Developing and Implementing a Response to Sexual Assault in Tribal Communities

A Summary of the Suggestions from the National Roundtable Discussion on Sexual Assault in Indian Country
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Fairfax, Virginia
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The opinions and conclusions expressed in this document are solely those of the authors and do not necessarily reflect the views of the U.S. Department of Justice.
Why This Roundtable Discussion was Convened

On July 27 and 28, 2016, the Office for Victims of Crime (OVC), in partnership with the Office on Violence Against Women (OVW) and the Indian Health Service (IHS), held a National Roundtable Discussion on Sexual Assault in Indian Country. It brought together a multidisciplinary group of professionals with expertise in developing, implementing, or enhancing a sexual assault response in tribal communities. (See Appendix 1 for a list of the participants.) The goals of the discussion were to: (1) learn about tribal efforts to develop a coordinated, systemic response to sexual violence; (2) highlight specific strategies that might aid other tribal communities in developing or enhancing their systemic response to sexual violence; and (3) provide federal, state, and local responders to sexual violence in Indian country with information to aid them in creating strategies to address sexual violence in American Indian and Alaska Native (AI/AN) communities.

Response to sexual victimization in AI/AN communities is complicated by significant challenges; among them are a lack of tribal resources, little community dialogue on the issue, victim reluctance to report and seek assistance, and difficulty in coordinating responses across tribal, local, state, and federal agencies. However, great strides have been made in recent years to find solutions to these and other challenges and to promote effective interventions. During the roundtable discussion, participants were asked to identify strategies that have helped to overcome challenges. While many remedies discussed addressed roadblocks common across tribes, some spoke to barriers unique to specific tribal communities (e.g., those in remote locations).

Through this report, OVC, OVW, and IHS seek to share lessons learned and practical guidance from the roundtable participants who are with tribal governments and are responders to sexual violence. The report may also be useful to nontribal legislators, policymakers, and agencies with jurisdictional responsibility for responding to sexual assaults committed against American Indians and Alaska Natives.

Strategies for Tribes at-a-Glance

The broad strategies for tribes emerged from the National Roundtable Discussion on Sexual Assault in Indian Country, reflecting remedies that have helped tribal communities to overcome challenges related to effective, coordinated, systemic response to sexual violence. See the next section of the report for details.

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<th>Strategies for Tribes at-a-Glance</th>
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<td>Recruit and retain individuals to lead efforts: Encourage tribal leadership to prioritize recruitment of individuals with the knowledge, experience, skills, and determination to lead efforts to improve tribal response to sexual assault. Take measures to promote the retention of recruited individuals and the continuation of their efforts beyond their job tenure. Also, urge those leading the tribe’s efforts to improve sexual assault response in tribal communities to advocate strongly for the self-care of responders across agencies involved.</td>
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<td>Engage in strategic planning: Strategically plan how the tribe will go about improving response to sexual assault, incorporating a community needs assessment into the planning process. An assessment can help to clarify the extent of the problem, strengths of the community in addressing the problem, issues related to coordination across tribal and nontribal agencies, issues related to culturally relevant response, and gaps in response. In addition, in the course of the strategic planning process, define what a culturally appropriate response to sexual assault means for the tribal community. With the information gathered from the community needs assessment, plan actions to build on community strengths and fill gaps in the current response to sexual assault.</td>
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**Build infrastructure**: Urge sufficient and well-coordinated funding and technical assistance for tribes at the state and federal levels so they can build their infrastructures to develop and implement effective responses to sexual assault. Also, encourage funders and technical assistance providers to publicize existing resources that may be useful to tribes in their infrastructure building process (e.g., those that can help with code development or be a source of training). Consider the following as priority tasks to build tribal infrastructure to support response to sexual assault: developing tribal sexual assault codes, policies, and protocols; securing tribal personnel and developing tribal programs; and training and technical assistance brought to tribal communities.

**Promote partnerships to support coordinated response**: Urge the leadership of tribal and nontribal agencies involved in sexual assault response in AI/AN communities to support the establishment of multidisciplinary teams (MDT) for child abuse cases and sexual assault response teams (SART), with active and consistent participation in MDTs and SARTs by key agency staff. Tribes are encouraged to think expansively about collaborative partners and consider how to leverage resources to address the problem of sexual violence comprehensively in the community, including and beyond MDTs and SARTs. It is important to note that the burden of ensuring culturally relevant interventions should not fall on the leaders of tribal agencies alone, but should be shared among the leaders of responding agencies from all jurisdictions involved in response.

**Promote tribal sovereignty and culture**: Encourage leaders of responding state and federal agencies to take measures to facilitate response to sexual assault in AI/AN communities, in coordination with the tribal agencies, that are respectful of native sovereignty and culture. Ultimately, response to sexual assault can be enhanced when state and federal responders appreciate tribal culture/people, are invested in addressing the problem, cultivate a positive government-to-government relationship, and are open to implementing culturally relevant interventions.

**Reduce victim stigma and shame**: Conduct outreach to educate the community about sexual violence, with the goals of reducing victim stigma and shame and encouraging victims to use services. Strive to be inclusive to address the needs of victims from all backgrounds in the community in outreach and sexual assault response procedures.

**Address victim needs**: Urge the leaders of agencies involved in response to sexual assault in AI/AN communities to train staff involved in these cases to use a trauma-informed, victim-centered approach when interacting with victims and community members on this issue. Offer victims healing options that incorporate the tribe’s beliefs and customs. Share information about traditional healing practices available to victims with tribal and nontribal responders so they can explain options to victims and help connect them to such services.

**Recognize differences in response**: In responder training and protocols, make clear the variations in interventions across involved jurisdictions related to child, adolescent, adult, and vulnerable adult victims; and responders’ mandatory reporting obligations. In particular, work to clarify ambiguities that can arise when responding to adolescent sexual assault cases.

**Enhance sexual assault nurse examiner (SANE)-sexual assault forensic examiner (SAFE) efforts**: In conjunction with IHS facilities/community health clinics, seek funding and resources to help support implementation and sustainability of 24-hour, 7 days a week SANE-SAFE programs. The goal is to build capacity to be able to provide medical forensic examinations using trained SANEs and SAFEs to native sexual assault victims in need of such an exam.

**Enhance the tribal justice process**: For those tribes with tribal justice programs, take measures to incrementally build the tribe’s capacity to enhance response to sexual assault related to victims’ rights, law enforcement/investigation, prosecution, and sex offender management.
Strategies to Overcome Challenges

This report highlights key strategies used to overcome challenges in responding to sexual assault as identified by the tribes represented during the roundtable discussion. It also incorporates examples of actions taken by specific tribal communities. Strategies are organized in the report by broad challenges they address: (1) getting started in addressing the problem and sustaining efforts, (2) building tribal infrastructure, (3) promoting partnerships, (4) fostering respect for native sovereignty and culture, (5) reducing victim stigma and shame, (6) meeting victims' needs, (7) recognizing differences in response to vulnerable populations, (8) enhancing SANE-SAFE efforts, and (9) enhancing the tribal justice process.

1. Getting Started in Addressing the Problem and Sustaining Efforts

The first steps in addressing a problem can sometimes be the hardest. In the case of getting started with and sustaining an improved response to sexual assault in AI/AN communities, roundtable participants discussed the benefits of recruiting and retaining committed and skilled leaders, the importance of responder self-care, and the usefulness of a strategic plan. Specific lessons learned follow.

Place “champions” in leadership positions to steer tribal response to sexual assault in the right direction. “Champions” in this context are native and nonnative people who become leaders in facilitating a more effective community response to sexual violence. They “champion the cause,” bringing critical attributes to the job. Roundtable participants mentioned numerous attributes of effective champions. For example, these individuals have the requisite knowledge, experience, and skills to achieve required tasks in a culturally competent manner. What they do not know, they are willing to learn. They tenaciously push for positive change. Frequently, they are sexual assault survivors and are driven by a keen desire to work against violence. They often make a long-term commitment to this work. They assign an urgency to improving response to victims and are able to translate that urgency into action—engaging the community, planning for change, seeking resources and allies, troubleshooting to address problems, and taking on tasks when no one else steps up to the plate.

A councilwoman on the Eastern Shoshone Business Council (Fort Washakie, Wyoming) received training as a SAFESTAR for the Wind River Reservation, home to the Eastern Shoshone and the Northern Arapaho Tribes, along with several other women. The specific gap that these volunteers fill is one of respected tribal women who provide sexual assault victims with confidential emergency support and evidence collection. In addition, they facilitate awareness and dialogue in their communities about response to sexual violence. In addition to her SAFESTAR role, the councilwoman is promoting systemic improvements to address the problem on the reservation. For example, she is seeking resources to bring a culturally competent SANE-SAFE program to the reservation, working to establish a shelter, and advocating to increase mental health services available to youth dealing with violence in their lives.

Be positive about addressing the problem. To that end, roundtable participants spoke about those leading the effort striving to:
- Empower community members to use their strength, particularly their cultural beliefs, traditions and their resiliency, to work against sexual violence and for the health of their tribe;
- Promote thinking in the community that sexual violence is not inevitable but preventable, that challenges can and will be overcome, and that when sexual violence occurs, there can be healing and justice for victims and community members; and
- Advocate for optimal response to this problem by tribal and nontribal entities.

Encourage champions to be well-informed about resources and make the access and use of resources a priority for the greater good of their community. Champions can also guide others involved in resource acquisition.

Both Norton Sound Health Corporation (NSHC) in Nome, Alaska (serving the Bering Strait region’s Inupiaq, Siberian Yupik, and Yup’ik people), and Cass Lake IHS facility (in Minnesota, serving the Leech Lake Reservation, Band of Ojibwe) sought and received IHS Domestic Violence Prevention Initiative (DVPI) grant funding to support SANE-SAFE program components (e.g., staff positions as SANEs, community educators and advocates, and forensic photography equipment and training).

It was the low number of sexual assault victims actually seeking health services that led NSHC to seek funding for an educator to do community outreach. The hope was that in reaching out to the community, the program could build the trust necessary for more victims to come forward. For the Cass Lake IHS, DVPI funding was first sought to build program capacity. Prior to the DVPI funding, Cass Lake IHS had a 24-hour, 7 days a week SANE program, but there was no MDT or community outreach.

Plan for sustainability. Roundtable participants stressed the need for champions to think about how others in the community can continue and expand sexual assault response initiatives when they move on from their jobs. Sustainability can be built into their strategic planning to improve response to sexual assault. One way for champions to sustain their work is by mentoring skilled, culturally competent youth and adults. Offering opportunities for tribal members to be involved in healing from sexual violence, helping others heal, and promoting community safety and health can be an avenue to get them interested in this work, encourage activism, and single out those with leadership potential.

