On January 31, 2013, President Obama designated February as Teen Dating Violence Prevention Month. He highlighted the problems of teen dating violence, violence against women, and sexual assault. On February 28, Congress reauthorized the Violence Against Women Act, which includes expanded protections for American Indians in a provision that would allow tribal authorities jurisdiction in some cases where non-Indians rape or assault American Indians on Federal Indian lands.

 Dating violence is defined as being hit, slapped, or physically hurt on purpose by a boyfriend or girlfriend. According to Teen Dating as a Public Health Issue, in 2009 13.4 percent of Native American high school students reported experiencing dating violence, second only to Black students at 14.3 percent.

Indian Health Services’ American Indian/Alaska Native National Behavioral Health Strategic Plan 2011-2015 points out that domestic violence and sexual assault are serious problems in Indian Country. A 2008 Centers for Disease Control and Prevention report found that 39 percent of American Indian/Alaska Native (AI/AN) women have experienced intimate partner violence—the highest percentage in the U.S. One out of every three AI/AN woman is raped in her lifetime, and AI/AN women are more than five times as likely to die from domestic violence-related injuries as women of any other race.

Building Domestic Violence Health Care Responses in Indian Country: A Promising Practices Report stated that many advocates believe that violence against Native women is rooted in the colonization of tribal nations when an unnatural worldview brought a level of
Greetings to all my relatives, I am happy to announce that the Indian Alcohol and Substance Abuse Interdepartmental Coordinating Committee (IASA) and the Office of Indian Alcohol and Substance Abuse have been very active in the last few months, primarily through the workgroups that have been established to address various aspects of the Tribal Law and Order Act specific to substance abuse in Indian Country.

As a backdrop, IASA is comprised of over 60 members representing a broad range of federal agencies and departments. The goals of the IASA Committee are to: (a) help to identify opportunities and programs relevant to Indian tribes and Native communities, (b) address issues of concern to Indian tribes and Native communities related to alcohol and substance abuse, (c) serve as a focal point within the federal government for coordination, collaboration, and outreach on alcohol and substance abuse issues affecting the American Indian and Alaska Native population nationwide, and (d) serve as a liaison advisory body to the federal partners responsible for providing programs and services in Indian Country relative to alcohol and substance abuse.

The IASA Committee conducts its work according to a charter, and carries out its activities through a collaborative group of six standing workgroups. In the coming years, the Committee will continue to operate under this structure, and will place additional emphasis on expanding and balancing the departmental representation in the individual workgroups. Below is a brief snapshot of the progress that each workgroup has made to date:

Memorandum of Agreement (MOA) Workgroup
The MOA Workgroup is charged with overseeing the annual review of the IASA MOA to ensure the MOA serves as an appropriate guiding document for the Committee. This document has been created and is available for review at www.samhsa.gov/tloa.

Newsletter/Website Workgroup
The Newsletter Workgroup takes the lead for all phases of planning, developing, and publishing the IASA newsletter Prevention & Recovery: A Quarterly Newsletter, which highlights successful practices and stories, tools, resources, information, and current research addressing substance abuse in Indian Country. There were over 4,000 downloads of the newsletter in the first year. In the last six months, the newsletter downloads have increased to over 40,000, which is a tremendous indicator that the interagency efforts and outreach are gaining momentum. We look forward to continuing to be a valuable information resource for tribes in the months to come.

Tribal Action Plan Workgroup
The Tribal Action Plan Workgroup coordinates the Committee’s guidance and support for tribes that choose to adopt a resolution for the development of a Tribal Action Plan (TAP) to address substance abuse within their communities. An example of a tribal resolution and plan development guidelines are available at www.samhsa.gov/tloa.

Native Youth Educational Services Workgroup
The Native Youth Educational Services Workgroup serves as a resource for tribes to gain access to educational programs and resources that will assist with alcohol, drugs and substance abuse awareness, prevention and treatment available to Native youth.

Inventory/Resources Workgroup
The Inventory/Resources Workgroup prepares and make available to tribes a list of national, state, tribal, and local alcohol and substance abuse programs and resources for consideration and use in the development of the Tribal Action Planning process to address substance abuse in tribal communities.

(continued on page 6)
Affirmation of Tribal Court Jurisdiction

On February 28, 2013, Secretary of the Interior Ken Salazar and Assistant Secretary-Indian Affairs Kevin K. Washburn praised the passage of the Violence Against Women Act, which includes important provisions for federally recognized tribal communities.

