical violence by an intimate partner
 - 48.4% who have experienced stalking
 - 66.4% who have experienced psychological aggression by an intimate partner (NIJ, 2016).

Violence Against Native Women



34%
of American Indian and
Alaska Native women will
be raped in their lifetimes



67%
of sexual abuse related
matters were declined
prosecution by the USAO



AMERICA


TONIGHT

TUES - FRI | 10P ET/ 7P PT

[#NativeLivesMatter](#)

Sources: NCAI Policy Research Center, 2013; United States Government Accountability Office, 2013





Native People Experiencing Violence by Sexual Orientation

- ▶ Lifetime prevalence of rape, physical violence, or stalking by an intimate partner
 - ▶ Lesbians 43.8%,
 - ▶ Bisexual women 61.1%
 - ▶ Heterosexual women 35%
 - ▶ Gay men 26%
 - ▶ Bisexual men 37.3%
 - ▶ Heterosexual men 29%

Source: Center for Disease Control, (2010). National Intimate Partner and Sexual Violence Survey



National Intimate Partner Violence

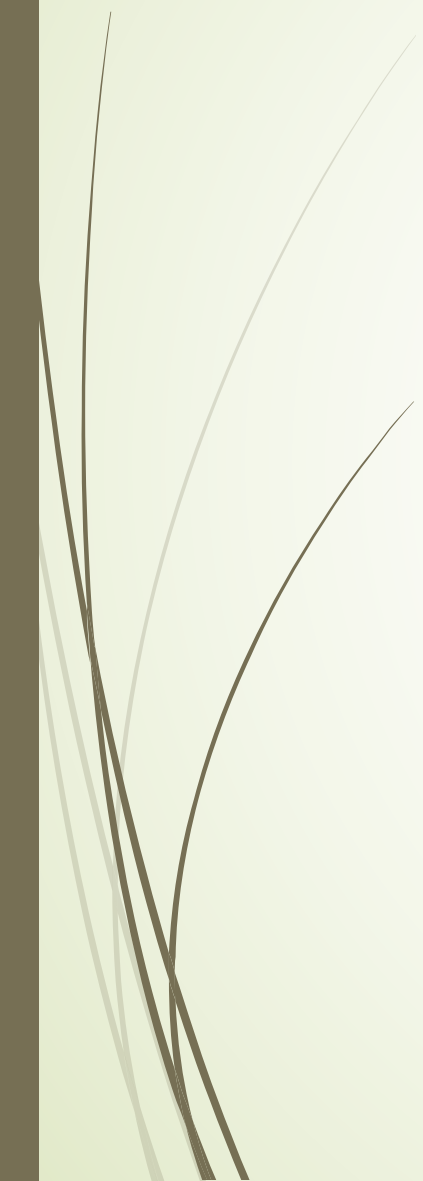
- Nearly half of IPV homicide victims were gay men
- Transgender people, people of color, gay men and people under 30 most impacted by IPV
- Few LGBTQ IPV survivors access vital services including police, shelter access and orders of protection
- Transgender survivors were 2x as likely to face threats/intimidation within violent relationships, and nearly 2x times more likely to experience harassment within violent relationships

Source: National Coalition of Anti-Violence Programs, (2015). Report on Intimate Partner Violence in Lesbian, Gay, Bisexual, Transgender, Queer and HIV-Affected Communities in the U.S.





Covid – 19 and Abuse

- ▶ There is a concern that the numbers experiencing intimate partner violence will dramatically rise as a result of social distancing and quarantine during COVID-19. Before the pandemic, a survivor or victim could flee a violent situation or file a protective order with the police. For many, such options aren't easily available right now. A stay-at-home order can force victims to stay in a dangerous situation.
- 

- Sheltering in place has been essential to flatten the curve of the COVID-19 outbreak, but it poses a unique and hourly increasing risk for those who are forced inside with their abuser



[Froimson, Jill R](#); [Bryan, Darren S](#); [Bryan, Ava Ferguson](#); [Zakrisson, Tanya L](#). **[American Journal of Public Health](#)**; **Washington** [Vol. 110, Iss. 7](#), (Jul 2020): 960-961. DOI:10.2105/AJPH.2020.305725

- ▶ Containment policies may lead to higher rates of domestic violence, substance abuse, anxiety, major depression, suicide, and other manifestations of unmet mental health needs. Job losses and financial insecurity may tip at-risk relationships into violence.




