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Nawicakiciji-Woasniye-Oaye Waste

A Process Evaluation of the Rosebud Sioux Tribe’s Defending Childhood Initiative

By Rachel Swaner

Submitted to the U.S. Department of Justice

June 2015

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Abstract

As part of the U.S. Attorney General’s Defending Childhood Demonstration Program, eight sites around the country were funded by the Office of Juvenile Justice and Delinquency Prevention and the Office of Violence Against Women to use a collaborative process to develop and implement programming to address children’s exposure to violence in their communities. The Rosebud Sioux Tribe of South Dakota was chosen as one of these sites, and, since 2010, has received nearly $2 million in federal funding for this initiative.

Previously led by the Rosebud Sioux Tribe Attorney General’s Office, the Rosebud Sioux Tribe Defending Childhood Initiative (Rosebud DCI) incorporates Lakol Wicohan, or the Lakota way of life, in all of its programming and approaches, and views bringing back Lakota culture as a form of prevention work.

One of the primary components of the Rosebud DCI model is case management with children who have been referred to the program because of violence exposure. Although staff members do not provide direct counseling, they facilitate traditional healing ceremonies (such as sweat lodges and prayers) and make referrals to culturally appropriate services (e.g., for substance abuse, domestic violence, sexual assault, and equine therapy). Staff members also work with the young people to create individualized action plans and empower the youth to achieve their goals. Finally, case managers provide court- and school-based advocacy support.

A second component of the Rosebud DCI model is community awareness and education, which focuses on bringing awareness about children’s exposure to violence to the different communities and schools on the reservation, and letting the community members know about programs and resources available to them. A third model component relates to revising tribal legislation and policy to be more responsive to children’s exposure to violence.

Despite challenges related to staff turnover and local politics, the Rosebud DCI was able to realize important accomplishments, including bringing a much needed advocacy program to the reservation and providing victims with assistance; and raising community awareness about children’s exposure to violence on the Rosebud. Throughout this work, the Rosebud DCI staff have infused a culture-based approach and have brought back a focus on Lakota spirituality and tradition, reflecting the strengths of their culture as a protective factor. By helping youth and community members improve their connection to their culture and the Lakota way of life, the staff may be impacting children’s exposure to violence in ways that are difficult to measure.
Acknowledgements

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Finally, special thanks to the current Rosebud Defending Childhood Initiative staff members as well as to Natalie Stites and Mato Standing High for welcoming our team to your community and for your enduring commitment to improving the lives of children. I have learned so much from you. Mitakuye oasin.

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Chapter 1
Introduction

About the Defending Childhood Initiative

A recent national survey found that 60 percent of American children have been exposed to violence, crime, or abuse in their homes, schools, or communities—and that 40 percent were direct victims of two or more violent acts. In an effort to address children’s exposure to violence, the United States Department of Justice (DOJ), under the leadership of Attorney General Eric Holder, launched the Defending Childhood Initiative. This national initiative aims: 1) to prevent children’s exposure to violence; 2) to mitigate the negative impact of such exposure when it does occur; and 3) to develop knowledge and spread awareness about children’s exposure to violence. The motto of the initiative is “Protect, Heal, Thrive,” or, in Lakota, “Nawicakiciji - Woasniye - Oaye Waste.”

A major component of this initiative is the Defending Childhood Demonstration Program, which involved the Office of Juvenile Justice and Delinquency Prevention (OJJDP) and the Office of Violence Against Women (OVW) in providing funding to eight sites around the country to address children’s exposure to violence through intervention and prevention programming, community awareness and education, and professional training. A portion of the funding for this demonstration program was appropriated through the Tribal Youth Program; therefore, DOJ purposefully made two of the eight initial awards to federally recognized tribes (as determined by the Secretary of the Interior and published in the Federal Register). The eight sites are: Boston, MA; Chippewa Cree Tribe, Rocky Boy’s Reservation, MT; Cuyahoga County, OH; Grand Forks, ND; Multnomah County, OR; Portland, ME; Rosebud Sioux Tribe, SD; and Shelby County, TN.

The Center for Court Innovation was funded by the National Institute of Justice to conduct the evaluation of the demonstration program, and Futures Without Violence was funded by OJJDP to serve as the technical assistance provider. This process evaluation report of the Rosebud Sioux Tribe’s Defending Childhood Initiative is one in a series of multi-method process evaluations of six of the chosen sites. A report synthesizing the major cross-site lessons learned from all six process evaluations is issued alongside the individual site reports. In addition, a cross-site outcome evaluation of these same six demonstration project sites will be forthcoming in 2015.

Whereas the current research focuses on the implementation of chosen strategies, a previous report issued in 2011 explored and identified cross-site themes and lessons from the initial strategic planning process.

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Besides the demonstration program, other components of the larger *Defending Childhood Initiative*, which are outside the scope of the current evaluation, include the Task Force on Children’s Exposure to Violence⁴ and the Task Force on American Indian and Alaskan Native Children Exposed to Violence⁵.

**The Rosebud Sioux Tribe’s Defending Childhood Initiative**

The Rosebud Sioux reservation is made up of 20 different communities spanning 922,759 acres (1,442 square miles) in South Central South Dakota. The reservation’s communities are spread throughout five U.S. counties—Todd, Mellette, Tripp, Gregory, and Lyman. Below are maps that show the full reservation and its communities,⁶ and the Rosebud reservation (in green) situated within the rest of the state⁷. The original Rosebud reservation was determined to have been diminished as the result of the United States permitting homesteading by non-Indians on the reservation in the United States Supreme Court decision in Rosebud Sioux Tribe v. Kneip, 430 U.S. 484 (1977). As a result of that decision, which reduced the exterior boundaries to Todd County only, many communities that are part of the reservation are situated outside the reservation boundaries, but are still considered by the Tribe as their tribal communities to which services must be provided. These communities are considered part of the reservation in determining population as well as needs.

The U.S. Department of the Interior’s Bureau of Indian Affairs (BIA) estimates the Rosebud Sioux Tribe’s enrollment at 24,217 members who live on and off the reservation. There exist conflicting population estimates and considerable confusion about how many Rosebud Sioux children currently live on the reservation.

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⁴ The full report of this task force can be found here: http://www.justice.gov/defendingchildhood/cev-rpt-full.pdf.
⁶ Map provided by the Rosebud Sioux Tribe.
⁷ Map provided by the American Indian Relief Council.
In October 2010, OJJDP awarded the Rosebud Sioux Tribe (RST) $159,534 to conduct, through a collaborative process, a needs assessment and strategic planning process for addressing children’s exposure to violence on the Rosebud reservation. In October 2011, the RST was awarded $1,000,000 to implement their strategic plan between October 2011 and September 2013. The tribe was awarded an additional $360,000 to continue their work between September 2013 and September 2014, and an additional $300,000 to do so between October 2014 and September 2016. These funds were given as part of the U.S. Attorney General’s eight-site Defending Childhood Demonstration Program.

Led by the Rosebud Sioux Tribe Attorney General’s Office, the Rosebud Sioux Tribe Defending Childhood Initiative (Rosebud DCI) is an effort to prevent children’s exposure to violence (CEV), reduce its negative impact, and increase public awareness. The program services children ages 0-17 who have directly or indirectly been exposed to violence, including abuse and neglect. According to the program, “this is most, if not all, children and youth on the Rosebud reservation,” though there are no official data sources that capture this information.

This process evaluation was prepared by Center for Court Innovation research staff. It is based on data collected and research conducted between October 2011 and September 2014. Research activities included an extensive document review, primary quantitative data collection, three site visits, observations of two collaborative body meetings, a tribal council meeting observation, multiple conference calls, and 12 interviews with 10 staff members.

**Social and Historical Context**

Many children on the Rosebud Sioux reservation live in extreme poverty. BIA estimates that the reservation has one of the highest unemployment rates in the country at approximately 83%.8 With high unemployment on the reservation and in border communities, as well as an historical record

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8 See http://www.bia.gov/WhoWeAre/RegionalOffices/GreatPlains/WeAre/Agencies/Rosebud/index.htm for more information. Last retrieved 3/19/15.
of insufficient funding provided to the Tribe to address the needs of families and children despite
treaty obligations to do so, staff report that many families are unable to meet basic needs, leading
to a cycle of substance abuse among adults and school absenteeism among children.

**Children’s Exposure to Violence and 2012 Baseline Community Survey Results**

Children on the Rosebud Sioux reservation are victimized by the institutional structural violence
of poverty and inequality of opportunity as well as the direct violence that these dynamics breed:
child abuse and neglect, addiction, sexual assault, and suicide, the latter being a large concern for
Native populations. The Centers for Disease Control and Prevention define suicide as “when
people direct violence at themselves with the intent to end their lives,” and that risk factors include
family history of violence and alcohol or drug abuse. A 2012 U.S. Surgeon General and National
Alliance for Suicide Prevention report stated that suicide is the second leading cause of death
among American Indian/Alaskan Native youth aged 10 to 34, and that in 2009 the rate of suicide
among American Indian/Alaskan Native youth aged 10 to 18 years was 10.37 per 100,000,
compared with an overall U.S. rate of 3.95 per 100,000. A 2007 *New York Times* article described
this wave of youth suicides on the Rosebud reservation.

As part of the outcome evaluation of the *Defending Childhood* demonstration projects, the Center
for Court Innovation conducted a baseline and two-year follow up telephone survey. While the
full description of the methods and results of these surveys will be reported in a separate
forthcoming outcome evaluation report in 2015, a summary of the key baseline results for the
Rosebud site is included here to provide context for the underlying need and development of
strategies related to children’s exposure to violence on the reservation.

The 2012 Rosebud Sioux Tribe baseline community survey yielded a total sample of 690
completed phone interviews. The sample included adults aged 18 to 97, with a mean age of 41.5
years. Fifty-two percent of respondents were female, and most (89%) had lived on the Rosebud
for more than 10 years.

