



IHS National Domestic Violence Prevention Program: Curbing the Impact of Violence in Tribal Communities

August 28, 2019

Presenter



Selina Keryte, MPH - is an enrolled member of the Navajo Nation from Tse Yah Toh, NM and she is the National Domestic Violence Prevention Program Lead for the Division of Behavioral Health (DBH) at the IHS Headquarters. Prior to DBH, she worked at the Division of Epidemiology & Disease Prevention as a Public Health Advisor for the Office of Public Health Support. She is a graduate of the University of New Mexico School within the School of Medicine's Public Health program.

Overview of the Presentation

- **Part I:** Public health data on violence among AI/AN population.
- **Part II:** Overview of the National DVPP Program
- **Part III:** Review results from Year 3 National DVPP Outcomes, 2017-2018.

Domestic Violence is a Public Health Problem

Violence in the form sexual violence, stalking, and intimate partner violence continues to be a major public health problem among AI/AN populations.

- **Cost: lost work days, healthcare expenses, and lives**

National Center of Injury Prevention. (2003). Costs of Intimate Partner Violence Against Women in the United States. Retrieved from <https://www.cdc.gov/violenceprevention/pdf/ipvbook-a.pdf>

- **Outcomes of Adverse Childhood Events**

Centers for Disease Control and Prevention. (2016). About the CDC-Kaiser ACE study: Major findings. Retrieved from <https://www.cdc.gov/violenceprevention/acestudy/about.html>.

- **Unplanned pregnancy and teenage dating violence**

Miller, E., Levenson, R., Jordan, B., & Silverman, J.G. (2010). Reproductive coercion: Connecting the dots between partner violence and unintended pregnancy. *Contraception*, 81(6):457-9

2010 Findings from the National Intimate Partner and Sexual Violence for Women

Lifetime Estimate	AI/ANs	Non-Hispanic White Only
Any Sexual Violence	56.1%	49.7%
Physical Violence by Intimate Partners	55.5%	34.5%
Stalking	48.8%	26.8%
Psychological Aggression	66.4%	52.0%

Rosay, A. B. (2016). Violence Against American Indian and Alaska Native Women and Men: 2010 Findings From the National Intimate Partner and Sexual Violence Survey Washington, DC: U.S. Department of Justice: Office of Justice Programs.

2010 Findings from the National Intimate Partner and Sexual Violence for Men

Lifetime Estimate	AI/ANs	Non-Hispanic White Only
Any Sexual Violence	27.5%	20.9%
Physical Violence by Intimate Partners	43.2%	30.5%
Stalking	18.6%	13.4%
Psychological Aggression	73.0%	52.7%

Rosay, A. B. (2016). Violence Against American Indian and Alaska Native Women and Men: 2010 Findings From the National Intimate Partner and Sexual Violence Survey Washington, DC: U.S. Department of Justice: Office of Justice Programs.



Part II: Overview of the National DVPP Program

DVPP History

- In 2010, the IHS began the DVPP as a pilot demonstration project.
 - IHS awarded 65 DVPP projects.
 - Tribal, Federal, and Urban Indian Organizations (UIOs).
- In 2015, the DVPP became a grant and federal award program (Tribes, tribal organizations, UIOs and IHS federal facilities.)
 - IHS awarded 57 DVPP grants and federal program awards with a five-year funding cycle.
- 2017 New Awards
 - IHS awarded 26 DVPP grants and federal program awards with a three-year funding cycle.
 - To date, there is a total of 83 DVPP projects.

Awarded Projects: DVPP

- 2015 awards = 57
 - Funds awarded = approximately \$7.6 Million
 - 2017 new awards = 26
 - Funds awarded = approximately \$3.6 Million
-
- Total Projects: 83
 - Total Funds Awarded: \$11.2 Million

