The Native Child Advocacy Resource Center (NCARC) is funded by the U.S. Department of Justice’s Office of Juvenile Justice and Delinquency Prevention to provide training and technical assistance (TTA) to Tribes that are engaged in developing multidisciplinary teams (MDTs) and child advocacy centers (CACs), as well as to existing CACs that serve Indigenous populations in the lower 48 states and Alaska. As part of this mission, NCARC conducts an annual needs assessment to determine the TTA needs of Tribes, Tribal MDTs and CACs, and CACs that collaborate with Tribes.

During the first year of the project, NCARC staff and our evaluation consultant, Nancy Lucero, developed and conducted a preliminary needs assessment that could provide timely information for the immediate development of TTA programming and resources. Subsequent needs assessments will be designed to supplement this preliminary information and to explore the needs of Tribal stakeholders and collaborating agencies in greater depth. The current summary is drawn from a full needs assessment report developed for the internal use of NCARC, OJJDP, and collaborating partners.

The purpose of this preliminary needs assessment was to provide a preliminary look at the landscape of multidisciplinary teams (MDTs) and CACs serving Tribal communities, guided by the basic question, “Why aren’t there more Tribal MDTs and CACs?” Specific areas of inquiry included identifying how many Tribes currently have Tribal MDTs and CACs; examining how Tribal MDTs are structured and operate; and shedding light on the strengths, challenges, and needs of Tribal MDTs and CACs.

Data sources included in-person surveys conducted with Tribal stakeholders and collaborating partners at relevant national gatherings, online surveys of Tribal MDT members, interviews with NCARC staff and consultants, and a review of existing resources and literature concerning Tribal MDTs and CACs. These data sources, while informative, were small and do not support broad generalization. The findings below should be considered preliminary.
Among the small group of survey respondents indicating that their Tribe had an MDT, more than three-quarters indicated that their Tribal MDTs had been in operation between 10 and 20 years, and one had been operating for 40 years.

Tribal Child Welfare/Indian Child Welfare Act departments and Child Advocacy Centers were most frequently identified as the Tribal program leading the MDT.

In describing their operations, Tribal MDT members most often identified their key activities as involving case review, the provision of immediate crisis support, and the provision of ongoing advocacy for children and families.

Tribal MDTs reported evaluating their functioning and outcomes as an activity they do not commonly engage in.

When asked about the strengths of their Tribal MDTs, 100% of survey respondents identified improved decision-making in child abuse cases; and 90% reported that their team was engaged and effective, used resources well, and enjoyed the support of leadership from all partner agencies.

Other strengths respondents identified were that their Tribal MDTs were able to create positive relationships within the community; develop a holistic and future-focused approach to serving children and families; and operate with an approach characterized by flexibility, resiliency, and innovation.

Nearly 65% of survey respondents who identified as collaborative partners with Native nations reported having Tribal representation on their non-Tribal MDTs.

More than 70% of respondents identified as collaborative partners reported identifying Native children at intake, and 75% reported consulting with Native service providers in supporting children and families who identify as Native.

Survey respondents identified the following critical challenges they face in enhancing Tribal MDTs and developing CACs: workforce turnover and retention, Tribal leadership support, a lack of collaboration among MDT members, a lack of Tribal and community knowledge about the MDT/CAC models, and a lack of opportunities for Tribal MDT members to learn from their peers in other communities.

Tribal MDT representatives identified their top TTA needs as (1) MDT development and enhancement and (2) training.

Non-Tribal collaborative partners identified their top TTA needs as (1) support on cultural topics and (2) training.
NCARC will continue to advance understanding of Tribal MDTs and CACs by conducting an annual Needs Assessment in each of the remaining years of the project. One Year 1 assessment participant described a Tribal MDT as, “a very complex process and relational system that’s constantly changing and has to be managed all the time,” emphasizing that there is “a lot going on in an MDT with every case.” In Years 2 and 3, the Needs Assessment will more deeply examine how adding cultural worldviews, values, and practices adds complexity to the relational and organizational processes of the MDT/CAC model. A major activity of the Year 2 Needs Assessment will be in-depth interviews with staff and stakeholders representing the current Tribal CACs and looking at issues related to collaboration and partnerships between Tribal MDTs/CACs and their non-Tribal counterparts. NCARC will use findings from annual needs assessments to guide our development of training and technical assistance resources and to inform the field about what is needed to advance the CAC movement in Tribal communities.

For more information about the preliminary needs assessment, detailed findings, or the complete needs assessment report, contact NCARC Project Director Deanna Chancellor (deanna.chancellor@mso.umt.edu).