Respondents were asked about how much of a problem various types of violence were on the
Rosebud Sioux reservation. The types of violence that were most often identified as a “big
problem” were: gang violence (74%); violent crime such as assaults, shootings, or sexual assaults
(71%); and violence between people in a romantic relationship (66%). Eighty-eight percent of

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Strategy for Suicide Prevention: Goals and Objectives for Action. Available at
12 After drafting the initial survey, the evaluation team worked with their two tribal consultants to ensure that the
questions and response categories were culturally appropriate. Additionally, prior to survey administration, the
researchers sent a letter to all members of the Rosebud tribal council to describe the survey and its purpose, and
received their approval to conduct the survey before moving forward. All respondents were given a $10 incentive
for participating.
respondents said they had been exposed to violence in the past year, with 86% having witnessed violence and over half (54%) having been a direct victim. Additionally, 74% of parents reported that their child had been exposed to violence (as a victim or witness) in the last year.

Though many of the statistics that show levels of suicide and violence are bleak, it must also be recognized that the Tribe and its membership have managed to maintain their language, cultural and spiritual practices, as well as extended familial ties in the face of these overwhelming societal problems, wrought oftentimes by misguided federal policies towards native children. For the Rosebud DCI, these cultural ties steer the Tribe towards the resolution of societal problems related to violence.

**Historical Trauma and Lakota Values as Protective Factor**

These numbers discussed above are staggeringly high, and represent conservative estimates, given that none of the survey questions captured another type of violence that has been known to affect Native Americans: historical trauma. Decades of federal policy have disrupted the cultural and familial ties of the native communities. From the late 19th century to the mid-20th century, native children were commonly sent to boarding schools to become indoctrinated in mainstream American culture and Christian religious practices, where they were also forbidden to speak their Native languages or to have contact with their families.\(^\text{13}\) This started in 1879, when Captain Richard Pratt convinced parents on the Rosebud and Pine Ridge reservations to let the United States take their children to his boarding school in Pennsylvania. Children were taught English and Christianity, forced to cut their long hair (a pride of Native culture) and reject tribal culture, and severely beaten if they conversed in their native tongues.\(^\text{14}\) This forced cultural assimilation continued for decades.

Then, in the 1950s and 1960s, Native American cultural practices such as leaving children in the care of other tribal members were often seen as justification for removal of a child from his or her home. As a result of these dubious child welfare practices, an average of 25 to 30 percent of all Native American children in certain states during this period were placed in foster or adoptive homes with non-Native families.\(^\text{15}\)

From the early-1950s to the mid-1960s, Congress terminated federal recognition of many tribal governments and vested civil and criminal jurisdiction over many reservations in state courts, thus undermining their sovereignty, enacted the Indian Civil Rights Act of 1968, which limited tribal courts’ sentencing authority (which along with the United States Supreme Court’s decision in Oliphant v. Suquamish Tribe, which artificially deprived Indian Tribes of criminal jurisdiction over non-Indians, resulted in long-lasting negative implications for public safety), eliminating their


\[^{14}\] See [http://www.pbs.org/indiancountry/history/boarding.html](http://www.pbs.org/indiancountry/history/boarding.html) for a more in-depth description of Pratt’s school.


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Chapter 1. Introduction

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communally-held land bases, and ending their access to federal funding and services.\(^\text{16}\) Referring to Public Law 280 passed by Congress in 1953, which reduced federal expenditures to tribes by giving the states greater power on Indian reservations, the Supreme Court stated in a 1979 decision, “It was … without question reflective of the general assimilationist policy followed by Congress from the early 1950s through the late 1960s.”\(^\text{17}\)

It should be noted that PL 280 did not impact the Rosebud reservation because South Dakota was an optional state under PL 280 and although the State did attempt to exercise criminal jurisdiction over crimes on the highways running through the reservation, that attempt was rejected by the United States Court of Appeals for the Eighth Circuit. Additionally, the Lakota people waged a successful grassroots political battle against the forces that strongly advocated for the transfer of political administration of Native affairs from the federal to the state level. The State repeatedly fell short because it failed to appreciate the strength of the Lakotas’ sovereignty, their unwavering ties to their lands, and their commitment to the principle of not allowing the federal or state government to do anything on their land without their consent.\(^\text{18}\)

Though the Lakota have had many victories against colonialist practices, the trauma suffered by Native Americans because of past U.S. federal government policies continues to pervade Indian society. As Rosebud DCI staff expressed, this historical trauma inflicted on the Rosebud Sioux nation by various federal policies resulted in many residents on the reservation losing touch with Lakota culture. Many children do not have a sense of belonging or a connection to Lakota values, making them vulnerable to potential gang involvement, as gangs can give a sense of belonging and community. As one staff member pointed out, “The lost identity can also be attributed to being sent off to Catholic Boarding Schools in the past. Now, it’s important to have the (Lakota ceremony) to give them an identity rooted in Native culture.”

Sinte Gleska University is a tribal community college located on the Rosebud that grants degrees ranging from associate to graduate degrees, whose mission is to provide the people on the reservation with an education that is rooted in cultural and traditional values.\(^\text{19}\) The University, who is a partner of the Rosebud DCI, outlines the seven Lakota Values of Lakota life as follows:\(^\text{20}\)

- Woc’ekiya (Praying): Finding spirituality by communicating directly with your higher power.
- Wa o’hola (Respect): for self, higher power, family, community and all life.
- Wa on’sila (Caring and Compassion): love, caring, and concern for one another in a good way, especially for the family, the old ones, the young ones, the orphans, the one in mourning, the sick ones, and the ones working for the people.
- Wowijkke (Honesty and Truth): with yourself, higher power and others with sincerity.

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\(^{19}\) See http://www.sintegleska.edu/info--mission-statement.html, retrieved 8/14/14.

\(^{20}\) See https://sites.google.com/site/sguvcte/seven-values-of-lakota-life, retrieved 8/14/14.
Wawokiye (Generosity and Caring): helping without expecting anything in return, giving from the heart.

Wah’wala (Humility): we have a spirit; we are not better or less than others.

Woksape (Wisdom): practice with knowledge comes wisdom.

Rosebud DCI staff and tribal elders stress that these Lakota cultural values served for generations as a protective factor against much of the violence seen on the reservation today. Indeed, research indicates that cultural continuity, \(^{21}\) high levels of cultural spiritual orientation, \(^{22}\) and connectedness to family and friends \(^{23}\) are protective factors for suicidal behaviors among American Indian populations.

This is the social and historical context in which the Rosebud Sioux Tribe Defending Childhood Initiative was developed. The next chapter describes the structure of the initiative, including a discussion of the role of the collaborative body, project staffing, and the target population.

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Chapter 2
The Oversight and Staffing Structure of the Initiative

This chapter provides a brief overview of the two central structures that oversee and operate the Rosebud Sioux Tribe’s Defending Childhood Initiative: a collaborative body that meets regularly and provides general planning, oversight, and coordination; and dedicated project staff members who are charged with implementing the everyday work of the initiative.

The Collaborative Body

To develop and oversee the Rosebud Defending Childhood Initiative, a collaborative body was formed in 2010 during the planning phase, comprised of approximately 25 individuals and organizations representing a broad range of service providers and other stakeholders who came together to address all forms of violence facing children on the reservation.

Aside from the Rosebud DCI staff, all of whom worked out of the Attorney General’s office (discussed more below), the primary stakeholders included representatives from agencies that work with children and youth and for whom the Rosebud DCI work was relevant (e.g., schools, social service organizations). These agencies included:

- White Buffalo Calf Woman Society Inc.
- South Dakota Department of Social Services
- Todd County School District
- St. Francis Indian School
- Wiconi Wakan Health & Healing Center
- Boys and Girls Club
- Sinte Gleska University
- Indian Health Services

The collaborative meetings are open: Anyone can come, and directors can bring staff. All regular attendees are notified via email about upcoming meetings, and others may hear through word-of-mouth from people who regularly attend. The project also has a Facebook page where they post the date, time, and location of upcoming collaborative meetings.24

During collaborative meetings, project staff report on how the initiative is going and solicit feedback on specific areas they are working on (e.g., tribal code revisions). If more time needs to be spent on a specific topic, collaborative body members can volunteer to form a working group to further explore the topic or concern. The table in Appendix A summarizes the collaborative and working group meeting dates and attendance numbers. Over the course of the three years of implementation (October 2011 – September 2014), the number of meetings has decreased, in part due to extended periods of time with no project director and a lack of project momentum (discussed more in-depth later in this report). Attendance has varied at the meetings: some have been well

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24 The Rosebud DCI Facebook page can be found at https://www.facebook.com/pages/Rosebud-Sioux-Tribe-Defending-Childhood-Initiative/584809931548573.
attended (about 20 people), whereas others have had only five attendees (at the time when there was no project coordinator, discussed below).

**Project Staffing**

The OJJDP funding for the Rosebud DCI went through the Rosebud Sioux Tribe, through the Rosebud’s Office of the Attorney General. (The Rosebud Attorney General’s office is a separate entity of the Tribe that consists of an Attorney General and prosecutors who are charged with prosecuting both adult and juvenile crime on the reservation, as well as presenting child welfare and dependency cases. The Attorney General is employed by the tribe through a contract approved of by the Tribal governing body.) The staffing structure of the project has included the following positions, all of whom are employed by the Rosebud Sioux Tribe and housed in the Attorney General’s Office:

- **Attorney General** (1): The Rosebud DCI is under the Attorney General’s (AG) office. Depending on who the AG has been, the office has had varying levels of involvement in the daily operations of the project. The position provides oversight of the project, and is ultimately the person who oversees the whole initiative. The Attorney General reports to the Rosebud Sioux Tribal Council.

- **Project Coordinator** (1): The project coordinator is responsible for the overall vision and day-to-day operations of the project. This is usually the main contact for OJJDP as well as for the national technical assistance provider (Futures Without Violence) and evaluator (Center for Court Innovation). The project coordinator reports to the Attorney General.

