SURVIVORS OF DOMESTIC VIOLENCE FROM CULTURALLY AND LINGUISTICALLY DIVERSE COMMUNITIES

A NEEDS ASSESSMENT REPORT
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HISTORY OF FCADV

In 1977, fourteen shelters formed a network of battered women’s advocates known as the Refuge Information Network. Incorporated several years later as the Florida Coalition Against Domestic Violence (FCADV), the organization was founded on the principles of cooperation and unity among shelters. As FCADV successfully advocated for increased resources, domestic violence shelters evolved into centers offering a wide range of services for domestic violence survivors and their children. Today, FCADV serves as the professional association for the state’s 42 certified domestic violence centers, and is the primary representative of survivors of domestic violence and their children in the public policy arena. Members share the goal of ending domestic violence through community education, public policy development, and services for survivors.

In the late 1990’s, the FCADV membership launched an initiative to create standards that outline appropriate service provision to survivors of domestic violence and their children. This effort has ensured direct services are consistent and implemented utilizing an empowerment-based model statewide. Standards are reviewed annually by the membership and updated and/or revised as needed.

FCADV believes that providing empowerment-based services is supportive of a survivor’s right and need for self-determination. Advocacy must be a balanced partnership, rather than one guided by directives and mandated services. This ideology is the foundation of the comprehensive work of Florida’s certified domestic violence centers and is formally implemented through FCADV’s annual contract monitoring and quality assurance program.

In 2003, the Florida Legislature passed legislation that privatized all funds earmarked for domestic violence services for administration by FCADV. This effort allowed FCADV the opportunity to create a comprehensive quality assurance program based on standards approved by the certified centers, state and federal mandates, administrative rule and best practices in managing domestic violence centers. The onsite monitoring of both administrative and programmatic functions of Florida’s 42 centers provides the needed oversight of services and informs the annual certification process for each program.

FCADV STANDARDS AND OTHER AUTHORITIES

FCADV’s Administrative and Programmatic Standards provide a blueprint for certified centers in planning, developing, implementing and improving empowerment-based domestic violence services for survivors and their children. Each center is responsible for developing policies and procedures based on their regional, demographic, architectural, cultural and programmatic diversity. It is intended that the centers’ policies be localized and expanded in an effort to address the unique characteristics of each respective domestic violence center’s service area. Standards ensure that certified domestic violence center core services follow best practices including developing and implementing programs, practices and procedures that are culturally specific and relevant. For example, the following policy is included in the most updated version (2011) of FCADV’s Administrative and Programmatic Standards:

• Policy Title: Eligibility for Center Services: To assure equal provision of services to survivors of domestic violence and their dependents, and any other family member or any other member of the residence who might be in danger or threatened with danger.

• Statement of Policy: Centers shall make every effort to provide services to eligible individuals as defined within this section, regardless of race, religion, color, national origin, gender, age, mental or physical
disability, sexual orientation, citizenship, immigration status, marital status or language spoken.

• Traditionally Underserved Populations: Shelters shall make every effort to provide for the needs of elder battered women, individuals in same-sex relationships, persons with disabilities, and those from diverse cultural backgrounds, including non-English speaking survivors.

In support of these standards, FCADV provides intensive technical assistance and training to Florida’s certified centers on increasing and enhancing access to services for traditionally underserved populations. In order to support local partnerships, FCADV provides assistance to each certified domestic violence center on building organizational capacity in grassroots community organizing and in building a coordinated community response to domestic violence with non-traditional partners. Non-traditional partners may include, but are not limited to, culturally and linguistically specific non-profit organizations, faith-based organizations, and local businesses.

FCADV administers State and Federal funding earmarked for certified domestic violence centers to implement comprehensive core services to survivors and their children. Core services are mandated by statute for certification and include providing emergency shelter services for more than 24 hours, counseling, assessment of children, 24-hour hotline, case management, information and referral, community education and professional training. Approximately 12 years ago, the Florida Department of Children and Families’ (DCF) leadership and executive branch acknowledged their limited expertise and capacity to ensure quality of service provision to survivors and administrative accountability and management of domestic violence centers. Therefore, they approached FCADV to create both programmatic and administrative standards of excellence and requested that the Legislature enact substantive law transferring this function to FCADV. The purpose for this process was to: 1) Provide a high level and consistent quality of services for survivors of domestic violence and their children throughout Florida; 2) Monitor the implementation of said services to ensure continuous quality improvement; 3) Reduce administrative costs and increase funding available for direct services; and, 4) Strengthen the administrative management of Florida’s 42 certified domestic violence centers.

FCADV partners with DCF’s Domestic Violence Program Office to develop statewide policy and implement core services. According to Florida’s Administrative Rule 65H-1 Minimum Standards for Certification, which implements Florida Statute 39.903 regarding domestic violence center certification, each of Florida’s 42 certified domestic violence centers shall provide the minimum core services. The uniformity of core services throughout the state is critical for survivors of domestic violence and their children. For example, if a survivor and her children are receiving emergency shelter services from their local domestic violence center and are located by the abuser, the survivor may decide that relocating to another Florida domestic violence center will increase their safety. In this scenario, it is imperative that she/he has the option to receive, at minimum, the same types and quality of services received at the center in her/his hometown. FCADV’s quality management of services makes this possible. This does not limit the opportunity for centers to tailor services to the varied cultural and linguistic needs of survivors in the local service area. However, it does provide a baseline of expected core services and standards.

Also important to note in regard to core services is that according to Florida Statute, all direct service advocates, staff, and volunteers, must complete 30 hours of core competency training to receive Victim-Advocate Privilege. Section 90.5036 of this statute establishes a domestic violence advocate-victim privilege which prohibits disclosure of information obtained in the course of advising, counseling, or assisting survivors. Twenty-four hours of the core competency training that each advocate receives is conducted by FCADV staff and/or FCADV certified trainers. The training curriculum includes topic areas such as: The Herstory of the Battered Women’s Movement, Anti-Oppression, Societal and Root Causes of Violence Against
Women, Empowerment-based Advocacy, Cultural Awareness, Primary Prevention, and Providing Services to Survivors Living with Mental Health Complexities. One of the core competency training objectives is to equip advocates to provide culturally relevant services with an emphasis on assessing individual survivors’ needs. This may include, but is not limited to: differing abilities, sexual orientation, documentation status, and cultural identities. System change work is interwoven throughout the three days of intensive training and advocates learn the foundational tenants of empowerment-based advocacy including strength-based service provision, social justice, and systems advocacy.

