

Advocacy Information Packet



National Indigenous Women's Resource Center

INTRODUCTION

This Advocacy Information Packet is a collection of articles, booklets and handouts covering a range of topics about advocacy with emphasis on work with survivors of intimate partner violence. These materials offer information that is critical to clarifying and strengthening the role of advocates and their work to end violence against women and other survivors. The goal is to create a basic understanding about the role of advocates, the nature of advocacy and some key issues integral to effective advocacy. These materials can be helpful for new advocate orientation, in-services, cross-trainings and public education events.

Some topics such as legal advocacy, sex trafficking, children's issues and policy work are important aspects of advocacy that are not included in this particular packet to avoid creating an overwhelming book versus a fairly comprehensive starting place. Please see the National Indigenous Women's Resource Center's Resource Library, which offers a range of articles, booklets and other advocacy materials, including special collections and webinars with toolkits, on additional topics. If you have questions, suggestions, or possible additions to this Advocacy Information Packet or the Resource Library, please contact us through our Contact Us page.

In the near future, NIWRC will be offering an additional Information Packet on shelter and other safe spaces, and special collections on the root causes, dynamics and tactics of intimate partner violence/battering, and "old-school" advocacy. Also, look forward to NIWRC's 40-hour Advocacy Curriculum for use by tribal / Native domestic violence programs to provide basic training for new advocates. Parts of this curriculum can be adapted for use in other educational initiatives facilitated within your local community.

We hope you find the materials in this packet and all of our other resources helpful in your advocacy to end violence against Native women and all of our relatives. Together we can create the change needed to reclaim our traditional life ways based upon spirituality, compassion, equity and respect.

(Note: This resource is subject to change.)





FOUNDATION

The Three Sisters

One spring morning, three sisters left camp with their buckets to get water from a nearby stream. The stream was narrow, but deep and fast flowing. The sisters were enjoying the warm weather and visiting as they walked to the stream. But as they got closer to the stream, they began to hear the cries and screams of babies. The sisters dropped their buckets and ran to the stream. To their horror, there were dozens and dozens of babies floating down the stream; many were drowning.

The first sister jumped in and began catching and throwing babies on to the bank of the stream as fast as she could. The second sister yelled, "You're not saving enough babies!" She jumped in and began teaching the babies to swim so they could save themselves.

The third sister began running up stream. Her sisters yelled at her to help. She turned and hollered, "I am. I'm going up the stream to see how the babies are getting in the water in the first place."

The first sister responded to the immediate, obvious crisis. Her action is similar to crisis intervention, crisis line and shelter work done to assist women who are battered. Sometimes we *jump into* action with different kinds of programs trying to save lives, because the crisis is so severe. These actions save lives. But these actions are *reactions* – we respond after the violence has occurred.

The second sister's actions are less geared to the immediate crisis. She places responsibility on the babies for saving themselves. This approach represents the typical individualistic, mental health response to violent crime, i.e., battered women are "*dysfunctional*;" if women "*fixed*" themselves they wouldn't be battered, or they would make themselves safe. The accountability of offenders and community for violent crime is often ignored. These reactions minimize the violence and can be victim-blaming.

The third sister seems to not respond to the overt crisis; she looks past the immediate and seeks the **root cause** of why the babies are in the stream. She seeks to understand the larger picture before choosing an effective response. She works to end the crisis. This is the goal of *social change* work: transformation of society by addressing the root cause. This sister understands the connections between the *roots* – the philosophy of the program, and its *outgrowth* – the results.

The reactions of the first two sisters assume that violence is an unavoidable aspect of reality. The third sister understands that the drowning babies, i.e. violence against women and violence in general, are not inescapable realities. The third sister knows that by understanding and confronting the *root cause* of violence, we can end violence through social change and

transformation. She knows the solution lies in reclaiming the tradition, natural belief systems of Native people.

The *root cause* of violence against women (and Native peoples as a whole) is an unnatural belief system. This unnatural belief system was imposed on Native communities through colonization, resulting in Native women being denied the right to control their own bodies and lives. This unnatural belief system condones and encourages violence against women, endorses misperceptions of male superiority, ownership of women and children, and men's rights to control women, children and the environment. Battering cannot occur without these unnatural beliefs that objectify women and justify violence against them. Throughout history, attempts to destroy tribal sovereignty began with the destruction of women's sovereignty. Destroy the women – destroy the culture. The major tactic of colonization was to destroy the family, especially targeting women, the backbone of Native cultures, and children, the future of Native nations.

Before colonization, the vast majority of Native peoples had non-violent life ways based on an understanding of the natural world. This natural belief system requires and encourages non-violence, respect and compassion, and supports the relationships between all things in Creation. This natural belief system recognizes women as sacred. Reclaiming the life way that this natural belief system fosters is the goal of social change.

Battering does not occur within a belief system that acknowledges and honors the power, role and sacredness of women. When Native women are respected as sacred, and their safety is a priority, the safety of Native families and all tribal citizens is positively impacted. Understanding the root cause of violence against women helps direct our work for social change to end violence against all members of our community.

Our work must move beyond the limitations of a “direct services” approach of mental health or social services. Our work must become advocacy and social change. As we move forward, program development must make consistent connections between the root cause of violence and the way programs do their work.



Intimate Partner Violence

Gender-based institutionalized system of over-lapping continuous violent tactics used to maintain power & control



Except for male privilege, tactics are not listed in order of use or power.

UNNATURAL POWER & CONTROL

IPV/Battering: the purposeful use of a system of multiple, continuous tactics to maintain power and control over another. This intentional violence results from and is supported by unnatural, misogynistic, sexist societal and cultural belief systems. IPV/Battering is a crime against individuals, families and communities.

Intimate Partner Violence/Battering is:

- an institutionalized
- system
- of over-lapping
- continuous
- purposeful
- violent tactics
- used to maintain power & control
- over an intimate partner, usually a woman.

Physical and sexual violence are the “enforcers.” It only has to happen once. After that, it may only take a certain look or gesture that says: “I beat you, raped you once, I can do it again.”

Batterers may use tactics differently. Often many are being used all at once. The purpose is the same: power and control. Please remember, if you are leaving to be very careful. Do not warn him you are leaving. Get help. Batterers will increase their violence to maintain control.

The tactics of IPV/battering include many forms of abuse and violence used to maintain power and control without the exertion physical and sexual violence require – and often with less threat of law enforcement involvement because, though potentially lethal, many tactics are not necessarily against the law. Many (not all) of the tactics are described below include. *Constant fear for one’s life is a very real result of these tactics.*

IPV/Battering is more than a mental health issue. Though, battering of males by females happens, IPV is gender based. In approximately 95% of IPV/battering, the victims are female, the offenders/abusers are male. This form of violence also happens within Two Spirit/LGBTQ relationships. It is serial, violent crime. Violence against women and domestic violence is rooted in mainstream culture. It is not natural. Before colonization, violence against women and domestic violence were extremely rare within indigenous cultures.



TACTICS:

Male Privilege

It is the permission-giver for all violence against women and general disrespect of ALL women.

- Is trusted and is seen as more credible than women.
- Experiences fewer barriers. More access to money, jobs, etc.
- Gets to do what he wants, when he wants.
- Allows for the expectation that women should be accommodating
- Feeling of entitlement to make big decisions alone expecting women to “make it happen.”
- His/men’s ways is the right way and more valuable than women’s
- Makes men roles superior and women roles inferior.
- No consequences for bad behavior.
- Feeling of entitlement to monopolize conversations and discussions.
- Feeling of entitlement to interrupt and/or ignore women.

Coercion and Threats

- Makes/carries out threats to do harm to the victim, the children or family and friends.
- Threatens to kill the victim, the children, family or friends.
- Threatens to take the children, either legally or by kidnapping.
- Threatens to commit suicide.
- Threatens to report the non-offending parent to welfare.
- Makes the victim do illegal things in order to blackmail.

Intimidation

- Causing fear by using aggressive looks, actions or gestures.
- Smashing things, putting holes in walls and destroying property.
- Killing pets.
- Displaying weapons.
- Reminding her how he has or can hurt her. Verbal threats
- Stalking, including sitting at her place of work, school, etc.

Isolation

- Controls what the person does, sees, talk to and/or read.
- Limits outside involvement by not taking away the car, ensuring the children are always with the non-offending parent, limiting access to money, etc.
- Destroys personal belongings (clothing, etc.).
- Public humiliation.
- Constantly questions (interrogation).
- Takes the phone.
- Constant surveillance.
- Forces her/him to give up supportive relationships and outside connections.

Minimizes, Lies and Blames

- Minimizes the violence
- Ignores and belittles victim's concerns.
- Says the violence didn't happen.
- Says the victim caused/deserved/provoked it.
- Shifts responsibility for the violence:
 - "She made me do it."
 - "I didn't hit her hard."
 - "She should have just shut up."
 - "It was her own fault."
 - "I had to teach her a lesson."
 - "I was drunk."
 - "I was abused as a child; I can't help it."

Emotional Abuse

- Put downs and name calling.
- Makes the victim feel crazy, always wrong or stupid.
- Belittles feelings, opinions and reactions.
- Plays mind games.
- Humiliates and criticizes. Tells her she's a bad mother, wife, woman.
- Makes the victim feel guilty for the batterer's feelings and behavior.
- Blames the victim for their violence and consequences.
- Stops the individual from doing what she/he needs to or wants to do.
- Tells the victim how to dress, look or act.
- Ignores and neglects the victim.

Abusing Children

- Convinces the children that the violence is the non-offending parents' fault, that parent is stupid/sick/bad and that the children need a father even if he's violent.
- Uses the children to relay "mind game" messages.
- Uses visitation and custody to harass or do violence.
- Threatens to take the children far away.
- Believes that children are property
- Convinces her/him that her/he'll get custody if she/he leaves; she/he stays – abuse/violence continues.
- Does not pay child support (if living in separate households); children may live in poverty.

Economic Abuse

- Prevents the victim from working.
- Makes the victim ask for money or gives an allowance.
- Takes the individual's money.
- Doesn't let her/him know about or have access to family income.
- Makes her/him prove how she/he spent money.
- Doesn't pay child support.
- Spends money on his/her "toys," not necessities.
- Makes her/him work; he/she doesn't.

Ritual Abuse

- Makes prayers against her.
- Defines spirituality as masculine.
- Stops her from practicing her ways.
- Uses spiritual ways as a threat.
- Say "God doesn't allow divorce."
- Say menstruation time makes her "dirty."
- Native women don't sweat with men, don't sit at drums.
- Says a women's participation in ceremonies is to support men only.
- Misinterprets Traditions or Bible to justify violence/abuse.

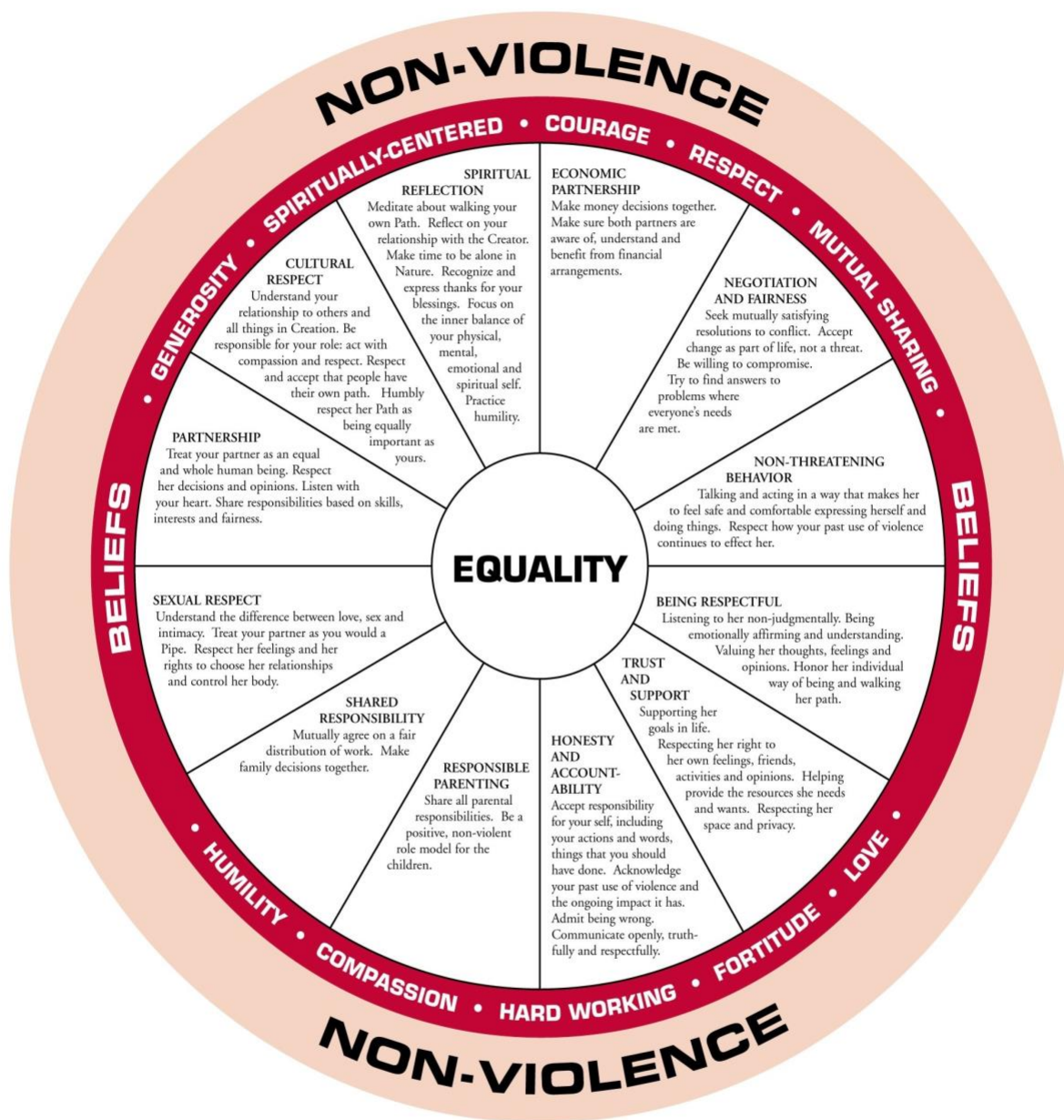
Cultural Abuse

- Competes over "Indianness."
- Misinterprets culture to prove male superiority and female submission.
- Uses relatives to execute violence.
- Says "real" Native women don't wear make-up, wear slacks, talk or be independent.
- Denies the spiritual power and role of women.
- Distorting the old-time practice of having more than one wife to justify having affairs, or multiple, simultaneous relationships.
- Participates in ceremonies, then batters the partner, abuses the children.

Collusion

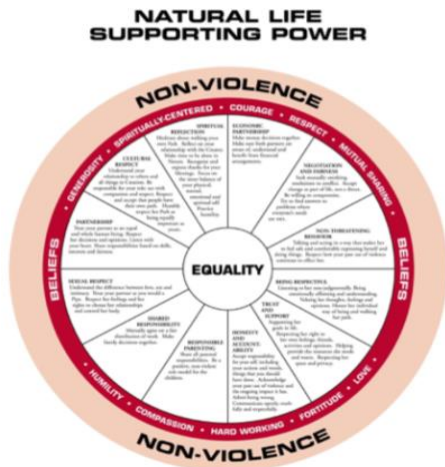
- Any act that discounts, condones, supports or ignores any of the tactics that batterers use to maintain power and control over their partner.
- Makes the abuser/batterer more powerful by reinforcing use of abusive and violent tactics.
- Increases violence against the victim, their children, family and friends.

NATURAL LIFE SUPPORTING POWER



EQUALITY
is natural life-supporting power
that is grounded in spirituality, requires
non-violence and is based on character.

Equality Wheel: Natural Life-Supporting Power Descriptions



Our work to end violence against Native women and recreate peaceful, harmonious communities is based on reclaiming our traditional values, belief systems and life ways. The natural, traditional life way rests upon values, which are reflected in our behaviors and relationships with all things.

The key values of this life way are: Compassion, respect, generosity, mutual sharing, humility, contributing/industriousness, courage, love and being spiritually centered.

These values are expressed in the manner we behave and relate to others. The following are brief descriptions of how these values can be shown. Challenge yourself to find other ways to create life-supporting power in you and others.

Being Respectful:

Listening to her non-judgmentally. Being emotionally affirming and understanding. Valuing her thoughts, feelings and opinions. Honor her individual way of being and walking her path.

Sexual Respect:

Understand the difference between love, sex and intimacy. Treat your partner as you would a Pipe. Respect her feelings and her rights to choose her relationships and control her body.

Partnership:

Treat your partner as an equal and whole human being. Respect her decisions and opinions. Listen with your heart. Share responsibilities based on skills, interests and fairness.

Cultural Respect:

Understand your relationship to others and all things in Creation. Be responsible for your role: act with compassion and respect. Respect and accept that people have their own path. Humbly respect her Path as being equally important as yours.

Spiritual Reflection:

Meditate about walking your own Path. Reflect on your relationship with the Creator. Make time to be alone in Nature. Recognize and express thanks for your blessings. Focus on the inner balance of your physical, mental, emotional and spiritual self. Practice humility.

Trust and Support:

Supporting her goals in life. Respecting her right to her own feelings, friends, activities and opinions. Helping provide the resources she needs and wants. Respecting her "space" and privacy.

Honesty and Accountability:

Accept responsibility for your self, including your actions and words, things that you should have done. Acknowledge your past use of violence and the ongoing impact it has. Admit being wrong. Communicate openly, truthfully and respectfully.

Responsible Parenting:

Share all parental responsibilities. Be a positive, non-violent role model. Nurture your children; don't "baby-sit." Acknowledge that being an "absent parent" is neglect, not an excuse for not providing financial, emotional and other types of support in the best way you can. Parenting is difficult, get support and words of wisdom from your relatives when needed.

Shared Responsibility:

Mutually agree on a fair distribution of work. Make family decisions together. Do your share without being reminded. Seek help or learn more about the things you are responsible for if needed.

Economic Partnership:

Make money decisions together. Make sure both partners are aware of, understand and benefit from financial arrangements.

Negotiation and Fairness:

Seek mutually satisfying resolutions to conflict. Accept change as part of life, not a threat. Be willing to compromise. Try to find answers to problems where everyone's needs are met.

Non-Threatening Behavior:

Talking and acting in a way that makes her to feel safe and comfortable expressing herself and doing things. Respect how your past use of violence continues to affect her.



Medical Model

vs.



Grassroots Model

Direct Service/Counseling:

- questioning seen as negative/resistant
- no socializing / personal contact
- professional sets rules and limits of relationship
- limited self-disclosure/ “emoting”
- illness/problem / “sick role”
- diagnosis/prognosis/ tangible measures symptoms
- focus on individual - isolated
- limited relationship/ referral
- \$, insurance/ limited time/in office
- questions credibility
- formally educated; specializes
- objectification
- eligibility/paperwork
- compartmentalized, single issues
- works with individual behavior

Social Change/Advocacy:

- expertise by experience
- supports your decisions & your wishes
- relate as relative/peer
- relationship mutually determined; open relationship
- balance all aspects of self
- personal sovereignty; power/ control issues of systems & society
- focus on individual in context of oppression & relationships
- seeks connections/ inclusive
- limited paperwork/ eligibility
- questioning encouraged
- life experience and cultural/ spiritual knowledge valued
- see people as whole human beings
- paperwork secondary to compassion and needs
- provide range of resources: childcare, transportation, public education, etc.
- work with systems, homes, community etc.

NOTE: Up to 96% of victims/survivors of battering are female, so the *words woman, women, she and her* are used in these documents. However, men who are victims of battering should receive the same kinds of advocacy and resources in ways that meet their needs. Additionally, victims/survivors who are LGBTQ2S also have the right to advocacy and resources that are responsive to challenges and barriers posed by heterosexism.

For a Woman / Survivor Who Has Been Battered

Safety means...

- ...being protected from violence everywhere she goes
- ...having her children with her and being able to keep them safe
- ...being heard and believed
- ...being supported in her decisions
- ...having a home and the things she needs to support herself and her children
- ...not having to explain what she did to survive
- ...having the time, space and support to regain power and control over her life and heal from trauma
- ...not having to justify what she wants and needs
- ...accurate information about battering, oppression, her culture and resources
- ...knowing his violence is not her fault
- ...not having to be “perfect” to be protected or respected or provided resources or advocacy
- ...being able to walk her path without barriers or fear
- ...being treated as a woman, an individual - not sick, crazy, a case or part of the "problem"
- ...having her cultural and gender identity & preference respected
- ...being treated as a Relative

Accountability means...

- ...law enforcement and the legal system enforce the law: not discounting violence because they are married/not married, gender-identity/preference, job status etc.
- ...the batterer can't manipulate the system to control her or blackmail her into returning
- ...stopping him from being violent to her in any way
- ...stopping him from using child visitation or custody to frighten, harass or assault her
- ...stopping him from intimidating her, including in court
- ... stopping him from using his friends or relatives to frighten, harass or assault her
- ...he is confronted about his violence and consistently held to the consequences
- ...he is held to the consequences of his actions, even if survivor isn't liked or approved of
- ...people model behavior for him by showing her respect, compassion, humility and providing her support and resources
- ...treating him as a Relative who can make changes, but is responsible for his actions

SOVEREIGNTY

An Inherent Right to Self-Determination



“When the legal concept of sovereignty was first challenged in the Supreme Court by the state of Georgia in the 1820s, Chief Justice Marshall took pains to examine this legal apparatus and to explain how it functions... ‘Sovereignty, explained Marshall, exists as a pre-condition among self-governing entities and acts as a legal shield protecting all rights and privileges reserved and implied by nationhood. In fact, treaties were a granting of rights from the tribes, to the federal government.’”

–Paul VanDevelder; 1999@ Seattle Times

“...Indian tribes must act like Indians. That’s the only justification for preserving internal sovereignty... So if we’re going to have internal sovereignty, we’re going to have to bring back the majority of social traditions... if we don’t bring those traditions back, then the problems those traditions solved are going to continue to grow. Then we’ll have to get funding to set up programs to deal with those issues...When you set up programs, you are exercising your internal sovereignty, but the funding sources determines how the program is going to operate and then the funding source defines internal sovereignty.”

–Vine Deloria- American Indian Research and Policy Institute

TRIBAL SOVEREIGNTY:

ALL TRIBAL NATIONS HAVE AN INHERENT RIGHT TO:

- 1) A land-base: possession and control is unquestioned and honored by other nations. To exist without fear, but with freedom.
- 2) Self-governance: the ability and authority to make decisions regarding all matters concerning the Tribe without the approval or agreement of others. This includes the ways and methods of decision-making, social, political and other areas of life.
- 3) An economic base and resources: the control, use and development of resources, businesses or industries the Tribe chooses. This includes resources that support the Tribal life way, including the practice of spiritual ways.
- 4) A distinct language and historical and cultural identity: Each Tribe defines and describes its history, including the impact of colonization and racism, tribal culture, worldview and traditions.

◆ ◆ ◆ ◆ ◆
Colonization and violence against Native people means that power and control over Native people’s life way and land have been stolen.

As Native people, we have the right and responsibility to advocate for ourselves and our relatives in supporting our right to power and control over our tribal life way and land - tribal sovereignty.

NATIVE WOMEN’S SOVEREIGNTY:

ALL NATIVE WOMEN HAVE AN INHERENT RIGHT TO:

- 1) Their body and path in life: the possession and control is unquestioned and honored by others. To exist without fear, but with freedom.
- 2) Self-governance: the ability and authority to make decisions regarding all matters concerning themselves, without others’ approval or agreement. This includes the ways and methods of decision-making in social, political and other areas of life.
- 3) An economic base and resources: the control, use and development of resources, businesses or industries that Native women choose. This includes resources that support individual Native women’s chosen life ways, including the practice of spiritual ways.
- 4) A distinct identity, history and culture: Each Native woman defines and describes her history, including the impact of colonization, racism and sexism, tribal women’s culture, worldview and traditions.

◆ ◆ ◆ ◆ ◆
Violence against women, and victimization in general, means that power and control over an individual’s life and body have been stolen.

As relatives of women who have been victimized, it is our right and responsibility to be advocates supporting every woman’s right to power and control over her body and life - personal sovereignty.

“It was to the advantage of white men to mislead white women, and themselves, into believing that their treatment of women was superior to the treatment by the men of the group which they considered savage. Had white women discovered that all women were not mistreated, they might have been intolerant of their men’s abusiveness.”

–Paula Gunn-Allen, Laguna, Sioux and Lebanese, poet, novelist and scholar

Sitting Bull to Alice Fletcher, anthropologist 1881, Ft. Randall: “You are a woman. You have come to me as a friend. Pity my women. We men owe what we have to them. They have worked for us...but in the new life their work is taken away. For my men I see a future; for my women I see nothing. Pity them; help them if you can.” He took a ring from his finger and gave it to Alice Fletcher to remind her of his request.”

–Joan Mark; *A Stranger in her Native Land: Alice Fletcher and the American Indians*

“While the white man was calling the Indian woman a drudge, old man He Dog, at 92 told me: “It is well to be good to women in the strength of our manhood, because we must sit under their hands at both ends of our lives.”

–Mari Sandoz from *Oglala Women* by Marla Powers

“Where are your women?” The speaker is Attakullakulla, a Cherokee chief renowned for his shrewd and effective diplomacy. He has come to negotiate a treaty with the whites. Among his delegation are women “as famous in war, as powerful in the council.” Their presence also has ceremonial significance: it is meant to show honor to the other delegation... Implicit in their chief’s question, “Where are your women?” the Cherokee hear, “Where is your balance? What is your intent?” They see the balance is absent and are wary of the white man’s motives. They intuit the power of destruction.”

–From the work of Andi Smith; Marilou Awiakta, Cherokee

“...Methodist minister Colonel John Chivington’s policy was to “kill and scalp all little and big because nits make lice.” Says Stannard, “No population can survive if its women and children are destroyed... This slaughter of innocents {is not} anything but intentional by design.”

–David Stannard, *The American Holocaust*

“The celebration of the Battle of Little Big Horn - Victory Day - is not about celebrating Native men’s “warrior image.” Custer had targeted women and children to demoralize Native men and destroy Native people. The Battle of Little Big Horn was about the defense of Native women and children, who are the life and future of the people.”

–Marlin Mousseau, Oglala Lakota, Descendant of Crazy Horse and survivors of Wounded Knee

Photos courtesy of Indian Country Today

“A nation is not defeated until the hearts of its women are on the ground. Then it is done, no matter how brave its warriors or how strong its weapons.”

–Cheyenne proverb



Sovereign Women Strengthen Sovereign Nations



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Originally prepared and written by Sacred Circle National Resource Center to End Violence Against Native Women.

SOVEREIGNTY

An Inherent Right to Self-Determination





ROLE OF ADVOCATES

THOUGHTS OF AN ADVOCATE

I was so busy today. We had a couple of women and their children who came to the shelter today badly in need of safety and help.

I hurried about after hearing their stories and doing intake to help meet some of their basic human needs such as food, a bed and personal essentials. They came here in a hurry with basically nothing but the clothes on their backs. Between doing this and answering the phone, my mind was in a whirl and I was feeling angry and frustrated. I was angry at the system. Angry at the police, angry at the Courts and angry at the abusers who caused such pain for these women.

Feeling overwhelmed and tired I finally sat down to catch my breath. I looked up and there sat my sisters at the dining room table feeding their children. Visible bruises, cuts and bite marks on their faces, legs, and arms inflicted by their partners, the father of their children. I stared and stared at them. Yes, here sat our women feeding our sacred babies.

As I stared and what I began to see brought a lump to my throat and made it hard to swallow as the tears welled in my eyes. What I began to feel in the room was so strong that I could almost see them. It wasn't just the visible bruises and cuts. What I saw was the tattered, bruised, torn spirits of my sisters. Here was the reality. This is what I'll never forget. We can go to workshops, conferences; meetings to discuss the whys, should've's, could've's of the battered women and the batterer. But this is the reality. Here were my sisters, my daughters, my nieces, my granddaughters, my auntie, my mother. And yes, she was still going on tending her children. Wow! What strength! What Courage! What perseverance our Lakota women have. Now tell me, who is the real Lakota warrior? I honor them and I respect them... my sisters. This is why I am here. To help, to persevere, to use my frustrations and anger to help make a difference so we don't have to live like this anymore.

By Gloria Cournoyer, Oglala Lakota, Shelter Coordinator, Cangleska, Inc.

In Brief: Advocate's Role from an Indigenous Perspective – 2020

NOTE: *Up to 96% of victims/survivors of battering/IPV are female, so the words “woman”, “women,” “she” and “her” are used in this document. However, male victims/survivors, those who are LBGTQ2S, those who are differently-abled, and other Relatives from disenfranchised groups also have a right to advocacy and resources in ways that meet their needs. Advocacy includes addressing challenges and barriers posed by sexism, heterosexism, classism, racism and other forms of oppression.*

Context:

The passage of the Violence Against Women Act of 1994 (VAWA) has resulted in the institutionalization of advocacy. This, in turn, has shifted the definition of advocacy from a grassroots, pro-active, social change framework, to a definition framed by a social work perspective – advocates as service providers. Here the definition of advocate is based upon its original grassroots, activist foundation created largely by women survivors of battering and sexual violence. Their vision and work created the U.S. domestic violence shelter movement, initiated many policy and legislative changes, including mandatory arrest laws and the VAWA itself.

Historical perspective is important. Briefly, beginning in the 1970's the shelter movement in the US, was modelled after efforts of women in England. Women who were battered opened their doors to other women who were battered – women helping women. Shelters were women's homes and church basements. They survived on donations, bake sales and the like. Identifying as an “advocate” usually meant you were a survivor of battering and/or sexual violence. The personal experience of being battered was motivation and integral expertise for the majority of advocates. The Family Violence Prevention and Services Act in 1984 provided the initial federal funding for shelters, though donations and local fund-raising were, and in many instances still are, necessary to keep shelter doors open. The VAWA made significant changes in resources for advocacy and shelters. However, domestic violence shelters, especially in Indian Country and rural areas, remain scarce. Grassroots advocates/ survivors, and their allies, can be credited for bringing domestic violence and intimate partner violence (i.e. battering) as central to violence against women, out of the shadows and making violence against women a national, criminal justice and human rights issue. It opened the door to addressing other issues of oppression, including violence within and against the LBGTQ2S communities, women of color and indigenous women. Child survivors of domestic violence and male survivors continue to be important aspects of this movement. As resources increased and public awareness evolved, the capacity to be inclusive of diverse populations, like the LBGTQ2S communities and those with disabilities, has expanded. This reflects the power of advocates as agents for social change to end domestic and sexual violence, and oppression.

Leadership of Native Women

Native/Indigenous women were not always at the table of the women's or shelter movements for a variety of historical and societal reasons. However, over the years, the leadership, expertise and tenacity of Native women advocates established a permanent place at the table. Note within VAWA the creation of tribal set-asides, and Title IX – Safety for Native Women in the 2005 reauthorization. It's important to acknowledge that initially VAWA 1994, created a number of national resource centers, though not a Native specific resource center. Native advocates had worked side-by-side with non-Native advocates in the creation of VAWA, developing relationships and their understanding of sovereignty, and jurisdictional, cultural and historical realities of Indian Country. These non-native women/allies recognized their limitations and the dire need for a Native specific resource center, held themselves accountable by advocating for the center and gave up some of *their own funding* in the first year to make it happen. This is a rare, powerful, historic example of women working together as sisters, moving beyond politics and turf issues, relating as women, to ensure everyone's need are met. As a result, Sacred Circle, National Resource Center to Violence Against Native Women opened in 1998, eventually becoming the National Indigenous Women's Resource Center in 2010.

Cultural Context of the Role of Advocate

Previous to colonization, violence against Native women and children was an extremely rare occurrence. This is true of violence against elders and those who were LGBTQ2S as well. Such violence was considered unnatural and was an affront to the entire Nation. The vast majority of indigenous cultures held women and children as sacred. Indigenous cultures are based upon a spiritual understanding that all living beings are related and interdependent, and that every individual has their own unique path and purpose. Values of respect, generosity, courage, non-violence, compassion and humility are ingrained in indigenous belief systems and life ways. These concepts form the foundation for advocacy in Indian Country. Ending domestic and sexual violence, intimate partner violence/battering, in Indian Country rests on the honoring of tribal sovereignty, and the reclamation of traditional life ways, and roles and responsibilities as Relatives. Our relationships were not based upon titles, job descriptions and status, but on how we are connected as Relatives, and our roles within families, societies and clans. The challenge is to confront oppression, decolonize, undoing internalized oppression and embrace our roles as Relatives. How we relate to each other and show respect begins with how we call each other, i.e. Sister, Aunt, Mother, Brother, Uncle, Father etc. Reconnecting as Relatives is imperative in ending violence and transforming our communities.

Advocacy

An advocate is the biased supporter of women and other survivors who have been battered/raped. This is a unique role, because it's the only job where priorities and focus are entirely about the comprehensive safety of victims and survivors, and offender accountability, ideally, as defined by the survivor. The goal of advocacy is to help ensure women's and other survivor's safety and personal sovereignty, as well as offender accountability. Gender-based violence and oppression are about power * and control. Victims of violence have had power and control taken from them. Advocates help equalize this imbalance. Within Indian Country, advocacy is based on the understanding that violence against Native women is a result of colonization and oppression, and that ending violence requires reclaiming indigenous natural, indigenous life ways and belief systems. Advocacy is personal, political and cultural. It is about individuals, and connections between groups and society as a whole.

