

Healthy Native Families:

Preventing Violence At All Ages 3rd Edition



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For a listing of tribally-run programs that focus on domestic violence, sexual violence, child abuse, and healthy relationships:

www.anthctoday.org/epicenter/alaskanativefamilies.html

This listing provides contact information for programs run by tribes, tribal courts, tribal non-profits, and tribal health organizations in every region of Alaska.

Cover Photo: © Brendan Smith/ANTHC

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We are free to be who we are—
To create our own life
Out of the past and out of the present.
We are our ancestors.
When we can heal ourselves,
We also heal our ancestors,
Our Grandmothers, our
Grandfathers and our children.
When we heal ourselves, we heal Mother Earth.

~Dr. Rita Pitka Blumenstein¹

Executive Summary

The Alaska Native Tribal Health Consortium's vision is that Alaska Native people are the healthiest in the world. Alaska Native people living lives free of domestic violence and sexual violence (DV/SV) would contribute to making this vision a reality. Unfortunately, it is common to hear that DV/SV disproportionately affects Alaska Native people. The first step to addressing a problem is to understand its depth and breadth. Domestic and sexual violence are patterns of behavior involving intentional violence, inappropriate sexual behavior, intimidation, control, and neglect affecting a child, teen, adult, or elder's emotional, psychological, spiritual, or physical self. Domestic and sexual violence may include threatening or shaming language, forced sexual interaction, reproductive coercion, property damage, pet abuse, Internet predation, stalking, commercial sexual exploitation and financial exploitation. The harm is inflicted by family members and intimate partners, as well as acquaintances, authority figures, and in some cases, strangers. This bulletin brings together the existing data on DV/SV affecting Alaska Native people. By monitoring the numbers and expanding data collection, we can assess the effectiveness of prevention and intervention efforts in putting an end to violence.

We currently do not have comprehensive data on DV and SV. The most notable gaps in the data are for violence affecting children and elders. What we do know about violence specific to Alaska Native people is:

- » Nearly 1 out of every 10 women who recently gave birth was physically abused in the 12 months before pregnancy;
- » In 2011, there were **1,412** substantiated child victims of maltreatment in Alaska. In 2009, **31% of adults** reported witnessing domestic violence as a child;
- » 1 out of 10 teens reported experiencing dating violence in the last 12 months;
- » 1 out of 2 women and over 1 out of 4 men have experienced physical and/or sexual violence in their lifetime;
- » Every year there are cases of elder abuse reported to the State Troopers or the State Adult Protective Services.

In summary, the current data reveals that by the time an Alaska Native person reaches adulthood, the chance of having been a victim of DV or SV is quite high (women 51% and men 29%). Women are disproportionately affected by both types of violence.

There are many dedicated tribal and non-tribal partners throughout the state working on prevention and intervention activities to **bring the number of people affected at all ages to 0%**. Some of these efforts include systematic screening for DV/SV and reproductive coercion at health facilities, prenatal counseling on the risks of abuse during pregnancy, specially designed Child Advocacy Centers, a healthy relationships curriculum in Alaskan high schools (e.g. 4th R Program), healing and prevention workshops for adults (e.g. Healthy Families), and community discussions to change social norms about violence (e.g. Green Dot Campaign and Pathways to Hope). Key recommendations include:

- » Implementing best practice screening protocols for children, teens, pregnant women, and adults seeking care at Alaska Tribal Health System facilities (see *Screening Resources* section);
- » Increasing collaboration between medical and behavioral health services and between healthcare facilities and DV/SV programs;
- » Conducting an Alaska Native Adverse Childhood Experiences (ACEs) study and/or studies on DV and SV that would provide data to understand the connection between experiencing violence and physical and mental health, as well as key protective and resiliency factors; and,
- » Evaluating violence prevention and intervention programs to contribute Alaska Native-led and informed interventions to the evidence base and promote continuous improvement of violence reduction efforts.

Introduction



Having healthy families...

... helps our children, teens, adults, elders and culture to thrive. We know from the media, our work, and from the stories of our friends and relatives how domestic and sexual violence (DV and SV) can wound individuals, families, and whole communities. The first step to addressing a problem is to understand its depth and breadth.

Many programs around Alaska are working to prevent violence and support people in accessing safety, healing, and justice. These programs are run by tribal health organizations, tribal non-profits, Alaska Native and American Indian consultants, non-profits, school districts, the State of Alaska, and grassroots groups of volunteers. Programs such as these benefit from having up-to-date data on violence in order to direct their programming and to use in evaluation efforts.

This second edition of the bulletin updates the data and resources presented in the first edition. The original bulletin was the first time that data on domestic and sexual violence affecting Alaska Native people of all ages was brought together in one place. Beginning with pregnancy, this bulletin moves through the major stages of life. For each stage of life, it shares the consequences of violence, how many people are affected, and Alaska-specific responses.

Please note that, in this bulletin, we use the term "Alaska Native" to include people who are Alaska Native and/or American Indian alone or in combination with any other race. When we use the term "Alaska Non-Native," we are including people of all races who do not identify as Alaska Native or American Indian.

The numbers...

The majority of data for this bulletin come from surveys conducted by the State of Alaska, Department of Health and Social Services. These surveys include:

- » the Pregnancy Risk Assessment Monitoring System (PRAMS), which surveys approximately 1 out of every 6 women in Alaska shortly after they have delivered a live newborn;
- » the Childhood Understanding Behaviors Survey (CUBS), which follows up with mothers who took the PRAMS survey when their child turns three years old;
- » the Youth Risk Behavior Survey (YRBS), which surveys approximately 1,400-1,500 high school students in 45 Alaskan schools every other year; and,
- » the Behavioral Risk Factor Surveillance System (BRFSS), which surveys over 200 Alaska residents age 18 and older each month to reach an annual sample size of 2,500.

These surveys provide us with valuable information. However, it is important to note that the statistics reported here may not successfully identify all the people affected by DV and SV. First, the surveys ask just a few questions about certain types of violence and leave out others. Some types that are left out include reproductive coercion, stalking, and commercial sexual exploitation/human trafficking. Second, the quality of the survey data depends on how safe the respondent feels when answering questions. Third, the use of phone and mail surveys can leave out people without phones and/or fixed addresses, and the primary reliance on landlines has excluded the growing number of people who only have cell phones. Phone and mail surveys also leave out people in residential treatment facilities, prisons, and the homeless. These individuals have been shown to be at higher risk for DV/SV.²

The other data sources for this bulletin include data from service providers and state agencies. These data reflect the number of people who come in contact with DV/SV services or Protective Services, and do not include those who never disclose their victimization or seek assistance, or about whom a report is never made.