Florida’s population has grown steadily for decades. As a result, Florida’s certified domestic violence centers must adapt and grow to adequately reflect the population served in the center’s service area. To ensure center programs reflect the state’s growth and diversity, FCADV conducts Survivor Listening Groups on an annual basis. FCADV is in its fifth year of conducting the Annual Survivor Listening Project to learn firsthand about current survivor experiences throughout Florida. This project was created and implemented to ensure the voices of survivors continue to guide programmatic standards and inform the Coalition’s intervention and prevention efforts. FCADV conducts listening groups with domestic violence survivors statewide to obtain feedback regarding their most pressing needs, concerns regarding systemic responses, and to hear about services and outreach strategies that are helpful and should be replicated throughout additional Florida communities. Survivor feedback serves as the foundation of FCADV’s planning, programming, and policy priorities for the upcoming year.

In 2013, after discussions with the Family Violence Prevention Services Program from the Department of Health and Human Services, FCADV contracted with a national leader, Olga Trujillo, to conduct a comprehensive needs assessment of Florida’s 42 certified domestic violence centers to ascertain whether Florida’s domestic violence centers are providing culturally and linguistically specific services that appropriately reflect each local community’s needs and demographics. In addition, FCADV engaged Ms. Trujillo to provide guidance on increasing staff capacity to provide trauma-informed advocacy.

This report is a culmination of the assessment and includes findings and recommendations related to the provision of culturally and linguistically specific and trauma-informed services. The methodology and the instruments utilized to conduct the needs assessment are described in detail within this report.

**LANGUAGE ACCESS LEGAL REQUIREMENTS**

With one in four Florida families speaking a language other than English, it is safe to say that most, if not all of FCADV’s member programs work with Limited English Proficiency (LEP) survivors. In fact, almost half of FCADV’s member programs serve between 25 and 200 LEP survivors a year. LEP is defined as having a limited ability to read, speak, or understand English.

Any organization that receives federal financial assistance, either directly or indirectly, is required to comply with Title VI of the Civil Right Act of 1964 (Title VI) and the Omnibus Crime Control and Safe Streets Act of 1968 (Safe Streets Act). Title VI specifically states, “No person in the United States shall on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.”

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The Supreme Court has further defined one type of national origin discrimination as “discrimination that is based on a person’s inability to speak, read, write or understand English.” Consequently, if an organization in any way receives federal funds, any and all aspects of that organization is obligated to ensure that LEP individuals have meaningful and equal access to benefits and services.

It is important to note that Title VI regulations prohibit policies and practices that appear neutral but have an inadvertent discriminatory effect. “… [A] recipient entity’s policies or practices regarding the provision of benefits and services to LEP persons need not be intentional to be discriminatory, but may constitute a violation of Title VI if they have an adverse effect on the ability of national origin minorities to meaningfully access programs and services.”

All 42 member programs of FCADV receive federal funding, whether through grants, contracts or subcontracts from: the Family Violence Prevention Services Act (FVPSA); the Victims of Crime Act (VOCA); the Services, Training, Officers and Prosecutors (STOP) Grant Program; or through other programs under the Violence Against Women Act (VAWA). The Department of Housing and Urban Development (HUD) also provides federal funding for FCADV’s member programs. Therefore, all certified centers are required to comply with all LEP-related regulations which are closely monitored by FCADV on an annual basis to ensure compliance. FCADV provides training and technical assistance on LEP policy development for local programs to ensure up-to-date regulations are disseminated and properly administered.

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5 Section 601 of Title VI, 42 U.S.C. sec. 2000d.
7 Ibid.
hance outcomes. Studies have indicated that improved language access was also effective in increasing access to mental health services. Research in the domestic violence and sexual assault fields illustrates that survivors appreciate and feel more supported when language services are provided and that both advocates and survivors see a need for language access in these programs.

FCADV’s Limited English Proficiency Plan, which details requirements and provides strategies for increasing language access to survivors with limited English proficiency, is shared with the certified centers and technical assistance is provided to assist in updating local plans. Onsite trainings are conducted by FCADV staff to further assist centers in building advocate capacity to increase access to services for survivors with limited English proficiency. FCADV also contracts with Optimal Phone Interpreters (OPI) to provide the Florida Domestic Violence Hotline and the 42 member programs with unlimited access to interpretive services. OPI, a Florida-based company, serves individuals across the United States and provides access to more than 200 languages. Last year, OPI received 918 calls from Florida’s local and statewide domestic violence hotlines. Of those, 71.67% of the callers spoke Spanish, 11.87% spoke Creole, and 3.7% spoke Mandarin.

FCADV partners with the Office of Court Improvement (OCI) and the Florida Prosecuting Attorneys Association (FPAA) to increase language access for survivors of domestic violence involved in the judicial system. OCI is a division of the Office of the State Courts Administrator within the Supreme Court of Florida and FPAA is a nonprofit corporation created to serve the needs of prosecutors with 20 elected State Attorneys and more than 1,900 Assistant State Attorneys serving as the core membership for the organization. The collaborative partners are currently creating bench cards with information regarding available interpretative services and how to quickly access these services.

FCADV’S CULTURALLY AND LINGUISTICALLY SPECIFIC INITIATIVES

FCADV has a demonstrated history of creating and financially supporting culturally and linguistically specific service initiatives designed to reach members of underserved populations. For example, FCADV was first awarded Florida’s VAWA Grant Program in 1995 to implement an initiative for the development of services in rural areas of the state recognizing that survivors of domestic violence in rural communities are among the most isolated and vulnerable in the State of Florida. FCADV’s Rural Statewide Initiative is designed to enhance the safety of domestic

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violence survivors and their children who are battered in rural communities. The Initiative is based on a community organizing model whereby community partners, judicial, and law enforcement come together to explore and implement strategies that provide coordinated, community-based services to survivors of domestic violence. Rural areas face significant economic, geographic, and service barriers that make it difficult to create, strengthen, maintain, or expand victim assistance services. Over the years, this funding has supported Florida’s efforts to strengthen services to survivors in some of the most rural parts of the state.

Key components of past rural projects include reducing the geographic and social isolation experienced by rural survivors, developing a coordinated community response to address the needs of survivors, increasing batterer accountability measures, and creating culturally and linguistically accessible programs to address the needs of traditionally underserved populations. In 2008, FCADV conducted a statewide needs assessment to identify gaps in services for survivors of domestic violence in rural communities. The assessment identified a need for specialized services for existing underserved populations including, but not limited to, African-American, Hispanic, Native American, Farmworker, and immigrant populations. Survivors representative of the above populations need culturally and linguistically specific services and benefit from tailored outreach efforts that address their unique barriers to accessing services. In addition to FCADV’s Statewide Rural Initiative, Increasing Critical Direct Services for Victims and Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Residing in Florida’s Rural and Underserved Communities Grant Program also supports traditionally underserved survivors by offering tailored services for survivors in Florida’s most isolated communities. Funding is used for: 1) The creation of new outreach services or the enhancement of existing outreach services for survivors; and, 2) An increase in intervention, advocacy and additional support services for survivors.

