

# Eliminating Barriers to Services for Latina/o Survivors of Sexual and Intimate Partner Violence

*A position statement of the*

Alianza Latina en Contra la Agresión Sexual (ALAS) /  
Latina Alliance Against Sexual Aggression



This statement reflects the expert views of members of Latina advocates and ALAS members who work in the following states: California, Florida, Illinois, Indiana, Iowa, Kansas, Michigan, Missouri, Nebraska, New Mexico, Oklahoma, Oregon, Pennsylvania, Washington, and Texas.

Adopted May 2004

## **About ALAS**

Initiated in February 2004, the *Alianza Latina en Contra la Agresión Sexual* or ALAS, (Latina Alliance Against Sexual Aggression) is a national Latina professional resource-sharing group that focuses on cultural competency, bilingual material development, training and policy issues related to underserved Latina survivors of sexual and intimate partner violence. ALAS members have a collective experience of over 25 years in the anti-violence field and the majority of them have bilingual skills that include speaking, reading, and writing in Spanish. As Latina advocates of varying ages, levels of experience, personal backgrounds, and specific Latina cultural origins, we celebrate the diversity within our culture and are committed to help make risk reduction and victim service information more accessible to Spanish-speaking Latina/os. The actual number and types of bilingual services offered across the U.S. for Spanish monolingual survivors, the lack of existing criteria to determine the level of bilingual services available in a given agency, and the methods utilized to inform the public of these services, are issues of concern especially for Latina/o victim service advocates who are intimately aware of existing gaps in services. It has become clear that without a culturally competent infrastructure, anti-sexual assault and intimate partner violence programs cannot effectively promote the inclusion and meaningful participation of Latino communities. This position statement defines the challenges faced by Latina survivors and advocates and presents recommendations for eliminating barriers.

In an effort to identify and address these needs, the following recommendations have been presented in this document:

- 1. Work to assure that staffing patterns adequately reflect the demographics of the population being served.**
- 2. Agencies should include a specific description of the bilingual services offered in the organization's brochures and/or website.**
- 3. Establish criteria for measuring an agency's level of bilingual services.**
- 4. Promote multicultural inclusion within an agency's board of directors.**
- 5. Respect diversity within diversity and dialect variance issues within the Latino/a community by incorporating language accessibility and cultural competency into all mandated staff and volunteer training.**
- 6. Earmark certain funds for second-language materials, bilingual staff, interpreters, etc.**
- 7. All program staff, substitutes, and volunteers (not just Spanish-speaking staff and volunteers) should receive training in victim's language rights and in how to advocate for those rights.**
- 8. All program staff, substitutes, and volunteers should be trained in how to work with an interpreter.**



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## Introduction

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In the year 2001, Ron Acierno, assistant professor with the National Crime Victims Research and Treatment Center, found that Hispanics are less likely to report sexual assault due to the obstacles in obtaining victim services such as language barriers, cultural factors, and a fear of deportation.

Furthermore, a 1998 National Violence Against Women Survey found that Latina women were less likely to report rape victimization than non-Latina women.<sup>1</sup>

### Diversity within diversity

The Latino population in the United States is not a homogenous group but rather a composite of various subcultures that can claim over two dozen countries of origin and a rich ancestry. The U.S. Census Bureau reported in the year 2000 that 1 in 5 U.S. residents age 5 and older speak a language other than English at home. This same report also noted a 62 percent increase in the number Spanish speakers from 17.3 million in 1990 to 28.1 million in the year 2000.<sup>2</sup>

This large influx of Latinos in the United States, immigrating from different Latin American countries as well as from the Caribbean, has led to a greater number of Spanish dialects. Although these varieties share many similarities, they also bear a significant amount of differences. Within the United States we can find four major varieties of Spanish in different regions of the country including: Mexican-Spanish, Puerto Rican-Spanish, Cuban-Spanish, and Peninsular (Central American) Spanish.<sup>3</sup> Both South American Spanish of the Southern Cone and Central American Spanish are considered ‘voceante’ regions that utilize the person subject pronoun *vos*. Persons from the Andes, eastern Paraguay, and southern Mexico offer variations of Spanish that reflect the rich influence of indigenous languages such as *Aymara*, *Guarani* and *Nahuatl*. In isolated pockets of Colombia, Ecuador and adjacent regions, it is still possible to come across vestiges of ‘creole’ Spanish.<sup>4</sup>

Thus, an organization’s willingness or lack thereof to bridge language and cultural obstacles will impact its ability to better serve this population as well as its reputation within the community. *Confianza* or trust issues bear heavily on Latina and Latino interactions, especially when dealing with very private and personal issues such as sexual and intimate partner violence.