The data presented here are the best data available. They provide us with a glimpse of how DV and SV affect Alaska Native people. However, the numbers may be low due to the above limitations. At the end of this report, there is a table that lists the data presented in this bulletin, along with comparison data for Alaska non-Native people. For some topics in this book, there are no comprehensive data available to describe the affected population. These gaps in the data will be identified in the *Conclusion and Recommendations* section of this bulletin.

A global trend...

While DV and SV occur at devastating rates, affecting people of all ethnic and racial groups, socio-economic statuses, religions, sexual orientations, genders, and ages throughout the world,³ there are certain groups that are disproportionately affected. The international data reveal high rates of violence affecting indigenous people in colonized countries such as Canada,⁴ New Zealand,⁵ Australia,⁶ and the United States. For example, in the United States the rates of DV against Alaska Native and American Indian women are nearly 3 times higher than those for white women.⁷

The roots of violence...

This bulletin shares information about DV/SV because it is a major health issue affecting Alaska Native people and communities. These types of violence have not always been a significant problem in Alaska. Many Alaska Native elders from across the state, such as Athabascan elder, Poldine Carlo, and Yup'ik elders, Rita Blumenstein and Peter Jacobs, speak of a time when such violence against children, spouses, and acquaintances was rare. If it occurred, they said, the elders would meet to come up with an appropriate warning or punishment. Additionally, age-old values collected from Alaska Native elders from all regions of Alaska name respect, peace, and caring for one another as foundations of their cultures. In the contract of the collected from the collected from

Scholars, advocates, and elders offer explanations for why violence disproportionately affects indigenous people throughout the world, in the US, and in Alaska. They theorize that the roots of this violence are linked to historical trauma, which has been internalized and passed on from generation to generation. Alaska Native writers and leaders point to the many traumatic experiences that Alaska Native people have suffered, such as enslavement, death from introduced diseases, forced adoption of Western culture, sexual abuse by religious authorities, and forced attendance at boarding schools as the beginnings of inter-generational pain and unhealthy patterns. It is theorized that these experiences traumatized Alaska Native people, disrupted families and parenting, weakened traditional language and cultural practices, and caused Alaska Native people to devalue themselves and others in their communities. ¹⁵⁻²⁵ In some areas, new ideas were introduced by churches, schools, and other institutions that changed men's and women's roles, and dismantled social structures that allowed older men to monitor and teach younger men. As a result, women and children's vulnerability to violence was increased. ^{9-11, 26}

In many cases, negative coping behaviors have resulted from these traumas. It is important not to think of DV and SV as private issues that are separate from the public health problems that affect Alaska; rather, violence is highly related to challenging

problems including substance abuse, suicide, and other mental and physical health issues—all of which can be linked, at least in part, to intergenerational trauma.²⁷⁻³⁰ Healing from historical trauma and its consequences, and returning to traditional values are an important part of many tribal DV/SV intervention and prevention programs.³¹⁻³⁵

Another explanation for the high rates of DV and SV against Alaska Native people points to racism within our society. The unequal status of women in all cultures is a major contributor to DV and SV,³⁶⁻³⁷ but such violence can be even more prevalent against women and girls of a particular cultural group if women in that group are stereotyped and demeaned.³⁸⁻⁴¹ Both nationally and in Anchorage, Alaska, there are disproportionately high rates of rape against indigenous women by non-indigenous men.^{20,34,42} Some Alaska Native and American Indian scholars and advocates connect these data to racist representations, both historical and contemporary, that devalue Alaska Native and American Indian women.^{20,38,40} It is theorized that such racist representations also play a role in violence against Alaska Native children.¹⁷ While it is not the focus of this bulletin to determine the root cause of DV/SV, it is important for the reader to note that this issue is highly complicated and tied to historical changes, and it persists today because of adopted or learned beliefs and practices both within and outside of Alaska Native communities.

Barriers...

There are barriers to providing service and prevention efforts to Alaska Native people and other people in Alaska. Some of these barriers are:

- · Geographical isolation and weather;
- Lack of law enforcement–including Village Public Safety Officers (VPSOs), Village Police Officers (VPOs) and Tribal Police Officers (TPOs)–or appropriately trained law enforcement in some areas;^{38, 43-46}
- Lack of Sexual Assault Response Teams (SARTs) and Child Advocacy Centers (CACs) in some hub communities;^{38, 47-48}
- Fear of seeking services where an offender's family member is employed and/or fear of breaches in confidentiality;^{38, 45, 49}
- Fear of retaliation from the offender, the offender's family, and ostracism from the community;^{38, 40, 44, 50-51}
- Lack of resources for, and impediments to, prosecution in some areas; 45, 52
- Trust issues between victims (including child victims and their families) and "the system." 12, 31-32, 38, 40

Tribal, non-profit, and state organizations are working to overcome many of these barriers. Further evaluation is called for in order to determine how systems are working and how best to address barriers.

Pregnancy



Pregnancy is the time when children get their first knowledge. If a mother is able to eat well, be active and attend ceremonies and dances in a peaceful environment, the child develops well. If the father is helping the mother prepare for birth and caring for her, the baby and the father grow more connected. If there is conflict and/or violence between the mother and father and the mother experiences sadness, anger, worry and violence, this will harm the child.*

^{*}All descriptions of life stages are paraphrased from Tribal Doctor and esteemed Elder, Rita Pitka Blumenstein, Ph. D., from a personal interview in August, 2011.

Pregnancy

Violence during pregnancy...

...increases the likelihood of pregnancy complications and adverse birth outcomes such as low birth weight, pre-term birth, increased risk of Cesarean delivery, uterine rupture, hemorrhage, miscarriage, and hospitalizations during pregnancy.⁵³



From 2000 to 2010, reported physical abuse during the 12 months before pregnancy among Alaska Native women declined.

The numbers...

In 2010, 9% of Alaska Native women reported physical abuse by a husband or partner during the 12 months before pregnancy. This percentage decreased from 16% in 2000. In 2010, 7% of Alaska Native women reported physical abuse during pregnancy. In 2010, 9% of Alaska Native women who recently delivered a live newborn reported having a controlling husband or partner (who threatened her, limited her activities or made her feel unsafe) in the 12 months prior to pregnancy, during pregnancy, or since the baby was born.⁵⁴



Almost 1 out of 10 Alaska Native women who recently gave birth to a live newborn reported having a controlling husband or partner.

Screening...