These two important initiatives provide funding for eight local certified domestic violence and sexual assault centers to develop successful community collaborations to provide support and enhance safety for underserved survivors in rural communities. Project partners include: Peaceful Paths, M.U.J.E.R, SafeSpace, Hope Family Services, Micah’s Place, Lee Conlee House, Haven of Lake and Sumter Counties, and Sunrise Domestic and Sexual Violence Center. Each of the participating organizations tailors programming to meet the diverse needs of local survivors. Programming includes, but is not limited to, the following activities:

- Providing outreach services for rural survivors;
- Providing injunction assistance for rural survivors;
- Creating individualized and tailored safety plans with rural survivors;
- Conducting support group meetings for rural survivors;
- Providing financial management, job coaching, and job readiness assistance for rural survivors including members of the senior population;
- Working collaboratively with the local domestic and sexual violence task forces;
- Partnering with leaders in the farmworker and senior communities to find new and innovative methods to develop and disseminate culturally and linguistically relevant information to increase services to rural survivors;
- Identifying and actively engaging in community partnerships that enhance services and information to rural survivors;
- Convening workgroups comprised of stakeholders and leaders representative of the local, rural farmworker communities; and,
- Utilizing information garnered from the workgroups to identify priority needs of farmworker survivors living in rural service areas.

Another important outcome of the Rural Statewide Initiative is the Annual Statewide Rural Training Institute that focuses on building a community-wide approach to reduc-
ing domestic violence. The institute provides practical tools and networking opportunities for participants to use in their efforts to establish coordinated practices in addressing domestic violence in rural communities. Institute participants include law enforcement officers, advocates, attorneys, domestic violence center staff and leadership, state and local government employees, volunteers, and community activists. In 2014, FCADV conducted a two-day Statewide Rural Institute in Marianna with approximately 200 individuals in attendance.

CAUCUSES

FCADV’s membership infrastructure includes six caucuses that identify and support the needs of underserved populations—one of the only state coalitions remaining that continues to support caucuses through staff and financial assistance. The caucuses are the Battered/Formerly Battered Women’s Caucus, the Women of Color Caucus, the Hispanic/Latin Caucus, the LGBT Caucus, the Child and Youth Caucus, and the Rural Caucus. The caucuses serve as a mechanism for providing guidance to the Coalition on issues that affect survivors and their children from these respective populations. Caucus members may include survivors, domestic violence advocates, community service providers, and interested community partners. Each caucus facilitates an annual leadership development opportunity or training institute funded through FCADV. The institutes hosted by the four closed caucuses, the Battered/Formerly Battered Women’s Caucus, the Women of Color Caucus, the LGBT Caucus, and the Hispanic/Latin Caucus provide a venue for members to discuss unique issues directly impacting survivors identifying with the caucus in a safe environment. They also allow for the development of strategies that increase accessibility of culturally-specific and trauma-informed domestic violence services. For example, in June 2010, the LGBT caucus hosted a strategic planning session to identify short and long-term goals. Goals included: growing and sustaining membership of the closed caucus; identifying, engaging and sustaining participation of LGBT allies; and, identifying gaps in domestic violence services for LGBT survivors statewide. In support of the strategic plan, the caucus hosted a “meet and greet” for all participants of FCADV’s Biennial Institute and developed and administered a survey for certified domestic violence center advocates. In response to the survey, the caucus developed and distributed membership recruitment flyers and awareness materials to increase caucus membership and increase advocate knowledge and skills in serving LGBT survivors. As a result, the caucus increased its membership and is actively engaged in creating and implementing projects that enhance services for LGBT survivors.

During the past year, the Women of Color (WOC) Caucus conducted six face to face meetings with approximately 25 people in attendance at each meeting. This caucus has an active and expanding membership group that focuses on planning its Annual WOC Caucus Institute as well as enhancing outreach and services for survivors who are women of color in Florida. Recently, the caucus collected donations to supply culturally sensitive hair care and health care products to domestic violence centers. In light of its stability and achievements, the WOC Caucus has provided ongoing support to other caucuses in developing leadership structures, bylaws, and member engagement strategies.

TAILORING SERVICES BASED ON SURVIVOR VOICES

When FCADV began conducting “survivor listening groups” five years ago, survivors expressed a need and desire to receive mental health counseling/therapy in addition to the crisis intervention counseling and advocacy received from domestic violence advocates. As a result, FCADV’s Community Collaborative Response to Increase Access to Services for Victims and Survivors of Domestic Violence, Dating Violence, Sexual Assault and Stalking Grant Program was created for Florida communities to increase the resources, services, and advocacy available to survivors.
of domestic violence that are also living with mental health concerns. One requirement of certified domestic violence center grantees is to partner with a local community-based organization that provides mental health intervention and counseling. These successful projects allow for a counselor to co-locate at the certified domestic violence center to provide survivors with mental health counseling. In addition, the grant program requires cross training and organizational capacity building efforts among collaborating partners. Currently, three communities are participating in the project and have collectively served the mental health needs of 320 survivors.

During listening groups, survivors also raised concerns related to the removal of their children by child welfare agencies as a result of the batterer’s use of violence. Survivors shared heartbreaking stories about losing their children to foster care when they were the non-offending parent in child abuse cases involving a batterer. In response to this injustice, FCADV created the Child Protective Investigators Initiative which is a collaborative effort between FCADV, DCF, the Office of the Attorney General, local certified domestic violence centers, community-based care agencies, and other child welfare professionals that provide an optimal coordinated community response to families experiencing the co-occurrence of domestic violence and child abuse. In January of 2012, the Coalition coordinated with DCF and Attorney General Pam Bondi’s Office to engage in a comprehensive project in Northwest Florida to reduce domestic violence in Bay, Gulf, and Calhoun Counties. The foundation of this groundbreaking initiative includes strategically linking agencies in these counties to enhance the coordination of services that are provided for survivors of domestic violence and their children that are involved in the child welfare system. As a result of this project, local law enforcement agencies, the State Attorney’s office, the certified domestic violence center, batterer intervention programs, and child welfare agencies have created and sustained a strong coordinated approach to safety planning with survivors of domestic violence and holding perpetrators accountable for their violence. These communities have significantly reduced the number of child removals in child welfare involved domestic violence cases while seeing no increase in re-abuse rates. Not only have these partners made significant changes in their local child welfare system; local criminal justice partners have increased the arrest and prosecution rates of domestic violence perpetrators. In an effort to prevent domestic violence homicides, the community partners are focused on identifying high-risk domestic violence cases and doing everything in their power to hold perpetrators accountable in those cases. The dramatic changes in these communities are no doubt keeping survivors and their children safer in these very dangerous domestic violence cases.

