



Cultural Responsiveness

It is important to provide meaningful access to services for all survivors, including taking reasonable steps to ensure access for individuals with limited English proficiency (LEP). This is key to ensuring effective services for individuals with LEP, as well as complying with obligations under the Civil Rights Act of 1964 (LEP.gov, n.d.). A staff that reflects the community and supports access to services for survivors with diverse languages and cultures in the community is best positioned to provide meaningful access to advocacy services for individuals with LEP. This enables staff to more readily determine survivor safety, inform them of services available, and provide effective advocacy and support.

Victim-centered advocacy requires that advocates address the realities and needs of each survivor of sexual assault, domestic violence, dating violence, human trafficking, and stalking at the individual, systems, and community levels. Advocacy is required in many communities to ensure that all services are fully accessible to survivors with LEP. Additionally, the need to build capacity to more effectively serve diverse community members is ongoing.

Multilingual Communities

The growing diversity of the U.S. population makes it especially important to provide culturally competent services to racial and ethnic groups. According to the report, *Projections of the Size and Composition of the U.S. Population: 2014 to 2060* (United States Census Bureau, 2015b):

- Around the time the 2020 Census is conducted, more than half of the nation's children are expected to be part of a minority race or ethnic group. This proportion is expected to continue to grow so that by 2060, just 36% of all children (people under age 18) will be single-race non-Hispanic white, compared with 52% today.
- The U.S. population, as a whole, is expected to follow a similar trend, where the majority of people will identify with a minority group by 2044. The minority population is projected to rise to 56% of the total in 2060, compared with 38% in 2014.

In the case of language, the Census Bureau reports at least 350 languages are spoken in homes in the U.S. (United States Census Bureau, 2015a). The top five languages spoken in the U.S. (not including English) are Spanish, Chinese (including Cantonese, Mandarin, and other Chinese languages), French/French Creole, Tagalog, and Vietnamese (Burton, 2015).

Most of the individuals who speak another language also speak English with native fluency or very well. However, about 41% (25.1 million people) are considered LEP. Though most LEP individuals are immigrants, nearly 19% (4.7 million) were born in the United States, most to immigrant parents. Overall, the LEP population represents eight percent of the total U.S. population ages 5 and older (Zong, Zong, & Batalova, 2017).

The Research on Language and Cultural Access for Survivors with Limited English Proficiency

Research in the sexual assault and domestic violence fields shows that survivors appreciate and feel more supported when language access services are provided, and survivors with LEP are more likely to seek out services if services are provided in their primary language.

In 2014, the Urban Institute conducted a national study on the implementation of the requirements under the Violence Against Women Act (VAWA) that states or another entity must bear the full cost for sexual assault forensic exams, regardless of whether a victim reports the assault to the police (Zweig, Newmark, & Denver, 2014). While the focus of the study was on how states were implementing payment practices for exams, they discovered that gaining access to the exam was an issue for survivors who do not speak English or are from immigrant communities.

According to their findings:

- Victims who don't speak English have a harder time accessing the forensic exam than English-speaking victims. About three of every four state sexual assault coalitions and over half of local sexual assault agencies reported that non-English-speaking victims had a harder time obtaining exams. Some attributed this to challenges associated with understanding the exam process, the criminal justice process, and their rights as victims. Others attributed it to a lack of access to interpreters or bilingual Sexual Assault Nurse Examiners, medical personnel, and social workers. Sometimes providers rely on family members or law enforcement to provide interpretation and translation assistance for victims, which raises serious concerns surrounding confidentiality and privacy.
- Non-English-speaking and immigrant communities can face a lack of sensitive and culturally relevant services. These groups might experience discrimination, hostility, and a lack of patience from some direct services providers. Sometimes, immigrant victims—particularly those who are undocumented or have dependent immigration status—fear the criminal justice system, which in turn can make them afraid to seek help.
- Immigrant communities may lack awareness of exams and other services. There seems to be minimal outreach to immigrant communities to educate them about the availability of services from local sexual assault service providers and how to contact them, as well as a lack of accessible information for individuals with LEP.
- Cultural barriers may get in the way. The study also demonstrated that in some communities, shame, stigma, and the lack of acknowledgement of rape and sexual assault create significant challenges for victims to come forward and report. In the event that a victim might make a report or seek services, they may not be supported by their family or community and may encounter significant isolation.