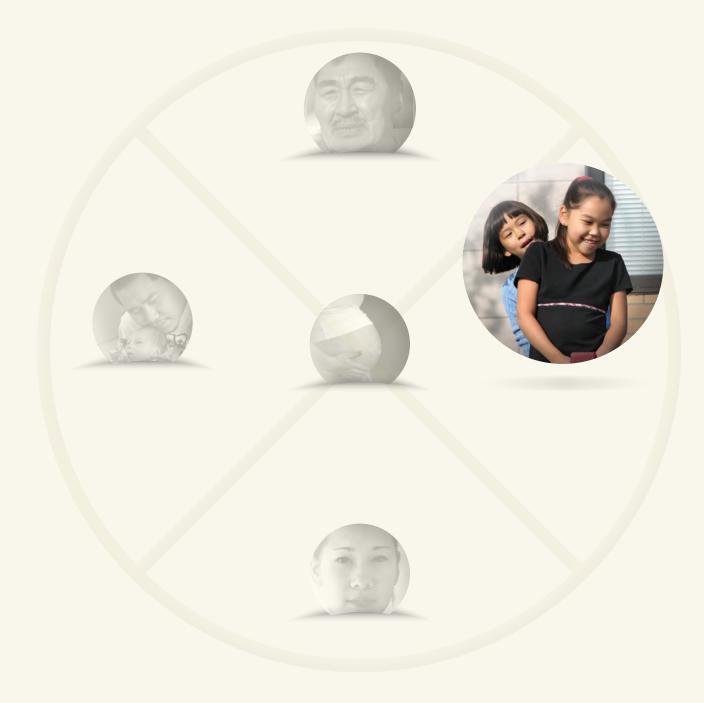
...for violence during prenatal care visits gives providers the opportunity to offer help to women who are in abusive relationships (see *Screening Resources* section). In 2010, 65% of Alaska Native women who recently gave birth to a live newborn said their prenatal care provider talked to them about physical abuse to women by their husbands or partners.⁵⁴



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Photos starting from Page 10			

Childhood



Childhood is the time for children to learn about life from stories and legends; from the plants, animals, and water; and from safe, loving relationships.*

^{*}All descriptions of life stages are paraphrased from Tribal Doctor and esteemed Elder, Rita Pitka Blumenstein, Ph. D., from a personal interview in August, 2011.

Childhood

If a child sees violence...

...in their homes, they are more likely to be victims of physical and sexual abuse themselves,⁵⁵ and they may develop the following problems:

infants



disrupted sleep, poor feeding, delays in developmental growth, and poor maternal bonding⁵⁵

school age children



poor school performance, headaches, stomach aches, and feelings of responsibility for the violence⁵⁵

pre-schoolers 1



withdrawing, increased anxiety and nightmares, and re-enacting violent play⁵⁵

adolescents



feelings of shame, rage, and betrayal, risk-taking behaviors, and lack of impulse control⁵⁵

The numbers...

In 2011, the State of Alaska Office of Children's Services substantiated child maltreatment against 1,412 Alaska Native children. 56 This statistic does not include all cases of child abuse and neglect—some children have multiple cases of substantiated maltreatment and there are many cases that are never reported or investigated. Better data are needed on the extent of child maltreatment.

From 2009-2010 in Alaska, 9% of Alaska Native mothers of 3-year-olds reported that their child had seen violence or physical abuse in person.⁵⁷ Furthermore, in 2009, 31% of Alaska Native adults reported that when they were a child, they saw or heard their parent or guardian being hit, slapped, punched, shoved, kicked, or otherwise physically hurt by their spouse or partner.⁵⁸



Help for children...

...is provided in a child-friendly environment at Child Advocacy Centers (CACs). At the CACs, law enforcement, child protection workers, prosecutors, medical providers, victim/family advocates, tribal representatives, and mental health providers work together with a child and their family when there are allegations of child abuse. There are 12 CACs in Alaska that served 728 Alaska Native children during 2011 (see map pg. 31).59



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Teen Years



The teen years can be hard for young people—they are moving from being children into being adults and they may feel "in between" these two life stages.*

^{*}All descriptions of life stages are paraphrased from Tribal Doctor and esteemed Elder, Rita Pitka Blumenstein, Ph. D., from a personal interview in August, 2011.

Teen Years

Healthy Relationships...

It is important for teens to learn about healthy relationships early on in order to promote their continued healthy emotional development and to carry these patterns into future relationships. Teens who experience dating violence and/or sexual violence are more likely to have poor school performance, abuse alcohol and other substances, become suicidal, and get pregnant.⁶⁰



1 out of 10 Alaska Native teens reported they had experienced dating violence in the past 12 months.



Almost 1 out of 10 Alaska Native teens reported they had been forced to have sexual intercourse at some time in their life.

The numbers...

In 2011, 10% of Alaska Native high school students reported they had been hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend during the past 12 months. Nearly the same amount (9.5%) said that they had been forced to have nonconsensual sexual intercourse at some time in their life. The percentage of high school students who are victimized rises as they get into higher grades and is higher among students in alternative schools. 62-63

Prevention...

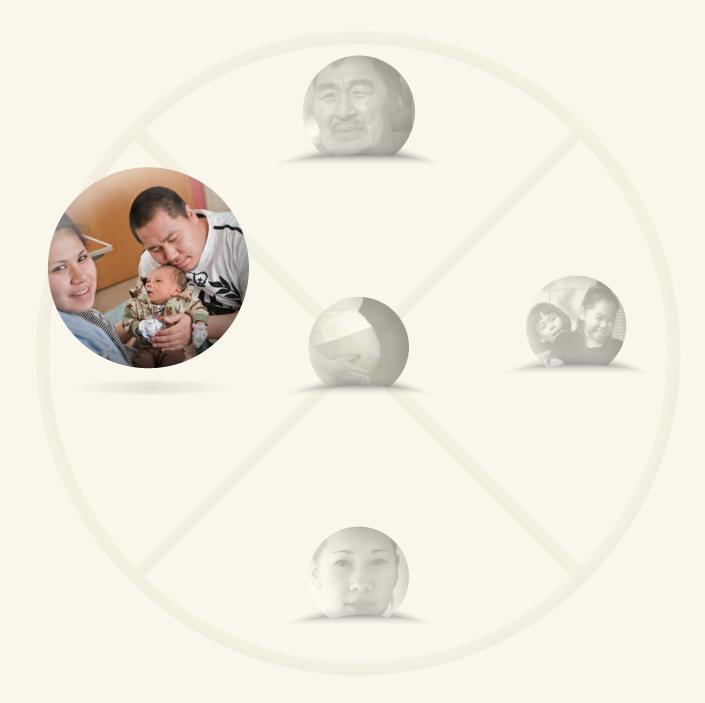
There are many programs to help youth develop healthy relationships and prevent violence. These are run by Tribal Health Organizations, tribes, DV/SV agencies, school districts, and others.

