



# Serving Black Women Survivors of Intimate Partner Violence

**Part 1: February 27, 2024**

Presented by

Dr. Carolyn West & Doris O'Neal



**National Resource Center  
on Domestic Violence**

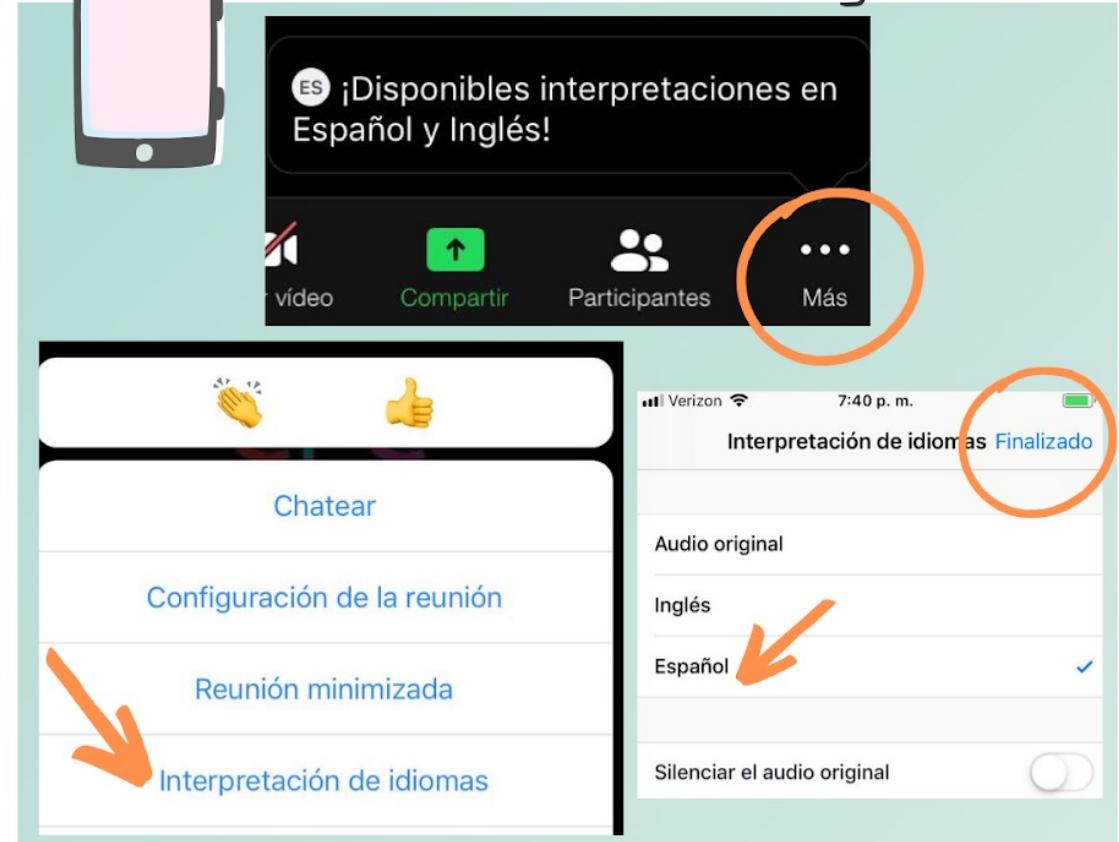
# PARA ACCEDER A LA INTERPRETACIÓN



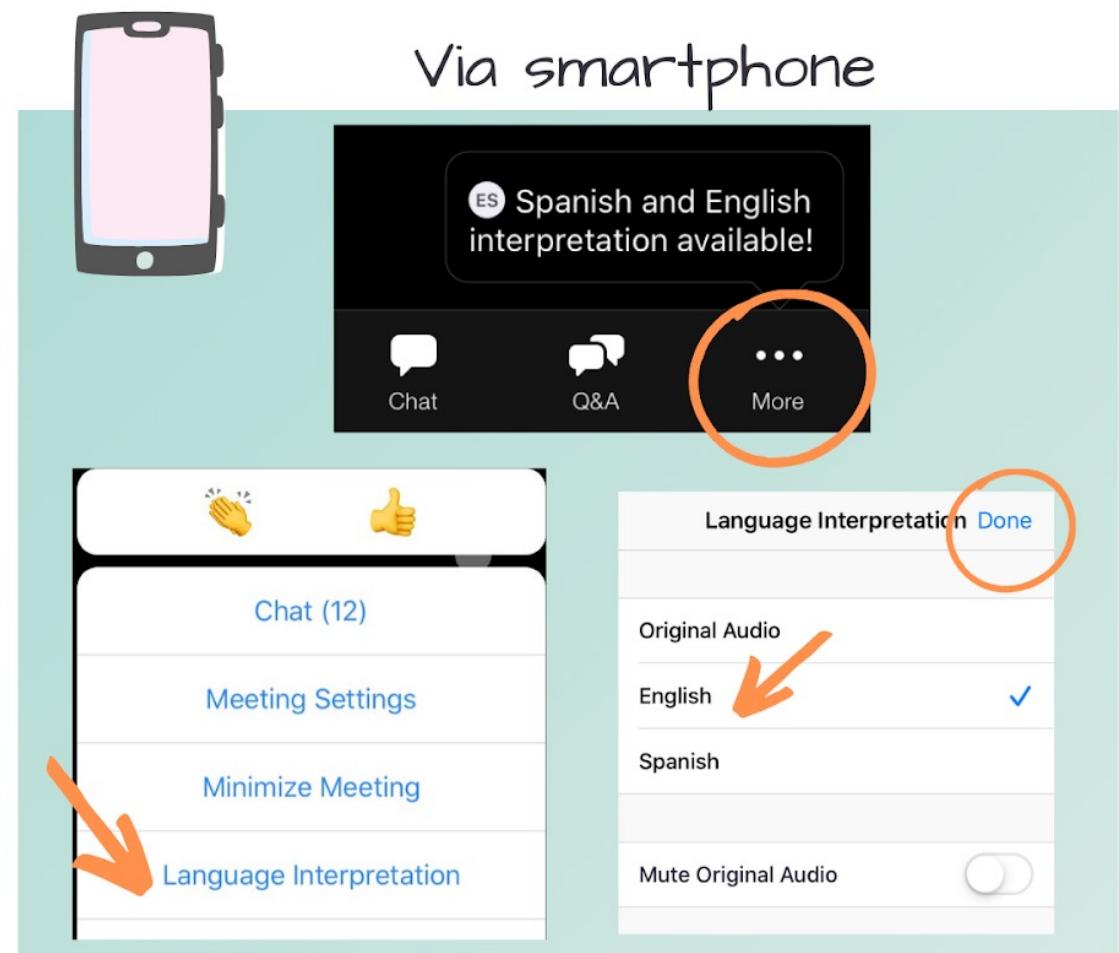
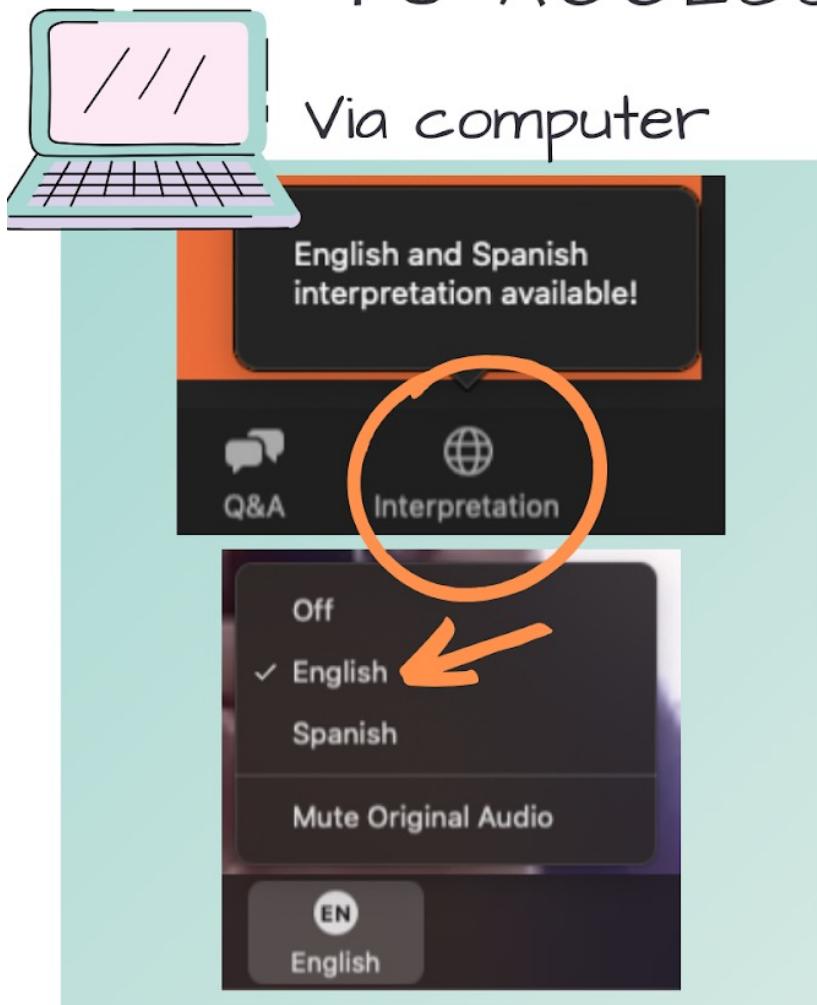
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# TO ACCESS INTERPRETATION