Emphasize the importance of self-care for people doing this work. Roundtable participants strongly advocated for abundant opportunities for responder self-care. They believed that making responders’ health a priority rather than an afterthought was, not only the right thing to do but also, an important tool in sustaining effective efforts. Champions can model caring for self. They can encourage responding agencies, MDTs, and SARTs to make an organizational commitment to responder wellness. They can also promote an array of opportunities geared to help responders stay healthy. Self-care activities can help motivate responders to stay in this work, increase the personal and professional satisfaction they derive from it, aid them in avoiding burnout, and help them heal if they experience vicarious trauma. Access to self-care activities, including those that are culturally specific, can be incorporated into many facets of a responder’s discipline-specific and multidisciplinary work.
Tohono O’odham Nation’s MDT has access to a number of mechanisms to aid responders in staying healthy. They have access to a mental health therapist to provide training and support on issues related to vicarious trauma through the local IHS service unit. In addition, some members of the MDT have been trained to provide peer support.
For example, the therapist led an MDT session on compassion fatigue. Such forums help members vent and discuss the heaviness of the subject matter they deal with on a daily basis. Creating a safe place for members to discuss these topics helps to prevent burnout and build mutual understanding.

**Incorporate community assessment into strategic planning.** A tribe’s strategic plan to develop, implement, or enhance response to sexual assault can be more effective when it is informed by a knowledge of the extent of the local problem and issues and related community strengths and gaps. To obtain this knowledge, several roundtable participants shared that they assessed community needs for this purpose. While their processes varied in scope, level of formality, and resources and technical assistance used, the common end result was that the information gained from the assessment was an impetus in driving needed change.

A community assessment can look critically at response not only within the tribal community, but also by nontribal agencies with responsibilities to respond to sexual assault in the community, and the coordination of efforts between tribal and nontribal responders. Key issues are the responders’ readiness and capacity to support victim healing and secure just solutions for the community.  

As part of a demonstration grant from OVC’s AI/AN SANE-SART Initiative to the Tuba City (Arizona) Regional Health Care Corporation, the SANE-SART program coordinator surveyed members of the community served by the program to get a better sense of the problem of sexual assault and awareness of resources available to victims. The program coordinator was successful in collecting about 1,000 survey responses and analyzed the data to support the creation of a strategic plan to develop and implement a SANE-SART program in the community.

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The Norton Sound Healthcare Corporation (NSHC) service area consists of a population of 9,500 who live in the City of Nome and 15 Alaskan Villages scattered across the 44,000 square miles that comprise the Bering Strait Region. Despite the alarming statistics about the high incidence of sexual assault among Alaska Native women, staff at the hospital realized that they were not receiving very many sexual assault victims in the hospital emergency department. Two NSHC staff members, one a non-native SANE and the other a native community educator, traveled together to visit the Alaska Natives in the service area to engage in a dialogue with them about sexual violence. They discovered that the community members were ready to report incidents of sexual assault, but that they felt that the hospital was not prepared to receive them. The NSHC staff members then led efforts to develop and implement a trauma-informed, culturally appropriate response to the delivery of medical care to sexual assault victims by training NSHC staff and revising its operational policies. In the 4 years following the implementation of the changes, NSHC witnessed a five-fold increase in the number of sexual assault victims who sought care at their facility, from an average of 20 a year to 100 victims served in 2015.

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The Association of Village Council Presidents (AVCP) is a consortium of 56 Alaska Native villages located in the remote Yukon–Kuskokwim (Y-K) Delta Region. Approximately 10 of AVCP’s member tribes operate
tribal courts. AVCP received assistance from the National Indigenous Women’s Resource Center (NIWRC) in conducting an assessment of the tribal courts’ ability to systematically address intimate partner violence. In the course of that assessment, it found that residents of AVCP’s communities experience alarming rates of intimate partner violence and sexual violence. It also realized that there were minimal tribal resources to address these problems and significant challenges in coordinating with state responding agencies to intervene in these cases. With the priority of lowering victimization rates and improving response, AVCP is now focusing on building tribal capacity to respond to sexual violence in its villages and to engage with state and federal agencies to leverage resources and encourage coordinated interventions that meet the needs of the villages and victims.

**Identify the tribe’s vision of culturally relevant response and incorporate it into the strategic plan.** The need for culturally relevant response was emphasized throughout the roundtable discussion. Participants thought it was essential that each tribe, rather than nontribal responding agencies, clarify what it means by culturally relevant response to sexual assault in its communities. During the community assessment process, one focus is learning how to tailor response so that it is relevant to the community. Such information can help tribes devise a strategic plan that works toward a more culturally relevant response. It is likely that such a plan will, in part, entail tribal responders engaging with nontribal responders to discuss how training, policies, and protocols could better reflect tribally defined, culturally appropriate interventions.

**Urge actions that build on community strengths and fill gaps in response to ensure protection, health, and healing of victims.** Actions that a tribal community plans to take, as outlined in a strategic plan, will vary depending on strengths and gaps identified and remedies available. Roundtable participants described a variety of situations in which, after they became aware of a gap, they began planning to address it. For example, several indicated their communities did not, as of yet, have consistent access to SANE-SAFE programs. They discussed the feasibility of using the SAFESTAR model to fill the gap. When there are gaps due to nontribal response, there is the need to be clear and assertive with the relevant nontribal agency about what changes were necessary. A number of participants stressed the importance of speaking out on behalf of victims when it was evident that available resources were not being directed to areas where there was the most urgent need or when policies and protocols were not working to protect victims or failed to hold perpetrators accountable.

The Oglala Sioux Tribe (Pine Ridge, South Dakota) recently implemented a no-arrest policy for individuals engaged in illicit activity (e.g., using illegal substances) who have also been sexually assaulted. Prior to the policy’s implementation, the focus of law enforcement response typically was on the illegal behavior rather than the sexual victimization. The policy reaffirmed the tribe’s priority to provide services to address sexual assault victims’ safety (e.g., safe shelter) and health (e.g., forensic medical examination). Arrest decisions in such cases are delayed. Responding agencies developed and adopted their agency-specific policies to reflect the no-arrest detention system-wide policy. Related responder training and public awareness activities occurred prior to policy implementation.

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Recognizing some victims of sexual violence struggle with problems that cause them to be ineligible for federal- or state-funded victim assistance programs (e.g., if they have drug or alcohol addictions), some
tribal communities (e.g., Wind River Reservation in Wyoming, and villages in Bering Strait and Y-K Delta regions of Alaska) have alternative shelters or other assistance to accommodate them.

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Some of the village tribal councils in the Y-K Delta region of Alaska banish sex offenders from their communities to protect tribal members; however, the villages often lack a means to enforce banishment. Alaska State Troopers do not enforce tribal banishment, but they are able to enforce civil protection orders. The AVCP therefore encouraged its member tribes to seek civil protection orders in Alaska State Court against the sex offenders they want to banish. The villages have been successful as petitioners for such orders and the orders are enforced by the Alaska State Troopers.

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In the course of conducting community education and outreach, Wind River SAFESTARs identified a need for school-based mental health counseling for youth on the reservation to facilitate healing for those traumatized by violence. They are now looking across a wide array of potential funding sources for ideas on how to support such a counselor position.

2. Infrastructure Building

The term “infrastructure” is used here to refer to basic framework, people, and resources needed to allow a tribal sexual assault response system to be operational. Some AI/AN communities may need to start from scratch in building such an infrastructure, and others may already have fully developed systems. Yet for most, their sexual assault response infrastructure is a work in progress. Key strategies offered by roundtable participants to help tribes in building their infrastructure include developing tribal sexual assault codes (followed by policies and procedures), working toward securing personnel and programs to support tribal response, bringing related training programs to the community, and urging state and federal funders to help tribes with immense needs fill gaps in basic resources related to sexual assault response.

**Develop tribal legal codes on sexual assault.** Tribal laws on sexual assault are typically a prerequisite for interventions in these cases by tribal justice agencies. Roundtable participants identified the development or enhancement of tribal codes that address sexual assault as a tangible task that a tribe may start with to begin improving its response to sexual violence. In addition to getting input from responders to sexual assault in the community and tribal leaders when drafting codes, it is also helpful to seek community input. Participants noted that while community input can be challenging to obtain (perhaps due to the fact that residents are often reluctant to talk about this issue), it can help build community support for the codes.

Roundtable participants recommended that tribes adopt sexual assault codes that comport with their tribal constitutions (if applicable), and other relevant sections of the tribe’s existing code, rather than simply adopting a model sexual assault code that may be in conflict with the tribe’s model of governance or existing laws. Policies and protocols related to the codes can then be created and implemented.
In the Y-K Delta Region of Alaska, AVCP’s Tribal Justice Center offers assistance to its member villages with drafting tribal sexual assault codes. The Tribal Justice Center partners with a law school clinic program in this endeavor and has adapted model codes.

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The Oglala Sioux Tribe (Pine Ridge, South Dakota) formed an interagency working group, composed of its various justice partners, under the leadership of the tribe’s Attorney General to facilitate drafting changes to its sexual assault code.

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In the course of soliciting input as part of tribal code development to address sexual assault, the Tohono O’odham Nation was able to engage community members in a dialogue about the problem.

Roundtable participants recommended tapping into existing resources, especially those from national technical assistance providers, for guidance in tribal code development. The agencies that provide funding and/or technical assistance for tribes related to sexual assault response can also be encouraged to publicize such resources with tribes. In addition, participants indicated that tribes should know how to access applicable state and federal laws for reference as they create their sexual assault codes.

When developing sexual assault codes, participants also noted the following (there are additional code suggestions in other sections of the report):

- **The tribe’s legislative history and code can speak to the need to have a sexual assault code.** For example, a strong code preamble can include statistics on sexual victimization and justify the need for the code. Such a preamble underscores sexual violence as an important public safety issue.

- **The code should address the full scope of the problem of sexual assault**, including adult victimization, victimization of children and adolescents, and marital sexual assault. Expansive codes should be written to address all forms of sexual assault, including and beyond forcible rape.

- **Statutes of limitations for prosecution of crimes related to child sexual abuse should be included in the code.** Specific language related to statutes of limitations can address the fact that disclosure of child sexual abuse is more of a process and less of an event, and children and adolescents may disclose the abuse years later or may decide to come forward years after their abuse to pursue criminal prosecution of the abuser.