One of these programs is the *Fourth R: Skills for Youth Relationships*, which uses a comprehensive approach to promote healthy relationships and address adolescent risk behaviors. The *Fourth R* has been identified as a "best practice." ⁶⁴ The State of Alaska Department of Education and Early Development is providing teacher training in an effort to encourage the adoption of this curriculum by more schools in Alaska, and has trained approximately 100 teachers representing 18 school districts across the state. ⁶⁵



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Adulthood



Alaska Native women... are strong, nurturing, and resourceful. They are the first teachers of their babies. When a woman has a life that allows her to thrive, the whole family benefits.

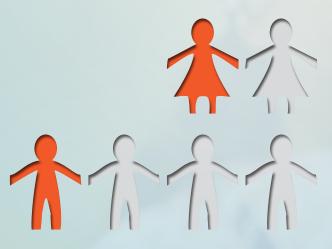
Alaska Native men... are the providers and protectors of the family and teachers of their children. When a man has a life that allows him to thrive, the whole family benefits.*

*All descriptions of life stages are paraphrased from Tribal Doctor and esteemed Elder, Rita Pitka Blumenstein, Ph. D., from a personal interview in August, 2011.

Adulthood

Women...

...who experience domestic violence show higher rates of medical care usage and are significantly more likely to suffer from chronic pain, depression, gastrointestinal problems, and chronic diseases than other women. 67 Sexual victimization in their childhood also places women at higher risk for adult victimization, and poor physical and mental health. $^{28,68-69}$ In 2009, 47% of Alaska Native women reported they had ever experienced domestic violence and 27% reported being forced to take part in an unwanted sexual activity. Half of Alaska Native women (51%) were victims of one or both types of violence. 58



1 out of 2 Alaska Native women have experienced physical and/or sexual violence.

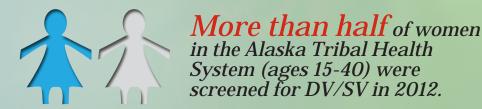
over 1 out of 4 Alaska Native men have experienced physical and/or sexual violence.

Men...

...who experience severe domestic violence show elevated levels of Post-Traumatic Stress Disorder (PTSD) symptoms. Childhood sexual victimization can also have many long-term negative consequences for men, including increased rates of sexual dysfunction, sexual risk-taking, and sexually transmitted infections (STIs). 9,70 Over one out of 4 Alaska Native men (27%) said they had been threatened or abused by an intimate partner at some time in their lives and 4% reported being forced to take part in unwanted sexual activity. Twenty-nine percent (29%) of Alaska Native men had experienced one or both types of violence.

Prevention efforts...

...focused on adults exist in the state, but they do not reach all communities. Several efforts led by tribal organizations focus on creating healthy Alaska Native families and healing from past abuse. One prevention effort happening around the state is the *Green Dot Campaign*, which focuses on changing the beliefs and actions of individuals as potential bystanders to violence. This effort strives to build communities where violence is unacceptable.⁷⁰

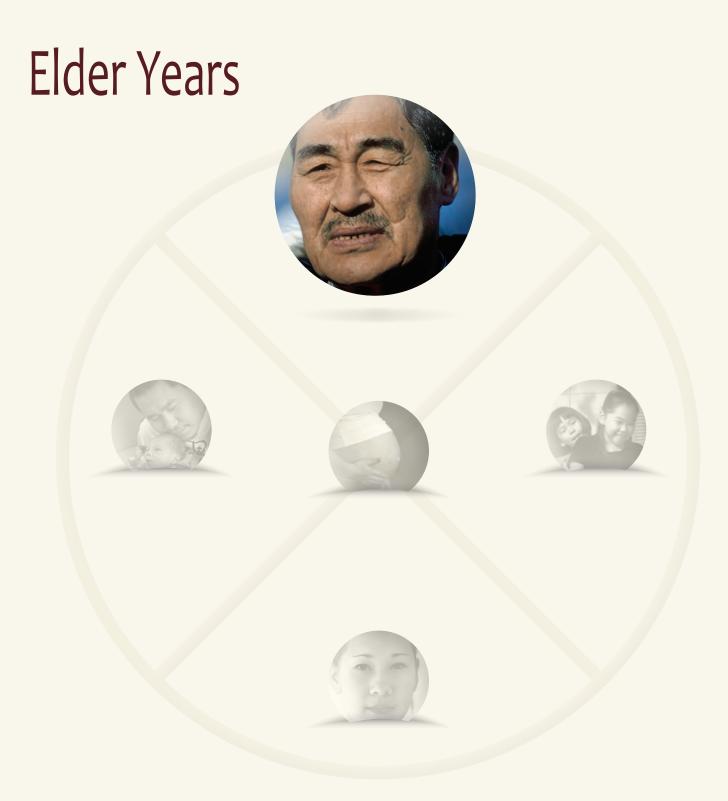


Screening...

...for domestic violence is recommended for all women (see *Screening Resources* section).⁷¹ In 2012 in the Alaska Tribal Health System, the percent of women ages 15 through 40 who were screened for domestic violence or whose health care provider identified DV was 55%.⁷²



Photos from left to right: © Kraig Haver; © Brian Adams; © Clark Mishler



Elders are cherished and honored within Alaska Native Culture. They are the keepers of wisdom. Their role is to tell stories, teach traditions, and to teach about themselves and the world. They share their wisdom and experience with the young people.*

^{*}All descriptions of life stages are paraphrased from Tribal Doctor and esteemed Elder, Rita Pitka Blumenstein, Ph. D., from a personal interview in August, 2011.

Elder Years

Elder abuse...

...is rooted in a gap between traditional values, the experiences and memories of the Elders, and the modern world in which the young people live.⁷³

The numbers...

There are no statewide, population-level data on elder abuse affecting Alaska Native people. Available data come from reports that are collected by the State of Alaska. In 2011, the Alaska State Troopers reported 71 cases of DV or SV affecting Alaska Native Elders (60 years or older). In the same year, the State of Alaska's Adult Protective Services reported having 110 substantiated cases of abuse to vulnerable Alaska Native Elders. The majority of these cases included financial exploitation (39%), neglect (25%), and mental abuse (21%). Cases also included physical abuse (8%), sexual abuse (1%), abandonment (2%), and other forms of exploitation (4%). These numbers in no way capture the full scope of abuse affecting Alaska Native Elders.

There are no statewide population-level data on Elder abuse affecting Alaska Native people.

Prevention...

The Alaska Native Tribal Health Consortium, in partnership with regional tribal health organizations, established and facilitates the Alaska Native Elder Health Advisory Committee. This committee works to assess the current status of Alaska Native elders and address health issues. The committee has been working with the Alaska Tribal Health System's Injury Prevention Directors on multiple injury prevention activities, which may include future efforts on elder abuse prevention and services.