Grassroots, culturally- and woman-centered advocates are unlike service providers who act within western-based institutions that require proof of need, eligibility, provide limited access, time and resources, and are accountable to the system they work within. Though restrictions may be imposed by funders and inadequate resources, advocates address all forms of gender-based violence, and the intersections of mental health and substance abuse issues, poverty, classism, sexism, heterosexism, racism, historical and intergenerational trauma. These intersections are born of the same root causes, overlap with, and intensify the violence and tactics of intimate partner violence/battering and sexual violence. Advocates believe survivors are the experts on their lives and needs, and have the right to determine what they need, when and how. Getting safe and healing require time and the path to safety follows unique individual paths. The strengths, courage, expertise and leadership of survivors is integral to empowering advocacy and social change. At the end of the day, advocates are accountable to women and other survivors. It's about connections and our relationships as relatives.

The job description of an advocate is comprehensive. It involves pro-actively assisting and supporting women and their children, and other survivors: making relationships, listening to and believing survivors, accompaniment to court, providing necessities and resources, transportation, housing assistance, providing legal, medical and other systems advocacy – the possibilities are determined by the survivor.

Beyond individual advocacy, outside shelter doors, advocates work to transform society, so every space is a safe space. This means providing active leadership in community education, systems change including policy development and education, coordinated community response efforts assuring prioritization of safety and offender accountability in all matters, and that responses are effective, respectful and trauma-informed. Advocacy involves ally-building, policy-making, legislative changes and development of resources, like housing. It also means acting as social change agents by pro-actively confronting root causes of violence and reclaiming cultural belief systems that create non-violent societies, and actively honor the sacred status of women.

THE ROLE OF ADVOCATES

Adapted by NIWRC from materials by Sacred Circle, National Resource Center to End Violence Against Native Women with credit to "Advocacy" by Anne Marshall and Ellen Pence

- To advocate for the woman who is battered in a manner that respects and validates her individuality, experiences, decisions and strengths. [To advocate for disenfranchised, LGBTQ2S and cisgender male survivors in the same manner.]
- To model courage and resistance in the face of oppression, intimidation and fear.
- To provide leadership and ensure that women's/survivor's safety is a priority in the coordinated community response initiative that promotes and enhances the spiritual and cultural traditions of the sacredness of women and children.
- To advocate for the expressed interests and safety of survivors, and their children, including provision of safe space and any other resources necessary for the woman/survivor to regain control of her life.
- To focus attention on the operational meaning of safety and integrity of women and renewal of traditional life ways as guiding principles at all levels of the justice, law enforcement, social and medical systems dealing with domestic violence cases.
- To provide expertise based on the experience of women/survivors who are battered and their children on issues related to domestic violence within the justice, law enforcement, social and medical systems.
- To ensure that all who have been battered/sexually assaulted have 24-hour access to support, accurate information, crisis intervention, and other advocacy services.
- To educate personnel within the relevant systems regarding the most effective responses to domestic violence on behalf of batterers, victims and at-risk family members, prioritizing victim safety and offender accountability.
- To be conscious of the educational role within all advocate activities.
- To remain accountable to the woman/ survivor who has been battered/raped, including maintaining confidentiality.

* "Power and control" commonly describe the goal of the purposeful system of tactics battering/intimate partner violence. However, the meaning and use of "power" in this context is a reflection of a societal and cultural cause of violence. In American society, people with power are seen as those with the capacity to be violent, i.e. cause harm, manipulate others against their will, set and enforce rules for their own benefit, provide/withdraw resources etc. The male stereotype or expectations for men in America is that "real men" are powerful. When power is defined as the ability to be violent, then the result is gender-based violence. However, within indigenous societies, "power" has the opposite meaning. Powerful people within indigenous societies are those with the capacity to give Life, preserve Life and nurture life, i.e. women, medicine people, Elders, men who support and protect women, children, Elders and those in need.

THE ROLE OF ADVOCATES

- To advocate for the woman who is battered in a manner that respects and validates her individuality, experiences, decisions and strengths. To advocate for LGBTQ2S and cisgender male survivors in the same manner.
- To model courage and resistance in the face of oppression, intimidation and fear.
- To provide leadership and ensure that women's/survivor's safety is a priority in the coordinated community response initiative that promotes and enhances the spiritual and cultural traditions of the sacredness of women and children.
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- To be conscious of the educational role within all advocate activities.
- To remain accountable to the woman/ survivor who has been battered, including maintaining confidentiality.

NOTE: Up to 96% of victims/survivors of battering are female, so the *words woman, women, she and her* are used in these documents. However, men who are victims of battering should receive the same kinds of advocacy and resources in ways that meet their needs. Additionally, victims/survivors who are LGBTQ2S also have the right to advocacy and resources that address challenges and barriers posed by heterosexism.

Produced by Sacred Circle; adapted from "Advocacy" by Anne Marshall and Ellen Pence

ADVOCATES DO...

- Advocate for the personal sovereignty and safety of women and their children, including provision of safe space and any resources necessary for women/survivors to regain control of their lives.
- Ask, listen to, believe and respectfully act on what survivors state they need and want in a trauma-informed, culturally appropriate way.
- Clearly and persistently send the message: violence is unacceptable, battering is a crime and never the fault of the woman who has been battered, or other survivors.
- Validate the individuality, experiences, decisions and strengths of women and other survivors who have been battered.
- Act and treat women who are battered, all survivors, as relatives.
- Model courage and resistance in the face of oppression, intimidation and fear.
- Provide leadership ensuring women's safety is a priority in coordinated community responses that promote and enhance the spiritual and cultural traditions of the sacredness of women & children.
- Focus attention on the intent of safety and integrity of women & renewal of traditional life ways as guiding principles throughout systems dealing with violence against women and other oppressed groups.
- Provide expertise through the voices of women who are battered and their children, other survivors on issues regarding violence against women within justice, law enforcement, social & medical systems.
- Ensure all who have been battered/ sexually assaulted have 24-hour access to support, accurate information, crisis intervention and other advocacy.
- Educate personnel within systems about the most effective responses to violence regarding batterers, victims and at-risk family members, prioritizing victim safety and offender accountability.
- Be conscious of the educational role within all advocate activities.
- Remain accountable to the woman/survivor who has been battered/sexually assaulted including maintaining confidentiality.

ADVOCATES DO NOT...

- Act without the expressed informed consent or participation of the woman who has been battered or withhold or create barriers to safety & resources because we judged her "unworthy" in some way.
- Believe we should mind-read what she needs or wants, or assume we know better than she does.
- Minimize or blame her for the violence, collude/make excuses for the batterer's behavior, or treat the violence as a private or mental health issue.
- Treat all women the same, as incapable of making decisions, "sick" or incompetent.
- Label or act as if women/survivors who are battered are "cases," "those women," clients or patients.
- Get women/survivors to cooperate with other agencies or "follow rules" not honoring her safety or sovereignty.
- Allow task forces, meetings or initiatives to focus on the behavior of women/survivor, instead of accountability of offenders and of systems.
- Diverting attention to mental health or other issues not directly related to battering as violent crime, safety and Native women's sovereignty, or that reinforce external or internal oppression.
- Speak for or on behalf of battered women, unless they are not safe enough to do so themselves, or without their express, informed permission.
- Ignore or create barriers that prevent or limit access to safety or resources, including substance use or trauma reactions.
- Forget violence ends through social change that includes systems work focused on accountability for provision of safety and offender accountability.
- Dismiss the reality that conflicts, and creation of working relationships are "teachable moments" for all involved, including advocates.
- Allow limited budgets, policy, funders or our "check signers" to compromise advocating for the safety and sovereignty of women/survivors who have been battered.

NOTE: Up to 96% of survivors of battering are female, so the words *woman*, *women*, *she* and *her* are used in these documents. Men who are victims of battering should receive the same kinds of advocacy and resources in ways that meet their needs. Survivors who are LBGTQ2S also have the right to advocacy and resources that address challenges and barriers posed by heterosexism.

TRAITS (Of an effective advocate)

Cangleska, Inc. Advocates Training Manual*

Empathy

Empathy means to understand what a woman is saying and communicating back to her that you do understand. It doesn't mean that the advocate had to have the same experience. It does mean that the advocate has learned about the dynamics of battering or rape and she can genuinely identify with the woman's experience.

Respect

The advocate knows the woman has worth. The advocate protects the woman's right to make her own decisions. She knows the woman has the ability to overcome the crisis. Being respectful means that the advocate doesn't get over-protective or doesn't act in a negative way toward the woman. Battered women and rape victims come with many different personalities and some are hard to work with. Remembering she has worth and rights will help.

Genuineness

The advocate doesn't need to become someone she isn't. She doesn't use "counselor talk" or psycho-babble. She uses her own style and is confident in that. The advocate can be freely herself. When an advocate is genuine, the woman develops trust quickly and doesn't have to be on guard that she's being psychoanalyzed or judged by someone who thinks they are superior.

Concreteness

The advocate is clear, concise and specific. This helps the woman move out of confusion and powerlessness. It also helps her stay in the present - in what's going on now. For example, if the woman says, "He hit me." The advocate asks, "Where did he hit you, with what and how many times?"

Sensitivity to "others"

How a woman reacts to being physically or sexually attacked has a lot to do with her specific culture, family, handicap or lifestyle. Advocates have to work hard or rid themselves of stereotypes. For example: a woman may tell you she is in a love relationship with another woman. If she perceives that the advocate disapproves of lesbians, she knows she won't get help and the advocate hasn't done her job.

Self-Disclosure

Sometimes it's helpful for the advocate to share personal details about her life - most often if she has been a victim of violence herself. There are benefits and negatives to doing this. They have to be weighed by the advocate and she has to go with her instinct. The benefits are that there can be a bonding and a positive relationship established. The negative is that the focus could shift away from the woman who needs your help. The most common mistake is when the advocate goes on too long about her own experience and the woman feels like she has to become the helper.

Confidence

Confidence comes with experience and training. It means the advocate is convincing and dynamic - she is sure of herself. This helps the woman feel like she can trust and she's in a safe place. Also, it communicates to the woman that there is hope that the advocate will use her skills to help the woman find her way out of crisis. Sometimes, we have to convince ourselves we are confident even when we aren't. One of the mistakes an advocate can make is to "get into the crisis" with the caller. Remembering that she is asking you for assistance will help to keep calm.

**Cangleska, Inc. was a Native non-profit model advocacy program that included shelter, outreach, batterers re-education and probation programs, etc. As a culturally-based program it modelled itself in the ways of a women's society. Additionally, understanding that battering is a gender-based issue, the word "woman" is used rather than survivor or victim. Inclusion of males, recognition of the Two Spirit community, children etc. was considered a routine, necessary part of advocacy.*

How to Provide Women/Survivor Safety & Batterer Accountability

When the Batterer Uses the Tactic of ...

Physical / Sexual Assault:

- Provide safe space and confidential medical care
- Have the batterer arrested, prosecuted and sentenced to the full extent of the law
- Provide easy access to protection and restraining orders, ensuring enforcement
- Assess for possible threats from his family or friends
- Acknowledge the pain and sense of betrayal that comes from victimization
- Assist and talk with women from a place of compassion and validate her strengths

Male Privilege:

- Act in a way that validates the sacredness of women
- Express the right of women to move through the world with respect and compassion
- Avoid collusion - confront the batterer's belief about his right to control his partner
- Respectfully confront him about his behavior
- Actively support women's expertise about themselves and their expressed needs

Isolation:

- Provide respectful support and assistance to women
- Provide outreach and easy access to services, including transportation, childcare, etc.
- Remove any barriers to her regaining power and control over her life
- Deal directly and immediately with on-going threats of violence
- Create and enforce sanctions for interfering with her moving freely and without fear

Intimidation:

- Allow advocates to accompany her
- Shield her from this tactic, being aware that it includes looks or gestures from him, his relatives or friends
- Avoid use of position as an authority figure to reinforce intimidation tactics
- Communicate clearly that intimidation is unacceptable by naming the behavior and enforcing consequences

Emotional Abuse:

- Treat and name women as relatives, not as "cases" or other objectifying labels
- Do not make her justify her actions or requests for assistance or resources
- Validate her thoughts, feelings, actions and decisions
- Provide accurate information that lets her know the violence is never her fault, she did not cause and cannot alone stop his violence
- See and speak to the best in her
- Support her healing in her own way
- Speak with her as a friend, honestly and respectfully

Minimizing, Lying and Blaming:

- Avoid collusion with the batterer by buying into his stories or manipulation of systems to maintain control of his partner
- Believe in her and what she says
- Understand the dynamics of battering to avoid minimizing or blaming her/victim for batterer's behavior
- Focus on the truth and confront batterer about his dishonesty
- Find ways to hold the batterer accountable and change behavior.

Abusing the Children:

- Act in ways that reflects the understanding that mother abuse is child abuse
- Understand that if we protect women, they can protect their children
- Do not allow the batterer to use children as weapons or means of access for violence against their mother through custody or visitation
- Provide the safety and resources for the mother (non-offending parent) and children to stay together
- Know that removing children from their mother for "failure to protect" revictimizes children and mothers
- Create laws that asserts that battering is child abuse

Economic Abuse:

- Provide free, easily accessible resources and services
- Acknowledge that poverty, especially lack of housing, causes women and their children, and other survivors, to return to the batterer or be homeless
- Create appropriate resources without barriers

Coercion and Threats:

- Create safety and comfort for women (and other survivors) to express themselves and do things freely
- Know that his past use of violence may continue to affect her
- Affirm her thoughts, feelings and opinions
- Understand that using position and authority to make her do what you want her to do is disrespectful and abusive
- Create and enforce laws that validate her rights and hold the batterer accountable for his violence

Cultural Abuse:

- Provide support and accurate information
- Understand our role as relatives to all things in Creation
- Be responsible for our role as Relatives by holding ourselves accountable to women who has been victimized, children and other Relatives
- Respect her Path as being equally important as our own
- Honor her privacy without it being an excuse for inaction

Ritual Abuse:

- Validate her/his fears and concerns
- Provide accurate information
- Provide whatever she/he needs to practice her spiritual ways
- Practice our spirituality so our relationship with our Relatives reflects humility and self-understanding

NOTE: Up to 96% of victims/survivors of battering are female, so the *words woman, women, she and her* are used in these documents. However, men who are victims of battering should receive the same kinds of advocacy and resources in ways that meet their needs. Additionally, victims/survivors who are 2S-LBGTQ also have the right to advocacy and resources that are responsive to challenges and barriers posed by heterosexism.

**Privacy, Confidentiality and
Privileged Communications:**

Keystones to Safety





Privacy, Confidentiality and Privileged Communications: Keystones to Safety

*A Guidebook for Advocates and Survivors of
Battering or Domestic Violence in Native Communities*



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Forward

Privacy, confidentiality and privileged communications are the keystones to safety for survivors of battering or domestic violence. Protecting privacy and confidentiality of victims of domestic violence is directly related to a survivor's ability to trust, ask for advocacy, support and help. The law provides certain protections to conversations referred to as "privileged communications" between two individuals. All of these protections are important to understand as well as any legal limitations that local laws may impose.

This booklet will provide basic guidance for advocates and shelter programs to understand and implement or integrate these practices for the protection of those who experience violence policy, law and funding conditions, but also in terms of its impact on the safety and integrity of Native communities.

As Native people, we know that domestic violence is unnatural, and that before colonization, domestic violence, rape and child abuse were almost unheard of. Colonization tactics directly targeted Native women by attacking Native women, both physically and in their social status. Colonizing forces knew that tribal values would begin to erode and thereby tribal sovereignty would diminish. Because women form the backbone of Native communities, they could crack the foundation of Indian nations by attacking women and their sacred role within their communities. The legacy of colonization lives on in the current epidemic of violence against Native women, and in the growing intimate partner violence against men, LGBTQ and Two Spirited people.

Ending domestic violence¹, is about reclaiming our traditional, non-violent, respect-based belief systems, and understanding the important and different role that men, women, children, Two Spirit/ LGBTQ, and elders play in our societies.

In addition, reclaiming Native values that governed most, if not all Native societies, such as respect, compassion and connections as relatives, puts the issues of confidentiality and privacy in a special context and provides us with important guidance about how and when to share information. If we think of ourselves as relatives rather than as advocates within a program, the issue of information sharing becomes first a matter of respect and privacy. In our own homes, we traditionally treat relatives and visitors in a special way, giving people time, space, food and whatever else they need without them ever having to ask. We do not have paperwork or lists of written rules for how we talk or host our relatives. Therefore, we encourage the advocate to use her Native values as she works with survivors, which will inevitably lead her down the right path for advocating for her client.

NOTE:

Studies consistently indicate that women are disproportionately the victims of domestic violence, and the majority of those instances are committed by men against women². Nonetheless, it is important to recognize that domestic violence can and does occur in two spirit and LGBTQ relationships and against men perpetrated by women³. As such, it is important to note that confidentiality requirements and concerns apply equally to all domestic violence survivors, whether female, male, LGBTQ or two spirited.

¹ For purposes of this resource, the term "family violence" is used interchangeably with "domestic violence". Further, for purposes of the Family Youth and Services Bureau, "family violence" is also used interchangeably with "intimate partner violence."

² Rosay, André B., "Violence Against American Indian and Alaska Native Women and Men," *NIJ Journal* 277 (2016): 38-45, available at <http://nij.gov/journals/277/Pages/violence-against-american-indians-alaska-natives.aspx>. (The study found that women were victims in 85% of the reported cases).

³ Family Violence and Prevention Services Act (FVPSA) or other federally funded tribal programs may not discriminate based on sex, age, disability, race, color, national origin, or religion and all services must be comparable for everyone seeking services FVPSA § 10406(c)(2).

Privacy, Confidentiality and Privileged Communications: Keystones to Safety

In a nutshell, it is the advocate's role to act as the biased supporter to survivors of domestic violence and to prioritize the safety of survivors and abuser accountability in all matters. Defending the confidentiality and privacy of those who have been battered is part of the sacred trust advocates have with those they serve.

Many of the questions about confidentiality can be answered merely by considering this special relationship between advocates and survivors and to remember the advocate's role: protection and support of the survivor. In thinking about confidentiality and privacy issues, there are several key questions that advocates should ask themselves when reviewing their policies:

- Whose need does this meet?
- What purpose does this serve?
- Is this policy respectful and uphold the integrity of the survivor?
- How does this support my ability to hold myself accountable to the survivors?
- How does this provide safety and help hold abusers accountable?
- Are these policies in compliance with funding requirements regarding confidentiality?

In addition, for Native advocates and programs, we should also ask:

- How does this reflect my cultural beliefs and values, and reclaim the status of women as sacred?

Practice Tip

First and foremost, remember, it is the survivor's information. The survivor retains the right to choose when, how and what personal information will be shared, or not shared, and with whom. Agencies and advocates are responsible for respecting and honoring the victim's wishes and safeguarding any of the survivor's information that they collect and hold⁴.

The Potential for Danger

"Every part of me hurt – my head, ribs, face, legs...He kicked me with his boots on, used a cast iron skillet. I couldn't stand the pain, the fear, all those people who did nothing. So I got really drunk, made it go away for a little while. Ended up in treatment. The counselor said I had to be honest about everything. During family days, I'm sitting there with my husband, my batterer and the counselor says to him, "Your wife told me about your anger problem..." On the way home he said nothing, but I knew what was coming... Last thing I remember about that night was him grabbing my hair and his fist coming at my face..." -A woman who has been battered

⁴ See "Victim Confidentiality Considerations For Domestic Violence and Sexual Assault Programs When Responding to Rare or Emergency Situations," The Confidentiality Institute and the National Network to End Domestic Violence 2010 and 42 U.S.C. § 10406(c)(5) regarding non-disclosure of confidential or private information (42 U.S.C. § 10407(a)(2)(A)).

Defining Privacy, Confidentiality and Privileged Communication

Privacy

In our everyday lives, privacy is about respect, trust and personal integrity and autonomy. Respect for the right to privacy safeguards against the destructive nature of gossip and the sharing of individual's information without permission. It is a necessary element in healthy, considerate relationships. Many times, the right to privacy is discussed in terms of confidentiality – the legal rights of individuals to control information about themselves and make decisions that impact their lives. Policy and law often address these issues, but the right to privacy is also a cultural consideration. Our communities have expectations about what is private and what is not. A major part of an advocate's work is to shift the mainstream views of domestic violence from being a private family matter to a community's responsibility to respond, increase survivors' safety, hold abusers accountable, and restore Native values in their societies.

On the other hand, the tactics used by abusers are centered on an invasion of privacy: knowing where she is at all times, who she talks to, what she says, when and how she does things, how she dresses, who she texts or contacts on social media, etc. The abuser attempts to exercise power and control over his partner in every aspect of her life and in every decision. Survivors have reported not being allowed to use the bathroom with the door shut –he wanted total access, leaving her with no privacy.

Advocates focus on helping survivors regain power and control over their own lives, including the right to privacy. There are many challenges to this goal at a shelter. Within shelters, the most obvious challenge to privacy is simply the fact that there are many other survivors in crisis, often with their children, co-existing in limited space with limited resources⁵. Everything is shared, and many days, chaos is the norm. Managing the chaos, while attempting to get everyone's needs met and helping them get their lives back, is a daily struggle. Sometimes schedules and rules are established to try to maintain order. How this is done can either honor survivor's rights to privacy and control over their own life, or unintentionally, reinforce a lack of rights and control.

Shelter rules and schedules are a form of policy that can impact privacy. Some programs respond by creating layers of rules and posting schedules for everything – bedtimes, mealtimes, bathing, in an attempt to make order out of chaos. Sometimes, there can be major problems with this approach, even though it is well- intentioned. The critical questions we need to ask are, “whose needs do the rules meet, what is the purpose of the rules, and do these rules take away a survivor's voice in decisions that impact her/him and her/his children?” If the answers relate to the program staff and their convenience, then perhaps a revision of the rules might be necessary to support the shelter residents.

Survivors and their children come to shelters because they are escaping the abuser and may have no place else to go. They seek safety, support and resources to be able to heal and re-create their lives. During this time, they are vulnerable and at the mercy of others. Many shelters resist creating elaborate rules and policies because the people in crisis need support and safety, creating unobtrusive policies are secondary. These shelters understand too many rules will make the shelter less friendly and less homelike, and in the end may undermine the relationships with survivors and their rights to privacy that support autonomy and individuality. Culturally based programs that recognize the different needs of the women and men they serve, as well as LGBTQ and Two Spirit individuals, rely on each individual's gifts and strengths to create a safe environment that builds upon mutual respect and

⁵ Shelters receiving federal funds are required to provide similar services to women and men survivors of domestic violence. However, how these services are provided may vary, as the needs of men and women survivors may differ, as may the needs of younger survivors of violence versus elders. Culturally based shelters recognize the different roles of men and women in our Native communities, as well as elders and youth, and the different needs they may have in seeking advocacy services.

support. For example, well-run shelters hold regular house meetings to discuss what needs to get done, who will do what and when.

This shared community living model comes from our own homes. Imagine all your relatives showing up. How do you organize and get things done? Usually visiting around the kitchen table sharing food, checking in with each other and problem solving with those involved in an informal, friendly way. We rely on our relationships with each other – we know who is good at what, who definitely shouldn't be making the bread, who needs a lot of sleep, etc. We know some relatives are quirky, raise their kids differently – we accept them as they are. We work it out.

Of course, a few basic safety rules are necessary, like no violence or weapons, no drinking or using illegal drugs. But aside from these, each person's privacy is honored. Residents do what they want, in the ways they want, without explanation as long as it doesn't interfere with another's rights. Conflicts are resolved as they come up, by talking directly, respectfully and individually. This approach promotes each person's right to privacy, which includes making basic decisions for themselves. This approach goes beyond policy and reflects the purpose and philosophy of advocacy: to end family violence and reclaim each individual's status as autonomous and sacred with the right to control their own life choices. This approach sees privacy as a matter of respect, which forms the foundation for a meaningful confidentiality policy.

That shelter had more rules than my batterer! I went there to be safe and they told me when to put my kids to bed – even when I had to go to bed and turn the lights out. They told me what to feed my kids and when. They made me feel like a kid, couldn't make my own decisions. Why did they get in my personal stuff? I went back home. -A woman who has been battered

Confidentiality

“When private information is shared, there is a shift in the balance of the relationship from the person sharing the information to the person receiving it. How that information may be used or revealed to others directly impacts the battered woman's safety and ability to seek justice. Sharing information about a specific battered woman threatens her autonomy and may threaten her safety, as well as her confidence in the domestic violence advocate and program.”⁶

Family violence destroys all sense of trust and safety. Confidentiality is key to keeping everyone safe, and is the cornerstone of effective advocacy and shelter programs. Confidentiality is based upon principles of privacy and restricts what kind of information can be shared with whom, under certain circumstances. Maintaining confidentiality can sometimes be a matter of life or death.

⁶ See “Confidentiality: An Advocates Guides” by the Battered Women's Justice Project, 2007. https://www.bwjp.org/assets/documents/pdfs/confidentiality_an_advocates_guide.pdf

Program policy is the first line of defense for the right to confidentiality. Based upon principles of respect and right to privacy, a program confidentiality policy should clarify that:

- a. The right to share information is the survivor's. Survivors cannot "violate" their own confidentiality any more than they can violate their own protection order.
- b. A survivor decides what information to share/not share and with whom (including the advocate and program and within legal limits discussed in section "Limitations to Confidentiality").
- c. Advocates will not share information about survivors, without a signed, time limited, and specific release of information or if compelled by law.

It is also important to become familiar with the federal laws addressing confidentiality set forth in the Violence Against Women Act (VAWA) and the Family Violence Prevention and Services Act (FVPSA) and resulting grant requirements. Applicable excerpts are included at the end of this brochure as Appendix A. FVPSA grant requirements also provide that programs funded by FVPSA "must establish and implement policies and protocols for maintaining the safety and confidentiality of records pertaining to any individual provided domestic violence services. Consequently, when providing statistical data on program activities and program services, individual identifiers of client records will not be used."⁷ Both VAWA and FVPSA also provide the same guidance on specific information that should not be shared.

Violating these provisions will not result in criminal sanctions for the individual, but a breach of confidentiality can cause a program to lose its funding, and more importantly endanger the health and safety of survivors, their children, and anyone receiving advocacy services.

Privileged Communication

Privileged communication is an interaction between two people that the law recognizes as a private, protected relationship. Whatever is communicated between the parties remains confidential, and the law cannot force their disclosure. Privileged relationships include a patient and doctor, therapist or lawyer and client, and some others. Privileged communication between an advocate and victim/survivor, protects the confidentiality of the survivor and avoids challenges to advocates sharing survivor's information, thereby protecting victim/survivor's safety and privacy. Though, many tribes and states recognize communication between a survivor of battering and her/his advocate as privileged, many others do not recognize this privilege or might recognize the privilege with exceptions.⁸ As sovereign nations, tribes can enact privileged communication laws. At one time, the Oglala Sioux Tribe enacted such a law:

Oglala Sioux Tribe Domestic Violence Code Sec. 224

Victim-advocate privilege applicable in cases involving domestic violence.

- a. Except as otherwise provided in subsection 2, and in compliance with the Victim-Advocate Privilege Act, a victim of domestic violence may refuse to disclose, and may prevent an advocate, elder, or medicine person from disclosing, confidential oral communications between the victim and the advocate and written records and reports concerning the victim unless the privilege is waived by:
 - i. The victim; or
 - ii. The death of the victim.
- b. The privilege does not relieve a person from any duty imposed in the mandatory reporting of child abuse or neglect. A person may not claim the privilege when providing evidence in proceedings concerning child abuse and neglect.

⁷ 42 U.S.C. § 10406(c)(5) regarding non-disclosure of confidential or private information (42 U.S.C. § 10407(a)(2)(A))

⁸ See "Confidentiality: An Advocates Guides" by the Battered Women's Justice Project, 2007. https://www.bwjp.org/assets/documents/pdfs/confidentiality_an_advocates_guide.pdf

c. As used in this subsection, “advocate” means an employee of or volunteer for a program for victims of domestic violence who:

- i. Has a primary function of rendering advice, counseling, or assistance to victims of domestic violence; supervising the employees or volunteers of the program; or administering the program;
- ii. Has undergone a minimum of 40 hours of specialized domestic violence advocacy training; and
- iii. Works under the direction of a supervisor of the program, supervises employees or volunteers, or administers the programs.

This law demonstrates the ability of a tribe, as a sovereign nation, to define important principles such as privileged communications within a protected relationship to serve tribal purposes.

Limitations on Confidentiality

When advocates work with survivors of battering, they need to be clear that they will do all they can to protect the survivor’s confidentiality. However, there are some limits imposed by law, including mandatory reporting requirements. Other limitations on confidentiality include:

- Duty to warn of imminent threats of bodily harm or that a violent crime is to be committed;
- Suspected child abuse or neglect (if a mandatory reporter);
- Presence of others when a communication is made (third party present where privileged communication exists);
- Waiver or signed release exists;
- Law enforcement or prosecution based advocates, who may have no confidentiality coverage or limited privileged communication;
- Program property, including records and files, may be subpoenaed;
- Advocates cannot guarantee other survivors in shelter or groups will maintain each other’s confidentiality. Speaking with each survivor and group about the urgent need for protecting confidentiality for each individual’s safety should be routine and can be one of the few rules in place;
- Confidentiality for every woman’s safety should be routine, and can be one of the few rules in place.

Advocates should inform the survivors they work with about these exceptions upfront, as well as about any other circumstances in which they will share information⁹. Again, it’s important to understand the Tribal, State, and Federal laws addressing confidentiality, privileged communications, and mandatory reporting requirements within your jurisdiction.

Each program should have a policy that outlines the steps to follow for each one of these possible situations. The policy should state that the advocate’s role does not stop just because a report is made to an outside agency, such as law enforcement. The advocate’s role only ends if the survivor chooses to end the relationship. If possible, we recommend survivors make their own law enforcement report while accompanied by an advocate.

Discussion of the reporting options, processes and possible consequences is strongly recommended before the reports are made, if at all feasible.

⁹ *In fact, it is recommended that survivors seeking services sign off on some form of acknowledgment that they have in fact been made of aware of such mandatory reporting requirements.*

Practice Tip

Advocates should receive training on mandated reporting requirements for your tribe or community. Some tribes have their own laws around this issue, and some defer to the state they are located within. An example of mandated reporting is that certain professionals, such as counselors, teachers, police or social workers are considered mandated reporters. Some jurisdictions include advocates as mandated reporters, too. A mandated reporter who learns of child abuse and/or neglect generally has a duty to inform child protection services or law enforcement of the abuse. Some laws include exposure to domestic violence as abuse, thus it is important to understand what laws may apply to your community. When discussing confidentiality with the survivor, be sure to let her know that there are limited circumstances in which you have a duty by law to share this information.

Mandatory reporting laws¹⁰ differ from tribe to tribe and state to state, so please become familiar with what your current laws may require. As well intentioned as such laws may be, the final outcome often further endangers survivors and their children, including separating and removing children into the foster care system or further isolating them and ensuring the abuser has complete control. Futures Without Violence, the national health resource center on domestic violence (futureswithoutviolence.org), offers the following six principles in their Compendium of State Statutes and Policies on Domestic Violence and Health Care to consider in determining if state or tribal mandatory reporting laws should be amended.

- Enhancing patient safety and increasing access to health care services;
- Improving health care provider responses to domestic violence victims;
- Preserving patient autonomy and control of the decision-making process;
- Protecting patient confidentiality;
- Recognizing the value of informed consent in health care environments; and
- Advocating for victims of domestic violence.

¹⁰ *Compendium of State and US Territories Statutes and Policies on Domestic Violence and Health Care; Futures Without Violence www.futureswithoutviolence.org*

Key Questions to Consider When Implementing Privacy and Confidentiality Policies

Tribal and State laws vary in their protection of confidentiality, privileged communications, and any legal limitations such as mandatory reporting requirements. It is essential to become familiar with the laws applicable in your jurisdiction. It is also important to note that Indian tribes, as sovereign nations, have the ability to enact their own laws that protect the confidentiality of those who are battered, recognize privileged communications with advocates, and address mandatory reporting. Very often, advocates are the ones tirelessly leading the way working to get tribal laws adopted. Many resources are available with sample laws and policies that can be revised for your tribe. A few of these resources are provided at the end of this booklet. When creating the laws to govern privacy, confidentiality and privilege, be sure to have them reflect the understanding that shelters and advocacy programs are sacred places that can and do save lives. In addition, clear internal policies around privacy, confidentiality and privilege are important to establish to provide guidelines to the staff and advocates. The survivors need to be assured that staff are trained and be prepared with swift action if staff violate these policies.

How Can the Challenges to Maintaining Confidentiality in Closely Knit Communities be Addressed?

Maintaining confidentiality about the location of a shelter in a closely-knit community is unrealistic. Policy can say that the physical address will not be advertised/publicized or shared by staff in any way except with those needing help, but people will know. Even so, safety of those at the shelter can be increased through public education efforts aimed at the community member's role in responding to violence (i.e., by-stander intervention, when to call police, understanding the critical need for confidentiality, etc.). While privacy fences and entryways may be visible signs of a shelter, they may also help maintain some semblance of safety. More important is maintaining the confidentiality of those in the shelter, those attending support groups and/or accessing other advocacy or program resources.

Once basic needs are met, assess the level of danger she faces, including whether the abuser is violent with others, has threatened or harmed the children, threatened suicide, etc. A determination then needs to be made with the survivor regarding whether she needs to be relocated outside of that community to another shelter for her own safety. This determination should take into account the information she shares about the response she has received from other programs. Remember, survivors know the tactics of their abusers and the community resources—trust their instincts when possible.

