COVID-19 Prevention of Suicide, Intimate Partner Violence (IPV), and Adverse Childhood Experiences (ACEs) in Indian Country

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Overview

- Significance of the issue
  - Injury burden in American Indians and Alaska Natives
  - Burden of suicide, intimate partner violence (IPV) and adverse childhood experiences (ACEs)

- **COVID-19: Prevention of Suicide, IPV, and ACEs in Indian Country Project**

- Tribal Epidemiology Centers and Indian Health Boards

- Strategy areas and data-to-action approaches

- Partner accomplishments
Injury Burden in American Indians and Alaska Natives

American Indians and Alaska Natives had an injury mortality rate 1.6 times higher than non-Hispanic whites in 2019.
Burden of Unintentional Injury, Suicide, and Homicide in Indian Country

<table>
<thead>
<tr>
<th>Rank</th>
<th>10-14</th>
<th>15-19</th>
<th>20-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65+</th>
<th>All Ages</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Unintentional Injury</td>
<td>Unintentional Injury</td>
<td>Unintentional Injury</td>
<td>Unintentional Injury</td>
<td>Unintentional Injury</td>
<td>Unintentional Injury</td>
<td>Malignant Neoplasms</td>
<td>Heart Disease</td>
<td>Heart Disease</td>
</tr>
<tr>
<td>2</td>
<td>Suicide</td>
<td>Suicide</td>
<td>Suicide</td>
<td>Suicide</td>
<td>Liver Disease</td>
<td>Heart Disease</td>
<td>Heart Disease</td>
<td>Malignant Neoplasms</td>
<td>Malignant Neoplasms</td>
</tr>
<tr>
<td>3</td>
<td>Malignant Neoplasms</td>
<td>Homicide</td>
<td>Homicide</td>
<td>Liver Disease</td>
<td>Heart Disease</td>
<td>Malignant Neoplasms</td>
<td>Unintentional Injury</td>
<td>Chronic Low Respiratory Disease</td>
<td>Unintentional Injury</td>
</tr>
<tr>
<td>4</td>
<td>Homicide</td>
<td>Malignant Neoplasms</td>
<td>Heart Disease</td>
<td>Homicide</td>
<td>Suicide</td>
<td>Liver Disease</td>
<td>Liver Disease</td>
<td>Diabetes Mellitus</td>
<td>Diabetes Mellitus</td>
</tr>
<tr>
<td>5</td>
<td>Influenza &amp; Pneumonia</td>
<td>Heart Disease</td>
<td>Malignant Neoplasms</td>
<td>Heart Disease</td>
<td>Malignant Neoplasms</td>
<td>Diabetes Mellitus</td>
<td>Diabetes Mellitus</td>
<td>Cerebrovascular</td>
<td>Liver Disease</td>
</tr>
<tr>
<td>6</td>
<td>Heart Disease</td>
<td>Congenital Anomalies</td>
<td>Congenital Anomalies</td>
<td>Malignant Neoplasms</td>
<td>Diabetes Mellitus</td>
<td>Unintentional Injury</td>
<td>Chronic Low Respiratory Disease</td>
<td>Alzheimer’s Disease</td>
<td>Chronic Low Respiratory Disease</td>
</tr>
<tr>
<td>7</td>
<td>Congenital Anomalies</td>
<td>Chronic Low Respiratory Disease</td>
<td>Liver Disease</td>
<td>Diabetes Mellitus</td>
<td>Homicide</td>
<td>Cerebrovascular</td>
<td>Cerebrovascular</td>
<td>Unintentional Injury</td>
<td>Cerebrovascular</td>
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<tr>
<td>8</td>
<td>Cerebrovascular</td>
<td>Complicated Pregnancy</td>
<td>Diabetes Mellitus</td>
<td>Influenza &amp; Pneumonia</td>
<td>Influenza &amp; Pneumonia</td>
<td>Chronic Low Respiratory Disease</td>
<td>Nephritis</td>
<td>Influenza &amp; Pneumonia</td>
<td>Suicide</td>
</tr>
</tbody>
</table>

Burden of IPV in Indian Country

Lifetime Contact Sexual Violence, Physical Violence, and/or Stalking by an Intimate Partner — NISVS 2010-2012

AI and AN

47.5% vs 37.3%

40.5% vs 30.3%

Non-Hispanic White

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Burden of ACEs in Indian Country

### ACEs among Children

<table>
<thead>
<tr>
<th>ACEs</th>
<th>AI and AN Children (%)</th>
<th>Non-Hispanic White Children (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2+</td>
<td>40</td>
<td>21</td>
</tr>
<tr>
<td>3+</td>
<td>27</td>
<td>12</td>
</tr>
<tr>
<td>4+</td>
<td>17</td>
<td>6</td>
</tr>
</tbody>
</table>

### ACEs among Adults

<table>
<thead>
<tr>
<th>ACEs</th>
<th>AI Adults (%)</th>
<th>Non-AI (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>13</td>
<td>6</td>
</tr>
<tr>
<td>4-5</td>
<td>13</td>
<td>7</td>
</tr>
<tr>
<td>6+</td>
<td>19</td>
<td>4</td>
</tr>
</tbody>
</table>