Domestic violence amid COVID-19

[Ashri Anurudran](#) , [Leah Yared](#) , [Cameron Comrie](#) , [Katherine Harrison](#) , [Thomas Burke](#)

First published: 30 May 2020

<https://doi.org/10.1002/ijgo.13247>

- 
- ▶ The United States National Domestic Violence Hotline recently reported that many callers have indicated that their abusers are capitalizing on precautions related to COVID-19 to further restrict their access to support networks.

Domestic Violence

National Domestic Violence Hotline
800.799.SAFE (7233)

National Sexual Assault Hotline
800.656.4673

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- ▶ Since local crises increase the prevalence of interpersonal violence in affected communities, it is likely the COVID-19 pandemic is exposing countless individuals to circumstances with high risk for violence.



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- ▶ Quarantine conditions are associated with alcohol abuse, depression, and post-traumatic stress symptoms. Stay-at-home orders may cause a catastrophic milieu for individuals whose lives are plagued by domestic violence (DV)



- ▶ This cursory analysis illustrates that stay-at-home orders may create a worst-case scenario for individuals suffering from DV and demonstrates a need for further research



Alarming trends in US domestic violence during the COVID-19 pandemic

[Brad Boserup](#)

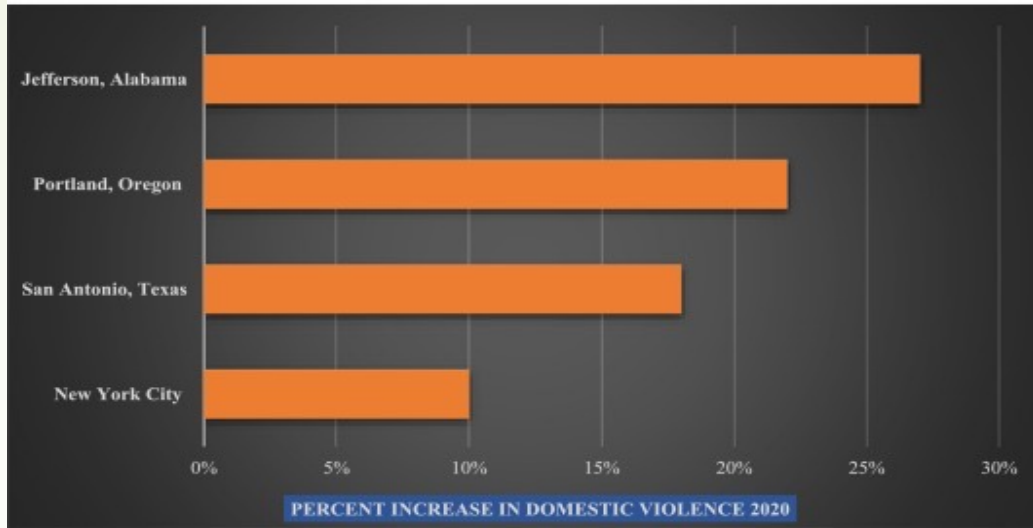
[Mark McKenney, MD, MBA](#)

[Adel Elkbuli, MD, MPH](#)

