

Contributing Factors to Gender-Based Violence Against Native American Women:

A Literature Review

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Introduction

Gender-based violence (GBV) remains a pervasive human rights concern that affects individuals across all populations. It can be defined as violence committed against an individual because of their sex or gender (UNHCR, 2020). The most common subtypes of GBV include intimate partner violence (IPV), physical violence, sexual violence, and stalking. These forms of violence often overlap, with victims experiencing more than one subtype over the course of their lives. IPV includes physical, sexual, or psychological harm that occurs within a romantic relationship; physical violence refers to the deliberate or attempted use of physical force against another person; sexual violence involves nonconsensual sexual acts or behavior; and stalking involves persistent, unwanted behaviors that elicit fear or concern (CDC, 2024). Among the subtypes, IPV is the most prevalent, with one in three women worldwide reporting physical and/or sexual violence in their relationships (WHO, 2024).

Although GBV can affect individuals of all genders, it disproportionately affects women and girls (UN Women, 2024). In the United States, three out of ten women are stalked, physically assaulted, or raped by an intimate partner, compared to one in ten of their male counterparts (Huecker et al., 2023). Moreover, women often experience more severe forms of physical and sexual violence, with long-term health impacts (Walby & Towers, 2018). These gendered disparities are not incidental but highlight an uneven power dynamic, shaped by social, cultural, and systemic forces. Survivors of GBV often face barriers when seeking help, which contributes to the underreporting of GBV. Globally, only 7% of women who experience physical or sexual violence report it to a formal source (Palmero, Bleck, & Peterman, 2014).

The effects of GBV extend far beyond immediate physical harm, often resulting in long-term consequences that impact survivors' quality of life. Physically, individuals may suffer from

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head injuries, chronic pain, and reproductive health issues such as STIs or unwanted pregnancies (UNICEF). The psychological impact can be equally devastating. It is estimated that 20% of women who have experienced sexual assault are diagnosed with PTSD, while many others report depression and anxiety (Scott et al., 2018). These mental health challenges are often exacerbated by feelings of isolation and social stigma. As a result, the effects of GBV extend beyond the individual and are often influenced by the cultural and community contexts in which survivors live.

In the United States, the prevalence of GBV is not distributed equally across racial and ethnic groups. Women of color, particularly Black, Latina, and American Indian and Alaskan Native (AI/AN) women, experience disproportionately higher rates of GBV compared to their white counterparts (CDC, 2024). Experiencing both sexism and racism, these women encounter unique vulnerabilities that make them more susceptible to violence. AI/AN women experience some of the highest rates of GBV in the nation. Despite representing only 1.1% of the total US population and 2.3% of the US female population (US Census Bureau, 2020), AI/AN women are disproportionately affected by violence, with a lifetime violence rate that exceeds 84.3% (Rosay, 2016).

Previous research has examined the occurrence of GBV and its long-term effects on women's health. However, there is a growing need to examine how experiences of GBV differ across cultures, particularly among Native populations. This literature review aims to explore existing research on gender-based violence against Native American women in the United States, ultimately informing policies, interventions, and practices to improve outcomes for survivors.

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Methods

Three databases, UGA multi-search, PsycINFO, and CINAHL, were selected for their complementary strengths. UGA multi-search is a centralized database portal that aggregates scholarly articles from different disciplines. PsycINFO is a specialized database that sources scholarly literature in psychology and other behavioral science fields. CINAHL, the Cumulative Index to Nursing and Allied Health Literature, was included for its focus on health and culturally sensitive research. UGA multi-search was chosen for its broad scope of cross-disciplinary research, particularly in historical and legal contexts, and PsycINFO for its focused psychological and behavioral research on gender-based violence. Additionally, all three databases were chosen for their inclusion of both quantitative and qualitative studies related to GBV, further strengthening their relevance to this review.

The selection process for these databases involved multiple article screenings to ensure the studies were reliable in methodology and aligned with the research focus. The initial screening involved reviewing article titles to exclude studies that were irrelevant. Next, abstracts were reviewed to ensure studies focused on GBV and its contributing factors. Lastly, a full-text review confirmed that the research involved Native American women and used an acceptable methodology.