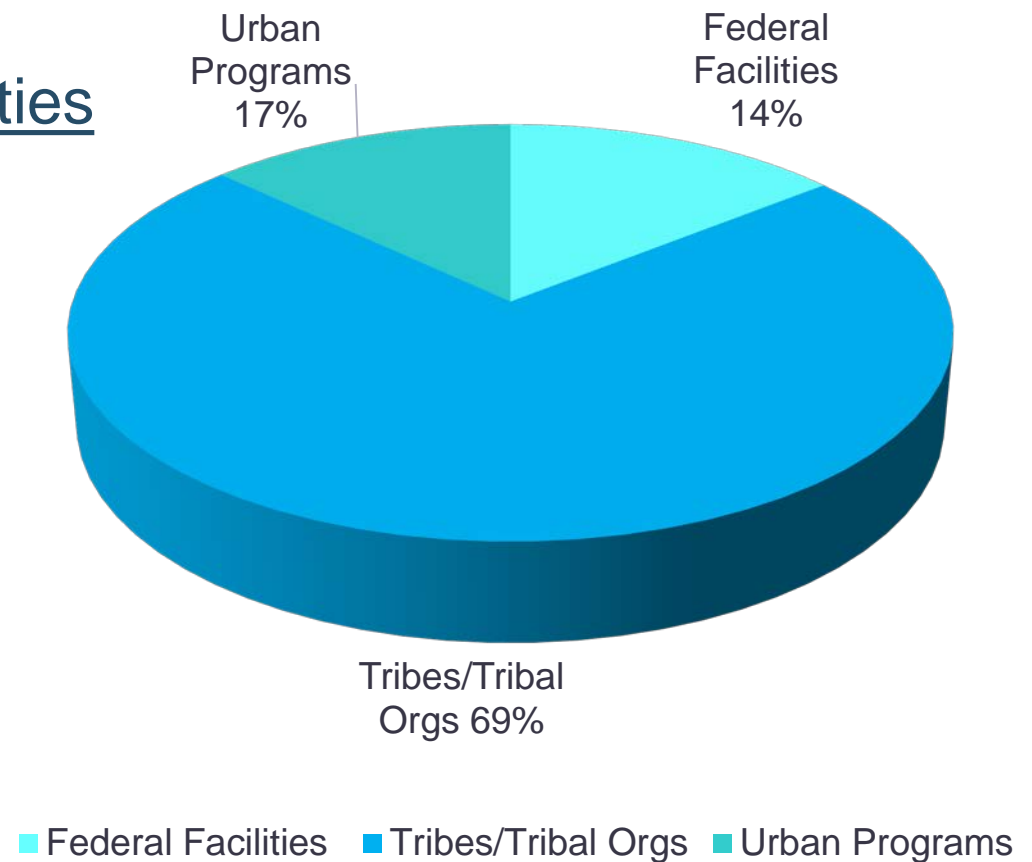
Recipient of DVPP Projects

56 Tribes/Tribal Orgs

14 UIOs

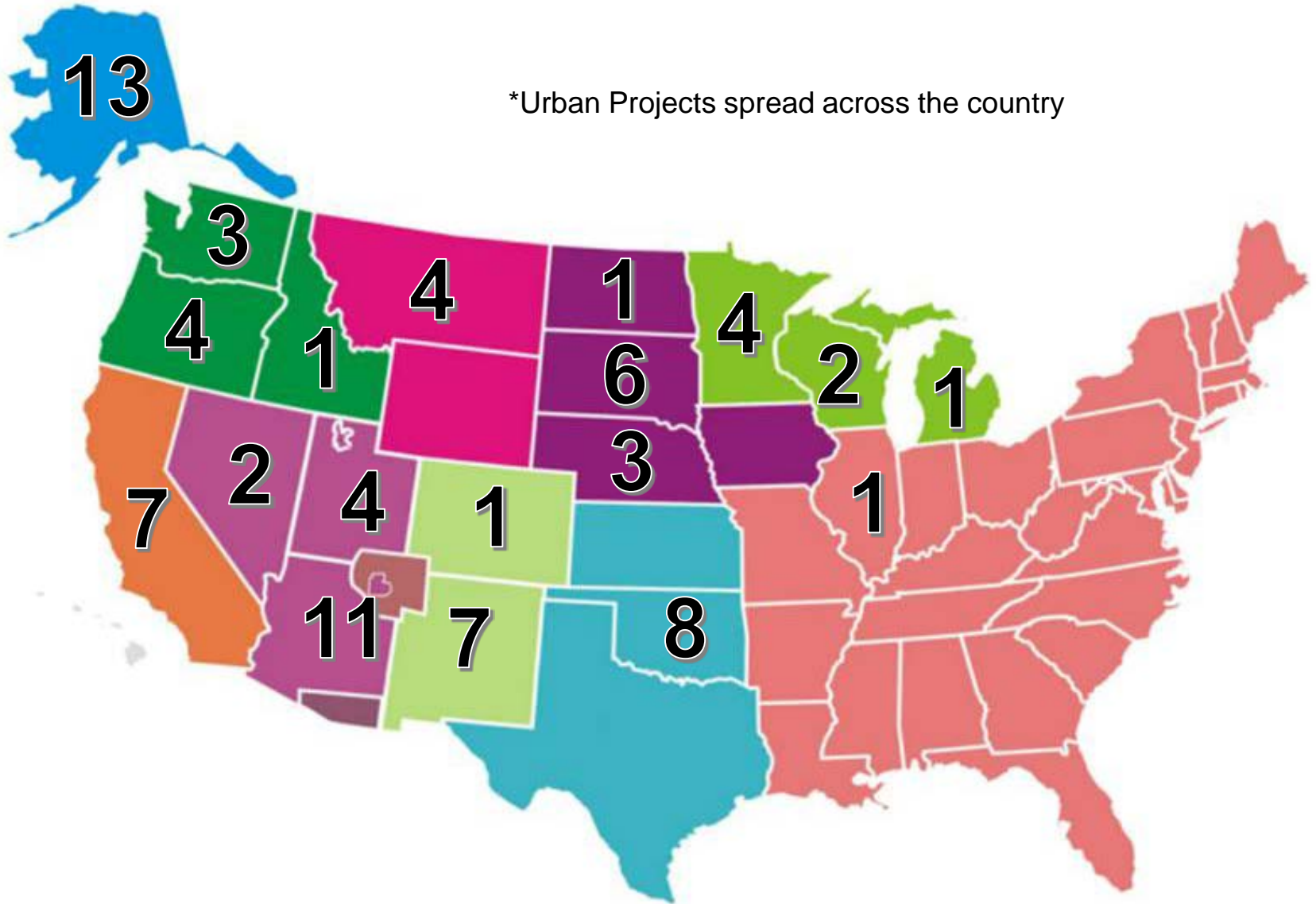
13 IHS Federal Facilities

83 Total



Goal 3: Management Operation

DVPP State Distribution



*Urban Projects spread across the country

DVPP Goals

1. Build tribal, UIO, and federal capacity to provide coordinated community responses to AI/AN victims of domestic and sexual violence.
2. Increase access to domestic and sexual violence prevention, advocacy, crisis intervention, and behavioral health services for AI/AN victims and their families.
3. Promote trauma-informed services for AI/AN victims of domestic and sexual violence and their families.
4. Offer health care provider and community education on domestic violence and sexual violence.
5. Respond to the health care needs of AI/AN victims of domestic and sexual violence, and
6. Incorporate culturally appropriate practices and/or faith-based services for AI/AN victims of domestic and sexual violence.

Goal 1: Access, Goal 2: Quality, Goal 3: Mgmt Operation

Purpose Areas

- To meet the national goals, DVPP has two purpose areas:
 - 1) Purpose Area 1:
 - Domestic and Sexual Violence Prevention, Advocacy, and Coordinated Community Responses.
 - 8 Objectives
 - 2) Purpose Area 2:
 - Provide Forensic Healthcare Services.
 - 8 Objectives

Staff and Partners

- 10 Area project Officers
 - **Area Offices:** Alaska, Albuquerque, Bemidji, and Phoenix
 - **Regional (IHS Area):** California, Billings, Great Plains, Nashville, Navajo, Oklahoma, Portland, Tucson
 - **IHS HQ:** Urban
- National Forensic Nurse Coordinator
 - Forensic Healthcare, Adolescent/Adult/Pediatric Sexual Assault
 - Child Maltreatment, IPV, Elder Abuse, Human Trafficking
- Partners:
 - Technical Assistance Providers, Tribal Epidemiology Centers
 - Provide technical assistance on evaluation

Resources

To assist with strengthening grantees and awardees capacity.

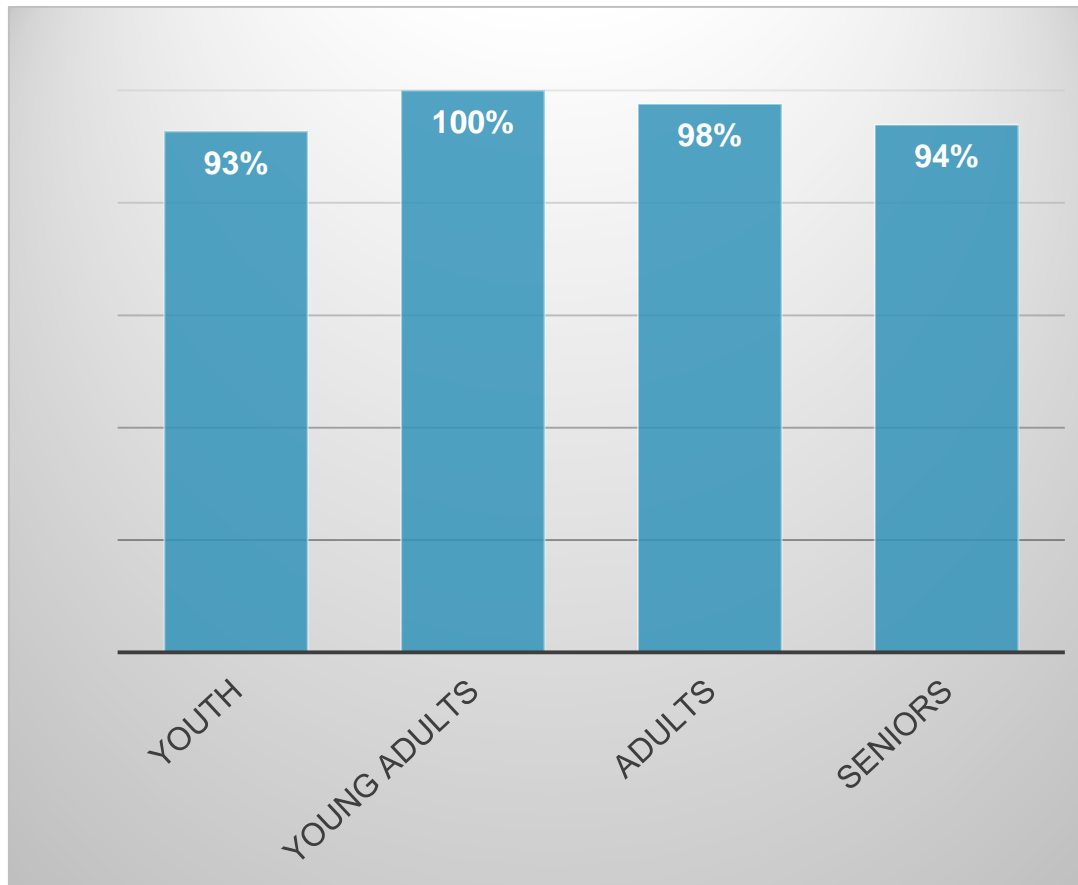
- Indian Health Manual
 - https://www.ihs.gov/ihm/index.cfm?module=dsp_ihm_pc_p5c27
 - Part 3
 - Chapter 29 – Sexual Assault
 - Chapter 31 – Intimate Partner Violence
 - Chapter 36 – Child Maltreatment soon to be released
 - Part 5
 - Chapter 27 – Responding to Requests for IHS Employee's Testimony or IHS Documents in Proceedings where the United States is not a Party.