- **Tribal responder roles and responsibilities at each stage of response can be clarified in the code**, in regard to tribe-specific interventions and coordinated response with state and federal entities. (For more on this topic, see Section 3. Promoting Partnerships.)

- **The code can promote trauma-informed, victim-centered, culturally relevant practices.** (For more on these practices, see Section 6. Meeting Victim Needs.)

- Particularly in the absence of state or federal adjudication, tribal prosecution and use of restorative justice interventions are potential tools to support victim and community healing. To that end, **the code can address facilitating concurrent prosecutions and issues related to state or federal declinations of cases.** (For more on this topic, see Section 9. Enhancing the Tribal Justice Process.)
**Incorporating options for restorative justice interventions in the tribal justice process can also be explored.** (For more on these interventions, see [Section 9. Enhancing the Tribal Justice Process](#).)

- **The code can offer protections for tribal prosecutors against unwarranted interference** (e.g., protecting due process and outlining circumstances that warrant removal of a prosecutor). If the tribe has a constitution or statutes that address the tribal council’s ability to intervene in investigation and prosecution of a criminal offense, the code also can specify consequences for interference.

- **Sex offender issues can be incorporated into the code.** Some tribes have initiated sexual assault code development to implement the requirements of the Sexual Offender Registration and Notification Act (SORNA). The Office of Sex Offender Sentencing, Monitoring, Apprehending, Registering, and Tracking (SMART) offers guidance on incorporating sex offender registration and notification in tribal codes. Tribes can also consider including other sex offender management practices in the tribal code, policies, and/or protocols. For example, to protect victims and community members during the tribal justice process, the code can include strong provisions to address witness intimidation. (For more on this topic, see [Section 9. Enhancing the Tribal Justice Process](#).)

- **Tribes can build directives into the code to facilitate periodic review and revision of codes and related policies and protocols,** followed by sharing of information among tribal, local, state, and federal partners regarding changes. Likewise, state and federal agencies can be encouraged to share information with tribes in a timely fashion about changes to their laws, policies, and protocols.

**Work toward securing personnel and programs needed to support basic tribal sexual assault response** (including criminal justice system intervention, community-based victim advocacy, and medical forensic care by SAFEs-SANEs). Roundtable participants were clear that capacity building in this regard is a worthwhile long-range goal, involving incremental steps tailored to a community’s needs. It was also evident from the discussion that tribes must balance working toward such a goal with devising alternative methods that address their urgent gaps in response, most importantly, those related to victim and community safety.

For example, for tribal communities that do not have their own law enforcement departments and lack immediate access to state or federal law enforcement, protecting sexual assault victims and community members is a grave concern. Delayed law enforcement response can also create problems with securing crime scenes and initiating timely investigations. While working to establishing tribal law enforcement and advocating for timely state or federal law enforcement response, these tribes can consider what interventions might help fill current gaps. For instance, if the tribe has civilian public safety officers, they can receive periodic training on tribal response to cases of sexual assault, particularly related to victim safety. Telemedicine practices (e.g., use of advanced technology to support health care providers in serving patients, doing peer reviews, and accessing consultants) and SAFESTAR volunteers may be alternative ways to address gaps in the timely and consistent provision of forensic medical care for victims.

**Promote a dual tribal victim assistance/advocacy model,** featuring tribal justice system victim assistance working with nonprofit, community-based advocacy programs to address victims’ needs. Tribal government victim assistance programs provide a valuable service in assisting victims as they go through tribal justice proceedings; however, confidential communication between victims and government-based victim assistance specialists is limited. In contrast, private, nonprofit victim advocacy
programs that serve native people but are independent of the tribe—usually off-reservation—can typically offer more confidential victim support, a wider range of services, and do not require victims to report to law enforcement to receive services. Private, nonprofit program decisions can be made without the tribe’s approval.

Wise Women Gathering Place (WWGP), in Green Bay, Wisconsin, is a private, nonprofit agency that partners with many local organizations, some of which are tribal agencies. WWGP works with those agencies as a team to offer victims a choice of services tailored to their needs. Some victims do not wish to use tribal services due to confidentiality issues, while others prefer to use tribal services. Some want both services. Victims may request long-term legal assistance, some want services purely to promote personal healing, and many ask for a variety of services.

**Bring training to responders in tribal communities.** Several roundtable participants noted that training for tribal responders was most beneficial if it was local/regional (not requiring inordinate time away from work and the community) and specific to each tribe’s cultural needs and multijurisdictional coordination issues. They discussed the need for discipline-specific and multidisciplinary skill building across a wide variety of topical areas. They also suggested mentoring of newer responders by more seasoned professionals in their field and the use of state-level training and mentoring teams/programs.

As an alternative to sending responders to training out of the region, AVCP’s Tribal Justice Center in the Y-K region of Alaska seeks funding and works to coordinate training programs relatively close to home for those who respond to sexual assault in the region’s remote villages. This approach makes it possible to train more responders, often at a lesser cost, and to customize training so that it is culturally relevant.

**Express to potential funders the urgent need to aid tribes with immense needs related to sexual assault response and leverage resources for their communities.** Several roundtable participants pointed out that building infrastructure is a particularly daunting task for tribes with immense needs but few resources, such as AI/AN communities in remote locations. Their lack of resources may prevent them from being able to advocate for themselves successfully in competitive funding processes or to communicate their needs during government consultation with tribes.

Rather than expecting these tribes to compete for funding successfully with tribes with more resources (relatively speaking), these participants felt legislators, funders, and grant program managers involved in funding allocation should be encouraged to reach out to these tribes to gain a clear sense of the depth/complexity of their needs (so they better match needs with appropriate funding).

Roundtable participants agreed that federal- and state-level consultations and communications that address the problem of sexual assault in Indian Country should be inclusive of and accessible to all tribes within a specific federal district or state. Otherwise, resulting policies, protocols, and resource allocation are skewed in favor of those tribal communities who were able to participate.

When tribal officials speak on behalf of their tribes during such consultations and communications, participants emphasized they should be guided by tribal victims’ needs and those responding to sexual assault in their tribe. They should consult with tribal professionals, including victim advocates, to gain an understanding of the resources that the community needs to improve its response.
3. Promoting Partnerships to Support Coordinated Response

When all involved jurisdictions and agencies are not actively working together to ensure effective interventions in sexual assault cases in Indian Country, victim and community healing and safety can be dramatically undermined. This section speaks to the importance of promoting partnerships across jurisdictions to support coordinated immediate interventions and a more comprehensive response.

Form MDTs and SARTs to bring core responders together. Roundtable participants agreed that developing and sustaining multijurisdictional coordinating bodies, such as MDTs and SARTs, is critical to promote effective interventions in sexual assault cases in Indian Country. Membership of these coordinating bodies can vary depending on factors such as the location of and resources of the AI/AN community, the law enforcement and prosecutorial entities that may be involved in these cases, and laws related to these coordinating entities. Core members typically are from agencies that provide immediate response in sexual assault cases (minimally, law enforcement, prosecution, victim assistance/advocacy, and SANE-SAFE on both MDTs and SARTs, and also child protective services and mental health care on MDTs).

MDTs and SARTs offer forums for members to build common goals, share information and resources, create coordinated response protocols, provide responder training, dialogue about the issue and systemic problems in response, and come up with remedies to resolve the problems. They can be vehicles for case review, consultation, and promotion of responder self-care.

Stakeholders come to MDTs and SARTs at different levels of readiness to collaborate. Issues can include, but are not limited to, a lack of interest by state and federal agencies to participate on tribal coordinating bodies or work with tribal responders; mistrust among responders; and community members and responders who distrust nontribal agencies and will not seek their help. The hope of roundtable participants was that active engagement between tribal and state and federal responders via MDTs and SARTs will lead to increased respect, trust, and accountability among members, and ultimately, to greater case collaboration. They noted that such outcomes are more feasible when MDT and SART members are selected based on the authority of their agency position, experience, and expertise with this issue; attend meetings consistently instead of sending surrogates; and are able to make decisions on behalf of their agencies. Obstacles to active participation must be overcome if engagement and accountability of all responding agencies is a goal.

The Cass Lake (Minnesota) IHS Sexual Assault and Domestic Violence Prevention Initiative (SADVPI) received DVPI funding that facilitated the creation of a SART for the Leech Lake Reservation. At first, a few individuals from key agencies were reluctant to participate. Over time, willingness to be involved increased. In fact, one of the initially reluctant individuals became one of the SART’s most active participants. The team is composed of law enforcement, prosecution, advocacy, SANEs, corrections, probation, and others from the four counties that lay, in part, within the Leech Lake Reservation. The team is now a Sexual Assault and Domestic Violence Reservation Response Team (SART/DVRRT), addressing collaborative responses to sexual and intimate partner violence. They have also developed and implemented multidisciplinary strangulation practice guidelines for the reservation.
Develop MDT and SART protocols that facilitate coordination. Roundtable participants noted the ineffectiveness of coordinating protocols that are not developed via a consensus process involving all responding jurisdictions and agencies. A better approach is to engage members in discussing coordinating issues specific to different responders, work to resolve potential conflicts and challenges, and come to agreement on practices. Subsequently, protocols can be created that incorporate agreed upon practices. When fully implemented, these protocols can be living documents of how responders work together that can be updated, as necessary, to reflect the most promising practices for the tribal community and new and revised laws and policies.