**FOR LATINO SURVIVORS**

FCADV financially supports several culturally and linguistically specific initiatives in addition to the Rural Statewide Initiative; all of which are implemented in partnership with community-based organizations whose primary purpose is to provide culturally appropriate services to underserved populations. For example, FCADV subcontracts with M.U.J.E.R. to provide culturally and linguistically specific services for Latino survivors of sexual assault and stalking. M.U.J.E.R. (Mujeres, Unidas, en Justicia, Educacion, y Reforma – Women, United in Justice, Education, and Reform) was the first community-based agency in its service area to address issues of family violence within Latino families. The survivors M.U.J.E.R. serves are predominantly Hispanic, low-income residents living in the agriculturally-based, rural area of southern Miami-Dade County.

FCADV provides funding for vital projects such as M.U.J.E.R.’s, and intensive support in the form of specialized training and technical assistance to ensure each community’s success in implementing project goals. FCADV provides training and technical assistance annually on topics ranging from how to create and sustain a coordinated community response to learning how to provide
trauma-informed services for survivors of domestic violence. Technical assistance is the provision of expert knowledge and best practices to increase the capacity of local certified domestic violence centers and allied organizations to best serve survivors of domestic violence and their children. The following is a quantitative snapshot of FCADV’s commitment to supporting local programs as they embark on tailored programming to meet the needs of underserved survivors. During the 2012-2013 fiscal year, the Coalition staff conducted 109 regional training events, 95 webinars and 24 statewide training events and/or conferences. Staff also responded to 7,774 technical assistance requests and conducted 188 onsite technical assistance visits for domestic violence center staff, Boards of Directors, collaborative partners, and other agencies.

FOR FARMWORKER SURVIVORS

As illustrated in the previous sections, FCADV recognizes the need for increased services to farmworker survivors of domestic violence throughout the State of Florida and continues efforts to successfully replicate FCADV’s Culturally and Linguistically Specific Services Initiative. Details regarding these community specific programs are as follows:

- During the project’s first year, FCADV collaborated with The Shelter for Abused Women and Children (The Shelter) to increase access to linguistically and culturally specific services for farmworker survivors of domestic violence living in the rural community of Immokalee, Florida. Project funding allowed for the development of materials, created in Spanish, which accurately reflected gaps in services farmworker women face, in the accessible format of a fotonovela. “A fotonovela is an illustrated comic book that provides a unique format through which a community addresses social concerns using a highly innovative visual language through drawings or photographs of individuals representative of the community the social concern is impacting. Activists and religious groups often turn to the fotonovela as an organizational tool for outreach and education.”

- FCADV replicated the project in the rural farmworker community of Crescent City located in Putnam County. Local domestic violence centers in both Immokalee and Crescent City work with a number of

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organizations to provide culturally relevant domestic violence services, including, but not limited to: the Collier County DCF/CPI Office in Immokalee, the Putnam County DCF/CPI Office, Redlands Christian Migrant Association, St. Andrews Episcopal Church, and the Florida Farmworkers Association. These dedicated collaborative partners offer meeting space for support groups, help centers create culturally relevant program curricula, and work side-by-side with certified domestic violence centers to enhance the safety of adult and child survivors of domestic violence.

- Project Esperanza is an FCADV supported project that focuses on increasing access to services to immigrant women, many of whom are part of a local farmworker community residing in the rural Florida towns of Fellsmere, Gifford, Indiantown and Port Salerno. In cooperation with community-based partners and the faith community, the project is focusing on a culturally-appropriate needs assessment to determine how best to increase domestic violence services accessibility. Findings from the needs assessment and survivor listening groups will assist in the development, printing, and distribution of linguistically and culturally specific materials such as informational brochures. The results will also guide the development and provision of services that account for the geographic isolation, economic structure, and strong social and cultural pressures that compound the problems confronted by survivors of domestic violence living in rural and underserved communities.

- Another example of an FCADV supported project addressing the needs of underserved communities is the Farmworker Outreach Program that focuses on closing the gaps in service delivery for farmworker survivors of domestic violence residing in a rural agricultural community. Activities of this project include: providing advocacy, support, referrals, and injunction for protection assistance; conducting culturally and linguistically specific support groups; conducting focus and listening groups; developing a needs assessment to guide the development and provision of services; engaging community stakeholders to update their policy and procedures to reflect culturally and linguistically specific service provision; and, creating a strategic plan to ensure safety is a priority for individuals seeking assistance.

Projects also include partnering with VIDA Legal Assistance, Inc. for the development of survivor-focused, culturally-informed, informational materials such as the Improving Access to Justice for Immigrant Survivors collection of materials. The Improving Access to Justice for Immigrant Survivors collection includes an eight hour training curriculum, a service provider handbook, radio public service announcements (PSAs) and an educational video developed with the assistance of survivors of domestic violence who are immigrants. These materials were developed with information collected from survivors as well as from allied community organizations that support the needs of immigrant and farmworker women. The goals of this resource collection include identifying and examining existing system barriers to improve access to justice for immigrant survivors of domestic violence and sexual assault and to recognize and evaluate immigration implications in the context of advocating, investigating, prosecuting, and presiding over domestic violence and sexual assault cases. With the success of these projects, FCADV plans to continue replication, throughout the many other immigrant and farmworker communities statewide.
THE NEEDS ASSESSMENT

In keeping with its existing efforts to help its 42 member programs best serve their communities, FCADV conducted a statewide needs assessment to determine gaps in the provision of culturally and linguistically specific services. Further, FCADV wants to determine how to best help advocates and programs across the state improve services to traditionally underserved survivors of domestic violence.

Multiple webinars are planned to discuss the findings and recommendations of this assessment. FCADV will also disseminate assessment findings and recommendations through various other means such as a presentation for FCADV’s Executive Directors and Council of Caucuses. Ultimately, the findings and recommendations will help to create or enhance existing programming and the services of Florida’s certified domestic violence centers.

FCADV and its statewide partners periodically convene to identify current trends within systems that require a focus on specific issues that are permeating the lives of domestic violence survivors and their children. Through this process, FCADV will continue to partner with the appropriate entities to create cutting edge programming and policy development to address the needs identified by survivors and partnering agencies as a part of this assessment.

HOW THIS ASSESSMENT IS ORGANIZED

Following a description of the needs assessment methodology, findings and recommendations are organized in four categories: cultural accessibility, language accessibility, race and ethnicity, and community outreach and engagement. Although these categories are somewhat artificial since they overlap and are significantly interconnected, they are chosen by necessity for the purposes of organizing and articulating concrete findings and recommendations.
In the spring of 2013, the needs assessment team systematically gathered information from FCADV member programs, advocates, and survivors of domestic violence to determine how existing services are meeting the needs of culturally and linguistically diverse survivors.