Trust is a huge part of successful advocacy and programs. People know each other and their entire families in tribal communities. Often advocates have grown up with either the survivor, or the perpetrator, or both. In smaller communities, they may even be related. These factors impact the community's perception of the

Gathering & Acting on Information

Before gathering other information, completing paperwork, etc., first take care of the obvious needs first, such as:

- Is the survivor safe right now?
- What are their immediate needs and concerns?
- Are there medical needs?
- When did they eat last?
- When did they sleep last? What about the child(ren)?

advocate's ability to maintain confidentiality. One program revised its confidentiality policy to mandate that once a survivor contacts the advocacy program, advocates could no longer talk about the survivor, even in conversations about interactions they had decades ago. The advocates would get "amnesia" so to speak. This change of policy happened after an advocate was overheard visiting with a friend about high school events that included the name of a woman who had been battered. Word got out that the advocate had breached confidentiality. The advocate had not, but the perception of a breach created a crisis for the entire program and negatively impacted the ability of others in the community to trust that their confidentiality would be protected.

Some programs have confidentiality and privacy policies that restrict law enforcement or anyone else from dropping off/picking up at the shelter. Instead, advocates pick-up at a different, safe location and then take them to the shelter. This gives law enforcement and others plausible deniability, which is especially important when they are given the duty to serve warrants for survivors that are the result of their abusers' manipulation of the justice system or for old traffic fines and the like.

Survivors and their children in a shelter need the support of their families and friends. Even so, visiting at the shelter is not advised unless there is a separate entrance and area for visiting in order to protect the confidentiality, privacy and safety of others in shelter. Visits can possibly be arranged at other safe locations. While finding a safe, confidential location in a small tribal community can be difficult, it is not impossible.

Survivors in a shelter can contact whomever they want. However incoming calls directly to a survivor in the shelter should be prohibited. Abusers are known to have relatives or friends call the shelter on their behalf and then they get on the phone and threaten and intimidate the survivor. To maintain confidentiality, it is strongly advised to have a policy that states:

We have a confidentiality policy. We can neither admit nor deny whether or not we know anyone. If you would like to leave a message, we will post it. Should the person come here, we will inform them of the message. Whether or not they contact you is up to them.

It is beneficial to let everyone know about this policy, so those in the shelter can inform their family and friends about the policy, to avoid misunderstandings and conflicts.

How Can Advocates Support Survivors Safely Accessing Outside Resources and Services?

Advocates' ability to assist survivors in safely accessing outside resources and services relies upon advocates working with programs, agencies and organizations that survivors routinely utilize before a survivor walks through their door. Developing working relationships through conversations about shared concerns, providing educational opportunities about the dynamics and tactics of domestic violence/ intimate partner violence, the role of advocates and the necessity of and purpose of confidentiality lay the groundwork. Assisting allied organizations and programs in the development of policies and procedures that protect survivors' confidentiality and safety while getting both the survivor's and program's needs met, is extremely effective.

Practice Tip

Work with your local housing authority regarding a way to maintain the survivor's privacy while accessing their services. Perhaps an arrangement can be made that allows the housing authority to receive a letter from the shelter requesting that a resident be placed on the list. Provided the request is on letterhead, the authority will prioritize the resident as housing becomes available. Note that to meet confidentiality, either the resident must sign the letter along with the advocate or Shelter Program Director, or a release of information must be completed and signed.

Commonly, other agencies expect advocates to share information on behalf of survivors including appointment times, documents, etc. This can compromise confidentiality, lead to misinformation and may not be very effective. Policy can provide for safe, helpful information sharing by outlining pre-arranged meetings and direct modes of communication between survivors and service workers. For example, workers and survivors themselves can set a schedule for meetings and times for the survivor to call in for those involved in aftercare, court or other matters. Advocacy programs can provide secure phones, help survivors get post office boxes or other safe addresses, take messages and assure releases of information include informed consent.

Remember, each situation, agency and community is different. There is no one policy that will fit every circumstance. However, if safety is the priority, and confidentiality is based on the need to know and informed consent, then the survivor and advocate can usually work together to get the survivor's needs met without further endangerment.

What Paperwork and Information Is Needed?

This question is probably best answered by considering each piece of paper and request for information in the context of the key critical questions posed earlier:

- Whose need does this meet?
- What purpose does this serve?
- Is this policy respectful and uphold the integrity of the survivor?
- How does this support my ability to hold myself accountable to the survivors?
- How does this provide safety and help hold abusers accountable?
- Are these policies in compliance with funding requirements regarding confidentiality?

For Native advocates and programs, we should also ask:

- How does this reflect my cultural beliefs and values, and reclaim the status of women as sacred?

The less paperwork, the better. Once something is written down, it opens the door to breaches of confidentiality. Once written down, it becomes program property. Program property may be subject to disclosure and may be subject to a court ordered subpoena. This is an area where it would be good to advocate for laws and policies about what can be shared and under what circumstances.

Practice Tip

Know the law. Be sure to check your law regarding under what circumstances confidential information can be shared or accessed by someone other than the protected party. In many jurisdictions, an attorney signed subpoena will not justify access to confidential information; only a court or judge signed subpoena may entitle someone access to the protected information. However, even then the protected party can ask to have the subpoena quashed or dismissed if the request can be shown to not have a legitimate purpose and is more about power and control. In addition, if a court does find that the information can be accessed, sometimes the record can be “sealed” or reviewed “in camera” which means in the judge’s chambers. Check your local law.

Principles of advocacy based on our Native traditions support the right to confidentiality and lead us away from requiring documentation unrelated to the violence, eligibility issues, and case management. There is no need for documentation of behavior, emotional state, parenting skills, observations, assessments of any sort, etc. This sort of documentation can be inappropriate, and even outright dangerous. This kind of documenting is outside the role and training of advocates. Abusers have been known to use this kind of documentation as “evidence” that a survivor is an unfit parent, to misconstrue the effects of trauma as mental instability and/or to get others to collude with them against the survivor.

The rationale for any filing system and paperwork in a shelter should be based on the safety and needs of the people in shelter. If client information is stored on a computer, it is recommended that the computer not be connected to the internet, to avoid hacking. Further, information required by funders does not include any personal identifying information. Although you should keep some form of tally system to meet the needs of grant and statistical reports, there is never any need to get social security numbers, do background checks of any sort, or get birthdates (age or age range is sufficient).

Contact sheets (sometimes called intake sheets) may include: basic contact information (addresses, phone numbers, how they can be contacted, etc.), documentation about the violence (“excited utterances” about the battering only, documentation of the injuries, including photos if appropriate, threats and actions of the abuser), police and other systems responses (for policy and systems work), release of information forms (one per request), and dates only of participation in groups (if required by outside agencies). Generally, paperwork should be minimal and inform about the violence and the response of the advocate and other agencies, not about the survivor in shelter or receiving other advocacy. (Note regarding photos: Medical and/or law enforcement may take photos, may be requested by the survivor if the survivor chooses to not use those systems, check with the appropriate prosecutor to see if they are admissible and if there are any requirements. Always consider the possible negative unintended consequences of having this kind of documentation.)

Keep in mind that law enforcement and medical records contain a lot of information that does not need to be duplicated. Law enforcement and medical records are considered credible sources in court, more so than advocates’ records and are accessible by the survivor if needed, with a signed release.

HHS-2018-ACF-ACYF-FVPS – 1346 (14) Pursuant to 42 U.S.C. § 10406(c)(5), the applicant will comply with requirements to ensure the non-disclosure of confidential or private information, which includes, but is not limited to: a) grantees will not disclose any personally identifying information collected in connection with services requested (including services used or denied), through grantee’s funded activities or reveal personally identifying information without informed, written, reasonably time-limited consent by the person about whom information is sought, whether for the FVPSA-funded activities or any other federal or state program and in accordance with 42 U.S.C. § 10406(c)(5)(B)(ii); b) grantees will not release information compelled by statutory or court order unless adhering to the requirements of 42 U.S.C. § 10406(c)(5)(C); and c) grantees may share non- personally identifying information in the aggregate for the purposes enunciated in 42 U.S.C. § 10406(c)(5)(D)(i) as well as for other purposes found in 42 U.S.C. § 10406(c)(5)(D)(ii) and (iii). 11 An exclamation made at the moment of an accident or other unexpected and disturbing event, considered under the rules of evidence to be likely to be truthful because of the urgency of the surrounding circumstances and, therefore, an exception to the hearsay rule.”, <http://law.yourdictionary.com/excited-utterance>

Survivors may need assistance to keep copies of protection orders, divorce papers, social security cards or other personal documents in a safe place. A locked file cabinet, designated for personal items and not program property, or a safe deposit box is the safest way to keep these types of records. It is safest to treat safety plans as personal property, depending upon their individual situation rather than as program files.

Practice Tip

“Coming from a different field, I was used to a lot of paperwork. I never gave a second thought about why we asked for the information we did. It was a real eye-opener to work in a domestic violence program and be challenged to think about why we needed information. I never thought about how invasive and disrespectful paperwork can be. Now I focus on documenting his violence and making sure I don’t objectify her. She’s not just a “client,” she’s my sister.” –Advocate

What Information Should Be Shared Between Advocates?

Keeping everyone fully informed about what information will be shared, with whom and for what reason is a safeguard for everyone involved. The safest and most respectful practice is to let each person speak for her or himself. Sometimes this isn’t possible, or they are just tired of repeating themselves. The question then is “do you have permission to share information with another advocate?” The other question that we often don’t think to ask is “does the other advocate have a need to know?” If an advocate needs to consult with another advocate to determine the best course of action, this is fine. But names and other identifying information do not need to be shared.

A recommended practice of having house meetings (not staffings about survivors in shelter) provides the opportunity to share necessary information about house issues, such as scheduling, chores, etc., themselves. Any other information is for the survivor to decide upon.

Practice Tip

“One morning after a busy night at the shelter, the advocate came into the director’s office and began telling her about a woman who came into the shelter the night before. The director stopped the advocate and asked why she was sharing the information, if there was something the director would need to do for the woman. The advocate said no, she just thought the director would like to know. The director turned it into a teachable moment. She said even though she was director and maintained confidentiality, the first step in maintaining respect for and protecting a woman’s confidentiality is whether or not there was “a need to know.” If there is no need to know, then the information does not get shared, even within the program.” –Advocate

How Can Challenges to Confidentiality By Other Agencies Be Addressed?

Some outside agencies/offices often challenge confidentiality and try to get advocates to release information. Establish a clear policy that cites the Federal laws (VAWA and FVPSA), and resulting grant confidentiality requirements as well as alternate ways of getting needed information. Advocacy program/shelter staff can also provide training to the other agencies about the dynamics of battering, the role of advocates, followed by meetings to explain the program policies, all of which are helpful in avoiding needless conflict.

Memoranda of understanding and/or inter-agency policy and procedure can be developed from these meetings. It is extremely important to clearly prioritize safety and accountability, repeatedly emphasize the “need to know” aspects of confidentiality, each survivor’s individual right to privacy and promote direct communication with the individual survivor if she/he chooses.

Too often there is an expectation that advocates should cooperate with other agencies. There is also the unrealistic expectation that advocates should somehow act like foster parents for survivors. Obviously, neither assumption is true. Depending upon the situation, advocates might accompany survivors to meetings, court proceedings, etc., to provide support. If, for example, a woman is involved with child protection and must adhere to a plan that includes participation in groups, an advocacy program can provide the dates of attendance with a signed release. No other information is required. If child protection wants to know how a survivor is doing or check their “progress,” the advocate can clarify that no notes are taken, and strongly recommend that a direct meeting with the survivor be arranged. Oftentimes, there are other service providers involved that can provide this information to child protection. If the other agency person insists upon “input” from an advocate, first ask for a meeting. If those alternatives will not work, make sure to request a release, with specifics about what information is to be shared with whom, for what period of time, for what purpose and with discussion about possible consequences (the “fully informed” part of a release), is signed for each instance. At times, a request for information will result in a trainable moment for the uninformed, non-domestic violence service provider. Embrace the opportunity to share with them your purpose and be ready with a concrete example of why the confidentiality is necessary.

Very often outside agencies assume that because they know the survivor is at the shelter, and that they are aware of this fact, that they should be able to call the shelter and ask to speak directly with her. Advocates should follow their confidentiality policy, share the policy with the person calling and state they cannot confirm or deny that the survivor is there. On the flip side, a survivor may need to have an outside agency contact her. If contact is scheduled ahead of time, then conflicts and breaches can be avoided.

What Information to Share in Multi-Disciplinary Team or other Task Forces?

Multi-Disciplinary Teams (MDT) and other task forces may think because they all have the same goal—protecting survivors and their children from further harm—that they can talk freely among themselves and expect the advocate to do so, too. They may require all individuals to sign a confidentiality agreement and feel that empowers them to gain information from you—it does not. First, the primary goal of such task forces should be the creation, implementation, and oversight of effective, consistent policies and procedures that benefit a certain population within the community and the delivery of services. As such, the focus should be on the actions of each agency’s employees in implementing these policies, not on the actions of individuals they work with. Second, a signed confidentiality agreement does not substitute for a signed release of information.

Even if the task force members agree to not share any information outside of the task force, it is still a breach of confidentiality if an advocate shares private, confidential communication in this group setting. Lastly, the standard for maintaining confidentiality should always be sharing information on a need to know basis. For these reasons, participation by advocates in these tasks forces should be undertaken only after careful consideration and with a good understanding by the participants of what the advocate’s role is.

What Challenges to Confidentiality Occur When Advocates Are At the Scene or Ride-A-Longs?

A strong working relationship with law enforcement is every advocate's dream. However, the role of the advocate as a biased supporter, and the integral requirement of confidentiality is much different than the role of police officers that must remain objective and enforce the law. Advocates arriving at a crime scene can sometimes be seen as a breach of confidentiality for the survivor. Aside from law enforcement, the abuser's friends, relatives, and sometimes even gang members, will see the advocate and know or assume that the survivor is working with the advocacy program. Also, many officers would prefer no other civilians be involved at a scene, since they have to be concerned about an additional person's safety and possible interference with the investigation.

Although ride-a-longs with law enforcement can be instructive to the advocate to understand the policy and procedures officers must follow, the same concerns apply about confidentiality and safety. The presence of an advocate can also create a conflict of interest, especially for survivors that do not want to report or where the abuser manipulates the criminal justice system. It is preferable to establish a policy for officers to refer survivors to the advocacy program, offer to assist in making contact and possibly provide transportation to a safe location to meet the advocate at a place other than her home or the shelter.

Practice Tip

Post on every door and phone in a shelter:

We have a confidentiality policy. We can neither confirm nor deny that we know or work with anyone. However, if you would like to leave a message we will post it. If the person you are seeking is here and wants to respond, we can assist in doing that, if requested.

The Heart of Our Native Nations: Conclusion

Shelters and advocacy programs should be safe places for survivors to escape their abuser, not treatment programs or social service agencies. Our relationships should be based on the reality that we are relatives, not professionals treating “clients” or “cases.” As relatives, we are responsible for the safety of our community members. We are also responsible for holding our relatives who batter accountable for their violence. These principles **MUST** guide our work and our confidentiality and privacy policies.



Additional Resources

National Indigenous Women's Resource Center (NIWRC)

515 Lame Deer Avenue, Lame Deer, MT 59043

P.O. Box 99, Lame Deer, MT 59043 (mailing)

Telephone: 1-406-477-3896

www.niwrc.org/resources

As the National Indian Resource Center dedicated to ending violence and increasing safety for Indian women and children, the NIWRC offers the following resources aimed at enhancing the capacity of Tribal Nations, Alaska Native Villages and Native Hawaiians to prevent and respond to violence against Native women and their children.

Tribal Law and Policy Institute (TLPI)

161 Marie Avenue E. St. Paul, MN 55118

1-651-644-1145

www.tribal-institute.org

TLPI is a Native American owned and operated non-profit corporation organized to design and deliver education, research, training, and technical assistance programs which promote the enhancement of justice in Indian country and the health, well-being, and culture of Native peoples.

The Indian Law Resource Center

602 North Ewing Street Helena, MT 59601

Telephone: 406.449.2006

www.indianlaw.org

The Center provides legal assistance to indigenous peoples of the Americas to combat racism and oppression, to protect their lands and environment, to protect their cultures and ways of life, to achieve sustainable economic development and genuine self-government, and to realize their other human rights.

National Network to End Domestic Violence (NNEDV)

1400 16th Street NW Suite 300 Washington, DC

20036 Telephone: 202-543-5566

www.nnedv.org

This site offers comprehensive information to educate and provides useful tools. The frequently asked questions section provides an overview of the obligations of programs in ensuring survivor confidentiality and privacy, the federal laws that require confidentiality, and information about what programs can do to ensure confidentiality.

Victim Confidentiality Considerations For Domestic Violence And Sexual Assault Programs when Responding to Rare or Emergency Situations.

NNEDV Technology and Confidentiality Resources

Toolkit: <http://tools.nnedv.org>

Battered Women's Justice Project

1801 Nicollet Ave South, Suite 102 Minneapolis, MN 55403

Telephone: 800-903-0111, ext. 1

http://www.bwjp.org/files/bwjp/articles/Confidentiality_Advocates_Guide.pdf

BWJP's Criminal and Civil Justice Office offers training, technical assistance, and consultation on promising practices of the criminal and civil justice system in addressing domestic violence. Criminal and Civil Justice staff can provide information and analyses on effective policing, prosecuting, sentencing, and monitoring of domestic violence abusers, as well as protection orders, confidentiality issues, divorce and custody, and separation violence. Go to www.bwjp.org for more information.

The Confidentiality Institute

Tools available at: www.confidentialityinstitute.org

TCI provides up-to-date, state-specific, sophisticated training, toolkits, and on-call technical assistance to help an agency handle its most significant confidentiality and privacy challenges, whenever they arise.

The Alliance of Tribal Coalitions to End Violence

www.atcev.org

The Alliance of Tribal Coalitions to End Violence is a nonprofit organization formed by Tribal Domestic Violence and Sexual Violence Coalitions located across the United States (including Alaska), which can help to connect tribal domestic and sexual assault programs to a Tribal Coalition located near them for specific training and technical assistance.

Futures Without Violence

www.futureswithoutviolence.org

For almost two decades, the National Health Resource Center on Domestic Violence (HRC) at Futures Without Violence has supported health care professionals, domestic violence advocates, survivors and policy makers at all levels as they improve health

care's response to domestic violence. The HRC offers personalized, expert technical assistance, online toolkits for health care providers and DV advocates to prepare a clinical practice to address domestic and sexual violence, a free E-bulletin and webinar series, and other resources. The HRC also holds the biennial National Conference on Health and Domestic Violence—a scientific meeting at which health, medical, and domestic violence experts and leaders explore the latest health research and programmatic responses to domestic violence.

Appendix A

Excerpts of Applicable Federal Law for Grantees and Battered Women Programs

VAWA 2013

SEC. 3 Universal definitions and grant provisions

SEC. 40002. DEFINITIONS AND GRANT PROVISIONS.

(b) GRANT CONDITIONS. –

(2) NONDISCLOSURE OF CONFIDENTIAL OR PRIVATE INFORMATION. –

(A) **IN GENERAL.** —In order to ensure the safety of adult, youth, and child victims of domestic violence, dating violence, sexual assault, or stalking, and their families, grantees and subgrantees under this title shall protect the confidentiality and privacy of persons receiving services.

(B) **NONDISCLOSURE.** —Subject to subparagraphs (C) and (D), grantees and subgrantees shall not—

(i) disclose any personally identifying information or individual information collected in connection with services requested, utilized, or denied through grantees' and subgrantees' programs; or

(ii) reveal individual client information without the informed, written, reasonably time-limited consent of the person (or in the case of an unemancipated minor, the minor and the parent or guardian or in the case of persons with disabilities, the guardian) about whom information is sought, whether for this program or any other Federal, State, tribal, or territorial grant program, except that consent for release may not be given by the abuser of the minor, person with disabilities, or the abuser of the other parent of the minor.

(C) **RELEASE.** —If release of information described in subparagraph (B) is compelled by statutory or court mandate—

(i) grantees and subgrantees shall make reasonable attempts to provide notice to victims affected by the disclosure of information; and

(ii) grantees and subgrantees shall take steps necessary to protect the privacy and safety of the persons affected by the release of the information.

(D) **INFORMATION SHARING.** —Grantees and subgrantees may share—

(i) nonpersonally identifying data in the aggregate regarding services to their clients and nonpersonally identifying demographic information in order to comply with Federal, State, tribal, or territorial reporting, evaluation, or data collection requirements;

(ii) court-generated information and law-enforcement generated information contained in secure, governmental registries for protection order enforcement purposes; and

(iii) law enforcement- and prosecution-generated information necessary for law enforcement and prosecution purposes.

FVPSA

SEC. 10406. Formula grants to States

(c) Grant conditions

(5) Nondisclosure of confidential or private information

(A) In general

In order to ensure the safety of adult, youth, and child victims of family violence, domestic violence, or dating violence, and their families, grantees and subgrantees under this chapter shall protect the confidentiality and privacy of such victims and their families.

(B) Nondisclosure—Subject to subparagraphs (C), (D), and (E), grantees and subgrantees shall not -

(i) disclose any personally identifying information collected in connection with services requested (including services utilized or denied), through grantees' and subgrantees' programs; or

(ii) reveal personally identifying information without informed, written, reasonably time-limited consent by the person about whom information is sought, whether for this program or any other Federal or State grant program, which consent -

(I) shall be given by -

(aa) the person, except as provided in item (bb) or (cc);

(bb) in the case of an unemancipated minor, the minor and the minor's parent or guardian; or

(cc) in the case of an individual with a guardian, the individual's guardian; and

(II) may not be given by the abuser or suspected abuser of the minor or individual with a guardian, or the abuser or suspected abuser of the other parent of the minor.

(C) Release — If release of information described in subparagraph (B) is compelled by statutory or court mandate -

(i) grantees and subgrantees shall make reasonable attempts to provide notice to victims affected by the release of the information; and

(ii) grantees and subgrantees shall take steps necessary to protect the privacy and safety of the persons affected by the release of the information.

(D) Information sharing — Grantees and subgrantees may share -

(i) nonpersonally identifying information, in the aggregate, regarding services to their clients and demographic nonpersonally identifying information in order to comply with Federal, State, or tribal reporting, evaluation, or data collection requirements;

(ii) court-generated information and law enforcement-generated information contained in secure, governmental registries for protective order enforcement purposes; and

(iii) law enforcement- and prosecution-generated information necessary for law enforcement and prosecution purposes.

VAWA 2013, SEC. 3 Universal definitions and grant provisions

SEC. 40002. DEFINITIONS AND GRANT PROVISIONS.

(18) PERSONALLY IDENTIFYING INFORMATION OR PERSONAL INFORMATION.—

The term 'personally identifying information' or 'personal information' means individually identifying information for or about an individual including information likely to disclose the location of a victim of domestic violence, dating violence, sexual assault, or stalking, including—

(A) a first and last name;

(B) a home or other physical address;

(C) contact information (including a postal, e-mail or Internet protocol address, or telephone or facsimile number);

(D) a social security number; and

(E) any other information, including date of birth, racial or ethnic background, or religious affiliation, that, in combination with any of subparagraphs (A) through (D), would serve to identify any individual.

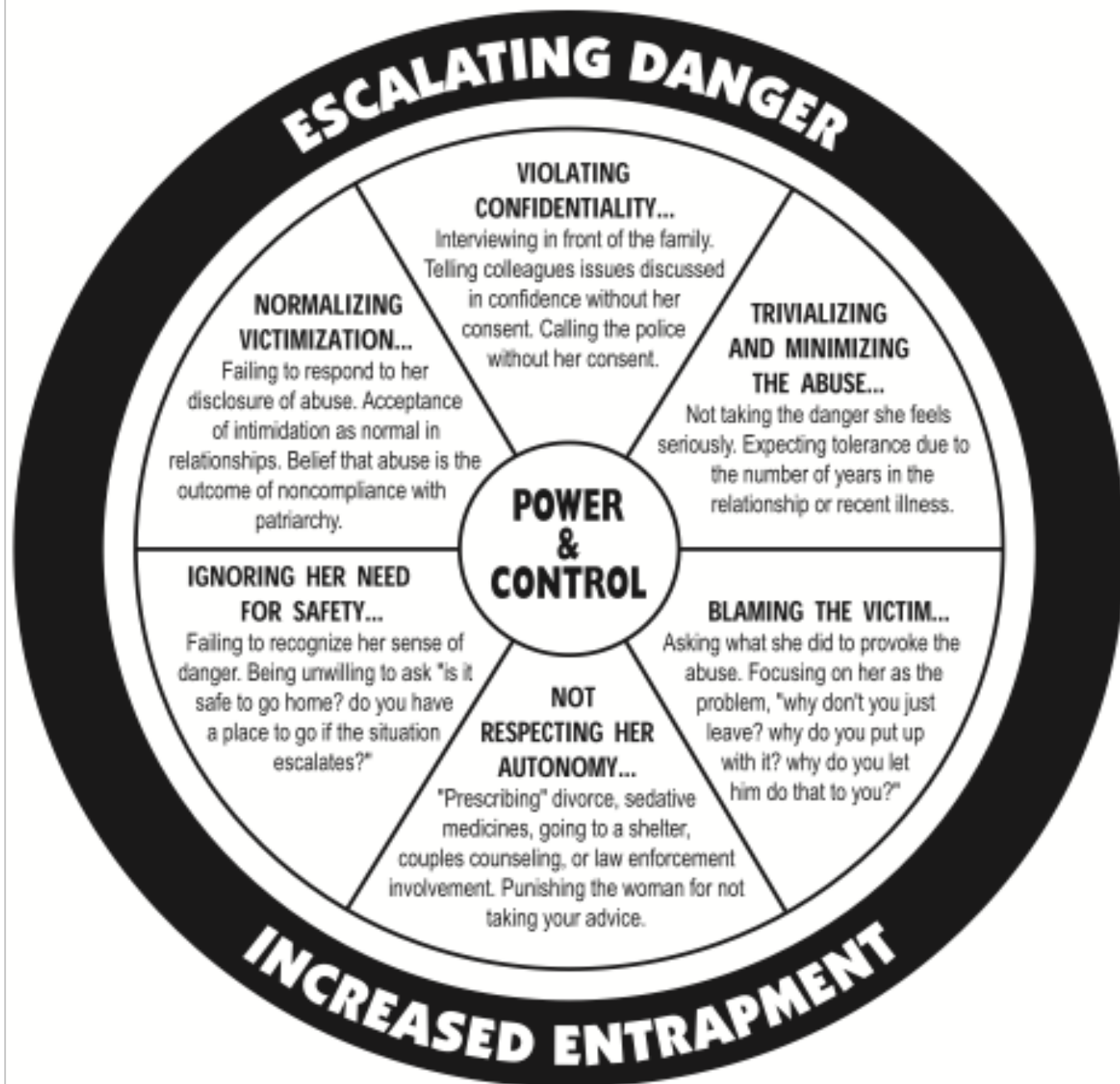


National Indigenous Women's Resource Center

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ARE WE PART OF THE PROBLEM?



OR PART OF THE SOLUTION?





SOCIAL CHANGE

Social Change to End Violence Against Women (or to Reclaim Women's Sovereignty)

Women's Sovereignty

All women possess or have a right to:

1. Their bodies and paths in life: to exist without fear, but with freedom. [SEP]
2. Self-governance: the ability and authority to make decisions regarding all matters concerning themselves, without others' approval or agreement. [SEP]
3. An economic base and resources: the control, use and development of resources, businesses or industries that women choose. [SEP]
4. A distinct identity, history and culture: each woman defines and describes her history, including the impact of colonization, racism and sexism, women's culture, worldview and traditions. [SEP]

(Sacred Circle, National Resource Center to End Violence Against Native Women, 2001)

Our relationships with individual women are the fabric of social change. Advocates work side-by-side with their sisters and trust that women know what they need and prioritize their safety, integrity and autonomy. Advocates' relationships with women who have been battered are the "life force" of the movement to end violence against women. The key elements of this relationship are the guideposts for advocacy and social change: validation of the voice, expertise and leadership of women who are battered; modeling respect, compassion and non-violence; personal accountability for our internalized oppression and behavior; belief in and non-judgmental support of women as whole human beings and their right to sovereignty.

The ability of women to freely walk through the world requires change within the cultural belief system – social change. This change has the potential to end all other forms of oppression, including those based on gender identity, race, class, sexual orientation, ability, age, national origin and religious/spiritual affiliation.

Accurately naming perceptions and experience is the beginning step to social change. Power, for example, is equated with masculinity and in American culture power is defined in terms of potential for violence. We have very gendered notions of power: men are socialized to be violent (powerful) and women's power, which is rarely talked about, is about finding her voice and the space to express it (limited notions indeed of women's power). What then do we mean when we talk about empowering women, about personal power? Power needs to be conceptualized as a healthy and important force and right in reshaping economic, social and gender inequities. Power is not violence, it is not the control of others. Power is the ability, knowledge and relationships that give, preserve and nurture life.

Social Change

Social change is distinctly different from social service. Social change requires a comprehensive understanding of the dynamics of patriarchy, oppression and culture. The social service model requires little analysis outside of individuals' experiences: the focus is on individual victimization or "dysfunction," often resulting in victim blaming. The social change perspective requires making connections and understanding relationships between individual experiences, oppression, culture and history. The social service model requires separation and detachment from our relationships, from other institutions and from anything deemed political.

Social change is political: it requires critical analysis of power and control within all levels of society. Social change requires moving pro-actively to create systemic and cultural transformation based on respect. Social service requires maintaining the status quo: it assumes oppression and the current functioning of political, medical and social systems are "natural." Social service tends to lead individuals to become co-opted by the needs of the political, medical and economic systems.

Social change to end violence against women requires accountability to women who are battered and/or raped. Social service requires accountability to the person who signs the paycheck, i.e., the organization, rather than the women we work with, and adherence to the rules of the funding institution. In attempting to be clear with funders and other agencies, we sometimes talk about providing "direct services" when talking about assisting

women and their children in getting to safety, promoting access to resources and providing for basic needs. The language of “direct services” comes from the social service model. It intends to fix individuals during business hours, at the workers’ convenience, on a limited basis and with eligibility requirements.

Educational campaigns for social change – for a violence-free world – begin with, as mentioned earlier, the consideration of language as a powerful and strategic tool. Consciousness-raising and clarifying perceptions are directly related to words, which are energy-laden symbols that describe our understanding and reality. Drawing attention to particular words, their meaning and impact is a powerful way to teach people to do the critical thinking needed for social change and, in particular, undoing oppression and internalized oppression.

Most tribal peoples have a way to express the concept that words carry energy, describe our perception of reality and reflect our belief system. For example, if we describe the on-going beating, sexual assault and emotional abuse of a woman by her batterer as “a violent relationship,” “they’re fighting again,” or “family dispute,” we deny what is really going on. This minimizes and “equalizes” the violence and takes the focus off of the violent offender. In essence, that kind of language sets the stage for questioning the behavior of the woman who is victimized by violent crime, and fails to hold the batterer accountable for his actions. We must name what is happening accurately if we are to appropriately respond to, and end, violence.

Women who are battered are often referred to as victims, patients, clients, “my ladies” or “my victims.” Using this language denies respect for women as unique, capable human beings with minds, hearts and spirits. Terms like “my ladies” or “my victims” imply ownership and control of women who are battered. Labeling is a tactic used by batterers. Rarely do batterers refer to their partners by their names prior to, during, or following an assault; instead, women are called bitches, whores, hags, old ladies, etc. Labels (clients, patients) dehumanize and objectify women and are permission-givers for violence. Labels deny our relationships as relatives.

Calling women by their given name or relative name shows respect. It mirrors our understanding that though a woman has been battered, she still has many powerful gifts, skills, wisdom, experiences and relationships. Women survive horrendous violence because of these powers. When we treat each other as relatives, we overcome oppression and internalized oppression – we validate each other’s personal sovereignty and reclaim the power and control that had been taken from us.

Advocates: The Biased Supporters of Women Who Are Battered and Raped

The mechanism for social change is advocacy. Being an advocate is powerful in the best sense of the word. This work provides an opportunity to reclaim all the connections and relationships devastated by colonization and oppression.

Many advocates begin their work within a social service system. We are all educated and socialized by the larger society that presents the social service model as the appropriate approach to helping others. Advocacy includes all the things domestic violence programs offer individual women: 24-hour crisis line, shelter, food, clothing, transportation and accompaniment to court and other services, general, legal and medical advocacy, consciousness-raising/support groups, information and referrals, assistance with rent and utilities, childcare and crisis intervention, men’s re-education groups, and children’s programming. The list is expanded by what a woman needs to be safe and get her life back.

But often the isolation, ineffectiveness and frustrations of working from that model move us to critically question our role and relationships in both our personal and “professional” lives. This experience is a natural reaction to oppression and the realization of internalized oppression.

Limited access to resources, mounds of paperwork, eligibility requirements, limits on utilization and matronizing/patronizing attitudes all create barriers to women getting what they need and to which they have a right. These barriers can re-victimize women, prevent women from being safe and increase the danger to them. Advocates work to remove barriers: we provide resources like utility and rent deposits, food and gas money directly to women; create partnerships with other agencies and assist them in finding ways to prioritize the

needs of women who are battered; and work within our programs to create respectful policy and procedure that ensures the safety of women, minimizes delays and paperwork, and reflects trust that women know what they need.

Advocacy is an opportunity to understand the societal and personal impact of oppression and internalized oppression. Internalized oppression occurs when we take on the beliefs and behaviors of our oppressors. We are operating from internalized oppression when we make assumptions about other women, about their gender identity and expression, culture, race, ethnicity, abilities, mental health, education – basically, any aspect of who they are in the world. Internalized oppression moves to oppression when we misuse our privilege and make those who are vulnerable and different from us conform to our version of reality. We are operating from internalized oppression and in an oppressive manner when we believe we should behave in ways that are disrespectful or attempt to establish our “superiority” over others, for example, compete instead of cooperate, or label or judge others instead of accepting people as unique individuals.