Inclusion and Exclusion Criteria

To preserve the integrity of the literature reviewed, specific inclusion and exclusion criteria were applied across both database searches. Inclusion criteria included articles published between 2014 and 2025, in English, that were peer-reviewed, presented original research, and focused on GBV within Native American populations in the United States. To maximize searches, synonyms and terms such as “American Indian,” “Alaskan Native,” “Indigenous,” and

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“Native people” were included. Eligible studies had to examine at least one contributing factor to GBV. Articles were excluded if they were literature reviews, meta-analyses, editorials, or if they focused on populations outside the United States. Additionally, Boolean operators were used to combine population, subtype of GBV, and factors.

Database Searches

For UGA multi-search, a search for (Native American) AND (gender-based violence or violence against women) AND (factors) yielded 529 results. After applying the pre-established inclusion criteria, 203 articles remained. After screening abstracts and titles, ten articles met all criteria and were selected for inclusion in the final review.

For PsycINFO, a search for (Native American or American Indian or Indigenous or Native Tribes or Native People) AND (gender-based violence or violence against women or intimate partner violence or domestic violence or sexual violence) AND (factors) yielded 357 results. After applying the inclusion criteria, 168 articles remained. Following title and abstract screening, six articles were selected for inclusion in the final review.

For CINAHL, a search for (Native American or American Indian or Indigenous or Native Tribes or Native People) AND (gender-based violence or violence against women or intimate partner violence or domestic violence or sexual violence) AND (factors) yielded 389 results. After applying the inclusion criteria, 245 articles remained. Following screening and article review, four articles were selected for inclusion in the final review.

Table I. Database Searches and Article Selection

Search Iteration	Database Used	Search Terms	Yielded Results	Articles Selected
Iteration 1	UGA multi-search	(Native American) AND (gender-based violence or violence against women) AND (factors)	203	10

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Iteration 2	PsycINFO	(Native American or American Indian or Indigenous or Native Tribes or Native People) AND (gender-based violence or violence against women or intimate partner violence or domestic violence or sexual violence) AND (factors)	357	6
Iteration 3	CIANHL	(Native American or American Indian or Indigenous or Native Tribes or Native People) AND (gender-based violence or violence against women or intimate partner violence or domestic violence or sexual violence) AND (factors)	245	4

Results

American Indian and Alaska Native (AI/AN) women in the United States experience disproportionately high rates of gender-based violence. Across the studies reviewed, interrelated factors emerged that help explain this heightened vulnerability. These contributing factors highlight four themes: intergenerational trauma, socioeconomic barriers, legal barriers, and familial barriers.

Intergenerational Trauma

The enduring impact of colonization is a significant determinant of intimate partner violence (IPV) among American Indian and Alaska Native (AI/AN) women. Colonial acts such as forced removal from land, family displacement, and erasure of cultural identity have perpetuated intergenerational cycles of violence (Doria, 2025; Jock et al., 2022; McKinley & Lilly, 2022; Holder, 2024). These disruptions fragmented tribal family networks that historically served as protective measures against gender-based violence (Burnette & Renner, 2017). As a result, many families have grown increasingly vulnerable to repeating abusive patterns that have become normalized in AI/AN communities (Matamonasa-Bennett, 2015).

Many AI/AN women described IPV as a learned behavior stemming from patriarchal colonialism (McKinley & Lilly, 2022). Patriarchal norms have diminished traditional matriarchal structures and reinforced perceptions of women as subordinate (Burnette & Renner, 2017).

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Exposure to violence and substance use in childhood has further normalized IPV, reducing harmful perceptions (Burnette, 2016; Edwards et al., 2022). The effects of systemic racism and colonial trauma intensify psychological harm, with substance use acting as both a result of trauma and a mechanism that increases IPV risk (Giacci et al., 2022).