Part III: Review results from Year 3 National DVPP Outcomes, 2017-2018

All Purpose Areas | Description

Target Populations Served by DVPP Projects, 2017-2018*



TARGET POPULATION DEFINITIONS

Youth (age 12-17)

Young Adults (age 18-24)

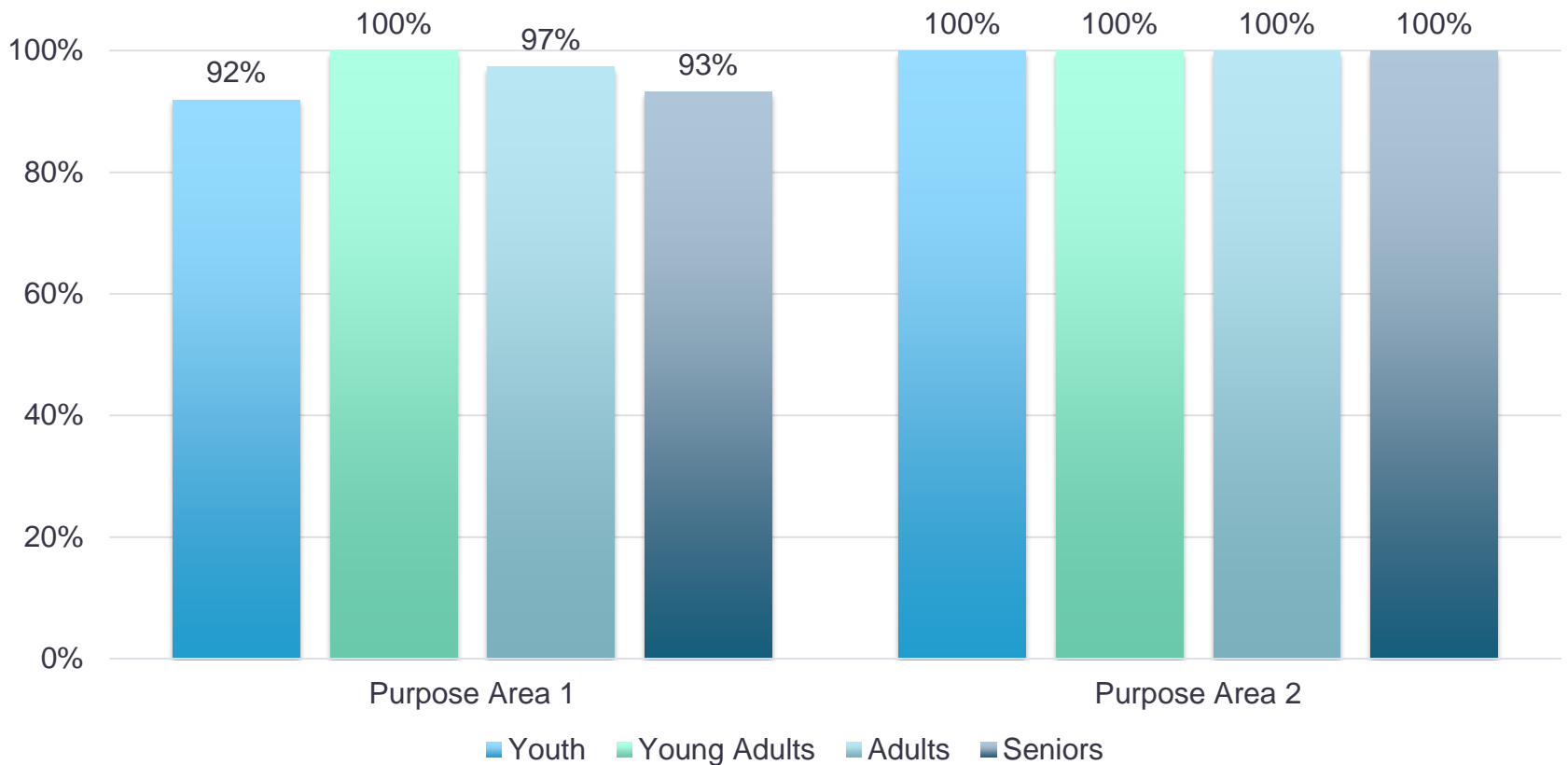
Adults (age 25-54)

Seniors (age 55+)

**Projects were able to select multiple target populations*

All Purpose Areas | Population Served

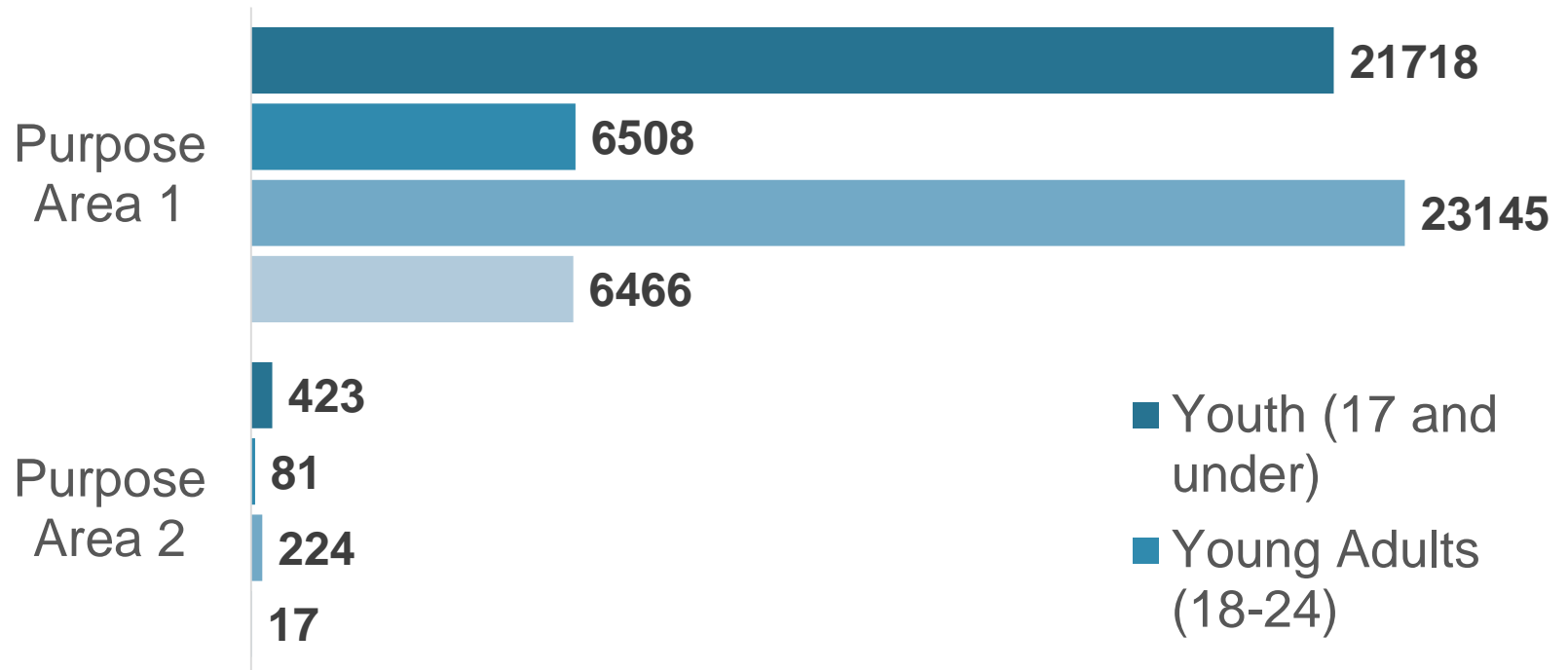
Number of DVPP Projects Serving Various Age Groups by Purpose Area, 2017-2018*