Think expansively about collaborative partners and roles. During the roundtable discussions, participants also talked about ways to involve a broader set of stakeholders in more comprehensive and wide-reaching collaborations to enhance culturally relevant response to sexual assault in tribal communities. These participants might include those on MDTs and SARTs, but also those beyond. The below image and list of stakeholders to involve illustrates the range of possible partners (actual agencies differ across AI/AN communities).
<table>
<thead>
<tr>
<th><strong>Criminal Justice</strong></th>
<th><strong>Services, Outreach, and Education</strong></th>
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<tbody>
<tr>
<td><strong>Prosecution</strong></td>
<td>Community-based victim advocacy programs</td>
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<tr>
<td>• Prosecutors from all tribes and U.S. Attorney’s Office (if federal)</td>
<td>• Sex offender treatment programs</td>
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<tr>
<td>• Prosecutors from all tribes and state attorney (if PL 280 state)</td>
<td>• Community educators</td>
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<tr>
<td>• County/city prosecutor, if involved</td>
<td>• Religious providers/spiritual leaders</td>
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<tr>
<td>• Military (Judge advocate general or JAG), if involved</td>
<td>• K-12 schools and colleges (tribal/other)</td>
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<tr>
<td><strong>Law Enforcement</strong></td>
<td>• Tribal services/family assistance</td>
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<td>• Tribal law enforcement</td>
<td>• Social services</td>
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<td>• Civilian patrols</td>
<td>• Youth services</td>
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<tr>
<td>• 911/dispatch</td>
<td>• Food banks</td>
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<tr>
<td>• Tribal/state sex offender registration and management</td>
<td>• Temporary Assistance to Needy Families (TANF)/Food stamps</td>
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<tr>
<td>• Bureau of Indian Affairs (BIA)</td>
<td>• Medicaid (federal health coverage program)</td>
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<td>• Federal Bureau of Investigation (FBI)</td>
<td>• Housing authority</td>
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<td>• Immigration and Customs Enforcement (ICE)</td>
<td>• Shelters and transitional living programs</td>
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<td>• Border patrol</td>
<td>• Residential living programs, nursing home/assisted living</td>
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<td>• State highway patrol</td>
<td>• Veterans groups</td>
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<td>• PL 280 state, county, local, and township law enforcement</td>
<td>• Interpretation services</td>
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<td>• U.S. Marshals (law enforcement arm of federal courts)</td>
<td>• Work force development</td>
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<td>• Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF)</td>
<td>• Telephone services</td>
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<td>• Military police, criminal investigators, others, if involved</td>
<td>• Casino HR and security/surveillance</td>
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<tr>
<td><strong>State and FBI Crime Labs</strong></td>
<td><strong>Civil Legal Services</strong></td>
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<td><strong>Justice System Victim Advocates/Victim Witness Specialists</strong></td>
<td>• Child and adult protective services</td>
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<tr>
<td><strong>Courts/Judges</strong></td>
<td>• Shelter/domestic violence legal advocates</td>
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<td><strong>Public Defenders</strong></td>
<td>• Tribal court/legal or lay advocates/legal aid</td>
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<tr>
<td><strong>Corrections, Probation, and Parole</strong></td>
<td>• Courts/Judges (e.g., note that tribal council may be involved in decisions to grant protection orders in tribes without courts)</td>
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<tr>
<td><strong>Juvenile justice programs</strong></td>
<td>• Court appointed special advocates (CASA)</td>
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<td><strong>Health Care</strong></td>
<td>• Guardians ad litem</td>
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<td>• SANE-SART</td>
<td>• Victim compensation fund – tribal, state</td>
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<tr>
<td>• Medical forensic exam consultants</td>
<td>• Child support and supervised visitation</td>
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<tr>
<td>• Emergency medical services/technicians</td>
<td><strong>Health Care</strong></td>
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<tr>
<td>• Hospitals and clinics</td>
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<td>• Behavioral health</td>
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<td>• School nurses and counselors</td>
<td>• Community health representatives</td>
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<td>• Community health representatives</td>
<td>• Child advocacy centers</td>
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<td>• Medical/mental health consultants</td>
<td>• Mental health consultants</td>
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<tr>
<td>• Alcohol and drug rehabilitation programs</td>
<td>• Forensic exam consultants</td>
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4. Fostering Respect for Native Sovereignty and Culture

An awareness of and regard for how a tribe’s sovereignty impacts response to sexual assault and how the tribe’s culture and its customs should be incorporated into response can be a source of contention between tribal and nontribal responding agencies. Roundtable participants discussed several strategies to aid tribes in addressing this potential conflict.

Urge leaders of responding state and federal agencies to take measures to facilitate response in coordination with the tribe, which is respectful of native sovereignty and culture. To that end:

- **Encourage local, state, and federal agency responders to connect with tribal communities in positive ways** (particularly related to development of cultural competency, active MDT and SART involvement, and recognizing the validity of tribal codes and of full faith and credit obligations).
- **Urge state and federal responding agencies to develop clear protocols on the issue of coordinating full faith and credit obligations related to the enforcement of tribal protection orders.** Tribes have the right to demand enforcement of legislative mandates to respect tribal sovereignty.
- **Encourage the recruitment of state and federal agency responders to sexual assault in Indian Country who are passionate about addressing problems facing native people,** in addition to being skilled in their specific job responsibilities.
- **Train state and federal agency responders on cultural competency based on standards established by tribal communities.**
- **Promote mechanisms for performance assessment of agency response.** It is useful for tribal MDTs and SARTs to review individual cases and look for trends (e.g., the extent to which actions are responsive to the needs of victims and are culturally appropriate) and seek feedback on strengths and gaps in response. Subsequent training can build on strengths and speak to identified gaps.

The U.S. Attorney’s Office for the District of New Mexico has a requirement that any personnel who are assigned to prosecute crimes in Indian Country must complete training on the culture and history of the tribe(s) that they will be serving, Federal Indian law, the Violence Against Women Act, and all other relevant federal laws.

It was noted that it can be challenging to continuously provide training for health care providers on short-term rotations in tribal communities regarding the culture and how culture can impact and support a native person’s health care; however, such an orientation is essential in helping these providers recognize the strengths of the people and the benefits of cultural traditions to healing. Health care providers who see the positives of the culture may also be more likely to stay on in their job positions (if they have that choice).

5. Reducing Victim Stigma and Shame

Due in large part to the stigma and shame connected to sexual victimization, AI/AN community members who have experienced sexual assault often remain silent about their victimization and do not tap into resources available to help them with healing and seeking justice. Key strategies offered by roundtable participants are summarized below, with the goals of helping tribes reduce victim stigma and shame,
encouraging victims to seek services, and discouraging victim blaming. Strategies focus on community outreach, education activities, and the promotion of inclusive victim services.

Promote community dialogue and education.

**Consider what topics to address via community dialogue and education forums.** Forums for community dialogue can open the door for tribal members to talk openly and honestly with one another about this problem, share their own experiences, and support one another in healing from victimization. Community education programs can build tribal members’ understanding of the issue and willingness to take action against it. For example, such programs can explain the dynamics of sexual violence and victim blaming (what it is and how to avoid it), the impact of sexual victimization (including the neurobiology of trauma), the link between historical trauma of native people and sexual violence, the link between sexual assault and various health problems, the need to hold offenders accountable, the importance of victim and community healing, the role of cultural tradition in healing, and the need to work together to prevent sexual assault. Tribal members also need to know about available resources for victims and community members and how to access them.

**Provide the context for community dialogue.** To cultivate conditions that are conducive to talking about sexual violence, it is important that those initiating the dialogue do so in ways that are safe (e.g., take care especially not to “out” or otherwise harm victims) and that use language that is culturally relevant. Some tribes lack traditional language to describe sexual assault—one participant spoke of a tribal court judge who only spoke the traditional native language, which had no terms for sexual violence. In addition, people generally have difficulty speaking about experiences that are personal and painful to recall. They may need to be given appropriate words and images to help them engage in discussions on this topic.

Several roundtable participants talked about tribal members and leaders who could not initially say the words “sexual assault” and “rape” due to their discomfort with the language and topic. After starting a dialogue about the problem, and with the benefit of education or training, these tribal members and leaders now talk about it and actively work against it.

Film documentaries, such as *Rape on the Reservation* and *Hollow Water*, have been used to introduce the topic and facilitate dialogue about it in tribal communities. Tribes may want to create their own videos as a tool to encourage continued dialogue about sexual assault and healing from it. Community-wide activities and events have been used to give victims a voice, engage and educate community members, and encourage victim and community healing from sexual violence. Roundtable participants discussed healing ceremonies and programs that occur in their communities. Some mentioned events such as “take back the night” programming and annual walks to promote victim healing.

The Cass Lake IHS SART/DVRRT created a video on sexual assault and intimate partner violence, along with other education tools. It provides multidisciplinary training on best practices and emerging issues in response to these problems and offers community outreach and awareness raising.

**Consider ways to introduce the topic indirectly.** Normalizing discussions about sexual violence is an important task for tribal communities as they strive to lessen the stigma and shame that is connected to victimization, but community members may still resist having direct discussions about it. The topic may
need to be introduced in the more general context of wellness/sobriety, historical trauma, public safety or health, or some other topic that is neutral but creates an opportunity to discuss sexual violence and the native culture or concerns.

Law enforcement officers of the Tohono O’odham Nation (Tucson, Arizona) often have a presence at local events such as rodeos, community days, and diabetes prevention program exercises. These forums are an opportunity for officers to reach out to the community in a positive way and allow residents to get to know and trust them. During such events, individuals who want to talk about crime issues such as sexual violence often approach officers. It may feel safer for these individuals to talk with law enforcement in these settings rather than calling in a report and having an officer come to their home. A visit by officers to their home might lead to identification as a victim and shaming by their families and communities.

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The Healthy Families program, which began as a parenting class under Orutsarmiut Native Council’s Family Support Services, has become part of multiple programs in the Y-K Delta region of Alaska. These programs are based on the teachings and guidance of elders in the region. They apply Yup’ik teachings, values, and traditions to help people live a healthy, balanced life, free of interpersonal violence and substance abuse. The goal is for participants to be able to “live in completeness.” The curriculum offers community members an opportunity to engage in conversations about sexual violence in the context of historical trauma and its impact on contemporary Yup’ik culture. For example, in one Village that started dialogue based on the Healthy Families Program, the community discovered that an entire generation of males had been molested by a single religious leader.

Promote outreach initiated at both professional and grassroots levels. In some AI/AN communities, one or more of the local agencies or coordinating entities that respond to sexual assault have taken on community outreach and education roles. For example, several roundtable participants discussed community education and engagement efforts of SANE-SAFE programs, victim advocacy programs, tribal law enforcement, and prosecution. In other communities, this dialogue may be started at a grassroots level by community members who see injustices occurring and are willing to fight for change, as the SAFESTARs of Wind River Reservation are doing. In both of these instances, dedicated and passionate individuals who were trained on the issue and understand the connection of sexual assault to historical trauma of the native people were able to open the door for community dialogue about the problem and encourage victims to seek help.

After participating in circle programming at Red Lake Reservation’s Equay Wiigamig program, several attendees are now helping Equay Wiigamig’s outreach efforts to youth and young adults in the community to reach more victims and to encourage women and girls to ally with men and boys to present a united front against sexual violence.

Target outreach initiatives and materials to the general public and/or specific populations (schools and students, tribal council members and community leaders, etc.) depending on the needs of the tribal community. Several roundtable participants identified the particular need for community education with young people so they know what sexual assault is, can talk about it, and get help if they need it.
The community educator with the Norton Sound Health Corporation has provided community education and discussion for those in the halfway house and jail in Nome, Alaska. It is not uncommon for native people who are under supervision of the criminal justice system to have grown up in homes where they had to deal with violence, alcoholism, or sexual victimization. These individuals may also have had little exposure to cultural teachings and even less exposure to the traditional subsistence activities of hunting and fishing. A focus of the education programming was to provide information about the tribe’s history and encourage program participants to strengthen their cultural identity through learning traditional hunting and fishing practices from other tribal members willing to mentor them. In this way, program participants were able to integrate cultural identity and practices into their own healing and in successful re-entry into the community.