- **Case Coordinators** (2-3): The case coordinator position involves case management for children exposed to violence, helping the children and families set goals, referring for services, and helping them navigate various systems (e.g., Juvenile Court). The case coordinators report to the project coordinator.

- **Prevention and Outreach Coordinators** (2): The prevention and outreach coordinator position involves doing presentations about children’s exposure to violence and the Rosebud DCI to the different communities on the reservation, presenting in schools and at the Juvenile Detention Center, and generating awareness about the issue (e.g., through public service announcements and resource guides). The prevention and outreach coordinators report to the project coordinator.

- **Administrative Assistant** (1): This position oversees all aspects of general office coordination; handles the phone calls that come in, the budgets, and the paperwork for the tribal finance office; compiles data for federal and evaluation reports; and schedules meetings. Since the OJJDP grant was given to the tribe, the tribal finance office has to approve any expenditures made by the Rosebud DCI. The administrative assistant reports to the project coordinator.

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25 As of December 2014, the Rosebud DCI project was moved from the AG’s office to directly under the tribal council, with the project coordinator reporting directly to the tribal council president.
- **Cultural Consultant (1):** The consultant advises on incorporating Lakota culture into the program, and serves as a liaison between the initiative and spiritual leaders and pastors.

Of these positions, the project coordinator, two case coordinators, and two prevention and outreach coordinators were all full-time and fully funded by the Department of Justice grant. The original administrative assistant, while also full-time, left in December 2002 and was never replaced. The AG’s assistant (not on the grant payroll) has helped to cover a lot of that role since then. The Cultural Consultant was a temporary position, and that role has been folded into the work of one of the new case coordinators. There has been a lot of turnover in all of the positions listed above. This is discussed in more depth below under Tribal Politics and Staff Turnover. There have been no subcontracts with any agencies.

The Rosebud DCI team received training, support, and technical assistance from two sets of consultants: Ethleen Iron Cloud-Two Dogs from the Native Streams Institute (“Native Streams”), Educational Development Center, Inc., who received a subcontract from Futures Without Violence, the technical assistance provider for the national *Defending Childhood Demonstration Project*, and B.J. and Lillian Jones of the Tribal Judicial Institute, who received a subcontract from the evaluation team at the Center for Court Innovation.
Chapter 3
The Rosebud Sioux Tribe’s Defending Childhood Initiative Program Model

The Rosebud Sioux Tribe Defending Childhood Initiative (Rosebud DCI) is targeting its work for children ages 0-17 that live anywhere on the reservation. Given the size and sprawl of the Rosebud, however, much of the work is concentrated in the community of Parmalee, where staff members believe there are particularly high rates of violence. Additionally, given the concentration of referral sources within the Rosebud community, most of the children the initiative works with are from the communities immediately surrounding Rosebud.

This chapter summarizes the philosophy underpinning the Rosebud DCI and then describes the program activities in each of the key areas that comprise the initiative: case management and advocacy (for children exposed to violence and their families), treatment and healing (direct intervention services), community awareness and education, and system infrastructure and capacity building. In each of these key areas, challenges to implementation will also be discussed. The following figure summarizes the Rosebud DCI program model:

- Connect families to strengths-based, individualized, and culturally appropriate services
- Empower children and families to address violence exposure
- Revise tribal code to include stronger protections for children
- Connect children with Lakota way of life
- Increase awareness about children's exposure to violence and available resources

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26 As the map in Chapter 1 shows, Rosebud is also the name of a community on the Rosebud reservation.
Philosophy

Before describing the various activities that the Rosebud DCI has implemented, it is important to understand the philosophical framework that provides the foundation for and informs the work. In everything the Rosebud DCI staff do, they try to incorporate Lakol Wico han, or the Lakota way of life. This approach manifests itself in multiple ways. For instance, they refer to the people they serve as relatives, not clients. When a young person comes to the program for help, as one case coordinator stated in an interview, she says, “This is now my nephew, and I would do anything for my nephew.” Collaborative meetings begin and end with saying “Mitakuye oyasin,” Lakota for “all my relatives,” reflecting their belief in the interconnectedness of all forms of life. With this focus, they believe that the job is not 8 a.m. to 5 p.m., as “trauma does not shut off at 5 o’clock,” and they will be available at all hours for their relatives.

In terms of direct services, their first phase is Wokigna, which is Lakota for comfort. Practically, this is a display of care before offering any programs, letting a family know that, “I’m here if you need to call me or talk,” or spending time with the family member(s) lending support. Other voluntary services offered include Wopakinte, a spiritual cleansing in the form of a purification ceremony, also referred to as sweat lodge ceremony (“sweats,” discussed more in depth below). At community events, there is an emphasis on feeding the people, including providing wasna (a spiritual food that includes dried meat and dried fruit). Original project staff attended a Lakota mental health first aid training, conducted by Native Streams, a technical assistance provider.

One of the Rosebud DCI staff members works with Wica Agli, Lakota for “bringing back the men.” Not an official tribal organization, this is an informal group of men who do purification lodge ceremonies, cultural education, and talk about gender roles, and who embrace the seven values of Lakota life (praying, respect, care and compassion, honesty and truth, generosity and caring, humility, and wisdom). Though not an official part of the initiative, one of the case coordinators seeks to bring the spirit of this group to the work of the Rosebud DCI, who view bringing back Lakota culture as a form of prevention work. There are future plans for offering a Lakota naming ceremony for young people who do not have Lakota names, and in a newsletter for the initiative, there is a vocabulary section that includes definitions of Lakota words.

The focus on Lakota tradition, however, does not preclude recognition that there are other ways of life on the reservation. In the first year and a half of the project, a cultural consultant was hired to work with a collaborative body on how to use Lakota culture to inform the program, but he also met with Native American pastors and reverends on the reservation to try to bring on local churches as partners to the initiative as well.

Case Management and Advocacy

One of the primary components of the Rosebud DCI is case management with children who have been referred to the program. Referrals are received primarily from three sources: 1) family/guardian referrals, from which the majority of their referrals come; 2) prevention and outreach staff who connect with relatives when conducting presentations in the communities; and 3) community partners such as the Local Housing Authority, Birth-5 Program, and local wellness and mental health programs. When a referral is received, the information given to the Rosebud
DCI staff includes the person’s name, contact information, and reason for referral. The most common reasons for attending the program have been domestic violence, sexual abuse, bullying, alcohol abuse, and suicide attempt or suicidal ideation. The project has done case management and advocacy for over 180 children.

After providing Wokigna, the case coordinator will obtain consent from the family and have them fill out an intake form. The family also signs a waiver so that the Rosebud DCI staff can share the person’s information with other agencies that will provide needed or desired services. For instance, for direct counseling services, they refer to Tiwahe Glu Kini Pi (culturally-based mental health services for children and families mental health services, located at Sinte Gleske University, which is on the reservation). Because initiative staff members do not provide direct counseling services, referring to Tiwahe Glu Kini Pi is an important step in connecting their relatives with professional treatment. Initially, Rosebud DCI staff referred to IHS Mental Health, but that organization’s capacity was limited. Other organizations that the case coordinators refer to include: Rosebud Sioux Tribe Alcohol Treatment (substance abuse services), an organization that does equine therapy, and the White Buffalo Calf Woman Society (domestic violence and sexual assault services).

The Rosebud DCI staff refer to the case management work as “care advocacy.” They work with the young people to create individualized action plans and then support their relatives in trying to reach their goals; for the younger children (e.g., approximately up to age 12), the parent or guardian is involved in setting the goals as well. (See Appendix B for case flow process and the blank action plan document that Rosebud DCI staff fill out for each relative.) One case coordinator describes examples of goals:

We had one client who did not want to continue counseling. He felt every time he went he was doing another intake, felt it was ineffective. The court had ordered him to spend Christmas with his dad in Oklahoma, so his goal was to get out of that because last time he went his father was emotionally abusive. I took an advocate role, found out what he had to do in regards to the court to get out of going to see his dad, and worked with him to write a letter to the judge.

One girl’s goals were to finish high school, get her dad help for his alcohol addiction, and get her own apartment. But this is a hard case because the girl just got sent to a psychiatric place ordered by the court.

Another example is someone wanting to go through sweat to wipe off the trauma. There is a sweat at the White Buffalo Calf Woman Society, so we could arrange that.

Every other week the case coordinators check in with the relatives to see if they are doing okay. For the more difficult or needy cases, check-ins happen as often as multiple times a day. The ultimate goal is to empower the families to make appointments with the places to which they are referred. If appointments are not made by the guardian, the case coordinators will make them. One success story told to the researchers during an interview was of a six-year-old girl who did equine therapy, and the horse was able to assist with taking the trauma from the relative. (The Lakota...
people believe that horses have special healing powers.) Staff often provide transportation to and from appointments.

Aside from helping with goal setting and referrals, case managers also do civil legal advocacy and court accompaniment. Many of the relatives are families that are involved with the court system, and case managers assist with things such as preparing paperwork for a protection order and accompanying a child to a protection order hearing. Case managers will also advocate within the school system to ensure that the educational needs of their relatives are met.

**Case Management Challenges**

Staff noted that there are challenges to doing case management. As one case coordinator discussed, sometimes the families do not call back after Wokigna; and other times the family might have several children, yet the guardian does not want to fill out intakes for them all, leading the guardian not to continue. (Intake usually takes about an hour for one child.)

Another challenge has to do with the expansive size of the reservation: it could potentially take over an hour to drive to a child’s home, and then there is no guarantee that the person will be there. Because of this, the majority of first contacts are made on the phone, with an in-person visit afterwards, which most often takes place at the Rosebud DCI office or at the child’s school or home. But phone service also poses a potential problem: some relatives live in the valley where cell phone service is poor, and some people do not have landlines. Additionally, when Rosebud DCI staff do reach those who are far out, staff often have to identify services on other reservations.