*Projects were able to select multiple target populations

All Purpose Areas | Population Served

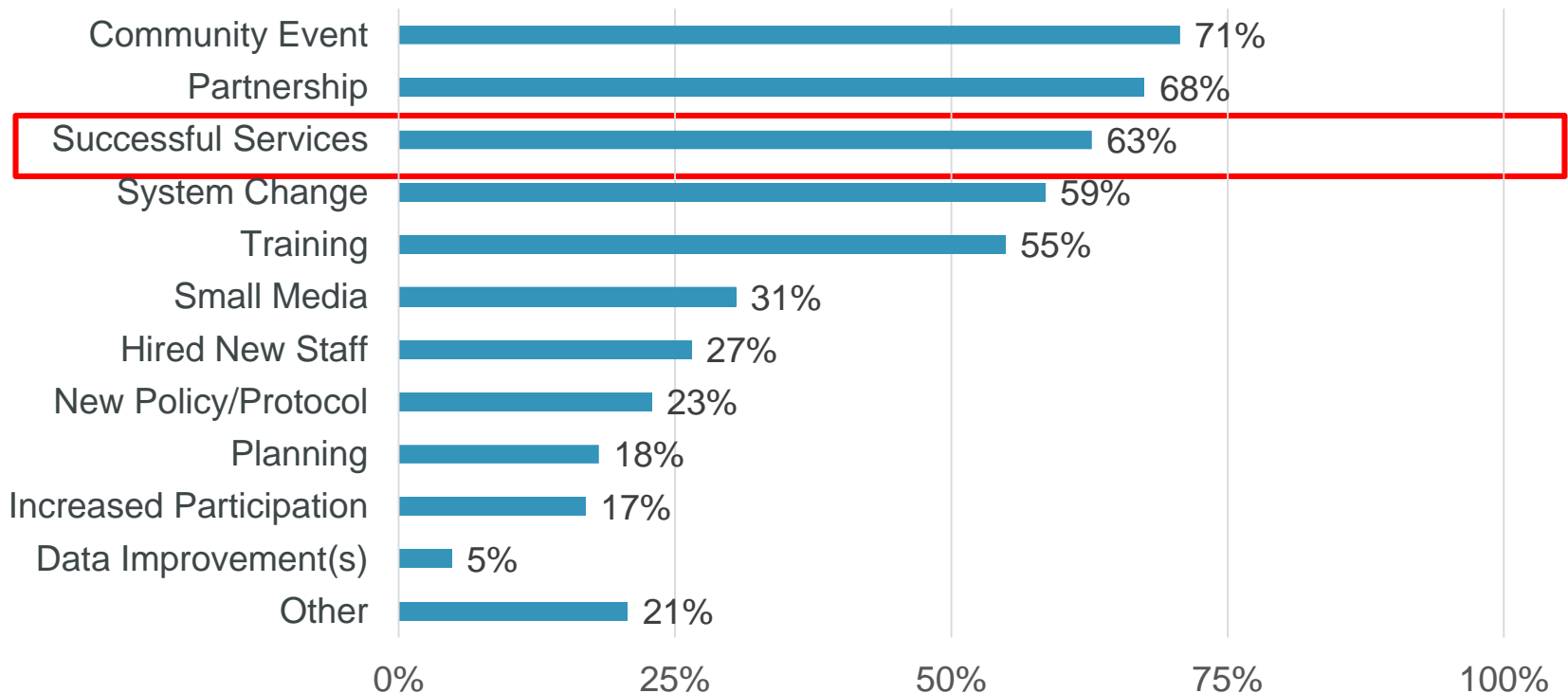
Number of DVPP Participant Contacts Served in Each Age Category by Purpose Area, 2017-2018



All Purpose Areas | Accomplishments

Types of Accomplishments Reported among DVPP Projects, 2017-2018

Note: These data were gathered through project narratives. There were no limits on the number or type of accomplishments that each project could report.

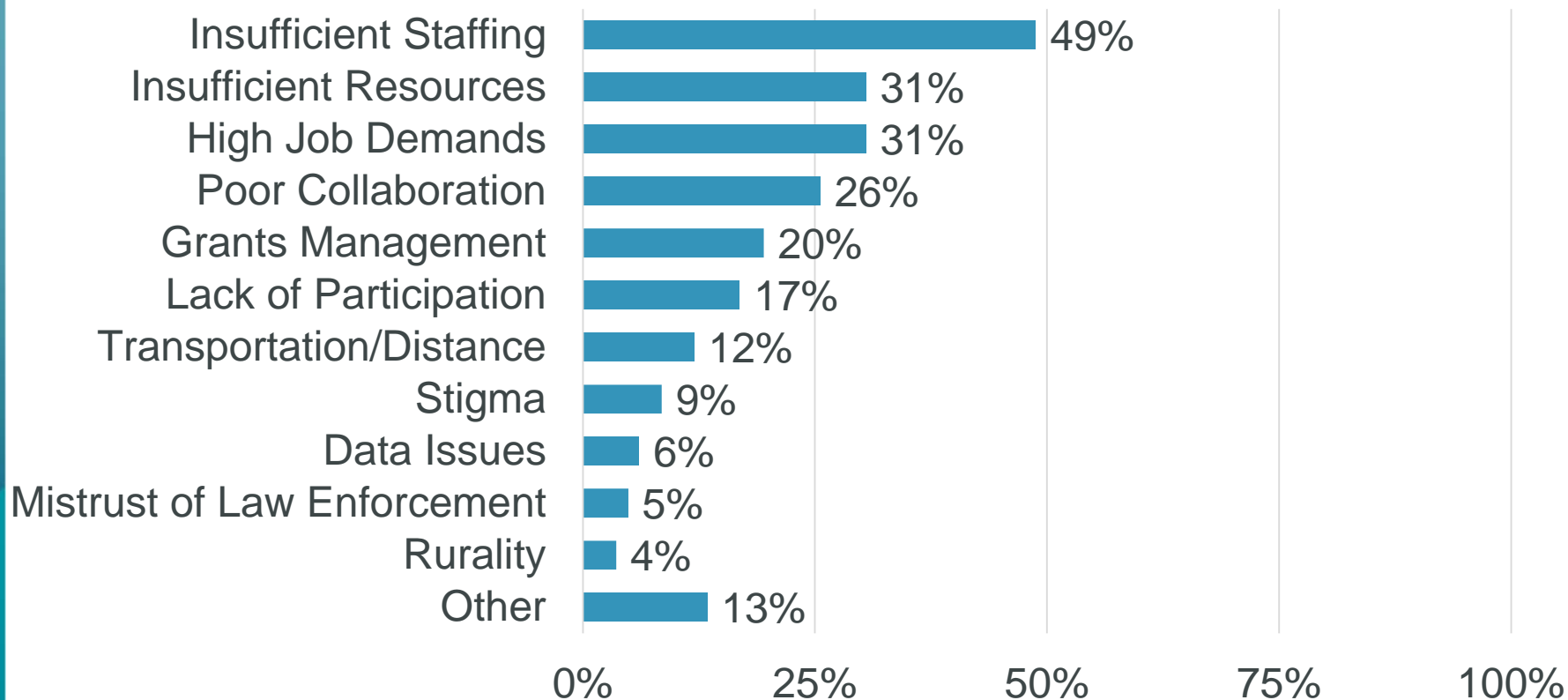


“Other Accomplishments” included: community outreach; formed project advisory team; increased community awareness of program; completed community needs assessment; enhanced collaboration; increased number of partnership meetings; purchased all necessary supplies.

All Purpose Areas | Challenges

Types of Challenges Reported among DVPP Projects, 2017-2018

Note: These data were gathered through project narratives. There were no limits on the number or type of challenges that each project could report.