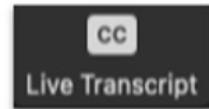


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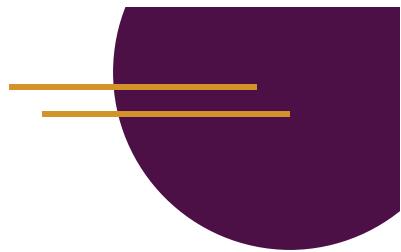
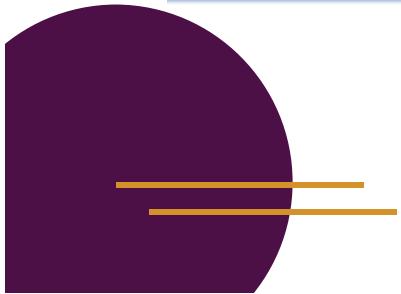
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## MISSION: TO STRENGTHEN AND TRANSFORM EFFORTS TO END DOMESTIC VIOLENCE.

The National Resource Center on Domestic Violence ([www.nrcdv.org](http://www.nrcdv.org)) provides a wide range of free, comprehensive, and individualized technical assistance, training, and specialized resource materials.





## *NRCDV's Theory of Change*

*If we center the lived experiences of survivors of color in order to end systemic racism, we will attain safe and thriving communities.*



# 4-Part Technical Assistance Guidance Series

# 2020



# Moment of Truth-2020



 The Boston Globe

The intersection of Black women, COVID ...