In victim outreach and sexual assault response procedures, strive to be inclusive of victims of all backgrounds in the community. There are many different populations and issues to consider. For example, if community outreach materials refer only to victims as girls and women, male and gender nonconforming victims may not seek help. If the focus of services is on adult victims, children and teens may not feel safe to disclose their victimization or know where to turn for assistance. If sexual violence is portrayed only within a heterosexual content, LGBTQ/two-spirited victims may not feel welcomed.19

Examine victim outreach materials and response procedures to ensure they are as inclusive as possible. For example, SANEs-SAFEs can review the questions they ask patients to see if they need to be adjusted to be inclusive of persons of all gender identities.20

The Tuba City Regional Health Care Corporation’s outreach and education materials include gender neutral language to be inclusive of the needs of LGBTQ/Two Spirit victims of sexual assault.

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Equay Wiigamig, a victim services program located on the Red Lake Reservation in Minnesota, has outreach and education materials that speak to the specific needs of male victims of sexual assault. Equay Wiigamig acknowledges the trauma that male survivors face and provides cultural services for them. If it does not have the resources to assist male survivors with their specific healing needs, referrals to outside services are offered.

6. Meeting Victim Needs

Sometimes the approach that agencies and individuals responding to sexual assault use when interacting with native victims can have a negative impact. For example, their response might be victim blaming or not taking into consideration the full extent of trauma experienced. Their response might be insufficient to address victims’ needs, lack application to the victim’s life, or dismiss the victim’s strengths and cultural beliefs and traditions. Roundtable participants offered strategies to help tribes avoid such negative consequences by focusing on providing a culturally relevant, trauma-informed, victim-centered, culturally relevant care.

Promote trauma-informed response. When responders are grounded in an approach to victims that is trauma-informed—one that recognizes that many individuals who experience sexual assault are survivors of multiple forms of trauma, including historical trauma, repeated victimization, marginalization, discrimination, and other forms of violence—it sets the foundation to provide services
that are anticipative of and responsive to the full scope of trauma that victims may have experienced.\textsuperscript{21} A trauma-informed approach also strives to understand victims within their familial, social, and community contexts and life experiences, provide assistance with healing that builds on their strengths, and is culturally relevant.\textsuperscript{22} The roundtable participants who were SANEs stressed that when responders are trained to respond in a trauma-informed way, they create safer environments for native victims to come forward for help and to participate in justice processes. Trauma-informed care also recognizes the value of continued care and support for victims beyond immediate response.

The SANE and the community educator from Norton Sound Health Corporation (NSHC) in Nome, Alaska, developed a series of training modules to educate facility medical and nursing staff on critical issues in dealing with victims seeking help in the emergency department or other departments of the hospital. Some of the topics covered include historical and current trauma affecting the people of the Bering Strait Region, trauma-informed medical care, how to conduct a medical forensic exam, and pediatric genital anatomy and physiology. The trainings are brief so they fit into medical staff or nursing meetings and work to increase staff knowledge over time. To provide holistic health care in individual cases, the SANE does case management with each patient or victim with whom she has contact. In that way, the SANE acts as a bridge for these patients to other services at NSHC or in the community.

In addition to responder training on trauma-informed approaches, it was noted that community members can also benefit from trauma-informed sexual assault education.

The community educator with NSHC seeks to create a safe environment for native people in the region to discuss the problems of sexual assault, domestic violence, and child sexual/physical abuse and neglect. She frames the education and discussions within the context of their culture and experiences. She is also clear that she, and therefore NSHC, is learning as much if not more from the participants as they may be learning from her. It is this exchange of knowledge that builds trust in the forensic nursing program and increases the number of victims seeking care at the hospital.

**Promote victim-centered response** refers to systematic focus on the needs of a victim to ensure the compassionate and sensitive delivery of services in a nonjudgmental manner.\textsuperscript{23} Roundtable participants offered suggestions to minimize victim re-traumatization in the aftermath of a sexual assault or disclosure of such an incident:

- **Make victim advocates available for victims and their families as early as possible after a disclosure of victimization** to offer services to support victims and help them heal.
- **Maintain a focus on helping victims to heal, whether criminal justice action occurs or not.**
- **Make clear that sexual violence is not the victim’s fault.** Train responders and community members to say to victims, “I believe you. I’m sorry this happened to you.” It stresses that the community stands against this violence and with the victims.
- **Make the response process as confidential for victims** as possible, depending on the facts of the case (e.g., even when there is little confidentiality of patient records in cases requiring mandatory reporting, responding agencies can still make sure that they have and enforce policies limiting release of information only to those who legally can access such records).\textsuperscript{24}
• **Be clear with victims about related costs they may incur** (e.g., medical care and counseling). Also, explain assistance that may be available through state crime victims’ compensation programs, how to apply for it, and whether or not there is help available to fill out the application.²⁵

• **Promote advocacy to ensure victim access to crime victim compensation.** Related forms can be overwhelming to complete, and even when completed, it can be difficult to be successful in getting compensation. Seeking intervention from leadership of victim compensation programs may be necessary to ensure that native victims are better served systematically.

• **Make sure that victims’ safety needs are considered.** Offer advocacy services to assist with activities such as safety planning and applications for protection orders. Tribal prosecutors can encourage tribal pretrial release and sentencing conditions that order offenders to stay away from victims and their family members. Victim service programs on tribal land can interface with their sex offender registration and management programs (where they exist) to encourage victim-centered interventions. Engagement between these programs can let victims know that the tribe has a commitment to holding offenders accountable.

• **Seek victim input related to tribal policies about offenders’ access to community and traditional activities where victims and families may be present.** One approach is to have the court include conditions of supervision that apply to registered sex offender’s access to such activities. Also, tribal probation departments can adopt policies to consult with victims before making probation recommendations.

Equay Wiigamig, a domestic and sexual violence victim services and shelter program located on the Red Lake Reservation in Minnesota, partners with the tribal court’s legal advocate to help victims fill out applications for state victim compensation.

Offer healing options that incorporate the tribes’ beliefs and customs. Roundtable participants felt that the most effective responses to sexual violence in tribal communities were those that honored the people’s ways of life. To that end, tribes can seek funding, resources, and community support and assistance to implement native-focused, culturally appropriate healing programs for victims. The costs for such activities may be covered, at least in part, by grant funds or as a victim restitution expense during offender sentencing. More generally, all responders can frame their interactions with victims in ways that acknowledge the strength of cultural beliefs and customs.

A group of concerned community members from the Oglala Sioux Tribe (Pine Ridge, South Dakota) joined together to offer summer healing camps for children who have been the victims of sexual abuse. Children and family members who wish to heal from trauma are invited to participate, regardless of whether their cases were prosecuted. The tribe’s Attorney General’s Office and court make referrals to the camp. Campers spend their time during the weekend camp working on traditional regalia in preparation for participating in a traditional healing ceremony that is the culminating camp event. Campers and their families are also invited to participate in other activities during the week, such as a Lakota naming ceremony for campers who have not yet received their Lakota names. The volunteers remain in contact with the campers and their families once camp is over and encourage them to participate in sweat lodges and other healing ceremonies throughout the year.

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Wise Women Gathering Place (WWGP), in Green Bay, Wisconsin, is a private, nonprofit agency that partners with many agencies, including tribes in the Oneida, Menominee, Stockbridge, and Ho-Chunk areas. WWGP has a culturally based healing component, the *Mending Broken Hearts* curriculum (based on White Bison’s *Mending Broken Hearts: Healing from Unresolved Grief and Emotional Trauma*), that it adapted for use in its community to address healing from trauma (with the understanding that most residents have experienced trauma). There are waiting lists to attend these 4-day programs. Participants come not only from the local area, but also from other nearby states and Canada. WWGP uses a peer-to-peer training model; it hosts a training of trainers, and then those trainers facilitate WWGP community classes that are held four times a year and are open to everyone. WWGP staff have been trained on many of White Bison’s curricula, but feel that the *Mending Broken Hearts* classes are the best fit for the community at this time.

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At the Tulalip Tribes, survivors of sexual violence have formed a self-help group. The group offers support and encouragement, and offers a healing ceremony for victims. Trained elders/aunties who are survivors assist the group, providing grounding and perspective.

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The Rites of Passage program of Equay Wiigamig (Red Lake, Minnesota) is offered to women and girls who are sexual assault survivors. Through this program, survivors participate in a ceremony to release their trauma experiences and reclaim their spirit.

### 7. Recognizing Differences in Response: Child and Vulnerable Adults

Although there are many populations that can be considered vulnerable, roundtable participants focused here on differences in response to adult victims in general from response to children and vulnerable adults (these populations are typically defined by jurisdictions).

**Ensure responders are aware of variations in response to child victims, adult victims, and vulnerable adult victims.** The legal and development needs of child and adolescent victims, adult victims, and vulnerable adult victims are distinct. The systemic response to sexual violence committed against a member of one of these populations can vary based on factors such as the responding jurisdictions’ mandatory reporting requirements, criminal justice response, entities that coordinate criminal justice response (MDTs versus SARTs), child and adult protective services, victim services, and medical forensic examinations.

MDTs and SARTs offer a forum to clarify differences in interventions appropriate for each of these populations. In particular, roundtable participants discussed the challenges and ambiguity sometimes involved in adolescent cases. The discrepancies between relevant health care consent laws and mandatory reporting laws can make it difficult for health care professionals to determine whether or not adolescents can make anonymous or “Jane Doe” sexual assault reports, and/or consent to health care services without parental notification or consent.

**Train responders on their mandatory reporting obligations.** Responders should be clear on the circumstances under which they are required to report sexual assault so they can explain to victims their options for reporting, victim-provider confidentiality issues, and whether they can have forensic
evidence collected anonymously and stored until they make a decision about reporting (unlikely in situations where there are mandatory reporting requirements). Note that because responders are required to make a report regarding sexual violence against a minor or vulnerable adult, these populations typically have few options.

As mandatory reporting decisions in sexual assault cases in Indian Country must take into account sometimes conflicting cross-jurisdictional laws and policies, the MDTs and SARTs are ideal sources to ensure that questions related to mandatory reporting in specific scenarios are discussed and answered.

8. Enhancing SANE-SAFE Efforts

Note that many, but not all of these SANE-SAFE program capacity-building strategies emerged out of a breakout session for health care providers during the roundtable discussion.