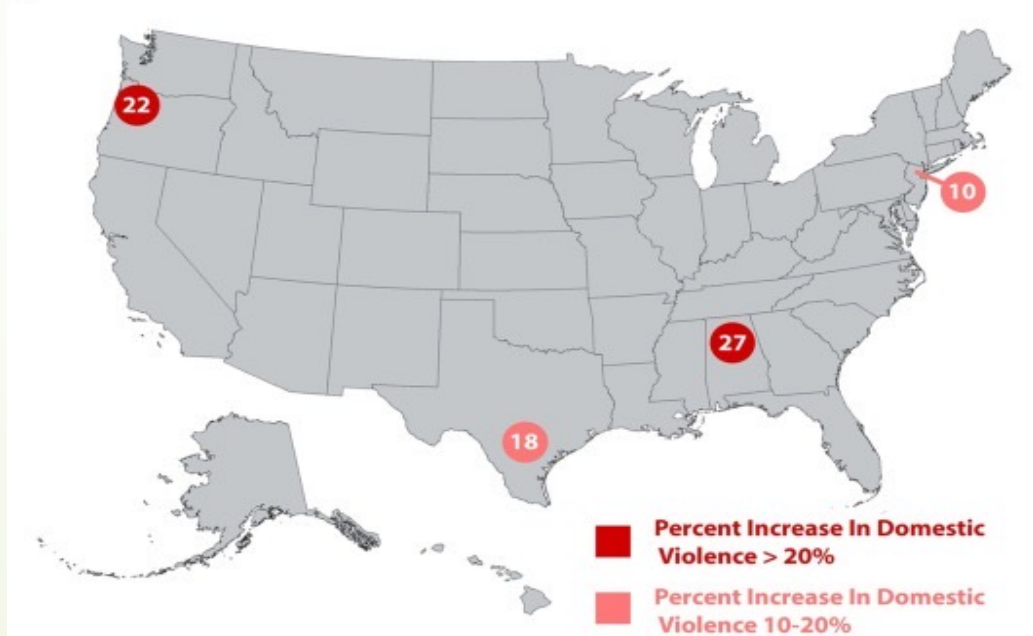
Published: April 28, 2020 DOI: <https://doi.org/10.1016/j.ajem.2020.04.077>



A



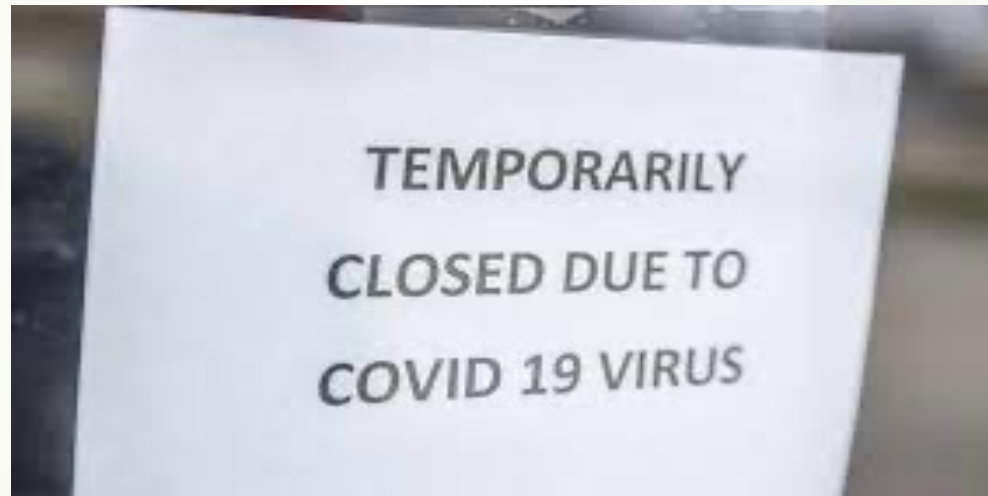
B



- After the first month of stay-at-home orders, nine major metropolitan cities reported approximately between 20% and 30% increases in DV service calls with some regions as high as 62%.



- Observed upturns in DV may stem in part from existing social and systemic issues that can be exacerbated by disaster-related stress and strain, economic downturn, displacement, and uncertainty



- ▶ However, it also presents a unique and distressing paradox for victims. If they decide or are forced by their partner to stay home, they risk the danger of enduring or escalating violence. If they are able to leave, they risk exposure to a highly infectious, dangerous virus.



- Major themes related to the impact of the COVID-19 pandemic for those with safety concerns included challenges with health and work, stress from economic instability and job loss, difficulties staying safe during the period of stay-at-home orders and physical distancing, and resource and support needs.



- Restricted economic resources, unemployment, and high stress levels all correlate with an increase in both the incidence and the severity of IPV.



[Froimson, Jill R;](#) [Bryan, Darren S;](#) [Bryan, Ava Ferguson;](#) [Zakrisson, Tanya L.](#) **[American Journal of Public Health; Washington](#)** [Vol. 110, Iss. 7,](#) (Jul 2020): 960-961. DOI:10.2105/AJPH.2020.305725

- Some IPV hotlines have, in fact, seen a decrease in their call volumes because victims are having a difficult time accessing this important mechanism of support when they are confined to the home with their abuser.



