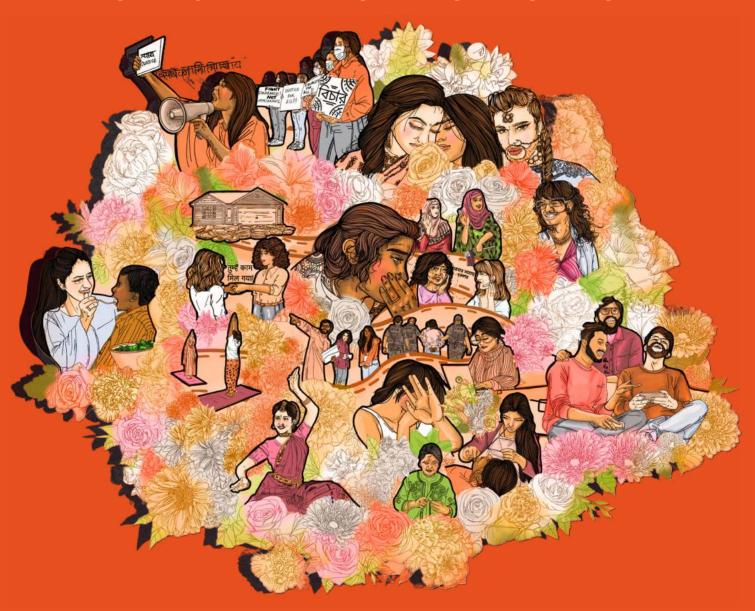
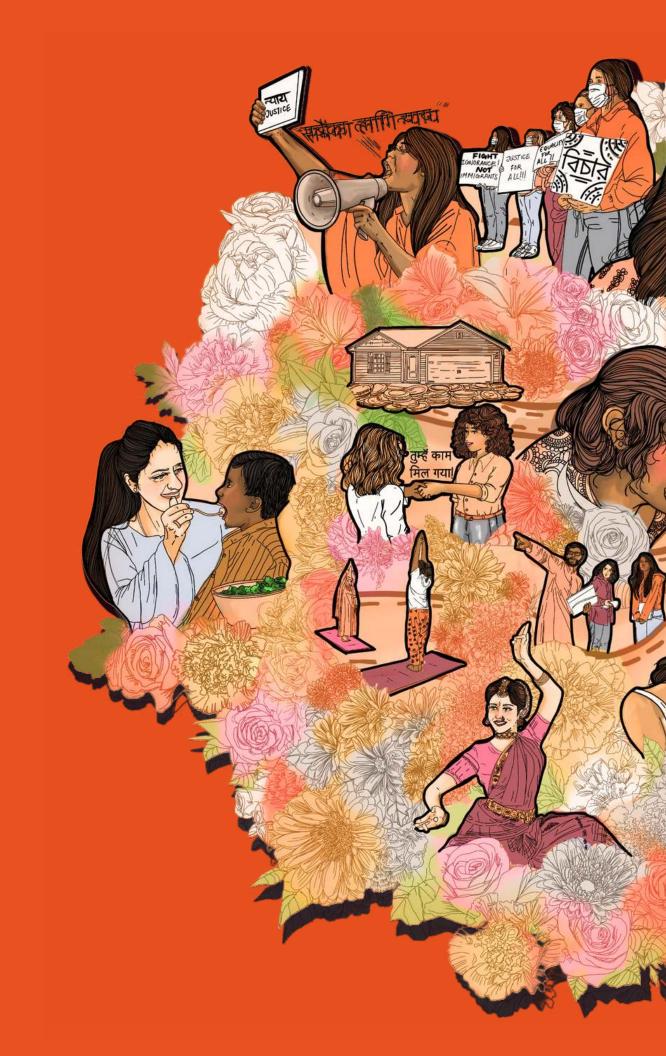
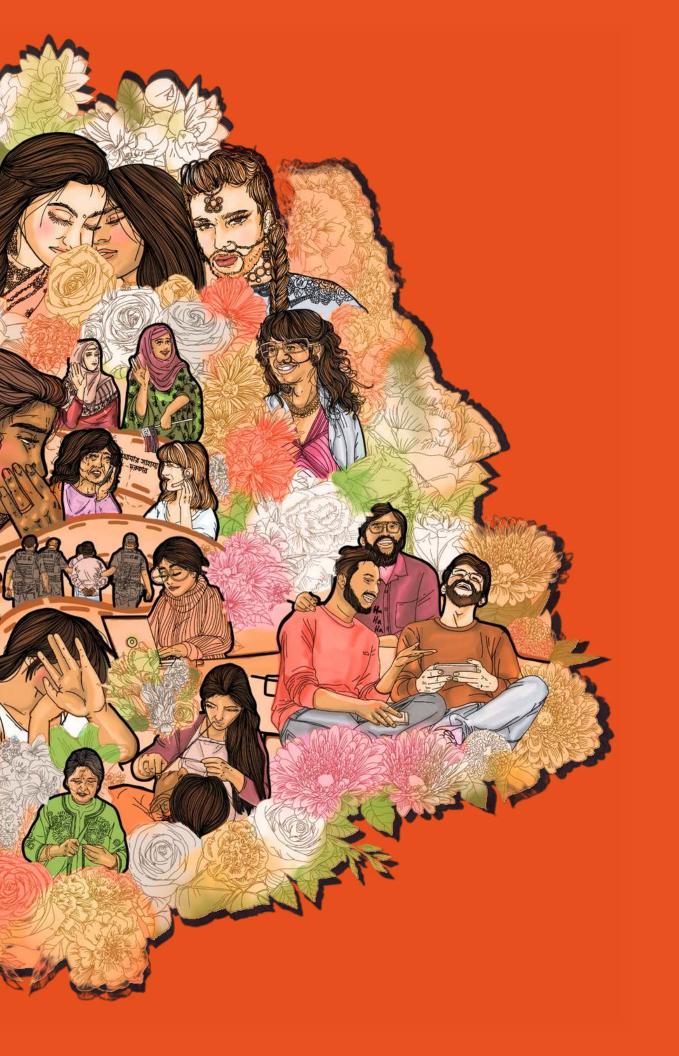
### STATEOF THE FIELD