Photos from left to right: © Kraig Haver; © Roy Corral; photo courtesy of University of Alaska Fairbanks

Conclusion & Recommendations

The Alaska Native Tribal Health Consortium's vision is that Alaska Native people are the healthiest in the world. To achieve this vision, Alaska Native people need healthy families and healthy communities. Domestic violence and sexual violence (DV/SV) can profoundly wound individuals, families and whole communities. It is common to hear that DV/SV disproportionately affects Alaska Native people. The first step to addressing a problem is to understand its depth and breath. This bulletin brings together the existing data on DV/SV affecting Alaska Native people, as a beginning point to assess the possible need for better data and to begin to understand to what extent Alaska Native people, families and communities are affected. By ensuring we have reliable data and by monitoring changes over time, we can better understand which programs and interventions are most successful.

The existing data reveal that at every age of development Alaska Native people can be affected by violence and once an individual is an adult their likelihood of having been a victim is high (women 51.4% and men 29.2%). Additionally, this review of the data reveals there is much we do not know. In order to fully understand and address this problem we need more data on all types of violence, neglect, and abuse. The data we have are limited, due to phone or mail methodologies, by missing certain populations who may experience higher rates of abuse. The data are also limited primarily to information on physical and sexual violence, and leave out many forms of abuse. We also need data on how DV and SV are associated with other risk factors such as substance abuse and mental health issues.

Additionally, there are certain life stages for which we have very limited or no data. While we have the number of cases of child and Elder maltreatment that are substantiated by the Alaska Office of Children's Services and Adult Protective Services, respectively, these do not include cases that are not reported or for which insufficient evidence prevented the case from being substantiated. However, the 2013 BRFSS will, for the first time, ask adults about Adverse Childhood Experiences (ACEs).

The findings in this report suggest the following recommendations:

- » Healthcare facilities, including Tribal Health Organizations (THOs), should screen individuals at all ages for DV and SV. Asking a single question regarding safety at home will not adequately capture the types of violence that patients may be experiencing. Rather, THOs should implement best practice screening protocols for each age group[†] to identify victims, offer assistance, and make supported referrals to appropriate agencies. This screening should aim to capture a wide range of victim experiences;
- » Healthcare facilities, including THOs, should increase collaboration with DV/SV programs and agencies in order to provide supported referrals and coordinated services for patients;
- » Tribal, state, and other organizations should seek to understand the links between DV, SV, ACEs, and long-term health issues. This may include the implementation of an Alaska Native ACEs study or ACEs assessment and support in the healthcare setting; and,
- » Tribal, state, and other organizations should comprehensively evaluate their services and initiatives to potentially contribute to the evidence base, and determine their effectiveness in addressing the needs of Alaska Native victims and preventing violence.

Every child, teen, pregnant woman, adult, and Elder is precious and deserves to live a life without violence. There are many organizations and individuals devoted to eliminating DV and SV in Alaska. Implementing the recommendations proposed by this report to address gaps in data collection will provide staff at these organizations with much needed data to refine their focus and assess the impact of their programming. Having communities without DV and SV would contribute to making the vision of Alaska Native people as the healthiest people in the world a reality.

†See Screening Resources section.

Data Tables

The following section presents the data findings related to DV/SV that are reported in this bulletin, including the data source and the data for a comparison group. This comparison group helps us understand the magnitude of the disparity or gap that exists between different populations. Whenever possible, the 95% confidence interval (CI) for the estimate is reported in parentheses, along with the previous edition data which is italicized.

Pregnancy Data	Alaska Native people (2010)	Alaskan non-Native people (2010)
1. Percent of women who report physical abuse by partner/husband during the 12 months before pregnancy.	8.6% CI (6.3% - 11.8%) 6.4% in 2008	3.6% CI (2.2% - 5.8%) 3.9% in 2008
2. Percent of women who report physical abuse by partner/husband during their most recent pregnancy.	6.7% CI (4.6% - 9.5%) 4.0% in 2008	3.1% CI (1.8% - 5.4%) 2.9% in 2008
3. Percent of women who recently delivered a live newborn who report having a controlling partner (husband/partner threatened her, limited her activities against her will, or made her feel unsafe in any way) during the 12 months before pregnancy, during pregnancy, or since the new baby was born.	9.3% CI (6.8% - 12.6%) 11.2% in 2008	5.1% CI (3.3% - 7.8%) 7.4% in 2008
4. Percent of women who recently delivered a live newborn who report that their prenatal care provider talked with them about physical abuse to women by their husbands or partners.	64.7% 70.1% in 2007-2008	60.2% 59.9% in 2007-2008

Data Source: Data are from 2010 unless otherwise noted. State of Alaska's Pregnancy Risk Assessment Monitoring System (PRAMS).

Childhood Data	Alaska Native people	Alaskan non-Native people
1. Percent of mothers of 3 year olds who report that their child saw violence or abuse in person.	2010-2011 9.4% CI (6.9% - 12.6%) 15.8% in 2008	2010 - 2011 6.1% CI (3.9% - 9.4%) 2.0% in 2008
2. Number of AK Office of Children Services substantiated child maltreatment victims of all types of abuse and neglect (children 0-17 years).	2011 1,412 2,070 in 2009	2011 1,261 1,875 in 2009
3. Number of AK Office of Children Services substantiated child sexual abuse victims (children 0-17 years).	2011 57 45 in 2009	2011 62 63 in 2009

Data Sources: 1: State of Alaska Childhood Understanding Behaviors Survey (CUBS). 2, 3: Institute of Social and Economic Research. Kids Count Alaska 2011/2012. Anchorage, AK. 2012.

Teen Data	Alaska Native people (2011)	Alaskan non-Native people (2011)
1. Percent of high school students who report being hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend during the last 12 months.	10.1% CI (5.9% - 16.7%) 10.5% in 2009	12.8% CI (10.6% - 15.2%) 14.3% in 2009
2. Percent of high school students who report ever having been physically forced to have sexual intercourse when they did not want to.	9.5% CI (5.9% - 14.9%) 10.5% in 2009	9.1% CI (7.2% - 11.5%) 10.0% in 2009

Data Source: Data are from 2011 unless otherwise noted. State of Alaska's Youth Risk Behavior Survey (YRBS).