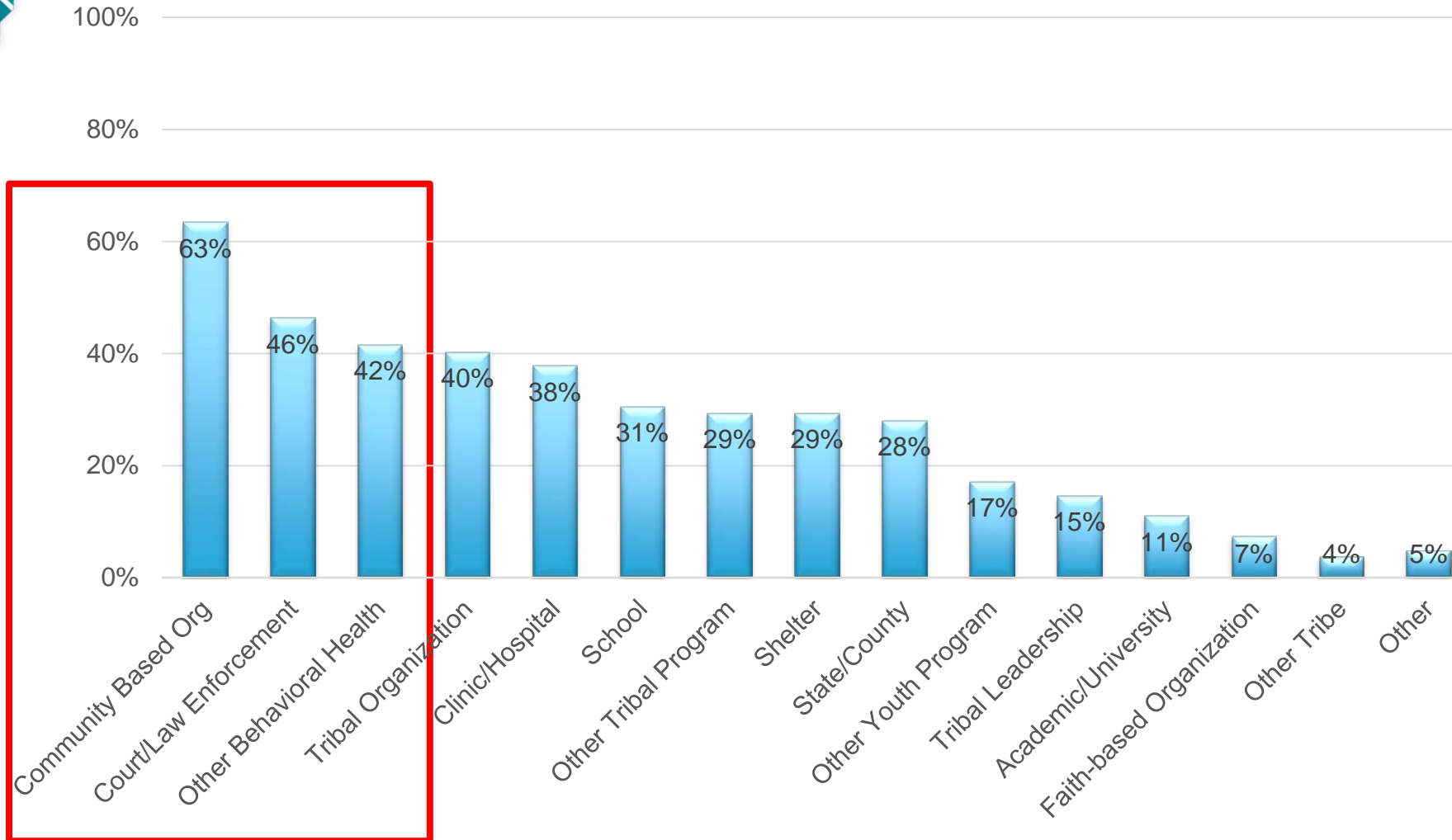
“Other challenges” included: scheduling conflicts with traditional calendar; lack of participant records; lack of support for policy change; multi-generational trauma; insufficient tribal policy; not enough time to complete program activities; socioeconomic challenges.

All Purpose Areas | Partners

Number of New and Enhanced Memoranda of Agreement (MOAs) Reported among DVPI Projects, 2017-2018

	N
Total New Memoranda of Agreement (MOAs)	57
Total Enhanced Memoranda of Agreement (MOAs)	78

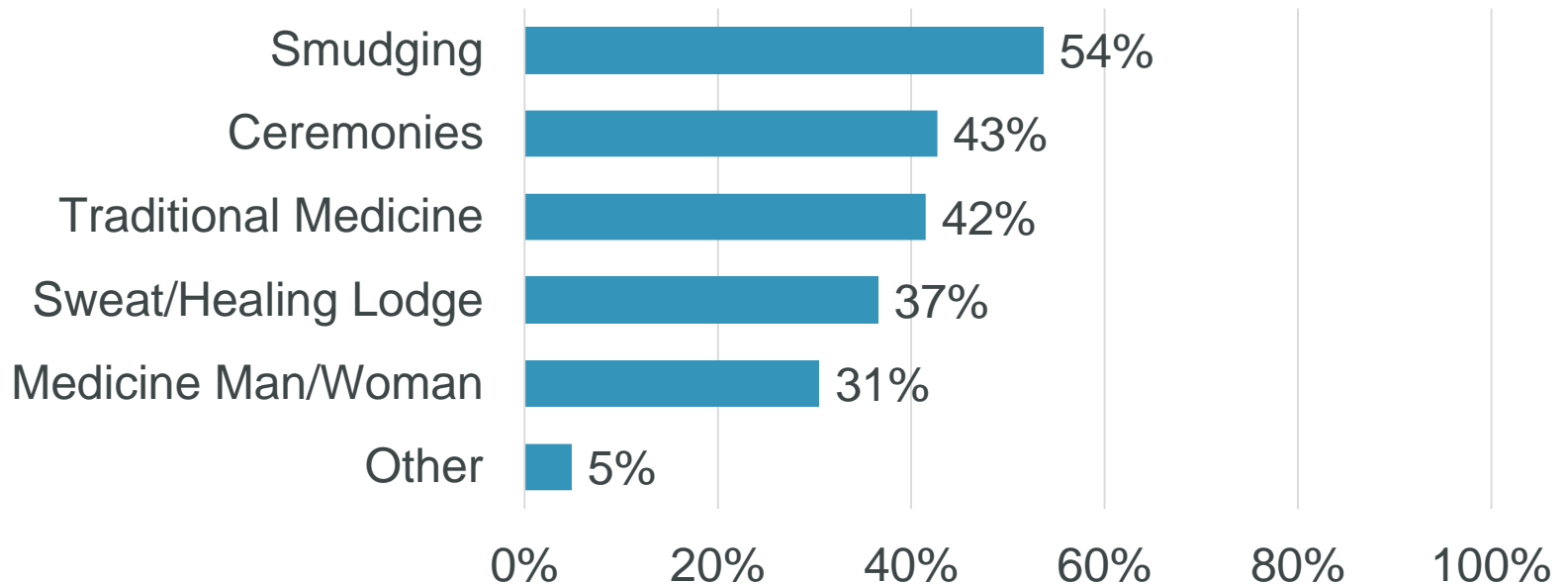
DVPI | Common Partner Types



All Purpose Areas | Traditional Healing

Percentage of DVPP Projects Integrating Traditional Healing into Project Services by Practice Type, 2017-2018