DATA FROM THE FRONTLINES OF SOUTH ASIAN GENDER-BASED VIOLENCE WORK



A NATIONAL REPORT BY SOUTH ASIAN SOAR OCTOBER 2023





### Dedication

We dedicate this report to those whom we have lost to violence, to those who are healing from violence, and to those who dream boldly of a future free of violence.

### **Digital Access**

The full report can be accessed at www.togetherwerise.report, or by scanning the QR code below:



### **Content Note**

Throughout this report, we cover topics such as gender-based violence and survivorship, including sexual assault, domestic violence, and other forms of abuse and oppression. If this content is triggering or distressing to encounter, we encourage you to engage with the report in the way that feels most comfortable for you.

If you are looking for resources for care and healing, you can find them on SOAR's Website at <a href="https://www.southasiansoar.org/healingresources">www.southasiansoar.org/healingresources</a>.

### Acknowledgments

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To each of the frontline organizations who participated in this survey, we have tremendous gratitude for each of you. Your experiences and voices are the bedrock of this report and the force behind this movement.

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**AADA** Maitri Sanctuary for Families

**AFSSA** SEWA - AIFW Narika

**API DVRP** SAHARA Raksha Saahas for Cause

**CHETNA** Saheli Inc. Texas Muslim Women's Foundation

Women for Afghan Women

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South Asian Network

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# About the Report

### Overview

Much of the mainstream research on gender-based violence (GBV) overlooks or generalizes GBV in AAPI and South Asian communities. To address this gap, South Asian SOAR (SOAR) conducted nationwide listening sessions in 2021 with organizations on the frontlines of GBV work in South Asian American communities. In October 2022, the findings of these listening sessions were shared in the publication of a national report titled Together We Rise. This report presented a qualitative landscape assessment of the challenges and needs of South Asian communities experiencing gender-based violence. However, a crucial need remained for quantitative data to better understand community-based organizations and the survivors they work with, including the programs and services they offer, and the impact of the COVID-19 pandemic on them. To address this gap, SOAR surveyed its member organizations, the only national network of South Asian GBV organizations. This report marks a significant stride towards gathering and disseminating essential data about GBV within South Asian communities.

### Research Methods

In February 2022, SOAR hosted a meeting with its members, a network comprising 32 community-based organizations dedicated to addressing GBV, to discuss the challenges and needs for data collection and reporting. The dialogue at this meeting illuminated the myriad difficulties faced by South Asian GBV organizations when gathering and reporting data. However, it underscored the pivotal role of data in advocating for sustained support and funding to meet the needs of South Asian survivors. Consequently, SOAR began developing a "State of the Field" survey, with the primary objective of gathering comprehensive nationwide data on efforts to address GBV within the South Asian diaspora in the United States. Using the insights from the member discussion, the survey was designed to collect data on aspects such as organizational catchment metrics, client demographics, program and services, community outreach, and an assessment of the impact of the COVID-19 pandemic.

