

State of American Indian/Alaska Native Children and Families, Part 6



NICWA

National Indian Child Welfare Association
Protecting Our Children • Preserving Our Culture

Future Directions

The *State of American Indian/Alaska Native (AI/AN) Children and Families* data briefs present summaries of the available data on economic conditions, adverse childhood experiences (ACEs) and historical trauma, mortality rates, and child welfare. These data summaries reveal gaps in the data as well as directions for future policy, practice, and research. Those potential future directions will be reviewed in this section.

Defining “AI/AN” in Data Collection

Throughout the data briefs, a common theme is the dearth of current data on AI/AN children and family well-being. There are often gaps in the data over time as well as geographically. The definition of “AI/AN” is also variable across different studies or surveys. Some split out “AI/AN alone” and “AI/AN combined with other races” while other studies look at a combined category of “all AI/AN.” Similarly, in mortality data, AI/AN individuals are often misclassified as other racial groups, as noted in the mortality data brief. These variations and misclassifications can make it difficult to compare statistics or findings across different studies/surveys. Researchers and public health data collectors could help to address these gaps in data through stratifying results by “AI/AN combined with other races” or “AI/AN alone.” Further stratification by region, tribal affiliation, gender, and age group is also valuable for tracing trends by those variables.

Some potential future directions to address include:

- What kind of training might help human services workforce members to more accurately capture AI/AN identity in data collection? For example, could they be trained to proactively ask about AI/AN identity early, and using more than one description of ancestry (Native American, Native, Indian, First Nation, AI/AN, etc.)?
- What would be the effects of standardizing definitions of AI/AN for longitudinal surveys that are done every few years, keeping the definition consistent over time?
- What would be the effects of stratifying in data collection by self-identified tribal ancestry vs. tribal citizenship/enrollment? How might that shape data collection, funding, and service provision to AI/AN peoples?

- For mortality data, how might local, state, and federal policy and practices be changed to improve accuracy in racial classification on death certificates?

Economic Well-Being

The disparities in economic well-being between AI/AN and non-AI/AN communities are significant, as reviewed in the related data brief. These disparities raise a number of questions for policy and future research:

- Native communities as a whole are often more geographically isolated and in areas where economic development opportunities, services, and infrastructure are less available. How does this impact expectations for what it may take to help tribal families meet their basic needs and more specifically the needs of their children? Is federal and state assistance sufficient and tailored to the unique needs of tribal families that live in deep poverty and have fewer opportunities? For instance, can any tribe access economic development resources and employment training programs, and how well are these resources suited to tribal community needs?
- How does poverty and unemployment impact the ability of tribal governments/communities to attract and maintain critical economic development for their community members that provides a living wage and reasonable benefits for families? For instance, how does this impact the available labor force needed to attract viable economic development?
- To secure and maintain employment, adult family members often have to leave their tribal communities. How does this impact the integrity of the family and its cohesiveness as well as the well-being of children?

Adverse Childhood Experiences (ACEs) and Historical Trauma

Data on adverse childhood experiences and historical trauma indicate that these are prominent challenges to AI/AN children’s and families’ well-being. Mortality data related to suicide and violence also further emphasize the need to address ACEs and historical trauma. High rates of ACEs among AI/AN communities indicate a greater need

for healing resources, especially those that are trauma informed, culturally appropriate, and community based. Many tribal communities are geographically isolated and have limited funding to attract qualified staff and develop needed programming. Some of the federal programs available require relatively large contributions of non-federal match to qualify for the funding, which some tribal nations may not be able to access. Potential areas for future related directions include those in research (data collection) and policy:

- How can funding opportunities related to treating ACEs and historical trauma be better adapted to meet the needs of AI/AN communities?
- How might the standards for “evidence-based practices” that are tied to federal and state funding be more culturally inclusive to support locally effective practices in AI/AN communities?
- How can the impact of historical trauma best be measured? What assessment tools could best measure these impacts? How do mainstream assessment tools measuring trauma in general compare with those developed specifically for AI/AN communities?
- How might unintentional injuries, which are a leading cause of death for AI/AN children, be better prevented? What public health or education strategies might be utilized, for example?
- What range of healing practices, including culturally specific practices, are being used by Native communities? How effective are these practices? How are they provided/delivered? What other services and practices would communities like to provide?

Child Welfare

Gaps in data, lack of data on child welfare measures, and inconsistency in how “AI/AN” is defined across data sets has been a longstanding challenge, as is summarized in this data brief. Comparing data across time and geography is also complex due to inconsistencies in how data variables are defined. A common theme in the available data across time is that child neglect is the primary source of reported maltreatment, which may present opportunities for targeted interventions. Potential questions to guide future directions in data collection, policy, and practice include:

- How could data sets be more user-friendly, and allow the ability to stratify by definitions of AI/AN (e.g., AI/AN alone vs. in combination with other racial identities), as well as analyze disproportionality (percentage of overrepresentation), disparity (rates per number of people in the population), and whole population numbers?
- How can the reliability of data that identifies AI/AN children in state child welfare systems be improved?
- What does having child neglect as the primary source of reported maltreatment mean for intervention strategies for AI/AN families? What kinds of in-home services may be provided to prevent the need for removal due to neglect?
- How does access to mental health treatment, child welfare services, and health care influence reports of children who are diagnosed as having a disability and the potential for further child welfare involvement?
- How would including AFCARS data elements specifically related to Native children’s eligibility for protections from the federal Indian Child Welfare Act (ICWA) improve the understanding of children’s experience with the child welfare system, agencies’ compliance with ICWA, and opportunities to reduce disproportionality?



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Find this and related data briefs in the six-part report at
www.nicwa.org/state-of-american-indian-and-alaska-native-children-and-families-report/