Adult Data	Alaska Native people (2009)	Alaskan non-Native people (2009)
1. Percent of adults who report ever being hit, slapped, punched, shoved, kicked, choked, hurt or otherwise physically hurt by their spouse or partner.	36.7% CI (29.2% - 44.2%)	18.5% CI (15.8% - 21.3%)
2. Percent of women who report ever being hit, slapped, punched, shoved, kicked, choked, hurt or otherwise physically hurt by their spouse or partner.	46.5% CI (36.7% - 56.3%)	22.6% CI (18.5% - 26.8%)
3. Percent of men who report ever being hit, slapped, punched, shoved, kicked, choked, hurt or otherwise physically hurt by their spouse or partner.	27.5% CI (16.1% - 38.8%)	14.7% CI (11.1% - 18.3%)
4. Percent of adults who report that in the last 5 years they feared for their safety or have been physically hurt by a current or former intimate partner.	10.0% CI (4.3% - 15.6%)	5.1% CI (3.4% - 6.9%)
5. Percent of adults who report ever being made to take part in any sexual activity when they did not want to (including touch that made them uncomfortable).	15.5% CI (11.0% - 19.9%)	13.6% CI (11.3% - 16.0%)
6. Percent of women who report ever being made to take part in any sexual activity when they did not want to (including touch that made them uncomfortable).	27.4% CI (19.4% - 35.4%)	22.7% CI (18.8% - 26.7%)
7. Percent of men who report ever being made to take part in any sexual activity when they did not want to (including touch that made them uncomfortable).	4.2% CI (1.1% - 7.4%)	4.9% CI (2.6% - 7.3%)
8. Percent of adults who report that when they were a child, they saw or heard their parent or guardian being hit, slapped, punched, shoved, kicked, or otherwise physically hurt by their spouse or partner.	31.1% CI (24.4% - 37.7%)	17.2% CI (14.6% - 19.9%)
9. Percent of women who report ever having experienced either physical domestic violence or unwanted sexual activity or both types of violence.	51.4% CI (41.7% - 61.1%)	34.0% CI (29.5% - 38.5%)
10. Percent of men who report ever having experienced either physical domestic violence or unwanted sexual activity or both types of violence.	29.2% CI (17.8% - 40.6%)	17.4% CI (13.5% - 21.4%)

Data Source: Data are from 2009. No current data available for these measures. State of Alaska's Behavioral Risk Factor Surveillance System (BRFSS).

Elder Data	Alaska Native people (2011)	Alaskan non-Native people (2011)
1. Number of Alaska Adult Protective Services substantiated vulnerable Elder abuse cases (vulnerable Elders 60 years or older).	110 43 in 2010	189 74 in 2010
2. Number of Alaska State Troopers reported cases of DV or SV for Elders (60 years or older).	71 106 in 2010	44 70 in 2010

Data Sources: 1: State of Alaska Senior and Disabilities Services, Research and Analysis Unit. 2: State of Alaska Department of Public Safety. Data are from 2011.

DV/SV Resources[†]

Resources for safety, advocacy, and reporting for children, teens, adults, and elders...

www.avvalaska.org

National:

National Coalition Against Domestic Violence

Violence 1-800-799-SAFE (7233) 1-800-787-3224 (TTY)

www.ncadv.org

Rape, Abuse and Incest National Network (RAINN)

1-800-656-HOPE (4673) www.rainn.org

Statewide:

Alaska Network on Domestic Violence and Sexual Assault

(907) 586-3650 www.andvsa.org

The Alaska Children's Alliance (CAC)* (907) 688-0163

www.alaska.nationalchildrensalliance.org

Regional:

Aleutians/Pribilofs:

Unalaskans Against Sexual Assault & Family Violence, Unalaska (advocacy, shelter) (907) 581-1500/ (800) 478-7238

Anchorage/Mat-Su Valley:

Abused Women's Aid in Crisis (AWAIC),

Anchorage (*advocacy, shelter*) (907) 272-0100 www.awaic.org

Alaska CARES, Anchorage (*CAC*) (877) 561-8301/(877) 561-8301

Alaska Family Services, Palmer (advocacy, shelter)

(907) 746-8026/ (866) 746-4080 www.akafs.org

Forensic Nursing Services of Providence, Anchorage (anonymous reporting) (907) 212-8544

Standing Together Against Rape (STAR),

Anchorage (*advocacy*) (907) 276-7273/ (800) 478-8999 www.staralaska.com

The Children's Place, Wasilla (*CAC*) (907) 357-5157 www.thechildrens-place.org

Willa's Way, Anchorage (advocacy, safe home) (907) 729-6300

Bristol Bay:

Nitaput Child Advocacy Center, Dillingham (907) 842-1230

www.bbahc.org/child_advocacy.html

Safe and Fear-Free Environment, Dillingham (advocacy, shelter) (907) 842-2320/ (800) 478-2316 www.besafeandfree.org

Copper River Basin/Prince William Sound:

Advocates for Victims of Violence, Valdez (advocacy, shelter) (907) 835-2999/ (800) 835-4044

Copper River Basin Child Advocacy Center, Gakona

(907) 822-3733#ffl \$+£&) - !' &' (fl/h/f \ci fgL www.crbcac.com

Cordova Family Resource Center, Cordova (advocacy, safe homes, transport) (907) 424-HELP (4357)/ (866) 790-4357 www.cordovaalaska.org

Interior:

Alaska Native Women's Coalition, Fairbanks (grassroots coalition) (907) 978-1852

www.aknativewomen.com

Interior Alaska Center for Non-Violent Living (IAC), Fairbanks (advocacy, shelter) (907) 452-2293/ (800) 478-7273 www.iacnvl.org

RCPC Stevie's Place, Fairbanks (CAC) (907) 374-2850 www.rcpcfairbanks.org/stevies_place.php

Kenai Peninsula:

Central Peninsula Child Advocacy Center, Kenai (*CAC*) (907) 690-2113

Seward Child Advocacy Center, Seward (CAC) (907) 769-1010

Seaview Community Services, Seward (advocacy, transport) (907) 224-3027 / (888) 224-5257 www.seaviewseward.org

South Peninsula Haven House, Homer (*CAC*, advocacy, shelter) (907) 235-8943/ (800) 478-7712 www.havenhousealaska.org

The Lee Shore Center, Kenai/Soldotna (advocacy, shelter) (907) 283-7257 www.leeshoreak.org

Kodiak:

Kodiak Area Native Association Child Advocacy Center, City of Kodiak (907) 486-9878

Kodiak Women's Resource & Crisis Center, City of Kodiak (*advocacy*, *shelter*) (907) 486-6171/ (888) 486-3625 www.kwrcc.org

North Slope:

Arctic Women in Crisis (AWIC), Barrow (*advocacy, shelter*) (907) 852-0261/ (800) 478-0267

Northwest Arctic:

Maniilaq Family Crisis Center, Kotzebue (advocacy, shelter) (907) 442-3969/ (888) 478-3969

Norton Sound/Bering Straight:

Bering Sea Women's Group, Nome (advocacy, shelter) (907) 443-5444/ (800) 570-5444 www.beringseawomensgroup.org