### Language Access as a Legal Issue

Title VI of the Civil Rights Act of 1964 is the Federal law that protects individuals from discrimination on the basis of

their race, color, or national origin in all programs that receive Federal Financial Assistance.

Title VI of the Civil Rights Act of 1964 states, “No person in the United States shall, on ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.” All entities that receive any Federal funding, either directly or indirectly through a sub-grant or sub-contract, are obligated to comply with Title VI, regardless of the amount of federal funds that they have received. Under federal law, providers are not only prohibited from singling out patients based on race or national origin, they cannot employ practices that have a discriminatory impact on individuals based upon their race or national origin. Federal regulations that implement Title VI provide that:

“A recipient . . . may not . . . utilize criteria or methods of administration which have the effect of subjecting individuals to discrimination because of their race, color or national origin, or have the effect of defeating or substantially impairing accomplishment of the objectives of the program [with] respect [to] individuals of a particular race, color or national origin. [42 C.F.R. 80.3(b)(2)]

Department of Health and Human Services regulations, 45 CFR 80.3(b)(2), require all recipients of federal financial assistance from HHS to provide meaningful access to LEP (Limited English Proficient) persons. Federal financial assistance includes grants, training, use of equipment, donations of surplus property, and other assistance.”<sup>5</sup>

### The Challenges Faced by Rape Crisis Centers & Domestic Violence Shelters:

#### Lack of Bilingual Direct Service Staff and Volunteers

The lack of commitment to the development of specific budget areas to address access issues has a direct effect on both staff and survivors. The level of informality regarding paramount issues such as interpreter services, culturally competent translations, and the recruitment and assessment of bilingual staff reflects blatant disregard of Spanish speaking victims of sexual and intimate partner violence and the bilingual advocates who serve them. There is a grave shortage of bilingual hotline staff and volunteers in victim services.

Many rape crisis centers and domestic violence shelters do not have a Spanish speaking advocate available. In some cases the only response a Spanish speaking victim receives is, “I’m sorry I don’t speak Spanish,” while in other cases, other Latina survivors or residents of a dual center are called upon to interpret when bilingual staff is unavailable.



As a result, many bilingual employees of victim service centers often find themselves overtaxed, underpaid, and sometimes expected to fulfill or supervise most of the center's translation and interpretation needs. Latina advocates, like other women of color, also run the risk of being disregarded and tokenized within victim service agencies when they attempt to address the multiple needs of their clients.

### **Funding Limitations**

Both limited victim service funding and anti-immigrant sentiment have contributed to the low-level ranking of bilingual staff in victim service agency budgets. While limited budgets keep many victim service agencies in a state of overextension, with the demand exceeding limited service capabilities, the fear of having to attend to additional survivors keeps many agencies from doing effective outreach to non-English speaking communities.

*“We cannot rely on band-aid solutions to the problem of removing language barriers to health care access. We cannot expect patients to rely on their children and relatives, when federal guidance, state law and everyday experience tell us that this can lead to invasions of privacy, health care mishaps, and preventable deaths. Nor can we leave interpretation to already-overworked staff that have their own jobs to do. Private institutions as well as the government must devote resources to ensure access to health care for non-English speakers.”<sup>6</sup>*

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### **Recommendations for Eliminating Barriers**

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ALAS recommends that programs in rape crisis centers and domestic violence shelters adopt policies consistent with the following guidelines.

#### **1. Work to assure that staffing patterns adequately reflect the demographics of the population being served.**

In working to assure equitable staffing representation, the first step is to identify the level of unequal accessibility for non-English speaking survivors within a victim service organization. This may be done by comparing the percentage of bilingual staff with the number of non-English speaking residents of the service population, or documenting the difficulties an agency may encounter in serving monolingual clients. Demographic representation of staff is critical for the lack of it can have dire consequences for all, including the monolingual victim, the bilingual advocate, and the community itself.