“This legislation is especially significant for vulnerable populations safer,” Salazar said. “By providing stronger protections and greater resources to states and Indian tribes, this legislation will make women and vulnerable populations safer,” Salazar said. “This legislation is especially significant for the First Americans because it closes a gaping legal loophole that prevented the arrest and prosecution of non-Indian men who commit domestic violence against Indian women on federal Indian lands. This historic legislation, which recognizes and affirms inherent tribal jurisdiction over non-Indians in domestic violence cases, will provide much needed tools to tribal justice systems to effectively protect Indian women from abuse.”

“I applaud Congress’s reauthorization of the Violence Against Women Act today. Tribal leaders, tribal law enforcement, and tribal courts are all too familiar with this type of violence. It is shameful that for far too long, many American Indian women victims came to accept that there was nothing they could do when their abuser was non-Indian,” said Assistant Secretary Washburn. “Now, tribal courts have the ability to enforce protection orders against non-Indians, regardless of where the order originated, and to prosecute any individual who stands accused of domestic violence on a federal Indian reservation.

American Indian women are now safer with the passage of this law.”

The Senate voted for a broadened version of the landmark law, first enacted in 1994, which provides a comprehensive approach to violence against women by combining tough new provisions to hold offenders accountable with programs to provide services for the victims of such violence. The Senate version approved by the House also enhances protections for other vulnerable populations, such as American Indians and gay, lesbian, bisexual and transgender victims. President Obama signed the bill on March 7.

For more information, contact, Jessica Kershaw at the Department of the Interior 202-208-6416.


Violence Against Women: One Man’s Story

Within Indian Country nearly half of all Native women—46%—have experienced rape, physical violence, or stalking by an intimate partner. One in three Native women at some point in their life will experience the violence and trauma of rape. Furthermore, on some reservations Native women are murdered at a rate of more than 10 times the national average. In short, sexual violence against women in Indian Country is an epidemic, and has even occurred within my family.

My name is Stephen La Cour Jr., and my family name is KNOWES, which means Little Eagle Thunder Clan. My mother is Potawatomi/Kickapoo, and my father is Kiowa. When they were younger both of my parents moved off-reservation in search of jobs and better opportunities. So naturally, I grew up off-reservation. Although I was a city Indian, I still spent enough time on-reservation to be aware of the problems that exist there. You hear of problems within Indian Country as a whole, but in small tribal communities violence against women, in particular sexual violence, was something that simply was NOT talked about.

When I learned my mother had been a sexual violence victim when she was young, I was shocked! This happens in other families, but not mine. My mother, thank the Creator, is a very strong woman. She was raised very traditional, and I believe that is what helped her. As she explained to me, she just had to “deal with it”. She had no one she could turn to for help, no resources available for her. So she had to deal with it and she did. She didn’t want it to get in her way, let it affect her life. Although my mother was strong and was able to get past her ordeal, there are plenty of women who are not so lucky. This causes problems in communities and families that lead to even more problems.

Only today are we beginning to really talk about this issue and to address it. Initiatives like ‘The Healing Circle’ are trying to create awareness and policy aimed at combatting this issue. One victim is one too many. The recent passing of the Violence against Women Act is another big step. Of course, like any community epidemic—and sexual violence against women in Indian Country is an epidemic—the problem that was created over decades cannot be solved so quickly. My mother is a strong woman, but no woman should have to be that strong. And, I don’t want my little nieces and future children to have to be that strong as well.

Stephen Lynn La Cour, Jr. Knowes (Little Eagle) Kickapoo Tribe in Kansas
Shawl Stories Project Honors Native Women

With the national spotlight on teen dating violence during the month of February, it is important to also recognize the alarmingly high rate at which Native women and girls experience intimate partner violence. According to the U.S. Department of Justice, Native women are 2.5 times more likely to experience violence than other women in the United States. Given the great need to call attention to this issue, the Family and Youth Services Bureau (FYSB) and the Family Violence Prevention and Services Program would like to acknowledge the efforts of advocates from the Maliseet Domestic and Sexual Violence Advocacy Center in Maine, who started the Shawl Project.