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About this content

Lois Beckett and Abené Clayton

Sat 25 Jun 2022 05:00 EDT

**'An unspoken epidemic': Homicide rate increase for Black women rivals that of Black men**

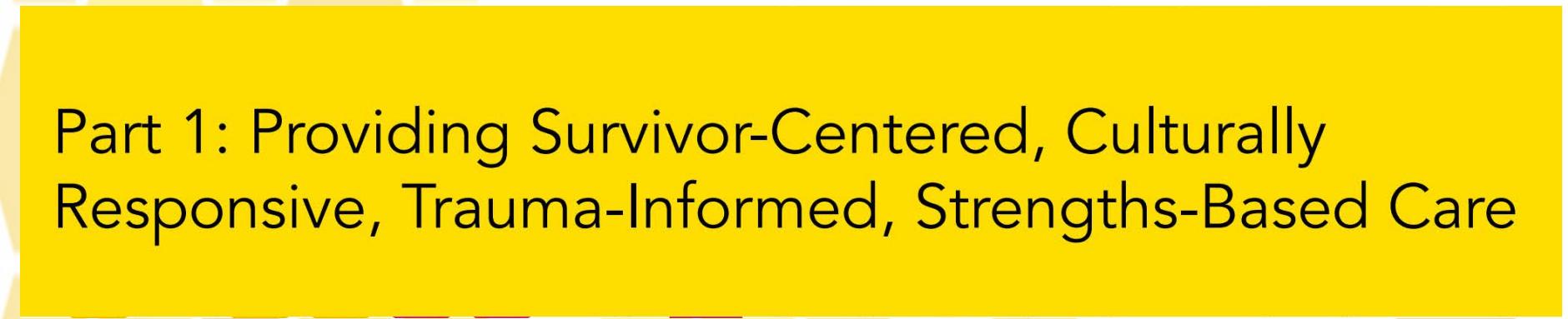


# February 27, 2024



# February 29, 2024





## Part 1: Providing Survivor-Centered, Culturally Responsive, Trauma-Informed, Strengths-Based Care

# Color Blind Approach

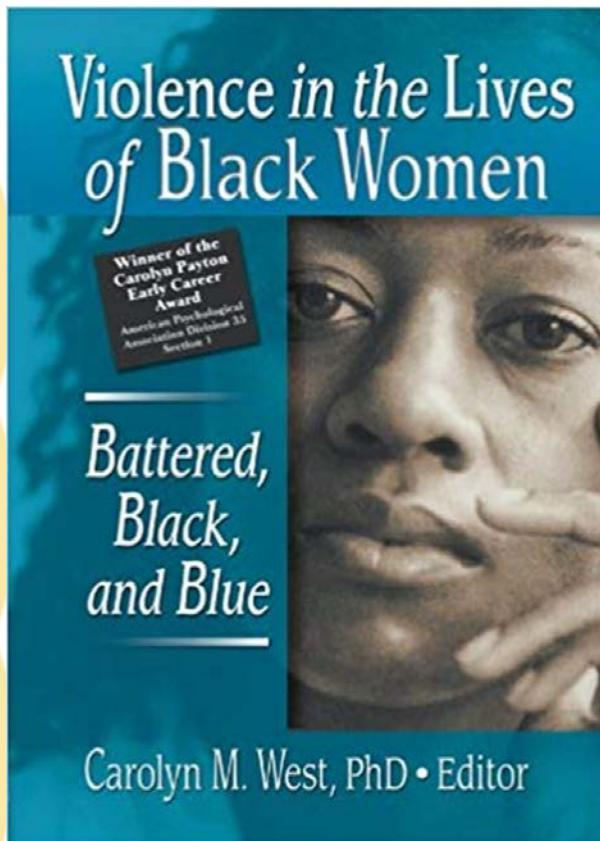
*"We serve all colors in shelter...it doesn't matter where they come from, because a woman is a woman, and battered is battered. Domestic violence does not know what color they are. It's blind"* (Donnelly, Cook, Ausdal, & Foley, 2005, p. 20).



*"Saying you don't see race or culture is saying you don't see me...you devalue the person I am when you say you don't see race"* (Davis & Block, 2020, p. 52).



## Color Blind Approach



*“...articulating the many similarities among survivors, without negating the particular experiences of Black women”*

## **Survivor-Centered Advocacy & Survivor-Informed Care**

According to Kulkarni (2019), "survivor-centered advocacy practices are guided by survivors' knowledge, expertise, and preferences rather than service-defined advocacy practices that tend to fit survivors into existing services regardless of their needs" (p. 57). Below are three ways that advocates can be survivor-centered in their work.

## Recognize the individuality of survivors

*"If you think you already know because you already been trained how to be competent; you won't take that next step to ask the right questions or to humble yourself enough to even ask the client in front of you, 'What is it that you need?'"*

# Recognize the individuality of the survivor

For example, advocates can be prepared to ask themselves, survivors, and their colleagues questions such as:

- *“How can I best understand who you are so that I can help you along this journey?”* (Waldron, Storey-MacDougall, & Weeks, 2021).
- *“How could you foster more conversations with survivors about opportunities and barriers they face?”* (Flowers, et al., 2017).
- *“How am I inviting Black women to share salient parts of their identity with me?”* (Shelton, 2022).

# Understanding the leaving process

*"It would be great if support groups for survivors got everyone to leave [an abusive partner]. But we need to deal with the reality: most people stay. So what do we do then? Why would somebody go to this class that's just going to make them feel bad about their decision?" (Jemmett, Hill, & Davis, 2017, p. 22).*

## Provide a range of healing modalities

- Transportation
- Housing
- Substance abuse treatment
- Mental/behavioral health services
- Warm-hand off



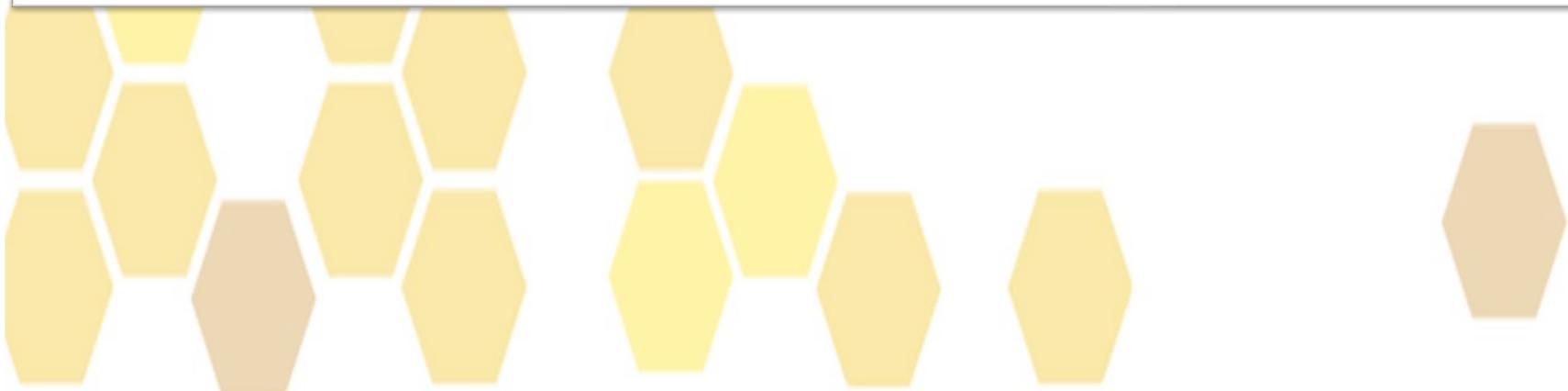
## **Culturally Responsive Practice**

Culturally responsive practice means that our organizations and agencies are proactively integrating meaningful attention to the cultural identities of participants and staff, and to the ways culture can shape people's experiences of trauma and healing (Warshaw et al., 2018). Below are three ways that victim-serving organizations can be more responsive to the needs of Black survivors.