FCADV sought to better understand the challenges advocates face when providing services to survivors (with an emphasis on language or cultural barriers) and the challenges that survivors face when seeking help from domestic violence centers. In addition, the needs assessment team sought to learn what both groups recommend to help improve services. Toward that end, FCADV conducted five regional listening groups in rural and urban communities throughout the state with survivors and advocates.

Advocate listening groups were conducted with staff from shelter, outreach, and prevention services (See advocate listening session agenda in Appendix A). In addition, less formal discussions about language access (information exchanges) were held with advocates utilizing webinars.

Survivor listening sessions for the needs assessment were conducted in both English and Spanish and were comprised of survivors of domestic violence who were involved in some aspect of center services such as outreach, shelter, or transitional housing (See survivor listening session agenda in Appendix B). The listening sessions focused on their most pressing needs, concerns regarding systemic responses to domestic violence, and determining what currently works well.

The findings outlined in this report reflect not only the formal responses to the listening session questions, but also the informal observations of the facilitators from both the advocate and survivor listening sessions. An online survey was distributed to center staff wanting to participate but unable to attend a regional listening group. The survey focused on how advocates provide culturally appropriate and linguistically accessible services (See Appendix C for full survey). A total of 22 of FCADV’s 42 member programs participated. Respondents included advocates as well as Executive Directors. Ultimately, the needs assessment was informed by the experiences and input of approximately 88 advocates and directors of 25 member programs and approximately 70 domestic violence survivors across rural and urban communities in Florida.

The needs assessment was also informed by a review of the history and philosophy of FCADV related to the creation of culturally sensitive programming. Additional supportive information was gathered from:

1. Data collected from calls to the statewide hotline.
2. Demographic data reported by member programs on their service provision.
3. Civil rights reports submitted by member programs regarding the demographics of their participants, staff, and board.

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13 Available online from the U.S. Census Bureau [http://quickfacts.census.gov/qfd/states/12000.html](http://quickfacts.census.gov/qfd/states/12000.html).
CULTURAL ACCESSIBILITY IN PRACTICE

During the listening sessions, advocates displayed resourcefulness and creativity when working with women’s dietary needs, worship practices, and other circumstances. When asked about the ways in which they assist survivors of diverse backgrounds to feel more comfortable in their centers, advocates displayed an in-depth understanding of the diversity of survivors that their center serves and provided several examples of providing survivors the opportunity to work with advocates they felt most comfortable with, including same-culture advocates.

Advocates in these listening sessions also described creative efforts to help survivors from cultural backgrounds that were not frequently seen in their center. For example, when there was no same-culture advocates available, one center creatively reached out to non-advocate staff of the same culture to help survivors feel less isolated. However, advocates in the listening sessions identified a need for information and resources regarding three cultural groups for which they were least familiar—and consequently, groups for which there was problematic cultural accessibility—specifically, Hasidic Jews, Arab Muslims, and African Muslims. For example, shelter advocates were interested in ideas for accommodating the needs of survivors who observe Kosher or Halal diets.

One center employs an immigrant advocate who is bicultural and speaks three languages fluently. She provides advocacy services for survivors in all three languages. Not surprisingly, the fact that she is also an immigrant helps her connect with women. The women appreciate being able to work with an advocate who speaks their native language, but she was surprised by how comforting it was for women when they realized she was also an immigrant. The following are quotes from advocates interviewed for the needs assessment:

“One day a woman in the shelter asked me how I was doing, and I told her about my transition to living in the U.S., and then we just started talking and you hear everything…how isolated they feel, how scary it all is, and how big it all seems. That dialogue provides me the opportunity to know it is scary but will be okay because I experienced the same issues and survived.”

“They talk to me about their experience of being here and how hard it is or how lonely they feel and stop and say, well you know what I mean. … And I would see them relax more. I think it really helps.”

This remarkable example illustrates that some advocates possess intense and thorough knowledge of immigration issues. There were also advocates in the listening sessions that indicated an interest in improving their skills in serving immigrant survivors.

It is recommended that a toolkit be developed that contains a guide for troubleshooting cultural needs, enhancing advocates’ understanding of spiritual and religious accommodations, and lists of grocery items that may help survivors from some communities feel more comfortable.

It is recommended that immigration training be more widely available for advocates. In particular, training is needed on filling out the required paperwork for U-Visas & VAWA immigration provisions.
FCADV is undertaking a wide variety of language access initiatives in addition to the culturally and linguistically specific initiatives described in the previous section. Examples of materials FCADV created and distributed include: the Advocacy, Technology, and Safety Curriculum, Safety Planning around Technology: A Guide for Survivors of Domestic and Dating Violence (English and Spanish versions), a fotonovela designed for Spanish-speaking Deaf or Hard of Hearing survivors of domestic violence, an audio media file of safety planning resources in English and Spanish for survivors of domestic violence who are blind or have low vision, culturally-specific posters for InVEST (English, Spanish, Haitian Creole), an outreach video, and a palm card booklet for Hispanic/Latino survivors of domestic violence.

In addition to absorbing all costs associated with the 42 certified centers accessing the OPI language line, FCADV operates Florida’s Domestic Violence Hotline which staffs live advocates that personally connect callers to the nearest certified domestic violence center. The hotline is answered by Creole and Spanish speaking advocates on separate lines tailored for callers speaking these languages. FCADV develops posters, brochures, safety plans, palm cards, bookmarks, and numerous other print materials in an effort to publicize the hotline number in order to connect survivors with services. Resources, including FCADV’s website which also highlights how to access the hotline, are developed in multiple languages including: English, Spanish, Creole, and Russian.

Commendably, advocates and survivors alike reported that for the most part, there are suitable advocacy services for those with limited English proficiency. LEP survivors generally reported feeling fairly comfortable in the shelters and comfortable working with advocates. All programs that participated in the advocate listening sessions employed Latino/Hispanic bicultural, bilingual advocates, representing the largest diversity group in their service area. Most of these programs also employed other bicultural, bilingual advocates that were representative of the communities they serve.

Almost uniformly, advocates who were able to work with survivors in their native language felt that survivors really valued and benefitted from the opportunity to work with them. One advocate stated:

“They told me all the time, I’m so happy I can talk with you. It’s so much easier.”