COVID-19: Prevention of Suicide, IPV, and ACEs in Indian Country

+ Subproject of CDC-RFA-OT18-1803 Tribal Public Health Capacity Building and Quality Improvement Cooperative Agreement

+ $12 million distributed to 12 regional Indian Health Boards associated with Tribal Epidemiology Centers

+ 1-year funding duration (July 2020 – July 2021)

+ Data-to-action approaches: 1) Rapid assessments, 2) Surveillance & evaluation, and 3) Implementation of prevention efforts

+ Strategy areas: 1) Tribal data and information systems, 2) Public health programs and services, and 3) Public health resources and communications
Strategy Areas

- Tribal data and information systems
- Public health programs and services
- Public health resources and communications
Data-to-Action Approaches

+ **Rapid Assessments**
  - Quantify risk and protective factors of suicide, ACEs, and IPV
  - Conduct health communication needs assessments

+ **Surveillance & Evaluation**
  - Analyze existing data and collect new data to understand trends
  - Identify at-risk groups

+ **Prevention Efforts**
  - Develop culturally appropriate communication toolkits
  - Adapt interventions for tribal relevance to support those at risk
Partner Progress & Accomplishments

+ Sub-award funds to regional tribes
+ Resource assessment and development
+ Collaboration and partnerships
+ IPV and data surveillance
Albuquerque Area Indian Health Board: IPV Factsheet

IPV: INTIMATE PARTNER VIOLENCE
is abuse or aggression that occurs in a romantic relationship that can range from one episode to more chronic and severe types of abuse over several years.

4 in 5
AMERICAN INDIAN/ALASKA NATIVE (AI/AN) WOMEN HAVE EXPERIENCED VIOLENCE IN THEIR LIFETIME.

56%
OF AI/AN WOMEN EXPERIENCED VIOLENCE IN THEIR LIFETIME.

30%
OF AI/AN FEMALE VICTIMS WHO EXPERIENCED VIOLENCE NEEDED MEDICAL CARE.

TYPES OF ABUSE:

PHYSICAL: When an individual hurts the other partner by hitting, kicking, or using other types of physical force.

SEXUAL VIOLENCE: Forcing a partner to take part in a sexual act when the partner does not consent. This can be unwanted touching, sexual harassment, sexual assault or rape.

STALKING: Repeated, unwanted attention and contact by a partner that causes fear or concerns for the individual’s safety.

PSYCHOLOGICAL AGGRESSION: The use of verbal and/or non-verbal means with the intent to harm the victim mentally or emotionally. It can be in the form of humiliation, insults, or threats that impacts one’s self-worth and safety.

FINANCIAL VIOLENCE: Controls the partner’s money or access to their school or job.

SIGNS OF AN ABUSER

• They often are jealous, overly suspicious and/or angry even if they have no reason.
• They control and monitor the partner’s activities with friends and family as well as work.
• They isolate their partner and limit their use of the phone and other sources of communication.
• They make their partner feel guilty or ashamed for no apparent reason.
• They often slap, hit, or shove the other partner.

RATES OF INTIMATE PARTNER VIOLENCE (IPV) MAY INCREASE DURING COVID-19 - WHY?

STRESSORS
Some have been furloughed from work or lost their job. This can increase feelings of stress and anger towards intimate partners.

More are staying home and isolated with the abuser with lack of access to resources.

Lack of social support due to social distancing.

Not having access to friends and family to help during the pandemic has increased people’s stress, anxiety, and feelings of depression and isolation.

THIS CAN LEAD TO INCREASED

• Intimate partner violence
• Child abuse
• Substance abuse
• Adverse physical and mental health outcomes
• Feelings of depression and isolation
• Post-traumatic stress disorder symptoms

THERE IS CONCERN IPV WILL INCREASE AS A RESULT OF INCREASED SOCIAL DISTANCING AND ISOLATION DURING COVID-19.
IF YOU KNOW OF ANYONE EXPERIENCING IPV PLEASE CONTINUE TO CHECK ON THEM BY PHONE AND PROVIDE THEM THE RESOURCES BELOW.

NEW MEXICO CRISIS AND ACCESS LINE:
available 24/7: 505-266-7771 or nmcrisisline.com
NATIONAL DOMESTIC VIOLENCE HOTLINE:
available 24/7: 1-800-799-SAFE (7233)

ALBUQUERQUE AREA SOUTHWEST TRIBAL EPIDEMIOLOGY CENTER • 1-800-666-6177
Acknowledgments

• **Tribal partners**
  - Alaska Native Tribal Health Consortium
  - Albuquerque Area Indian Health Board
  - California Rural Indian Health Board
  - Great Lakes Inter-Tribal Council
  - Great Plains Tribal Leaders Health Board
  - Inter-Tribal Council of Arizona, Inc.
  - Navajo Nation
  - Northwest Portland Area Indian Health Board
  - Rocky Mountain Tribal Leaders Council
  - Southern Plains Tribal Health Board
  - United South and Eastern Tribes, Inc.
  - Urban Indian Health Institute (*sub-award*)

• **CDC’s Center for State, Tribal, Local, and Territorial Support (CSTLTS)**

• **CSTLTS Office of Tribal Affairs and Strategic Alliances (OTASA)**

• **NCIPC Colleagues**
  - Division of Violence Prevention
  - Division of Injury Prevention
Thank you!

The findings and conclusions in this presentation are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

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