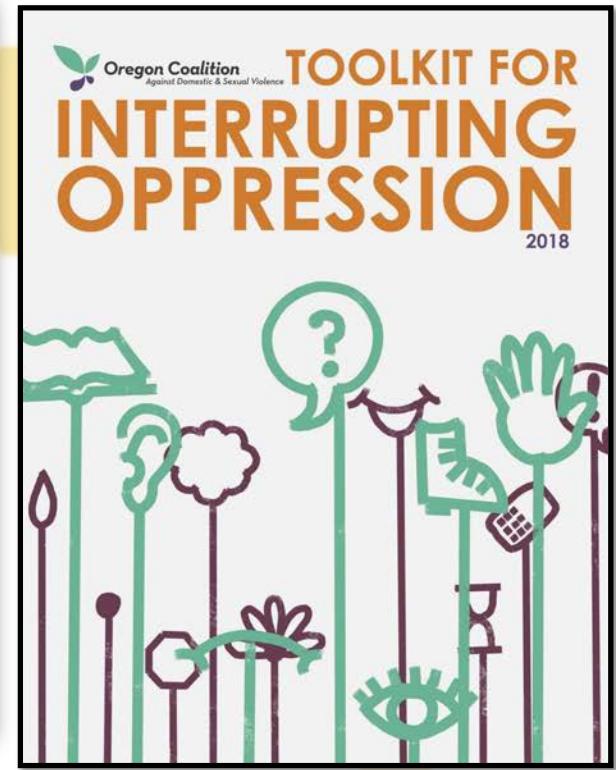
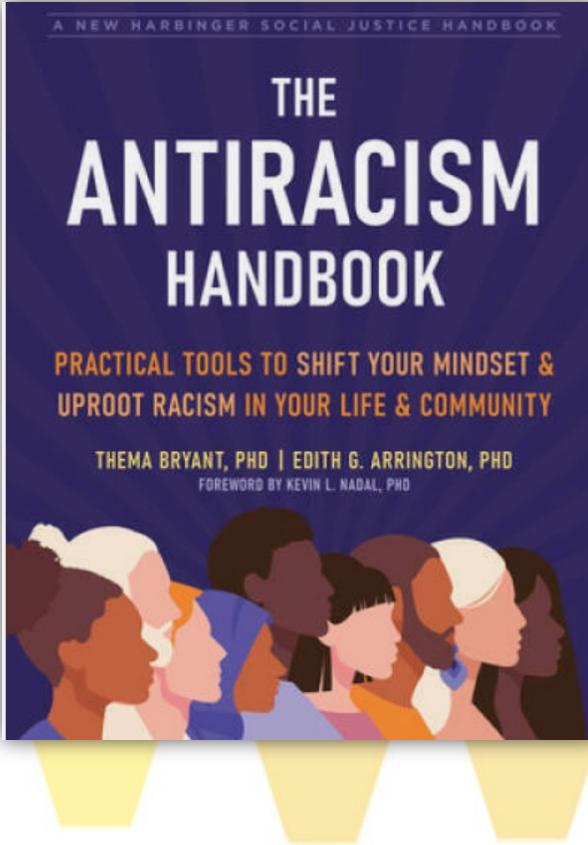
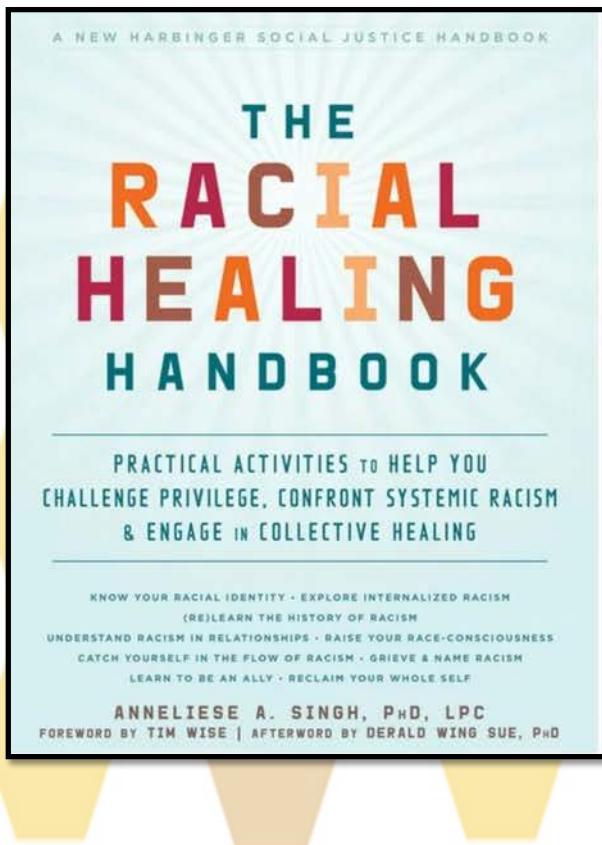


# Recognize implicit biases

*"The lens of bias through which survivors of color are viewed in shelter impacts how long they stay in shelter, whether or not they feel they get access to the same services and whether or not they get evicted"* (cited in Kippert, 2020, p. 2).



# Recognize implicit biases

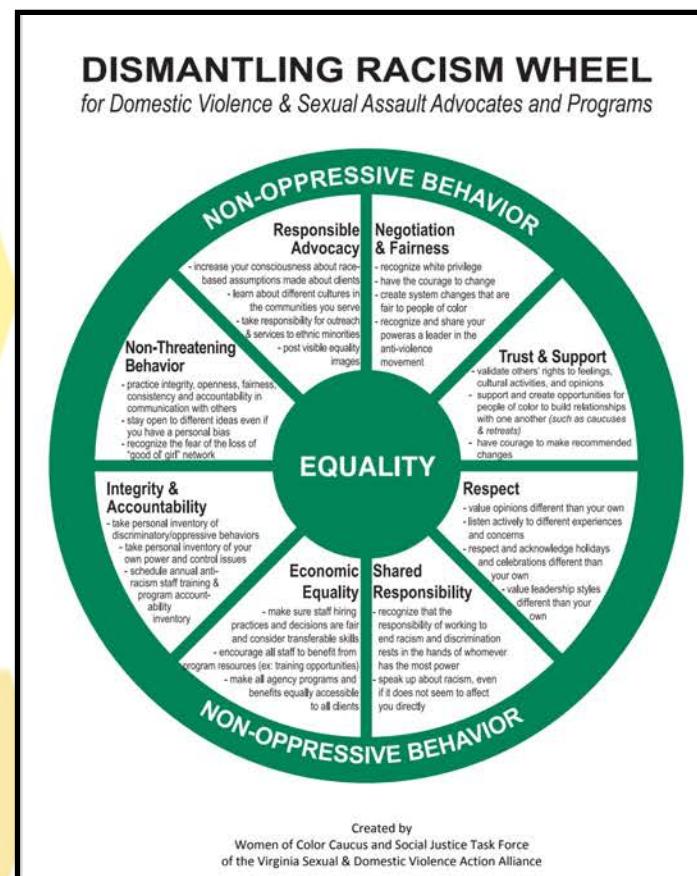


# Have honest conversations about race

*"I see that you prefer having a Black therapist and I just want you to know that I am aware that I am a white woman, and I am aware of where I stand in race relations to you, so if it, if there is anything you need me to know about you culturally or personally that I don't know, that will help our interactions, then we can feel free to talk on it and every so often we'll check in about how you're feeling in regards to me being white and you being a Black person" (Kulkarni, Stylianou, & Roberts 2023, p.1198).*