Other challenges relate to a lack of information sharing by important community players. As one case coordinator noted, the Rosebud Chief of Police says that 98 percent of children are exposed to violence, yet police department information is not being received by the DCI program. Additionally, there is no memorandum of understanding with the Juvenile Court (JC), so it is difficult to obtain information from court staff about the cases involving Rosebud DCI relatives. For example, case coordinators have tried to obtain information from the JC and public defender regarding how much probation time got added on to people on the Rosebud DCI’s caseload, but the court will not give them the information, despite the Rosebud DCI having consent forms from the parents. Part of the problem may stem from Tribal law which makes juvenile referrals confidential, thus inhibiting the Court from sharing information. There were two other court-related challenges that staff mentioned. First, some relatives are raised by grandparents whose first language is Lakota, and the court requires those grandparents to sign documents in English, a language that they do not understand. This sometimes results in an action plan that the DCI staff believe is not in the best interest of the child they are working with. Second, many children who the Rosebud DCI works with come through the system go through the JC and then are removed from the community, making it difficult for the staff to maintain in-person connections with them, but also potentially doing more damage to the children because they are removed from their families and friends. This may be alleviated somewhat by the Tribe opening its own juvenile detention facility on the reservation.

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27 The problem of poor cell phone service and lack of landlines was confirmed by the community phone survey conducted as part of the evaluation. Many phones called were non-working or disconnected, affecting the external validity of the findings.

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Chapter 3. The Rosebud Sioux Tribe’s Defending Childhood Initiative Model

This document is a research report submitted to the U.S. Department of Justice. This report has not been published by the Department. Opinions or points of view expressed are those of the author(s) and do not necessarily reflect the official position or policies of the U.S. Department of Justice.
Issues with parents were also identified as sometimes posing a challenge. Often parents who are trying to regain custody of their children ask the case coordinator to go to court to be a character witness, but DCI staff have to decline. One case coordinator stated that it was hard when parents have alcohol problems and they do not want to admit it or seek help.

DCI staff turnover posed another challenge. Once ties are broken with relatives, it is often hard to rebuild them. With the turnover of the original two case coordinators, and the reassignment of their cases to new staff members, some relatives did not feel like retelling their story, so they stopped responding to outreach and calls from DCI staff.

Finally, challenges noted by DCI staff also related to issues of self-care. One coordinator said that she almost left the initiative at one point because the work was overwhelming, and she was having a hard time juggling her own family life with work that required her to always be on call. She later left her position, though it is unclear if the work-life balance played a role, or other circumstances and challenges about the position, as discussed below. Another case coordinator, who also left her position, stated in an interview: “More and more I feel like I’m here as a social worker, and I’m not a social worker. I’m not trained to respond.”

However since two new case coordinators were hired, there has been consistency with staff’s relationships with relatives. There has been an influx of new cases, in part due to the new staff having credible reputations in the community. Additionally, steps have been taken to help staff manage stress by having them attend Lakota ceremonies and having physical activities for staff twice a week.

**Treatment and Healing**

While the Rosebud DCI makes referrals for most service provision, the DCI staff do facilitate cultural interventions such as sweats or prayers if requested by the relatives. According to the cultural consultant hired by the program, “the purpose of the sweat is to cleanse and purify ourselves, because that’s how our ancestors did it.” The goal of the sweat is a mental, spiritual, and physical cleansing. When someone goes through a traumatic situation, it is believed that he or she loses part of the spirit; the sweat helps call the spirit back. The sweat lodge is made of 13 poles (representing the 13 moons of a year), a river willow, a buffalo skull (representing the Lakota, or Buffalo people), and a rock pit. The rocks are heated, and water is poured over them for steam. A family member wipes the child with a sage plant and encourages the child by saying things like, “I love you son, and I’m doing this because I know what happened.” As the cultural consultant stated, “DCI can help bring the sweat to the children as a form of healing, because some adults aren’t taking their kids to ceremonies. This part is key for our people, and I’m glad that DCI can bring it back.” After the cultural consultant’s contract ended, one of the new case coordinators took up the role of cultural liaison. About 10 families have requested sweats, and others have requested prayer or sage.
Community Awareness and Education

The prevention and outreach coordinators are tasked with bringing awareness about children’s exposure to violence to all 20 communities on the reservation; the project succeeded in visiting 12. The coordinators have a list of the community chairpersons, whom they then contact to see if they can come present about the initiative. Once a date is secured, brochures and pamphlets are mailed to the community leader, so he or she knows what the Rosebud DCI team will talk about. They distribute flyers and get the word out about the presentation via radio. At each community, the coordinators do an initial presentation about the project; ask “how can we help you?”; do educational presentations; introduce additional programs that can be a resource to the community; and offer a meal\(^28\). Often the coordinators present together with White Buffalo Calf Woman Society and collaborate with other programs to offer activities such as dances or movie night.

When asked how the visits to the communities have gone, one coordinator stated that overall, people are glad that children’s exposure to violence is receiving attention. According to DCI staff, many members of the target communities appreciate the statistics about levels of exposure to violence that are provided during the presentation, which often cites results from the baseline community survey conducted as part of the outcome evaluation. Moreover, they appreciate that they are not told what they need to do but are asked what needs to be done. The communities also like that the Rosebud DCI staff do not just come one time. (Community members reported prior experiences with “lip service,” where people only show up once.) At the first few presentations, only a handful of community members showed up, as the presentation was scheduled as its own event. The staff were told that in order to increase attendance, they needed to be added to the agenda at a community meeting. Once they started incorporating their presentations into a larger community meeting, attendance increased to about 20-30 people at each session.

Another component of the community awareness component of the Rosebud DCI is presentations in schools. There are two primary schools on the reservation—state public schools operated through Todd County, South Dakota and a tribally controlled school, St. Francis Indian School, which is a K-12 school located in the community of St. Francis. The prevention and outreach coordinators present to teachers and school counselors on “Children’s Exposure to Violence 101,” describing the issue and the local resources that are available to children. The prevention and outreach coordinators did two trainings for Head Start staff on bullying prevention/intervention and self-care. Additionally, these DCI staff members put together a resource directory that is given out to staff at the schools as well as to any professional who requests one and any family member who is enrolled in the program. They have also presented to middle and high school students during the day in school, where they discuss topics such as teen dating violence, date rape, bullying, drugs and alcohol, sexual assault, and how to keep yourself safe from being a victim. They also presented to females at the JDC, discussing topics such as bullying and good decision-making. At these visits, they also showed a YouTube video about Native American history, “because they don’t know our history, they only know the history of their gangs.” Finally, the initiative also created two radio public service announcements.

\(^28\) Because of federal funding constraints, the Office of Juvenile Justice and Delinquency Prevention funding for this project does not allow for federal money to be spent on food. Originally, this was a barrier to successful community awareness presentations, as it is a part of the Lakota culture that when you bring people together, you feed them. Staff were able to obtain a waiver from the Department of Justice so that they could provide food at their events.
Moving forward, the staff plan to work with St. Francis Indian School and Todd County Middle School to be present more often in the school (perhaps even gaining office space there). St. Francis is a kindergarten through twelfth-grade private Catholic school that is located just southwest of the Rosebud community. According to the Rosebud Sioux Tribe’s Education Department, 25 percent of tribal students attend St. Francis. The remaining student population attends a school in the Todd County School District, which has nine elementary schools with a centralized middle and high school in Mission. Additionally, staff are starting to do more work in Parmalee. One staff member is from there and has connections to the youth programming in that community. Some youth groups in Parmalee have been working on a community garden, doing jewelry-making, and knitting. At these events, Rosebud DCI attend and talk about issues related to violence.

**Challenges to Community Awareness & Education**

In interviews with the evaluation team, staff discussed some of the challenges to doing community awareness and education. First, scheduling can be difficult. Local elections have caused delays, and there were some events scheduled that were canceled last minute because of a funeral. Second, early on in the project there was a male outreach coordinator, but he left the position after less than a year. As one interviewee stated, “I wish we had a male with us, because I think young boys will listen to a male more.” The prevention and outreach coordinators asked the cultural consultant to make visits to the JDC to speak to the males, but he did not follow up (potentially for reasons related to tribal politics).

Finally, DCI staff reported that some members of the communities do not want to talk about children’s exposure to violence. According to these staff members, this silence can make the work more difficult, as the issue cannot be addressed if people do not admit that there is a problem. According to one case coordinator, the resistance stems from the worry, “I don’t want people to know.” Indeed, staff mentioned in interviews that people are scared to speak up because if they implicate a relative of a politician’s family, “there will be payback.”

**Impact of Community Awareness Campaign**

Despite these challenges, the Rosebud DCI staff have been successful in getting their message out about their program and the importance of addressing children’s exposure to violence. Indeed, the baseline and follow-up community survey conducted as part of the outcome evaluation of the *Defending Childhood Demonstration Program* (discussed in Chapter 1) showed positive results on some awareness indicators. Of the 690 community members interviewed in June and July 2012, 19% reported that they had ever heard of the Rosebud Defending Childhood Initiative. When 534 community members were interviewed in June and July of 2014, that number had rose to 41%, a statistically significant increase.

Additionally, there were significant increases on willingness to report violence: the percent responding that they were likely or very likely to report a case of child abuse/neglect or a case of domestic violence to authorities went from 90% to 93%, and 85% to 91%, respectively.
System Infrastructure and Capacity Building

At the beginning of the project, the Rosebud DCI team identified three areas where they wanted to impact larger systems on the reservation. First, they wanted to work with Rosebud Law Enforcement Services (local police) to amend police reports to include a check box for CEV on law enforcement’s police report, which they fill out when they respond to an incident. In the ideal situation, when a police officer would respond to a domestic violence call, for example, he or she would check a box on the police report form to indicate whether a child was present at the scene of an incident. This information would then be shared with the South Dakota Department of Social Services, the prosecutor’s office, and the Rosebud DCI to coordinate reaching out to the family to assess service needs.