Yet, if victim service groups rely solely on the client profile trends of those who are accessing services, they run the

risk of ignoring actual population changes. This may lead to the ‘chicken or the egg’ argument when agencies are unaware that their community may likely have a growing Spanish-speaking population and therefore assume that bilingual services are not needed because they don’t have any Spanish-speaking clients. A survey of Department of Human Services funded residential and non-residential victim service agencies in Texas revealed a surprising lack of awareness of demographic changes. This survey found that within a state home to 7.3 million Latinas/os there is only a 1 in 5 chance that a victim of domestic violence who speaks Spanish might be assisted by a bilingual domestic violence center staff.<sup>7</sup>

Programs should employ careful screening and recruitment practices to increase the likelihood of selecting appropriate candidates as agency staff and volunteers. Incentives and educational mentoring opportunities to engage Latina/os in sexual violence work also need to be provided. Opportunities to develop mentoring programs through social work schools, job training programs, and community health worker/*promotora* programs exist and should be utilized.

Appropriate financial compensation should also be a consideration when hiring staff members with additional skills. According to the Latino Social Work Organization, \$4000.00 is adequate compensation for the additional language skill.

#### **2. Agencies should include a specific description of the bilingual services offered in the organization’s brochures and/or website.**

While a center may describe itself as offering Spanish language services, the quality and level of availability may vary radically as there are no set criteria to define the level of language accessibility. While some Spanish language materials are better than none, the message is lost or distorted when dialect, differences in attitude/awareness of sexual exploitation and class differences are ignored. Materials offered to survivors must take into account race discrimination, socioeconomic segregation, Spanish language limitations, and immigrant women’s lack of knowledge about U.S. laws.<sup>8</sup> Furthermore, in order to be culturally sensitive and specific, an agency needs to consider factors such as institutional classism and elitism, along with colonialism and oppression, when determining what types of bilingual services will be offered.

Including a specific description of language-appropriate services “on paper”, gives potential “clients” clear expectations and holds agencies accountable for providing culturally appropriate services.



*“Second language access means being able to speak to someone in your own language both on a crisis line and at a program and or shelter...I do not think that just having one or two brochures that are in Spanish is sufficient. Having a Spanish speaking advocate and counselor is what is needed.”*

When an agency states that they offer “bilingual or Spanish-language” services, the level and timeframe should be articulated in both languages on all materials, i.e. brochures, website, etc... It is also important to keep in mind that barriers to services are much more than the language use of forms and the language skills of the employees. Services also need to appear culturally relevant and appropriate for the victim.

### **3. Establish criteria for measuring an agency’s level of bilingual services.**

Without such criteria, "bilingual" will continue to be a loosely-defined term that includes anyone who has a basic working knowledge of a second language, but who may not be able to effectively communicate with and truly understand "clients."

Having a single part-time staff or volunteer who speaks Spanish does not make a bilingual program. Identifying a center’s limitations in offering bilingual services is a must; not doing so is a grave disservice that contributes to the re-victimization of Spanish-speaking survivors of sexual and intimate partner violence. To accomplish a certain level of bilingual service availability, a program must be willing and able to test or evaluate its capability.

### **4. Promote multicultural inclusion within an agency’s board of directors.**

An agency can have staff and volunteers who are deeply committed to social justice issues and to ending violence, racism, and gender discrimination, but until the constituency of the agency Board reflects the community it is serving, the agency cannot effect true, lasting change.

Across the United States, rarely do non-profit Boards have adequate representation of the communities that they serve and victim service agencies are no exception. Having individuals on a board that are representative of the community or communities being served encourages more involvement by different groups as it demonstrates the willingness of the provider to ensure that it has the community’s best interests at heart. Members of the community can offer insight into the true needs of the public and will feel included as part of the decision making process. No one can gain board experience without ever having been given the opportunity to serve.

Through this inclusion, a Board might begin to address ways to meet the specific needs of women from various communities.

### **5. Respect diversity within diversity and dialect variance issues within the Latino/a community by incorporating language accessibility and cultural competency into all mandated staff and volunteer training.**

The nation's Latina/o population is more diverse than ever and can claim over two dozen countries of origin and a rich ancestry that includes mixtures of Spanish blood with Native American, African, German, and Italian, to name a few.<sup>9</sup>

Equally important factors to consider besides country of origin for improving outreach to Latino communities include: conditions of residency status, rural vs. urban origins, political climate of the country of origin, level of education, language capabilities, level of integration or assimilation into a new environment, and the level of isolation or types of social networks that are available.