[Froimson, Jill R](#); [Bryan, Darren S](#); [Bryan, Ava Ferguson](#); [Zakrison, Tanya L](#). **[American Journal of Public Health; Washington](#)** Vol. 110, Iss. 7, (Jul 2020): 960-961. DOI:10.2105/AJPH.2020.305725

- Children are specifically vulnerable to abuse during COVID-19. Research shows that increased stress levels among parents is often a major predictor of physical abuse and neglect of children. Stressed parents may be more likely to respond to their children's anxious behaviors or demands in aggressive or abusive ways.



- The support systems that many at-risk parents rely on, such as extended family, childcare and schools, religious groups and other community organizations, are no longer available in many areas due to the stay-at-home orders. Child protection agencies are experiencing strained resources with fewer workers available, making them unable to conduct home visits in areas with stay-at-home orders.



- Since children are not going to school, teachers and school counselors are unable to witness the signs of abuse and report to the proper authorities. Also, many at-risk families may not have access to the technology children needed to stay connected with friends and extended family





IPV and Treatment during the Pandemic

- In the absence of effective strategies and resources, we may expect to see an increase in hospitalizations and possibly fatalities as a direct result of exacerbated IPV during the COVID-19 pandemic.



Froimson, Jill R; Bryan, Darren S; Bryan, Ava Ferguson; Zakrison, Tanya L. **American Journal of Public Health; Washington** Vol. 110, Iss. 7, (Jul 2020): 960-961. DOI:10.2105/AJPH.2020.305725

- ▶ When conducting telehealth visits, a health care provider needs to gauge if the patient is in a private space or is within earshot of others. That's important not just for intimate partner violence screening, but also for asking about health concerns in general.

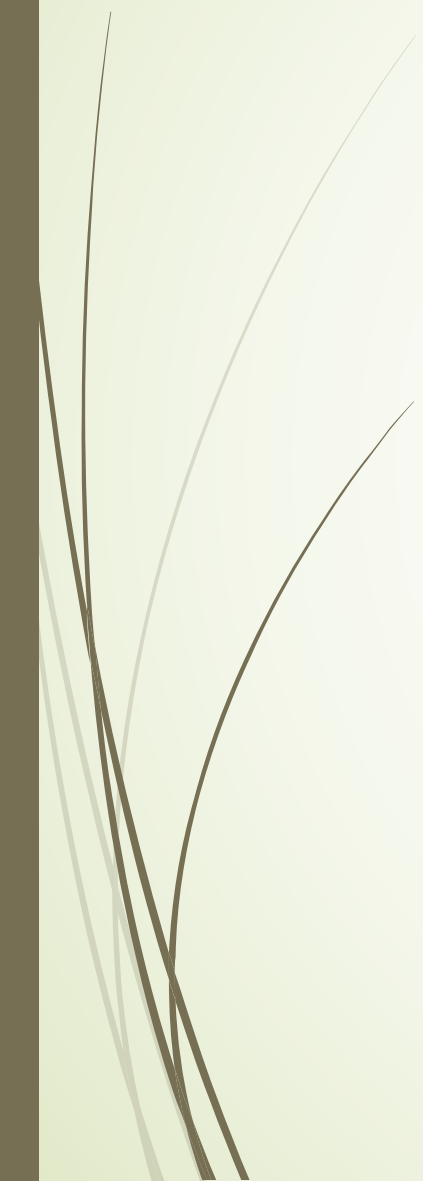


- ▀ Providers can watch for nonverbal signs such as bruises, and changes in behavior such as substance use or requests for testing — which could be an opportunity for the patient to be privately evaluated in the clinic without explicitly asking for that — when assessing patients virtually and in-person. Offering patients appropriate in-person visits to the clinic or hospital for follow-up may facilitate a more private conversation or discussion about intimate partner violence and safety.