# Create anti-racist organizations



## Trauma-Informed Care

*"Knowledge and resources about the impact of trauma on the individual, organization, and community levels are powerful tools for those searching for the words and pathways to healing."*

- [Monika Johnson Hostler](#), Executive Director,  
North Carolina Coalition Against Sexual Assault

Trauma informed care requires advocates to assist survivors in strengthening their psychological capacities as they address their multiple complex issues, access safety, or recover from the effects of IPV and other traumatic experiences. A trauma informed organization provides advocacy services in an environment that is inclusive, welcoming, destigmatizing, and avoids re-traumatizing survivors (Vides, Middleton, Edwards,

# Trauma-Informed Care



1. **Realizes** the widespread nature of trauma and potential pathways for recovery.
2. **Recognizes** signs and symptoms of trauma in survivors, their families, staff, and others involved in systems.
3. **Responds** by integrating knowledge about trauma into policies, procedures, and practices.
4. **Resists** retraumatizing survivors and staff.

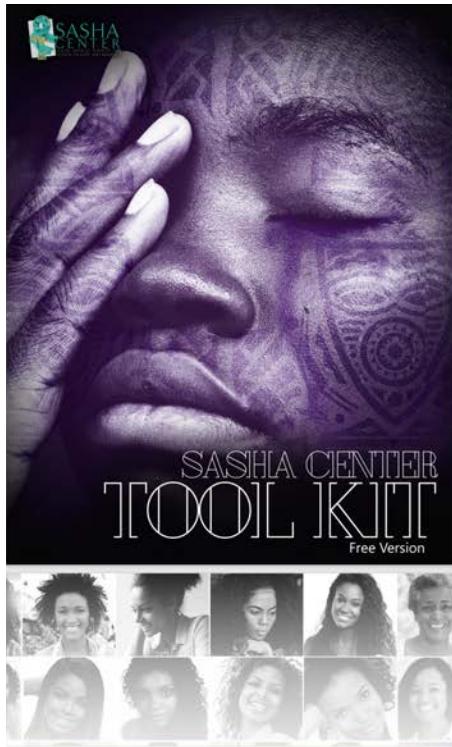


### **Strengths-Based Approach**

Despite their trauma, many Black survivors demonstrate *resilience*, defined as “the process of overcoming the negative effects of risk exposure, coping successfully with traumatic experiences, and avoiding the negative trajectories associated with risks” (Mushonga, Rasheed, & Anderson, 2021, p. 153). In fact, some Black survivors reported positive psychological changes, such as greater appreciation of life, spiritual growth, and personal growth. These changes represent *posttraumatic growth*, defined as the “process of meaning-making and is marked by profound growth” and is “characterized by transformative changes in an individual’s perceptions of self, others, and life” (Mushonga et al., 2021, p. 153).

Advocates can use a strengths-based approach by focusing on the ways that survivors use their individual agency, find support, and obtain critical assistance. For example, researchers discovered that Black survivors used multiple survival strategies, including:

# Strengths-Based Approach



**Storytelling**

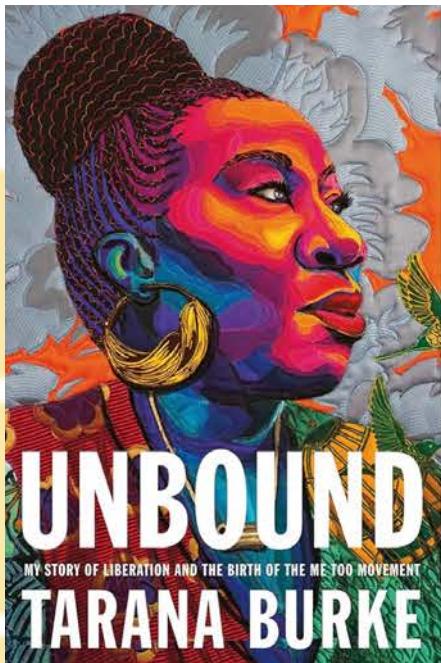
**Dancing**

**Journal writing**

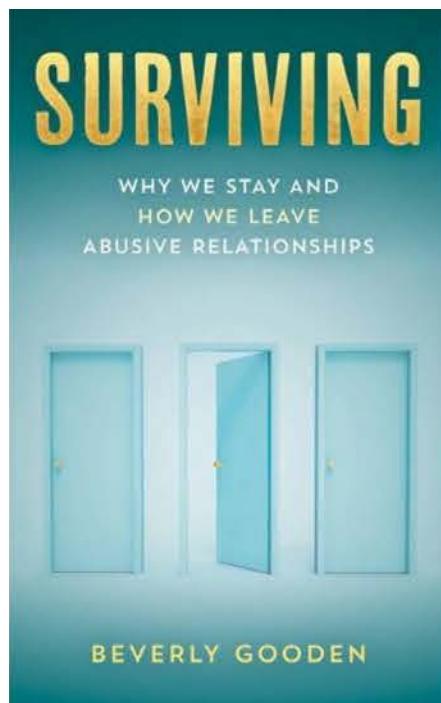
**Creating/listening to music**

**Artistic expression by Black women**

# Partner with Black Women Activists



#MeToo



#WhyIStayed



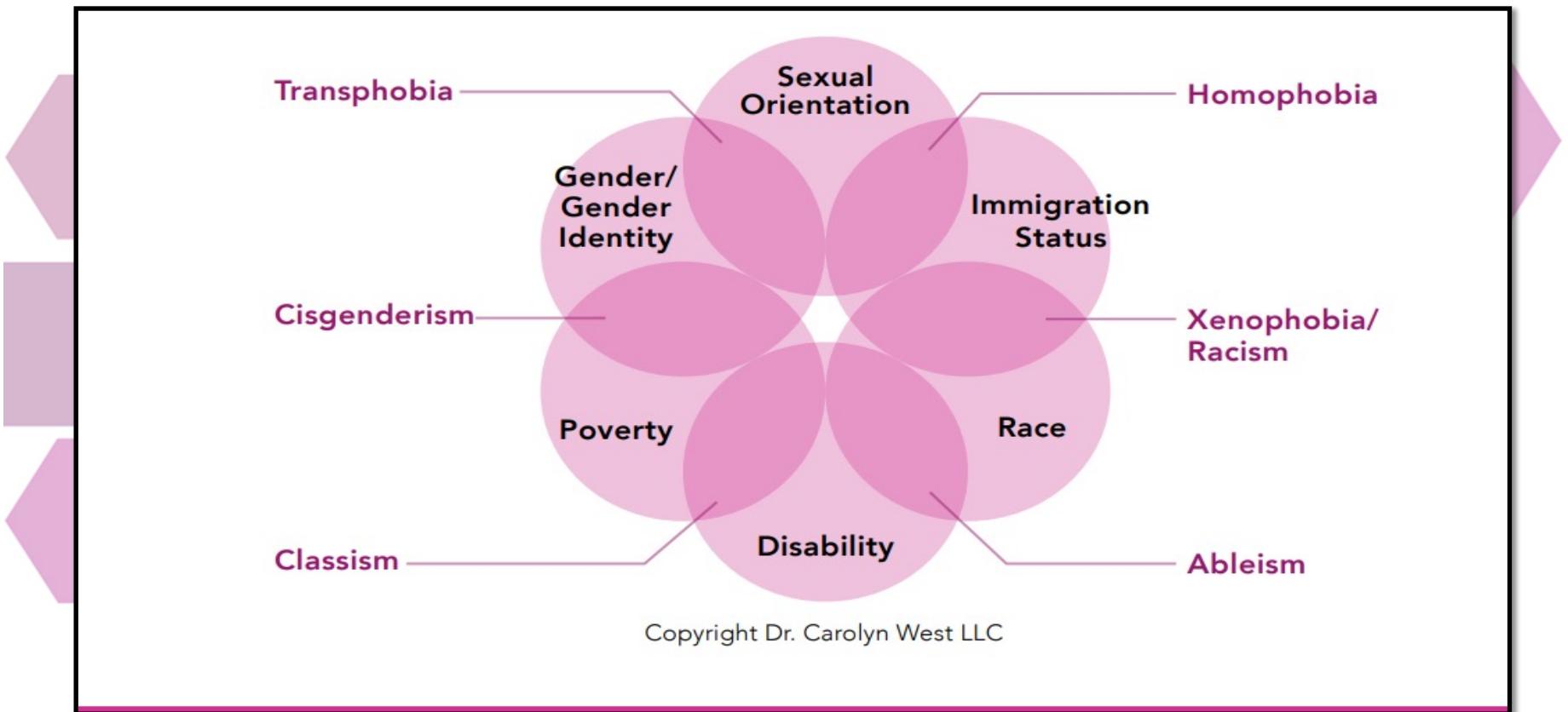
#SayHerName

*“There is no hierarchy of oppressions” – Audre Lorde (2007)*

## Part 2: Taking an Intersectional Approach

*“If we aren’t intersectional. some of us, the most vulnerable, are going to fall through the cracks” – Kimberle Crenshaw (1991, p. 1246).*

# Intersectionality



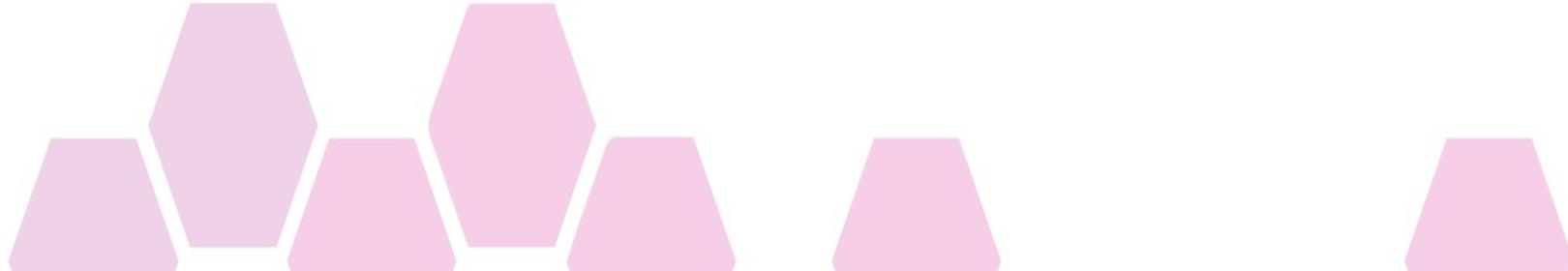
# Multiple marginalized identities

## **Increase the risk of victimization**

*"The relationship between the abuse and the [violence] are very closely tied to the experience of dual oppression of being Black and female. I believe I accepted a lot of what I accepted because I was never encouraged not to, as a woman or as a Black person. I [became] used to being treated badly"* (Taylor, 2005, p. 1482-1483).

## **Increase barriers to help-seeking**

*"It seems like the more layers you have: female, person of color, immigrant, former substance user, any of these barriers and labels that get attached, I think, the more scared, more intimidated"* (Goodman, Fauci, Hailes, & Gonzalez, 2020, p. 231).



## **Survivor-Centered Care**

No one person embodies all the traits, behaviors, and attitudes of their racial group. Black survivors are diverse and have their own unique experiences with abuse. Advocacy and safety strategies should be crafted to meet the needs of each survivor's experience of violence, culture, life circumstances, and identities.



# Survivor Centered Care

*"I held in a lot. Until I got old enough I started to go to church again. I was talking to my bishop's wife. I got in the car and told her everything. We talk on the phone and it actually feels good to let all of that out" (St. Vil, Sabri, Nwokolo, Alexander, & Campbell, 2017, p. 65).*

*"My preacher is my healer and he wants to heal me from being a lesbian but doesn't want to heal me from the pain of being abused...because that's my punishment" (Simpson & Helfrich, 2014, p. 453).*

# Culturally Responsive Care

- What is your location?



## Oppression and Privilege Self-Assessment Tool

In a quiet and safe space, take some time to read through these areas, circling those that apply to you. As you go through the statements, identifying the areas in which you have privilege or find yourself at an intersection of oppression, be *kind to yourself*. The more we deepen our understanding of ways in which we can advocate for spaces free of violence, the more we learn about ourselves and this can result in some personal discomfort. We invite you to lean into this discomfort, allowing these feelings to provide a space for genuine understanding and empathy.