Note: Projects were able to select multiple types

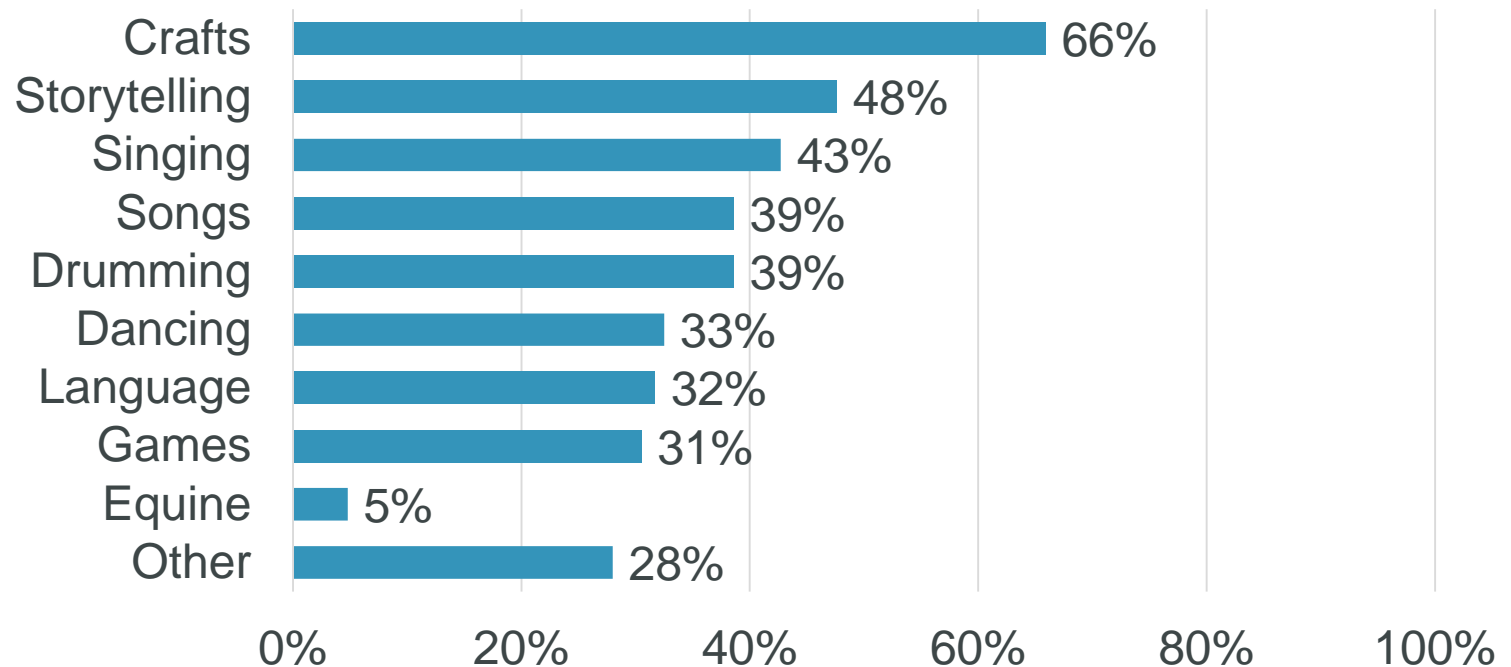


“Other” included: Meetings with Culture Program staff; referral to other programs; canoe journeys; talking circles; songs; prayers; Mind Body Medicine; diagnostic services; experiential education; open to all practices needed by clients.

All Purpose Areas | Cultural Practices

Percentage of DVPI Projects Integrating Cultural Services into Project Services by Practice Type, 2017-2018

Note: Projects were able to select multiple types



“**Other**” included: Talking circles; Native Stand curriculum; harvesting wild plants; Women’s Gatherings; provision of victim advocate; referred to providers; ceremonies; community healing projects; Mothers of Tradition; GONA; Positive Indian Parenting; traditional medicines; indigenous foods; cultural family nights.

All Purpose Areas | Cultural Practices

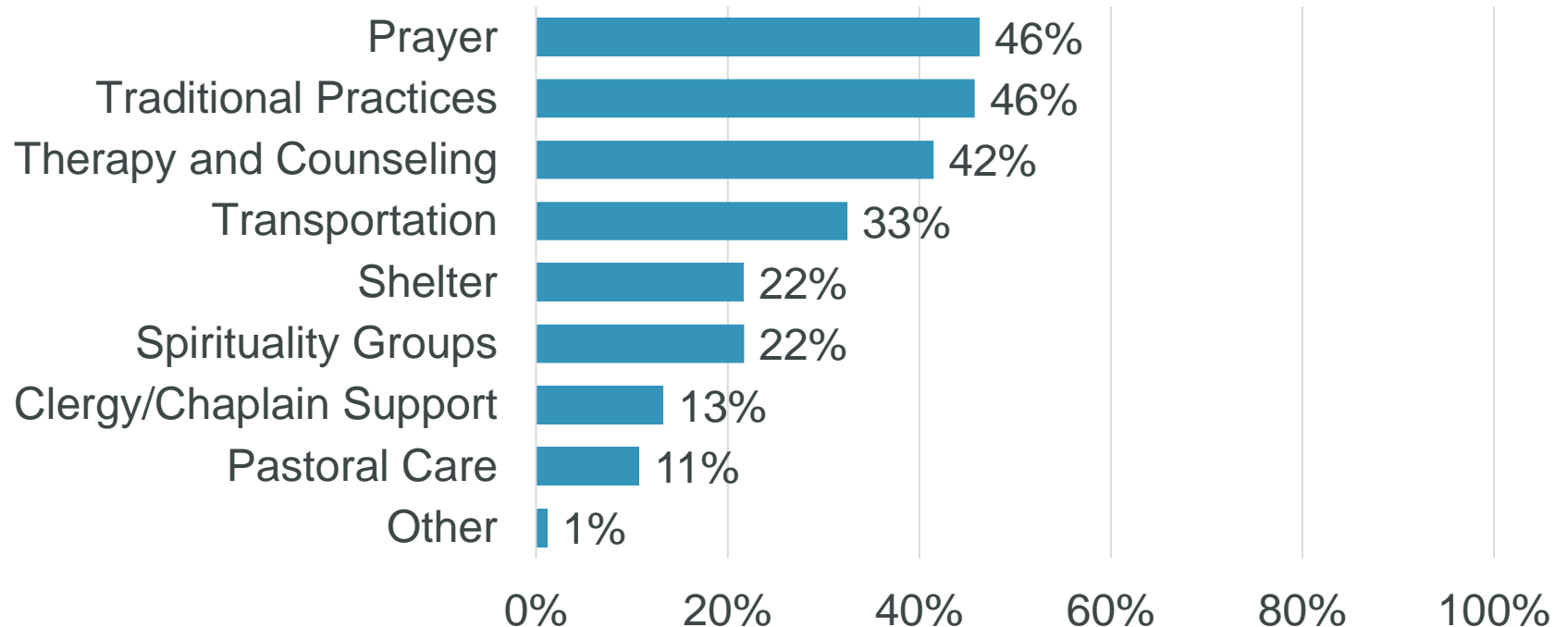
Percentage of DVPI Projects Integrating Cultural Services into Project Services by Practice Type, 2017-2018



All Purpose Areas | Faith-Based Services

Percentage of DVPP Projects Integrating Faith-Based Services into Project Services by Practice Type, 2017-2018

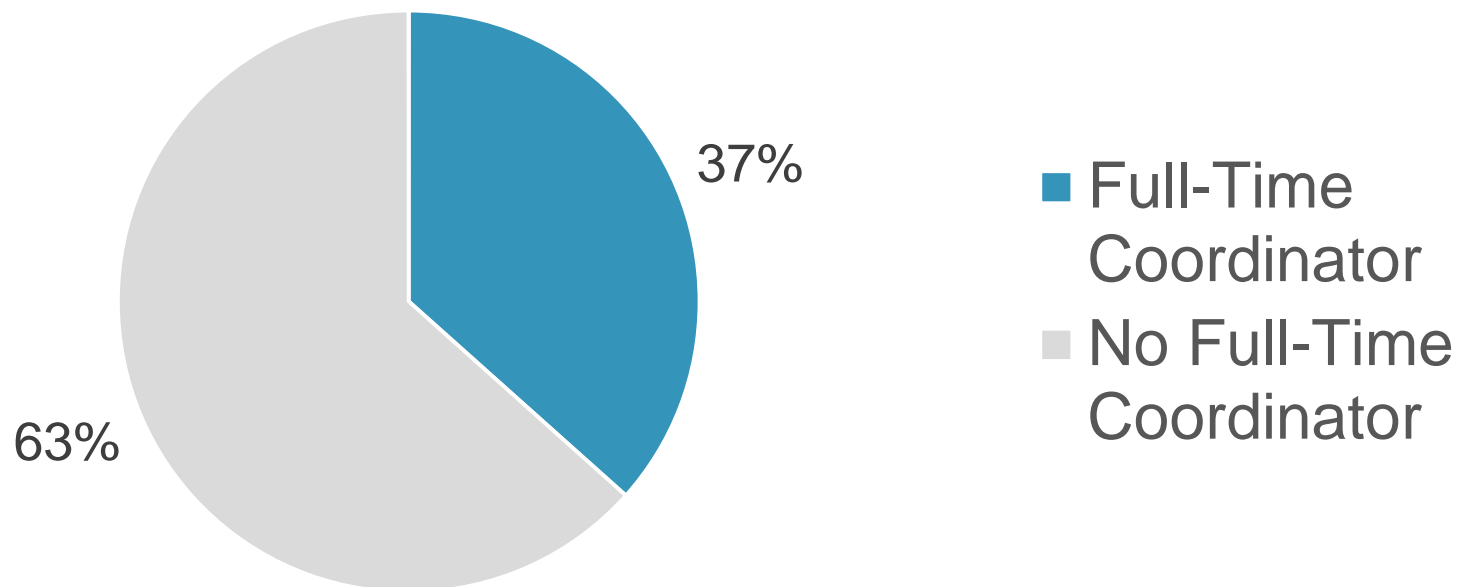
Note: Projects were able to select multiple types



“Other” included: referral to traditional practitioners; self-care; white sage wrapping; mind-body-medicine modalities.