Shortly thereafter, SOAR published the online survey and extended invitations to all of its member organizations via email, employing a convenience sampling recruitment method. Recognizing that many of these organizations operate with limited staff, SOAR requested member organizations to designate one or more representatives capable of sharing essential data related to their budget, clientele, and programs. In many cases, the Executive Director or Director of Programs provided responses to the survey questions. To facilitate data collection, SurveyMonkey was utilized as the survey administration platform, with data collection continuing through July 2022. The survey comprised 51 questions and employed a blend of free-text and multi-select question formats. Upon the conclusion of the survey period, data was extracted from SurveyMonkey and compiled in Excel for analysis. The data analysis involved descriptive methodologies, primarily centered on the computation of summary statistics, which are expanded upon in Appendix A: Additional Report Methodology.

### **Research Limitations**

While the survey provides significant insights, some limitations should be stated to offer a more comprehensive view of the data. Overall, out of the 26 organizations that participated, five organizations only completed the demographic section due to limited capacity, leaving a substantial 81% that provided more extensive responses.

Additionally, some questions' diverse and free-text formats added complexity to the analysis. For questions with responses that included numerical ranges (i.e., budget size), we calculated low, midpoint, and high estimates to provide a more holistic view of the responses. Despite these measures, using undefined terms such as "helpline calls" and "clients" in the questions may have led to varied interpretations among respondents, potentially impacting the consistency of the data. Finally, there were vast differences in the sizes of the organizations that responded to the survey. Where possible, the method of analysis corrected for differences in organizational size and capacity by taking averages across organizations.

In some cases, however, there is likely some skew towards larger organizations. These challenges underscore the intricate nature of GBV work and highlight the importance of nuanced, flexible approaches to data collection and analysis in this field.

### Audience for this Report

This report is intended for any person or organization working towards addressing, preventing, or ending GBV within and outside the South Asian diaspora in the U.S.

- For Survivors, Communities, & Frontline Organizations: We hope this report captures and reflects your experiences and bolsters your advocacy for more funding and programs.
- For Advocacy Organizations & Researchers: We invite you to deepen your understanding of the needs of South Asian survivors, communities, and organizations and partner with them to drive more critical research and advocacy.
- For Policymakers & Funders: We urge you to invest in the remarkable efforts
  of community-based organizations, as they strive to meet the intricate and
  pressing needs of South Asian survivors and communities.

### Language & Terminology

Language is both supportive and limiting, but even more so, it is always changing alongside evolving movements. This report uses terminology that reflects our current understanding of these terms, recognizing that no single term can fully encompass the diverse experiences of gender-based violence. Below, we describe some key terms as they are used throughout the report.

### Abuser OR Person who has caused harm

We have chosen to use the term 'abuser' to refer to a person who has caused harm through abuse, and we also recognize that people of all genders and identities can be perpetrators of GBV.

We acknowledge that there is no perfect term that adequately identifies the experiences and realities of every person who has caused harm or any form of GBV. Ultimately, it is up to each person who has experienced GBV how they want to refer to the person(s) who caused them harm.

### **Gender-Based Violence (GBV)**

Gender-based violence (GBV) is defined as "any type of violence that is rooted in the exploitation of unequal power relationships between genders," including "gender norms and role expectations specific to a society as well as situational or structural power imbalances and inequities." In this report, we use GBV to encompass a range of harms that include physical abuse, emotional abuse, financial abuse, sexual abuse, intimate partner (IPV) or domestic violence (DV), female genital mutilation/cutting (FGM/C), family violence, sexual assault, sexual exploitation, child sexual abuse (CSA), stalking, human trafficking, and transnational abandonment.

We acknowledge that these forms of harm and abuse are not limited to sex or gender identity, and we use the term 'gender-based violence' to reflect the language currently used in the movement.

### Sexual Assault and Violence

According to RAINN, sexual violence is an "all-encompassing, non-legal term that refers to forms of GBV including but not limited to sexual assault, rape, sexual abuse, childhood sexual abuse (CSA), intimate partner sexual violence, and sexual harassment." In this report, we consider these forms of violence to be encompassed within the umbrella term of gender-based violence.

