



CDC WORKS TO ADDRESS VIOLENCE AGAINST AMERICAN INDIAN AND ALASKA NATIVE PEOPLE

The Centers for Disease Control and Prevention (CDC) is committed to improving the health and safety of American Indian Alaska Native (AIAN) people. CDC works to understand and address Missing or Murdered Indigenous Peoples (MMIP) issues by sharing data and violence prevention efforts.

CDC uses a [shared risk and protective factors approach](#) to understand root causes of violence. This means identifying and reducing the factors that increase the risk of violence (e.g., repeated or prolonged stress, diminished economic opportunities) and increasing the factors that protect or buffer people from violence (e.g., family connectedness, commitment to school). Understanding these factors can help prevent violence.

AMERICAN INDIAN ALASKA NATIVE PEOPLE EXPERIENCE HIGH RATES OF HOMICIDE

According to NVSS 2018 data

- Homicide was the 3rd leading cause of death among AIAN males aged 1–44 years.
- Homicide was the 6th leading cause of death among AIAN females aged 1–44 years.

According to NVDRS 2015–2017 data:

- Interpersonal conflicts are a common circumstance for homicides among AIAN people.
- Homicides were most often precipitated by arguments (46%), physical fights between two people (26%), intimate partner violence (18%), and problems with a family member (12%) or a friend or associate (12%).
- A quarter (25%) of homicides were related to another serious crime (felony incidents).

Note: NVDRS 2015–2017 data are from 34 states, four California counties, the District of Columbia, and Puerto Rico. NVDRS circumstance data are reported only for homicide cases with known circumstances. Homicides may have multiple circumstances. Data on circumstances come from law enforcement and coroner and medical examiner reports. Circumstances are limited to scene evidence and what is known and reported by informants interviewed by death investigation teams.



How big is this issue?

CDC uses datasets from the [National Vital Statistics System \(NVSS\)](#), the [National Violent Death Reporting System \(NVDRS\)](#), and the [National Intimate Partner and Sexual Violence Survey \(NISVS\)](#), to inform MMIP efforts.

INTIMATE PARTNER VIOLENCE (IPV) AND SEXUAL VIOLENCE (SV) EXPERIENCED BY NON-HISPANIC (NH) AMERICAN INDIAN ALASKA NATIVE (AIAN) PEOPLE

According to NISVS 2010-2012 data:

NH AIAN people experience high rates of intimate partner violence (IPV) during their lifetime.

- An estimated 48% of NH AIAN women and 41% of NH AIAN men experienced contact sexual violence, physical violence, and/or stalking by an intimate partner.
- Contact SV includes rape, being made to penetrate someone else, sexual coercion, and/or unwanted sexual contact.

NH AIAN people experience high rates of sexual violence (SV) during their lifetime.

- An estimated 46% of NH AIAN women and 23% of NH AIAN men experienced some form of contact SV. Contact SV includes rape, being made to penetrate someone else, sexual coercion, and/or unwanted sexual contact.
- About 29% of NH AIAN women were raped, and 13% of NH AIAN men were made to penetrate someone else.
- 41% of NH AIAN women and over 16% of NH AIAN men experienced non-contact forms of SV, such as someone exposing their sexual body parts and verbal street harassment.

DVP'S WORK WITH TRIBAL COMMUNITIES

CDC's Division of Violence Prevention (DVP) works with tribal communities through its [Rape Prevention and Education](#) (RPE) and [Domestic Violence Prevention Enhancement and Leadership Through Alliance](#) (DELTA) programs.

RAPE PREVENTION AND EDUCATION (RPE) PROGRAM

RPE provides funding and technical assistance (TA) to health departments in all 50 states, the District of Columbia, and four territories. Many of these states work with tribal communities to implement SV prevention strategies. For example:

South Dakota's RPE program created a Tribal Advisory Board that works closely with Tribal representatives to build relationships and develop culturally appropriate primary prevention strategies. As part of this work, the Sisseton Wahpeton Oyate (SWO) Tribe is currently funded to implement [Shifting Boundaries](#) through their Youth Department. Shifting Boundaries is a two-part intervention (classroom-based curriculum and program-wide component) designed to reduce dating violence and sexual harassment among middle school youth by highlighting the consequences of this behavior for perpetrators and increasing staff surveillance of unsafe areas. Several members of the staff have recently gone through training to implement the program, and they are working with the [South Dakota Network Against Family Violence and Sexual Assault](#) to adapt the program for a tribal youth population. The RPE program is also evaluating a youth engagement strategy in a large Tribal population in the state.

DOMESTIC VIOLENCE PREVENTION ENHANCEMENT AND LEADERSHIP THROUGH ALLIANCE (DELTA) PROGRAM

DELTA funds 10 State Domestic Violence Coalitions (SDVCs) to implement statewide IPV prevention efforts, while also funding local communities to implement IPV prevention activities. Some of these states work with tribal communities to implement intimate partner violence prevention strategies. For example, the Alaska Network on Domestic Violence and Sexual Assault (ANDVSA) works with the Alaskan Native Community to implement the Boys Run I toowú klatseen (BRITK) afterschool program. This ten-week program helps boys in 3rd-5th grade gain the skills they need to build healthy relationships using Southeast Alaska traditional tribal values to promote respect, equitable gender norms, and to break down unhealthy norms about masculinity. Adult volunteers from the community (mostly men) act as role model "coaches", who facilitate interactive activities and help boys train for a 5K community fun run.

For more information on CDC's tribal work, visit: www.cdc.gov/tribal.html

For National Center for Injury Prevention and Control's visit: www.cdc.gov/injury/fundedprograms/tribal.html



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