We act out of our internalized oppression when we diagnose, analyze and/or refer “our clients,” “our victims,” our co-workers (or ourselves) to professionals we believe have more expertise than we do about ourselves. We use descriptors like “low self-esteem,” “co-dependent,” “neurotic,” “manipulative,” “dysfunctional,” and “victim.” These descriptors are the language of the social service/mental health model. They are disempowering, mislabel survival skills as illness, blame the victim, don’t hold the batterer accountable for his violence and excuse us from being responsible and taking action. These terms are used when we fail to acknowledge that women who are battered and/or raped are exhausted, still hurting on all levels, have not been made safe regardless of any actions they or others have taken and know that being direct just makes them a bigger target for escalated violence by their batterers. These terms ignore the reality that women, in addition to being battered and raped, face layers of oppression of all kinds that they cannot surmount.

A key aspect of social change and advocacy is the responsibility of holding our relatives and ourselves accountable for internalized oppression in respectful and compassionate ways. Internalized oppression can create feelings of inadequacy, confusion and fear that immobilize us or burn us out. We can react by becoming oppressive to those around us in a misguided attempt to maintain control. Or we can choose a path of courage and intellectual and emotional honesty that leads us back to the natural life way. When these “teachable moments” occur, it is important to find a way of talking about it without shaming. Guidance on this path can come from prayer and embracing relationships with sisters whose expertise about this journey comes from personal experience.

As a result of decades of advocacy and social change work, programs for women who are battered and/or raped are now seen as essential in many communities. The nature of shelter work is crisis-oriented, and we are equally challenged to not re-create the oppression of other systems we work so hard to change. But advocates’ leadership as social change agents does not end there – we must send a consistent message that the creation of shelter and other advocacy programs is necessary but cannot work in isolation; shelters alone will never end violence against women.

Advocates, as both biased supporters of women who are battered and/or raped and as social change agents, must develop and validate their abilities to think critically about the expectations, operation, goals and outcomes of relationships, institutions and systems. Critical thinking involves continuous questioning and political analyses, necessary to undo oppression and internalized oppression. This seemingly radical (meaning “grassroots”) approach necessitates a consciousness about the requirement to work in groups, strategize and prepare for backlash. There are very logical reasons why women “never go to the bathroom alone.” It’s about protection. So, too, women should never stand alone in the political arena – there are sanctions, i.e., weapons of oppression used to intimidate, co-opt and silence. Work in groups and strive to maintain and celebrate the vision of nonviolence and women’s sovereignty. Know that the negative attention validates the power and credibility of your work. If everything is comfy and everybody is playing nice, most likely nothing is changing.

Grassroots advocacy is based upon the expertise and credibility that come from direct experience and character (who you are as a human being), versus expertise and credibility based upon artificial indicators such as college degrees, income, etc. Our commitment to create safety and reclaim the integrity and justice for our sisters who are battered is often grounded in our own experience, most acutely, the experience of being battered. Knowing fear and pain, prayers for help and peace, and hopes to be believed provide the expertise. Our strength and courage in the face of violence, and our ability to live compassionately comes from the heart-centered foundation of our work.

Grassroots advocacy is the phenomena of and right to leadership, action and decision- making by those within the group. The expertise of women who have experienced battering is invaluable. We validate the voices and expertise of women by their inclusion in positions of governance and decision-making. Instead of soliciting “input,” which minimizes their knowledge and understanding, ensure that formerly battered/raped women be integral to all aspects of the work to end violence against women. By definition, “sovereignty” requires ensuring not only that the voices of women who are oppressed and have been battered are heard, but also that their expertise and basic rights are honored. This means that organizational structure and decision-making processes reflect leadership and governance by women who are members of the population served (e.g., Native, Latina, etc.) and are survivors of violence, i.e., battering or rape.

Advocates make relationships with other women as relatives and assist them to accurately label their experiences and pro-actively work to end the violence in their lives, within our communities and society. Advocates focus on safety of women, accountability and social change – not the faults of women. Women who are battered may be in our lives for minutes or years. We may like who they are, “approve” of their choices - or not. It’s irrelevant. Women who are battered, whom we have the honor of supporting, are always our sisters, mothers, aunts or grandmothers. They are always our teachers.

Our relationships with individual women are the fabric of social change. Advocates work side-by-side with their sisters and trust that women know what they need and prioritize their safety, integrity and autonomy. Advocates’ relationships with women who have been battered are the “life force” of the movement to end violence against women. The key elements of this relationship are the guideposts for advocacy and social change: validation of the voice, expertise and leadership of women who are battered; modeling respect, compassion and non-violence; personal accountability for our internalized oppression and behavior; belief in and non-judgmental support of women as whole human beings and their right to sovereignty.

Grassroots advocacy potentially nurtures trust, partnerships and movement between groups based upon our commonalities (in effect, living in an oppressive society). Grassroots advocacy, however, requires proactive recognition and tangible support of differences and autonomy. For all our shared or similar experiences that link us together and must be acknowledged, it’s the distinctions and the honoring of those distinctions that will undo the oppression. Grassroots advocacy provides the potential to work through internalized oppression together, and, perhaps more importantly, take a stand against oppression. If social change is about the vision and the recreation of non-violent, equitable, respectful relationships and societies, then grassroots advocacy is the vehicle: the means is the end.

- Domestic Violence Awareness: Action for Social Change – 2005, by Brenda Hill
- This work is adapted from *Ending Violence Against Native Women from the Roots Up: Shelter Program Development* produced by Sacred Circle, National Resource Center to End Violence Against Native Women.
- Grateful acknowledgement to Firoza Chic Dabby- Chinoy of the Asian & Pacific Islander Institute on Domestic Violence for her contributions to the discussion of power.

MAKING SOCIAL CHANGE: THE DYNAMICS OF EDUCATION, ACTION AND REFLECTION

By Ellen Pence

A note from The Project for Children: This discussion paper first appeared in the 1986 NCADV Conference Manual. We provide it as an example of the radical, political thinking that has shaped and propelled the work of the battered women's movement. The Project for Children seeks to extend this kind of political thinking to the work done with and for children.

Social change is the altering of society's social arrangements. It is the restructuring of relationships between and among various groups within a society. Social change does not occur instantaneously nor abruptly in human history. Instead, it occurs over long periods of time; it occurs continuously. There is probably no period of human history in which all aspects of the human experience were not in the process of social change.

To actively seek to direct, hasten or otherwise influence social change in human history is not typically seen as the work of women. Certainly it is not the work of poor women, or women of color, or old women, or lesbian women, or battered women. We are objects of history.

The purpose of structuring a society hierarchically with few at the top, some in the middle and most at the bottom of the order is to allow those at the top to control an inordinate amount of society's power, wealth and resources.

Since the opening of the first battered women's shelter in the early 1970's, activists have recognized that individual men do not hit, beat, spit upon, kick, grab or even kill their wives or lovers because of some kind of individual pathology. At dining room tables in shelters across the country, literally thousands of cups of coffee are consumed daily as small groups of women seek to understand men's violence. While each woman's story will differ and her partner's history have its own peculiarities, these conversations will invariably move to a common theme: at the root of battering claims that "someone has to wear the pants" and that "no ship can have two captains," he is surrounded by community institutions, from the church to the navy, that support his claims.

This arrangement of relationships between and among people is touted as being for the good of all and is mirrored in every facet of our lives, making us believe in its magical powers. It feeds on fear and hatred and lies and a belief in the system's rightness. This social arrangement can tolerate movement, adjustments, and alterations, but not the fundamental questioning of the distribution of power and resources. It is dependent on those at the bottom of the order accepting the notion that their status is due to flaws in their individual characters or group identity. Through its institutions, it teaches that with

hard work and self-improvement, anyone can enjoy the full fruits of our society. It promotes a collective consciousness of tolerance for and acceptance of the structure, leaving us only to debate the best way to help those at the bottom help themselves.

Any fundamental change in the social order requires the changing of society's collective consciousness. While changes in consciousness can and must occur at all levels of this hierarchically structured society, its source of nourishment will come from the oppressed. It will emerge from those least immersed in the thought patterns of domination. While no one in this culture can escape the devastating effects of the patriarchal imagination, those who benefit by it the least are best able to create a new vision.

Yet the culture of patriarchy is continuously usurping our power and resources to maintain itself, it becomes difficult to know how those of us suffocating under the weight of its insatiable demands on our humanity will ever gather enough strength to create basic changes in the social order. A radical transformation of the culture will be accomplished by creating new visions: visions of hope, not despair; visions of strength through unity, not power through domination. Our work in making social change is to create the future now by acting from an entirely new source of power and strength.

As we look about us and examine our creation (the battered women's movement), we will see that we are a mixture of both the new vision of hope and the old vision of fear and despair. We will see women of all races and classes working together, but still we do not see many old women guiding us in our struggle. We will see hundreds of shelters where just a few short years ago there were none, but at the same time we will rarely see our programs encouraging women to take direct political action. We will see organizations struggling with the concepts of shared responsibility and decision making, while others groan under the weight of their bureaucracies. We will see ourselves at times fighting for the right of all to be heard and listened to, and at other times silencing opposition from those whose opinions are unpopular. We see men learning to work with women in the struggle and grappling with other men bringing to our creation the marks of their oppressive class. We are in both places. We are in the patriarchy, and we are in the future. We fear pulling our legs and foot out of the old because, while it is oppressive to us, it is still familiar. The act of moving from the old to the new must begin somewhere.

If our task is to alter the relationships between and among people in our society, then our most fundamental question is "What is our relationship to the woman who walks through the shelter door with a blackened eye, incredible fear, self-hatred, guilt, despair and rage?" is she a client or a sister? Her reluctance to press charges is no different than our fear of publicly confronting our local police department or mental health agency. Her self-hatred and guilt manifest themselves no differently than our obsession to become a part of the social service fabric in our communities, to dress and talk in a way that gains their approval.

To preserve access to resources, wealth and influence, those on the top rungs of society's hierarchy use their control over institutions taught to hate and fear each other.

Our fledging organizations are given tiny bits of money from massive budgets and then forced to purge themselves of so-called “extremists.”

From birth, women are taught to give over our personal power, to accept male authority. Then as we reach adulthood, we are labeled as dependent, addictive, loving too much, suffering from boundary problems; we have “learned helplessness”; we generally lack assertiveness, proper parenting skills and self-esteem. The culture of domination reigns victorious when it engages us in their labeling process. When we label a woman co-dependent, addicted, a victim, a client, we act in the consciousness of domination. We engage in the endless process of fixing ourselves, and gave lip service to social change.

It is understandable that we recreate what we know. Most of our programs are hierarchically structured, most of our work is geared toward individual change, while we have taken great care to soften the dominance of patriarchal structures, our work cannot be truly transforming if it is done within those structures of domination. To make social change, we must act from a different vision. We must create today organizations and environments free of the consciousness of domination.

Our programs and projects must engage all of us in the act of discovery, of learning, of creating rather than perpetuating paternalism by acting of or on behalf of battered women. There is a qualitative difference between a shelter director and one or two workers meeting with the police chief in his office to discuss the enforcement of civil protection orders, and 30 to 40 women meeting with him in the shelter. While each approach may result in the same order being issued by the chief, the first approach empowers the shelter workers while the other empowers us all. The first approach makes the chief accountable to the shelter; the other makes him accountable to battered women. The first has some women working on behalf of other women; the other has women working on their own behalf. The first approach emphasizes the differences between shelter workers and battered women; the other emphasizes our common bonds.

The future vision then must be based on principles of unity. We must find today ways of acting together in which the relationships of domination are absent. The relationships of the shelter worker, the facilitator of women’s groups, the legal advocate, the child advocate and shelter residents must be rooted in our commonality, not our differences.

For women to engage in social action, we must first act in opposition to the process of oppression, which fosters despair and its accompanying passivity. Action against the established order can arise from and symbolize a new perception of reality. It is inextricably tied to education. In order to create such a vision, we need to rethink our whole concept of education, support, and counseling of women. We must guard against letting our models of sharing information, understanding and expertise become a part of perpetuating our consciousness of domination. The teacher imparts knowledge to the learner. The learner comes back for increased knowledge and for more information. Education as we know it and practice it in this culture is not meant to teach people how to learn, how to think critically, how to discover, but what to learn and what to think.

Education, therapy or counseling that leaves women isolated or exploring their personal defects will perhaps satisfy our funders, but it cannot lead to social change.

Paulo Freire, a Brazilian educator, was twice imprisoned and exiled from his country for his work in adult literacy, which focused on literacy education as a foundation for social change. In his classic book, Pedagogy of the Oppressed, he states,

At all stages of their liberation, the oppressed must see themselves as people engaged in the vocation of becoming more fully human. Reflection and action become essential. True reflection leads to action but that action will only be a genuine praxis (practical application of learning) if there is critical reflection on its consequences.

To achieve this praxis it is necessary to trust in the oppressed and their ability to reason. Whoever lacks this trust in the oppressed and their ability to reason. Whoever lacks this trust will fail to bring about, or will abandon, dialogue, reflection and communication, will fall into using slogans, communiqués, monologues and instructions. Superficial conversions to the cause of liberation carry this danger.

While no one liberates themselves by their own efforts alone, neither are they liberated by others. The leaders must realize that their own conviction of the need for struggle was not given to them by anyone else – if it is authentic. This conviction cannot be packaged and sold; it is reached by means of a totality of reflection and action. Only the leaders' involvement in a real historical situation leads them to criticize it and to wish to change it.*

Some will argue that we have no right to impose our politics on battered women, and that we have an ethical obligation to be neutral in our work with women in order to serve all women. But in reality, education is never neutral. It either promotes the status quo or challenges it. The role of education and action within the battered women's movement is crucial to the continuous development of a nonviolent world.

*Paulo Freire, Pedagogy of the Oppressed. Myra Bergman Ramos, Translator. New York: Continuum, 1970.

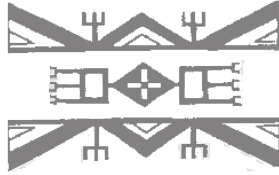
Ellen Pence
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KEY ISSUES



Walking in Two Worlds:
Understanding the Two-Spirit &
LGBTQ Community



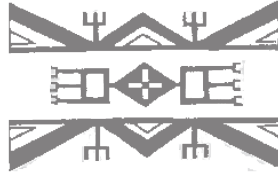
What does it mean to be Two-Spirited?

The term Two-Spirit is a direct translation of the Ojibwe term, Niizh manidoowag. “Two-Spirited” or “Two-Spirit” is usually used to indicate a person whose body simultaneously houses a masculine spirit and a feminine spirit. The term can also be used more abstractly, to indicate the presence of two contrasting human spirits (such as Warrior and Clan Mother).

Two-Spirit People (also Two Spirit or Twospirit), an English term that emerged in 1990 out of the third annual inter-tribal Native American/First Nations gay/lesbian American conference in Winnipeg, describes Indigenous North Americans who fulfill one of many mixed gender roles found traditionally among many Native Americans and Canadian First Nations Indigenous groups. The mixed gender roles encompassed by the term, historically included wearing the clothing and performing work associated with both men and women.

It’s important to know, the term Two-Spirit varies from tribe to tribe, but has some similarities





Will Roscoe writes that male and female Two-Spirits have been documented in over 130 tribes, in every region of North America. Two-Spirits have had distinct gender and social roles in their tribes.

They could have been:

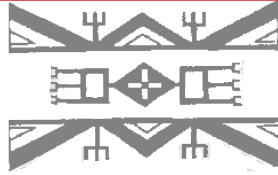
- Healers
- Medicine persons
- Conveyors of oral traditions and songs
- Name givers
- Special role players in sundance or other ceremonies
- Care givers, and/or would often be a parent to orphaned children

Before European contact, sexual and gender diversity was an everyday aspect of life among indigenous peoples. Since European colonization, the Two-Spirit community has been denied and alienated from their Native identity. As a result, Two-Spirit individuals are looked down upon as being perverted and often are shamed.

Two-Spirit people are currently living in multiple cultures; family, community, and society.

It's important to know that not all Native people identify as being Two-Spirited but will often use lesbian, gay, bi-sexual, transgender, or queer.

“The term Two-Spirit is used currently to reconnect with tribal traditions related to sexuality and gender identity; to transcend the Eurocentric binary categorizations of homosexuals vs. heterosexuals or male vs. female; to signal the fluidity and non-linearity of identity processes; and heterosexism in Native Communities and racism in LGBT communities.”

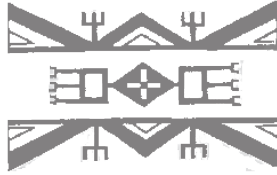


Issues that may Effect Two-Spirit/ LGBTQ Individuals

- Cultural Identity
- Alienation from family and friends
- The coming out process
- Unreported sexual assaults due to shame and self-blame
- Drug and alcohol abuse
- Depression
- Discrimination
- HIV infection
- Bullying
- Sex Addiction
- Hate Crimes
- Homophobia
- Serious mental health issues related to trauma
- Suicide
- Rejection
- Addiction
- Unemployment

The rate of victimization for American Indian adults is more than 2.5 times that of the overall US population.

AI/AN Two-Spirit women are triply oppressed. Often they confront stigma regarding their sexual orientation, not only from the wider society but also from other AI/AN 's, their families, their tribal communities, racism from the wider society and from other sexual minorities, and sexism from both Native and LGBTQ communities. Studies show that lesbians report higher rates of physical assault compared to heterosexual females.



In a recent study of Two-Spirit women, 78% of the women had been physically assaulted and 85% were sexually assaulted. This is 4 times higher than the estimate of lifetime assault among women in the general population. Most experienced abuse by multiple perpetrators, including family members, acquaintances, and strangers.

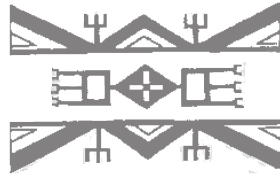
Assimilation into White lesbian culture quite often placed Two-Spirit women in the position of disconnecting from Native relatives and community.

In an Urban sample in the United States, gay, bisexual, and Two-Spirit men were more likely than heterosexual counterparts to report being sexually and physically victimized; 45% versus 2% reported sexual abuse or assault by someone other than their spouse/sexual partner.

How can I be helpful as a friend or partner?

- By believing your friend or partner who has been raped
- By avoiding judgmental comments
- By controlling your own feelings of anger and/or frustration
- By asking how you can be helpful rather than giving unsolicited advice
- By respecting her/his decision even when yours might be different
- By being a good listener
- By being honest with yourself if you have trouble handling the aftermath of rape

As Little Thunder, a Lakota Two-Spirit woman activist said, *“The pain of being rejected by ones own people can be the most devastating.”*



Transgender, Gender Non-Conforming

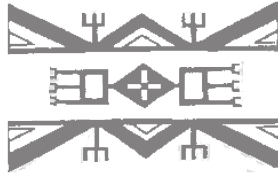
“Transgender is the state of one’s “gender identity” (self-identification as a woman, man, neither, or both) not matching one’s assigned sex. (identification by others as male, female or intersex based on physical/genetic sex). Transgender does not equal Two-Spirit (meaning that the term “transgender” was not a part of our culture but is a modern LGBT term.)

“Transgender and gender non-conforming people face injustice at every turn: in childhood homes, in school systems that promise to shelter and educate, in harsh and exclusionary workplaces, at the grocery store, the hotel front desk, in doctor’s offices and emergency rooms, before judges, at the hands of landlords, police officers, health care workers, and other service providers.

(National Gay & Lesbian Task Force, 2011)

“Colonizers have long tried to crush the spirit of the Indian peoples and blunt their will to resist colonization. One of the most devastating weapons of conquest has been sexual violence.”

- Andy Smith



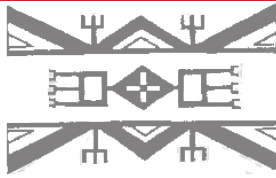
In a study done by the National Gay & Lesbian Task Force in 2011 with 6404 participants, 75 identifying as Two-Spirited found that:

- 56% Two-Spirit transgender participants attempted suicide
- 46% reported being rejected by family
- 45% reported family violence
- 74% reported losing friendships due to being Two-Spirited
- 19% of the participants reported having been refused a home or apartment
- 11% reported being evicted because of their gender identity/ expression.
- 19% reported experiencing homelessness at some point in their lives because of being transgender
- 55% reported being harrassed by shelter staff when at a shelter, 29% were turned away altogether
- 22% were sexually assaulted by residents or staff

Abuse by police and in prison:

- 22% of respondents who have interacted with with police reported harrassment by police, with much higher rates reported by people of color
- Almost half of the respondents 46% reported being uncomfortable seeking police assistance. Physical and sexual assault in jail and prison is a serious problem: 16% reported being physically assaulted, 15% reported being sexually assaulted

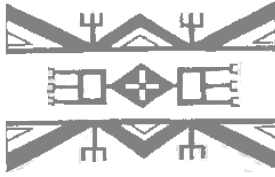
(National Gay & Lesbian Task Force, 2011)



Did You Know...

- Being sexually molested or raped by a same sex perpetrator does not make you Two-Spirited or LGBTQ
- When an individual who identifies as Two-Spirited/LGBTQ, it does not mean that they are attracted to everyone of the same sex
- Lesbian, gay, bisexual, people cannot be identified by certain mannerisms or physical characteristics. People who are lesbian, gay, or bisexual come in as many different shapes, colors, and sizes as do people who are heterosexual
- The majority of child molesters are heterosexual men, not lesbian, gay or bisexual people. Almost all studies show that over 90% of child molestation is committed by heterosexual men
- Homosexuality is not a type of mental illness and cannot be “cured” by psychotherapy. Although homosexuality was once thought to be a mental illness, the American Psychiatric and Psychological Associations no longer consider it to be one
- Psychiatric and psychological attempts to “cure” lesbians and gay men have failed to change the sexual orientation of the patient. These “treatments” may help change sexual behavior temporarily but also can create emotional trauma

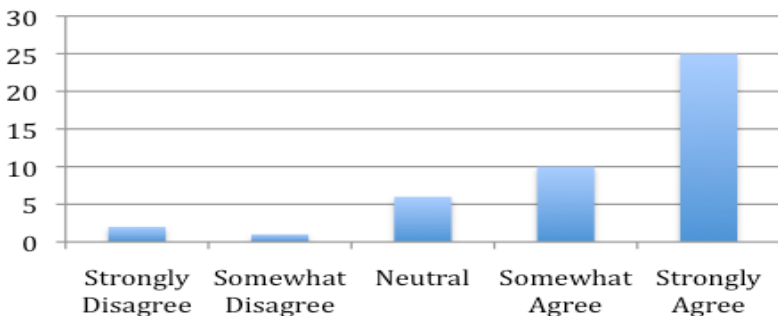
“Our elders tell us that Two-Spirit individuals were gifted because they carried both male and female spirit.”

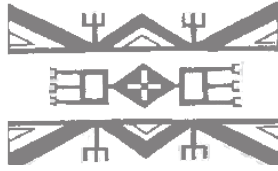


Tips for Effective and Respectful Interactions

- Don't assume you can tell if someone is LGBTQ/Two Spirit
- Respect the need for confidentiality
- Understand the differences between “coming out” as lesbian, bisexual, or gay and “coming out” as transgendered
- Do not tolerate anti-LGBTQ/Two spirit remarks or humor in public spaces
- If you don't know what pronouns to use, ask
- Be patient with a person who is questioning their gender identity
- Don't tell a person what “category” or “identity” they fit into
- Don't ask a transgendered person what their “real name” is
- Don't ask about a transgendered person's genitals or surgical status
- Don't ask a transgendered person how they have sex
- Know your own limits as an ally

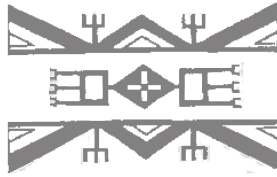
A Better Understanding of Two Spirit (GLBT) Issues is Needed in my own First Nations Community





Reasons why Two-Spirited/ LGBTQ Individuals Do Not Report Sexual Assaults

- Victims may have fear to disclose that they are Two-Spirited/ LGBTQ because when reporting to the police for fear of being re-victimized due to their sexual orientation or gender identity
- Often victims don't disclose because of shame
- When assaulted due to a bias, they question their own worth, regardless of whether it's due to being Two-Spirited/LGBTQ
- Lesbians, gay men, and transgendered people are targeted for sexual assault by anti-LGBTQ attackers or raped "opportunistically" (when the perpetrator of another crime inadvertently discovers that his victim is LGBTQ)
- Self-hate and blame can lead to feelings of depression and helplessness, even in individuals who are comfortable with their sexual orientation
- Those who are "out" have already faced a major threat to their self-esteem
- Those in the early stages of "coming out" will probably not have the social support and developed LGBTQ identity that can increase their psychological resilience and coping skills
- Without cultural sensitivity in the LGBTQ area, it is virtually impossible to provide meaningful, supportive services
- Many are not out to their family and friends
- Same-sex sexual assault has not received much attention from researchers, support services, or the criminal justice system
- This lack of attention to same sex rape has left many survivors without culturally competent support and, therefore, with few resources for healing



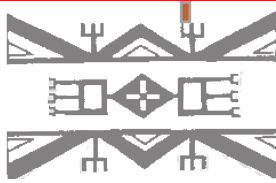
Common Barriers that Same-Sex Survivors of Sexual Assault Experience:

- Not being taken seriously or having their experience minimized
- Not having their experience labeled as sexual assault or rape
- Having to explain how it happened in more detail than one would ask a survivor of opposite-sex assault
- Having to educate those they reach out to
- Having their experience sensationalized
- Increasing people's homophobia or being seen as a traitor in their community if they tell their story to straight people
- Having fewer people to talk to because the Two-Spirited/LGBTQ community can be a small one that is tightly knit
- Mistakenly seen as the perpetrator
- Not being understood or being blamed for the sexual assault
- Being treated in a homophobic manner by the police, the hospital, rape crisis center, and others
- Being "Outed" (having ones sexual orientation discussed or revealed without ones consent)

“

“Living on a reserve that hate gays so much is hard especially when you want to come out, but you can't because you're scared to be beat(en) up or called down and/or murdered.”

*Quote from youth participant during Two Spirit Youth Speak Out
Vancouver BC*



Terminology

Ally: Someone who confronts heterosexism, homophobia, biphobia, transphobia, heterosexual and gender-straight privilege in themselves and others; a concern for the well-being of Two Spirit, LGBTQ and intersex people; and belief that heterosexism, homophobia, biphobia, and transphobia are social justice issues.

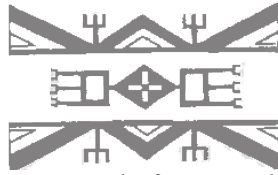
Bisexual: A person emotionally, physically, and/or sexually attracted to male and female individuals.

Coming Out: May refer to the process by which one accepts one's own sexuality, gender identity, or status as an intersexed person (to come out to oneself). May also refer to the process by which one shares one's sexuality, gender identity, or intersexed status with others. This can be a continual, life long process for homosexual, bisexual, transgendered, and intersexed individuals.

Discrimination: Prejudice+power. It occurs when members of a more powerful social group behave unjustly or cruelly to members of a less powerful social group.

Gay: Term used in some cultural settings to represent males who are attracted to males in a romantic and /or emotional sense. Not all men who engage in "homosexual behavior" identify as gay.

Gender: One's expressions of masculinity, femininity, or androgyny in words, persons, organisms, or characteristics.



Homophobia: The irrational fear or hatred of homosexuals, homosexuality, or any behavior or belief that does not conform to rigid sex role stereotypes. It is a fear that enforces sexism as well as heterosexism.

Lesbian: Term used to describe female-identified people attracted romantically, erotically, and/or emotionally to female-identified people.

Oppression: The systematic subjugation of a group of people by another group with access to power, the result of which benefits one group over the other and is maintained by social beliefs and practices.

Queer: An umbrella term which embraces a matrix of sexual preferences, orientations, and habits. For decades “queer” was used solely as a derogatory adjective for gays and lesbians, but in the 1980’s the term began to be used by gay and lesbian activists as a term for self-identification.

Sex Identity: How a person identifies physically: female, male, in between, beyond, or neither.

Transgender: A person who lives as a member of a gender other than that expected based on anatomical genitalia. Sexual orientation varies and is not dependent on gender identity.

Transexual: A person who identifies psychologically as a gender/sex other than the one to which they were assigned at birth. Transexuals often wish to transform their bodies hormonally and surgically to match their sense of gender/sex.

Note: For the complete LGBSTTSQI Terminology by Eli Green and Eric N. Peterson can be found online at Trans-Academics.org 2006

Additional resources and more information:

Two-Spirit Websites:

- Minnesota Two-Spirits- www.mntwospirits.20m.com
- Northwest Two-Spirit Society- www.nwtwospiritsociety.org
- Oklahoma City Two-Spirit Society- www.aaip.com/programs/2spirit.html
- Two-Spirit Society of Denver- www.denvertwospirit.com
- Bay Area American Indian Two Spirits- www.baaits.org
- Utopia Hawaii- <http://keliwai.50g.com/index1.htm>
- Native OUT, Phoenix, AZ- www.nativeout.com
- 2SPR(Two-Spirit Press Room) <http://home.earthlink.net/~lafor002.indes.html>

Online sources:

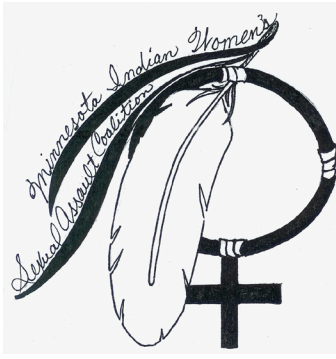
- Advocates for Youth: www.advocatesforyouth.org
- Center of Excellence for Transgender health: <http://transhealth.ucsf.edu>
- Gender Spectrun: <http://www.genderspectrum.org>
- National Center for Transgender equality: <http://transequality.org>
- PFLAG T-Net: <http://community.pflag.org/Page.aspx?pid=380>
- Trans Family: <http://www.transfamily.org>
- Transgender Law and Policy Institute: <http://www.transgenderlaw.org>
- Youth Resource: <http://www.youthresource.com>

Two-Spirit Suggested Reading List:

- Brant, Beth, 1991 *A Gathering of Spirit: Writing and Art by North American Indian Women*, 2nd ed. Rockland, Md.: Sinister Wisdom; Ithaca NY. Firebrand Books
- Chrystos, *Not Vanishing*, Vancouver, BC: Press Gang, 1988 *Dream on*, Vancouver, BC: Press Gang, 1991 *In her I am*, Vancouver, BC: Press Gang, 1997
- Day, Sharon, *Drink the Winds, Let the Waters Flow Free*. Minneapolis: Johnson Institute, 1983.
- Gould, Janice. *Beneath my Heart*. Ithaca, NY: Firebrand Books, 1990.

References:

1. *Abuse, Mastery, and Health Among Lesbian, Bisexual, and Two-Spirit American Indian and Alaska Native Women*, Keren Lahavot, Karina Walters, and Jane M. Simoni. *Cultural Diversity and Ethnic Minority Psychology* 2009, Vol 15, No. 3, 275-284
2. *Culture, Trauma, and Wellness: A comparison of Heterosexual and Lesbian, Gay, Bisexual, and Two-Spirit Native Americans*. Kimberly F. Balsam, Bu Huang, Karen C. Fieland, Jane M. Simoni, and Karino Walters. *Cultural Diversity and Ethnic Minority Psychology* Copyright 2004 by the Educational Publishing Foundation, Vol 10, No. 3, 287-301.
3. *My Spirit, My Heart, Identity Experiences and Challenges Among American Indian Two-Spirit Women*, Karina L. Walters, Teresa Evans-Campbell, Jane, M. Simoni, Theresa Ronquillo, and Rupaleem Bhuyan, <http://haworthpress.com/web/JLS>, 2006 by the Haworth Press, Inc.
4. *Vicitmization, Substance Use, and HIV Risk Behaviors Among Gay, Bisexual, Two-Spirit Heterosexual American Indian Men in New York City*, Jane M. Simoni, Karina L. Walters, Kimberly F. Balsam and Seth B. Meyers. *American Journal of Public Health*, Dec 2006, Vol. 96, No.12
5. *Two Spirit Youth Speak Out!, Analysis of the Needs Assessment Tool* Urban Native Youth Association, www.unya.bc.ca



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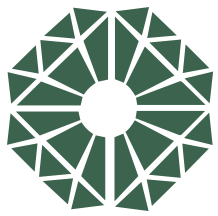
Toll Free: 1-877-995-4800

Fax: 651-646-4798

For More Information on **The MN Two-Spirit Society**, contact:

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TAG

Technical Assistance Guidance

Serving Male-Identified Survivors of Intimate Partner Violence

by Eric Stiles, Ivonne Ortiz,
and Casey Keene

July 2017



National Resource Center
on Domestic Violence

“There are many effects of the abuse that are particular to males. Men are not supposed to be victims. Society tells us: men don’t get depressed, men don’t seek help, men don’t need therapy...”

– Male survivor

Historically, domestic violence programs were born from the women’s liberation movement of the 1970s to address the needs of female survivors, who still represent the majority of victims seeking services today. Generally, the domestic violence movement has framed its work on a gender binary with men as perpetrators and women as victims. We have come to learn, however, that a woman-centered approach to advocacy only addresses the needs of a portion of survivors and largely fails to acknowledge and address male victimization. This Technical Assistance Guidance supports advocates seeking to build capacity to recognize and respond to survivors across the gender spectrum, while honoring the gender analysis that helps us understand the root causes of violence and oppression.