### South Asian Diaspora

In this report, we refer to the South Asian diaspora as those "individuals with ancestry from Afghanistan, Bangladesh, Bhutan, India, Nepal, Pakistan, Sri Lanka, and the Maldives" and "individuals of South Asian origin who have roots in various areas of the world, including the Caribbean (Guyana, Jamaica, Suriname, and Trinidad & Tobago), Africa (Nigeria, South Africa, Uganda), Canada, Europe, the Middle East, and other parts of Asia and the Pacific Islands (Fiji, Indonesia, Malaysia, and Singapore)."

We recognize that there is no homogenous or singular South Asian identity or experience. While we use the term "South Asian" to capture the commonalities based on ancestral geographic origin, this report does not attempt to generalize the experiences of South Asians in the US. This is particularly important to us, given the existing hegemony within the diaspora along the lines of caste, class, immigration status, religion, language, and more.

### Survivor OR Person who has experienced harm

We use the term survivor to refer to a person who has experienced GBV. Though the terms 'victim' and 'survivor' are often used interchangeably, we use the term 'survivor' to refer to someone who has experienced harm and 'victim' in cases where the person who has experienced GBV has not survived. In addition, we recognize that people of all genders and identities can be survivors of GBV.

We believe there is no perfect term to describe the experience of survivorship, and it is up to each individual who has experienced GBV to choose how they describe themselves.

For a more comprehensive glossary of terms, please visit our digital Glossary & Key Terms: https://www.southasiansoar.org/glossary

# Introduction & Background

### The South Asian Diaspora in the US

South Asians are one of the fastest-growing immigrant groups in the US, with over 5.4 million people, and make up between 25% and 29% of the Asian American population in the U.S.<sup>4,5</sup> Their presence in the U.S. has evolved through three migration phases marked by complex histories of colonialism, displacement, labor, and economic shifts. As a result, the South Asian community in the U.S. is highly diverse across factors like gender, sexuality, caste, class, race, religion, language, and migration history.

These complex histories have led to nuanced challenges and significant disparities across the South Asian diasporic population. Externally, South Asians grapple with racism and model minority stereotypes, which convey misconceptions about their success and social issues, such as GBV and mental health. Internally, there are deeply ingrained oppressions, often based on factors like caste, religion, and gender.

### Gender-Based Violence in the Diaspora

GBV within the South Asian diaspora in the U.S. is a pressing issue that remains under-researched, under-addressed, and underfunded. Current research findings are alarming, indicating that 48% of South Asians in the U.S. have experienced some form of GBV, with physical violence being the most prevalent type.<sup>6</sup>

The same study revealed that while the most prevalent type of violence experienced is physical violence (48%), 38% of South Asians experience emotional abuse, 35% experience economic abuse, 27% experience verbal abuse, 26% experience immigration-related abuse, 19% experience in-laws related abuse, and 11% experience sexual abuse. Another 2016 web-based survey of South Asian adults, born both abroad and in the U.S., found that 25% of respondents experienced child sexual abuse (CSA), and 41% of respondents witnessed DV within their households as children. However, due to underreporting, these statistics likely underestimate the actual prevalence of GBV and who it impacts. Beyond prevalence data, existing research provides valuable insights into the factors underlying GBV and help-seeking behaviors among South Asian survivors in the U.S.

48% of South Asians in the US experience physical violence

38% of South Asians in the US experience emotional abuse

35% of South Asians in the US experience economic abuse

### Individual & Cultural Factors

Cultural factors play a significant role in increasing the risk of GBV among South Asian Americans. These factors include power imbalances within collectivist or joint family structures, patriarchal norms, rigid gender roles, isolation, and the pressure to conform to societal expectations regarding marriage.<sup>9</sup>

Marginalized groups within the South Asian community face amplified discrimination and harm due to power structures that persist across various subgroups.

### Systemic Factors

GBV must be understood as an intersectional and systemic issue affecting South Asians in the US. Factors such as immigration status, employment barriers, language barriers, economic insecurity, racism, and discrimination heighten vulnerability to GBV. These vulnerabilities are perpetuated by entrenched systems of capitalism, heteropatriarchy, and white supremacy, which sustain power-based oppression and inequity.