Kawerak Child Advocacy Center, Nome (907) 443-4379#fl St-L' S(!%% flZMf \ci fgL www.kawerak.org/servicedivisions/cfs/cac/

Southeast:

Aiding Women in Abuse and Rape Emergencies (AWARE), Juneau (advocacy, shelter) (907) 586-6623/ (800) 478-1090 www.awareak.org

Helping Ourselves Prevent Emergencies (HOPE), Craig (advocacy, transport) (907) 401-1611

S.A.F.E. Child Advocacy Center, Juneau (*advocacy, shelter*) (907) 463-6157

www.ccsjuneau.org/51,safechildadvocacycenter

Sitkans Against Family Violence (SAFV), Sitka (advocacy, shelter) (907) 747-6511/ (800) 478-6511 www.safv.org

Women in Safe Homes (WISH), Ketchikan (advocacy, shelter) (907) 225-9474/ (800) 478-9474 www.wishak.org

Women in Need Gaining Safety (WINGS), Metlakatla (advocacy, shelter) (907) 886-4555 www.aisu.org/service_wings.html

Yukon/Kuskokwim Delta:

Emmonak Women's Shelter, Emmonak (advocacy, shelter) (907) 949-1434 www.yupikwomen.org

Tundra Women's Coalition, Bethel (*CAC*, advocacy, shelter) (907)543-3456/ (800) 478-7799 www.tundrapeace.org

Community & Individual Healing:

Family Wellness Warriors Initiative, Anchorage & Statewide (programs for adults and communities) (866) 729-3994

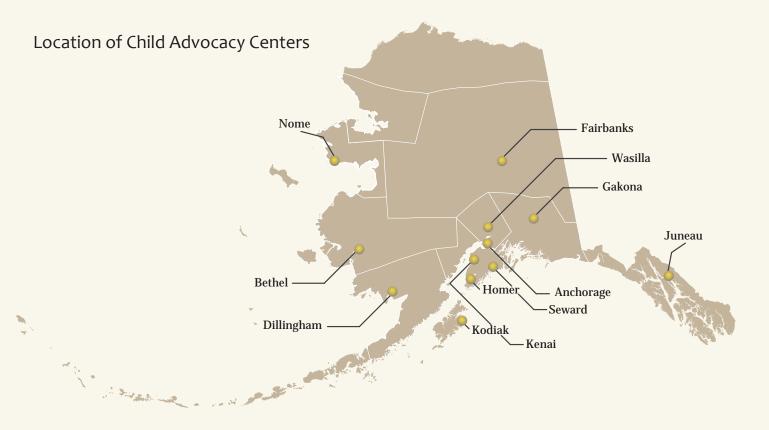
www.fwwi.org

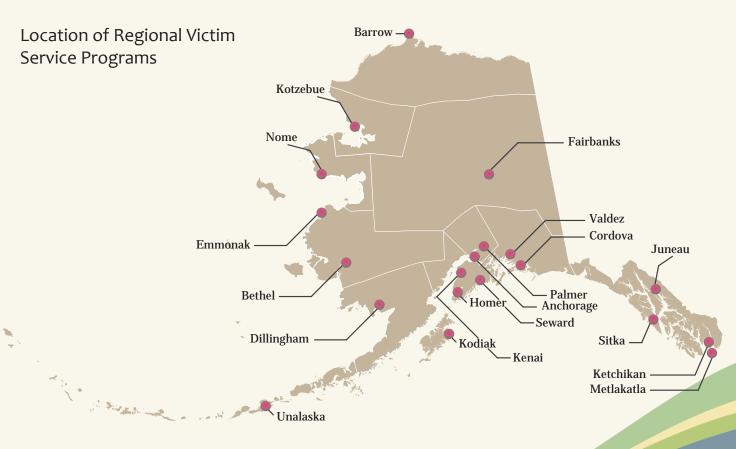
Healthy Families, Bethel & YK Region (programs for youth, adults, communities and offenders) (907)543-6\$\$\$#fl \$\$£(+,!'' &%for YKHC (907) 543-7300 for AVCP

Pathway to Hope, Chugiak and Nationwide (trainings for communities) justice4nativechildren@gmail.com

*CAC = Child Advocacy Center | † This list does not include all efforts in Alaska. To learn more about DV/SV prevention and intervention programs, visit the online directory of tribal DV/SV services at www.anthctoday.org/epicenter/\YUh\rfamilies and look for the EpiCenter's DV/SV Resource Guide"

Service Locations





Map boundaries indicate Tribal Health Regions used by the Alaska Native Epidemiology Center to report data.

Screening Resources

Resources are available for free at http://www.futureswithoutviolence.org/health and http://www.andvsa.org

	3. 1
Setting/Patient or Client Population	
Pediatrics (children and adolescents)	 "Identifying and Responding to Domestic Violence: Consensus Recommendations for Child and Adolescent Health" (http://fvpfstore.stores.yahoo.net/idandrestodo.html) Wallet-sized patient safety cards for teens about healthy vs. unhealthy relationships and how to get help (http://fvpfstore.stores.yahoo.net/hanging-out-or-hooking-up.html)
Reproductive Health (women and teen girls)	 "Reproductive Health and Partner Violence Guidelines: An Integrated Response to Partner Violence and Reproductive Coercion" (http://fvpfstore.stores.yahoo.net/reproductive-health-and-partner-violence-guidelines.html) Wallet-sized patient safety cards for use in OB care on healthy vs. unhealthy relationships, stress, coping strategies, and parenting (http://fvpfstore.stores.yahoo.net/perinatal-safety-card.html) Wallet-sized patient safety card on reproductive coercion and STD risk, healthy vs. unhealthy relationships, and options for safety (http://fvpfstore.stores.yahoo.net/reproductive-health-safety-cards.html)
Home Visitation (maternal & child health)	 "Healthy Moms, Happy Babies: A Train the Trainers Curriculum on Domestic Violence, Reproductive Coercion and Children Exposed" (http://fvpfstore.stores.yahoo.net/home-visitation-materials.html) Wallet-sized patient safety cards to start conversations with moms about violence and parenting (http://fvpfstore.stores.yahoo.net/home-visitation-safety-cards1.html)
General Health Care (all patient populations)	 "National Consensus Guidelines on Identifying and Responding to Domestic Violence Victimization in Health Care Settings" (http://fvpfstore.stores.yahoo.net/natconguidon.html) "Training videos on screening (http://fvpfstore.stores.yahoo.net/trainingvideos.html) "Button for providers to wear: "Is someone hurting you? You can talk to me about it." "Domestic Violence posters (http://fvpfstore.stores.yahoo.net/healthposters.html) "Health care folio, 6-page tool on health care response to DV, including JHACO standards, mandatory reporting, assessment tips and national resources (http://fvpfstore.stores.yahoo.net/geinfo.html) "Tool for evaluating/assessing needs of DV programs in health care settings (http://fvpfstore.stores.yahoo.net/evaluation.html) "Health Resource Center on Domestic Violence (support for improving health care response to DV, including toll free number, webinars, journal, educational tools and conferences): (www.futureswithoutviolence.org/content/features/detail/790/) "Wallet-sized patient safety cards for Native women on healthy vs. unhealthy relationships, stress, coping strategies, and supporting children (http://fvpfstore.stores.yahoo.net/safcarviolde.html) "Wallet-sized patient safety card on healthy vs. unhealthy relationships, how abuse affects health, coping strategies, supporting children, and options for safety (http://fvpfstore.stores.yahoo.net/new-patient-safety-card-for-women.html)
Dental Care	 "Ask, Validate, Document and Refer" tutorial video for dentists (http://fvpfstore.stores.yahoo.net/asvadoreatuf.html) Dental Folio, a 6-page tool for dentists on clinical signs of DV, assessment and response, national resources, mandatory reporting guidelines, etc. (http://fvpfstore.stores.yahoo.net/dentalfolio.html)
Behavioral Health, Counseling & Substance Abuse Treatment (adults)	"Real Tools: Responding to Multi-Abuse Trauma—A Tool Kit to Help Advocates and Community Partners Better Serve People with Multiple Issues." (www.andvsa.org/real-tools-manual/)