VAWA Non-Discrimination Grant Condition

No person in the United States shall, on the basis of actual or perceived race, color, religion, national origin, sex, gender identity (as defined in paragraph 249(c) (4) of title 18, United States Code), sexual orientation, or disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity funded in whole or in part with funds made available under [VAWA], and any other program or activity funded in whole or in part with funds appropriated for grants, cooperative agreements, and other assistance administered by the Office on Violence Against Women. (42 U.S.C. 13925(b)(13))2014)

While data continues to show that girls and women are disproportionately impacted by intimate partner violence, boys and men are also victims and deserve survivor-centered and holistic services. One of the most reliable sources of information on the prevalence of the victimization of men in the United States is the National Intimate Partner and Sexual Violence Survey (NISVS). The CDC’s most recent NISVS data, as reported in Prevalence and Characteristics of Sexual Violence, Stalking, and Intimate Partner Violence Victimization- National Intimate Partner and Sexual Violence Survey, United States, 2011 underscores that “any focus on differences between men and women should not obscure the fact that nearly 16 million men have experienced some form of severe physical violence by an intimate partner during their lifetimes and over 13 million men have experienced intimate partner violence during their lifetimes that resulted in a negative impact” (Breiding, 2014).



The Violence Against Women Reauthorization Act of 2013 amended the Violence Against Women Act (VAWA) of 1994 by adding a grant condition that prohibits discrimination on the basis of gender identity or sexual orientation (in addition to sex and other categories) by recipients of certain Department of Justice (DOJ) funds. [The Family Violence Prevention and Services Act \(FVPSA\) Final Rule](#) similarly indicates that all survivors must have access

to services and programs and must receive comparable services. More specifically, it states that “no person shall on the ground of actual or perceived sex, including gender identity, be excluded from participation in, be denied the benefits of, or be subject to discrimination under, any program or activity funded in whole or in part through FVPSA” (Department of Health and Human Services, 2016).

Providing services to male-identified survivors is not only required by law, but is the ethical and right thing to do. Most domestic violence programs adhere to a survivor-centered approach when designing, developing and implementing programming. This approach ensures that survivors’ rights and needs are first and foremost – that each survivor’s experience of violence, culture, life circumstances, and identity (gender, age, race, ethnicity, ability, sexual orientation, religion, HIV status or other self-identification) determines the direction and focus of advocacy and safety strategies. As advocates, if we want to effectively meet our mission to end domestic violence, we must be attentive to the unique needs of all survivors.

This paper offers guideposts for responding to the needs of male-identified victims of intimate partner violence. It is meant to be a resource to foster meaningful dialogue around supporting inclusive services for all victims and survivors seeking safety and healing.

Challenges to Serving Males

Challenges to serving those who identify as male often stem from our lived experiences. It can be difficult to question what we have learned through education or daily practice. When it comes to serving male-identified survivors of domestic violence, the lack of

Exploring the following questions may offer useful reflections on our work:

1. How many stories of domestic violence have you heard in the last 6 months?
2. How many of these stories include a male aggressor and a female or child victim? In how many of those stories is the male described as the victim of domestic violence?
3. What is the gender identity make-up of the employees at your agency?
4. When you think about male victims of abuse, who comes to mind?
5. How many victim/survivors have you served over the last year that do not identify as female?
6. What inspired you to work to address and prevent domestic violence?

knowledge and experience creates a vacuum for many who have learned and practiced from a survivor-centered model that lacked attention to serving such victims.

As advocates we bear witness to stories of victimization throughout our careers where males are perpetrators and women and children are victims. Studies reflect the reality that intimate partner violence most often looks this way, and most research, education, resources, and tools have been created within this paradigm. But limiting our exposure to and understanding of the gender variations that can and do occur has a profound impact on our ability to meet the needs of all victim/survivors. We as a movement need to examine and expand beyond the one-size-fits-all model.

Additionally, advocates bring personal experiences to the work, which are often an important source of inspiration and passion. While our stories add value to this movement, we must always be mindful that each is unique and therefore not representative of all.

As a product of the feminist movement, it is not surprising to find that most community-based domestic violence programs are staffed primarily by female-identified advocates and volunteers. It is important to explore the gender composition of agency staff and its impact on organizational culture, including the voices of and roles available to and held by male-identified employees.

When we consider our previous histories of trauma, the stories that we take in, and gender-specific composition of the field, we find an environment that may stifle our growth as advocates in working with those who identify as male, and can foster mistrust of males in general. We are charged as advocates to take stock of these experiences and to adjust in how we meet the needs of others. This self-awareness is a key aspect of responsible and ethical practice, and requires ongoing reflection, both internally and in conversation with others, to promote continued growth.

Defining Male Identity

Gender identity and expression exists on a spectrum. In this document, we will use the term male to describe both those who identify as male and those who have never had to think about their gender identity as being anything other than male. Male identity includes a vast group of individuals spanning every age, race, ethnicity, culture, sexual orientation, religion, ability and socio-economic status,

Self-awareness is a cornerstone of competent practice that requires deliberate and ongoing effort. As part of this work, seeking counseling/supervision related to your own history of trauma is important when working with males or any other population. For more, see the [Guidebook on Vicarious Trauma](#) from the Centre for Research on Violence Against Women and Children (2001).



each of whom have their own needs based on their unique experiences. When you examine or reflect on your agency practices or inside yourself and think about male victims of abuse, who comes to mind? What are the characteristics of these males?



Who have you missed? You may not have considered male-identified veterans or active service members as victims of domestic violence, those who are incarcerated, teen boys who have experienced abuse in dating relationships, men in later life, men in same sex relationships, or individuals who identify as transmen. These are just a few examples. Write down your answers and share them with your peers/coworkers to help identify capacity building opportunities to address services to male-identified victims.

Men's Experiences of Intimate Partner Violence

The statements below illustrate some of the impacts of males' experiences of victimization and challenges in seeking assistance.

“It's hard, people don't believe you. I told one doctor my partner was beating me up and he immediately thought that I was gay. Society can't believe that a heterosexual man can be a victim of abuse.”

“An officer said to me, 'She must be a really big woman, and stronger than you.' Society doesn't believe men like me that go through things like these.”

“What has happened to me is not the same as what happens to a woman.”

“The police told me that if they received another phone call about us they would arrest us both.”

“When I started to talk about this with my friends they just make jokes.”

“It is not like what I watched my mom go through.”

“I must have done something wrong. I know that he will change, he was the only one who was there for me when I came out.”

“Where do I even go for help? I am not a woman.”

Males face unique barriers to accessing services that are mostly rooted in the lack or perceived lack of male-serving organizations or tailored services for men in their local community. In addition, many male victims do not recognize or define their experience as domestic violence. While many of the ways in which domestic violence affects males may be similar to female experiences, they may be expressed, received, or labeled differently for men.

Diminished self-worth. This can be entangled with feelings about what society says it means to be a man. Typically men are expected to be able to protect themselves, and to be abused challenges this belief that is reinforced by many different cultures.

Fear. This can be expressed in a wide emotional range, from a flat affect to one filled with rage. It may not even be expressed at all.

Shame. This is different than guilt, which is a healthy response to having done something one considers wrong. Guilt can inspire behavior change. Shame, on the other hand, is a static feeling about one's core self-image ("I am bad"). Shame is often a reflection of messages imposed by family, friends, culture or social norms. It may surface as a male's overwhelming refusal to share what happened and to defend their offender.



Review Your Awareness Materials

The images and messages you share in both traditional and social media make an impact. Create a focus group of male-identified volunteers, staff, board members, community partners, and former clients. Ask them to review the images and messages that you put out in the community. Inform them of the intended audience and use of each image or message and ask them to consider the following questions.

1. What are your initial thoughts?
2. What do you feel when seeing the image/message?
3. Do you think it reaches the intended audience?
4. How might an individual who identifies as a male victim/survivor react to this image/message?
5. Do the images reflect diversity in both sexual orientation and gender presentation?
6. What images or messages are lacking in what you have seen?
7. What message would you like an individual who identifies as a male victim/survivor to receive from this agency?
8. What would be effective strategies or venues for sharing this image/message with male-identified audiences?

Minimizing the violence perpetrated against them. This may surface as qualifying the pain or severity of the abuse as not as "bad" as others.

Using substances to cope. Those around the male may perceive him as "damaged" or not worthy of support because of substance use to numb, escape, or forget the pain they have experienced.

Risk of physical harm or death. Abused men may describe their partner as angry, and either understate or omit their own fear unless asked directly. They can often minimize the impacts of these risks by blaming themselves to be at fault for creating anger in their partner or by minimizing the previous physical and/or emotional trauma they have experienced from their partner.

Reaching Out to Males

“It’s been a great investment. Now we’re seeing a lot more men call, particularly gay men. The need is out there, men don’t think [shelter] is available to them. Word of mouth is getting out, and I’ve consistently seen at least 1-2 men all

of the time in shelter. It's a worthwhile step. Since we've done it, no one thinks we should go back to how it was. ””

- Gender-integrated domestic violence agency (FORGE, 2016, p.17)

This section offers strategies for creating an agency that feels welcoming to male-identified survivors and raising awareness in your community about the services you offer to male populations by exploring a few key marketing elements.

Know your intended audience. This is key whether you are seeking to address a group of professionals, community members, or victims/survivors. There are many socio-economic, religious, and cultural variables that need to be considered to effectively market your message and your agency. This includes previous history with another agency or community. Most organizations experience periods where they may be helpful or harmful to individuals, systems, or other agencies. This may be due to a variety of factors such as lack of understanding your audience, lack of realistic or common goals or previous directives from leadership. Consider that each internal or external meeting with new stakeholders is an opportunity to create strategic partnerships, and mistakes are part of the process. It takes time and intentional efforts to build trust and authentic relationships. In any setting, always remember that many families have been impacted by domestic violence and be aware that victims, including males, are likely part of your audience.

Create inclusive awareness materials. Be attentive to the images and messages used in your agency's posters, brochures, and campaigns so that male victims can see reflections of their experiences, faces, and voices. Be mindful of the language you use when speaking to traditional media or engaging with social media audiences. These are places to express your

Engaging Male Victims in Crisis

For many advocates/hotline volunteers it is difficult to determine what the caller's needs are based on the few details they are given over the phone. The [Respect Toolkit: Work with male victims of domestic violence](#) (January 2013) suggests asking the following questions to help advocates/hotline volunteers identify male victims/survivors (see page 23).

- Can you tell me about the last time something violent or frightening happened?
- Can you tell me about the worst time there has been?
- Can you tell me what you usually do when this happens?
- Do you ever feel afraid to make certain decisions or do certain things because of what you think your partner/abuser might do?
- Have you ever been injured by your partner/family member – tell me more about that?
- Has your partner/family member ever been injured during an incident? Can you tell me more?
- Are you frightened of your partner/abuser? Are you frightened of what they might do to the children?
- What are you frightened of in relation to your situation?
- Do you think your partner is frightened of you? Have they ever said that they are frightened of you?
- What do you want to happen now?



genuine desire to meet the needs of male-identified survivors in your community.

Think about the name of your organization. Is it focused solely on women? If so, begin conversations with your staff, board, volunteers and outside trusted partners on how they think your name may be received by male victims/survivors. Names have power and send a clear message about who and what your agency stands for. Is the name of your organization reflective of the mission and welcoming for all survivors?

Host focus groups. Invite agency partners to do a walk through of your program, and engage them in a focus group around how the populations they work with might experience your agency. Talk to male survivors who accessed your services in the past and ask them what they found most useful or challenging. Work with partner agencies to organize listening sessions with males at conferences or other settings. Ask other male-serving agencies to invite clients to engage with you around their needs for trauma-informed domestic violence services.

Gender Inclusive Service Provision

“It has always been our philosophy to help men. They are abused, neglected, and need help.”

– Gender-integrated domestic violence agency (FORGE, 2016, p. 12)

With limited resources, this section leans on ways in which we can provide support through a trauma-informed, victim-centered approach focused on meeting the survivor where they are.

Shifting to embrace trauma-informed approaches requires a critical look at your organization’s service delivery model. Historically, many victim service providers have adopted a reactive approach to service delivery where we wait for victims to reach out to us for services that are centered around the provision of safe spaces for women and children. This model has served many people well for many years, however it does not serve all members of the communities in which we live. Trainings, awareness initiatives, and outreach materials are generally built on a

8 Reasons to Integrate Shelter Services for All Genders

In 2015, FORGE interviewed 135 gender-integrated shelters and allied agencies who identified their reasons for doing so:

1. It aligns with the values of the domestic violence field.
2. It creates new access for survivors with nowhere to turn.
3. It’s rewarding.
4. It helps dispel gendered stereotypes about perpetrators and survivors.
5. It leads to learning opportunities for residents and staff alike.
6. It avoids revictimization of trans people.
7. It’s the law.
8. It saves money.

Read more in [Why Include People of All Genders in Shelters](#) (2016).

male/offender, female/victim gender paradigm. The names of our agencies are women-centered. And media and popular culture reflect this limited understanding of who victims of domestic violence are. This narrow perspective limits males' ability to see themselves as victims and find their way to service providers.

The first step to gender inclusiveness is to take a proactive approach to providing services to males, characterized by community outreach to meet the populations that you seek to serve. Consider providing community-based services in settings other than your own agency. We must be creative in our approaches to meet the needs of all members of our communities.



Crisis/helpline services are usually based within a shelter in response to the caller's immediate needs, which may not allow for the unique needs of males. When greeted by a male voice, a hotline advocate may be on alert to see if the caller is a perpetrator who has abused someone already receiving their services. While this is a protective step in assisting the females that reside in shelter or utilize services, it fails to consider abuse in same sex relationships, females who offend against their male partners, or individuals who may have had experiences as both a victim and offender of domestic violence, perhaps at different points in their lives.

Advocates/hotline volunteers should be trained on the diverse experiences and needs of male-identified victims and strategies for receiving and processing men's crisis calls. Additionally, agencies should regularly revisit their screening process for callers, with careful attention to men's unique barriers and challenges when reaching out and accessing services.

“There was a cisman [non-transgender man] who was eternally grateful for all of the resources that we provided to him. He was an educated man who had little power in the community whose partner kept him as a stay-at-home father and sort of locked him away and he was able to get validated there and be successful.”

- Gender-integrated domestic violence agency (FORGE, 2016, p.13)

Residential services may include a shelter operated by the domestic violence program, one that is in partnership with the agency, rapid rehousing, or an off-site location such as a local hotel. Shelter programs have been historically gender specific, and in some areas may still be segregated by gender identity in an effort to protect the safety and security of women and girls. Males are typically accommodated at an off-site hotel or partner shelter (homeless shelter). These options may worsen the victim's feelings of isolation, expose them to further harm, or limit their access to additional supportive services. Hotel stays are short term and lack the constant staff presence and support needed to help victims fully process their experiences. This may leave the victim to feel alone and vulnerable

to being found by their offender, especially in communities that don't value or understand the experiences of male-identified survivors. Additionally, homeless shelters may not have the capacity to manage trauma reactions or safety and privacy concerns in the context of domestic violence, and often pose a new threat or perceived threat of violence from other individuals in the shelter. This can be especially true for those from marginalized groups such as the gay/bisexual and transgender communities, who experience harmful expressions of homophobia and transphobia. Other populations such as those with physical disabilities, mental illness, cognitive challenges, language barriers, or immigration status may also face unsafe conditions often in homeless shelters.

Agencies can explore ways to reasonably meet the safe housing needs of males on site, and enhance staff capacity to provide true parity in services. This can be done through candid dialogue within the agency board, staff, volunteers, and those they serve in conjunction with outside partners. There is currently not a one-size-fits-all model for providing supportive residential services for male-identified victims, although FORGE offers helpful guidance in *Gender-Integrated Shelters: Experience and Advice* (2016). As a starting point, see the *Tipsheet How Shelters Prepare for Gender Integration* (FORGE, 2016).

“One man, who I assume was trans or gender non-conforming, had a lot of concerns about coming into shelter. He expressed a lot of relief about how welcoming the space was and how safe he was there. He sent pictures of the space to his mom and his family felt good about where he was at. His anxiety level was so high! And he was able to breathe and feel good about where he was at.”
– *Gender-integrated domestic violence agency (FORGE, 2016, p.13)*

Counseling services help meet the needs of individuals as they cope with and heal from the abuse they have suffered and plan for the next stage of their life. Males from diverse backgrounds and cultures may struggle with the concept of accepting counseling because it may challenge their ideal of masculinity, making them feel as though they are weak or worthless as a man.

Agencies can seek training on alternative counseling styles and approaches that may be more effective with males. Advocates can explore other ways of providing similar support in a different setting, like playing basketball, talking at a kitchen table over coffee, or in a setting where the counseling may be folded into another activity.

“Almost every man who comes through we consider a success. It's nice for them to have people who understand what they've been going through, and talking about their situation is new and good for them. They recognize they're not alone and they're not the only man who goes through this.” – *Gender-integrated domestic violence agency (FORGE, 2016, p. 15)*

Support groups offer facilitated peer support, usually with an educational component, over a period of several months to a year. Groups are typically gender-specific in an effort to create a safe space for sharing. However, groups for males

are very rare, if they exist at all. This reinforces a sense of isolation and further promotes the invisibility of male experiences of victimization.

Agencies can implement male support groups, even on a short-term basis. Alternatively, advocates can seek out training on how to integrate gender-specific groups together at times to work on similar concerns or create a new sense of trust. Expressive arts may be one unifying avenue to explore.

Legal services include obtaining protection from abuse/restraining orders, legal accompaniment in the courtroom, assistance with name changes, divorce, custody matters, immigration services, and others. Agencies can explore their own processes for supporting males’ legal needs as well as the capacity and readiness of partner agencies to do so.

Peer support offers opportunities for male-identified survivors to network and build community. Develop and promote informal opportunities and social activities for survivors to network and include them in the planning stages for these activities.

Speaking out and sharing one’s story of survival can be a helpful part of the healing journey, offering personal empowerment and fostering resilience. Agencies should support male survivors who wish to build their capacity to speak publicly or tell their story through various creative outlets.

To further explore concrete strategies for service provision, see [Guidelines & Best Practices to Address the Service Needs of Male Victims of Domestic Violence: A Training Manual](#) from the New York City Human Resources Administration.

Building Collaborations to Improve Services to Males

Building new partnerships is an essential step in effectively meeting the needs of male-identified victims of domestic violence. You may consider looking for possible partnerships within these common community programs/institutions:

- Alcoholics Anonymous and Narcotics Anonymous groups
- Colleges and university-based centers
- Cultural community centers
- Drug and alcohol treatment facilities
- Faith-based organizations
- Foster/group homes
- Homeless Shelters
- Hospitals or health clinics
- LGBT community centers
- Reentry programs for those who have been incarcerated
- Sports leagues
- Teen residential treatment facilities
- Veteran’s assistance programs

Consider Individuals’ Personal Experiences of Abuse

Always approach new individuals being mindful that you may be talking with male victims/survivors of domestic violence. This assists you in calibrating your interactions, and avoiding messages that may trigger feelings of shame and helplessness.

When meeting with new partners, find out about their structure. What is their organizational culture regarding male-identified victims of abuse? Do they have the capacity to work with all survivors of domestic violence, including male-identified victims? How do they interact with male victim/survivors of domestic violence? How do they assess males for victimization? What do they identify as supports or barriers to males sharing their stories freely? Find out what your agency can do to support their work. Can you assist them in training efforts? Can you assist them in facilitating joint group sessions?

Schedule time throughout the year to follow up with these organizations. Send staff, volunteers, and board members to their events. Invite them to share their expertise through training. Offer seats at the table to meetings where they may not have been invited in the past. Create brave spaces to talk about current and historical relationships, and find ways of correcting past missteps. Provide opportunities to jointly create awareness materials and resources for survivors and the community. Find ways to otherwise support their work and demonstrate your genuine commitment to building a strong relationship.



Effective and sustainable efforts to build and maintain strong relationships between agencies will involve more than one person, and will occur on multiple levels. Encourage direct lines of communication between leadership and agency staff.

Enhancing Organizational Policies

This checklist offers a starting point for reviewing and enhancing your agency's policies toward inclusive services. Be sure to seek out guidance, and engage all levels of staff, throughout the change process.

1. How often do you engage in policy review to ensure non-discrimination standards are met? Does this include reviewing policies about serving male-identified victims/survivors specifically?
2. Who can review and provide input to policies, procedures, or organizational messaging about serving specific cultural groups or populations? Is all staff, including direct services staff, included in this process? Is there a process in place for partners/focus group to do this work?
3. What is your policy on inviting/hiring male-identified employees/board members/volunteers? Are there any positions that they cannot hold? Where are these positions advertised? How are they recruited?
4. Are there questions on initial and/or exit interviews for staff about how they perceive the work environment for males colleagues?

5. Do interview questions explore capacity to work with individuals from specific cultural groups or populations?
6. What is your policy on providing shelter to those who identify as male?
7. What are your policies on training board, staff, and volunteers about working with males?
8. How does your agency track and report the number of males seeking and receiving services? Are service denials and referrals recorded as well?
9. What are your policies about serving males in all service areas? Do they align with VAWA and FVPSA guidance?
10. What are your policies, processes, or goals around mending/creating new partnerships in the community? Is this part of your agency's workplan?

For sample anti-discrimination policies for domestic violence agencies, see Appendix D in *Gender-Integrated Shelters: Experience and Advice* (FORGE, 2016).

Conclusion

By reading this document you are opening the door to enhancing your capacity to meet the needs of male-identified victims of domestic violence. While this may feel daunting at times, we have a solid foundation of trauma-informed, victim-centered advocacy efforts to build from, and there are growing resources out there to support this process. Remember that we are part of a movement, which requires growth and progress in its very definition. Shifting to allow space for inclusivity can only make our movement stronger. Just as we empower survivors to learn a new way of life on their path to healing from abuse, we must feel empowered to examine long-held approaches and be brave enough to change course when necessary. Take a few breaths and reach out for help.

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The NRCDV welcomes your input. If you have any comments or additional information to provide, please contact our Programs & Prevention Team at nrcdvTA@nrcdv.org.

Difference between Anger Management and Domestic Violence Programs

John Howard Society of Toronto

ANGER MANAGEMENT

AM programs focus on anger as a misunderstood and misaligned emotion which often follows fear, depression, stress, fatigue or a perceived threat or personal attack. The situation which causes anger is not the problem, the unhealthy response to anger is the problem. AM does not focus on partner relationship power imbalances that are present in DV cases.

AM classes are designed to assist clients only in the following areas: Emotional intelligence, stress management, anger management, and communication skills.

DOMESTIC VIOLENCE

DV programs focus on issues of power and control that play a part in domestic violence. DV programs discuss male socialization, female socialization, substance abuse, child abuse, male domination, and the impact of domestic violence on the individual, the family and community.

DV programs are deliberate and purposeful interventions that are designed to interrupt the cycle of violence and abuse with intimate partner violence. Classes are specific and structured to adhere to well researched best practices. It does not focus on saving relationships, but rather on ending abusive and violent behavior.

AM is inappropriate for DV clients if it is the only or first treatment they are receiving. Inappropriate interventions can put victims at greater risk.

DV programs have an assigned partner contact that is accessible to the victim at any time to ensure their safety and guide them in making the appropriate safety plans. This role is unique to DV programs and is not offered in an AM program.

AM is only appropriate for perpetrators of strangers or non-intimate partner violence, road rage, and workplace violence or abuse. AM focuses on how to deal with your anger triggers so that the client can learn to express anger in a healthy way.

DV programs are only appropriate for perpetrators of partner violence and abuse. These programs address the underlying reasons why we become abusive towards our partners. AM programs do not focus on partner violence and how to stop the cycle of abuse.

Many times, AM clients may benefit from attending traditional counselling, mediation and at times, family counselling to help them resolve any unresolved conflicts in their relationships that are contributing to their anger. These are cases that do not present any power imbalances in their relationships and would not be putting anyone else at a greater risk by attending.

Traditional couples counselling, family therapy and misinformed mediation practices can be inappropriate interventions for domestic violence situations where there is a power imbalance. These interventions can do more harm than good as they are not victim focused and can many times put the victim at a greater risk of serious harm.



Overview: Batterers Re-education Programs

Most advocacy and shelter programs are overwhelmed by efforts to women who have survived domestic and sexual violence, and their children, safe and help them reclaim their lives. Meeting the needs of male survivors, those of the LGBTQ2S communities and other disenfranchised groups pose additional challenges. However, it is necessary to strategize ways to hold offenders accountable and foster change to end the violence. This purpose of this brief article is to encourage domestic violence advocates to make the establishment of Batterers' Re-education program a part of their strategy and vision of program development and coordinated community response.

Note that intimate partner violence/ battering is a gender-based crime. The majority of offenders are male. This is not natural but a result of socialization, hence Batterers' Re-education programs are about unlearning unnatural, negative beliefs and behaviors, and learning natural, non-violent beliefs and behaviors. These programs are relatively few and far between for a variety of reasons. Programs can run anywhere from 4 to 56 weeks, usually dependent upon available funding. "Success rates" of existing programs are not very high. What "success" means in this context is also debatable, although there is general agreement, they are necessary to hold offenders accountable and offer a means to change their thinking and behavior. Batterers' Re-education programs give an opportunity for personal accountability, to examine their violent behavior and the impact it has on himself, his partner, children, family, community, and nation.

Culturally-based re-education programs examine the offender's use of power and control tactics, focus on personal accountability and unnatural beliefs about women, gender roles, etc. from a cultural perspective. Since violence against women and children, domestic violence in all its forms, rarely happened before colonization, the natural belief system and its values, beliefs and practices held by indigenous societies provide the path to change. Non-violence, spirituality, respect, compassion and personal responsibility are hallmarks of culturally-based programs. It is important to note that men, who participate in men's camps or cultural camps, have a much higher success rate and lower rate of recidivism. Culture, tradition and ceremony play a huge role in healing our men and protecting our women and children. No young boy says he wants to grow up and abuse women, just as no little girl wants to grow up to be abused.

Model re-education programs are part of a coordinated community response led by an advocacy program. Learning to be non-violent, respectful of intimate partners, honoring women, and behavior change are difficult and occurs over time with mechanisms for continued accountability and support. It is highly recommended that attendance in these programs is court-ordered, part of intensive, extended probation and compliance consistently monitored in coordination with an advocacy program. Survivors are the experts on their batterers and whether true change is happening. The survivor's voice in this process promotes to true accountability. Their involvement, usually through an advocate for safety reasons, is strictly voluntary. Their confidentiality must be guarded at all times, regardless of their involvement.

Batterers' re-education programs are not counseling or therapy groups. If participants have mental health issues, referrals to mental health professionals are appropriate; however, they do not replace criminal justice consequences for criminal behavior. Anger management programs are inappropriate and possibly dangerous if used to replace re-education classes or jail time. Violence is not caused by anger. Anger is an emotion. Violence is behavior and about power and control.

Alcohol/substance abuse is a major problem throughout Indian Country (as throughout the US) and many offenders attending re-education programs do abuse alcohol/other drugs. Alcohol/other drugs and violence are highly correlated - they increase the frequency, unpredictability and severity of physical and emotional battering. However, battering/ intimate partner violence is not caused by alcohol/other drug abuse. Offenders who are alcoholic, abusing or addicted to other drugs should be referred to treatment, ideally before beginning the re-education program.

There are women who are mandated to re-education classes, but it is best for them attend gender-specific classes that address issues specific to women. Advocates and class facilitators are also cautioned that it is not unusual for women to be wrongfully convicted of domestic violence/ Intimate Partner Violence. Too often, attempts at self-defense are wrongfully interpreted as IPV, commonly due to lack of law enforcement and/or criminal justice system training. Preferably, LGBTQ2S offenders should also have classes that address specific gender, social and cultural issues that impact their behavior.

Batterers' re-education programs are accountable to women/survivors who are battered. Best practices direct coordination of their activities through the advocacy program to ensure the safety of women/survivors. Recovering batterers co-facilitating with an advocate is the ideal. They can role-model respectful partnerships. Self-identifying as "recovering batterers," rather than "ex-batterer" indicates acknowledgement of the difficulty of remaining non-violent and respectful of women. This reflects the harsh reality of society's pressure to maintain male privilege and be disrespectful towards women. Because of this dynamic, it's best that a woman facilitator or advocate co-facilitate or monitor the classes to provide support and accountability.

Facilitation of men's re-education classes is difficult work. Again, success rates for re-education programs are very low; up to 90% will re-offend. This is not necessarily the fault of the facilitator or the program. These programs are fairly new and will continue to evolve and become more effective. The low success rates reflect the pervasiveness of beliefs and attitudes of American society that created battering to begin with. Indian Country has survived a couple hundred years of colonization; it will take generations to undo the oppression and reclaim nonviolent life ways.

Ending gender-based violence will not happen through a program alone. High re-offense rates also indicate that ending violence against women, holding batterers accountable for their violence and helping them to reclaim a natural, respectful life way requires the involvement of community members and relatives, in addition to programs and systems. When funding or other issues block attempts to establish a comprehensive re-education program, remember that traditionally, native peoples did not have "programs" to teach people how to behave or deal with violations of proper behavior or crime. With or without a re-education program, advocates can reinforce our roles and responsibilities as relatives through cultural community education and trainings, role-modelling, teaching bystander interventions, and utilizing traditional means to protect and support survivors, and stop offenders' violence while promoting cultural values and life ways.

Additional Resources:

- *Current Research on Batterer Intervention Programs and Implications for Policy*
The Battered Women's Justice Project; Kathleen J. Ferraro 2017
- *Re-Examining 'Battering': Are All Acts of Violence Against Intimate Partners the Same?*
Praxis International, Inc.; Ellen Pence Shamita Das Dasgupta 2006
- *Returning Men to Honor: A Guidebook for Developing Intervention and Education Programs for Men Who Batter In Native Communities*
Returning Men to Honor: Tribal Men's Program/ Batterer Intervention Program Development Workbook
See Mending the Sacred Hoop; mshoop.org
- *Creating a Process of Change for Men who Batter training*
Changing Men, Changing Lives curriculum
Addressing Fatherhood with Men who Batter curriculum
Safety and Accountability Audit
See Duluth Abuse Intervention Programs; theduluthmodel.org
- Batterer Intervention Services Coalition of Michigan
biscmi.org

SOME OF THE WAYS SHELTER PROGRAMS

(AND OTHER HELPING SYSTEMS)

REVICTIMIZE BATTERED WOMEN

- We don't believe her.
- We don't recognize her strengths.
- We fail to realize her manipulative tendencies are survival skills.
- We question why she has stayed in the relationship or returns to it.
- We question her inconsistency and react to her not following through with goals, etc.
- We fault her parenting.
- We "evaluate" her.
- We only like "good victims" and enlightened victims.
- We hold cultural biases: we are sexist, racist and homophobic.
- We take control.
- We uphold unrealistic expectations.
- We patronize her.
- We don't allow her much or any privacy.
- We question her need for shelter protection when she makes contact with her partner.
- We buy into such labeling as: co-dependency, enabler, addicted to love, etc...; "the woman as defective" theory.
- We blame her for failing to protect her children.
- We assume that leaving an abusive partner will set her free without recognizing the social abuse and stigma that low income, single women, and women-headed families face.
- We fail to recognize her religious beliefs about marriage and family.
- We fail to validate and/or understand her positive, even loving feelings toward her partner.
- We fail to advise her about realistic outcomes of counseling for her partner.
- We fail to create bridges in the community.

–Author Unknown



BASIC SKILLS

ADVOCACY PROBLEM ANALYSIS

Adapted in 2020 by NIWRC from Cangleska Advocacy Manual

1. Identify the specific problem(s), **in terms of the malfunction of the system rather than the survivor**. Is it an internal policy, agency practice, lack of training or awareness that is affecting their response to survivors?

Be mindful that systems change can take a long time. It is often necessary to create an additional, immediate strategy with the survivor for them to be safe and get their needs met.

2. Is the problem currently occurring? How long has it been going on within the system?
3. Work with the survivor to understand the system. Identify the challenges the advocate and survivor will have in navigating the system.
4. Specify what needs to happen to address the problem. What sorts of information and documentation must you compile, and how do you get this?
5. Identify goals in making change within the system so that in the future, survivors receive an appropriate, effective response as consistently as possible. Assist the survivor in identifying their individual goals.
6. What kind of individual support may the survivor need while pursuing this? Who, in addition to yourself, might be able to provide this? Others within your advocacy program? Referral resources?
7. Are there any additional measures that the survivor might need to utilize during this process to ensure their safety and protect confidentiality?
8. Identify who has power to change the situation to what the survivor is requesting. Make a working relationship with this person(s), and/or work with others who have existing relationships with them to achieve change. Ideally, these relationships and planned change should be mutually beneficial.
9. Create a strategy of what needs to be done to cause these persons to change the situation. Develop a chronological plan of action, with alternatives and contingencies.
10. Are additional resources needed (people, data, money, services, publicity, etc.)? How can these be obtained?
11. Consistently re-visit and re-evaluate the plan. Is it working? Is the goal attainable? Are there unintended consequences? If the invested time and energy are not achieving needed results, then brainstorm another strategy.
12. After implementing the strategy, document your efforts and spread the word to other advocates and other women and other survivors with similar situations.

Active Listening - Hear What People are Really Saying

Learn how to hear the whole message by using active listening techniques.

Listening is one of the most important skills you can have. How well you listen has a major impact on your job effectiveness, and on the quality of your relationships with others. For instance:

- We listen to obtain information.
- We listen to understand.
- We listen for enjoyment.
- We listen to learn.

Given all this listening we do, you would think we'd be good at it! In fact most of us are not, and research suggests that we remember between 25 percent and 50 percent of what we hear. That means that when you talk to your boss, colleagues, customers or spouse for 10 minutes, they pay attention to less than half of the conversation. This is dismal!

Turn it around and it reveals that when you are receiving directions or being presented with information, you aren't hearing the whole message either. You hope the important parts are captured in your 25-50 percent, but what if they're not?