### Disadvantages Oppression

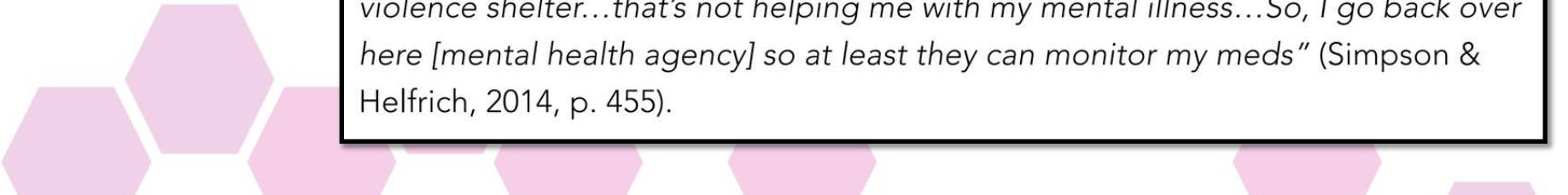
1. I worry about not having enough money to pay for housing, food, clothing, or education.
2. I cannot talk openly about who I am dating or in love with.
3. I face physical barriers accessing public buildings and using the transportation systems.
4. I don't own a car.
5. I cannot afford to travel nationally or internationally, whether it be for pleasure or educational purposes.
6. I worry that people may not hire me because of the color of my skin, my name, the way I look, or my gender.
7. I have a disability.
8. At home, while growing up, my family spoke a language other than English.
9. I worry about being harassed or attacked because of my gender or sexual orientation.
10. My gender does not match the gender I was assigned at birth.
11. I tend to see people of my racial or ethnic group portrayed negatively in newspapers, television, movies, and advertisements.
12. Because of financial hardship, I tend to put up with a number of problematic situations.
13. I need to hide, change, or minimize parts of my identity to reduce the chances of mistreatment.
14. The holidays I tend to celebrate are not observed as national holidays.
15. I am not white.
16. I am not a man.

### Advantages Privilege

1. I, or my family, can afford to live in a comfortable home and have enough money to meet our needs.
2. I can talk openly about my partner or loved one.
3. I can easily use public buildings and transportation systems.
4. I own a car.
5. I can afford to travel, nationally or internationally, whether it be for pleasure or educational purposes.
6. I don't worry about being hired because of my appearance, color of my skin, or gender.
7. I don't have a disability.
8. At home, while growing up, my family spoke English.
9. I don't worry about being harassed or attacked because of my gender or sexual orientation.
10. My gender matches the gender I was assigned at birth.
11. There are many positive images of people from my racial or ethnic group portrayed positively in newspapers, television, movies, and advertisements.
12. When problematic situations arise, I tend to have the financial means to solve them.
13. I don't need to hide, change, or minimize parts of my identity to reduce the chances of mistreatment.
14. The holidays I celebrate are recognized as national holidays.
15. I am white.
16. I am a man.

*Adapted from Diane Goodman and Paul Kivel*

# Trauma-Informed Care



*"You offer me this place over here for mental illness. Then I go to this domestic violence shelter...that's not helping me with my mental illness...So, I go back over here [mental health agency] so at least they can monitor my meds" (Simpson & Helfrich, 2014, p. 455).*

Advocates can avoid asking survivors to fragment themselves and to present one identity when they seek help, while neglecting other important parts of themselves. Tonya Lovelace, a nationally recognized advocate said:

*"There are multiple identities that people live in, and the idea that any service that only serves one piece of that identity doesn't really see us. So, then, my full self is not at your table, you're not seeing my full self...And that is not justice"* (Kippert, 2020).

# Strengths-Based Approach

*"The violence is on one end, the racism and sexism is another end. And basically you are pretty much fighting both of them...I think, by being a survivor, it has given me the instinct to know how to fight, to know how to survive..." (Taylor, 2005, p. 1482).*

I think we fear the visibility  
without which we cannot  
truly live...and that visibility  
which makes us most  
vulnerable is that which also is  
the source of our greatest  
strength

- Audre Lorde



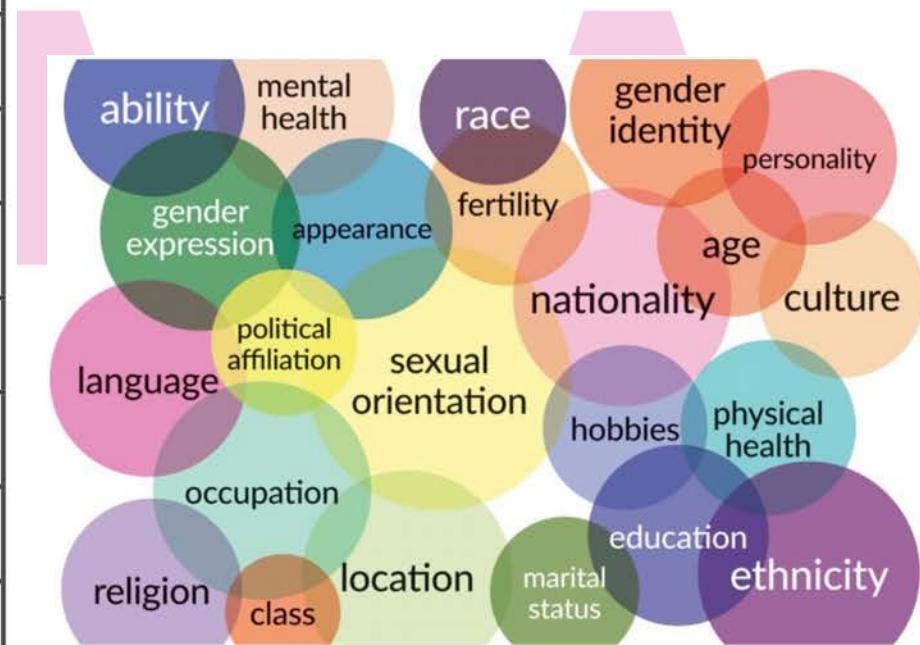
# Strengths-Based Approach

If appropriate, ask the survivor to reflect on how her intersecting identities have influenced her experiences with partner violence and how her various identities have been a source of resilience:

- How have your identities (age, visible and invisible disabilities, religion/spirituality, social economic class, sexual orientation, gender identity, ethnicity, and immigration status) influenced your experience with IPV?
- What cultural or racial barriers have you faced on your journey in healing from IPV?
- How has your cultural and racial identity positively impacted your healing journey and provided a source of strength (Moore-Lobban & Gobin, 2022)?