Historical trauma manifests through increased exposure to GBV among AI/AN women. High adverse childhood experience (ACE) scores, reflecting early exposure to violence and neglect during childhood, are strongly correlated with an increased likelihood of IPV victimization (McKinley, 2022; Williams et al., 2023; McKinley & Knipp, 2022; Kong et al., 2018). More than half of Native women reported high ACE scores, and those who experienced childhood abuse were up to four times more likely to experience IPV before or during pregnancy (Williams et al., 2023). Likewise, women with mean ACE scores of 2.6 or higher face a significantly higher risk of IPV victimization (McKinley, 2022). Exposure to intergenerational trauma disrupts well-being, in turn increasing susceptibility to GBV within AI/AN communities.

Socioeconomic Barriers

Financial dependency and housing insecurity are substantial barriers for AI/AN women attempting to leave abusive intimate relationships. Financial dependence, unemployment, and fear of homelessness can inhibit help-seeking behaviors (Luebke et al., 2023; McKinley & Liddell, 2022). Over half of Indigenous women report financial limitations, such as lack of insurance, as a key obstacle to accessing safe shelters, and nearly half report a fear of being homeless if they leave their partners (Luebke et al., 2023). Poverty and structural economic inequities combine with IPV to create cyclical vulnerability among Native American populations. For example, nearly 50% of Indigenous caregivers report an annual household income below \$10,000, with approximately 70% experiencing intimate partner violence within

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the past six months (Edwards et al., 2024). Among these survivors, psychological abuse is the most prevalent form of IPV, often accompanied by physical abuse (Edwards et al., 2024).

Intergenerational financial hardship leaves survivors without social support networks or resources to escape abuse (Burrage et al., 2021; McKinley & Liddell, 2022). Many AI/AN women describe structural barriers that link Native populations to poverty, resulting in a lack of services for individuals experiencing IPV, especially in rural areas and reservations (Giacci et al., 2022). Additionally, women often remain in abusive relationships due to concern for their children and the expectation to maintain traditional family structures (McKinley & Liddell, 2022). Survivors navigating these scarce resources often face a constant threat of violence, which increases their exposure to IPV and worsens overall health disparities among AI/AN communities (Fedina et al., 2023). Together, these conditions create a cyclical pattern of vulnerability, and these factors maintain risk and hinder AI/AN women's access to safety.

Legal Barriers

Legal structures often discourage Native American women from seeking justice or protection from their abusers. Confusion regarding jurisdictional clarity between tribal, state, and federal authorities creates enforcement gaps, weakening the effectiveness of protective orders (Jock et al., 2022). This ambiguity results in delayed responses and a lack of action from law enforcement, leading to further dismissal and neglect of survivors (Jock et al., 2022). Many AI/AN women have expressed that protective orders issued by tribal courts are often deemed illegitimate off-reservation, which constrains their ability to seek safety (Jock et al., 2022; McKinley & Lilly, 2022).

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Distrust of legal institutions due to racism and dismissal further decreases the reporting of violence. Many AI/AN individuals have experienced their concerns being minimized or dismissed based on racism, which has reinforced negative perceptions of the legal system (Luebke et al., 2023). Survivors also reported feeling silenced and intimidated by legal procedures, especially when their abusers hold positions of authority (Giacci et al., 2022). These power dynamics contribute to feelings of apathy toward pursuing justice against their abusers. Colonization has further diminished tribal self-governance, which emphasized accountability and protection for women (Jock et al., 2022; Holder, 2024). Many survivors of IPV experience a lack of follow-up or are penalized for reporting, leading to a perception of “no justice at all” (McKinley & Knipp, 2022). These obstacles limit AI/AN women’s trust in the justice system and restricts their ability to hold their abusers accountable.

Familial Barriers

Familial situations can serve as both a risk and a protective factor for individuals experiencing GBV. Childhood exposure to violence often predisposes individuals to IPV and contributes to the normalization of abusive behaviors within families and communities. Family responses to IPV vary; some survivors described receiving support, while others were pressured to stay in an abusive relationship to preserve familial structures (Jock et al., 2022; McKinley & Liddell, 2022; Burrage et al., 2021). In Native communities where violence has become normalized, survivors experienced shame or were blamed for the actions of the perpetrator, reinforcing the discouragement of help-seeking (Burnette, 2016).