Established in October 2006, the Shawl Project is a year-round initiative to both raise awareness and serve as a healing exercise for Native women and children survivors and victims of domestic and sexual violence. Jane Root, Director of the Maliseet Domestic and Sexual Violence Advocacy Center, explains her motivation in founding the project:

"As shawls are held in high esteem by Native American women across Indian Country, it seemed a most appropriate symbol. Each shawl is made by a survivor [and] tells its own story. Many tribal Domestic and Sexual Violence Programs across Indian Country have begun their own Shawl Story Projects since first introduced nationally in 2007."

Unique colors symbolize the experience of different victims and survivors:

- **A Blue shawl** signifies childhood physical and/or sexual abuse
- **A yellow or beige** shawl signifies domestic abuse (physical, emotional, verbal, sexual)
- **A red shawl** signifies sexual abuse experienced as an adult
- **A white shawl** honors those who died as a result of domestic and/or sexual violence
- **A brown shawl** signifies abuse experienced as a result of the victim being a Native Woman

(continued on page 5)

Strengthening Youth Self-Advocacy

The Administration for Native Americans recently provided a three-year grant to the National Indian Women's Health Resource Center (NIWHRC) for their Improving the Well-Being of Children Project Implementation. NIWHRC is a national nonprofit organization whose mission is “to assist American Indian and Alaska Native women achieve optimal health and well-being throughout their lifetime.” NIWHRC Board of Directors represent each of the 12 Indian Health Service regions and serve as advocates for women's health needs.

**Project Snapshot**

- A blue shawl signifies childhood physical and/or sexual abuse
- 3 full-time equivalent jobs created
- 5 Native American consultants hired
- 63 Elders involved
- 300 youth involved
- $24,307 in resources leveraged
- 35 individuals trained
- 11 partnerships formed

The purpose of the project was to promote healthy marriages through sexual health advocacy, and raise awareness of the importance of communication between youth and adults in at least 120 Native American families in the three communities. The project’s objective was to train local community members to deliver the “WellSpeak: Building Intergenerational Communications about Healthy Sexuality for Strong Marriages”

(continued on page 7)
Reauthorizing the Violence Against Women Act

Key Provisions in S. 47

While tremendous progress has been made since the Violence Against Women Act (VAWA) was first enacted, domestic violence, sexual assault, and stalking are still significant problems facing women, families, and communities. Domestic violence causes 3 deaths a day to women, and 1 in 4 women have experienced severe physical violence by an intimate partner. One in 5 women and 1 in 71 men have been raped in their lifetimes. The new VAWA bill signed into law by President Obama on March 7 will continue effective programs, make targeted expansions to address the needs of especially vulnerable populations, and help prevent violence in future generations.

Some Important Key Provisions

- The bill addresses high rates of dating violence and sexual assault on college campuses by requiring colleges and universities to provide information to students about domestic violence, dating violence, sexual assault, and stalking, and inform students and staff about the number of these crimes that occur on and near campus. Colleges will also be required to create and disseminate policies describing the protections, resources, and services available to victims to help them safely continue their education.

- Researchers estimate that for every woman killed in a domestic violence homicide, nine more are nearly killed. The bill integrates screening for homicide risks throughout existing VAWA programs and requires states to develop goals and activities to reduce domestic violence homicides.

- Native American women suffer among the highest rates of domestic violence. The bill closes gaps in jurisdiction and recognizes the authority of tribes to prosecute domestic violence crimes against American Indian and non-Indian perpetrators.

- Sexual assault is one of the most underreported violent crimes in the country, and victims often suffer long-term physical and emotional trauma. The bill creates state grant funding for law enforcement, prosecutors, and victim services professionals to work together to respond to these crimes and helps law enforcement agencies tackle their backlog of rape kits.

- The bill addresses the high rates of dating violence and sexual assault experienced by teens and young adults. The bill will help schools, youth organizations, and domestic violence agencies work more effectively with youth and engage young people in stopping violence before it starts.

Shawl Stories Project (continued from page 4)

FYSB and the Family Violence Prevention and Services Program are proud to support efforts to raise awareness of domestic violence against Native women. According to Root, the Shawl Project was created to bear witness to the victims and survivors of domestic and sexual violence against Native women and children; to foster and further the healing process for those who are survivors of violence or have lost a loved one to domestic violence; to educate, document, and raise our society’s awareness of the true extent and pervasiveness of violence against women and children; [and] to provide a nationwide network of support, encouragement, and information for other tribal communities starting their own shawl projects.