In some cases, a woman’s or girl’s reputation, standing in the community, residency, feelings of self-worth, reproductive options, and even future marriage prospects, may all be impacted by the victimization in question, so the need to address these very difficult and sometimes taboo issues with someone who is familiar, speaks the same language, is of a similar cultural heritage or at least is aware of pertinent cultural issues, is crucial. For older survivors of sexual violence, language and cultural obstacles may also be exacerbated by a generation gap as well. The very notion of baring oneself to a 24 year-old Anglo victim advocate is out of the question for many older Latinas.

Furthermore where there is a strong demarcation of prescribed gender roles and attributes, where virginity equals ‘purity’ and masculinity is defined in strict heterosexual terms, there is a subclass of underserved within the Latina/o groups for whom self-identification as a victim will lead to inevitable re-victimization through judgment and victim-blaming. Unfortunately, the re-victimization that survivors face is not limited to their own social networks, but may also begin within the very agencies that receive federal and state funds to serve victims of crime.

### **6. Earmark certain funds for second-language materials, bilingual staff, interpreters, etc.**

Our country is one of diversity of cultures and languages, and we cannot adequately serve those in need without providing multi-lingual services and materials.



In order for an agency to be truly competent in serving Limited English Proficient clients, it must begin with its infrastructure and budget. Without specific policies and funds earmarked for translation and interpreter services, bilingual staff, and original materials in Spanish; language access will continue to be an illusive and inconsistent goal. This is so important to ensuring the services continue long into the future and shows a strong commitment on behalf of the agency.

**7. All program staff, substitutes, and volunteers (not just Spanish-speaking staff and volunteers) should receive training in victim's language rights and in how to advocate for those rights.**

Without a competent pool of bilingual trainers or community outreach coordinators, victim service programs cannot effectively promote the inclusion and meaningful participation of Latino communities. Historically, Latinas have been under-represented and/or absent on the local, state and national level within the anti-sexual violence movement. While the latest U.S. Census Bureau report indicates that about 84% of the 10.4 million Latinos that live in the Southern states live in Texas and Florida, yet sexual assault and domestic violence training programs are rarely offered in Spanish.<sup>10</sup>

All public agencies, including police, prosecutors, probation, victim assistance agencies, child protective services, etc. are obligated to provide adequate translation services to assure that non-English speakers receive equal protection, i.e. equal services. Advocating for those rights, both in the case of an individual victim and as a matter of policy for all victims, should be the responsibility of all staff and volunteers in rape and domestic violence centers, not just the responsibility of the Spanish speaking staff.

**8. All program staff, substitutes, and volunteers should be trained in how to work with an interpreter.**

Ideally, Spanish-speaking victims would always have Spanish-speaking staff available. For the many times when a non-Spanish-speaking staff must rely on an interpreter, it is essential that they know how to use that interpreter properly, both in the situation where the interpreter is a professional, and in the situation where the interpreter is a non-professional, such as the friend of the victim. In the latter case, staff should have training on how to instruct the interpreter on his or her role.

*“As with the use of other non-professional interpreters, the recipient may need to consider issues of competence, appropriateness, conflicts of interest, and confidentiality in determining whether it should respect the desire of the LEP person to use an interpreter of his or her own choosing.*”

*Recipients should take reasonable steps to ascertain that family, legal guardians, caretakers, and other informal interpreters are not only competent in the circumstances, but are also appropriate in light of the circumstances and subject matter of the program, service or activity, including protection of the recipient's own administrative or enforcement interest in accurate interpretation.”<sup>11</sup>*

*“I worked in a clinic where I often was asked to interpret for Spanish only speaking patients. These patients had a greater need for patient education than the majority. I think the use of family members and children is wrong. I also think the use of an interpreter leads to inferior services for the patient due to the extended length of the visit when using an interpreter, the lack of personalismo, and the interpreter may miss cues that the patient/victim does not fully understand what is being discussed. I think there needs to be an increase of bilingual professionals.”*

As a last resort, when bilingual staff or volunteers are not available, staff should subscribe to a professional interpreter service, such as the Language Line (used to be called the AT&T Language Line).

**Conclusion**

The Latina Alliance Against Sexual Aggression (ALAS) is strongly committed to promoting cultural competency and greater English Language Learner (ELL) /Limited English Proficient (LEP) victim access to services. Practices that lead to higher quality of bilingual programs help to impact the number of Latin@ survivors that have historically gone unheard and may help reduce the instances of abuse in our Latin@ communities.

Thus the members of ALAS pledge their commitment and expertise to work with other concerned individuals and groups to provide a safer and inclusive environment for Spanish-speaking survivors of sexual and intimate partner violence.