Physical Signs

- 
- Black eyes
 - Bruises on the arms
 - Busted lips
 - Red or purple marks on the neck
 - Sprained wrists



Emotional Signs



- Agitation, anxiety, or constant apprehension
- Changes in sleep habits (sleeping too much or not enough)
- Developing a drug and alcohol problem
- Extremely apologetic or meek
- Loss of interest in daily activities
- Low self-esteem
- Seeming fearful
- Symptoms of depression
- Talking about or attempting suicide



Behavior Changes



- Becomes reserved and distant
- Begins isolating themselves by cutting off contacts with friends and family members
- Cancel's appointments or meetings with you at the last minute
- Drops out of activities they would usually enjoy
- Exhibits excessive privacy concerning their personal life or the person with whom they're in a relationship
- Is often late to work or other appointments

SAFE Screening

- The SAFE Questions
- Stress/Safety—"Do you feel safe in your relationship?"
- Afraid/Abused—"Have you ever been in a relationship where you were threatened, hurt or afraid?"
- Friends/Family—"Are your friends or family aware that you have been hurt? Could you tell them, and would they be able to give you support?"
- Emergency Plan —"Do you have a safe place to go and the resources you need in an emergency?"
- "The One Question"
- "At any time, has a partner (or someone) hit, kicked, or otherwise hurt or threatened you?"

Beyond Covid-19

- Major themes related to the impact of the COVID-19 pandemic for those with safety concerns included challenges with health and work, stress from economic instability and job loss, difficulties staying safe during the period of stay-at-home orders and physical distancing, and resource and support needs.

- ▶ COVID-19 testing sites could partner with domestic violence response organizations to incorporate screenings for domestic violence. Stakeholders can integrate discrete reporting platforms into grocery stores or other essential public spaces.



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- ▶ A critical component to providing support and services to survivors is developing a safety plan, a personalized plan to address immediate, specific risks faced by survivors of violence, with the aim of reducing the extent and impact of violence and abuse going forward.



“Don’t Know where to Go for Help”: Safety and Economic Needs among Violence Survivors during the COVID-19 Pandemic [Leila Wood](#), [Elizabeth Bauml](#), [Rachel Voth Schrag](#), [Shannon Guillot-Wright](#), [Dixie Hairston](#), [Jeff Temple](#) & [Elizabeth Torres](#) *Journal of Family Violence* (2021)

- ▶ Safety plans have been demonstrated to enhance survivors' sense of safety and well-being, as well as increase the number of safety-related behaviors survivors perform over time, leading to reduced harm from violence and enhanced wellbeing.



"Don't Know where to Go for Help": Safety and Economic Needs among Violence Survivors during the COVID-19 Pandemic

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[Journal of Family Violence](#) (2021)



- The formal and informal community response to interpersonal violence during and after the COVID-19 pandemic, like IPV and sexual assault, needs to be accelerated and improved to accommodate a variety of survivor safety and resources needs among a shifting landscape. Resource and service enhancements will have benefit long after the COVID-19 pandemic has ended, improving community health and safety.



“Don’t Know where to Go for Help”: Safety and Economic Needs among Violence Survivors during the COVID-19 Pandemic

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Tribal Interventions

- Mending the Sacred Hoop
- IPV response teams
- Duluth Model
- Strong Hearted Native Women
- Social Media





Tips for Native Communities



- Community Tip #1: Know the signs.
- Community Tip #2: Get your community educated!
- Community Tip #3: Get your community organized!
- Community Tip #4: Boost your community support network with technology!
- Community Tip #5: Stopping the violence is good for business.
- Education and commitment to change are crucial for family and community change.