For more information and resources for American Indian/Alaska Native women and domestic violence, please visit the National Indigenous Women’s Resource Center, at www.niwr.org.

For more information on how the Family Violence Prevention and Services Program (FVPSP) supports programs for American Indian and Alaska Native women, visit the FVPSP webpage on tribes.
Addressing Substance Abuse in Tribal Communities

Alcoholism and addiction are among the most severe public health problems facing American Indian and Alaska Native people. According to SAMHSA’s 2011 National Survey on Drug Use and Health (NSDUH), the rate of substance dependence or abuse among American Indians or Alaska Natives age 12 or older was twice that of other ethnic backgrounds (See Figure 1). The rate of current heavy alcohol use among this population was the highest at 11.6 percent. To address these issues, and in accordance with the Tribal Law and Order Act (TLOA), SAMHSA has created the Office of Indian Alcohol and Substance Abuse (OIASA).

As directed by Congress through TLOA, SAMHSA has taken a lead role in establishing OIASA and coordinating efforts among the U.S. Departments of Health and Human Services (HHS), Interior (DOI), and Justice (DOJ). President Obama signed TLOA into law in July 2010. The law requires a significant amount of interagency collaboration in order to build upon previous efforts that address alcohol and substance abuse in Indian Country, as well as create a sustainable model for the future.

In July 2011, a Memorandum of Agreement was signed by HHS Secretary Kathleen Sebelius, DOI Secretary Ken Salazar, and Attorney General Eric Holder. The agreement outlined how OIASA will coordinate tribal substance abuse programs across the federal government, with special emphasis on promoting programs geared toward reaching youth and offering alternatives to incarceration.

Today, OIASA is offering technical assistance to tribal governments that need help in developing their Tribal Action Plans (TAP). The TAP coordinates resources and programs to assist tribes in achieving their goals in the prevention, intervention, and treatment of alcohol and substance abuse.

Rod Robinson joined SAMHSA as the new director of OIASA in September. Robinson, an enrolled member of the Northern Cheyenne Tribe in Montana, has been working with tribes throughout the United States and Canada in the areas of substance abuse prevention, intervention, treatment, and strategic planning for over 30 years: “With the enactment of the Tribal Law and Order Act of 2010, the Tribes and Congress very wisely created a Tribal Action Planning process as a dynamic opportunity to gain greater justice, safety, and wellness in Indian Country.”

With a structure in place for the federal government to work holistically with tribal communities through OIASA, Robinson said that momentum is building. Tribes have elevated their level of commitment to how they are going to address substance abuse and treatment within their communities. He also emphasized the importance of respecting local leadership and culture throughout this process. “Tribes want to find a real solution,” Robinson said. “OIASA is committed to continuing to ensure that a tribal perspective is considered in the process of developing interdepartmental cooperation.”

For more information about OIASA and TLOA including resources to download, visit www.samhsa.gov/TLOA.


Please watch the website for the progress being made through the IASA’s efforts to assist tribes, as well as for opportunities that will be forthcoming that are intended to gather input, ideas and perspective from Indian Country, as we all work toward making our communities safer, healthier and more hopeful.

Minimum Program Standards
The Minimum Program Standards Workgroup develops and establishes minimum program standards for substance abuse prevention, intervention, and treatment, and collaborates with federal partners to identify common standards for similar programs and activities.

Be well, Brothers and Sisters.

For more information about OIASA, please visit www.samhsa.gov/tloa or call (240) 276-0549.
Sexual Assault Response Team Initiative Established

DOJ’s Office for Victims of Crime (OVC), in partnership with the Indian Health Service (IHS) and the Federal Bureau of Investigation (FBI), held the first Federal Advisory Committee on the American Indian/Alaska Native (AI/AN) Sexual Assault Nurse Examiner-Sexual Assault Response Team (SANE-SART) Initiative at the Agua Caliente Band of Cahuilla Indians Reservation in California on December 4–5, 2012. Established by OVC with support from the Attorney General, the Federal Advisory Committee will inform OVC and its federal, tribal, and nongovernmental partners of the existing resources, challenges, and gaps related to sexual assault response. The committee will also make recommendations for funding, training, and policies related to sexual violence service provisions in AI/AN communities.

