

## [Tulane researcher honored for work on indigenous women](#)

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Catherine Burnette of the Tulane School of Social Work studies Indigenous women who live in the southeastern United States and their experiences of intimate partner violence (IPV). (Photo by Sally Asher)

[Catherine Burnette](#), an assistant professor at the Tulane School of Social Work, has dedicated her career to studying the health disparities of indigenous peoples, examining everything from domestic violence to substance abuse.

Since coming to Tulane in 2013, she has published 35 peer-reviewed journal articles and presented at over 40 national and international conferences.

This month, her article ["Indigenous Women and Professionals' Proposed Solutions to Prevent Intimate Partner Violence in Tribal Communities,"](#) was selected as the 2018 Best Paper by the Journal of Ethnic & Cultural Diversity in Social Work. Burnette's co-author is Sara Sanders of the University of Iowa School of Social Work.

One judge called the paper "rare research on an under-researched population and problem." Another said "great efforts (were) made for culturally appropriate, participatory research with indigenous women, which was respectful and very time and labor intensive."

The article focuses on indigenous women who live in the southeastern United States and their experiences of intimate partner violence (IPV) along with recommended solutions. In the U.S., the lifetime prevalence of rape among indigenous women is 27 percent, compared to 20.5 percent for whites, 21.2 percent for blacks and 13.6 percent for Hispanics, according to the United Nations.

Yet despite the high numbers, there is little if any research on interventions available to Indigenous women. With that in mind, Burnette and Sanders interviewed 29 women along with professionals who work with them. The interviews yielded a wealth of promising, innovative and culture specific prevention and treatment approaches.

"Whereas much existing research focuses primarily on psychological interventions, solutions suggested by women and professionals tended to focus on holistic and preventative strategies," Burnette said. They included talking circles, traditional healers and sweat lodges.

Their research also revealed the need for increasing community engagement and awareness, bolstering existing services, enhancing professional training and organizing more prosocial family activities.

"Holistic, family focused interventions and building upon strengths and resiliency of indigenous communities are promising avenues for future research endeavors," the authors wrote.

"There is a glaring lack of culturally specific research on interventions related to violence against Indigenous women."

Catherine Burnette