In the listening sessions, advocates demonstrated their understanding of the importance of language access. Moreover, they described specific steps to enable communication with LEP survivors, including: strategies for finding interpreters and written translations; an emphasis on providing bicultural, bilingual advocacy; a familiarity with telephonic interpretation services; and, a willingness to employ a myriad of last minute options when an unexpected language is encountered. The needs assessment team noted that program staff throughout the state are resourceful in addressing the communication issues of LEP survivors.

Despite the notable bilingual advocacy available to LEP survivors, advocates in the listening sessions consistently asked for additional support with language access in a few specific areas. For example, although Chinese language speakers do not request services very often, advocates expressed frustration trying to locate an interpreter for some Chinese dialects.

It is recommended that, in addition to the OPI Telephone Interpretation Services, tools and strategies to help identify infrequently encountered languages be available to advocates.
It is further recommended that FCADV identify resources for accessing interpreters available to provide onsite services for hard-to-find languages representative of Florida’s survivors of domestic violence. For example, funding to support an FCADV staff person to develop and maintain an active database of licensed interpreters throughout Florida that may be accessed by member programs when in need of an onsite interpreter.

Although advocates articulated the importance of language access and were creative in finding ways to communicate with LEP survivors, most were unaware of the legal requirements of Title VI. Their efforts to provide language access seemed more of an ad hoc strategy of patching together resources than part of a broad comprehensive plan to ensure “meaningful access.” For example, one advocate struggling with a caller stated:

“It’s really frustrating when you have someone on the phone who doesn’t speak English and you are worried they are not safe and there isn’t anyone with them to help translate. You don’t know whether they need the police or if they’re in danger. It’s heart breaking because you can’t assist them at that time.”

To add to this challenge, the needs assessment team observed one program that serves roughly 40 percent Hispanic/Latino survivors but routinely only has one Spanish-speaking advocate on each shift, responding to both survivors in shelter and on hotline calls.

“Title VI requires advocacy programs to provide meaningful access to all individuals with limited English proficiency specifically referencing language assistance that results in accurate and effective communication at no cost to LEP individuals who are eligible for the program’s services, (described further in Legal Requirements section). Although the programs that participated in the listening sessions are meeting the basic requirements of Title IV, best practice calls for more bicultural/bilingual advocacy, in-person interpretation, and use of language lines when programs are working with a survivor who needs access to an infrequently encountered language.

Since many of the programs involved in the focus groups were from some of the most diverse communities in the state (perhaps in the country), best practice for language access in their communities would involve written language access plans that involve multiple strategies ensuring that the LEP survivors in these programs receive the same quality of services as English-speaking survivors.

Specifically, best practice language access could be achieved via one-on-one advocacy by a bicultural, bilingual advocate and through the use of in-person professional interpreters, with less reliance on remote access interpretation such as the language line and the use of bilingual advocates as interpreters.16 The language access plans should involve short and long-term strategies such as: hiring bicultural, bilingual advocates;

offering translated written materials and signs; when possible using professional, certified interpreters in person; using a telephone interpreter service for infrequent or unexpected languages; establishing co-advocacy arrangements with community-based programs; or, establishing a language bank. The strategies chosen will depend on the number of LEP survivors and the specific languages spoken in the community. The bottom line is that all survivors in an agency’s service area must receive equal access to services regardless of their native language.

It is recommended that FCADV and its 42 member programs evaluate their current language access plans with the goal of achieving best practice.

It is recommended that FCADV review current standards to determine whether to amend them to reflect best practice on language access related to LEP.

FCADV should develop guidance materials for services to LEP survivors such as sample plans and protocols, tools to help identify infrequent languages, and resources throughout the state—and should develop and provide training to assist its member programs.

FCADV should assist member programs in developing strategic plans to recruit and hire bicultural and bilingual staff, develop language banks and co-advocacy agreements, find and hire interpreters and translation services, and develop plans for accommodating unpredictable language access needs.

COMMUNITY ADVOCACY

One-third of programs reported that theirs was the only advocacy program in the community available to serve LEP survivors of domestic violence; for many women seeking services, the FCADV member program is the only option. Advocates reported that barriers to language accessibility in the broader spectrum of community services make LEP survivors more likely to be unemployed, be denied orders of protection, have their children removed by DCF, and be denied adjustments to their immigration status. LEP survivors also have a more difficult time finding accessible supportive services such as transitional housing and mental health counseling. Their anecdotal observations are borne out by a review of the research on the impact of language access on service outcomes (See Background and Purpose section).

Although domestic violence programs are trying to meet language accessibility needs of survivors, enhanced advocacy efforts are required to encourage language accessibility among their service partners such as criminal justice, workforce development, and transitional housing.

FCADV member program Executive Directors are encouraged to utilize their relationships with community partners to build on the availability of language interpretation. Moreover, advocates are encouraged to broaden their advocacy approach to include institutional advocacy: reforming the way that systems respond to the needs of all survivors.

It is further recommended that FCADV develop tools to help programs influence systems to meet their Title VI legal obligations, including checklists for advocates when working with LEP survivors in systems, training materials for advocates to educate systems of the requirement of language access, fact sheets on the law, and resource lists.
RACE AND ETHNICITY

RACE AND ETHNICITY REPRESENTATION IN PROGRAM PARTICIPATION, STAFF AND BOARDS

Promisingly, a review of demographic data reveals that FCADV member programs, in direct contrast to national data and trends, serve women of color in numbers proportional to that of their broader communities. The chart below compares the racial and ethnic demographics of Florida’s general population with the demographics of FCADV member program staff, participants, and board members.

There appears to be an under-representation of Caucasian survivors in domestic violence programs; Caucasian women are 47% of program participants but 71% of the state population. In contrast, Hispanic women utilize certified centers in numbers slightly higher than their state population; 20% of program participants are Hispanic compared to only 17% of the state population. Similarly, the number of Black/African American survivors utilizing services (22%) is significantly higher than their population in the state (12%). Survivors from Asian/Pacific Islander communities and Tribal nations are participating in advocacy services in numbers consistent to their population in the state.

Also commendably, the racial and ethnic composition of program staff is representative of the cultural make up of survivors utilizing program services. However, the governing boards of FCADV’s member programs are very over-representative of Caucasian women (62% more than their program participation) and under-representative of Black/African American and Hispanic women, both of whom have board representation in proportions less than half of their program participation. Across all FCADV member programs, there is one Asian and one Native American board member.