Members of the committee include representatives from tribes and federal agencies, experts in the field of sexual assault services, and individuals who have experience working with AI/AN communities. Committee members were welcomed by Joyce Frost, Acting OVC Director; Rose Weahkee, Ph.D. (Navajo), Director of the Division of Behavioral Health, IHS; and Karen Joyce-McMahon, Office for Victim Assistance, FBI. The committee was chaired by Sarah Deer (Muscogee) and members received a traditional opening from Jim Clairmont (Sicangu Lakota Oyate/Rosebud Sioux Tribe).

The committee focused on an overall collaboration theme with three issues identified as main components to support: 1) written sexual violence response protocols, 2) culturally relevant responses, and 3) prioritization of sexual violence resources. The committee meeting was open to the public and members had the opportunity to listen to public comments.

Strengthening Youth Advocacy (continued from page 4)

Members of the Federal Advisory Committee on the American Indian/Alaska Native (AI/AN) Sexual Assault Nurse Examiner-Sexual Assault Response Team (SANE-SART)
Photo courtesy of Office of Victims of Crime and Indian Health Service.

curriculum, which is a culturally-appropriate sexual health program created by NIWHRC.

To accomplish this, the project director first trained one project coordinator from each of the three partner organizations, who then helped recruit local trainers. The trainers were individuals already working with families in the community through IPTF, CRC, or NAYA. By the end of the project period, 29 local community members (nine to 10 at each site) received training on the WellSpeak curriculum.

Project staff conducted focus groups with participants and found that, as a result of this project, the local trainers’ confidence in serving their communities has greatly increased; many knew that parents wanted a dialogue with their teenagers, but did not know how to help them. Trainers are now using modules from the curriculum in their own jobs, and have accurate information to share with their families. In addition, participants reported that this project helped create a safe environment to discuss topics that are difficult to talk about by building trust between adults and youth. Parents and caregivers enjoyed spending time with their children, and through receiving accurate information, felt empowered to talk openly with them about important health issues.

Participants reported that learning about their own bodies and having facts to be able to talk with others in their lives were the best parts about the workshops. Adolescents felt more confident saying no to things they did not want to happen to their bodies or did not want to participate in. Moreover, young males got to see examples of proud and responsible behaviors that they can carry on. Both youth and adults learned more about responsibility in decision-making.

While there has been a belief that it is taboo to talk about sexual health in Native communities, NIWHRC is finding through this project that the belief is a myth. They see people who want to talk about these things, and this project has provided the right setting and information for them to do that.

For more information about ANA grants and services, please visit our website: www.acf.hhs.gov/programs/ana or call 1-877-922-9262.
Taking A Stand Against Dating and Domestic Violence and Sexual Assault (continued from page 1)

The major health challenges facing AI/AN communities, whether in Tribal, rural, or urban areas, relate significantly to behavioral health factors, including alcohol, substance abuse, mental health, and violence.

Alcohol, Drug Abuse Correlation in Violent Behavior

While alcohol and drug abuse do not cause such violent behavior, research has suggested that there are correlations. According to Weahkee, alcohol and drug abuse plays a role in teen dating violence and sexual assault in Native communities. “While published statistics and correlations of alcohol and substance abuse and sexual assault in American Indians and Alaska Natives are difficult to obtain, the inference from other published studies show that at least half of all acquaintance sexual assaults involve alcohol consumption by the perpetrator, victim, or most commonly, both. In alcohol or drug facilitated sexual assault, the victim may have the inability to provide consent. Service providers need to be especially sensitive to the issue of self-blame for victims who were sexually assaulted when drugs or alcohol are involved.”

Rose L. Weahkee, Ph.D. a member of the Navajo Nation and director of IHS’s Division of Behavioral Health, in Rockville, MD, said: “The higher rates of violence against women in AI/AN communities, coupled with overarching cultural, historical, and intergenerational trauma, make these areas a high priority for communities and service agencies that respond to violence. A multi-pronged approach is needed to effectively address prevention, reduction, and victim treatment efforts.”

Tiffany Barrett, program coordinator, Family Violence Program House of Hope, Citizen Potawatomi Nation agrees. “Most of the clients we see are due to their abuser becoming drunk. A close second is methamphetamine use, which is a big drug of choice where we are. And we are seeing more clients with much more severe injuries due to that alcohol and drug abuse. When their abuser has been drinking or is on drugs they think themselves invincible and seem to do a lot more damage.”