All Purpose Areas | Staffing

Percentage of DVPP Projects with a Full-Time Project Coordinator, 2017-2018



All Purpose Areas | Staffing

Types of DVPP Staff that Left Project



All Purpose Areas | Staffing

Reasons for Turnover



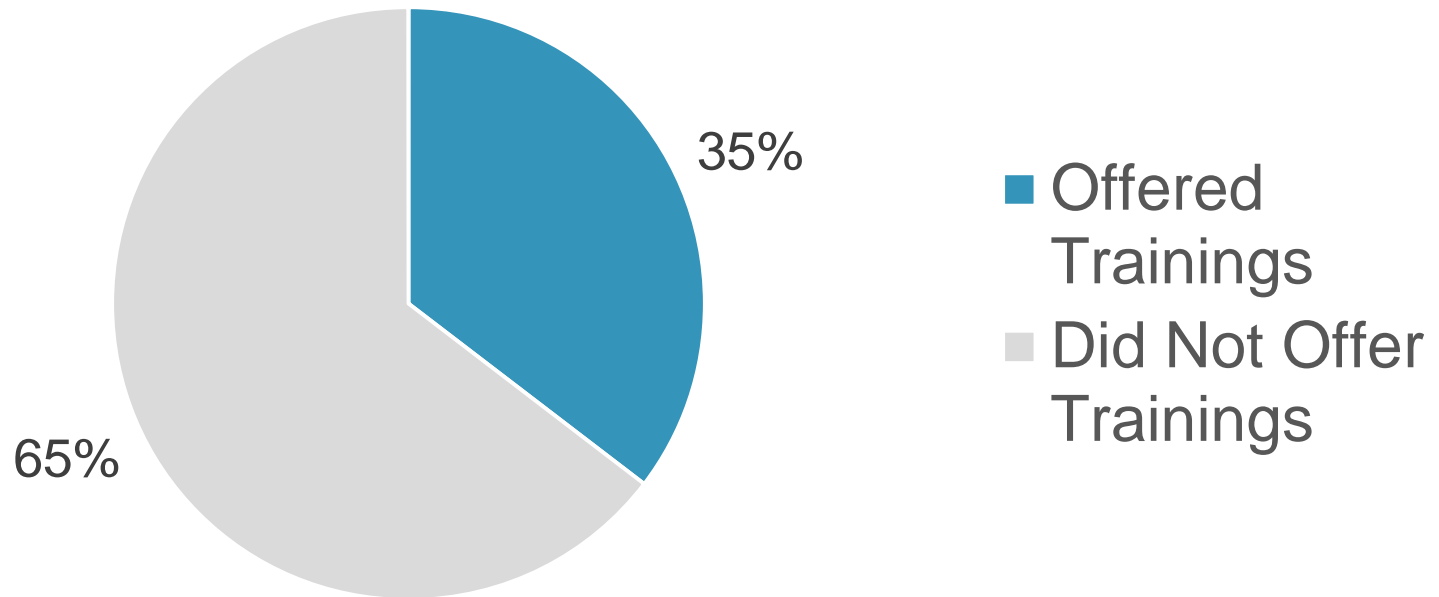
All Purpose Areas | Staffing

Impact of Staff Changes



All Purpose Areas | Trauma Informed Care

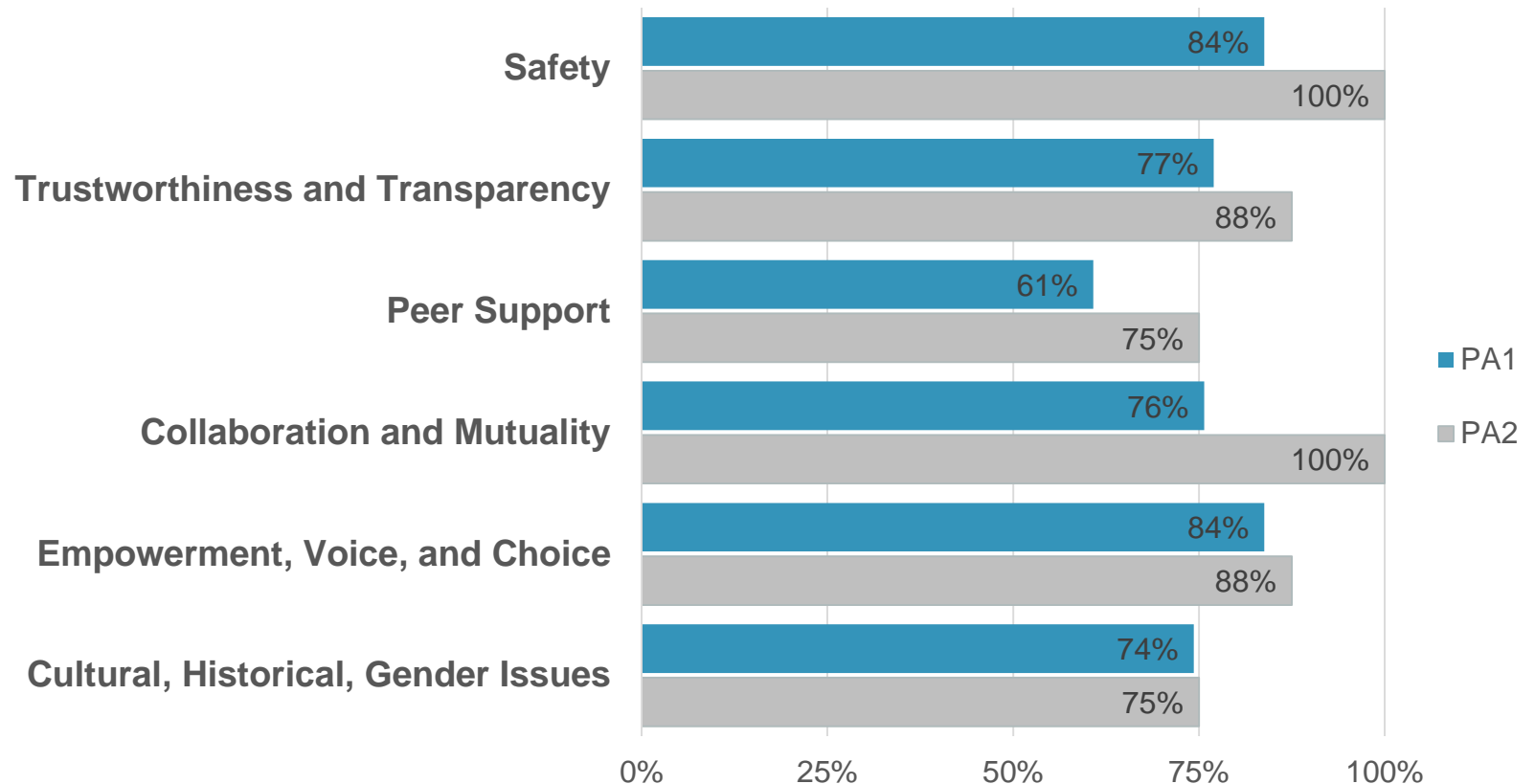
Percentage of DVPP Projects Offering Trauma Informed Care Trainings, 2017-2018



All Purpose Areas | Trauma Informed Care

Types of Trauma Informed Care Elements Included in DVPP Project Activities, 2017-2018

Note: Projects were able to select multiple types



All Purpose Areas | Trauma Informed Care

1879 Trauma Informed Care
Trainings Provided

3118 Health Professionals Trained
In Trauma Informed Care

All Purpose Areas | Trauma Informed Care

Types of Professionals Trained in Trauma Informed Care through DVPP* Project Activities, 2017-2018