Casa de Esperanza: National Latin@ Network and the National Domestic Violence Hotline administered a national survey over a period of six weeks in 2012 to 1,305 callers to the Hotline who identified as Latina survivors of domestic violence. Approximately 40% of the survey participants (508) completed the survey in Spanish. When asking all self-identified women of Latina/Hispanic origin the following question, "Have you had problems using any services related to domestic violence (such as police, shelters or courts) because the services were not provided in your language?," approximately 16% answered the question "yes" (National Latin@ Network for Healthy Families and Communities & National Domestic Violence Hotline, 2013).



Additionally, when narrowing the results and looking at how many of the participants who completed the survey in Spanish indicated that they encountered language barriers when trying to seek services, 31% of those participants who answered the question responded "yes."

Taking into consideration the qualitative information provided by the callers who responded that they had had problems accessing services due to language barriers, the survey discovered the following themes (presented in order, with the first three most commonly noted):

- There were no Spanish-language services at the time when the police were called.
- There were no Spanish-speaking advocates at the local shelter or there were a limited number of interpreters available at local organizations.
- There were no Spanish-speaking services for helping with legal issues, including obtaining a protection order. Of importance, several respondents noted that although they speak English, they prefer to speak Spanish when discussing legal terms; however, they were not offered the services in their language.
- The perpetrator was able to "manipulate" police because the partner spoke English and the survivor did not.
- There were limited Spanish-language resources in print and on the internet.

The results of these research initiatives help demonstrate why it is critical to continue to train first responders, such as advocates, medical personnel, and law enforcement, to appropriately respond to historically marginalized groups, ensure meaningful language access, and increase awareness about available services through proactive, culturally sensitive outreach to diverse communities.

What is the Relationship between Language and Culture?

The relationship between language and culture is intertwined, involving a dynamic mix of individual, social, and contextual factors. Language carries additional meanings and references, representing also the culture of a survivor with LEP. Increasing language access, therefore, is not only about learning the alphabet, the

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meaning of words, and the grammar rules, but also learning about the cultural identity, customs, and general characteristics of a cultural group.

Many scholars from multiple disciplines have shown that language is inextricably linked to our notions of who we are and to how we express our identities in our everyday lives. Recognizing and respecting individual cultural differences through language and communication are important to providing trauma-informed services and working effectively with survivors who have limited English proficiency. Furthermore, an individual who can speak English for general purposes may nonetheless need to communicate in their first language when dealing with issues of trauma. Language is an important way of communicating thoughts and feelings. It can also constitute a means of asserting one's identity, rights, and safety. To ensure meaningful access for survivors of sexual and domestic violence with LEP, it is important to recognize how access based on language and cultural identity is essential for a survivor's safety and well-being (Ek, 2014).

Too many victims of crime are routinely denied access to support and services that they are legally entitled to receive because service providers are not fully aware of these requirements or do not understand how to effectively provide language access. While there are federal laws mandating that social services be accessible, significant gaps in practice impose language barriers on millions of survivors seeking victim services who have LEP.


This requires that organizations improve language access, but also that they build capacity in the areas of examining culture and its impact on advocacy, as well as the intersections of language as a form of cultural identity.

Language Access Enhances Outcomes

(Casa de Esperanza: National Latin@ Network, n.d.)

Language access improves services and enhances outcomes. Recent studies in health care settings (Jacobs et al., 2011; Jacobs et al., 2006; & Shippee, McAlpine, & Beebe, 2012) have shown that language access can improve a patient's overall health care encounter, the doctor-patient relationship, and the patient's understanding of diagnoses and treatment options. Quality language access also gives patients more confidence in their provider and satisfaction with their overall health care experience. Studies examining the impact of language access on a patient's experience with mental health services have found similar results.

A staff that reflects the languages and cultures in the community is best positioned to provide meaningful access to advocacy services for individuals with LEP. The advantage of having bilingual advocates is that they



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can speak directly to survivors and thus can more readily foster open communication and build a relationship of trust with a survivor. This enables them to more readily determine survivor safety, inform them of services available, and provide effective advocacy and support. Additionally, all service providers should have a language access plan in place that is regularly updated in order to be proactive and ensure that all staff, regardless of bilingual skills, are able assist a survivor with LEP to have meaningful access to services. The language access plan should also include efforts to increase the cultural responsiveness of staff members and of the organization.

Language access clearly enhances safety for survivors with LEP. Without it, the survivor cannot interact effectively with an advocate and the advocate cannot conduct a thorough risk assessment, assist the survivor in understanding their rights and options, help develop a comprehensive safety plan, or assist in comprehensive advocacy efforts.

Thank You

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