However, there have been multiple challenges to implementing this plan, and it has not been implemented. First, an already overburdened and understaffed law enforcement service has had a difficult time adding another task to its staff’s workload. Additionally, the Rosebud Police Chief, with whom the Rosebud DCI had held initial discussions and planning, was terminated by a tribal council motion at the end of May 2012, creating a lot of turmoil within the department and deprioritizing the check-box and related coordination, stalling the process permanently.

The second system infrastructure goal related to revising tribal legislation and policy to be more responsive to children’s exposure to violence. Tribal consultants B.J. and Lillian Jones provided the Rosebud DCI with suggestions on how to amend the Child Protection Code. The Code currently permits the abuse of a child by a guardian “if force or violence used is reasonable.” The consultants were shown pictures of young children with severe injuries whose parents were acquitted of child abuse because of the vagueness of this Code. The goals of the modification would be to define any abuse of children by a guardian as illegal. There are numerous other Code provisions that need to be changed in order for the Rosebud DCI team to effectively deal with violence against children on the reservation. The staff have been focusing on Code 5-5-5, 3-1-1, and 3-1-2.

As it currently reads, Code 5-5-5 states:

5-5-5: REASONABLE FORCE USED BY A PARENT GUARDIAN, OR TEACHER
NOT ASSAULT — To use or attempt or offer to use force or violence toward the person of another is not assault when committed by a parent or the authorized agent of any parent or by any guardian, teacher, or other school official in the exercise of a lawful authority to restrain or correct his child or ward provided restraint or correction has been rendered necessary by the misconduct of such child or ward or by his refusal to obey the lawful command of such parent or authorized agent, guardian, teacher or other school official and the force or violence used is reasonable in manner and moderate in degree.29

The suggestion to amend this code is to remove the word “violence” from it and to also impose some limits on the degree of force a parent can use to discipline a child.

29 Available at http://www.narf.org/nill/Codes/rosebudcode/title5crimes.htm#ass.
As it currently reads, Code 3-1-1, which relates to juveniles, defines an “abused child” as: “a child found to be suffering abuse of a physical, emotional, nutritional, sexual or exploitative nature. The following serve as guidelines to the Court dependent upon proof of parental and/or legal guardianship action which has resulted in serious harm to the child.” It then identifies the following physical and emotional abuse:

(1) A Physically Abused Child - is one found to be in one or more of the following situations:
   (a) Beatings;
   (b) Unusual or inappropriate punishments (does the punishment fit the crime?);
   (c) A child with multiple injuries; and/or
   (d) A child who is knocked unconscious by a parent or guardian.

(2) An Emotionally Abused Child - is one found to be in one or more of the following situations, dependent upon proof of parental or legal guardian action which has resulted in serious harm to the child.
   (a) A child whose parents fail to love, listen, guide or pay attention to;
   (b) A child who receives no moral, spiritual, or intellectual instruction from his parents;
   (c) A child who is separated or isolated from other members of the family (locked in locked out);
   (d) A rejected child;
   (e) A child whose parents have unrealistic expectations for him;
   (f) A child whose parents or others verbally harass, tease, swear at and/or ridicule him;
   (g) A child whose parents have failed to provide the child’s basic needs for food, shelter and clothing;
   (h) A child whose health is endangered by exposure to alcohol, drugs, tobacco; and/or
   (i) A child whose home lifestyle is dangerous (e.g., excessive drinking, excessive numbers of people in the house, no food, etc.).

The suggested change is to redefine abuse to read:

“Abuse” means any willful act or threatened act that results in any physical, mental, or sexual injury or harm that causes or is likely to cause the child’s physical, mental, or emotional health to be significantly impaired. Abuse of a child includes acts or omissions. Corporal discipline of a child by a parent or legal custodian for disciplinary purposes does not in itself constitute abuse when it does not result in harm to the child. Rosebud Tribal customary discipline of a child by a parent or customarily appropriate person does not in itself constitute abuse when it does not result in the presence of injuries such as swelling or impairment of the body.

Additionally, the suggested changes are to add the following subsections (j) and (k) under the section on emotional abuse:

(j) Any child who is permitted to reside with a person of the opposite sex in the same household while under the age of 16 years of age and who is engaged in a sexual relationship with that other person. This includes residing with an adult person or another child;

(k) Any child who has more than ten unexcused absences from school due to the parent’s or guardian’s failure to ensure that the child attends school.

Finally, there is also a suggestion to add a new Protection of Children Code. A draft of this code is attached here as Appendix C. All of these amendments and additions would have to be approved by the Tribal Council. No date is scheduled to propose these changes.

The Tribe is also in the process of attempting to obtain funding from the Department of Health and Human Services, Administration for Children and Families under Title IV-E of the Social Security Act, in order to administer its own foster care and child welfare system. That system is currently being operated by the South Dakota Department of Social Services—a state agency—and the Tribe feels that by operating its own program it will be better able to work with children who have been exposed to neglect or abuse and who are in out-of-home placements. The consultants are attempting to coordinate code changes with the individual responsible for making code changes to render the Tribe eligible for this funding.

The last systems infrastructure component related to creating Memorandums of Understanding (MOU) with various agencies that work with youth. DCI staff created and revised (based on feedback from the collaborative body) a culturally-relevant MOU that would allow children and youth program agencies to share information about the children they work with who have been exposed to violence. This MOU was adopted by the collaborative body in August 2014, so at the time of this process evaluation report, it had not been signed by any parties. It is attached to this report as Appendix D.

The biggest challenge to achieving these systems change goals has been staff turnover: at law enforcement as mentioned above, but more deeply at the Rosebud DCI project itself. Since the project’s inception, there have been five different Attorney Generals, five different project coordinators, and numerous changes among the program staff (case coordinators and prevention and outreach coordinators). Because of the turnover, the momentum that is built up with some staff is somewhat lost as the old staff leaves and new hires come aboard. In August 2014, the staff member who was leading this component of the initiative left; however, other staff members were able to move the tribal code revisions project forward and presented it to the Tribal Council’s Judiciary Committee.
Chapter 4
Implementation Barriers, Facilitators, and Sustainability

General Barriers and Challenges

Apart from the barriers and challenges described above in relation to specific elements of the Rosebud DCI, several important challenges cut across multiple aspects of the initiative.

Administrative and Budget Issues

Implementing a large, multi-goaled initiative over multiple years is not without its challenges. As discussed above, there have been specific barriers to doing case management and advocacy, holding community awareness and education sessions, and developing system infrastructure and building capacity. There have been broader administrative challenges as well. In an interview with the administrative assistant, she identified budget issues specific to official tribal procedures that restricted the staff’s ability to accomplish its goals in a timely manner. The tribe has strict processes for spending money, and the tribal office requests in-depth details and reasons for all spending. Specifically, any amount of money spent needs to go through the official budget process: a purchase order is typed, submitted to the Tribal Finance Office, and then goes to the program monitor for approval. This process can take up to a month. One project coordinator stated, “We need seven signatures to do anything.” This sentiment was echoed by the administrative assistant:

> It’s frustrating. It would be nice to get things back in a certain amount of time ... I’ve seen times when we’ve needed to do community outreaches and the purchase orders aren’t ready, so the money comes out of our pockets. We can get reimbursed, but that’s a whole process, and we need to write a letter of justification on why we paid out of pocket. And sometimes the process can be really political.

Additionally, the initiative required staff to travel often for trainings and meetings with federal partners, but all new people employed by the tribal government are on a 90-day probation and are not allowed to travel. In order to enable new staff to attend trainings, time has to be spent writing letters of justification and awaiting approval. One last constraint regarding budgeting is that the staff cannot purchase anything over $800 without obtaining three quotes.

Confidentiality

Another barrier to implementing this initiative has been around issues of confidentiality. Because of the small-town feel on the reservation, where everyone knows each other’s family, people are sometimes leery about confiding in staff about issues related to violence and abuse. Often a family member is working for the initiative, which also prevents people from wanting to come in to talk about another family member. There are also families in feuds who want to know about each other. Rosebud DCI staff understand the importance of maintaining confidentiality, however. As one staff member stated, “People will come step to you and say, ‘I hear my relative came to you, what did she want’? And we just say, ‘I’m sorry, I can’t discuss that with you.’”
Tribal Politics and Staff Turnover

Over the course of the three-year project, there has been a great deal of staff turnover. There have been two tribal council presidents, five Attorney Generals, five project coordinators, and a few rounds of turnover of the case coordinators and prevention and outreach coordinators. The cultural consultant position no longer exists.

Some of the turnover has been due to tribal elections, a certain degree of tribal politics, and some due to dissatisfaction with the job, lack of support, and lack of job stability. For example, the original project coordinator reported receiving a lot of resistance from the tribal council because she was a non-tribal member. As she stated, “People will say things like, ‘You know how it is with these non-tribal members, they don’t know what it’s like because they’re not raised here.’” Additionally, her “outsider” status reportedly led to a conflict between her and one of the outreach coordinators. The outreach coordinator ended up resigning, and less than six months later the project coordinator was fired by the council.

Like many state, local, and tribal communities, there is a certain degree of “politics” on the Rosebud reservation, where jobs are perceived as a form of payback for political support. Often, local tribal officials see grants as “job creators,” and, given the high unemployment rate in the area, grant-funded positions become a political issue. When a grant period is finite, the commitment from the council is lessened because, as one staff member stated, “They have grant fatigue so they have an attitude of ‘your grant will come and go.’” One Attorney General stated that she has faced many challenges from the tribal council because she is not Native American and is threatened with termination every few weeks.

The high turnover and lack of job security affects the consistency and sustainability of the initiative. Some of the staff members stated that the departure of the original Attorney General on the project and the council president who were in place when the initiative first started led to major political instability and a lack of guidance and support.