Tina Olson, a member of the Pascua Yaqui Tribe and co-director of Mending the Sacred Hoop, said: “Both Native men and women use alcohol in increasing numbers to cope with their victimization, to cope with poverty and unemployment and isolation. We have a lot of homeless Native women in Duluth, a city of about 80,000. They are so much more vulnerable to the elements out there and being sexually violated. But we also have women up on the reservations, Leech Lake or White Earth and Red Lake. Last December we held a Survivor and Advocate Gathering at the Cloquet Forestry Center for Native survivors of sexual assault. It was a two-day camp where women could talk about the challenges we have and what responses we need.”

In 2009, IHS received increased funding through the Domestic Violence Prevention Initiative (DVPI). In FY 2010, Congress appropriated $10 million for the program. This Initiative supports pilot programs in AI/AN communities addressing domestic violence and sexual assault response and advocacy. The approximately $10 million annual appropriation supports 65 pilot projects throughout Indian Country. With these funds, the IHS is expanding its outreach advocacy programs into Native communities, expanding the Domestic Violence and Sexual Assault Pilot Project, and providing funding for training and the purchase of forensic equipment to support the Sexual Assault Nurse Examiner (SANE) and Sexual Assault Forensic Examiner (SAFE) programs.

Providing Victim-centered Coordinated Community Responses

According to Weahkee, one challenge facing Native communities is developing effective responses to sexual violence and providing a victim-centered coordinated community response. “Collaboration is key for all federal, tribal, state, or local stakeholders to develop integrated victim-centered response systems. In 2012, IHS trained over 120 participants in the development of community Sexual Assault Response Team (SART) protocols in seven regional training sessions. During the two-day training, participants gained information on the collaborative

“ Intimate partner violence poses a significant health threat across Indian Country.”
Taking A Stand Against Dating and Domestic Violence and Sexual Assault (continued from page 8)

process between health care, law enforcement, advocacy groups, and prosecution for creating a community response to sexual violence. Participants were provided tools to develop or enhance community response protocols to sexual violence, tools for evaluation, and ways to facilitate SART development,” she said.

“Through the IHS DVPI, eight SANE-SART demonstration sites have implemented coordinated responses to improve the response to sexual violence. Tribal communities have developed coordinated community responses to sexual assault that incorporate all services and care that a victim deserves.

“Societal norms tend to lead to a widespread blaming of the victim for being sexually assaulted, especially when alcohol or drug use is involved. Specific initiatives, such as the ‘Start by Believing’ campaign initiated by the Chinle, AZ, DVPI program are aimed at improving the response to violence by community members, law enforcement, and medical and counseling professionals,” added Weahkee.

Funding Violence Against Women

In December 2012, the Citizen Potawatomi Nation received more than $1.4 million in grants from the Department of Justice. About $900,000 in funding from the Office of Violence Against Women will go to the Nation’s House of Hope and FireLodge Youth and Family Services.

The House of Hope program provides legal and counseling assistance and a variety of post-emergency shelter services so that victims can gain independence from their abusers.

The Citizen Potawatomi Nation Tribal Court was awarded $571,522 by DOJ’s Office of Justice Programs Bureau of Justice Assistance.

“The additional resources will help us increase our victim advocacy and improve our tribal court. These programs and services benefit the community as a whole by building stronger families and contributing to a safer community,” said Linda Capps, Citizen Potawatomi Nation vice chairman, in a press release announcing the grant.

Writing in The New York Times (Feb. 26, 2013), Pulitzer Prize-winning author Louise Erdrich, a member of the Turtle Mountain Band of Chippewa Indians, recounted how a growing number of Native American women in Minnesota wear red shawls to powwows to honor survivors of sexual violence.

She said: “If our hearts are on the ground, our country has failed us all. If we are safe, our country is safer. When the women in red shawls dance, they move with slow dignity, swaying gently, all ages, faces soft and eyes determined.

