• The primary objective of this study is to shift the dialogue to include Native communities who are deeply impacted by the Missing and Murdered Indigenous Women and Girls (MMIWG).

• This information is crucial to effectively understanding Native women in both, urban and non-urban communities.

• Using a narrative method to captured the experiences of the Native participants conducted through 1-hour remote-interview.

Keywords: Stereotypes, Law Enforcement, MMIWG, Sexual Violence, and Native Women

ABSTRACT

• The data collected from the remote-interview from participants A and B uncovered: their experience with law enforcement, harmful stereotypes in media, and how enduring MMIWG epidemic has persisted.

• Participants A and B disclose that they themselves were victims of sexual violence, or either knew someone that was victim.

Participant A: “As an indigenous woman, I was sexually assaulted last year by my ex-boyfriend and I had, after it had happened, I didn’t really talk about it.”

Participant B: “My children were assaulted by a close family member…”

• Participant A had indicated that sexual assault has occurred as recent as last year and preparatory was non-native.

• Participant B indicated the sexual assault occurred over decade ago and the preparatory is native. This demonstrates that Native women are both targeted by non-native and native. It show how enduring MMIWG epidemic has been effective Native women.

• Both participants expressed the depiction and stereotypes of Native women in media and society.

Participant A: “I think it’s kind of like twisted fantasy of, like Pocahontas or Sacagawea, it’s just some sort of sick shit, where I’m like, oh I’m supposed to be a Disney Indian princess, so you have to be beautiful and be like a mystical creature. We’re kind of like mermaids”

Participant B: “I believe it’s driven by fantasy”

• Participants A highlighted that tribal police in non-urban area (e.g., reservations or Indian country) is not reliable. Participant B expressed blatant racism when interacting with non-native police.

Participant A: “It takes probably like an hour and half to two hours, depending on how far they”

Participant B: “They just don’t care about us”

RESULTS

• This report demonstrates how underserved and constant uphill struggle Indigenous women face to simply exist. The MMIWG crisis still fails to capture mainstream awareness and understanding. This leaves unreliable picture of the issue of both, urban and non-urban areas. This lack of understanding of the epidemic prevents of appropriate response in policy, law enforcement, portray in media.

• Non-natives: critical think and question all the media you consume.

• Teach consent, believe victims, and report any sexual violence, experienced or witnessed.

CONCLUSION

• The risk of rape or sexual assault is 2.5 times higher for Native women than the rest of the country, and perpetrators are more likely to be non-Native.

DISCUSSION

• Sexual Violence is a sexual act against someone without that person’s consent.

• Sexual Violence can include: Catcalling, Sexual Harassment, Groping, Unwanted Sexual Photos, Molestation, Incest and Rape.

• Sexual Consent is an agreement to participate in a sexual activity. It is freely given, changeable, informed, enthusiastic, and specific.

• According (Our Bodies Our Stories, 2018) recognized that more than 1 in 2 Native women will be victims of sexual violence in their lifetime.

• More than 1 in 3 will be raped, compared to 1 in 5 non-Hispanic White women.

• The risk of rape or sexual assault is 2.5 times higher for Native women than the rest of the country, and perpetrators are more likely to be non-Native.

REFERENCES


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Juan N. Palacios and Dr. Robert Beshara

Department of Humanities and Social Sciences
Northern New Mexico College

Our Women and Girls ARE SACRED

TOP 10 STATES WITH HIGHEST NUMBER OF MMIWG CASES

1. New Mexico [19]
3. Arizona [9]
5. Montana [1]
6. California [1]
7. Nebraska [1]
8. Utah [1]
10. Oklahoma [1]

MISSION OF URBAN INDIAN COMMUNITY HEALTH INSTITUTE

· Urban Indian Health Institute is the national leader in improving the health status of American Indians and Alaska Natives.

· The Urban Indian Health Institute (UIHI) is uniquely positioned to help Native communities and their partners to develop creative and practical solutions to the persistent health challenges facing Native women, men, and families.

· UIHI is a leader in the development and implementation of innovative strategies to improve the health of Native people through innovative research, capacity building, and community action.

· UIHI has a powerful vision: to ensure that the health needs of American Indians and Alaska Natives are fully articulated and systematically addressed in federal, state, and local public policy, private philanthropy, and community action.