Promote 24/7 access to SANE-SAFE programs for victims of sexual assault in tribal communities. Establishing SANE-SAFE programs in IHS facilities and tribal community health clinics is critical to serve victims in Indian Country. Where they exist, the presence of these programs in and near tribal communities is making a positive difference in sexual assault victims’ health care in the aftermath of an incident. SANE-SAFE community outreach efforts also build public awareness that sexual assault is not acceptable, not the victims’ fault, and prompts victims to seek help.

Designated SANE-SAFE positions are the preference, as it can be very difficult for medical professionals to juggle medical forensic exam work with other responsibilities.

Recognize that there are different SANE-SAFE protocols and training for adult/adolescent versus pediatric cases. A tribal community should strive to have the capacity to conduct both types of medical forensic examinations using trained SANEs-SAFEs with the appropriate specialization. It is important that responders and community members know where to go to receive an adult/adolescent examination versus a pediatric examination.

SANEs at the Cass Lake IHS facility in Minnesota and the Norton Sound Health Corporation in Alaska conduct adult/adolescent examinations and collaborate with offsite programs for pediatric examinations. The Tuba City Regional Healthcare Corporation (TCRHC) at Navajo Nation in northern Arizona does examinations in adult/adolescent, as well as pediatric cases. A SANE who has pediatric training conducts all the child examinations at TCRHC.

Those programs that perform pediatric examinations should have child-friendly private exam rooms. Tribes can encourage the development of a pediatric evidence collection kit by the entities that develop and supply kits for their tribal community.

For communities without SANEs-SAFEs, address urgent needs for victim support, first aid, and forensic evidence collection. Until SANEs-SAFEs are consistently able to offer services to a tribe, urge tribal leadership to support telemedicine practices, active SAFESTARs in their communities, or other feasible solutions to fill the gaps.

Encourage the MDT and SART to include the SANE-SAFE program as an active member. As victim accessibility to SANE-SAFE examinations is an issue for many tribal communities, particularly those in remote regions, MDTs and SARTs are forums for law enforcement, SANE-SAFE programs, advocates,
prosecutors, and other first responders to develop protocols to facilitate a timely, victim-centered, culturally relevant medical forensic examination for victims of sexual assault and to clarify the myriad of issues surrounding the exam process.

**Promote the availability of victim advocates for victims and their families during the exam process.** Undergoing a forensic medical exam can be a potentially traumatic experience for victims of sexual violence. The presence of a victim advocate who has been specially trained to provide comfort and support to victims of sexual violence can put victims at ease, and can help to minimize the possible traumatic effect of the experience.

**Be willing and prepared to incorporate traditional healing practices in the exam process.** Build relationships with local traditional healers. Offer access to victims for traditional healers and specific healing practices (e.g., a healer can bless the area when the victim arrives), and have artwork and articles in the waiting room and other facility areas where the exam will take place that reflect the tribe’s culture.

**Take steps to make the exam process as confidential for victims as possible.** For example, designate space for the examination away from crowded areas, and offer victims and their families access to a private waiting room. Explain reporting options to victims, and their options for confidential communications with responders.

**Urge health care facility-specific procedures related to patient records management in sexual assault cases**—whether records are paper or electronic—are in place so that records are kept secure and as confidential as possible, with the goal of limiting access to only those who are authorized. One suggestion was to consider providing patients with a code that is on their paper or electronic record file that they can use to identify themselves in subsequent communications with the facility rather than using their name. Also, promote training for health care facility admissions and records department staff to help maintain confidentiality of records and encourage proper coding of costs for billing purposes. Ongoing training can address staff turnover issues.

**Build an element into the protocol to explain to victims their options during medical forensic exam process.** For example, the protocol should allow victims to decline a medical forensic examination or particular exam procedures. It should explain whether they can have forensic evidence collected anonymously or stored until they make a decision about reporting (note that this option is unlikely in situations where there are mandatory reporting requirements).

**Develop victim-centered policies on storing a kit until a victim makes a reporting decision.** Health care facility policies vary on how long to store completed forensic evidence collection kits if victims have not decided whether to report. For example, one roundtable participant indicated the local IHS facility keeps kits for 30 days before destroying them if the case is not reported. If the decision is made to report, the kit is transferred to law enforcement (with law enforcement then following its own protocols for transfer of forensic evidence to the appropriate crime lab or designated evidence storage facility).

Another IHS facility keeps completed kits for up to 6 months. Some keep them indefinitely. Dialogue between SANEs and law enforcement to coordinate storage and transfer policies may help the resulting policy be as efficient and victim-centered as possible.

**Clarify the reimbursement procedures for examiners and health care facilities for examinations performed, and procedures for victims to apply for victim compensation funding to cover costs of medical care.** SART and MDT meetings are a forum for SANEs-SAFEs to seek these clarifications. Tribes can work with state and federal agencies to promote exam reimbursement and victim
compensation procedures that are as clear and uncomplicated as possible, and are fair for examiners, facilities, and victims.31

9. Enhancing the Tribal Justice Process

Note that many but not all of these strategies emerged out of a breakout session for law enforcement and prosecution during the roundtable discussion.32 While some of these strategies get into intervention details, the majority represent capacity building issues for the tribal justice system.

**Victim Rights**

**Consider adopting a tribal crime victims’ bill of rights.**33 For example, Tohono O’odham Nation includes a chapter on crime victims’ rights in its tribal code.34

**Recognize the need for tribal victim services to assist with initial and followup needs of victims and their families.** Clarify the roles and responsibilities of tribal versus state and federal victim services and how they coordinate to aid individual victims. If there is also a nongovernmental victim advocacy program that serves local sexual assault victims, also clarify that agency’s role and how tribal victim services can coordinate with them to serve victims and their families.

Clarify the role of the victim advocate in accompanying victims during criminal justice interviews and other processes, noting any differences for child versus adult victims.

The state and federal victim specialists should participate in the SART and MDT along with tribal victim services and the community-based advocate as appropriate to a case.

**Consider encouraging tribal victims as advocates to become tribal court lay advocates** so they can provide legal representation for sexual assault victims who are seeking tribal court protection orders.

**Standardize communication with victims to talk about the status of their cases and to answer their questions.** For example:

- **MDT members should be on the same page about advising victims about who they need to talk to about the case and when** (e.g., who the victim should contact if they are asked to participate in an interview with the defense counsel or defense investigator).
- **The tribal prosecutor should send a letter to victims** to explain the filing decision, court process, and available resources, and to encourage victims to keep in contact with prosecutors. For example, the Tulalip Tribes’ prosecutor sends a letter to individual victims explaining a decision not to prosecute a case, and inviting the victim to follow up with the prosecutor if they have questions or concerns.

**Tribal Law Enforcement**

**Ensure that tribal law enforcement officers have access to critical data** that allow them to do their jobs (e.g., the Tribal Access Program for National Crime Information [TAP] provides tribes access and input to national crime information databases for both civil and criminal purposes).35 Tribes should be encouraged once they have access to national crime databases to use them not only for inquiries, but also to enter their arrestees’ criminal information and tribal protection orders.

**Consider including a no arrest provision for sexual assault victims identified in the course of a call on another matter** (e.g., due to a person’s illegal use of alcohol or drugs or an outstanding warrant). As
described earlier, the Oglala Sioux Tribe (Pine Ridge, South Dakota) implemented a no arrest policy for potential criminal activities by victims reporting sex crimes committed against them. The policy delays the arrest decision to focus on providing services to address the sexual assault victims’ health, need for support, and safety. For it to be effective, responding tribal agencies (law enforcement, prosecution, health care, victim services, corrections, etc.) need to adopt this policy and be clear on their roles in carrying out its provisions.

Tribal law enforcement officers should respond to a delayed report of sexual assault in the same way that they would to an immediate outcry. Law enforcement still needs to follow adopted protocols for investigation, interviewing, and safety planning for victims.

Once a report of sexual assault is made to tribal law enforcement, who has jurisdiction for investigation and prosecution should be determined. In the case of federal or state jurisdiction, the report should be forwarded to the appropriate law enforcement agency immediately.

The response protocol should address the process of reading a suspect their Miranda rights. Particularly in cases that have the potential to go to federal prosecution (although also pertinent in cases prosecuted by the state), roundtable participants noted that tribal law enforcement should use Indian Country Civil Rights Act Miranda rights to ensure that suspects’ statements can be used as evidence in cases (rather than getting thrown out of court for violating fifth amendment rights). The decision on whether or not to read a suspect their Miranda rights needs to be consistent with tribal law, policies, and protocols.36

Include tribal victim services during first response to support victims, in addition to federal or state victim services, regardless of whether it is an immediate outcry or a delayed report.

Interview protocols should be established for where, when, and by whom victims will be questioned after a sexual assault.37 One protocol focus is avoiding multiple interviews of the victim. Protocols need to be different for children/adolescents, adults, and adults with cognitive disabilities. Children should receive forensic interviews where possible.

Tribal law enforcement officers should be trained on and use a checklist of minimal facts questions to ask in sexual assault investigations to help avoid victim blaming and bias in the report writing process. Law enforcement response protocols should also discourage asking victims to write a statement about what happened.

Officers should be trained on report writing in sexual assault cases and have a report template. The training and the template should take into account issues such as the neurobiology of trauma and technical aspects of report writing (language, tone, etc.).38

Use the office of professional standards at tribal law enforcement agencies to help set standards for sexual assault training and response. In addition to training on basic sexual assault law enforcement response and investigation, encourage annual training to address coordination responsibilities.

Law enforcement officers responding to domestic violence calls should screen for sexual assault.
**Tribal Prosecution**

Tribal law enforcement should meet face-to-face with the tribal prosecutor to discuss the case, as he/she deliberates whether to proceed with prosecution. Sometimes, other charges can be filed, even if there is insufficient evidence to prosecute the sexual assault charge. Depending on how much time there is to make a decision, the prosecutor may decide to proceed or not, or to amend the charges later, pending additional investigation.

Tribal prosecutors should not make administrative closure decisions in sexual assault cases until they read the investigative report and meet with the victim.

To help ameliorate the negative ripple effect of declination, tribes might include provisions in their codes and/or develop policies and protocols to remove impediments to concurrent prosecution. For example, there may be a problem with timely declinations and timely return of evidence from the federal prosecutor to the tribal prosecutor. If communication between prosecution offices does not aid in resolving this problem, it may be useful to promote a standard practice for tribal investigators to participate in investigations with federal investigators so that the tribal prosecutor has access to evidence and can move forward with prosecution, without having to wait for the federal prosecutor's decision.