It is recommended that FCADV assist member programs with developing boards that are racially and ethnically representative of the participants accessing their services.
COLLABORATIONS WITH INDIAN TRIBES AND TRIBAL ORGANIZATIONS

The two federally recognized Indian Tribes in the State of Florida are the Miccosukee Tribe of Indians and the Seminole Indian Tribe of Florida. FCADV understands and values the importance of offering culturally relevant information for survivors, created for and by survivors of underserved populations, including Miccosukee and Seminole women. In 1996-2002 FCADV’s Rural Statewide Initiative focused on two of Florida’s most rural counties, Hendry and Glades. Located in Hendry County, the Big Cypress Seminole Indian Reservation is the largest Seminole Indian community in Florida. A second smaller community is the Brighton Indian Reservation which is located in Glades County. The Initiative’s rural organizer provided training on both reservations and started the first ever support group on the Big Cypress Reservation. The groups were co-facilitated by a local tribe member. FCADV also worked in conjunction with the tribal councils to provide trainings by Tillie Blackbear, a Native American elder and grandmother of the battered women’s movement in North America and co-founder of the first shelter for women victims of rape and domestic violence in Indian Country. FCADV also started women’s sewing circles on the Brighton Indian Reservation where survivors of domestic violence shared their stories and experiences. Finally, a group of women from the Seminole Tribe served as a consulting group on creating informational brochures related to the unique needs of battered Native American women.

The primary contact at the Seminole Reservation moved out of state at the same time that a majority of the members of the Tribal Council transitioned out. Today, FCADV is actively seeking partnership opportunities with the Tribes and is engaging with the National Indigenous Women’s Resource Center (NIWRC) to build staff capacity for future collaboration. NIWRC has assisted FCADV by offering technical assistance in building bridges with the Tribes. FCADV Program Department staff also reviewed NIWRC materials and webinars and attended NIWRC’s Embracing, Engaging and Empowering Our Community Conference. This spring, FCADV staff attended the National American Indian Conference on Child Abuse and Neglect to learn about critical issues affecting American Indian youth and to engage in networking with possible partners from both the Miccosukee and Seminole Tribes.

It is recommended that FCADV continue to contact NIWRC for technical assistance in how best to strengthen relationships with the Miccosukee Tribe of Indians and the Seminole Indian Tribe of Florida to support both tribes with their efforts to provide services for Miccosukee and Seminole survivors of domestic violence and to prevent violence against tribal women.

CULTURAL AND SOCIETAL BIASES

Listening sessions with advocates and survivors raised a number of issues regarding race and ethnicity. Survivors in listening sessions expressed deep frustration and fear of other survivors in the program. Although their experiences seemed on the surface to be practical and focused largely on communal living, a more in-depth dialogue revealed suspicion and tension with survivors from other oppressed, ethnic or racial groups. Survivors routinely negatively characterized other residents based on the specific oppressed group they represent such as: women of specific racial or ethnic backgrounds, women who are homeless, or women with a history of drug or alcohol abuse. Survivors attributed unpleasant aspects of shelter life to people with those specific characteristics.

It is unreasonable to expect that survivors will cast off cultural and societal biases when they enter a shelter environment. On the contrary, their biases are likely to be magnified due to stress and the challenges of communal living. In addition, survivors ex-
periencing multiple oppressions in the shelter environment experience a greater burden.

Advocates need to engage in an ongoing dialog with shelter residents about acceptance of others’ race, ethnicity, ability and other important facets of fellow residents’ lives in order to promote a safe and welcoming environment for all survivors. Advocates should be trained on strategies for non-violent communication as a way of addressing racial and cultural biases—strategies such as depersonalizing words, clarifying requests, making evaluations instead of factual observations, and using restorative circles.

FCADV currently offers its member programs training on anti-oppression and cultural awareness both as part of its core curriculum and as part of its onsite workshop series. It is recommended that FCADV build on the strength of its current programming by incorporating training for advocates on advanced cultural and linguistic awareness. FCADV should expand on the current trainings to include the unique experiences of members from different cultures, through awareness of one’s own culture, empathic understanding of oppression, and critical assessment of one’s own privilege. The goal would be to enable advocates to effectively operate in different cultural contexts, thereby going beyond cultural competence to promote not only knowledge of diverse cultures but an overall approach to engaging with survivors.

COMMUNITY OUTREACH AND ENGAGEMENT

The benefits of a domestic violence program engaging in community outreach are multi-faceted. Community engagement gives a domestic violence program greater access to and familiarity with culturally-relevant support services and ancillary resources. More importantly, it allows advocates to develop safety plans with women that account for their cultural values, the impact of immigration, attitudes about law enforcement, and the role of extended families in maintaining or compromising safety.

Even more broadly, community engagement is an approach that helps domestic violence service providers to connect in a more dynamic way with the communities they are serving. With this approach, a program might engage with its community members and build permanent relationships for the purpose of applying a collective vision for broad benefit. In this manner, culturally and linguistically diverse programs around the country are building community support for anti-violence and raising awareness about domestic violence. Many programs across Florida are already doing this, and doing so successfully.

FCADV’S COMMUNITY OUTREACH AND ENGAGEMENT

Commendably, a review of FCADV’s existing Culturally and Linguistically Specific initiatives and Language Access initiatives (specific examples described previously) demonstrates a solid understanding of, and emphasis on, the philosophical underpinnings of community outreach and engagement.
IN PRACTICE

In the needs assessment listening sessions, advocates appeared to be aware of the women in their area who were being underserved and articulated their programs’ significant efforts to reach and assist those women. Their experience of engaging communities is impressive and their openness and enthusiasm to new ideas showed a laudable desire to reach women who need their support, despite the already considerable demands on their resources and time. The needs assessment team observed and heard examples of engagement and outreach efforts in places of worship, schools, community centers, and migrant communities. Outreach efforts included co-location of medical clinics, legal clinics, and system partners such as law enforcement and courts. These efforts are commendable and examples thereof, in the words of advocates, are highlighted below.

“This Saturday I did our...domestic violence training in the Latino community and it was a great experience. I loved it. It was just amazing. The reception was so warm not just for me but for the services we offer here... Because they know and they don’t know and they don’t get opportunities to talk about domestic violence and we brought it to them.”

“I work at the Community Center. We set it up so women can drop in to talk with me and it works great. They don’t have to come to the shelter. Across the hall is a clinic that just opened up where they do exams and then women can come see me if they want or staff at the clinic will refer them... Right next door there is a substance abuse program and they let people know about me, our outreach office and our shelter. I get people who stop in from there too. It’s the perfect place to be in the community. This is where people come to get food, medical clinic, discounted clothing store... I had one survivor who came in, it was the later part of January when it was really, really cold, and she had come in early. By the time we finished talking it was dark and really cold and the two babies she had with her didn’t have jackets. So we got her over to the Community Center that was right there and she got coats and things she needed.”

“Survivors who come see me in the community ... I can help with listening, helping them understand what domestic violence is and I can tell them about our services but I can also help with supplies they may need. They really appreciate it and they call me if anything happens, if they want to come back to meet or if they want to come to the shelter... anything really.”