### Impact of Gender-Based Violence

The experience of GBV has severe physical, mental, emotional, social, and economic impacts on survivors and their families. Research indicates that 75% of survivors experience clinical post-traumatic stress symptoms, and South Asian survivors may face increased sexual health concerns, depression, anxiety, and suicidal ideation. Socially and culturally, survivors often bear the burden of shame, stigma, and isolation. Financial abuse can have long-lasting consequences, leading to accumulated debt and lost opportunities. Additionally, survivors are at heightened risk of criminalization, which is particularly detrimental to immigrant survivors. It is crucial to acknowledge that the consequences of GBV) extend beyond individual survivors, significantly affecting their children, families, and entire communities.

### Addressing and Responding to GBV

Efforts to address and end GBV within South Asian communities in the US date back to the 1970s and 1980s, with grassroots organizing led by South Asian women. These efforts have given rise to culturally-specific frontline GBV organizations that offer essential support and services to survivors and their families. These organizations have played a crucial role in laying the foundation for the South Asian anti-GBV movement and driving social change at multiple levels. This report represents a step toward delving deeper into the challenges they face in their pursuit of addressing and ultimately ending GBV.

For a more comprehensive understanding of the background and context of the State of the Field report, readers are encouraged to refer to SOAR's inaugural report, Together We Rise.

# About the Participating Organizations

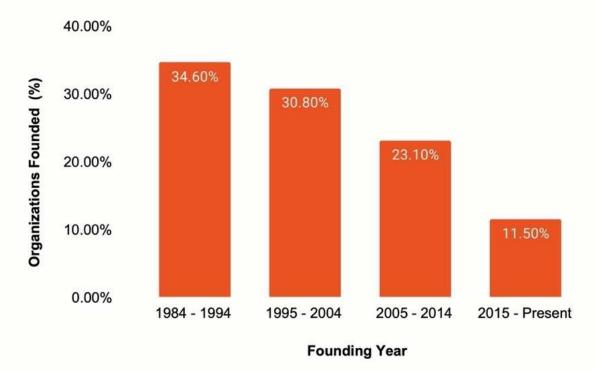


As described in the Introduction & Background, South Asian GBV organizations have roots stretching back 40 years. The following data provides an overview of the founding years, geographical locations, mission statements, budget size, and funding sources of 26, or about 65%, of the 40 known South Asian GBV organizations in the U.S. While this dataset may every organization, it encompass serves as representative compilation, offering clearer us а understanding of the vital community-based organizations that address GBV in South Asian communities across the U.S.

## The presence of South Asian GBV organizations spans four decades, illustrating the movement's evolution and adaptability to changing needs.

As described in the Introduction & Background, South Asian GBV organizations have a well-established history dating back four decades. In recent years, however, we have witnessed the continued emergence of new South Asian GBV organizations. These organizations have a crucial role in adapting to changing dynamics and ensuring that people across different South Asian subgroups and communities can access culturally-specific support and resources.

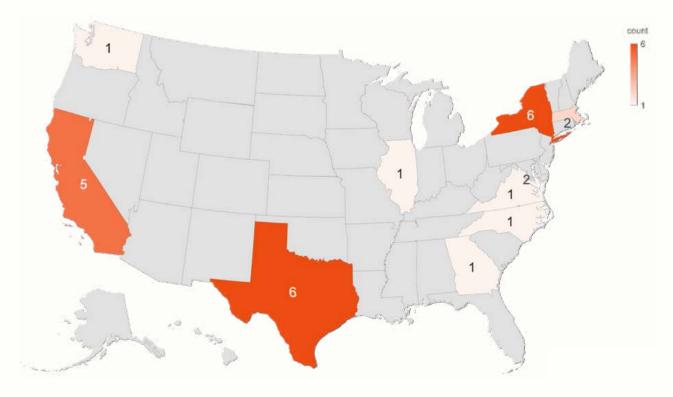
Figure 1: Founding Years of South Asian GBV Organizations



### The highest number of South Asian GBV organizations are in New York, Texas, and California.

Many South Asian GBV organizations are found in states with high South Asian populations, such as New Jersey (NJ) and New York (NY), California (CA), Texas (TX), and the Delaware-Maryland-Virginia (DMV) areas. However, there are noticeable gaps in the South and Midwest, even though they are home to some of the fastest-growing South Asian populations. However, there are noticeable gaps in the South and Midwest, even though they are home to some of the fastest-growing South Asian populations. However, there are noticeable gaps in the South Asian populations. It also highlights the need for continued efforts to raise awareness and establish GBV organizations in these underserved areas.