Others join them, shaking hands to honor what they know, sharing it. We dance behind them and with them in the circle, often in tears, because at every gathering the red shawls increase, and the violence cuts deep.”
**Announcements**

**The National Intimate Partner and Sexual Violence Survey (NISVS)**
On average, 24 people per minute are victims of rape, physical violence, or stalking by an intimate partner in the United States, based on a survey conducted in 2010. Over the course of a year, that equals more than 12 million women and men. Those numbers only tell part of the story—more than 1 million women are raped in a year and over 6 million women and men are victims of stalking in a year. These findings emphasize that sexual violence, stalking, and intimate partner violence are important and widespread public health problems in the United States. The full report can be found at [http://www.cdc.gov/violenceprevention/nisvs/index.html](http://www.cdc.gov/violenceprevention/nisvs/index.html).

**Free Health Planners for AI/AN Communities**
The National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS), part of the National Institutes of Health (NIH), has developed a series of free health planners—titled “A Year of Health”—that provide health tips and information about staying healthy and managing conditions of the bones, joints, muscles and skin.

Order a year of health planners free-of-charge for your patients or constituents today. Call the NIAMS Clearinghouse toll free at 877–226–4267 (TTY: 301–565–2966) or visit the NIAMS Publication Ordering System.

**Events**

**National Crime Victims’ Rights Week**
Office for Victims of Crime
Each April since 1981, OVC has helped lead communities throughout the country in their annual observances of National Crime Victims’ Rights Week (NCVRW) by promoting victims’ rights and honoring crime victims and those who advocate on their behalf.

In 2013, NCVRW will be observed April 21–27, 2013. The theme for NCVRW 2013 is “New Challenges. New Solutions.” and the theme colors are midnight blue and orange. The theme colors (PDF 258 kb) are presented in full-color (CMYK) builds. Comparable spot colors and RGB values are available as well.

**4th Annual National Tribal-Public Health Summit**
“Maps, Moccasins and Milestones: Our Journey to Wellness”

The NIH invites proposals for presenters addressing tribal public health topics such as:

- Public Health Accreditation
- Promising research
- Epidemiological practices, findings, or innovations in advancing AI/ANs in Public Health
- Traditional practices
- Social marketing
- Environmental Health
- Emergency Preparedness
- Building successful partnerships
- Public Health messaging
- Behavioral Health
- Health promotion and disease prevention
- Digital Storytelling
- Public Health Law
- Community Assessments

For Information regarding hotels, please refer to this document, Area Hotels (PDF) [http://nihb.org/docs/02132013/Area%20Hotels.pdf](http://nihb.org/docs/02132013/Area%20Hotels.pdf).

For more information on the 2013 Tribal-Public Health Summit, please direct all questions regarding Registration, Exhibitor and Sponsorship to phs@nihb.org. Please direct all questions regarding Call for Proposals to Blake Harper, bharper@nihb.org.

**11th Women Are Sacred Conference**
June 10-12, 2013 | Hard Rock Hotel and Casino | Albuquerque, NM

“Reclaiming Our Space, Vision & Voices to Strengthen the Grassroots Advocacy Movement to End Violence Against Native Women”

Join us to share ideas and create the solutions to ensure safe spaces for Native women and tribal communities.

Women, men, youth/children, elders, straight/LGBTQ - together we can strengthen our social justice movement to end violence against Native women.

**Fatherhood is Leadership Regional Seminar**
April 18-19, 2013 | Nashville Convention Center | Nashville, TN

Join us in strengthening fathers for their children, families and community.

- Register online at: [www.NativeAmericanFathers.org](http://www.NativeAmericanFathers.org)
- By email: elviraj@aznaffa.org
- By fax: (480) 833.5009
MENDING THE SACRED HOOP works from a social change perspective to end violence against Native women and children while restoring the safety, sovereignty, and sacredness of Native women. We are committed to strengthening the voice and vision of Native peoples through grassroots efforts to restore the leadership of Native women.

The Mending the Sacred Hoop Technical Assistance Project (TA-Project) provides training and technical assistance nationally to Office on Violence Against Women tribal grantees to support them in their efforts to address violence against women in their communities.

Through the Sacred Hoop Tribal Domestic Violence Coalition, we work to organize and raise the voices of Native women throughout Minnesota to build the capacity of survivors, advocates, Native women's organizations and victim service providers to end violence against American Indian women. For information on upcoming coalition events, go to Sacred Hoop Coalition Events.

Mending the Sacred Hoop, Inc. is supported by the U. S. Dept. of Justice, Office on Violence Against Women; the Minnesota Office of Justice Programs; and generous contributions from individual donors. Migwiich!