Parental modeling and early exposure to domestic violence shape future relationship dynamics, contributing to the cycle. In households where male relatives were abusive, children learned to conflate dominance and control with love and intimacy (Burnette & Renner, 2017;

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Williams et al., 2023). AI/AN youth and elders agreed that the absence of positive parental role models, compounded by substance use, perpetuated cycles of IPV across generations (Lim et al., 2025; Burnette, 2016). In contrast, cultural connection and family support were identified as protective factors against IPV when present (Edwards et al., 2022). Parental monitoring, engagement in Native cultural traditions, and healthy communication are linked to lower rates of IPV and sexual violence (Edwards et al., 2022). Over time, these protective measures have been weakened by historical oppression, where families have become a risk for AI/AN women rather than a refuge.

Discussion

The gender-based violence experienced by American Indian and Alaska Native (AI/AN) women is not isolated but is part of a broader pattern of historical oppression and inequality. Previous colonial rule has fractured kinships, erased cultural practices, and established systems of systemic racism, all of which have contributed to ongoing cycles of violence. Socioeconomic barriers such as poverty, housing insecurity, and caregiving responsibilities have limited survivors of GBV from leaving abusive households. Furthermore, blurred jurisdictional lines and systemic discrimination discourage victims from reporting abuse, especially when the perpetrator holds a position of authority. Familial structures can be a barrier to help-seeking, especially when victims face stigma or are encouraged to stay in a relationship. Collectively, these themes reveal that GBV cannot be understood solely as an issue within interpersonal relationships but must also be viewed through the lens of the circumstances faced by AI/AN communities.

Future Implications

The need for culturally competent interventions and frameworks is essential in addressing barriers that prevent AI/AN women from seeking help. Culturally inclusive care involves trusted

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individuals who respect Indigenous values and traditions. Many Native women mistrust legal, medical, and social services due to ongoing cycles of discrimination and cultural erasure. To address this gap, interventions must not only respond to individual needs but also strive to restore community as a protective factor.

Addressing intergenerational trauma requires a culturally grounded approach that acknowledges the historical trauma experienced by AI/AN populations. The Gathering of Native Americans (GONA) program was created by Native people for Native people to address intergenerational trauma, such as substance use, suicide, and other collective challenges (SAMHSA). GONA incorporates traditional healing methods, such as dialogue circles and town hall meetings. These culturally safe spaces allow for collective healing, which is essential in overcoming the cycles of violence that have been normalized. This approach can directly influence GBV in communities and individuals by providing a space for people to confront their past and reimagine their future. De-stigmatizing the discussion of seeking help for abuse can encourage AI/AN women to strengthen previously broken support systems.

Similarly, the *From myPlan to ourCircle* model emphasizes transitioning the focus of IPV from an individual to healing with the entire community (Bagwell-Gray et al., 2020). Unlike in-person dialogues like GONA, this intervention utilizes the myPlan web app as a platform to encourage community-led support systems. The app allows AI/AN women to share lived experiences in a private and anonymous setting, which can help reduce the stigma surrounding help-seeking for IPV (Bagwell-Gray et al., 2020). By providing an online platform where open discussions can occur, the app offers a safe space for survivors to engage and empower one another. Such virtual interventions are particularly important in rural communities, where access to in-person services is often limited.

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In addressing familial barriers, similar culturally sound programs can also be used to engage individuals in healing practices. The National Sexual Violence Resource Center (NSVRC) focuses primarily on preventing sexual violence through advocacy and education for all federally recognized tribes in the United States (NSVRC). While the NSVRC's resources are valuable, its scope is narrow, as it only focuses on sexual violence. Future practices should expand to include all forms of gender-based violence, such as IPV, physical abuse, stalking, and psychological abuse. In particular, programs should aim to engage entire families in a more integrated way, providing a supportive and less stigmatized environment for AI/AN survivors of GBV.