Clearly, listening is a skill that we can all benefit from improving. By becoming a better listener, you will improve your productivity, as well as your ability to influence, persuade and negotiate. What's more, you'll avoid conflict and misunderstandings. All of these are necessary for workplace success!

Tip:

Good communication skills require a high level of self-awareness. By understanding your personal style of communicating, you go a long way towards creating good, lasting impressions with others.

About Active Listening:

The way to improve your listening skills is to practice "active listening." This is where you make a conscious effort to hear not only the words that another person is saying but, more importantly, try to understand the complete message being sent.

In order to do this you must pay attention to the other person very carefully. You cannot allow yourself to become distracted by whatever else may be going on around you, or by forming counter arguments that you'll make when the other person stops speaking. Nor can you allow yourself to get bored, and lose focus on what the other person is saying. All of these contribute to a lack of listening and understanding.

Tip:

If you're finding it particularly difficult to concentrate on what someone is saying, try repeating their words mentally as they say them – this will reinforce their message and help you stay focused.


To enhance your listening skills, you need to let the other person know that you are listening to what he or she is saying. To understand the importance of this, ask yourself if you've ever been engaged in a conversation when you wondered if the other person was listening to what you were saying. You wonder if your message is getting across, or if it's even worthwhile continuing to speak. It feels like talking to a brick wall and it's something you want to avoid.

Acknowledgement can be something as simple as a nod of the head or a simple "uh huh." You aren't necessarily agreeing with the person, you are simply indicating that you are listening. Using body

language and other signs to acknowledge you are listening also reminds you to pay attention and not let your mind wander.

You should also try to respond to the speaker in a way that will both encourage him or her to continue speaking, so that you can get the information if you need. While nodding and "uh huhing" says you're interested, an occasional question or comment to recap what has been said communicates that you understand the message as well.

Tip:

Be aware that active listening can give others the impression that you agree with them even if you don't. It's also important to avoid using active listening as a checklist of actions to follow, rather than really listening. It may help to practice [Mindful Listening](https://www.mindtools.com/pages/article/mindful-listening.htm)  ((<https://www.mindtools.com/pages/article/mindful-listening.htm>)) if you find that you begin to lose focus.

Becoming an Active Listener

There are five key active listening techniques. They all help you ensure that you hear the other person, and that the other person knows you are hearing what they say.

1. Pay Attention

Give the speaker your undivided attention, and acknowledge the message. Recognize that non-verbal communication also "speaks" loudly.

- Look at the speaker directly.
- Put aside distracting thoughts.
- Don't mentally prepare a rebuttal!
- Avoid being distracted by environmental factors. For example, side conversations.
- "Listen" to the speaker's [body language](#).

2. Show That You're Listening

Use your own body language and gestures to convey your attention.

- Nod occasionally.
- Smile and use other facial expressions.
- Note your posture and make sure it is open and inviting.
- Encourage the speaker to continue with small verbal comments like yes, and uh huh.

3. Provide Feedback

Our personal filters, assumptions, judgments, and beliefs can distort what we hear. As a listener, your role is to understand what is being said. This may require you to reflect what is being said and ask questions.

- Reflect what has been said by paraphrasing. "What I'm hearing is," and "Sounds like you are saying," are great ways to reflect back.
- Ask questions to clarify certain points. "What do you mean when you say." "Is this what you mean?"
- Summarize the speaker's comments periodically.

Tip:

If you find yourself responding emotionally to what someone said, say so, and ask for more information: "I may not be understanding you correctly, and I find myself taking what you said personally. What I thought you just said is XXX; is that what you meant?"

4. Defer Judgment

Interrupting is a waste of time. It frustrates the speaker and limits full understanding of the message.

- Allow the speaker to finish each point before asking questions.

- Don't interrupt with counter arguments.

5. Respond Appropriately

Active listening is a model for respect and understanding. You are gaining information and perspective. You add nothing by attacking the speaker or otherwise putting him or her down.

- Be candid, open, and honest in your response.
- Assert your opinions respectfully.
- Treat the other person in a way that you think he or she would want to be treated.

Key Points

It takes a lot of concentration and determination to be an active listener. Old habits are hard to break, and if your listening skills are as bad as many people's are, then there's a lot of habit-breaking to do! Be deliberate with your listening and remind yourself frequently that your goal is to truly hear what the other person is saying. Set aside all other thoughts and behaviors and concentrate on the message. Ask questions, reflect, and paraphrase to ensure you understand the message. If you don't, then you'll find that what someone says to you and what you hear can be amazingly different! Start using active listening techniques today to become a better communicator, improve your workplace productivity, and develop better relationships.

From *Mind Tools* website

THE IMMEDIATE CRISIS: A GUIDE

Please keep in mind this is a guide, not a check list. The goal is to quickly assess the potential lethality of the crisis to respond appropriately. Review of this guide may spotlight areas where more training is needed. Be mindful that asking for help is scary and difficult, and that once you answer a call you have begun a relationship. Depending upon how we respond, the survivor may or may not call again.

No matter what, remain calm.

Assess the level of danger by listening and asking direct questions ...

1. Listen

Listen to tone of voice, background noises to help assess threat and danger level.

Many of the questions below may be answered by giving time for her/him to talk.

Note: If the offender threatens of suicide, red flags should go up immediately. The majority of offenders/batterers who threaten suicide kill their victims, and often children or others, first. Threats to life are grounds for breach of confidentiality. Program policy and training should guide your response. Know your program policy and laws related to suicide threats. Usually law enforcement is called to provide safety, protective custody and contact with mental health services. This can provide a window of opportunity for survivors to get safe.

2. What's happening?

Are you safe to talk? (if not, ask yes or no questions, provide options to get safe)

Are you in immediate danger?

Are you injured? Head injuries and strangulation can turn deadly later; encourage medical help.

3. Where are you?

Can you tell me where you are?

Are you able to leave? Can you get somewhere safe? Do you want to leave?

4. Are there children there?

Where are the kids?

Are they safe?

5. Where is he/she (offender)?

Is he/she drunk? Other drugs?

Does he/she have guns or other weapons? When will he/she be home?

Does he /she have other people watching you?

6. Need police? Need ambulance?

Are you able to safely call the police?

Do you want me to call them for you?

7. How can I help?

What do you want to do right now?

What would help right now?

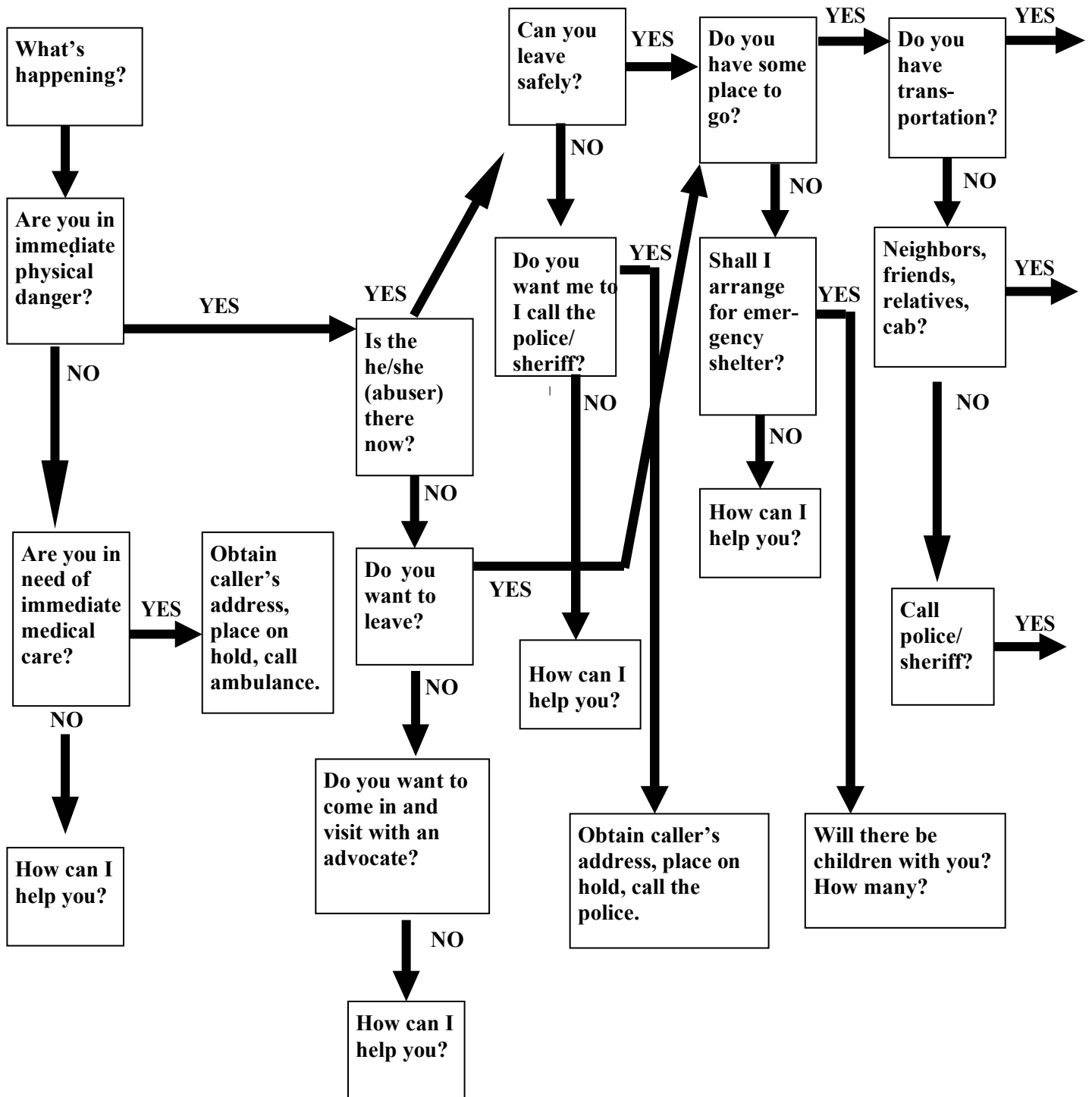
Would you like to come in to talk to me?

As appropriate, offer options: Safety plan, Order for Protection, Transportation, Resources, Shelter

Whenever possible, let the caller, your relative, know the violence is not her fault. Acknowledge the courage it takes to call and you're glad she/he did. Let her/survivor know you support her decisions and she/he is welcomed to call, visit and utilize the program whenever she'd like.

Responding to crisis can be traumatizing. When the immediate crisis is over, take care of yourself and get support. Your relatives need you!

FLOW CHART FOR HANDLING DOMESTIC VIOLENCE CALLS



THREE STAGES OF A CALL OR VISIT

Before: Be aware of you own attitudes and knowledge about violence against women

Be aware of you own cultural biases, beliefs, prejudices, etc.

- Safety and medical issues are first. Ask direct questions.

HOW TO BEGIN

- Introduce: Say who you are and why you are there.
- Establish a positive relationship: Listen carefully. Be respectful. Believe her.

MIDDLE PHASE

- Let her tell her story. Don't interrupt (unless she is in danger or is hurt).
Use open-ended questions, be supportive.
- Help her say what she needs to. Help define the problem.
- Help her find her power: What are her strengths? What can she do?
- DO NOT: Give advice, make decisions, rescue or give false hope.
- DO: Let her know what your limits are (I'm not a lawyer).

CLOSING PHASE

- Give her feedback: What did you hear her say?
- As a team, start summarizing (ask for her help).
- Prepare her to deal with other agencies.
- She needs correct information to make decisions - if you don't know, tell her you'll find out.
- DO NOT tell her you are disappointed in her decision.
- DO tell her you are afraid for her (if you are).
- What's next? (Call again, Come in, Shelter, etc.)

NOTE: Sometimes the conversation starts going in circles. Tell her you feel like you're not getting anywhere. Summarize again. Tell her you are on a crisis line - you need to go. Invite her to call again or come in to talk.



SAFETY PLANNING

Safety Planning for Women* Who Stay: Before We Begin

“I told my mother he was beating me. She said, “Just be glad he works and puts a roof over the kids and your head. All men do it ...”

“The shelter said I have 30 days to find a house, get a job, change the kids’ schools, figure out transportation. The doctor said no stress or changes for 2 months because of my concussion. Can’t even eat or sleep much less think!”

“Where the hell am I supposed to go? He’s everywhere in my life! If it’s not him, it’s his family! There’s a two year waiting list for low-income housing! I lost two jobs because no daycare and he keeps calling and showing up. Protection order? ...there’s like a four hour to two-day response...and I’d have to go back to court!”

The original intention of this article was to overview helping women be safer if they were staying with their batterer. But it morphed into something else. That topic is important and so there are links to a few excellent resources providing guidance at the end of this article. However, having been taught that preparation is half of ceremony, along with lessons about social change and advocacy requiring critical questioning and thinking, this transformed into more of a reflective discussion about context and perspective.

Safety planning for women who stay is a fairly rare topic of discussion. It is not a common issue in advocacy training. Why is that? How is it that we understand what the phrase “women who stay” means without explanation? Where are they “staying”? The unspoken answer is their own homes. When we understand the unspoken meaning something, it’s an indication that we are operating on assumptions. Sometimes, those assumptions need examination because they are based upon ideas society has taught us without questioning. How did we get to a place where staying in your own home is a bad thing? How, as a society, did we arrive at the conclusion that victims (majority female) of serial violent crime (by an intimate partner – usually male) are responsible for their own safety?

“He said if I left he’s beat up my parents. I didn’t believe him- my folks are old and frail – who would do that? So I left. He beat up my parents. They were too scared to go to the police. I went back.”

Consider assumptions held by society that advocacy work focuses on helping women leave. It’s commonly expected that women who are battered should reach out for help to law enforcement, the criminal justice system, and advocacy and shelter programs. In some places, women are charged with “failure to protect” their children if they don’t leave. Some shelter programs make leaving the batterer and staying away a requirement to reside in shelter. We assume they will get the help, resources and safety they need – they just need to decide and cooperate with the various systems.

Consider:

- various studies show women leave and return to their batterers on average between 5 and 12 times before they permanently leave
- battered women are at most risk for being murdered while leaving or after they have left their batterer
- one of the largest homeless populations is women with children
- poverty, including lack of housing, transportation etc. in Indian Country is a chronic, pervasive reality
- law enforcement and criminal justice systems in Indian Country (and most of rural America) is under-funded and under-staffed, and jurisdictional issues create additional barriers to safety
- the dynamics and tactics of battering are constant, multi-faceted and commonly supported by collusion of family, community and institutions
- battering often results in physical and emotional damage, including traumatic brain injury, chronic trauma responses (sleep deprivation, exhaustion depression, anxiety etc.)
- “leaving” usually means *escaping* with a bag of clothes, no or few resources with children, emotional, physical injuries...while someone is “out to get you.”

- thousands of women and children are turned away from shelter each year due to lack of space
- the vast majority of batterers batter every intimate partner they have

“He said if I left he’d kill me. I believe him.”

In the face of this partial list of challenges and barriers women who are battered confront, there is cause for wonderment and celebration of the strength and resourcefulness of so many women who are able to leave and reclaim their lives! This is also cause to honor and acknowledge all the powerful, life-saving advocacy done under extremely difficult and under-resourced advocates, their programs and allies.

However, there is dire need for some critical questioning and thinking about the focus on “safety” for battered women as their own responsibility. What does “safety” mean to women who are battered? What are we trying to make them safe from? Where is the focus on offender accountability? If the batterer is held accountable, would she and her children not be safe? Battering is serial violent crime. Why is it that no other victim of violent crime is expected to run, hide and make themselves safe? The context for safety planning for battered women must take into consideration the societal failure to hold offenders accountable as relatives, communities and systems. As one woman said: *“You keep saying that I’m not at fault, that I’m the victim. Are you sure? If I’m the victim how come I’m the one who has to give up everything, go into hiding and leave my home and family?”*

According to a study done by Sherry Hamby, described in her article “Guess How Many Domestic Violence Offenders Go to Jail,” in *Psychology Today*:

- One in five domestic violence calls to law enforcement were dismissed over the phone
- Three in five that were investigated led to an arrest
- Of those arrested, almost one in three were *not* charged
- Of those charged, less than half were convicted
- Of those convicted, less than 2% ever spent time in jail

These statistics will vary from jurisdiction to jurisdiction, but the overall picture remains the same: a very small percentage of batterers are held accountable. A look at numbers of and funding for batterers re-education and probation programs paint an equally bleak picture. The message to women who are battered is clear, bringing to life the message many batterers send “No one will believe you. No one will do anything to help you.” This reality has not slowed down the number of times advocates are asked “why does she stay?” or hear “She must like it – she keeps going back” or “She must be doing something to make him mad.” etc.

“My husband said if I leave, he’ll make sure he gets custody and I’ll never see my children. He has a job, the house everything. My minister said “God doesn’t allow divorces and in the afterlife I would never see my children.”

Most advocates are over-worked, under-paid, compassionate, dedicated and mad multi-taskers. Their reality is there isn’t enough – enough time, energy, support, resources, allies. Advocates are given the responsibility for ending violence against women, although it’s actually a community and societal responsibility. Moving outside shelter doors, creating coordinated community responses, system change, social change initiatives can feel like an impossibility. However, it is extremely important to maintain perspective, and strive to continue to educate, strategize, organize and hold those responsible accountable for holding offenders accountable. Otherwise, at some point, we may end up, unintentionally, victim blaming and colluding.

“Oh, I’ll be back to shelter. You advocates are great. But there’s one thing I haven’t tried yet to make it work. Figure I’ll be back in less than two weeks. But when I do leave, I need to know I tried everything I could.”

Preparation for doing safety planning and advocacy in general, includes an in-depth understanding of the dynamics of battering, the myriad of tactics batterers use and barriers posed by programs, agencies and

institutions. Education about the impact of battering is integral to providing support and developing a realistic safety plan. The amount of information about traumatic brain injury and the impact of trauma has blown up over the last 10 -20 years. Have we developed expertise in identifying and responding in trauma-informed ways? Do we have a clear understanding of why women stay/ barriers to escape? Do we accept the harsh reality that staying may, at least temporarily, be safer? Can we honestly say we support women's decisions? Have we clarified what safety planning and the many aspects of safety (i.e. physical, mental, emotional, economic, medical, social etc.) means to the individual women we work with?

Ending violence against women and children is, most simply put, about reconnecting and making relationships – acting as relatives. This is true about advocacy, including safety planning with women who stay. Making a relationship takes time and is a process. Trust, honesty, acceptance and accurate information are key. If we want women who have been brutalized and betrayed to trust us, we need to figure out how to be trustworthy. Safety planning requires having conversations about traumatic and sensitive experiences and issues. Put yourself in her shoes. Bring what you already know about being a good friend and relative. Take time, visit, share food like you would at home.

Many shelter and advocacy programs assume women want to leave. That's reality based, and that expectation is often normalized in everything we do. That's the over-arching message women hear and so they may not ask for help, be embarrassed or ashamed to come forward and ask for what they want and need given their circumstances. Have we found ways to send the message that advocacy, resources etc. are available whether they stay or leave – it's about their safety and sovereignty as women.

There is no one recipe for safety planning that will fit every woman, especially if she still lives with him. It depends on the woman's desires, abilities, goals, needs and circumstances - and available resources, accessibility and timing. It may depend upon her knowledge of battering and tactics. She has expertise about her batterer, but she may not have any information about battering, tactics, myths, trauma, impact on children etc. Do we routinely ask about what she's tried and the response she got? What's worked for her? Have we visited with the woman enough to have a working relationship? What trauma effects is she experiencing? The woman is the expert on her batterer, the tactics he uses, his dangerousness etc. She can be your guide in your work as an advocate.

Simply put, advocacy to end violence against women prioritizes safety and offender accountability on all levels and initiatives, i.e., individual, programs, institutional, societal and cultural. The goal is to regain the status of women as sacred and make women safe everywhere, all the time. Connections and relationships are both the means and the end.

Links to articles and booklet specific to safety planning for women who stay:

- *Advocacy Beyond Leaving*, by Jill Davies for Family Violence Prevention Fund (now Futures Without Violence)
- *Fifty Obstacles to Leaving, a.k.a., Why Abuse Victims Stay*, by Sarah Buel
- *20 Reasons Why She Stays- A Guide for those who Want to Help Battered Women*, by Susan G. S. McGee
- *Safety Means... Accountability Means...*, by Brenda Hill for Sacred Circle, National Resource Center to End Violence Against Native Women

*Although there are men who are battered, including in the Gay, Bi-sexual and Transgender/Transsexual communities, the vast majority of those battered are women, so the word "women" is used in this article.

SAFETY PLAN

A safety plan, or protection plan, is a tool to help you identify possible ways to protect yourself and your children. The protection plan will give you an awareness of your personal and community resources. Also, it will help you to identify the signs and situations that may come before a violent episode.

We know that violence repeats itself and gets worse. It would be good for you to have a plan to help you get to a safe place if you anticipate or experience your partner's violence again. Answering the following questions will help with that plan.

1. What are some cues, behaviors, or circumstances that have happened before your partner has become violent with you in the past? (for example, time of day? chemical use? discussion of money? your whereabouts? relatives visiting? etc.).
2. What kinds of things have you done to try to protect yourself and your children from violence in the past?
3. Have any of these methods worked?
4. What people or organizations can you turn to for help? (look up the numbers and write them).
5. Are you familiar with the legal protection available to you? They are:
6. Are you familiar with the medical services available to you? They are:
7. If you are returning home, how will your children be safe in the event your partner becomes violent?
8. It is a good idea to keep a bag of clothes for you and your children packed in case you need to leave quickly. Can you have some money tucked away?
9. If I am in a situation where I am afraid violence will occur or is occurring towards me or my children, I know that the following options are available to me:
 - The shelter, relatives or friends I can call for support and/or for a safe place to stay:
 - The phone number for the shelter for battered women or a friend, relative, etc., where I can stay in safety and get support and help from is:
 - I can call the police at:
 - I can get an order for protection from:
 - One other thing I can do is:

COERCION & THREATS:

Makes and/or carries out threats to do something to hurt her. Threatens to leave her, to commit suicide, to report her to welfare. Makes her do illegal things. Makes her drop charges. Stalks her.

CULTURAL ABUSE:

Competes over "Indianness". Misinterprets culture to prove male superiority/female inferiority. Uses relatives to beat her up. Buys into blood quantum competitions. Native Women don't wear make-up or wear slacks.

RITUAL ABUSE:

Prays against her. Stops her from practicing her ways. Uses rituals as a threat. "God doesn't allow divorce." Says her period makes her "dirty." Native Women don't sit at the drum or sweat with men.

USE COERCION AND THREATS:

1. Leave as soon as possible and go to the shelter or other safe place.
2. Call the police.
3. Get a protection order.
4. Do whatever you need to be safe from more violence right away.
5. Talk to an advocate or other person who understands battering/violence about what happened and make other plans.
6. _____

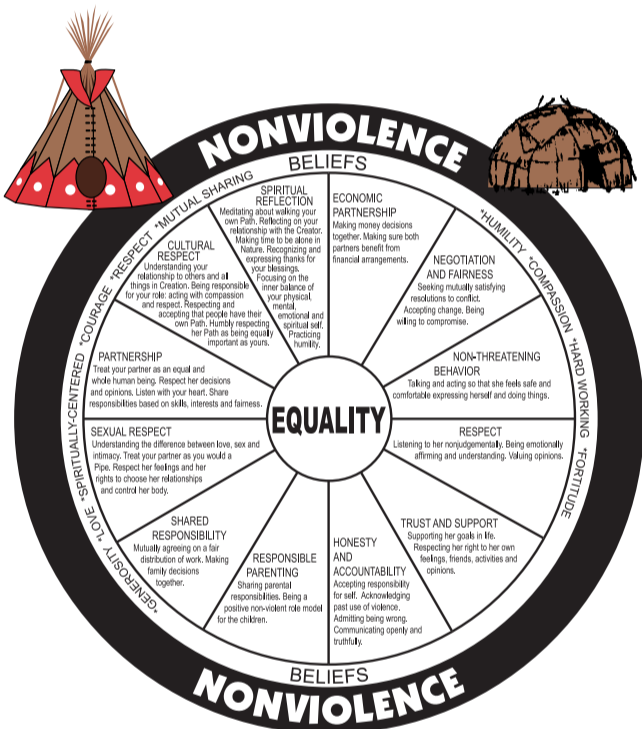
CULTURAL ABUSE:

1. Get accurate information from someone who knows the culture and traditions, lives non-violently and respects women.
2. Talk to friends and relatives you trust about what he is saying and doing.
3. Find safe people, places and things that will help you continue to grow emotionally, mentally, spiritually in the ways you choose.
4. _____

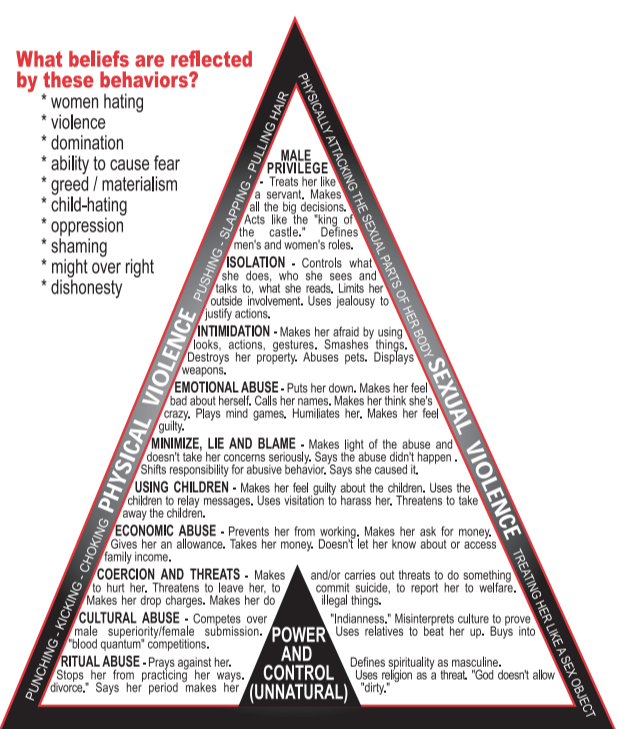
RITUAL ABUSE:

1. Get accurate information from someone who knows the culture and traditions, and lives non-violently and respects women.
2. Talk to friends and relatives you trust about what he is saying and doing.
3. Continue to practice your own spiritual ways.
4. _____

NATURAL LIFE-SUPPORTING POWER



UNNATURAL POWER & CONTROL



SAFETY GUIDE

This guide lists options that give you an opportunity to bring your experience into focus and help you consider possible responses to the violence you are facing. You have the right to support and assistance in escaping violence.



National Indigenous Women's Resource Center
P.O. Box 99 • Lame Deer, MT 59043
406-477-3896 • 1-855-649-7299 Toll Free • www.niwrc.org

Examples of tactics:

PHYSICAL-SEXUAL:

Kick, punch, slap, pinch, hair pulling, pushing, biting, attack sexual parts of body, rape, being treated as a sex object.

ISOLATION:

Controls what she does, who she sees and talks to. Limits her outside involvement. Uses jealousy to justify actions.

INTIMIDATION:

Makes her afraid by using looks, actions, gestures. Smashes things. Abuses pets. Displays weapons.

EMOTIONAL ABUSE:

Puts her down. Makes her feel bad about herself. Makes her think she's crazy. Humiliates her. Makes her feel guilty.

MINIMIZE, LIE, BLAME:

Makes light of the abuse and doesn't take her concerns seriously. Says the abuse didn't happen. Shifts responsibility for abusive behavior. Says she caused it.

USING THE CHILDREN:

Makes her feel guilty about the children. Uses the children to relay messages. Uses visitation to harass her. Threatens to take away the children.

ECONOMIC ABUSE:

Prevents her from working. Makes her ask for money. Gives her an allowance. Doesn't let her know about or access family income. Takes money away from her.

These are some of my options if my partner is choosing to:

BE PHYSICALLY and/or SEXUALLY VIOLENT:

1. Call the police.
2. Be aware of objects in the house that could be used as weapons; be aware of the possible consequences for using a weapon in self-defense.
3. If you know or feel your partner is going to become violent, don't wait. Leave as soon as possible. Do not warn him you are leaving.
4. Identify ways of escaping and places to go ahead of time.
5. Teach the children to run to neighbors, friends or relatives, and call the police.
6. Tell neighbors or friends to call the police if they suspect or hear violence occurring.
7. Leave extra money, keys, clothes, and documents with relatives/friends or at the shelter.
8. Have an advocate help get a protection order and keep it with you all the time.
9. Seek medical attention especially if hit in the head or strangulation was attempted. Consider being checked for STD's.
10. _____

ISOLATE ME:

1. Go to the shelter, friends or relatives if it is safe there.
2. Call the shelter, a friend or relative for support and help.
3. Find rides to visit others for support.
4. Make a connection with health and other service providers who might visit you in the home - if it is safe. If you believe he could become violent as a result of this visit, consider how you might make office visits.
5. _____

INTIMIDATE ME:

1. Leave and go to a place that is safe and supportive.
2. Call the police.
3. Get a protection order.
4. Do whatever is needed to be safe from more violence right then. Talk to an advocate, friend, or relative when you are safe.
5. Talk to a person who understands what you're experiencing and make plans.
6. _____

BE EMOTIONALLY ABUSIVE:

1. Visit with an advocate, friend or relative who is supportive and will keep confidentiality.
2. Practice self-talk and tell yourself that his battering is not your fault. Attend a women's group for survivors of domestic violence.
3. Go where people will respect, nurture and support you.
4. Find ways to continue self-growth through school, friends, family and other groups.
5. Seek medical and emotional help for sleep deprivation.
6. _____

MINIMIZE, LIE AND BLAME ABOUT THE VIOLENCE AND ABUSE:

1. Call or visit people who believe that this tactic makes you feel crazy and unable to trust your own judgment and perceptions.
2. Attend women's group at the shelter or other places.
3. Leave and go to places that are physically and emotionally safe.
4. _____

USE THE CHILDREN TO MAKE ME FEEL GUILTY, THREATEN OR CONTROL ME:

1. Call or visit with people you can trust.
2. Enroll the children with your Tribe.
3. Get a protection order that either excludes visitation or requires supervised visitation with a drop-off contact.
4. File custody with the assistance of your advocate or attorney.
5. Have an attorney, advocate or other person contact your partner for information concerning the children.
6. Talk to the children about what's going on. Advocates can help.
7. _____

USE ECONOMIC ABUSE AGAINST ME:

1. Save (or hide) as much money as possible. Get a separate checking and savings account.
2. Get assistance from state Child Support Enforcement program.
3. Get assistance from an advocate and/or attorney to make sure money issues are addressed in custody, divorce and other legal situations.
4. Speak to someone who understands the dynamics of battering in regards to money matters.
5. Recognize your right to share in decision making about family resources and make sure the basic needs of you and your children are met.
6. _____

(continued on back)

ASSESSING WHETHER BATTERERS WILL KILL

Some batterers are life-endangering. While it is true that all batterers are dangerous, some are more likely to kill than others and some more likely to kill at specific times. Regardless of whether there is a protection from abuse order in effect, officers should evaluate whether an assailant is likely to kill his partner or other family members and/or police personnel and take appropriate action.

Assessment is tricky and never foolproof. It is important to conduct an assessment at every call, no matter how many times an officer has responded to the same household. The dispatcher and responding officer can utilize the indicators described below in making an assessment of the batterer's potential to kill. Considering these factors may or may not reveal actual potential for homicidal assault. But, the likelihood of a homicide is greater when these factors are present. The greater the number of indicators, the greater the likelihood of a life-threatening attack.

Use all of the information you have about the batterer, current as well as past incident information. A thorough investigation at the scene will provide much of the information necessary to make this assessment. However, law enforcement will not obtain reliable information from an interview conducted with the victim and perpetrator together or from the batterer alone.

- 1. Threats of homicide or suicide.** The batterer who has threatened to kill himself, his partner, the children or her relatives must be considered extremely dangerous.
- 2. Fantasies of homicide or suicide.** The more the batterer has developed a fantasy about who, how when and/or where to kill, the more dangerous he may be. The batterer who has previously acted out part of a homicide or suicide fantasy may be invested in killing as a viable "solution" to his problems. As in suicide assessment, the more detailed the plan and the more available the method, the greater the risk.
- 3. Weapons.** Where a batterer possesses weapons and has used them or has threatened to use them in the past in his assaults on the woman, the children or himself, his access to those weapons increases his potential for lethal assault. The use of guns is a strong predictor of homicide. If a batterer has a history of arson or the threat of arson, fire should be considered a weapon.
- 4. "Ownership" of the battered partner.** The batterer who says "Death before Divorce!" or "You belong to me and will never belong to another!" may be stating his fundamental belief that the woman has no right to life separate from him. A batterer who believes he is absolutely entitled to his female partner, her services, her obedience and her loyalty, no matter what, is likely to be life-endangering.
- 5. Centrality of the partner.** A man who idolizes his female partner, or who depends heavily on her to organize and sustain his life, or who has isolated himself from all other community, and retaliate against a partner who decides to end the relationship. He rationalizes that her "betrayal" justifies his lethal retaliation.

6. **Separation violence.** When a batterer believes that he is about to lose his partner, if he can't envision life without her or if the separation causes him great despair or rage, he may choose to kill.
7. **Depression.** Where a batterer has been acutely depressed and sees little hope for moving beyond the depression, he may be a candidate for homicide and suicide. Research shows that many men who are hospitalized for depression have homicidal fantasies directed at family members.
8. **Access to the battered woman and/or to family members.** If the batterer cannot find her, he cannot kill her. If he does not have access to the children, he cannot use them as a means of access to the battered woman. Careful safety planning and police assistance are required for those times when contact is required, e.g. court appearances and custody exchanges.
9. **Repeated outreach to law enforcement.** Partner or spousal homicide almost always occurs in a context of historical violence. Prior calls to the police indicate elevated risk of life-threatening conduct. The more calls, the greater the potential danger.
10. **Escalation of batterer risk.** A less obvious indicator of increasing danger may be the sharp escalation of personal risk undertaken by a batterer; when a batterer begins to act without regard to the legal or social consequences that previously constrained his violence, chances of lethal assault increase significantly.
11. **Hostage-taking.** A hostage-taker is at high risk of inflicting homicide. Between 75% and 90% of all hostage takings in the US are related to domestic violence situations.