As Attorney General and project director positions continuously turn over, there is a lack of institutional memory and leadership of the project. As case coordinator and prevention and outreach coordinators turn over, new staff members have not received the same amount of training as original members, some relationships with existing relatives on the caseload are broken, and efforts to form relationships with communities and schools have to be rebuilt.

Because of the intensity and centrality of politics on the reservation, staff members are often nervous that they will lose their jobs for reasons that are unrelated to job performance. Some staff are worried that through their work, as they uncover malfeasance by certain powerful institutions on the reservation (including the Juvenile and Wellness Courts) and bring it to light, they are putting their own jobs in jeopardy. Additionally, when the federal government was shut down in the fall of 2013, every day the council said they were going to furlough the Rosebud DCI employees since they could not access money to pay them.
These intertwined politics and staff turnover have produced extremely low morale among DCI staff at various points over the course of the last three years. Over one nine-month period, staff were down to only three, and they said, “Everybody’s doing everything to keep DCI above water.” This meant that during these nine months, no new work was really taking place. However, in separate interviews, multiple staff members have reported that their new OJJDP grant manager, who came on board in early 2014, empowered them to be able to do their work and worry less about the tribal council, because she proactively made known to the tribal council that she would have to approve of all employees they wished to hire. Additionally, the staff team in place at the time of this writing has been consistent for many months, and has built a strong rapport with each other, with community partners, and with the community residents.

**Strained Relationship with Courts and Law Enforcement**

The Rosebud DCI has struggled in their relationship with the RST Juvenile Court and with law enforcement. It has been unclear why this struggle took place, although staff have speculated that these agencies were perhaps afraid of negative exposure or clinging to notions of “defending their turf,” which was a theme heard when discussing the general feel on the reservation as well. As the cultural consultant stated, “There’s a lot of resistance out there to being shown truth because they think it looks badly on them.” The strained relationship does not keep the Rosebud DCI from doing anything, but it makes it more difficult. For example, if DCI staff need information from the Juvenile Court or law enforcement, it takes longer to receive it due to the underlying tension in this relationship. And if there is a domestic violence call to which the police respond where children are present, they often do not call the Rosebud DCI staff. Regarding the Juvenile Court, the only juvenile judge (who is also the Wellness Court judge) has forbidden some of the Rosebud DCI staff members from coming to hearings even when the families request their presence. From the Court’s perspective these may be issues of attempting to enforce the confidentiality of these proceedings and need to be addressed through code changes to accommodate the involvement of other programs.

The community’s relationship with the police seems to be strained as well. The Rosebud DCI staff speculated that the initiative is often the first option for people when things happen, because the community has not liked the police’s attitudes towards women and their response to sexual assaults. As one staff member stated, “It’s lawless here on the reservation.” According to another staff member, several senior police department staff have been investigated, charged, and/or fired for incidents relating to rape and domestic violence. There have been rumors that the Bureau of Indian Affairs will come and run the police department soon. Whereas we could not confirm these allegations or charges, the point of raising them is not to pass along unconfirmed information but to illustrate the significant level of community distrust of law enforcement on the reservation.

**Time-Consuming and Seemingly Bureaucratic Reports**

Because of the way the initiative is funded, with funding streams coming from various parts of the federal government, program staff have to complete multiple progress reports. Every six months, staff must submit one report to the Office of Juvenile Justice and Delinquency Prevention, which includes separate reporting requirements for OJJDP and for the Office of Violence Against Women. Additionally, every three months staff must submit a quantitative implementation report.
to the Center for Court Innovation as part of the evaluation. The technical assistance providers, Futures Without Violence, often ask for qualitative stories from the sites for their own reporting purposes. Each of these reports have different formats and take a lot of time to complete. Additionally, feedback from the federal funding partners based on the reports has been extremely limited. As one project coordinator stated, “I didn’t submit one report to OJJDP six months ago and have never heard anything. So is it really a monitoring thing? I didn’t even do half of it, have they even looked at it?” The lack of feedback from the funder to the site has been frustrating, given the amount of time spent completing the reports.

Other Contextual Factors

Rosebud DCI staff members are concerned about the effects that the potential Keystone XL Pipeline would have on the reservation. The pipeline, which is a crude oil pipeline that would run from Canada to the U.S. Gulf Coast, would cut through three communities on the reservation on its way to Nebraska. These three communities are about a two-hour drive from Rosebud (one of the communities on the also-named reservation), where the already strained police force is located. In addition to the possible irreversible effects on the environment that the pipeline would bring (one principal fear is that a pipeline leak could have devastating consequences for the Rosebud’s main source of water, the Ogallala Aquifer), Rosebud DCI staff are worried about it breeding increased violence and vulnerability for young girls who are at risk of being sexually exploited. As one prevention and outreach coordinator pointed out, “The unemployment rate here is 87%. This is why the pipeline is so dangerous. It makes kids vulnerable to predators who can give them things.” Another staff member summarized the situation:

Meth is really bad here, and it’s coming from the oil fields up in North Dakota. There will be man camps of 2500 men, so that breeds trafficking, prostitution, and meth. It’s going to get bad. Nothing good is going to come out of this if it gets approved. Native men are going to leave their homes and their families because they’ve not seen money like this before for hard labor. It’ll be oil violence.

Methamphetamine is already a problem on the reservation, and there are regular reports of “meth babies” being born.

The concern over the “oil violence” exacerbating the problem is not unwarranted. Since the oil fields came to neighboring North Dakota, there has been a noticeable increase in crime and alcohol abuse. Recently, the New York Times ran a series of stories about the increase in fear of rape and sexual assault by women who live near the oil fields in North Dakota, in part due to the large influx of male workers, and an increase in crime and domestic violence in the oil towns in North Dakota and Montana. Other news sources have outlined the increase in the drug trade due to the oil

boom. Moreover, as extant research has shown, in Montana and North Dakota, the number of Part I offenses in oil producing counties increased by 32% from 2005 to 2011, compared to only a five percent increase in a group of similar non-oil producing counties. Studies that examined the perceptions of human service agents and the police in the Bakken region (parts of Montana, North Dakota, and Canada) found that incidents of domestic violence were increasing. A pre-post analysis of violent crime in oil boom counties in Montana and North Dakota found an increase of 19% between 2006 and 2012, while decreasing 26% in a matched sample of counties that had no oil or gas production. This potential “oil violence” is an important topic the U.S. Department of Justice is trying to address: in 2013, the National Institute of Justice funded exploratory research on the impact of the growing oil industry in the Dakotas and Montana on domestic violence, dating violence, sexual assault, and stalking. In 2014, the Office of Violence Against Women created the Bakken Region Initiative, which supports projects that are designed to support the expansion of services to victims of sexual assault, domestic violence and stalking as well as aid the local criminal justice system in responding to these crimes.

These realities of oil-related violence in the Dakotas have led the Rosebud DCI team to focus some of their system infrastructure efforts on trying to tighten up the laws and tribal code before the pipeline arrives, including trying to write an anti-sex trafficking code, which does not currently exist.

Facilitators

Although the “everybody knows everybody” feel on the reservation was discussed as a challenge above, one staff member stated that it was also helpful in getting things done. “Just being from here and being related to so many, a lot of the people I have to talk to know my parents and have known me since I was a kid.”

Another facilitator has been the deep commitment of many of the staff members to doing this work. One prevention and outreach coordinator stated that in the face of so many obstacles—because of the content of the work as well as the tribal politics—there is a younger generation working together whose members are committed to collaboration and positive change. As she


Chapter 4. Implementation Barriers, Facilitators, and Sustainability
pointed out, “The older generation didn’t want to work together. There are a lot more young people in these positions than there were 5-10 years ago.”

Technical Assistance

The Rosebud DCI has asked for help from technical assistance providers Futures Without Violence, the designated technical assistance provider for the Defending Childhood Demonstration Project, and Native Streams. Specifically, early on in the project (September 2012), Native Streams did a two-day training for staff on Lakota mental health first aid and provided guidance on their case management. Futures Without Violence holds biweekly conference calls with all of the sites, where staff can request assistance on specific topics. Often these topics end up on the agendas at the annual all-sites meetings or become topic-specific webinars. For example, when Rosebud DCI staff asked about developing a public education campaign, Futures Without Violence consulted with Nakota Designs to hold a series of calls and webinars on relevant topics such as: positive vs. negative messaging; review of Indian Country health campaigns; developing messaging and branding; photo image use/rights issues; and localization of national campaign. Staff also sought and received help from the technical assistance providers on writing grant extensions, understanding the federal government’s “special conditions” to the grant, writing job announcements for new hires, promoting positive team dynamics, and addressing staffing gaps.

In May 2014, core Rosebud DCI staff expressed to the research team and Native Streams that they still need more information on confidentiality, staff development, trainings, and budgeting. Due to staff turnover, training that had previously been provided to original project staff needed to be redone for new staff. Native Streams has been working with the team to provide the help they need. For example, in May, after expressing the need for another Lakota mental health first aid training, one was scheduled for early June.

The evaluation consultants, B.J. and Lillian Jones, are tribal legal experts, having served as a tribal judge and paralegal, respectively, for over ten different tribal nations. They advised on the development of the tribal code revisions (as described above).

Sustainability

Because all of the staff positions are completely grant funded, these positions will be eliminated when the grant period ends. In this sense, the everyday work of the project will not be sustained. However, certain elements of the work may precipitate long-lasting changes.

- **Legal and Infrastructure Changes:** Project staff are working on legal and infrastructure changes (e.g., changing the tribal code, as discussed above), which will be in place to help protect children even after the initiative ends.

- **Train and Trainers Model:** Before federal funding ends, DCI staff would like to train a few people in each community on the reservation on the Lakota mental health model. Utilizing a “train the trainers” model would both promote the sustainability of the initiative and also promote a shared responsibility for treatment and healing efforts with children who have been exposed to violence.
• **Intake Form:** DCI staff are working on an intake form that Native Streams helped develop, and are hoping that all youth programs will use the same form and will continue to do so after the grant ends. This form, which is still in draft stage (draft attached as Appendix E), is a comprehensive documentation sheet that goes through a young person’s history related to family, mental health, education, drug/alcohol, and intergenerational trauma. It also looks at present needs and goals. At the present time, program staff are testing the intake form to gauge its applicability and effectiveness.

