

Integrating Culturally Responsive Approaches for Survivors of Domestic Violence and Intimate Partner Violence within Mental Health Services and Organizations

Definitions:

Intimate Partner Violence (IPV): Experience of stalking, physical, sexual, emotional, financial, cultural, and other forms of abuse by an intimate partner or ex-partner.

Domestic Violence (DV): Experience of stalking, physical, sexual, emotional, financial, cultural, and other forms of abuse by an intimate partner, ex-partner, household member, family member, or other close social support.

Identity, Belonging, and Positionality: Understanding the Connections

Culture: Social norms, values, customs, perspectives, and worldviews, that are often passed down intergenerationally and influenced by personal experiences, family, community, and sociohistorical context

Positionality: The social identities a person holds or is assigned by others (e.g., gender, race, ability, etc.) and how these identities can create experiences of privilege and/or marginalization within society.

Accessible, Culturally Responsive, and Trauma-Informed (ACRTI) Approach: An ACRTI approach for survivors of DV/IPV is essential for safe and effective services because of the ways that power imbalances create relational, organizational, and social conditions that perpetuate ongoing marginalization and harm for survivors. Striving for equity-based and culturally responsive services requires an understanding of one's own culture and positionality in order to identify and address personal and organizational biases and oppressive practices. This approach recognizes how survivors are often not only impacted by the trauma experienced from the interpersonal abuse but also by traumatic legacies of historical trauma and structural violence. Rejecting pathologizing narratives, an ACRTI approach provides a foundation for working in ways that are grounded in dignity, respect, and justice by honoring people's strengths and creativity, fostering resilience and healing, and supporting activism and social change.

Accessible, Culturally Responsive, and Trauma-Informed Approach

Do our behaviors line up with our intentions?

- There are power imbalances between survivors of DV/IPV and staff, with staff always holding the position of higher power. Holding power over (rather than power with) survivors increases the risk of re-traumatization and revictimization in services.
- Those with more power (staff, people with various forms of privilege) may feel that interactions are neutral, whereas those with less power (survivors, people who experience marginalization) may feel unsafe or harmed in these same interactions.

- It is essential to understand how norms are defined within interactions and organizations, as well as how privilege is impacting providers and organizations' ability to create a sense of safety and belonging with survivors.
- Culturally responsive staff practices and organizational policies support a foundation for spaces that are rooted in equity and survivor/community strengths.
- Fostering alignment and connection between staff, the work, and the organizational culture are essential for culturally responsive services.

Individual-Work-Culture Connection

Individual: One's interest, passion, and motivation in the work, which is likely informed by personal experiences, values, and worldview.

The Work Itself: One's professional role, functions, and duties, as well as the services provided.

Organizational Culture: The social, emotional, relational, programmatic, and physical setting where the work takes place, including interactions with colleagues and people accessing services and the available resources that support the work.

- Implementing culturally responsive and equity-based services occurs at interpersonal, programmatic, and institutional levels.
- When these three domains are well aligned, staff are more likely to feel supported, engaged, and like they are making a difference.
- When these aren't aligned, this can create larger openings for oppressive practices to take hold at the institutional and interpersonal levels.

Reflection Questions to Support Culturally Responsive Practice with Survivors of DV/IPV

Power Over vs. Power With

*Think of a time when you felt a provider or organization had power **OVER** you.*

- What cultural norms and expectations were centered in the situation?
- How did they intersect with my own positionality and cultural worldviews?
- How was the power imbalance maintained?
- How could power have been shared respectfully in this situation?

*Think of a time when you felt a provider or organization had power **WITH** you.*

- How were my cultural norms and worldview honored in the situation?
- How was power actively shared in a respectful partnership?
- How did we bridge any gaps in our perspectives and values?

Individual-Work-Culture Connection

1. How do alignment between individuals, the work, and organizational culture support culturally responsive services?
2. How do we know when there is tension or disconnection between these three domains? How might this misalignment show up in each domain?
 - Individual:
 - The Work Itself:
 - Organizational Culture:
3. How can we reestablish alignment and connection between these three domains to support culturally responsive services?