Figure 2: Heatmap of South Asian GBV Organizations in the U.S.



### At the heart of most organizations' missions is to provide culturally-specific services to South Asian survivors of violence.

While several mission statements focus on women, many organizations have been shifting their language away from this to acknowledge that GBV occurs across all genders. While most of these organizations adhere to the conventional role of delivering essential direct services to survivors, a newer wave of organizations encompasses greater diversity in programs and services, including investments in research, advocacy, and grassroots organizing.

Figure 3: Most Common Words in the Mission Statements of South Asian GBV Organizations in the U.S.

			empower	domestic	gender
		women			
South-Asian	violence		end	advocacy	rights
		survivors	support	immigrant	organization
community	services	culturally	education	family pror	note outreach

In 2021, a majority of South Asian GBV organizations had an annual budget size under \$1,500,000. In 2021, the sum of the budgets of 20 organizations was \$24.3 Million, with budgets ranging from: \$8,500 to \$4 Million.

Despite their vital role in addressing community needs, South Asian GBV face the daunting task of serving diverse and marginalized South Asian communities while operating within constrained financial resources. Their ability to provide crucial support and resources to survivors of GBV and their families, raise awareness, and advocate for change is a testament to their resilience and creativity. However, the small budgets they operate with underscore the urgent need for increased funding and support to ensure that these organizations can continue their essential work.

Figure 4: Average Organization Budget Size by Founding Year

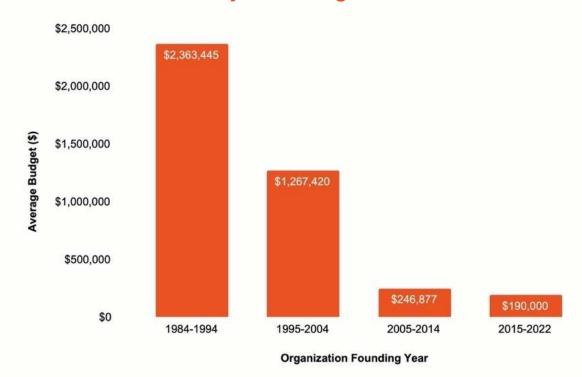


Figure 5: Average Organization Budget Size by Geographic Region

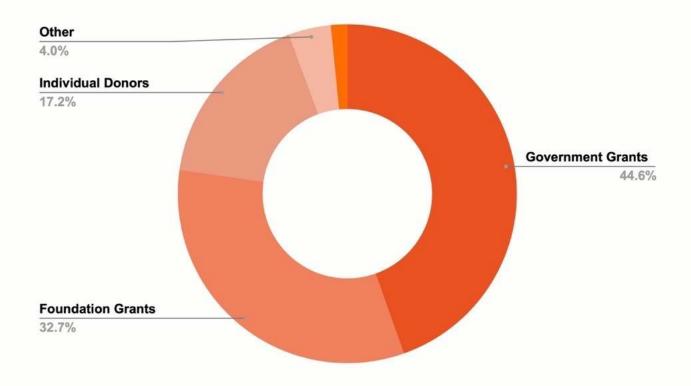


# Government grants (45%) are the primary source of funding for South Asian GBV organizations, followed by funding from private foundations grants (33%) and individual donors (17%).

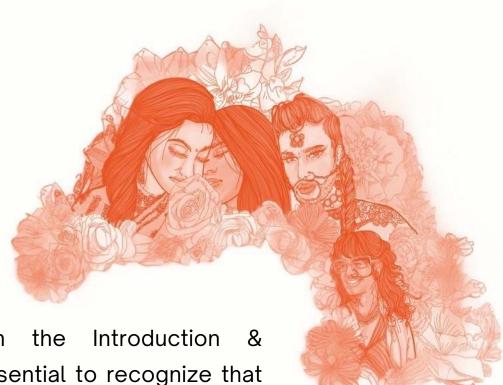
In recent times, there have been encouraging signs of federal funding growth for culturally-specific GBV organizations. An example of this is the recent allocation of \$13.2 million to support AAPI organizations through the U.S. Department of Health and Human Services' (HHS) American Rescue Plan in 2021.<sup>14</sup> This increased funding demonstrates a growing recognition of the importance of funding culturally-specific programs and services. However, while government funding is essential, an over-reliance on it as the primary financial source for South Asian GBV organizations presents potential challenges.