Socioeconomic mobility is a key protective factor in reducing IPV vulnerability among AI/AN women. Improving access to both education and financial opportunities can lead to independence from perpetrators. Educational attainment among AI/AN women is significantly lower compared to the general population (León-Pérez, Gabriela, and Elyas Bakhtiari, 2025). Scholarships such as the American Indian College Fund and the American Indian Services Scholarship play a crucial role in allowing AI/AN women to access higher education. Improving access to education will increase mobility by providing more opportunities for employment and financial independence. Expanding programs like these will help women gain the confidence and skills needed to leave their abusive partners. Furthermore, higher education can also lead to increased knowledge of legal and support services, providing women with the tools necessary to escape abusive relationships.

The expansion of job attainment programs for AI/AN women is equally important for socioeconomic mobility. Survivors of gender-based violence who have access to job fairs, equal employment opportunities, and culturally acceptable employment are more likely to achieve

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long-term financial independence from their abusers. *Women Empowering Women for Indigenous Nations* is an example of an initiative that provides AI/AN women with networking opportunities and the knowledge needed to climb the professional ladder (WEWIN, 2024). By offering workshops, training, and professional networks, WEWIN equips AI/AN women with the skills needed to advance their careers. Mentorship within the program also contributes to stronger cultural ties and, in turn, instills a sense of belonging among participants (WEWIN, 2024). This sense of belonging extends beyond the professional realm and positively influences personal lives.

Mitigating jurisdictional and legal obstacles requires system-level reform that coordinates between all levels of government and expands tribal authority. The 2013 and 2022 reauthorizations of the Violence Against Women Act (VAWA) represent a significant step that allowed tribal courts to prosecute non-Native offenders of physical and sexual violence (Department of Justice, 2023). Before this legal reform, tribal courts were powerless to prosecute non-Native offenders, leaving many victims of GBV without justice. Although this change has advanced justice for AI/AN women who experience gender-based violence, future legislative efforts should focus on increasing funding for tribal justice systems. Increased funding can support tribal capacity to hire law enforcement and prosecutors to implement tribal policies to respond to GBV.

Legal reform must also include rebuilding trust between external law enforcement and AI/AN communities. Organizations such as the International Association of Chiefs of Police (IACP) provide cultural competency training for law enforcement working in tribal regions and reservations under the Indian Country Law Enforcement Section. However, there is still a need for the widespread implementation of similar programs to ensure officers—particularly those in

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reservation areas—can interact respectfully with AI/AN communities. This will help rebuild trust between AI/AN women and law enforcement, allowing them to feel comfortable enough to report their abusers.

Limitations

This literature review, although comprehensive, includes evidence from only 20 articles. While these studies were selected to provide valuable insights, the restriction on the number of sources and the time frame (2014–2025) may have resulted in the exclusion of other relevant literature. Additionally, there is a broader scarcity of peer-reviewed research specifically focusing on risk factors associated with gender-based violence among Native American women. Most existing studies focus on the impact of GBV, meaning there is limited depth of understanding regarding its underlying causes. Furthermore, the generalizability of the findings is limited. Many studies examined small, localized populations that cannot represent the full diversity of Native Americans in the United States. Variability in culture and legal systems across Native American tribes further limits the ability to draw broad conclusions.

Another limitation stems from the studies' reliance on self-reported, qualitative data. Due to the sensitive nature of GBV and the need for participants to recall past experiences, these studies are especially vulnerable to recall bias. Additionally, multiple studies draw from the same sample populations, which further limits the generalizability of the findings and results in only a few communities being represented in the literature. The limited inclusion of different tribes contributes to an incomplete understanding of GBV in AI/AN populations. Finally, all included studies were cross-sectional designs, which do not allow for causal relationships to be established, only associations between intergenerational trauma, socioeconomic barriers, legal

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barriers, familial barriers, and GBV. Longitudinal studies would provide a more complete understanding of how these risk factors develop and contribute to GBV.

Conclusion

Findings suggest that gender-based violence against Native American women stems from interconnected factors, including intergenerational trauma, structural factors, and familial dynamics. The lasting effects of historical oppression and colonization have diminished protective cultural traditions. Additionally, family and community can serve as protective factors but also as risks by reinforcing stigma and discouraging help-seeking. To address these disparities, future policies should focus on expanding tribal authority, culturally competent services, and education for AI/AN women. Future research should focus on these combined factors and address interventions that create sustainable change in decreasing GBV among Native American populations.

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