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List of Changes in 2nd Edition:

Inside cover:

Suggested citation updated for second edition

Alaska Department of Public Safety added as an organization contributing data for this report

Alaska Adult Protective Services corrected to Alaska Senior and Disabilities Services, Research and Analysis Unit

Alaska Department of Education corrected to Alaska Department of Education and Early Development

Named organizations whose staff reviewed the bulletin and provided feedback

Executive Summary:

Text changes to better reflect the purpose of collecting and sharing data on DV/SV and the future availability of data on ACEs

Minor text changes to better reflect the role of program evaluation

Minor text change to include reproductive coercion as part of recommended screening

Changes to summary statistics to reflect updated data, including changing child maltreatment "cases" to "victims" (there are a great number of cases than victims because one child may have experienced multiple cases of abuse)

Text changes to include recommendation of collaboration between healthcare and DV/SV services

Additional examples of Alaskan programs

Introduction:

Addition of paragraph on Alaskan programs to reduce violence and how they use data, and addition of paragraph defining the terms "Alaska Native" and "Alaska Non-Native."

Minor text changes, including clarification of forms of violence not addressed by existing surveys.

Pregnancy:

Updated 2008 Prenatal Risk Assessment Monitoring System (PRAMS) data to 2010

Minor text change in paragraph on screening

Added data on physical abuse during pregnancy

Childhood

Minor text change to better represent research findings on effects for adolescents and to place equal emphasis on all forms of maltreatment Minor text changes from child maltreatment "cases" to "victims"

Change in format/layout

Updated 2009 Office of Children's Services (OCS) data to 2011

Updated 2008 Childhood Understanding Behaviors Survey (CUBS) data to aggregated 2009 - 2010

Updated number of Alaska Native children served by Child Advocacy Centers (CACs) from 2010 to 2011 counts

Teen Years:

Updated 2009 Youth Risk Behavior Survey (YRBS) data to 2011

Text changes on increased prevalence of dating violence for older students and alternative school students

Added sentence about range of youth violence prevention and healthy relationships programs

Removed paragraph on Lead On! and Stand Up, Speak Up

Updated number of teachers trained and school districts in which the Fourth R curriculum is being implemented (to Nov 2012 numbers)

Adulthood:

Minor text changes, including rounding all decimals in research findings to nearest whole number

Added visual for percent of women screened for DV/SV in the Alaska Tribal Health System

Updated 2009 Government Performance and Reporting Act (GPRA) data on percentage of women screened to 2012

Corrected end of age range of GPRA data on women screened (from 44 to 40)

Elder Years:

Updated 2010 Alaska State Trooper (AST) report data to 2011

Updated 2010 Adult Protective Services (APS) report data to 2011

Updated categories of abuse in APS reports (adding abandonment, financial exploitation, and other forms of exploitation)

Changed "comprehensive statewide data" to "statewide population-level" data for increased clarity

Changed "Prevention" paragraph text as recommended by Alaska Native Elder Health Advisory Committee

Conclusion & Recommendations:

Text changes to better reflect the purpose of collecting and sharing data on DV/SV and the future availability of data on ACEs

Minor text change to better reflect the limitations of methodology and data gaps on child witnessing of violence

Minor text changes to better reflect the role of program evaluation

Minor text changes to emphasize best practice approach of providing "supported referrals" rather than "referrals"

Text changes to recommendation about studying health effects of DV/SV and ACEs

Addition of a recommendation on collaboration between healthcare facilities and DV/SV agencies

Data Tables:

Updated PRAMS, CUBS, OCS, YRBS, APS, and AST data

Added data from previous edition of bulletin underneath current data

Added additional indicator from PRAMS (physical abuse during pregnancy)

Corrected previous edition data for PRAMS indicator on provider education (from 2008 to 2007-2008)

Added confidence intervals to PRAMS data

Changed child and vulnerable Elder "cases" to "victims"

DV/SV Resources page:

Name of page changed from "DV/SV Organizations" to "DV/SV Resources"

Subtitle changed to better represent types of resources listed (focused primarily on safety and advocacy resources rather than community-level prevention or programs for offenders)

Minor text changes on bottom of page and link to online bulletin/online directory of tribally-run DV/SV services added

Fourth R and Green Dot listings removed because not safety and advocacy resources

Forensic Nursing Services of Providence and Willa's Way added

Changed Yup'ik Women's Coalition to Emmonak Women's Shelter to reflect focus on safety resources

Added "Community & Individual Healing" section with three programs

Contact information and websites updated

Basic categories of services listed (e.g. advocacy and shelter)

Screening Resources:

Removed materials no longer available, added new materials (including national card for Native women), and removed information on future ACEs screening tools

References:

Updated years of State of Alaska data used

Removed 2009 State of Alaska report on YRBS data and replaced it with YRBS data from State of Alaska and two State of Alaska reports (citations 61 – 63)

Removed citations on Lead On! and Stand Up, Speak Up programs

Alaska State Troopers corrected to Department of Public Safety

Alaska Adult Protective Services corrected to Alaska Senior and Disabilities Services, Research and Analysis Unit

List of Changes in 3rd Edition:

Elder Years:

Updated prevention information

DV/SV Resources page:

Updated contact information



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