These include vulnerability to political and economic shifts, bureaucratic hurdles, burdensome requirements, and limitations on their ability to advocate independently. Ultimately, these constraints limit organizations' ability to grow and flexibility to address specific community needs effectively. To ensure long-term sustainability, diversification of funding sources is paramount, particularly from South Asian individuals and foundations who can make significant contributions to bolster GBV organizations.

Figure 6: Sources of Funding for South Asian GBV Organizations



### Client Demographics

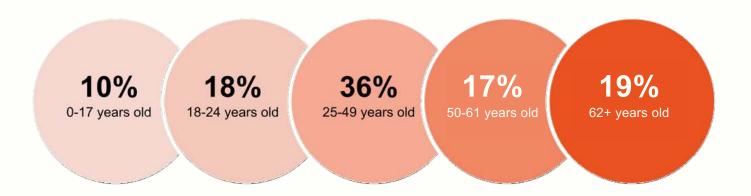


in emphasized As Background, it is essential to recognize that the South Asian diaspora is exceptionally diverse, with experiences and disparities spanning across gender, sexuality, caste, ethnicity, religion, immigration status. economic circumstances, and more. The presented data underscores this extensive diversity among South Asian survivors served by South Asian GBV organizations, prompting a crucial reflection on the range of services meet their distinct needs. required to Moreover, the data raises the important question of what additional information we may require about this fast-growing diasporic population and their unmet needs.

### The largest number of survivors served by South Asian GBV organizations are between the ages of 25 and 49 years old (36%).

Collectively, the South Asian GBV organizations serve survivors spanning various age brackets: 10% of clients fall within the 0-17 age group, 18% in the 18-24 range, 36% between 25-49, 17% between 50-61, and 19% are aged 62 and above. While this breakdown provides valuable insights, its interpretation remains open to multiple perspectives. Our *Together We Rise* report underscored that within the realm of marginalized and underserved South Asian survivors, two distinct groups stand out: youth and elders. Hence, while these data aid in comprehending the demographics of those currently receiving assistance, it's important to note that they do not directly depict the prevalence of violence across age groups. Rather than serving as a definitive representation, this data prompts us to contemplate which survivors might be beyond our current reach and support and need our additional outreach, services, and advocacy.

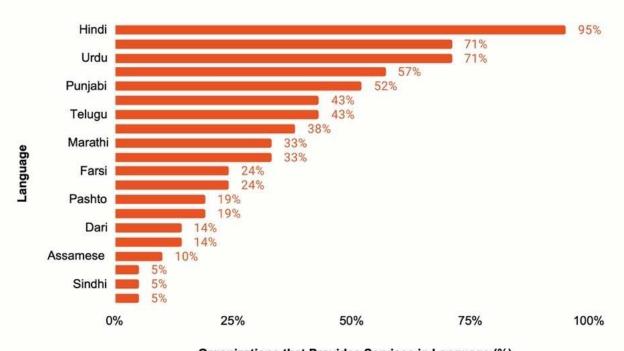
Figure 7: Age Groups of Survivors Receiving Services by South Asian GBV Organizations



### South Asian GBV organizations are able to provide services in up to 20 South Asian languages.

Our data revealed a collective readiness among South Asian GBV organizations to accommodate a diverse linguistic landscape. A spectrum of 20 South Asian languages, including but not limited to Hindi, Tamil, Nepali, Sylheti, and Sinhala, emerged as languages within which services could be provided. This remarkable linguistic diversity is a reflection of the extensive diversity of the South Asian community. *Together We Rise* highlighted the critical significance of addressing the unique imperative for language access and justice for South Asian survivors. Despite the presence of frontline staff encompassing a range of spoken languages, the absence of proper language access continues to be a significant systemic barrier for survivors to access resources, assistance, and justice.

Figure 8: Language Service Capacity Across South Asian GBV Organizations



Organizations that Provides Services in Language (%)

### South Asian GBV organizations serve clients who have 8 different religious backgrounds and come from more than 10 different countries of origin.

This significant diversity, across religion and country of origin, among the survivors served by South Asian GBV organizations highlights the need for culturally-tailored and inclusive services that can effectively address the multifaceted needs of South Asian survivors within this expansive diaspora. While acknowledging this diversity, it's equally important to note which groups may not be as well represented among the clientele of South Asian GBV organizations. Identifying underrepresented groups can help guide additional efforts to reach and support them effectively. As noted in Together We Rise, recent years have also seen the growth of South Asian GBV organizations whose programmatic focus is on a certain ethnic, linguistic, or religious subset of South Asians.