If an intervention worker concludes that a batterer is likely to kill or commit life-endangering violence, extraordinary measures should be taken to protect the victim and her children. This may include notifying the victim and law enforcement of risk, as well as seeking a mental health commitment, where appropriate. The victim should be advised that the presence of these indicators may mean that the batterer is contemplating homicide and that she should immediately take action to protect herself and should contact the local battered woman's program to further assess lethality and develop safety plans.



TRAUMA-INFORMED ISSUES

CREATING TRAUMA-INFORMED SERVICES: TIPSHEET SERIES

A Trauma-Informed Approach to Domestic Violence Advocacy

Adopting a trauma-informed approach* to domestic violence advocacy means attending to survivors' emotional as well as physical safety. Just as we help survivors to increase their access to economic resources, physical safety, and legal protections, using a trauma-informed approach means that we also assist survivors in strengthening their own psychological capacities to deal with the multiple complex issues that they face in accessing safety, recovering from the traumatic effects of domestic violence and other lifetime abuse, and rebuilding their lives. It also means ensuring that all survivors of domestic violence have access to advocacy services in an environment that is inclusive, welcoming, destigmatizing, and non-retraumatizing.

This document will discuss **five core components** of a trauma-informed approach to domestic violence advocacy. These include (1) providing survivors with information about the traumatic effects of abuse; (2) adapting programs and services to meet survivors' trauma- and mental health-related needs; (3) creating opportunities for survivors to discuss their responses to trauma; (4) offering resources and referrals to survivors; and (5) reflecting on our own and our programs' practice.

1. Provide survivors with information about the traumatic effects of abuse.

Many survivors of domestic violence will not be familiar with the concept of trauma. Some survivors may believe that it is a sign of strength to be able to withstand extreme difficulty without complaining. Some may view silent endurance as a religious or spiritual value. Helping survivors understand that there are natural ways that the human mind and body respond to stress and pressure can help counter the belief that these reactions are signs of weakness.

How can your programs provide survivors with destigmatizing information about the traumatic effects of abuse?

- Discuss the link between lifetime trauma, domestic violence, and mental health.
- Discuss some of the common emotional or mental health effects of domestic violence and ways that these responses can interfere with accessing safety, processing information, or remembering details.

* The notion of "trauma-informed services," which comes from the work of Maxine Harris, PhD, and Roger Fallot, PhD, at Community Connections, is designed to promote recovery and minimize the chance of revictimization. Harris, M. & Fallot, R. (2001, Spring). *New directions for mental health services, Using trauma theory to design service systems*, 89, Jossey-Bass.

- Discuss the ways that trauma can disrupt our ability to trust and to manage feelings and can affect the ways we feel about other people, ourselves, and the world.
- Discuss the things that abusers may do to make their partners feel “crazy.”
- Discuss the ways that abusers use mental health issues to control their partners.

2. Adapt programs and services to meet survivors’ trauma- and mental health-related needs.

As domestic violence programs become sensitized to the effects of trauma and the need to provide inclusive services, we can work to create programs, policies, and settings that meet survivors where they are and that are careful not to retraumatize survivors.

How can your program respond to the individual needs of survivors?

- Conduct pre-intake screenings for domestic violence only and do not “screen out” for mental health “issues” or a history of psychiatric treatment.
- Create a welcoming environment with a wide range of options for survivors and make changes when practices and policies are not well suited to individual survivors’ needs and capacities.
- Discuss ways that shelter living can be difficult for everyone and offer supportive strategies that would make it more comfortable for the individual survivor with whom you are working.
- Have a standard medication policy for everyone. It is not necessary to know what medications women are taking or why. Questions related to medication may be prohibited by law. Please see the Center’s *Model Medication Policy* for further guidance.
- Inform survivors about your medication policies and let her know you are available to discuss any particular needs she has (e.g., she has run out and needs new supply, is having problems with side effects, is not sure they’re helping, can’t afford them, etc.).
- While conducting support groups or house meetings, discuss the range of responses people have to trauma, including physical and mental health symptoms.
- Reassure and support survivors who are uncomfortable with the mental symptoms of other women in the program that these are common responses to abuse.
- Collaborate (with consent) with the mental health providers, peer support specialists, and/or systems that work with each individual survivor.
- Inform or educate the mental health providers on issues related to domestic violence, including documentation of abuse in mental health records and additional needed supports.

- Advocate with mental health providers and systems on behalf of survivors when requested and support survivors in their efforts to advocate on their own behalf.

3. Create opportunities for survivors to discuss their responses to trauma.

Once survivors are aware that most people have natural responses to extreme stress and pressure, it may be possible to help each woman to think about the specific ways that she and her children have managed, responded to, and been affected by the stress, pressure, and trauma that they have experienced.

How can your program provide opportunities for a survivor to discuss her responses to trauma?

- Ask about ways that she has changed as a result of the abuse.
- Ask if she is having any feelings or thoughts that concern her.
- Ask about the impact of domestic violence on her emotional well-being and mental health.
- Attend to the role of culture, community, and spirituality in her life.
- Talk with her about how her own emotional responses to abuse can affect how she responds to her children and offer strategies for noticing and addressing those concerns.
- Ask if her abusive partner interfered with past mental health treatment or medication.
- Ask if she has any mental health concerns she'd like to discuss, including concerns related to treatment, medications, hospitalizations, or past interactions with mental health providers or mental health systems.

4. Offer resources and referrals to survivors.

Like many of us, survivors of domestic violence may hold stereotypes about mental health treatment. Survivors may be unfamiliar with mental health services, believe they are only appropriate for people with very extreme symptoms, or think they are indulgences for weak or pampered people. You can let women know that these resources are appropriate for anyone who has been highly stressed or traumatized—that everyone deserves to feel better. Resources may include self-help tools as well as referrals to knowledgeable providers in the community or consultants who provide services at a DV program.

How can your program make resources and referrals available to a survivor?

- Discuss the process of healing from abuse and other trauma (instilling a sense of hope, that she will not feel this way forever).
- Develop culturally relevant and community-based referrals and linkages.

- Let her know that if she is interested in accessing resources and services related to healing from abuse and other trauma, you can help her to access them.
- Provide linkages to information or resources to help her advocate for herself around mental health or medication issues (or, with permission, advocate for a survivor with her mental health care provider).
- Work with her on strengthening or developing new skills for dealing with painful or disruptive feelings such as relaxation training or exercises,[†] grounding techniques, affect regulation strategies, or developing a written plan like a Wellness Recovery Action Plan (WRAP[®]).[‡]

5. Reflect on our own and our programs' practice.

Being aware of our own reactions to others and to trauma helps ensure that our interactions with survivors are focused on supporting their best interests and well-being. Reflection also helps us to make thoughtful and professional decisions with knowledge of how our personal reactions and feelings are operating.

How can your program incorporate reflection into your practice and your settings?

- Create an environment with regular opportunities to reflect on your responses to each individual survivor and how those responses may be affecting her, as well as what those responses may reflect about your own experiences.
- Reflect on the impact of the work that you do on your own life (i.e., how you experience secondary trauma) either privately or with trusted others (including supervisors, peers, therapists, family, friends, etc.).
- Work with colleagues to recognize the ways in which tensions that arise within your program (among women receiving services and among program staff) may be related to staff feelings about and reactions to trauma. Develop ways to safely and respectfully address these issues when they arise.

For more information or for technical assistance, please contact the National Center on Domestic Violence, Trauma & Mental Health at info@nationalcenterdvtraumamh.org or 312-726-7020(P) or 312-726-4110(TTY).

[†] For example, see the Capacitar Emergency Response Tool Kit (available in multiple languages) at http://www.capacitar.org/emergency_kits.html

[‡] For more information about WRAP[®], see <http://www.mentalhealthrecovery.com/aboutwrap.php>

CREATING TRAUMA-INFORMED SERVICES: TIPSHEET SERIES

Tips for Discussing a Mental Health Referral with DV Survivors

Many survivors of domestic violence first come to DV programs in a state of emotional distress. Tears, sleeplessness, jumpy feelings, racing thoughts, exhaustion, and anxiety are quite common. For some survivors, these responses begin to fade away as they experience calm, consistency, and support in the context of a walk-in or shelter DV program. For other survivors, additional resources or supports, including mental health services, may be helpful.

Do Your Homework First...

1. Be familiar with mental health resources in your community.

"We have worked with this group of therapists. We believe that they really understand domestic violence."

Depending on your community, mental health services may be provided by private mental health centers, by people in private practice who work in their own offices or groups, or in your local community mental health center. Your city, county, or state government website may have listings under mental health services. It can be very helpful to know about local services before the moment when you are discussing a referral with a survivor. Being able to describe the location or even to say that you have met some of the local providers can reassure a survivor that you are not just pushing her away. Be sure to know which services are trauma informed, culturally relevant, and LGBTQI friendly.

Alliances with local mental health providers can help to expand the mental health options available to survivors in your programs.

2. Have information about costs and funding.

"We can help you apply for low-cost mental health services."

Cost can be an enormous barrier to accessing mental health services, particularly as funding for these services continues to be reduced. Depending on how a survivor is paying for mental health services, she may not be able to choose which mental health provider to see, and not every mental health professional will be experienced at understanding and responding to survivors of domestic violence. Even for survivors with health insurance, finding quality care may be a challenge. This makes it especially important to explore how survivors can have a choice of providers to get the care they need.

Forming alliances with local mental health providers (through cross-training, local task forces, and other collaboration-building efforts) can help to expand the mental health options available to survivors in your programs. For example, some programs have been successful in establishing partnerships with trauma-informed therapists at reduced fees. The Substance Abuse and Mental Health Services Agency (SAMHSA) has compiled an information sheet on how people can pay for mental health services.* Private insurance often covers mental health care, and new legislation requires “parity” between medical and mental health care coverage. Community mental health centers may be funded by state and local dollars to provide care to people who cannot otherwise access it. Other resources include pastoral counseling, self-help groups, and sliding fee scales in private and non-profit mental health clinics.

...Then Discuss a Mental Health Referral.

3. Respect a survivor’s decisions about whether and when to receive mental health services.

“What kinds of supports have helped you in the past?”

Explore with each survivor what and whom she finds helpful and support her in using her support system (or building a support system). Remember that people may have had negative or traumatic experiences with the mental health system and/or may prefer, for many reasons, to manage their lives without the involvement of mental health professionals, therapy, or medication. In addition, given that there can be limited access to mental health services, it is critical to support survivors in developing and accessing supports outside of professional mental health care.

4. Link the referral to what a survivor wants for herself.

“You’ve told me it bothers you that your thoughts are racing and that you can’t sleep.”

Most often you will have an idea of what a survivor wants for herself and her children. If you do not know, ask. A referral for mental health services should be like any other health referral—an offer to assist a person in finding the help that she wants. Advocates should not suggest that a survivor go in order to receive medication or specific services. Instead, focus on what is troubling her and let her

*SAMHSA, Center for Behavioral Health Statistics and Quality. (July 7, 2011). *The NSDUH Report: Sources of Payment for Mental Health Treatment for Adults*, available at: <http://store.samhsa.gov/product/Sources-of-Payment-for-Mental-Health-Treatment-for-Adults/NSDUH11-0707>

know that mental health services may offer some relief. Do not make mental health care a condition of continued support from your program.

5. Make realistic offers.

"It may take us awhile, but let's see if we can find some help so that things can be easier for you."

When we see that a survivor is struggling to manage daily life for herself and her children, it is tempting to think that seeing a mental health care professional will provide her with immediate relief. In fact, it may take time to find the right mental health services, and clinics often have waiting lists. Finding the right medication can take time as well. Do not promise immediate relief; instead let each survivor know how she can continue to work with you on her needs for safety, support, and continuity in her life, regardless of whether she also chooses to access mental health services.

For more information or for technical assistance, please contact the National Center on Domestic Violence, Trauma & Mental Health at info@nationalcenterdvtraumamh.org or 312-726-7020(P) or 312-726-4110(TTY).

HOW SHOULD ADVOCATES RESPOND?

If helplessness and isolation are the core experiences of trauma, empowerment and reconnection are the core experiences of safety and healing (Herman, 1997). We can support survivors seeking safety, sobriety, wellness, autonomy and justice by reducing program service barriers and ending isolation for people impacted by multiple abuse issues. Policies and procedures to ensure culturally competent, appropriate, non-punitive and non-judgmental accessible services are key.

Creating a welcoming environment

Fleeing violence disconnects individuals and families from familiar stress management strategies and creates new stresses, whether or not there are co-occurring issues such as psychiatric symptoms, disabilities or cultural issues. Details ranging from staff behavior and attitudes to the way physical space is designed can send a subtle message regarding how agencies feel about the people they serve, and can either reduce or add to stress (Prescott et. al., 2008).

“There are small actions that will plant the seed that someone truly cares,” says Daisy Barrera, an advocate from Bethel, AK. “You’re measured at all times.” Here are some ways to create a safe and welcoming environment:

- Make sure there is good security lighting outside the building. Have comfortable sofas and chairs, a selection of magazines, toys or coloring books for children, and coffee, tea or soft drinks on hand in the waiting area.
- Add “home-like” touches. Some inexpensive ways to make physical space more inviting include plants, fish tanks, throw pillows on couches and chairs, area rugs, and artwork on the walls (Prescott et. al, 2008). Agencies that publish a newsletter could put these items on a donations wish list.
- Pay attention to accessibility issues – enough space for people using wheelchairs or other assistive technology to move around, and items where people with disabilities can reach them (Leal-Covey, 2011).
- Keep paperwork to a minimum during initial intake sessions (Warshaw, 2010). Prioritize: What paperwork absolutely must be done right away, and what can wait until later sessions when people seeking services have had a chance to get comfortable with staff and with their surroundings?
- Ensure complete confidentiality for counseling sessions and other situations in which people seeking help will be sharing sensitive information. A private office space that allows staff to shut the door is ideal.
- In a residential setting, provide private retreat spaces other than bedrooms, such as quiet rooms or meditation gardens.
- Tell every person who enters your program, “If something here makes you feel unsafe or uncomfortable, let me/us know. We will try to make things more comfortable and safer” (Pease, 2010).
- Always convey respect, in both words and actions. Advocate Daisy Barrera says:

“It’s critical for professionals to be considerate, to be respectful, to be understanding, to be supportive. Supportive can mean just being there by the person’s side. You definitely don’t always have to say anything or speak. We can spend a lot of money trying to do anything and everything to help those who are hurting. That money means nothing to an individual who is hurting until we as professionals take the time to respect, accept, and grow those big moose ears or elephant ears when a person is speaking to you” (Barrera, 2009).

Trust isn't always easy

People who have been traumatized by multiple issues may have trouble trusting others, even those who appear to have good intentions. Survivors may not trust advocates, counselors, therapists or other social service providers for a variety of reasons:

☐ *Negative past experiences with social service agencies or providers.* People with multiple co-occurring issues may have been passed from one agency to another for years without getting their needs met, or they may have encountered providers who treated them in ways that felt confusing or disrespectful. A survivor shares:

“For someone such as myself, who has survived severe domestic violence, there’s an antenna on my head that can detect who is sincere and who isn’t. I feel people quicker, faster. I tested many, many people to see if they were going to be loyal and confidential.”

Another survivor shares: “I called a crisis line and talked to somebody, and there was no room in the shelter. I made that one call. That was it.”

☐ *Fear of authority figures.* People who are survivors of interpersonal trauma often have a history of encounters with authority figures who abused power, discounted them, blamed them for their problems or used what they said against them later.

☐ *Fear of legal sanctions.* Survivors may fear prosecution if they disclose illicit drug use or other illegal behavior such as theft or commercial sex. An individual who has been incarcerated may fear going back to jail or prison. A person with immigrant status who is in the country illegally may fear being deported.

☐ *Fear of being judged.* People may have heard repeatedly that their problems are caused by their own behavior, lack of personal responsibility, inappropriate decisions or bad character traits. A survivor shares:

“After my last assault, I went to a mental health counselor. I finally got the courage to go. It took a lot for me to ask for help. After the second time visiting him, he asked me, ‘What did you do to piss him off?’ And that was it. I never went back. And it was a very long time before I talked to another counselor again.”

☐ *Fear of being discounted.* People who have been victimized by interpersonal violence often have a history of not being believed when they are telling the truth, especially if they have co-occurring issues such as a substance use disorder, mental illness or disabilities.

☐ *Fear of encountering stereotypes on the part of the provider.* Some survivors have encountered people who avoided or excluded them because of race, culture, disabilities, socioeconomic background, experience of violence, substance use history or mental health status. Previous providers may have displayed distrust because of stereotypes or unconscious bias, and created rules and restrictions based on this lack of trust.

☐ *Fear of losing children.* Some people fear that disclosure of parental substance abuse, mental health concerns, domestic violence or illegal activities will trigger an investigation by a child welfare agency. Survivors who have a substance use disorder, psychiatric symptoms, or other disabilities, may fear being judged incompetent to provide adequate parenting. Fear of losing children is compounded when perpetrators threaten to report their non-offending partners to child protective services as an abusive tactic designed to maintain power and control over them. Survivors may fear false and unjust allegations made by an abuser or an abuser’s family will lead to an investigation resulting in loss of child custody. Shirley Moses, Shelter Manager at the Alaska Native Women’s Coalition in Fairbanks, AK, says:

“A lot of women, if they leave the village, are looking over their shoulder wondering if the Office of Children’s Services (OCS) is going to come after them because they’ve put their kids in harm’s way. And we keep on telling them, they’ve taken the first step to keep their children safe, and they shouldn’t look on that as being a

negative. They've had such bad incidents with their perpetrators or their perpetrator's family calling and unjustly saying that they've neglected their children" (Moses, 2010).

□ *Fear of being denied services.* Some survivors may fear being barred from a shelter or residential facility, denied public assistance or disqualified from other benefits if they disclose issues such as domestic violence, substance abuse, psychiatric issues, involvement in commercial sex or past incarceration. People who receive public assistance may fear losing benefits if they disclose that they are living with a partner.

□ *Fear of losing autonomous decision-making power.* Providers who think they know an individual's needs better than she does may try to impose their own solutions and values. People who must abide by curfews or request passes (get permission) to see friends or relatives may feel as if they are being treated like children.

□ *Fear of reprisals.* People victimized by interpersonal violence may fear retaliation from the perpetrator if they report sexual assault to the police, seek an order of protection against a violent partner, or report any kind of abusive behavior directed toward them in an institutional setting.

□ *Fear of being scapegoated.* Some individuals may fear being accused of things they didn't do. For example, someone who discloses a history of substance abuse or incarceration may be the prime suspect if something turns up missing from a shelter or residential facility.

In turn, providers may have difficulty trusting the people who seek their services because of stereotypes and conscious or unconscious bias, and may create rules and restrictions based on this lack of trust. Ultimately, mistrust stemming from stereotypes, wrong perceptions and negative assumptions may serve as an excuse for advocates and providers to create oppressive, disempowering rules and restrictions rooted in ignorance, bias and fear (Leal-Covey, 2011). This misuse of power is counter to the mission of the victims' advocacy movement and has the potential to confirm seeds of doubt planted by an abuser who may very well have said, "After a week in the shelter, you'll be back."

Gaining trust

Despite valid reasons for not trusting others, people with a history of trauma need someone they trust enough to honestly tell as much of their story as they choose to share when they are ready, if safety and recovery and healing are to occur (Herman, 1997). Here are some ways to demonstrate your trustworthiness and begin the process of gaining trust:

□ Be willing to earn trust. Try not to be hurt or offended if a traumatized person who has been battered or sexually assaulted is angry or doesn't trust you right away. Allow people you serve to take as much time as they need to begin to trust you. Understand that this lack of trust has more to do with their life experience and your role than it does about you personally. A survivor shares that it was hard for her to accept help at first:

"I think my wall was up, and I don't think there was anybody who could have gotten in there. I wasn't ready for anybody to help me."

□ Recognize all people need to earn trust and advocates, counselors and authority figures are no exception. Trust isn't automatic just because someone wants to help or is in a position of authority. Bethel advocate Daisy Barrera says:

"I try to help individuals understand that when we are building trust, and trust is established, it's more precious than gold. And it's the bottom line" (Barrera, 2009).

□ Encourage individuals to participate in developing safety, service and/or treatment plans. This can help give them a sense of control.

□ Explain what you are doing, and why, up front. No surprises. If people we serve suspect that information is being withheld from them or that they are being manipulated in any way, trust often evaporates.

□ Understand that confidentiality is paramount in gaining trust, as well as an ethical imperative. Daisy Barrera points out:

“Confidentiality is so extremely important. You have to remember, when a person has been abused or has gone through abuse, the first thing they learn is ... they can’t reveal, they can’t say, they can’t speak. You go through many tests.”

□ Explain the limits of your confidentiality at the beginning of the intake process, before anyone begins talking. This may impact which issues an individual feels safe sharing with you. A survivor shares:

“I made sure that all the people I had to trust had a position where they had to keep their mouth shut. So if I told them something, they had to keep it in confidence. I had major trust issues.”

□ Walk the talk. If we have a different set of standards for ourselves than we have for the people we serve, we convey the message we feel superior to them.

□ Believe people who tell you about traumatic incidents. Do this, even if someone seems confused or out of touch with reality, or says something you perceive as inaccurate. Try asking yourself, “What might be happening to make this seem true for this individual?” Consider how certain behaviors and beliefs make sense or could be a reasonable response to multi-abuse trauma. Don’t ask, “Why are they acting this way?” Ask, “What happened to them to trigger this response? How can I help them find safer ways of coping that cause less grief?”

□ Be willing to acknowledge when you don’t have all the answers, and be willing to help the people you serve get the information they need. Paula Lee, Shelter Coordinator at South Peninsula Haven House in Homer, AK, says:

A survivor of multi-abuse trauma shares:

“I made sure that all the people I had to trust had a position where they had to keep their mouth shut. So if I told them something, they had to keep it in confidence. I had major trust issues.”

“I’m not God, and I don’t know the right path for somebody else. I know if a person asks for something, I’m going to go get it. If she keeps asking questions, keeps wanting info, then I keep going and getting it, and that’s awesome! But if she gets what she needs after the first question and answer, that may be all that she needs or wants” (Lee, 2010).

Discussing co-occurring issues

Co-occurring issues may be easily missed if we don’t ask about these concerns in a non- threatening manner. Individuals may find it easier to talk about stress in their relationships or their partner’s substance use or mental health *before* talking about domestic violence, sexual assault, their own substance use, mental health or other personal issues. When discussing any of these issues:

□ Children should not be present during discussions about abuse issues.

□ Conversations must be respectful, private and confidential. Make the individual as comfortable as possible and assure confidentiality of records when applicable. Confidentiality is extremely important. People experiencing domestic violence or suffering from substance abuse issues may have been told they will be harmed if they reveal what is happening.

□ Understand that individuals may have a variety of reasons for not leaving their abusers. Shirley Moses of the Alaska Native Women’s Coalition offers several common reasons:

“They may have a mom they are leaving, and they provide care or support to her. Or they have a job they can’t afford to leave. Or their partner, even though he is abusive, is the one – because of a lack of jobs – who hunts or fishes. Or they don’t have money to pay the rent or deposits to move in. They are pulling their kids out of school, and moving from a school that has 12 or 20 children to a school that might have 500 or 600 children. Or they are experiencing culture shock” (Moses, 2010).

□ Validate the individual’s resourcefulness. Say: “I’m so glad you found a way to survive.” “You deserve a lot of credit for finding the strength to talk about this.” “You are here today and you are doing quite a bit right.” Credit each individual for finding a way to cope and offer options to make coping and surviving safer.

□ At the same time, discuss risks in a respectful manner: “Drinking/drugging/cutting, etc. can kill pain for a while but there are safer ways of coping that can cause you less grief.” “Addressing these concerns can help you and improve your children’s safety and well- being, too.” Express concern about the risks of various issues for both the individual and any children. Provide objective information about possible legal and health consequences stemming from abuse concerns. A survivor shares:

“The advocate showed me this continuum of harm chart. The physical, it starts with

this. The verbal, it starts with this. The emotional and the sexual starts with this, and this is what happens at the end. Death. I remember the “death” word. I had never thought of that. There was no way I thought it would ever get worse. I couldn’t even see past that day. I was just surviving. When I looked at that, and thought about my children, it eventually sank in.”

□ Ask open-ended questions: “What have you done to keep safe/sober/well up until now?” “What have you been able to do to care for yourself and the welfare of your children?” “What has worked well for you and the children and what has given you problems?” “Many people tell me they have tried _____. How often has this worked for you?”

□ Validate concerns and use supportive statements: “I’m sorry this happened. It’s not your fault.” “Right now you may be feeling stress but there may be some safer coping tools you might like to consider.” “Give yourself credit. You’ve been doing your best in these circumstances.” Erin Patterson-Sexson, Lead Advocate/Direct Services Coordinator at S.T.A.R. in Anchorage, AK, says:

“Some women have been programmed from the beginning of their lives that they are not worth anything. What they are worth is a good lay, cleaning up after somebody or making babies. If you’ve been told one million times in your life that you are nothing, and that you are not worthy of love and affection, it’s going to take advocates two million times to reinforce that you have value” (Patterson-Sexson, 2010).

Empowering survivors

Understanding multi-abuse trauma and its impact on safety, autonomy and justice is critical to empowering people with multiple co-occurring issues. Advocates and their community partners should have training and skills to recognize signs of co-occurring issues such as intimate partner violence, sexual abuse, substance use problems, previous trauma, disabilities, and mental health concerns (for example, anxiety, depression, suicidal ideation, thought disorders, etc.).

Here are some additional ways to ensure adequate service capacity and empower people with co-occurring issues:

□ Develop policies and procedures to ensure program accessibility and non-judgmental, non-punitive service provision for people impacted by multiple abuse issues.

□ Make it clear to the person (and to other providers) that nobody deserves violence or abuse, no matter what else is going on. Acknowledge the harm that has been done and say, “This is not your fault. Your children’s safety is important and so is your safety.” A survivor shares feeling confused about her reality:

“Was I this spoiled kid who felt victimized by my parents, or did this stuff really happen? We always had smiles on our faces so it must not have been real.”

□ Validate the frustration that can occur when accessing needed services is difficult.

□ “Normalize” responses to traumatic situations, rather than pathologizing the individual, and find a way to discuss co-occurring issues that is comfortable for both of you. A survivor shares:

“Once I got through the frozen stuff, I got mad. I was mad at the world. When I got angry, they didn’t say, ‘Oh, sh-h-h-h-h, don’t be angry.’ They gave me room, framing it as, ‘Well, it’s normal to be angry when bad things happen to you. To feel hurt and to be angry about that is normal.’ I didn’t have to be ‘the good victim.’ I was an alcoholic. I was mad as hell. I was not what you’d call the nice, quiet, docile victim when I showed up for services. And I was still accepted.”

□ Avoid overwhelming an individual with too many referrals. Gene Brodland, a licensed clinical social worker with the Southern Illinois University School of Medicine, says:

“When you get 12 different providers for one person, they get overwhelmed. If they’re not ready to see the mental health provider, or they’re not ready to deal with their childhood sexual abuse, referral isn’t going to make a difference” (Brodland, 2010).

□ Be flexible – allow people who seek our services to tell us what they need and when they need it, rather than taking a cookie-cutter approach. The relationship between the provider and the person seeking services should be more like a dance – with the provider following the individual’s lead. Gene Brodland says:

“This readiness factor is so critical. I have never changed anybody in my life. But I’ve seen people who are ready to change make some unbelievable changes. The question to ask is, ‘What is your priority right now? What do you think would help you the most?’ Getting a job may be down a ways on her priority list. Getting food may be her top priority” (Brodland, 2010).

□ If you have had experiences similar to those of the person you’re serving, avoid projecting your own experience onto the other person. (“This is what worked for me, so you must do it too.”) Bethel advocate Daisy Barrera says:

“It’s critical, it’s a must, not to project our own experience onto another person, because each person experiences something individually. So I’ve practiced not to say to a person, ‘Oh, I went through that. I understand.’ I can’t say that, because it develops a shutdown. When someone comes to me and says, ‘I understand,’ in my mind I’m thinking, ‘You don’t.’” (Barrera, 2009)

□ Provide intensive service coordination should an individual request it. Ensure that people impacted by both interpersonal violence and co-occurring issues know about available resources. Explore options such as shelter, counseling, gender specific treatment, support groups addressing multiple problems, safety planning and linkage to other providers. Also discuss financial options, insurance and services for children.

□ Change your attitude if you think leaving is the only answer. A victim of violence may have religious, economic, family or other reasons for remaining in the relationship and it is not our role to tell this person what to do. Likewise, harm reduction methods or choosing not to use medications may be controversial but also are options people with substance abuse or mental health issues may choose to explore. Karen Foley, advocate, behavioral health specialist and founder of Triple Play Connections, says:

“I think the biggest thing that providers need to keep in mind is, what does this person want as a goal? We are not the experts on what people want. We need to ask them what they want and how we can help, rather than tell them, ‘this is what you need’” (Foley, 2010).

☐ Affirm autonomy and the right to control decision-making. Affirm the individual’s choices and explain the benefits of safety planning, stopping or reducing the use of alcohol or other mood-altering drugs and seeking wellness. Advocates and other providers should offer respect, not rescue; options, not orders, and safe advocacy or treatment rather than re-victimization. Advocate Daisy Barrera says:

“No matter how many fancy words you may use, or come up with, a person will never take the first step on a healing journey until they’re good and ready to open that door themselves. The door will remain shut. It’s an individual decision. I help her to open her door” (Barrera, 2009).

☐ Approach teaching and learning as a two-way street. Fully understand that we can learn as much from the people we help as we teach.

☐ Try not to judge a person’s response as appropriate or inappropriate. Some behaviors may begin to make more sense when seen as responses to trauma – for example, some people who have been traumatized may use humor as a coping mechanism, while others may have a “flat affect” – that is, little reaction at all (Trujillo, 2009). A survivor shares:

“I would be talking to you about the rape as if it happened to someone else. I would not be outraged about what had happened. And I would have thought it was my fault. I would not have made eye contact with you. It would have been a struggle for you to get information from me.”

WHAT DOES SAFETY MEAN?

To survivors of domestic violence or sexual assault, safety means freedom from violence or abuse. While the primacy of safety should be emphasized for everyone, advocates will want to keep in mind that safety may mean additional things for people facing issues besides violence (Trujillo, 2009). Here are some examples of what people may need, in addition to freedom from violence, in order to feel safe:

For a person in recovery from substance abuse or addiction: Having a network of people who support recovery and sobriety. Being in an environment free of constant triggers or pressure to drink alcohol or use illicit drugs.

For a person with mental health concerns: Being able to talk about one’s feelings and issues, or one’s own view of reality, without fear of being discounted or acquiring yet another label. If on medication, having a reliable source of affordable refills, so one doesn’t have to worry about running out.

For a person with disabilities: Full accessibility to any needed services. Freedom from bullying or exploitation. Being taken seriously rather than discounted. Being seen as a full-fledged human being capable of making one’s own decisions.

For a person who has experienced societal abuse or oppression: Being in an environment where diversity is respected. Freedom from being bullied, discounted or discriminated against because of misconceptions about one’s race, sexual orientation or other difference. Freedom to talk about one’s feelings, issues or view of reality without being stereotyped.

For a person facing intergenerational grief/historical trauma: Having one’s own customs, values and beliefs respected and honored. Freedom to practice one’s own customs or hold one’s own values and beliefs without pressure to conform to the dominant culture.

For a person living in poverty: Having a reliable source of income from employment, subsistence or public assistance. Ability to access enough resources to meet basic needs.

For a person who is homeless: A place to keep one's belongings without fear of them getting stolen. A place to sleep without fear of arrest or of being harassed. Privacy for such things as taking a shower or changing clothes.

For a person being exploited by the commercial sex industry: Being able to talk about what's going on in one's life without fear of arrest or stigma. Being able to choose where one works, or with whom to have a sexual relationship. Freedom from exploitation.

For a person who is or has been incarcerated: Freedom to come and go from one's place of residence without constant monitoring. The ability to discuss problems or challenges without fear of "getting violated" (an interesting turn of phrase that means getting sent back to jail or prison for violating probation or parole).

What Does Safety Mean?

To survivors of domestic violence or sexual assault, safety means freedom from violence or abuse. But what does safety mean to people facing issues in addition to violence, such as alcohol or drug addiction, mental health concerns, disabilities or social oppression? Here are some examples of what people may need, in addition to freedom from violence, in order to feel safe:

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For a person with disabilities: Full accessibility to any needed services. Freedom from bullying or exploitation. Being taken seriously rather than discounted. Being seen as a full-fledged human being capable of making one's own decisions.

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For a person facing intergenerational grief/historical trauma: Having one's own customs, values and beliefs respected and honored. Freedom to practice one's own customs or hold one's own values and beliefs without pressure to conform to the dominant culture.

For a person living in poverty: A reliable source of income, either from employment or public assistance. Knowing that one can access enough resources to meet basic needs.

For a person who is homeless: A place to keep one's belongings without fear of them getting stolen. A place to sleep without fear of arrest or of being harassed. Privacy for such things as taking a shower or changing clothes.

For a person being exploited by the commercial sex industry: Being able to talk about what's going on in one's life without fear of arrest or stigma. Being able to choose where one works, or with whom to have a sexual relationship. Freedom from exploitation.