**Conclusion**

Despite challenges surrounding staff turnover and local politics, the Rosebud Sioux Tribe’s Defending Childhood Initiative was able to achieve important accomplishments, including bringing a much needed advocacy program to the reservation and providing victims with assistance, and raising community awareness about children’s exposure to violence on the Rosebud. Throughout this work, the Rosebud DCI staff have infused a culture-based approach and have brought back a focus on Lakota spirituality and tradition, reflecting the strengths of their culture as a protective factor. By helping youth and community members improve their connection to their culture and the Lakota way of life, they may be impacting children’s exposure to violence in ways that are difficult to measure.
### Appendix A
Collaborative Body and Workgroup Meetings

<table>
<thead>
<tr>
<th>Meeting Date</th>
<th>Type of Meeting</th>
<th>Meeting Time</th>
<th># of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>October 20, 2011</td>
<td>Collaborative Body</td>
<td>2:00pm – 4:30pm</td>
<td>26</td>
</tr>
<tr>
<td>November 2, 2011</td>
<td>Sexual Assault Response Team</td>
<td>3:00pm – 4:40pm</td>
<td>6</td>
</tr>
<tr>
<td>November 16, 2011</td>
<td>Community Empowerment Working Group</td>
<td>2:00pm – 3:00pm</td>
<td>6</td>
</tr>
<tr>
<td>December 8, 2011</td>
<td>Collaborative Body</td>
<td>2:00pm – 4:40pm</td>
<td>34</td>
</tr>
<tr>
<td>March 21, 2012</td>
<td>Collaborative Body</td>
<td>12:00pm – 5:00pm</td>
<td>32</td>
</tr>
<tr>
<td>April 19, 2012</td>
<td>Child Victims Working Group</td>
<td>2:00pm – 4:00pm</td>
<td>7</td>
</tr>
<tr>
<td>May 9, 2012</td>
<td>Collaborative Body</td>
<td>10:00am – 1:00pm</td>
<td>30</td>
</tr>
<tr>
<td>September 6, 2012</td>
<td>Collaborative Body</td>
<td>11:00am – 2:00pm</td>
<td>37</td>
</tr>
<tr>
<td>March 20, 2013</td>
<td>Collaborative Body</td>
<td>10:00am – 2:00pm</td>
<td>28</td>
</tr>
<tr>
<td>July 8, 2013</td>
<td>Collaborative Body</td>
<td>9:30am – 3:00pm</td>
<td>5</td>
</tr>
<tr>
<td>September 12, 2013</td>
<td>Collaborative Body</td>
<td>10:00am – 2:00pm</td>
<td>18</td>
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<tr>
<td>September 17, 2013</td>
<td>Cultural Working Group</td>
<td>9:00am – 11:30am</td>
<td>4</td>
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<td>February 28, 2014</td>
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<tr>
<td>May 12, 2014</td>
<td>Collaborative Body</td>
<td>9:00am – 3:00pm</td>
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</tr>
<tr>
<td>June 17, 2014</td>
<td>Collaborative Body</td>
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<td>21</td>
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<tr>
<td>August 12, 2014</td>
<td>Collaborative Body</td>
<td>10:00am – 12:00pm</td>
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Appendix B
Case Flow Process and Blank Action Plan

Defending Childhood Initiative
Direct Services

Wokigna

Community Referral

Self-Referral (Guardian)

Program Referral

Assigned Case Coordinator

Assigned Case Coordinator

Assigned Case Coordinator

Intake Process
1. Consent
2. Intake Form
3. Release Forms
4. Plan of Action

Intake Process
1. Consent
2. Intake Form
3. Release Forms
4. Plan of Action

Intake Process
1. Consent
2. Intake Form
3. Release Forms
4. Plan of Action

Care Advocacy

Referrals for Services/
Request Pertinent Info.
	- Tiwahe gila Kin Pi
	- RST Children’s Court
	- RST Alcohol Treatment
	- Tokala Inajinya Prog.
	- Lakota Tiwahe Center
	- Sicangu Employment/Trng.
	- White Buffalo Calf Wmn Society
	- IHS Mental Health
	- Southern Plains Behavioral
	- Lakota Care
	- Nat. Am. Advocacy Center
	- Education and Medical

1st Step:
Empower families to make appointments.

2nd Step:
Follow-Up with all referrals.
If appointments have not been made by guardian, DCI will then make these.

Empower

Lakol Wicohan
Support Services: Crisis, Intervention, Education Advocacy, Medical Response, Transportation Accompaniment: court, school hearings, other

Enforce

Follow-Up/Monitor (varies according to case)
Daily, Weekly, Bi-Weekly Contacts with Relative

PROTECT

RESILIENCE
RST Defending Childhood Initiative
PO Box 500, Rosebud, SD 57570
Fax: 605-747-5593
605-747-2900

**Action Plan**

<table>
<thead>
<tr>
<th>Action/Goal</th>
<th>Start Date</th>
<th>End Date</th>
<th>Who is Responsible?</th>
<th>Status</th>
<th>Comments</th>
</tr>
</thead>
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Appendix C
Suggested Rosebud Sioux Tribe Protection of Children Code

Chapter 1: Purpose and Jurisdiction

1-1-1 PURPOSE AND CONSTRUCTION – The purposes of this chapter are:

A) To ensure that all children within the jurisdiction of the Rosebud Sioux Tribe are raised in an environment that preserves their physical, emotional and spiritual health and promotes the sacredness of children according to Lakota values;

B) To ensure that children are not exposed to violence in their homes, schools or communities and that should they be so exposed that they receive the necessary services to allow them to heal both physically and spiritually from such violence;

C) To create a legal framework for the Rosebud Sioux Tribe to exercise exclusive authority over all children within their jurisdiction and to enable the Tribe to receive direct funding from the federal government to operate a child protection program that meets the needs of children and families;

D) To recognize the fundamental right of families, nuclear and extended, to rear children according to their cultural and spiritual norms free of government interference, but imposing tribal mandates upon families and institutions to honor and respect children as the future leaders of the Lakota people and to raise them free of violence and neglect;

E) To recognize the international and treaty rights of native children in their homes and communities;

F) To exercise to the maximum extent possible the jurisdiction that the Sicangu may exercise over their children living off the reservation through a full adoption and implementation of the Indian Child Welfare Act and other federal laws preserving to this Tribe its inherent rights over its children;

G) To impose requirements upon all tribal and non-tribal entities operating on the Rosebud reservation to report the abuse and neglect of children and to create and enforce guidelines to ensure that such neglect and abuse is not condoned or effectuated by these programs;

H) To ensure that all children under the jurisdiction of the Rosebud Sioux Tribe have the right to become familiar with and relate to both the paternal and maternal family of the child unless such exposure would be dangerous to the child’s welfare;

1-1-2 Jurisdiction of Tribe and Its Court

The exclusive jurisdiction of the Rosebud Sioux Tribe and its Court shall extend to all children members of the Rosebud Sioux Tribe and other native children who reside or are domiciled within the exterior boundaries of the Rosebud Sioux Tribe and its outlying trust lands. This jurisdiction extends to all native children whose domicile is on the Rosebud reservation but who may be temporarily living off the reservation due to parents attending college off the reservation or parents enlisted in the military service. Jurisdiction shall also extend to all Rosebud Sioux Tribal members and native children who reside off the
reservation but whom are temporarily located on the reservation and who are found to be in an environment that is potentially injurious to their welfare.

The Rosebud Sioux Tribe also recognizes its inherent authority to provide for its children residing off the reservation under the parameters of the Indian Child Welfare Act and states its intent to be involved in all state court proceedings involving its children to the extent its resources permit it to be involved. The Tribe and its Court shall attempt to transfer all proceedings involving its children back to its Court provided such is feasible and permitted by state courts asserting jurisdiction.
Appendix D
Memorandum of Understanding

Memorandum of Agreement between
Partners of the Rosebud Sioux Tribe (RST) System of Care (SOC)

1.1. The Mission of the RST System of Care is to promote a safe, healthy, harmonious living environment for all youth and families that will support cultural identity and spirituality, provide education and become a productive member of the community. Special focus is on protecting and defending children from violence and sexual abuse and assisting our relatives to heal from trauma and serious emotional, mental, behavioral and spiritual issues impacting their lives.

1.2. It is the goal of this agreement to bring RST System of Care partners together to offer Waunsila and Wicozan to our relatives and to increase the availability, collaboration and coordination of services, through Wolakota.

1.3. The following Seven Guiding Principles exemplify the values we as Lakota will use to insure our Wakanyeja of the Rosebud are cherished and able to make a strong positive connection to their identity and spirituality. In addition to these principles, our Wakanyeja need at least one positive role model, which is vital for their growth and development.
   - Wocekiya (Prayer/talking with relatives)-We use wocekiya as a means of healing, self-care and balance.
   - Woohitika (Bravery) and Wowacintanka (Perseverance)-To be guided by your principles of bravery, courage and discipline.
   - Waunsila (Compassion)-to care, to sympathize, empathize.
   - Otakuye (Relatives)-We treat all children and families on the Rosebud as relatives and with the same care, love and compassion.
   - Waohola (Respect)-to respect, to honor.
   - Igluhukhuya (Humility)-to be humble, to seek humility.
   - Woksape (Wisdom)-understanding and wisdom, to understand what is right and true and use knowledge wisely.

2.0 Scope of Agreement:
   In order to insure availability and continuity of services for children and families, partners mutually agree to:

2.1 Empower relatives by applying: strength based, individualized, youth led, family driven, culturally competent, community based and least-restrictive environment principles in all aspects of care.