Tribes need a model plea agreement that protects both the defendant’s rights and seeks justice. (The Tulalip Tribes' prosecutor has such an agreement.) Such an agreement is particularly useful if a bench trial rather than a jury trial seems to be the standard.

**Tribal Sex Offender Management**

Tribes should consider their capacity for implementing sex offender management practices, what practices are feasible tasks for them to assume in the near future, and what practices they want to work toward over a longer term period. As noted earlier, a first step for some tribes in this regard is code development and capacity building to implement the requirements of SORNA.

Ongoing coordination among tribal and state and federal jurisdictions is essential in sex offender management. For example, tribes need a means of monitoring offenders’ compliance with federal probation when offenders return to their communities. They need to know the federal conditions of release for offenders who are out on bond and/or under the supervision of federal probation, including no-contact provisions. Without such knowledge, tribal responders responding to calls for assistance involving the offender will have no idea that he/she is under federal supervision or of the stipulations of his/her conditions of release. If tribal responders learn of a violation of the offender’s conditions of release, they need to be clear what actions they and others can take (e.g., notifying federal probation personnel and prosecutors).

In addition to proactive cross-jurisdictional policies and protocols that support sex offender management, communication and troubleshooting across jurisdictions is necessary as problems arise. An example raised was a case in which the offender, who was incarcerated in a federal correctional facility, was emailing his native victim. He had no-contact orders as part of his community supervision once he was released, but those orders did not apply while he was incarcerated. Dialogue among the tribe (e.g., via law enforcement or prosecutor) and federal stakeholders (the Federal Bureau of Prisons...
and the federal prosecutor) can help identify solutions to prevent further offender contact with the victim. One solution might be via a court order sought by the federal prosecutor.

**As part of sentencing for sex offenders in tribal courts, tribes can include no-contact orders in the offenders’ conditions of release to protect victims and their families.** Many tribes do not have their own probation officers to monitor compliance with tribal no-contact provisions. Tribes should however work towards the goal of facilitating successful offender re-entry into the community, which will thereby help reduce the risk of further harm to the community members.

**Tribes can consider ways to increase the cultural relevancy of sex offender treatment programs for native offenders.**

**Incorporate the option for restorative justice interventions in the tribal justice process.** Such interventions can potentially occur at multiple points, such as pre-charging, post-conviction, in prison/jail, or pre- or post-release. Examples mentioned at the roundtable discussion were public apologies by offenders to their victims and the community and sentencing circles for offenders. One caution is that restorative justice activities that involve offender-victim interaction should be considered and planned carefully as they have the potential to cause further emotional trauma to victims or disempower them.

Wise Women Gathering Place (WWGP), in Green Bay, Wisconsin, has been involved in the Oneida Tribe’s restorative justice programs. The tribe has a committee (WWGP is a member) that holds “Edge of the Woods” ceremonies for native offenders who have been released from incarceration and are re-entering the tribal community. The process reinforces traditional cultural beliefs as a way to be honest and open, and encourages communication skills to help avoid reoffending. As part of the planning process, the committee speaks with both the victim and the offender to work out how the ceremony will be safe and confidential for participants. Offenders are also connected with resources and cultural/spiritual people who can serve as a sources of support. Sometimes, certain medicines, ceremonial practices, and/or sweat lodges are prepared for the ceremony.

Roundtable participants from Alaska stressed that for communities that practice subsistence living, sentencing conditions for offenders who sexually assault their intimate partners might include continued subsistence for their families (if they engaged in that practice). In that way, the affected victims and families would not suffer further by the loss of food typically brought in by the offender. All of these practices should be adopted only with victim/survivor approval.

**Conclusion**

The strategies highlighted in this report are not meant to be viewed as the only ways to facilitate effective response to sexual assault in tribal communities. Rather, OVC, OVW, and IHS encourage tribal communities to take away from this report only what they think might help their tribe. Most strategies were introduced briefly rather than explained comprehensively. The hope is that tribes will have tribe-specific dialogue about strategies that interest them and consider their usefulness and feasibility in their community more fully. Ultimately, each tribe must find its own unique path to address the problem of sexual assault, help victims heal, and create and sustain safe and healthy communities.
A Closing Idea to Consider...

Mechanisms to facilitate the sharing of information and resources among practitioners involved in response to sexual assault in tribal communities were suggested. These mechanisms could also serve as a forum to promote ongoing dialogue among practitioners about issues, challenges, and solutions.
Appendix 1. Roundtable Discussion Participants and Observers

Participants

- David Adams (Sault Ste. Marie Tribe of Chippewa Indians), Tribal Liaison and Assistant U.S. Attorney, U.S. Attorney’s Office, District of New Mexico, Albuquerque, NM
- Karin Ashby, Detective, Tohono O’odham Police Department, Tucson, AZ
- Diane Bohn, R.N., C.N.M, Ph.D., Director, Case Lake Indian Health Service Sexual Assault and Domestic Violence Prevention Initiative, Cass Lake, MN
- Barbara Cromwell, Nurse/Forensic Nurse, Norton Sound Health Corporation, Nome, AK
- Jose Figueroa (Fort Peck Assiniboine and Sioux Tribes), Special Agent, District Office of Justice Services, Bureau of Indian Affairs, U.S. Department of the Interior, Laguna, NM
- Vicky Fineday (Red Lake Band of Chippewa Indians), Program Manager, Equay Wiigamig—Red Lake Women’s Shelter, Red Lake, MN
- Karen Gaddis (Chickasaw), Director, The Chickasaw Nation—Violence Prevention Program, Ada, OK
- Sharon Jones Hayden, Domestic Violence and Sexual Assault Prosecutor, Office of the Reservation Attorney, Tulalip Tribes, Tulalip, WA
- Hon. Jodie McAdams (Eastern Shoshone), Councilwoman, Eastern Shoshone Business Council, Fort Washakie, WY
- Julia Mc Lester (Oneida Tribe of Indians of Wisconsin), Sexual Assault/Domestic Violence Program Specialist—Wise Women Gathering Place, Green Bay, WI
- Tatewin Means (Oglala Sioux), Attorney General, Oglala Sioux Tribe, Pine Ridge, SD
- Arlene O’Brien (Tohono O’odham Nation), Program Manager, Southwest Center for Law and Policy, Tucson, AZ (co-facilitator)
- Gwenyth Parrish, R.N., M.S.N. (Navajo), Emergency Department Clinical/Forensic Nurse, Tuba City Regional Healthcare Corporation, Tuba City, AZ
- Monique Vondell-Reike (Turtle Mountain Band of Chippewa Indians), Director, Tribal Justice Center, Association of Village Council Presidents, Bethel, AK
- Hallie Bongar White, Executive Director, Southwest Center for Law and Policy, Tucson, AZ (co-facilitator)

Observers

- Lanisha Bell (Mississippi Band of Choctaw), National Coordinator/Program Manager of Victim Assistance, Bureau of Indian Affairs, U.S. Department of the Interior
- Shannon May, Program Manager—Victims of Crime, Federal Bureau of Investigation Office of Victim Assistance
- Dr. Beverly Cotton (Mississippi Band of Choctaw), Director, Division of Behavioral Health, Office of Clinical and Prevention Services, Indian Health Service, U.S. Department of Health and Human Services
- Theresa Friend, Public Health Advisor, Division of Behavioral Health, Indian Health Service, U.S. Department of Health and Human Services
- Marcia Good, Senior Counsel to the Director, Office of Tribal Justice, U.S. Department of Justice
- Joye E. Frost, Director, Office for Victims of Crime, U.S. Department of Justice
- Allison Turkel, Deputy Director, Office for Victims of Crime, U.S. Department of Justice
- Kimberly Woodard, Sr. Tribal Affairs Specialist, Office for Victims of Crime, U.S. Department of Justice
- Lorraine P. Edmo (Shoshone Bannock), Deputy Director for Tribal Affairs, Office on Violence Against Women, U.S. Department of Justice
- Rebekah Jones (Iowa Tribe of Kansas & Nebraska), Tribal Government Grant Program Specialist, Office on Violence Against Women, U.S. Department of Justice
- Marnie Shiel s, Attorney Advisor, Office on Violence Against Women, U.S. Department of Justice
- Leslie A. Hagen, National Indian Country Training Coordinator, U.S. Department of Justice

Jennifer Shewmake, Special Initiatives Team Leader, OVC Training and Technical Assistance Center (OVC TTAC), coordinated this roundtable meeting. Kristin Littel, Consultant to OVC TTAC, authored this report.
Appendix 2. Resources

This resource list includes links to resources that were referred to during the roundtable discussion or that could address needs identified during the discussion. It is NOT an inclusive listing of resources to aid tribes in developing and implementing response to sexual assault.

U.S. Department of Justice (DOJ)

Tribal Justice and Safety: www.justice.gov/tribal
- DOJ Tribal Training and Technical Assistance Providers: www.justice.gov/tribal/training-and-technical-assistance
- Coordinated Tribal Assistance Solicitation (CTAS) — federally recognized tribes and tribal consortia can apply for most of DOJ’s tribal grant programs using a single application: www.justice.gov/tribal/grants
- Tribal Access Program (TAP) — goal is to provide tribes access to national crime information systems for civil and criminal purposes: www.smart.gov/pdfs/tap.pdf
- Sex Offender Registration and Notification Act (SORNA): www.smart.gov/sorna.htm

- SMART Funding Opportunities: www.smart.gov/funding.htm

Office of Justice Programs, Office for Victims of Crime (OVC): www.ovc.gov
- American Indian/Alaska Native SANE-SART Initiative: www.ovc.gov/AIANSane-Sart/
- Alcohol-Facilitated Sexual Assault in Indian Country video: www.ovc.gov/library/alcohol-facilitated-sexual-assault.html

Office on Violence Against Women (OVW), Tribal Communities: www.justice.gov/ovw/tribal-communities
- Grants to Indian Tribal Governments Program
- Tribal Sexual Assault Services Program
- Rural Sexual Assault, Domestic Violence, and Stalking Program

31
U.S. Department of Health and Human Services (HHS)

HHS Agencies and Offices (many have tribal programs): www.hhs.gov/about/agencies/hhs-agencies-and-offices/index.html

Indian Health Service (IHS) Sexual Assault Protocol:
- IHS Health Service Manual 3.29. Sexual Assault at www.ihs.gov/ihm/index.cfm?module=dsp_ihm_pc_p3c29 and

Forensic Healthcare: www.ihs.gov/forensichealthcare/
- Tribal Forensic Healthcare Training Project: IHS funded the International Association of Forensic Nurses (IAFN) to provide training to medical professionals in Indian health systems. www.tribalforensichealthcare.org
- Listserv: www.ihs.gov/listserv/topics/signup/?list_id=251
- Domestic Violence Prevention Initiative (DVPI)—tribal grant program to provide funding to support violence prevention and treatment for victims of violence, including victims of sexual assault: www.ihs.gov/dvpi/

Tribal Training and Technical Assistance (TTA) Providers
(The following TTA providers are highlighted here because they offer broad-based online information and resources on sexual violence for responders in Indian Country.)