For a person who is or has been incarcerated: Freedom to come and go from one's place of residence without constant monitoring. The ability to discuss problems or challenges without fear of "getting violated" (an interesting turn of phrase that means getting sent back to jail or prison for violating probation or parole).



WORKING WITHIN OUR COMMUNITIES

Ending Violence Against Native Women: Working Within Our Nations

Excerpt from Domestic Violence Awareness: Actions for Social Change – 2005, National Resource Center on DV
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Introduction

This chapter speaks to Native women who are advocates working within tribal nations. These pages offer a basic framework for developing an ongoing educational campaign in your own tribal community. However, all readers are strongly encouraged to read the entire manual. The unique voices, perspectives and expertise of the many women who contributed to this initiative are invaluable in creating a comprehensive, effective campaign that engages and establishes working relationships with all groups within and around your nation.

As Native women, we have similar but unique cultures and histories as indigenous peoples. Importantly, we share, unlike other groups of women, a special status as tribal nations. Those realities define and impact our struggles, strengths and strategies. We can wrap ourselves in a quilt made by and of the spirits of generations of our relatives, our indigenous cultures, natural worldview and the knowledge of the awesome spirit of women. Awareness and educational campaigns are tools of social change. Social change requires a vision of what we want our nations to become. The blessing for Native women is that our vision for the future is based on our past. We have the memories of societies that honored the sovereign status of women and their children, where battering, rape and disrespect were rare. Our task is to reclaim that vision and make real the communities where women can safely walk free.

The challenge of this work is the harsh reality that as Native advocates we are attempting to save the lives of Sisters, Aunts, Mothers and Grandmothers while wrapped in a blanket of intense poverty, multi-level political and jurisdictional chaos, geographic and cultural isolation, numerous epidemics and all the various forms of oppression and internalized oppression. The goal of this chapter is to challenge and assist advocates to connect the threads of that blanket and create an educational campaign that inspires social change to end violence against Native women.

The best fry bread, gabobo bread, flat bread and other Native foods have no written recipes. Some women bake all the time, some rarely, some buy it. No matter how it turns out, something good comes from it. Sometimes, as in this advocate's experience, we try new things. Like attempting to make "healthy" fry bread with whole wheat. They turned out to be healthy hockey pucks. Still, there were two good outcomes: laughter and knowing whom her friends really were. The effort is appreciated and relationships are made. And this work is the same way.

New parents often start out with grand, detailed visions of their children's future – and the conviction that as parents they could make it happen. Later they realized that was pretty delusional, they have control over very little and children have their own paths and spirits. What mattered most was the children's ability to be healthy and happy – and that was all about relationships, starting from themselves. And this work is the same way.

Native Women's Sovereignty

All Native Women have a right to:

1. Their bodies and paths in Life, the possession and control of which is unquestioned and honored by others. To exist without fear, but with freedom.
2. Self-governance, or the ability and authority to make decisions regarding all matters concerning themselves, without others' approval or agreement. This includes the ways and methods of decision-making in social, political and other areas of life.
3. An economic base and resources, or the control, use and development of resources, businesses or industries

that Native women choose, to support chosen life ways, including the practice of spiritual ways.

4. A distinct identity, history and culture. Each Native woman defines and describes her history, including the impact of colonization, racism and sexism, tribal women's culture, worldview and traditions.

(Sacred Circle, National Resource Center to End Violence Against Native Women, 2001)

Goals of an Educational Campaign

The overall goal of an advocate is to end violence against women. Prioritizing the safety and integrity of women, and the accountability of offenders, systems and of community members are integral to that goal.

The goals of an educational campaign are to:

- 1) help women who are battered and/or raped find you
- 2) create a credible, consistent presence as advocates and social change agents
- 3) lay the foundation for social change by providing culturally based, accurate information
- 4) inspire critical thinking
- 5) make respectful relationships
- 6) create strategies and forums aimed at mobilizing communities

“...Indian tribes must act like Indians. That's the only justification for preserving internal sovereignty...So if we're going to have internal sovereignty, we're going to have to bring back the majority of social traditions...if we don't bring those traditions back, then the problems those traditions solved are going to continue to grow. Then we'll have to get funding to set up programs to deal with those issues...When you set up programs, you are exercising your internal sovereignty, but the funding sources determine how the program is going to operate and then the funding source defines internal sovereignty.” (Deloria, 1995)

Making Respectful Relationships

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Educational campaigns begin with a mirror. Taking the time to reflect on who we are as individual women, our own internalized oppression and where we are spiritually matters greatly. This work is personal and political and they are not opposites; they are parts of each other. Traditionally Native people know everything is spiritual. But because of oppression and internalized oppression, we often separate the spiritual from our work lives and we don't always believe as women that we are spiritually powerful. Social change begins when we bring that consciousness about ourselves as women to our work. Learning to hear and trust our instincts and spirits is key. It's a necessity if the words about believing women are experts on their own lives are more than rhetoric.

The public exposure required in doing educational campaigns may make whether or not you're a non-tribal member an issue. And it may actually be a benefit if you are not because it decreases chances of family politics interfering. If status as a non-tribal member is raised, it's usually to distract from the real issues. We don't have to join in that dance. However, it is a teachable moment: focus on the fact that it's about violence to Native women.

There also is an ethical aspect to non-tribal members working in another tribal nation. Though non-tribal members are often adopted formally or informally into the tribe they work and live with, our role in that situation is to support the sovereignty of that tribe, and especially the women of that tribe, by actively working to “replace ourselves” at some point with a tribal member. It is a matter of living the messages we send about Native women's rights to resources and to speak and do for themselves.

As Women

Conversations with other advocates and other women who are battered and/or raped is the beginning and end point of all parts of our work to end violence against women, including the educational campaigns developed. Women often do their best work around a kitchen table, having coffee and visiting with each other. We don't do case management, analyze, or judge – we visit, enjoy each other's company and look for the best and become wise this way. It's awesome, natural and traditional as Native people and as women. Why don't we bring that to what we call work? We don't bring that style of relating to our work because of internalized oppression. Helping each other become aware of and undo our internalized oppression without shame is part of education and social change.

Consider the existing groups of women in your community. Women's groups are about consciousness-raising, support, brainstorming and organizing. All tribes have some types of women's societies. Revitalizing those groups so they understand their connection and role in helping stop violence against Native women in itself achieves a level of social change. The work is about women who are battered and/or raped. It's our "agenda," our lives that will be impacted. This is a sovereignty issue.

Women know the resources, needs and ways of their community. Though there may only be a few women initially, that group has the potential to act as the catalyst for educational campaigns and other organizing. Acting as a collective increases the chances of being heard, being innovative, and enhances continuity and consistency – all important elements in an educational campaign. And every woman in that society becomes a social change agent, and ensures that ending violence against Native women is an ingrained part of the society itself. It's a great example of how reclaiming tribal culture and sovereignty is directly connected to reclaiming Native women's culture and sovereignty.

Reclaiming the sovereignty of women who have been battered necessitates promoting the leadership, expertise and voices of Native women who have been battered and/or raped as often and in as many places as possible. Whether through quotes, poetry, stories, speak-outs or other forums, women deserve and need to be heard. Make the credibility of those words real by supporting Native women who have been battered in decision-making positions whenever possible.

Communities Within Communities

Each nation must tailor its own tools and path to suit their tribe; that's business as usual in Indian Country. Native women struggle with the fact that colonization and internalized oppression mean tribal identity is usually based on the tribal men's culture. Validating and promoting Native women's culture is integral to our agenda. However, there are layers of additional cultures and identities that often get ignored either because of our own lack of awareness, lack of resources and/or internalized oppression.

The status of women cannot be raised, nor our sovereignty honored, if the fact that some of us are differently-abled, have a different sexual/gender orientation, interpret our experiences and identity differently, or are different from mainstream society in any way, is ignored or discounted. The irony is that these "differences" are traditionally interpreted as signs of a special spiritual role necessary for the well being of the entire society. Our ancestors understood connections and relationships, letting individuals' spirits be and speak for themselves.

That's all pretty abstract. And maybe a bit frustrating. One source of guidance comes from our own personal experience. When do we feel most respected and validated and powerful? When we are heard and believed, given resources, supported in making our own decisions, acknowledged without judgement, when we are trusted to know what we need. When we are safe on every level. It's another way of saying sovereignty. Those elements are integral to a social change-based educational campaign, and advocacy as a whole. Create the large vision of where we want to go, then work in the small, powerful steps of relationships. That brings the work full circle.

Systems and Institutions

Know the institutions and systems in your community. Learn about their purpose, history, political life, strengths and struggles with barriers and resources. Understanding the institution's or system's culture creates rapport and common ground.

There are many ways you can build relationships with people and institutions in your community:

- ✦ ***Support each other*** – Find common ground in shared goals, barriers and conflicts. An ally on one issue is easier to convert into an ally for another cause.
- ✦ ***Make relationships with individuals*** – The whole police force may not believe in what you are trying to accomplish, but one or two individual officers may share all or part of your vision. Any ally is a start.
- ✦ ***Informal conversations*** are mutual educational opportunities, and a non-threatening way to create rapport. The trust built in that relationship will open doors and keep doors open when conflicts arise.
- ✦ ***Build on the idea of mutual benefit*** – Many people who resist change might change their minds if you can point out how a change can help them, either personally or to do their jobs better.
- ✦ ***Cross-training*** – A lot of conflicts are based on a misunderstanding of what each person's role is, whether in personal relationships or working relationships. Cross-training can inform each side about how each does his/her job and dispel any misjudgments or misconceptions either side has. Most importantly, it can plant the idea that each side may share certain values, goals, barriers, and concerns.
- ✦ ***In-services*** – Providing in-service training or information for agencies and their staff members gets everyone familiar with who you are and what you do. It lets you talk about and discuss with them issues that they might not want to acknowledge, or by which they feel threatened because they have not been informed. And we all know that a lot of people feel threatened by changes especially when they don't know why the change is needed.
- ✦ ***Target allies*** who can further the educational campaign and the work to end violence against women in the other arenas they routinely operate in. We all are aware of certain people in our community that other people look to for advice, or who are on this board or that committee. It could be someone who is just very vocal about commenting publicly about issues and their beliefs. It might be someone who is a "public" person, who incidentally is the mother, father, or other relative of someone who has been battered or raped. Informing those persons and enlisting their help can get your issues addressed in forums where you might not be able to be heard.
- ***Communicate in their language*** – Certain agencies and professions have their own terminology or terms they use with each other. Using those terms in your conversations with those groups makes you less of an outsider and less threatening. This can come from developing relationships with one member of that group or just listening to how they communicate with each other.

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Community Families and Groups

All tribal communities have formal and informal groups and organizations. Each has its own history, culture and purpose. These groups and organizations are potential allies and resources. Make connections and relationships with them, and share our struggles, goals and work with them. Begin by supporting their work, then engage them in yours. There is really nothing within our communities that is not in some way connected to ending violence against women. Help make that connection.

Our communities have spiritual advisors and leaders with the potential to provide leadership focusing on respect and status of women within the existing ceremonial groups. It is common knowledge that in most Native communities there is a disconnect between the treatment of women and spiritual practices. It is a difficult and little talked about fact resulting from colonization and internalized oppression. Use visits with the leaders in those groups to discuss this reality. These are teachable moments aimed at taking a stand on accountability as relatives and leaders.

Probably the most powerful people in Native communities are the Grandmothers. When they speak, people

listen. As with other Elders and entire families in our communities, there exists an awesome potential for recreating/revitalizing the role of elders and families as central to the honoring and protection of women and accountability of offenders.

Not Everybody Will Be an Ally

That's pretty much general knowledge. If people are arguing with us, we have their attention, we are not being ignored and they have to think about the issues. It's not the goal of advocacy or educational campaigns to get everyone to approve of or like us. That can be a challenge for women socialized to be people pleasers and/or male identified (see the discussion on internalized oppression!).

The priority is that community members see our programs as credible and trustworthy. Programs are modern, non-Native replacements for families, societies and clans. Individual behavior and character are important, but consciously recognizing we are part of a collective, many collectives, gives our roles as program representatives and community members context, power and meaning.

Get Your Message Out

The goal is to be respectful and respected by being clear and consistent. As individuals our life way and work need to reflect consistent beliefs, credibility and character. However, as one advocate, who is a Native woman, said, "We are Native people; we do not heal alone." She was talking about what being related means and the natural, traditional way of acting as a collective.

This section discusses a few key points about getting your message out and gives examples of activities that have worked well in Native communities. This manual contains a chapter listing national organizations, including Native organizations, which have materials and samples for your use. You don't have to reinvent the wheel.

If you only have time, energy, and resources for a few posters and flyers, it may not be all you want to do, but it's still valuable. Anything that gets people to think about the issue of violence against women is powerful. And women in the community who are being battered and/or raped will know they are not alone and somebody cares. That's more powerful.

One way of getting other people to see your agenda is to look for common threads of ideas in their work that correspond to part of what you are trying to accomplish. These themes help create familiarity with specific issues and goals and can bring others' perspectives into line with yours. Ending violence against Native women is part of a larger social change movement that involves other programs, whether local, tribal, state and/or national. Consider adopting or adapting themes used by those efforts, i.e. "domestic violence is a crime", "domestic violence is a women's health issue", and "community involvement is necessary to end violence against Native women."

For example, tribal leaders and community members understand that tribal sovereignty is about the status and rights of tribal nations. National Native women's organizations, such as Sacred Circle, Mending the Sacred Hoop, and Clan Star connect the themes of Native women's sovereignty and tribal sovereignty to promote an understanding of what ending violence against Native women is about.

Many issues – such as child abuse, housing, welfare, alcoholism, economic development, etc. – are close to the hearts of Native leaders and communities and evoke strong stances and support. Help people involved in these areas see their work in the context of women's safety and include ending violence against women as part of their initiatives. The idea that "woman abuse is child abuse" is a good example. The key is to start from their perspective and understanding. For example, start from their use of labels, such as "client" or "constituent," and promote their use of "woman" instead. Start with what they are familiar with, promote critical thinking, and help move them to understand and make your agenda their own.

Reclaiming tribal culture is directly connected to ending violence against Native women. One cannot happen

without the other. Tribal oral tradition and history, values, ceremonies, and life ways should be the foundation for creating messages, planning campaigns/events, and having informal conversations that are consistent and powerful.

Use existing community and cultural events and activities as educational forums:

• **Traditional arts** – Sponsor or co-sponsor traditional women’s arts exhibits including an anti-violence against women theme. Provide materials for an anti-violence display created by youth and/or women.

• **Fish camps** – Have a man who is either an ally who “gets it” or facilitates batterers’ re- education classes give a short talk and use the camp as an opportunity for “teachable moments” while socializing (and working!).

• **Powwows/wacipi** – Sponsor women’s dance categories; bring the Silent Witnesses to grand entries; get a little M.C. time and/or educate and ask the M.C. to speak to respect for women.

• **Sponsor a young women’s sports team** – Provide workshops for the team, promote them as speakers and role models, provide t-shirts, etc., with program logo and messages.

“Indianize” existing domestic violence awareness events:

• **Silent Witness exhibits** – The Silent Witnesses are silhouettes of women and children, sometimes men, who have been murdered by their batterer. They are meant to be a reminder of the lethality of battering, to put a face on the crime, and serve as a remembrance and celebration of loved ones’ lives. Sacred Circle has taken this memorial a few steps further by making the silhouettes look more like Native women by hanging pictures of tribal women (with the families’ permission) on individual silhouettes and wrapping them in shawls.

Recognizing that these memorials call on the spirits of women, they are labeled “Silent Witnesses – Quiet Guides.” Special care is taken of the silhouettes, praying with them, smudging them, etc. (Contact Sacred Circle for more information on creating and setting up these displays.)

Sacred Circle, Cangleska, Inc., and the South Dakota Coalition Against Domestic Violence’s Native Women of Sovereign Women’s Task Force made what are called “warrior shawls” of purple with large purple ribbon designs for women to wear during an October Domestic Violence Awareness Month walk. Possibly the best advice is to think outside the box using your wisdom and intuition (spirit!) as a Native woman in doing this work. That would validate and celebrate Native womanhood.

Conclusion

Advocates provide leadership, stand up and speak out. Pre-colonization, that was the role of Native women. Reclaiming tribal and Native women’s sovereignty demands Native women reclaim this role. How we do that varies by woman and tribe. Act with other women, even if there are just two of you. Preparation and timing are important aspects of social change work to be considered.

Standing up makes you a target. Be aware and prepared for that. Know it means people see you as powerful and they are paying attention. Support and allies will come. People will see that our “job” is not a standard 9 to 5; it is a life way. Being as consistent as womanly possible will earn you the respect and credibility necessary for the path-making back to when Native women were treated as the sacred beings we are.

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Systems Advocacy: Creating Safe, Respectful & Effective Responses

"I spent 4 days in jail for an unpaid traffic ticket. My boyfriend beat me up and I called the cops. He was gone by the time they got to my house. But they ran my name and arrested me..."

"It was such a struggle - I needed to get a protection order against my husband. Took time off from work, got a ride from a friend... embarrassing, depressing. I wanted me and my kids to be safe, sleep good at night... I asked the clerk of courts for the protection order form. The clerk looked exasperated, didn't even say hello. She started to hand me the papers. I reached for them and she pulled the papers back, saying "Are you serious about this? You're not going to come in here tomorrow and drop it, are you? You all just make a lot of work for me when you do that!"

Advocacy for women who have been battered and/or raped is a continuum of relationships, actions and strategies that begin and end with the women who are victimized by violence. The relationship between the woman who is battered and the advocate includes: validation of the voice, expertise and leadership of women who are battered; modeling respect, compassion and non-violence; personal accountability for our internalized oppression and behavior; belief in and non-judgmental support of women as whole human beings and women's right to sovereignty.

On a daily basis most advocates are overwhelmed by immediate crisis of individual women and their children. However, the over-arching goal of advocacy is to create social change that ends violence against all women, upholding women's integrity and prioritizing comprehensive safety and accountability everywhere in women's lives.

In all initiatives, it's important to remember and validate the reality that violence against women is not traditional in indigenous communities. The "solution" lies in reclaiming our traditional beliefs and life ways founded on values of respect, generosity, fortitude, humility and compassion. When the understanding that we are all related is infused into every aspect of our lives and work, the response to women who are battered/raped, and other victims of violence will be transformed in powerful ways – everyone becomes an "advocate." In many ways, being an advocate is being a good relative.

Systems advocacy is a key element within the continuum of advocacy.

The goal of systems advocacy is to ensure women will receive consistent, effective and easily accessible responses and resources in a respectful and safe manner from every agency, organization and institution. Ideally, what is needed and helpful, how resources or services are provided, is defined by those receiving the services and resources. This is one aspect of social change that focuses on change of policies, rules, procedures, or laws that determine how and what services are delivered to victims of domestic and sexual violence. Systems change is a part of coordinated community response, which is modelled in many ways upon the traditional practice of what has come to be called community policing.

The experiences and voices of women who are battered and/or raped inform all parts of advocacy, including systems advocacy.

"It was about six months after my children and I finally got a house in tribal housing. I was struggling to get to work, take care of the kids and keep the car working. I needed my ex to watch the children a couple days a week so I could work. I trusted him to take good care of them for that amount of time. One day I drove to town, about 18 miles away, to get my paperwork up-dated for food stamps. I handed my papers to the worker. She gave me a mean look, grabbing the papers from me, she said "Your husband is at your house all the time! If he's living with you, you can't get food stamps!" There were other people there and she was loud and angry. I was so embarrassed, but mostly I honestly wanted to jump over the desk...! But I knew if I did or said anything, she could "loose" my paperwork – How did she know he was at my house? Who was watching me? She said other stuff to me...I just had to take it..."

"He was screaming "I'll kill you!" while he was pounding on me. Somehow I escaped and ran to the neighbors. The woman said she heard him yelling but didn't know if she should get involved! Found out later I had a concussion, a cracked rib and 25 bruises and welts. Shirt was torn. Finally, the cops arrived. I'm sitting there holding my shirt together, just stunned, shocked. The cop says, with his one hand on his gun, the other on his hip, "So what's your problem?" He told me I had to stand out on the street and watch when they went into my house to get my batterer.... A few days later the

sheriff says "Well, I'm surprised you didn't drop this yet. Most do."

"I knew I had to leave. Everybody said I should "just" leave him. But the lease was in his name. Closest shelter is 50 miles away – my job? Kids' school? No car and 3 children. I call the county housing authority about low-income housing. They say I have to bring all kinds of paperwork and show up on Monday morning at 7:30 in person. That's the only time they take applications. How do I do that? Especially with getting kids to school? And there's a two year waiting list!"

Preparation for doing advocacy work, including systems advocacy in Indian Country is empowered by having a clear vision of what we want our communities to become. Very often, this vision is based upon what our nations were like before colonization. We know colonization is at the root of violence in our tribal nations. We know that the kind of violence we confront is not traditional. And, we know that our survival as indigenous peoples is tied to sovereignty and reclamation of our natural, non-violent belief systems. It's about reconnection and renewing our relationships. What is our vision for peaceful, kind and generous communities? How do we bring our traditional beliefs & values to all aspects of what we do?

The next step in doing systems advocacy is to listen to women. Creating relationships with women is the beginning place for advocacy. Trusting relationships are imperative for healing from trauma and allows for getting integral information to provide individual advocacy and institute systems change. First assuring that immediate needs are met, intake or contact paperwork is an opportunity to ask about who they have sought help from in the past, with focus on the response by the program or agency, not on the woman's choices. It's about what happened, not what they did. Who did they ask for help? What was the response? How did it impact them? Were there difficulties accessing the resource/program/agency? What worked? What didn't? How do they want things to change? What are their suggestions?

Gather and analyze that information to paint a picture of the issues needing to be addressed. Is it an individual staff person needing training? A policy or procedure issue? Does the situation point to a need for system-wide training/cross-training? Addressing myths about violence and providing accurate information has the potential to transform responses of individuals, systems and communities.

"The prosecutor said if I didn't testify against my husband for assaulting me, I'd go to jail. He didn't ask why I didn't want to...his family has beaten me up before when I left. I was so scared that even if he got convicted, he'd just be pissed off and beat me more when he got out..."

Next, do some research about the programs or agencies involved. What codes, policies and procedures exist? Are they written or informal? Who are the decision-makers? Are job descriptions clear? Are they limited in how they can respond? What do they know about violence against women and its impact? Get to know the culture, struggles and strengths within those systems. It's important to identify common ground. Often, we can relate to each other's challenges like lack of resources and staff, etc. We also all have need for allies and in some way have shared goals around helping others. Native people also share in wanting to protect and enrich tribal sovereignty and culture. This is key to strengthening our connections as community members and systems change initiatives. These can make up the foundation of effective working relationships. This common ground is the touch stone when conflict arises.

Step back and **create a strategy** based upon the information gathered and the goals of your organization. A strong strategy identifies goals and objectives, and existing resources and clear expected outcomes. There is no need to reinvent the wheel. There is a plethora of national, state and tribal expertise, model policy, procedure and protocols available. Mending the Sacred Hoop, National Indigenous Women's Resource Center, Tribal Law and Policy Institute, Red Wind Consulting and the National Domestic Violence Resource Network are some of organizations that provide materials, training and technical assistance.

I was so tired I could hardly think. Petrified about going to court. The prosecutor was an angel. Kind, patient. He actually said he was sorry I got beaten up, I didn't deserve it no matter what. Then he said he would do the prosecution without me if I wanted. The cops did a great job investigating, documenting, and the doctor did a detailed report, so it was possible for him to go ahead without me!

"I was a new advocate in a new domestic violence program on a reservation of about 5,500 people. Went to the police station to find out why a protection order hadn't been served in over a week when the guy was out and about going to work, partying and stalking the woman I was trying to help. The officer checked the file and said "We'd serve it, but it hasn't come over from the court." I go to the clerk of courts, who looks through mounds of paper stacked on her desk. She

says, "I'll try to get to it by the end of the week." Found out that she was the only staff person handling all kinds of court documents, there was no policy for prioritizing protection orders, no computer software to track anything...papers got stacked up and added to everyday and she just started from the top and tried to work her way down."

Getting to know individuals within other agencies is key. **Relationships are integral to ending violence in every aspect of advocacy and social change.** Take the time to connect as human beings, as relatives. Tillie Black Bear once said, "Sometimes we need to do some "subversive" activity. Drop in and visit. Invite them for coffee or lunch. Visit, ask about their work and how it's going. Share some information about yourself. Make a relationship. Then drop some information on them. Maybe later bring up your concerns." This helps get past assumptions and stereotypes, makes us human to each other and allows us to create rapport and collaborate with the shared goal of helping our relatives.

Keep in mind that advocates are the experts on violence against women. That's 100% of our work, unlike other programs and systems which have other competing interests and concerns. That means **advocates must provide the leadership** for any initiative involving violence against women. It's not unusual for advocates to feel uncomfortable with that role. Requesting technical assistance, training and consultations is an ongoing part of being an advocate. Ask for help and support when you need it!

Be aware that for systems change, advocates must strike a balance between aggressively pushing agencies to change and being co-opted by the agencies. Mistakes and conflicts are teachable moments – look for the lessons and try to see these occurrences as potentially powerful! Be clear about your goals, remembering that at the end of the day, advocates are **accountable to the women** we work with.

Advocacy models differ across the country, so how system change gets done will vary. Systems advocacy is never "one and done." It is a **continuous process** involving a great deal of dialogue and interaction between advocates and criminal justice agencies, law enforcement, social services and other agencies women regularly use.

In the Victims Advocacy Manual (1995, Section Two, Advocacy), Ellen Pence and Anne Marshall describe four aspects of advocacy, including the personal relationship with the woman who's been battered, decision-making and:

Clearing the path. Of all the people involved in the response to domestic violence, the advocate is the most likely person to have an overall picture of what a battered woman faces. It is the advocate's responsibility to advise and, if need be, educate the service providers and agencies of all the obstacles that are in a woman's way before she can gain some control over her life: taking care of her children, finding a home that is affordable and safe for her and her children, having reliable transportation, reconnecting with family and friends from whom she has been isolated. Many times rules, regulations, long-standing practices or attitudes of people who control resources prevent women following a course of action. The advocate's role is to use her influence, her knowledge and her pervasive powers to help women overcome those obstacles. Certainly stopping the abuse is paramount, but the other very real obstacles cannot be ignored and often prevent women from making what an onlooker may see as her only choice.

Changing the system. The best tool an advocate can have to make any changes in the system is documentation of instances when cases of domestic assault are mishandled, trivialized or neglected. Laws or procedures that are being circumvented can be challenged with dispassionate memos, stating dates, times, names, etc. While each case will have its own set of circumstances, an advocate can watch for consistent practices that are not in the interest of the victims of domestic assault. It is the advocate's responsibility to know the system she is working in and to be able to determine when the only recourse is to change policy or practices that will ensure victims will be protected.

Knowing the system also refers to knowing what boundaries are constricting an advocate. While good advocacy may typically mean arguing a victim's position at every level of decision making, the justice system is not an environment conducive to challenging decisions. The advocate who walks into a judge's office to tell him or her that they "blew it on the Steven's case" may compromise her effectiveness. Yet an advocate who is afraid to raise objections will also fail to be effective. Those within the system must recognize the obligation of the advocate to question all decisions on behalf of the victim's safety and integrity.

The success or **effectiveness of systems advocacy** is measured by women who are battered and/or raped. Has she been made safer? Has she gotten what she needs? In a good way? Are offenders and also those responsible for providing her resources, protection etc. been held accountable? Evaluate your strategy and initiatives and projects based upon their

experiences and opinions. This means building in ways, formally and informally, to ensure women who are battered/raped are a part of the process all along the way.

*I'll always remember that clerk of courts...She smiled at me. Called me by my name and looked **me**. She said she'd be glad to help me fill the papers out if I wanted and to take my time. She said she knew it could be difficult and there's some women, advocates who'd be glad to help me- and did I want their number? She made me feel like I wasn't invisible, a "problem." Her small kindness meant the world to me.*

The systemic oppression of people through racism, sexism, classism, able-bodyism, and heterosexism is a result of hierarchy. Native women are impacted by multiple forms of oppression, diminishing their ability live safely and autonomously. From this perspective, advocacy, safety and accountability are framed as civil and human rights issues. Identifying the root cause of violence against women as culturally-based expands our work to pro-active social change with the aim of sovereignty of women throughout society.

Excerpt from Sharing Our Stories of Survival-Sarah Deer, B. Clairmont, C. Martell, M. White Eagle – Chapter 12 by Brenda Hill “The Role of Advocates in the Tribal Legal System”

From **Shelter & Advocacy Program Development In Indian Country – From The Roots Up**; Sacred Circle, National Resource Center to End Violence Against Native Women, by Brenda Hill

Coordinated Community Response

The goal of the coordinated community response (CCR) is safety of women and other survivors, and offender and systems' accountability.

- This is accomplished by relationship building, education, dialogue and creation of memoranda of understanding or agreement, policy, procedure and protocol, and law and other legislation.
- This initiative is strengthened by ongoing cross-training that emphasizes interaction and includes the operation and history of each agency.

CCR Is:

- An inter-agency effort which prioritizes the safety and integrity of women/ survivors, and their children, and batterer accountability.
- An effort promoting the spiritual and cultural traditions of the sacredness of women and children.
- The establishment of policies, procedures and protocols which consistently prioritize effective, consistent, respectful provision of safety and offender and program/agency accountability.
- An initiative which promotes and honors the leadership and expertise of women who are survivors.
- *It does not include staffing, analyzing or case management of women or other survivors who have been battered or raped.*

Leadership

Advocates, unlike other professions, provide biased support of relatives who are survivors of domestic, intimate partner and sexual violence. The focus is on these issues emphasizing violence against women and the connections to other oppressions/social injustices, i.e. heterosexism, classism, poverty, racism, etc.

It is the job of advocates to keep the spotlight on the safety and sovereignty of women and other survivors, in addition to offender and systems' accountability.

As the coordinating agency in the CCR, advocates ensure that the focus is on the operation and effectiveness of agencies and organizations in providing safety, resources and accountability, not the behavior of survivors. This includes protecting the confidentiality of survivors, assuring information is shared only on a need to know basis (not because a confidentiality agreement has been signed.)

Key Members

Coordinated Community Response initiative's key players are the advocacy program, law enforcement, offender/batterer re-education program and criminal justice system, though it may involve other programs such as child protection, social services or housing agencies.

However, intimate partner violence (IPV)/ battering must be clearly acknowledged as **a violent crime**, and the coordinated community response as **a criminal justice initiative**. CCR is ***not a mental health or social services task force***.

CPS, social services, housing and human service agencies may or may not be used by survivors. Systems advocacy includes educating mental health and social service agencies about the dynamics of IPV/battering so they can provide respectful, appropriate services to women/survivors and their children, and prevent collusion with offenders/batterers. ***It is most appropriate for mental health or social service agencies to act as supportive allies of the coordinated community response.***



THE COORDINATING AGENCY: ESSENTIAL ELEMENTS

1. Provide leadership in the development of a common philosophical framework to guide the coordinated community response, ensuring that women's safety is a priority and promotes the spiritual and cultural traditions of the sacredness of women and children.
2. Create consistent, standardized policies, procedures & protocols focused on the operational meaning of safety & integrity of women, acknowledging confidentiality as an integral component.
3. Monitor/track batterers' cases from initial contact through case disposition and probation to ensure practitioner systems and batterer accountability.
4. Coordinate the exchange of information, interagency communication and program decisions on individual/offender cases, ensuring accountability to the survivor, and the entire tribal community.
5. Ensure that all who have been battered/sexually assaulted and at-risk family members, have 24-hour access to resources, support, accurate information and advocacy services.
6. Utilize a combination of sanctions, restrictions and rehabilitation/ re-education services to hold the batterer accountable to the survivor and the goals of the community intervention initiative.
7. Evaluate the coordinated community response from the standpoint of women's safety and personal sovereignty, and the goals of the intervening agencies.
8. Ensure the initiative utilizes traditional life ways as guiding principles, including work to undo harm to women, children and other relatives.

Produced by Sacred Circle /Adapted from Duluth Abuse intervention Project – Adapted by NIWRC 2020

Role of Advocates In Brief:

- Advocate in a manner that respects & validates women's individuality, experience, decisions and strengths
- Model courage and resistance in the face of fear, oppression, intimidation
- Provide leadership; ensure prioritizing of women's safety and offender accountability
- Provide 24/7 support, accurate info., crisis response, resources
- Biased support of & accountability to women who have been battered/raped, including defending their confidentiality
- Act as a relative and remain accountable to women who have been battered/raped

Role of Batterers' Re-Education Programs In Brief:

- Respect the leadership of advocates and expertise of women and other survivors who are battered
- Prioritize women's/ survivors' safety, promoting the sacredness of women and children
- Maintain focus on issues of violence, abuse, control and change
- Provide accurate information; teach respectful relationship skills
- Act as a relative and role-model
- Remain accountable to women who have been battered and other survivors

Role of the Criminal Justice System In Brief:

- Respect the leadership of advocates and expertise of women who are battered
- Prioritize women's/ survivors' safety and offender accountable
- Understand dynamics of battering and avoid any form of collusion
- Seek convictions; avoid plea agreements
- Proceed without victim testimony
- Act on all violations immediately
- Role model respectful behavior toward women and children

Role of Law Enforcement In Brief:

- Prioritizes women's safety and offender accountability
- Know dynamics of battering and avoid collusion
- Rapid, consistent response
- Follow law on mandatory arrest consistently
- Document arrests, non-arrests, past offenses etc.
- Police reports available to coordinating agency
- Coordinate with advocates
- Role model respectful behavior towards women

Produced by Sacred Circle – Adapted by NIWRC 2020