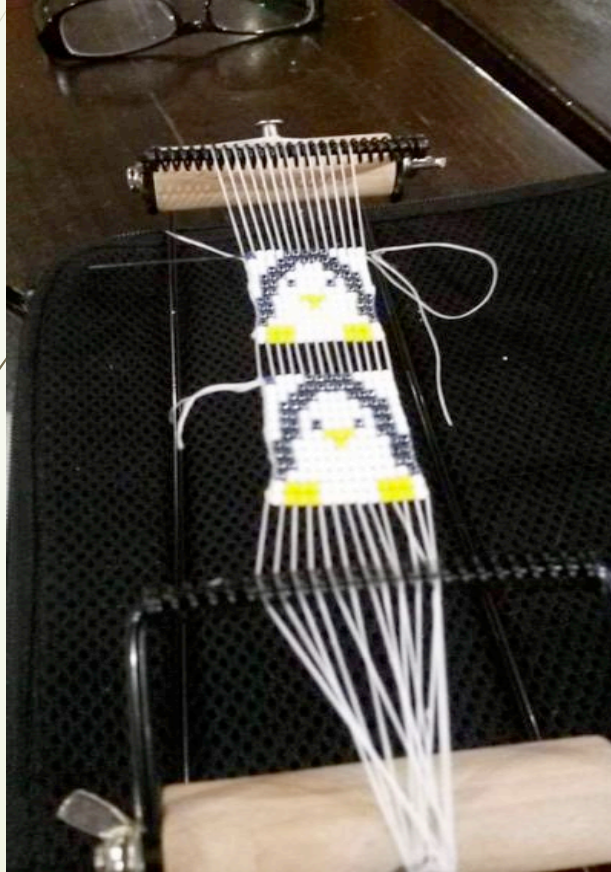
Tribal Program Engagement

- ▶ Place's victim/survivor safety as the top priority.
- ▶ Listens to the voices of victim/survivors and victim advocacy organizations.
- ▶ Work to counteract the negative effects of both intentional and unwitting collusion.
- ▶ Enlists feedback from the community on the impact of the DV Program.

Intertribal Interventions for Healing



Culturally Specific Interventions



Interventions/Supports for Survivors

- Referrals
- Advocacy services
- Survivor's support group
- Shelter
- Case management
- Legal assistance
- Restraining order
- Child custody
- Financial assistance
- TANF
- Food services
- Food banks
- Food stamps
- WIC

- Development of cellular phone applications or other non-telephone mediated methods of reaching IPV hotlines is well within the reach of current technology and urgently demanded by shelter-in-place restrictions
- This powerful technology could potentially provide a wealth of information and resources available in a concealed format, usable in front of the abuser.



[Froimson, Jill R; Bryan, Darren S; Bryan, Ava Ferguson; Zakrison, Tanya L. American Journal of Public Health; Washington Vol. 110, Iss. 7, \(Jul 2020\): 960-961. DOI:10.2105/AJPH.2020.305725](#)

VICTIM SERVICES SELF HELP MOBILE APPLICATION

App Introduction



The NCTCC APP is a virtual tool equipped with tribal resources for those seeking support in the areas of:

Tribal Justice Resources

Resources for these tribes: Bear River, Big Lagoon, Blue Lake, Elk Valley, Hoopa, Karuk, Quartz Valley, Resighini Rancheria, Trinidad, Tolowa Dee-ni', Wiyot, & Yurok

Safety

Interactive printable safety plans, how to recognize human trafficking and elder abuse, safety tips for cyber space, mobile devices and for victims of stalking/harassment.

Self Care

Historic trauma and trauma-informed services, experiencing imbalance, ways of restoring balance, approaches to self care

California and National Resources

California Counties: Del Norte, Humboldt, Siskiyou, and Trinity. Oregon Counties: Curry County. National, includes resources for vulnerable populations.

My Rights

Glossary of Terms, Description of victims rights, the extent of victim rights, how victims exercise and enforce rights.

Criminal Justice System

Reporting, investigating, arrest, release, bail, arraignment, plea bargain, trial, acquittal, conviction, sentencing.



To learn more download the app at www.nctcc.org/nctcc-app

Or contact: Sarah Caligiuri scaligiuri@nctcc.org



We are NOT Alone!

Domestic Violence Resources

- **Strong Hearts Native Helpline** – Mon-Fri 7:00am – 3:30pm 1-844-7NATIVE or (1-844-762-8483)
- **National Domestic Violence Hotline** – 1-800-799-7233
- **Mending the Sacred Hoop** – End Native American Domestic Violence - <https://mshoop.org>
- **Inter-Tribal Council of California** – Victims Services Resources page - <http://www.itccinc.org/victimservices.html>



➤ **Thank You for Your
Time!!**

➤ If you have further
questions, please
contact:

- **RAIN MCNEILL, ASW, CDVA**
 - *DV Project Coordinator*
- CRIHB Research and Public Health Department
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Safe Travels!!