## ADDRESSING Model

<b>A</b>	Age and generational influence
<b>D</b>	Developmental
<b>D</b>	Disability
<b>R</b>	Religion or spiritual orientation
<b>E</b>	Ethnicity and racial identity
<b>S</b>	Socioeconomic status
<b>S</b>	Sexual orientation
<b>I</b>	Indigenous heritage
<b>N</b>	National origin
<b>G</b>	Gender identity



## What about Black women from other countries?



- How is IPV similar and different from U.S. born Black women?
- It's complex—depends on reasons for immigration, generational status, level of acculturation, history.



# A NATIONAL EPIDEMIC: FATAL ANTI-TRANSGENDER VIOLENCE IN THE UNITED STATES IN 2019



HUMAN  
RIGHTS  
CAMPAIGN  
FOUNDATION

## INTRODUCTION

At least 22 transgender and gender non-conforming people have been killed in the U.S. since the beginning of 2019.

**91%**  
of them were  
Black women.

**81%**  
were under the  
age of 30.

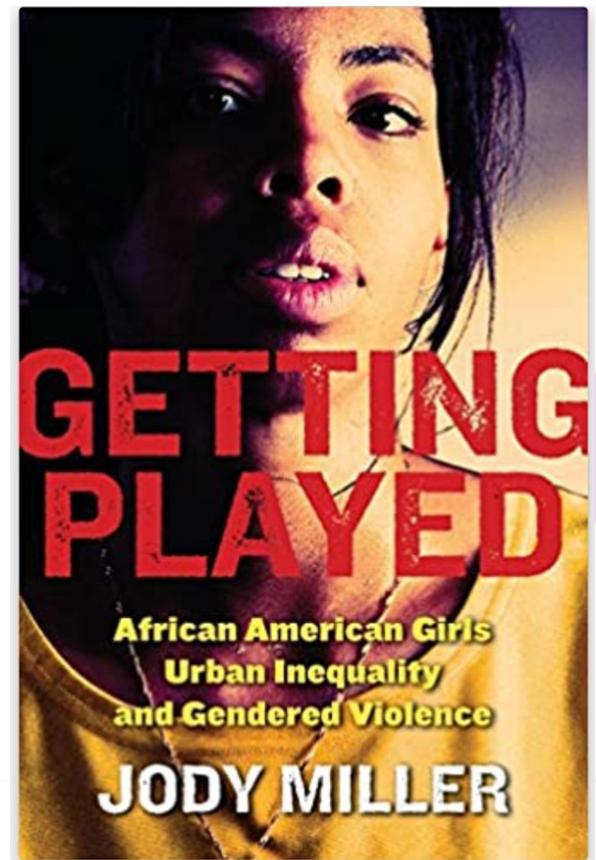
**68%**  
lived in the  
South.

# Young Women



BET

February Is Teen Dating - Image 1 from Teen Dating  
Violence: 10 Signs You're in an Abusive Relationship...





## **Increasing Access to Healing Services and Just Outcomes for Older African American Crime Survivors: A Toolkit for Enhancing Critical Knowledge and Informing Action within the Crime Victim Assistance Field**

### **Increasing Access to Healing Services and Just Outcomes for Older African American Crime Survivors: A Toolkit for Enhancing Critical Knowledge and Informing Action within the Crime Victim Assistance Field**

Juanita Davis , Katie Block



Older African Americans experience crime and violence at the intersections of race, age, class, and other identities. Systemic and institutional challenges create barriers for older African American survivors seeking services and supports to heal from harm. This toolkit offers victim services providers and criminal justice systems stakeholders information and practical strategies to enhance their capacity to identify, reach, and serve older African American victims.

#### **Toolkit**

This includes a guide with five content modules. Within each module are video clips, including: an expert panel discussing the specific challenges faced by older African American victims, and/or, older survivors sharing their stories of victimization and the unique dynamics at play in their journey toward healing and recovery. Each module also contains a set of reflection questions designed to help readers synthesize the key points and explore how the strategies offered can be applied in their work. This toolkit also includes a workbook with the reflection questions for users to reflect on the topics explored in the modules.

#### **Webinar Recording**

This webinar introduces information to learn about a new resource for the crime victims field, the Increasing Access to Healing Services and Just Outcomes for Older African American Crime Survivors toolkit. This resource centers the voices and lived experiences of older Black victims seeking supports and services from the crime victims field and it names the various structural oppressions within society and the victim assistance field which limit the ability of older African American victims to access critical supports and services. Through a series of guided conversations, participants in this event will interface with the different parts of this toolkit, including content modules, video clips, and a reflections workbook. Participants will also have the opportunity to dialogue with and learn from subject matter experts and staff of the National Clearinghouse on Abuse in Later Life about specific strategies to enhancing services for older African American victims in their work. Moderated by Juanita Davis and Katie Block and featuring panelists LaTrice Buck.

## Middle-Class Black Women



*“The lady looked at my perfectly manicured nails and hair and came to the conclusion that I didn’t need any help. When she saw my car, she was like ‘what do you need? You’re driving a BMW that I couldn’t afford if I wanted to.’ The scary thing was my husband told me he was going to kill me. I had bruises all over my body...after her reaction, I just left. I was embarrassed that I had even asked”*

## Contact Information

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## Connect with us



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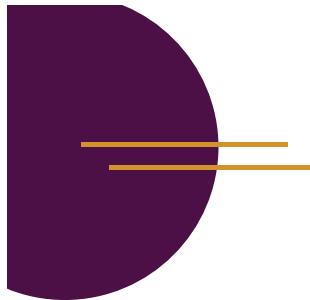
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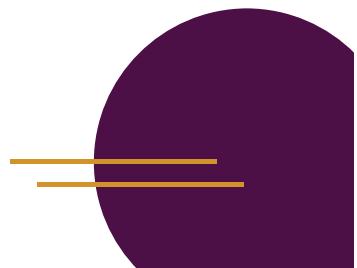
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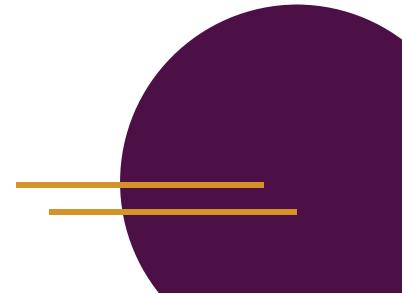
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# Thank you!

WE CAN'T WAIT TO WORK WITH YOU.



National Resource Center  
on Domestic Violence