Research on Teen Dating Violence in Understudied Populations:
Postdoctoral Fellowship FY 2013 Modification 1
Deadline: April 22, 2013
https://ncjrs.gov/pdffiles1/nij/sl001050.pdf

Research and Evaluation on Violence Against Women:
Teen Dating Violence, Sexual Violence, and Intimate Partner Violence - FY 2013 Grant
Deadline: April 22, 2013
https://ncjrs.gov/pdffiles1/nij/sl__ 001050.pdf

VAWA 2013 and Tribal Jurisdiction Over Non-Indian Perpetrators of Domestic Violence
Congress recently passed the Violence Against Women Reauthorization Act of 2013, or “VAWA 2013.” This new law includes significant provisions addressing tribal jurisdiction over non-Indian perpetrators of domestic violence. These tribal provisions were proposed by the Justice Department in 2011.

What Will Tribes Be Able To Do Under The New Law?
Tribes will be able to exercise their sovereign power to investigate, prosecute, convict, and sentence both Indians and non-Indians who assault Indian spouses or dating partners or violate a protection order in Indian country. VAWA 2013 also clarifies tribes’ sovereign power to issue and enforce civil protection orders against Indians and non-Indians.

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https://ncjrs.gov/pdffiles1/nij/sl001050.pdf

Research and Evaluation on Violence Against Women:
Teen Dating Violence, Sexual Violence, and Intimate Partner Violence - FY 2013 Grant
Deadline: April 22, 2013
https://ncjrs.gov/pdffiles1/nij/sl__ 001050.pdf

**Mending The Sacred Hoop**

Mending the Sacred Hoop 202 East Superior Street Duluth, MN 55802 (888) 305-1650 (218) 623-HOOP Fax: (218) 722 - 5775

**Evaluation of the Effectiveness of State, Local and Tribal Responses to Violence Committed Against Indian Women Living in Tribal Communities:**
Deadline: April 22, 2013
https://www.ncjrs.gov/pdffiles1/nij/sl001032.pdf

**Department of Justice National Institute of Justice NIJ FY 13 Research on Firearms and Violence Grant**
Deadline: May 2, 2013
http://www07.grants.gov/search/search.o?&mode=VIEW&oppId=218780

**Indian Health Service, Tele-Behavioral Health Center for Excellence (TBHCE)**
The TBHCE presents training webinars on various behavioral health related seminars such as: pain and addictions; medical management of brain injury, intellectual deficits and developmental disabilities; child and adolescent mental health; historical trauma; and ethics and professionalism.

For a training schedule, go to:
http://psychiatry.unm.edu/centers/crcbh/telebehavioral/IHStelehealth.html

**2013 NNALEA Conference Registration**
September 17-9, 2013 Bally's Hotel and Casino, Las Vegas, NV 89109
The 21st Annual NNALEA Training Conference will feature five intensive training tracks:

- **Track 1:** Emergency Management, Emergency Services and Homeland Security
- **Track 2:** Boots on the Ground Law Enforcement Training
- **Track 3:** Community Policing Partnerships, Strategies, Operations and Protecting Youth
- **Track 4:** Executive Leadership Certification Course
- **Track 5:** Environmental Protection and Natural Resources

When Does This New Law Take Effect?
Although tribes can issue and enforce civil protection orders now, generally tribes cannot criminally prosecute non-Indian abusers until at least March 7, 2015.

Will This Be Voluntary?
Yes, tribes will be free to participate, or not. The authority of U.S. Attorneys (and state/local prosecutors, where they have jurisdiction) to prosecute crimes in Indian country remains unchanged.

For more information, contact:
Honoring Native American Women and ALL Women

This publication is dedicated to the memory of those Native women who have died from domestic violence.

On behalf of the Indian Alcohol and Substance Abuse Interdepartmental Coordinating Committee, we would like to send our condolences to the family of Jennifer Lynn Pearson, who was a victim of domestic violence.

Domestic violence affects us all. In February, Jenny, sister of one of the IASA family joined the ranks of women who have succumbed to domestic violence. She, like our many sisters who were taken from us, is not merely a statistic. She is a real person, loved and dearly missed. Jenny was expecting her first baby, son Aiden, in June.

Upcoming Newsletter Theme:
Creating Safe and Healthy School Environments – Part 1

Contributing Agencies

Newsletter Contact Information

If you have any questions, concerns, or would like to contribute to this newsletter, please contact:

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