2.2 Collaborate on legal and restorative justice remedies to prevent acts of violence and negligence and provide accountability for actions toward children.

2.4 Continually educate the community on these issues and seek to remove the stigma from accessing mental health and other appropriate services for recovery.

2.5 Keep all information pertaining to the child and family seeking/receiving services in a manner that will insure confidentiality with respect to addressing and minimizing risk of harm to the child and others.
2.6 Use and share (with written consent from the parent/guardian) a System of Care referral and intake form that serves to limit the recounting of the need or circumstances related to seeking services and thereby reducing the risk of retraumatization.

2.7 Assist and provide written referrals, along with a signed release of information, to appropriate services for relatives, who have identified a need,

2.8 Insure that written referrals received from each other are acted upon promptly and that the referring program is kept informed of each child’s participation/progress if appropriate release of information is signed.

2.9 Keep each other informed on all resources and services that may be offered for relatives.

2.10 Participate in System of Care meetings, trainings and activities to further develop skills and services and provide support for each other in this work.

2.11 Collaborate on social, educational and prevention activities for children through sharing of resources, space and staff as mutually agreed upon with resources available. (Generosity)

2.12 Utilize a designated cultural mediation process with partners if conflicts arise.

The working relationship between members of the system of care is automatically insured because of their mutual interests and responsibilities.

________________________________   ______________________________      ___________
Name                                                         Program                                                     Date

________________________________   ______________________________      ___________
Name                                                         Program                                                     Date

________________________________   ______________________________      ___________
Name                                                         Program                                                     Date

________________________________   ______________________________      ___________
Name                                                         Program                                                     Date

________________________________   ______________________________      ___________
Name                                                         Program                                                     Date

________________________________   ______________________________      ___________
Name                                                         Program                                                     Date

________________________________   ______________________________      ___________
Name                                                         Program                                                     Date

________________________________   ______________________________      ___________
Name                                                         Program                                                     Date

________________________________   ______________________________      ___________
Name                                                         Program                                                     Date

Appendix D. Memorandum of Understanding

This document is a research report submitted to the U.S. Department of Justice. This report has not been published by the Department. Opinions or points of view expressed are those of the author(s) and do not necessarily reflect the official position or policies of the U.S. Department of Justice.
Appendix E
Draft Intake Form

Child Intake Form

Intake Date/Time: ___________ Case Coordinator: ____________________________

Client Information

Child's Full Name: ___________________________ Lakota Name: ___________________________

Date of Birth: ____/____/____ Address: ____________________________________________________

Directions to Home: ____________________________________________________________________

Parent/Legal Guardian Phone Numbers: _______________ Cell: _______________ Work: _______________

Community: _______________ Tribal Affiliation: _______________ Age: _______ Gender: ______ M F

Child's Legal Guardian: ___________________________________________________________________

Is there currently a criminal investigation? Y N

Exposure to Violence-Related Information (abuse, neglect, self-harm (suicide), eating disorder, substance abuse, institutional systems/systems violence, racism, domestic violence, crime, bullying):
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Family History

Mother's Name: ___________________________ Custodial Parent: Y N

Address: ___________________________ Directions: ___________________________ Phone Number: ___________
Appendix E. Draft Intake Form

Father's Name: ___________________________ Custodial Parent: Y N

Address: ___________________________ Directions: _______________ Phone Number: _______________

Sibling: ___________________________ Age: _____ School: ___________ Lives At: _______________
Sibling: ___________________________ Age: _____ School: ___________ Lives At: _______________
Sibling: ___________________________ Age: _____ School: ___________ Lives At: _______________
Sibling: ___________________________ Age: _____ School: ___________ Lives At: _______________

Who provides supervision:
_________________________________________________________________________________

Family Strengths: __________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Client Health History

Has child ever received counseling, psychological, or alcohol/drug treatment before?: Y N
From Whom? ___________________________ For What? ___________________________ When? ___________
Results:
_________________________________________________________________________________

Has child ever received a developmental screening or (school) evaluation before?: Y N
From Whom? ___________________________ For What? ___________________________ When? ___________
Results:
_________________________________________________________________________________

Has child ever been prescribed medication for psychiatric/emotional problems? Y N
From Whom? ___________________________ For What? ___________________________ When? ___________
Results:
_________________________________________________________________________________

Has child attempted suicide in the past? Y N How many times?
When? ___________________________ How? ___________________________ Reported? ___________
Results:
_________________________________________________________________________________

Child's Primary Care Provider: ___________________________ Covered by: IHS Medicaid Insurance

Please list all health-related concerns:
_________________________________________________________________________________
_________________________________________________________________________________

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been published by the Department. Opinions or points of view expressed are those of the author(s)
and do not necessarily reflect the official position or policies of the U.S. Department of Justice.
Please list current medications:

___________________________________________________________________________________
___________________________________________________________________________________

Goals for Counseling:

___________________________________________________________________________________
___________________________________________________________________________________

Please check all that apply. If child is too young, complete based on observations:

<table>
<thead>
<tr>
<th>Headaches</th>
<th>Memory problems</th>
<th>Depression</th>
<th>Sleep problems</th>
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</thead>
<tbody>
<tr>
<td>Heart palpitations</td>
<td>Feeling tense or nervous</td>
<td>Academic concerns</td>
<td>Cutting history (self-inflicted)</td>
</tr>
<tr>
<td>Drug use</td>
<td>Worries about money</td>
<td>Shy around others</td>
<td>Not confident</td>
</tr>
<tr>
<td>Having a lack of friends</td>
<td>Stomach problems</td>
<td>Concerned about eating habits</td>
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</tr>
<tr>
<td>Feelings of panic, fear, phobias</td>
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<td>Trouble concentrating</td>
<td>Alcohol use</td>
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<tr>
<td>Feeling sad or depressed</td>
<td>Grief or loss</td>
<td>Nightmares</td>
<td>Feeling restless</td>
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<td>Feelings of hopelessness</td>
<td>Feelings of worthlessness</td>
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<td>Disturbing thoughts</td>
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<td>Aggression</td>
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<td>Anger</td>
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<td>Memory problems</td>
<td>Chronic pain</td>
</tr>
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<td>Blaming/criticizing self</td>
<td>Abusing others</td>
<td>Dizziness</td>
<td>Feeling tired</td>
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<td>Poor Judgment</td>
<td>Concerned about family members</td>
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<td>Antisocial/illegal behavior</td>
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<td>Anxiety</td>
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<td>Feeling a need to be on the go</td>
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<td>Abused by others</td>
<td>Sick often</td>
<td>Isolating self</td>
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<tr>
<td>Disorganized thoughts</td>
<td>Relationship problems</td>
<td>Easily distracted</td>
<td>Impulsive</td>
</tr>
</tbody>
</table>

Circle those that apply:
* A serious accident * Hospitalization * Surgery * Asthma * A head injury * High fever
* Convulsions/seizures * Eye Problems * Meningitis * Hearing problems * Traumatic Brain Injury
* Loss of consciousness * Premature Birth (If child is 0-2 yrs.) * Broken Limb * Pregnant *

Other:

Client's Basic Needs

<table>
<thead>
<tr>
<th>Clothing * Hygiene * School Supplies * Shoes</th>
<th>Made referral to: RST Community Services</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>____ Tree of Life ___ Sicangu Child &amp; Family Service ___ Other Agency/Service</td>
</tr>
</tbody>
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Client's Education History

School: ___________________________ Grade: __________________________ G.E.D: __________________________

Highest Grade Completed: _______ Achievements/Activities:

Is child receiving Special Education services?:  Y    N    For?: __________________________

Has child experienced any of the following?: Truancy Tardiness Expulsion Suspension Fighting Behavior Concerns Poor Grades Gang-Related Activity

Appendix E. Draft Intake Form

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Client's Social History

Response to Child's disclosure of abuse/neglect:
___________________________________________________________________________________
___________________________________________________________________________________

Behavioral History (Please explain):
___________________________________________________________________________________
___________________________________________________________________________________

Social Functioning (Please explain):
___________________________________________________________________________________
___________________________________________________________________________________

Support System for Child (Friends, Groups):
___________________________________________________________________________________
___________________________________________________________________________________

Hobbies: ___________________________________________________________________________

Is child in a gang?  Y  N

Client's History – Alcohol/Drugs

Has child ever used:
- Marijuana  [ ] [ ] ____________________
- Alcohol  [ ] [ ] ____________________
- Methamphetamine/Uppers  [ ] [ ] ____________________
- Cocaine  [ ] [ ] ____________________
- Hallucinogens  [ ] [ ] ____________________
- Prescription Drugs  [ ] [ ] ____________________
- Inhalants  [ ] [ ] ____________________
- Tobacco (Cigarettes, Cigars)  [ ] [ ] ____________________

Family History of Alcohol/Drug Use/Abuse:
___________________________________________________________________________________
___________________________________________________________________________________

Client's Legal History

Has child ever been arrested?  Y  N  When?: __________  For what?: _________________________
JDC:  Y  N  When: ________________  How long?: ____________________________
Wellness Court: Y N When?: ____________ Outcome: _______________________________
First Offenders: Y N When?: ____________ Outcome: _______________________________

Spirituality/Culture

Do you attend church? Y N Where? _______________________ When?___________________
Have you ever been in a sweat lodge (inipi)? Y N
Would you be interested in taking part in the inipi? Y N Are you afraid of the dark? Y N

Intergenerational Trauma

Has anyone in your family ever been/experienced:
Incarcerated? Y N How is this person related to you? ____________________________
Exposed to domestic violence? Y N How is this person related to you? ___________________
Alcoholism? Y N How is this person related to you?
Mental Illness? Y N How is this person related to you?

Additional Information:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

All the information provided to DCI will be kept in a secured area. This information will remain in the DCI office and information will be kept confidential.

Legal Guardian Signature ___________________________ Date ___________________________
Defending Childhood Initiative Signature ___________________________ Date ___________________________