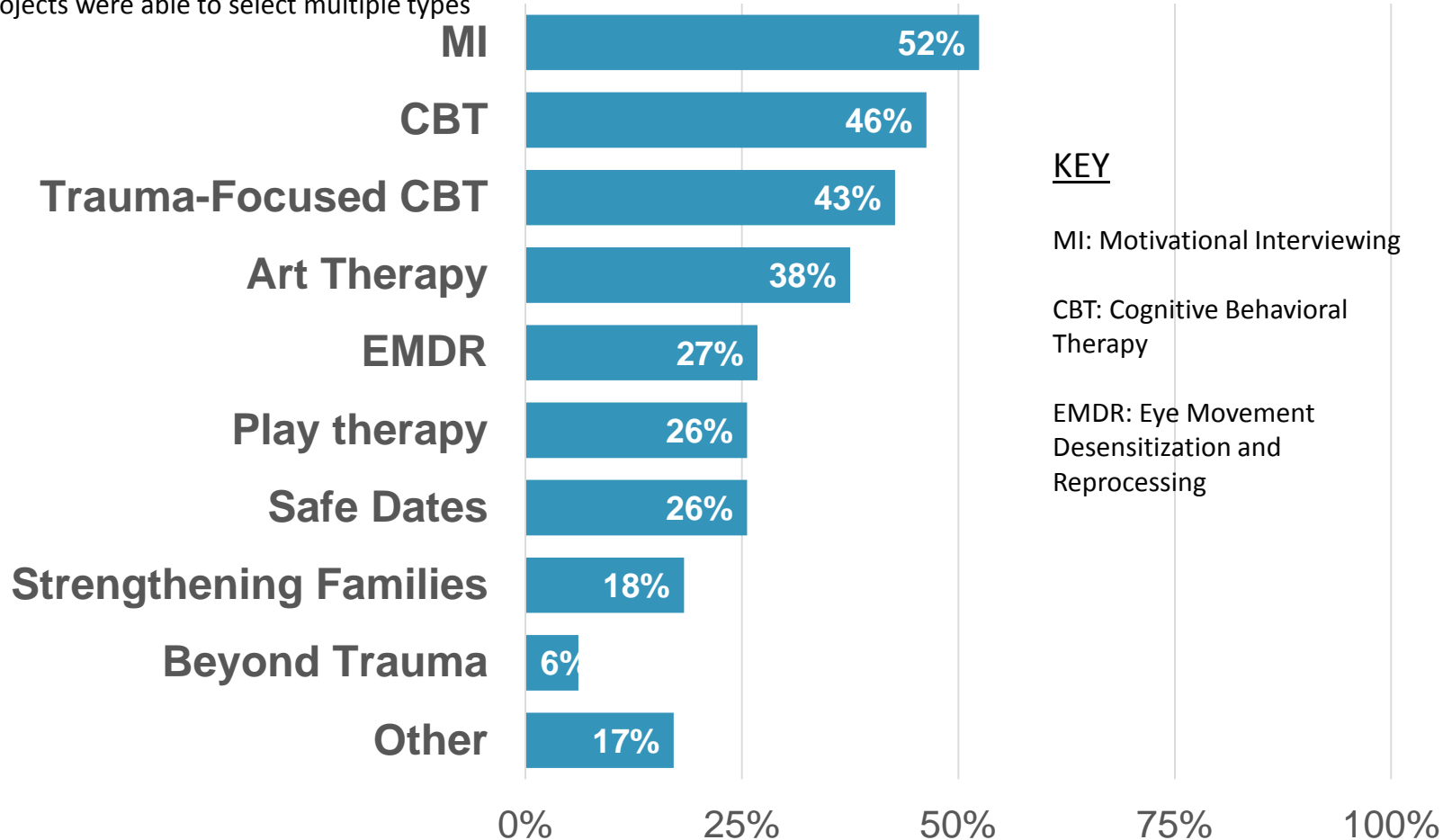


*Purpose Area 2 Only

All Purpose Areas | EBPs

Types of Evidence-Based Practices Implemented by DVPP Projects, 2017-2018

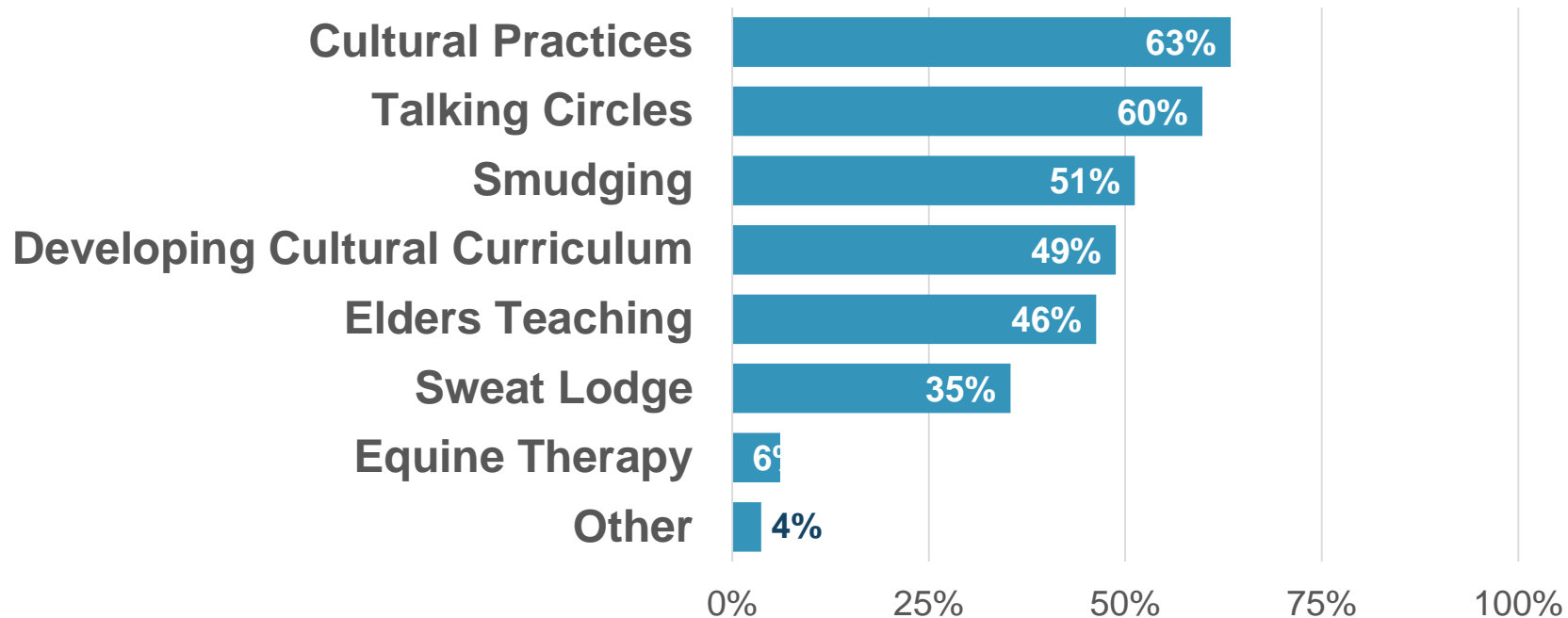
Note: Projects were able to select multiple types



Other – next slide

All Purpose Areas | PBP's

Types of Practice-Based Practices Implemented by DVPP Projects, 2017-2018



“Other” included: traditional ceremonies; Brain Spotting; Somatic Archaeology; Aromatherapy; BHA Indigenous Workers; Clothesline Project; Crafts; Martial Arts; Tribal Canoe Journeys; Community Healing Carving Project; Drumming; Singing; in-person home visits; one-on-one sessions; Traditional Healing Diagnostician; Water Walk; GONA; Wiping of Tears; White Bison; subsistence activities; Project Venture; Healing Kits; protective prayers; trauma survivors retreats; Clubhouse after school program; community garden.

All Purpose Areas | EBPs

Types of Evidence-Based Practices Implemented by DVPP Projects, 2017-2018



Questions

IHS DVPP website: <https://www.ihs.gov/DVPP/>

Contact Information

National DVPP Lead

Selina Keryte, MPH

Public Health Analyst

IHS, Division of Behavioral

Selina.keryte@ihs.gov

301-443-7064