OVC Training and Technical Assistance Center: www.ovcttac.gov
- Victim Assistance Training Online: www.ovcttac.gov/views/TrainingMaterials/dspOnline_VATOnline.cfm

Southwest Center for Law and Policy (SWCAP): www.swclap.org
- National Indian Country Clearinghouse on Sexual Assault (NICCSA) — goal is to be a one-stop, comprehensive source for information on sexual violence in Indian Country: www.niccsa.org
  - NICCSA free helpline for professionals: 855–464–2272, M–F, 8:00 a.m.–4:00 p.m. pacific time
  - Find information and resources organized by topic: Advocacy, Legal, Medical and Health, Victims with Unique Considerations
- SAFESTAR (Sexual Assault Forensic Examination Support Training Access and Resources): www.swclap.org/safestar/
- National Tribal Trial College: www.nttconline.org/ets/welcome.aspx
  - OVW-approved training topics: www.swclap.org/uploads/file/292ebc49e92841a9ba86f96c772fb1b5/List%20of%20available%20training%20with%20new%20address.pdf
- Tribal Policy and Law Institute (TPLI): www.home.tlpi.org
  - Sexual Assault Publications: www.home.tlpi.org/sexual-assault-publications
  - Tribal Court Clearinghouse: www.tribal-institute.org
  - Capacity Building Center for Tribes (goal is to help strengthen the child and family systems of native nations to nurture the safety, permanency, and well-being of native children, youth, and families): https://capacity.childwelfare.gov/tribes/
Examples of Victim and Community Healing Curricula and Programs

These healing and community development programs were mentioned during the discussion and had online information available.

- Healthy Families Program (program applies Yup’ik teachings, values, and traditions to help people live healthy, balanced lives free of interpersonal violence and substance abuse): http://anthctoday.org/epicenter/healthyfamilies/resource_guides/ykRegion_110614_final.pdf (page 5)
- White Bison Mending Sacred Heart program and train-the-trainer program (culturally based healing from grief, loss, and intergenerational trauma, especially for native people from the United States and Canada): www.whitebison.org/Training/Mending_Broken_Hearts.aspx
- Wise Women Gathering Place (Green Bay, Wisconsin) adapted White Bison classes and train-the-trainer program: www.wisewomengp.org/community-programs-groups/white-bison/
- Beauty for Ashes (healing program for victims of domestic abuse, biblical native focus, and train-the-trainer program): www.fwwi.org/bfa.cfm

Recommenda
tions (National Coordination Committee on OVC’s AI/AN SANE-SART Initiative);
International’s 2007 Maze of Injustice: The Failure to Protect Indigenous Women from Sexual Violence in the USA
and the 2008 Maze of Injustice One Year Update; and www.vawnet.org/sexual-violence/print-
Country—Barriers and Resources for Native Women Seeking Help (VAWnet).
2 The SAFESTAR project is coordinated by the Southwest Center for Law and Policy (SWCLAP). See
www.swclap.org/safestar/. SAFESTAR leverages the unique strengths of concerned AI/AN women to provide
culturally appropriate interventions and services to victims of sexual assault. The project focus is training
community volunteers to deliver first aid to victims, provide referrals for followup medical and other care, educate
the community on sexual violence issues, and collect sexual assault forensic evidence from victims.
3 See a National Public Radio All Things Considered segment on Wind River SAFESTARs by M. Edwards (2015)
4 One resource for addressing self-care issues is the 2013 Building Cultures of Care: A Guide for Sexual Assault Services
Programs, by the National Sexual Assault Coalition Resource Sharing Project (RSP) and the National Sexual
Violence Resource Center’s (NSVRC). In particular, review the sections on organizational commitment to staff
growth and wellness (pages 16–17) and individual self-care (pages 47–52). See
5 One resource to help with assessing community needs and strategic planning is OVC’s Strategic Planning Toolkit. See
www.ovcttac.gov/views/resources/dspStrategicPlan.cfm.
6 See justice.uaa.alaska.edu/avs/yukon-kuskokwim.html for the 2015 Alaska Victimization Survey (as
published on the website of the Justice Center of the University of Alaska Anchorage).
7 From Tribal Policy and Law Institute’s (TPLI) 2012 Tribal Legal Code Resource: Sexual Assault and Stalking Laws (S.
8 See www.home.tlpi.org/protocol-guide-series for TLPI’s Protocol Guide Series (publications on law
enforcement/sexual assault, prosecution/sexual assault, SART, and child abuse).
9 A good place to start is with TLPI’s Legal Code Development Series and other technical assistance around code
development at www.tribal-institute.org/legal-code-development-series. In particular, see Tribal Legal Code
Resource: Tribal Legal Code Resource: Sexual Assault and Sexual Assault and Stalking Laws (S. Deer & M.L. White
Eagle, 2012).
10 See the Legal Resources page at the National Indian Country Clearinghouse on Sexual Assault (NICCSA),
www.niccsa.org, for detailed information on federal statutes related to addressing sexual violence in Indian
Country and information on how to develop a comprehensive tribal code to address sexual violence.
12 Bullet drawn from TLPI’s A Victim-Centered Approach to Crimes Against American Indian and Alaska Native
(Chapter 5. Statutes of Limitation). Note that Ericksen and Knecht (2013), at
http://victimsocrime.org/docs/DNA%20Resource%20Center/sol-for-sexual-assault-check-chart---final---
copy.pdf?sfvrsn=2, offer a state-by-state comparison of statutes of limitation for sexual assault and abuse.
13 See http://ojp.gov/smart/sorna.htm for more on SORNA.
14 For the Revised Model Tribal Sex Offender Registration Code, see www.smart.gov/pdfs/MTSOR_Code.pdf.
15 For the Center for Sex Offender Management’s (CSOM) Building a Comprehensive Approach to Sex Offender
http://csom.org/tribal-action-guide/index.htm notes that it is important to recognize that effective sex offender
management includes investigations by law enforcement and other agencies; prosecution, adjudication, and
sentencing considerations; assessment approaches; treatment interventions and supervision strategies; and
registration and notification policies and practices. See this publication for more on the scope of issues to consider.
16 For reference, see the Attorney General Guidelines Stating Principles for Working With Federally Recognized
Indian Tribes, Federal Register, Vol. 79, No. 239, Friday, December 12, 2014 (www.gpo.gov/fdsys/pkg/FR-2014-12-
12/pdf/2014-28903.pdf) and DOJ’s 2013 Policy Statement on Tribal Consultation
19 LGBTQ refers to individuals who are/identify as lesbian, gay, bisexual, transgender, or queer or questioning.
21 This explanation is from Building Cultures of Care: A Guide for Sexual Assault Services Programs.
22 Drawn from Building Cultures of Care: A Guide for Sexual Assault Services Programs. The information cited was originally from B. Proffitt (2010). Delivering trauma-informed services. Healing Hands, 14(6).
24 For more on this topic, see the National Protocol for Sexual Abuse Medical Forensic Examinations, Pediatric, available via www.justice.gov/ovw/selected-publications.
26 For more on Wellbriety Training Institute’s White Bison’s Mending the Sacred Heart program, see www.whitebison.org/Training/Mending_Broken_Hearts.aspx. For more on the programs of the Wise Women Gathering Place, see www.wisewomengp.org/community-programs-groups/white-bison/.
29 As per the National Protocol for Sexual Abuse Medical Forensic Examinations, Pediatric, “A single forensic evidence collection kit is sufficient for adult and children victims, provided it accommodates aspects specific to both populations. Although not required, a separate pediatric kit is strongly encouraged as oftentimes the health community may not otherwise see the urgency and necessity of engaging properly trained pediatric examiners and using medical forensic care tailored to the needs of children who may have been sexually abused.”
31 Note that IHS is the payer of last resort, see www.law.cornell.edu/cfr/text/42/136.61. See the National Protocols for Medical Forensic Examination (both adult/adolescent and pediatric)—each has a section on payment issues. Most important to keep in mind, beyond VAWA requirements that states provide forensic medical examinations to adult and adolescent victims of sexual assault free of charge (for forensic costs), there is no one formula for exam reimbursement and victim compensation across jurisdictions. Each jurisdiction may have different policies and procedures.
32 Note that there was also an advocacy breakout session during the roundtable discussion. Information from that session is dispersed across the report rather than centralized in its own section.
35 For more information on TAP, see www.smart.gov/pdfs/tap.pdf. CJIS systems include the National Crime Information Center, Next Generation Identification, National Data Exchange, National Instant Criminal Background Check System, and the Law Enforcement Enterprise Portal. TAP will assist tribes in analyzing their needs and help identify and provide appropriate solutions. In addition, DOJ will serve as a CJIS Systems Agency for federally recognized tribes. One possible solution is a TAP kiosk in a state-of-the-art biometric station equipped with camera, printer, and finger/palm print scanner that allows access through DOJ to CJIS systems for both criminal and civil purposes. TAP will provide support and training for tribes.
36 Note that many tribes don’t read Miranda rights to suspects at the time of arrest because they don’t have the capacity to provide them a public defender. In addition or alternatively, the tribe may follow a model of indigenous jurisprudence that does not view the administration of justice as inherently adversarial, emphasizes collectivism over individuality, and focuses on the reparation of the relationship between the individual and the community. If there is a deviation in practice for sexual assault cases, then this deviation needs to be part of a larger analysis.
37 See page 33 of TLPI and SWCLAP’s Tribal Law Enforcement Protocol Resource: Sexual Assault. Guide for Drafting or Revising Tribal Law Enforcement Agency’s Protocols Responding to Sexual Assault, for guidance on the initial interview with the victim. Available at: www.tribal-institute.org/download/Tribal_Law_Enforcement_Protocol_Resource_Sexual_Assault.pdf.
40 See www.courts.ca.gov/documents/SentencingCircles.pdf for information about sentencing circles. This fact sheet is a joint effort of several DOJ offices (Office of Justice Programs, National Institute of Justice, Office for Victims of Crime, National Institute of Corrections, and Office of Juvenile Justice and Delinquency Prevention).