“We have offices here, instead of our shelter, because this is where the community is. They aren’t going to come to us at the shelter. Here they know we are one of them and that makes them more comfortable. These survivors aren’t going to want to leave unless they know that they will be okay, understood, and helped. That’s why our offices are here.”
IN CONCLUSION

As this report illustrates, FCADV and its 42 member programs strive to meet the needs of traditionally underserved survivors of domestic violence. Through the needs assessment, both gaps and strengths emerged regarding the provision of culturally and linguistically specific services. FCADV’s commitment to underserved survivors is evident. FCADV has continued to secure additional funding for local rural projects that enhance or establish services for survivors where limited or no services existed for traditionally underserved survivors. These services are culturally and linguistically tailored to meet the diverse needs of survivors that are expressed during listening sessions with survivors, advocates, and other direct service professionals that work closely with underserved individuals in the service area. When other coalitions have disbanded their caucuses, FCADV remained committed to organizing and funding caucuses that identify and support the needs of underserved populations throughout Florida. To that end, FCADV’s survivor listening sessions have become an institutional and vital tool in developing programming and policy priorities that directly affect the expressed needs of survivors.

Notably, the needs assessment revealed that FCADV member programs, in direct contrast to national data and trends, serve women of color in numbers proportional to that of their broader communities. This trend denotes promising staffing practices that should be continued in Florida and modeled in other states. The needs assessment identified gaps such as the need to diversify center board membership to better reflect local survivors served and the need to enhance existing LEP plans; both of which FCADV will prioritize in its future programming efforts. Prior to implementing the needs assessment recommendations, FCADV will share the report’s findings with membership and allied organizations through webinars and in-person presentations. Ultimately, the findings and recommendations will create or enhance existing programming and services in Florida’s certified domestic violence centers which will in turn, positively impact the lives of survivors of domestic violence and their children throughout the state.
ADVCATE LISTENING
SESSION AGENDA

Listening sessions with advocates began with the specific questions listed below, and concluded with a lengthier dialogue to explore the themes that arose from their responses.

1. What is your position?
2. What do your duties involve?
3. Do you have enough time to do them?
   a. Why or Why not?
4. Are there times when you work with participants in your program that you have difficulty understanding them?
   a. Why?
   b. What do you do? How does that work out?
   c. What would help you do this better?
5. Are there times that some of the participants have a hard time fitting in or feeling comfortable?
   a. Why do you think? How have you helped?
   b. What might help you help them?
6. Do you think that the participants in your program represent the community of the area you serve?
   a. How do or don’t they?
7. Are there any difficulties among the survivors participating in the program understanding other survivor’s customs?
   a. How?
   b. What do you do about it?
8. How do you feel your program is doing in working with culturally diverse participants?
   a. What do you think your program could improve on?
   b. What would help your program do that?
9. What kinds of things does your program do to make participants of diverse cultures and with diverse language skills aware of your services/program?
10. What would you like to know more about?
11. What would you like FCADV to help you or your program with in working with culturally and linguistically diverse participants?
SURVIVOR LISTENING SESSION AGENDA

Survivor listening sessions began with the following open-ended questions and concluded with dialogue and discussion to explore the themes that arose from their responses:

1. When you left home what were your immediate needs?
2. What center services have been most helpful?
3. What center services could be improved?
4. What center resource/service would you like to see that are not currently available?
5. What community (family, faith-based organizations, friends) resources do you think you will need in the future to maintain a life free from abuse?
6. What systemic (law enforcement, judicial system, community-based organizations, educational organizations) resources do you think you will need in the future to maintain a life free from abuse?
7. What community (family, faith-based organizations, friends) resources do you think are needed to prevent abuse from occurring?
8. What systemic (law enforcement, judicial system, community-based organizations, educational organization) resources do you think are needed to prevent abuse from occurring?
STAFF SURVEY

1. Excluding access to the language line, is your [center] able to provide services to participants who do not speak English?
   a. Yes
   b. No

2. If yes, what languages do you have capacity in (including American Sign Language)?

3. What languages have survivors needed services in (including American Sign Language)?

4. Please select how you provide services to survivors who do not speak English. Choose as many options as apply.
   a. Staff who are fluent in languages other than English
   b. Use of in-person certified interpreters
   c. Use of remote interpretation services via phone (such as Language Line)
   d. Use of remote interpretation services via video
   e. Other

5. How do the survivors you serve find out about interpreter services?

6. About how many Limited English Proficient survivors do you work with within a year?
   a. 1-25
   b. 25-75
   c. 75-200
   d. 200+
   e. We do not work with LEP clients

7. Do you have to turn down survivors because of language access issues?
   a. Yes, often
   b. Yes, sometimes
   c. No

8. Are there other agencies similar to yours in your community who can serve LEP survivors?
   a. Yes
   b. No
   c. Depends on the language
   d. We can serve LEP survivors
   e. I don’t know

9. In what ways have you seen problems with language access negatively affect the services domestic violence survivors receive in your community? (check all that apply)
   a. Access to shelter, access to transitional housing
   b. Workforce/Employment assistance
   c. Access to mental health
   d. Loss of custody
   e. Denied injunction for protection
   f. Denied adjustment of immigration status
   g. Children removed
   h. Convicted of domestic violence
   i. Other (comment box)
10. Please rank your response to this question. (Always – Most of the Time - Sometimes- Rarely- Never – I don’t know)
   a. Interpreters are available for shelter-based services for survivors who do not speak English.
   b. Interpreters are available to develop and discuss a safety plan for survivors who do not speak English.
   c. Interpreters are available for court-based processes for survivors who do not speak English.

11. Do you think survivors of diverse cultural and linguistic backgrounds feel comfortable receiving services from your Center? (rate each - Always, Most of the Time, Sometimes Rarely and Never)
   a. Shelter
   b. Outreach
   c. Court
   d. Employment
   e. Transitional housing

12. Other than language accessibility, what does your organization do to help survivors with diverse cultural and linguistic backgrounds feel comfortable and supported in meeting their personal goals? (check all that apply)
   a. Culturally diverse staff
   b. Culturally specific foods
   c. Access to diverse religious/spiritual worship centers
   d. Other

13. What resources would help you better serve survivors of diverse cultural and linguistic backgrounds?
   a. Increase language access services in your area.
   b. Promising practices and tools to reach out to and collaborate with diverse communities.
   c. Assistance recruiting and retaining bicultural and bilingual staff and members to our Board of Directors.
   d. Assistance in engaging culturally-diverse community-based programs to collaborate in providing services to members of culturally diverse communities.
   e. Assistance fundraising to accommodate the extra staff time and resources required to meaningfully collaborate with other community organizations and provide competent services to LEP survivors.