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**Glossary**

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**The ‘@’ sign**

The use of the @ sign, a ubiquitous symbol for electronic communication, has a relatively brief history in everyday Spanish as it has mainly come into greater use with the rise of e-mail and the Internet. Recently however, in the Spanish language, the symbol has come to serve as a form of indicating both the masculine and feminine genders at the same time.

**Dual Centers**

Victim crisis centers that offer services for both victims of sexual assault as well as intimate partner violence.



### Limited English Proficient (LEP) vs. English Language Learner (ELL)

LEP stands for Limited English Proficient and is the official term utilized to describe individuals in need of interpreter services for any organization receiving Federal funding to assure compliance with Title VI-Civil Rights legislation. LEP is also the term used in the United States to categorize student language abilities.

However, LEP is considered a politically incorrect term by many Hispanic / Latina advocates and allies, because of its negative connotation and the use of ELL (English language learner) is recommended by those who teach English as a second or foreign language.

### Promotora

The terms *promotora*, *animadora*, para-professional, community health advisor and lay health advisor are all used to refer to workers who are indigenous to the community and who serve and train through a community - based organization as opposed to holding a college degree. *Promotora* programs can provide culturally appropriate, holistic, and community-centered services that are grounded in local needs as gauged through the input of local members. In Texas, as well as other border states many different *promotora* groups exist, yet all do not necessarily work together nor collaborate with each other. While some are truly grassroots with their own sense of direction and indigenous leadership, others have less autonomy and are instead extension agents of larger formal non-profits or government health agencies.

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10. Ibid

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**Supporting coalitions, organizations, and agencies:**

Alabama Coalition Against Rape, Montgomery, AL

Arkansas Coalition Against Sexual Assault, Little Rock, AR

Arizona Sexual Assault Network, Chandler, AZ

Arte Sana (art heals), Austin, TX

California Coalition Against Sexual Assault, Sacramento, CA

CARE: Communities Against Rape Initiative, West Lafayette, IN

Connecticut Sexual Assault Crisis Services, Inc. (CONNSACS), East Hartford, CT

CONTACT Delaware, Inc., Sexual Assault Network of Delaware

Florida Council Against Sexual Violence, Tallahassee, FL

Georgia Network to End Sexual Assault, Atlanta, GA

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National Sexual Assault Coalition Resource Sharing Project

National Sexual Violence Resource Center, Enola, PA

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New Mexico Coalition of Sexual Assault Programs, Albuquerque, NM

New York State Coalition Against Sexual Assault, Albany, NY

North Carolina Coalition Against Sexual Assault, Raleigh, NC

Ohio Coalition Against Sexual Assault, Columbus, OH

Ohio Domestic Violence Network, Columbus, OH

Oregon Coalition Against Domestic and Sexual Violence, Salem, OR



Pennsylvania Coalition Against Domestic Violence,  
Harrisburg, PA

Pennsylvania Coalition Against Rape, Enola, PA

Sexual Assault and Trauma Resource Center of Rhode  
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South Carolina Coalition Against Domestic Violence and  
Sexual Assault, Columbia, SC

South Dakota Coalition Against Domestic Violence and  
Sexual Assault, Pierre, SD

Tennessee Coalition Against Domestic and Sexual  
Violence, Nashville, TN

Texas Association Against Sexual Assault, Austin, TX

Utah Coalition Against Sexual Assault, Salt Lake City, UT

Washington Coalition of Sexual Assault Programs,  
Olympia, WA

Women's Justice Center/*Centro de Justicia Para  
Mujeres*, Santa Rosa, CA

Women of Color Network (a project of National  
Resource Center on Domestic Violence), Harrisburg, PA

Vermont Network Against Domestic Violence and  
Sexual Assault, Montpelier, VT

Virginia Sexual and Domestic Violence Action Alliance

**The following coalitions, organizations, and agencies agree in principle with the recommendations set forth in this document and encourage victim service agencies to strive as conditions permit to follow them accordingly:**

Texas Council on Family Violence, Austin, TX

National Domestic Violence Hotline, Austin, TX

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**Lend your support:**

Please contact [artesanando@yahoo.com](mailto:artesanando@yahoo.com) to have your agency, coalition, or organization name added as a supporter of the recommendations set forth in this document. This position statement may also be accessed online by visiting [www.arte-sana.com](http://www.arte-sana.com).