Figure 9: Clients' Religious Backgrounds, on Average per Organization

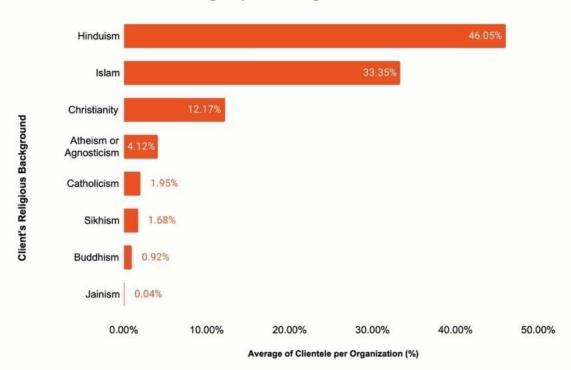
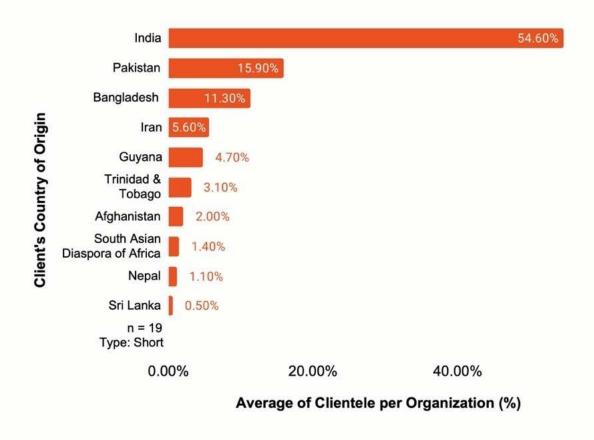


Figure 10: Client's Countries of Origin, on Average per Organization



# South Asian GBV organizations primarily serve women and heterosexual survivors, suggesting the likely underrepresentation of LGBTQIA+ and male survivors.

The data illuminates the undeniable diversity among South Asian survivors receiving support from GBV organizations, spanning diverse gender identities and sexual orientations. However, in alignment with findings from the *Together We Rise* report, it becomes apparent that LGBTQIA+ and male survivors are distinct segments within South Asian communities facing pronounced marginalization and insufficient attention.

The relatively low numbers of LGBTQIA+ and male survivors served by our organizations suggest that they remain underserved. Notably, queer survivors experience sexual assault at double the rates of cisgender, heterosexual survivors. It's important to recognize that the stigma surrounding help-seeking behaviors within certain populations may contribute to these low numbers. Moreover, the pervasive fear of discrimination or harm within these communities may prevent individuals from seeking help. Addressing the needs of these survivors in a safe and inclusive environment remains an essential and ongoing endeavor that demands substantial investment and commitment.

Figure 11: Gender Identities of Clients, on Average per Organization

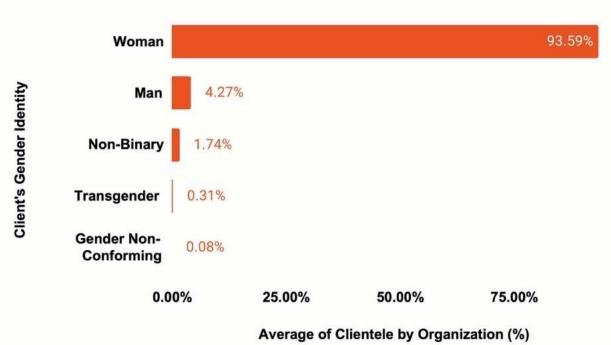
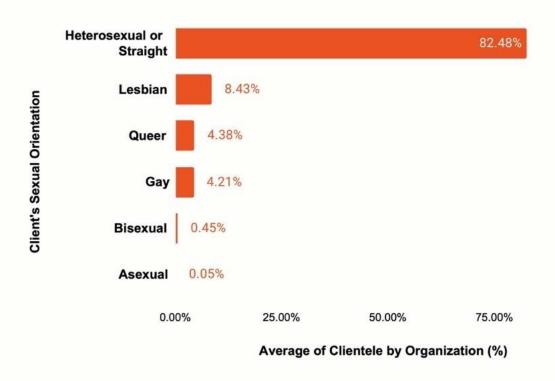


Figure 12: Sexual Orientations of Clients, on Average per Organization

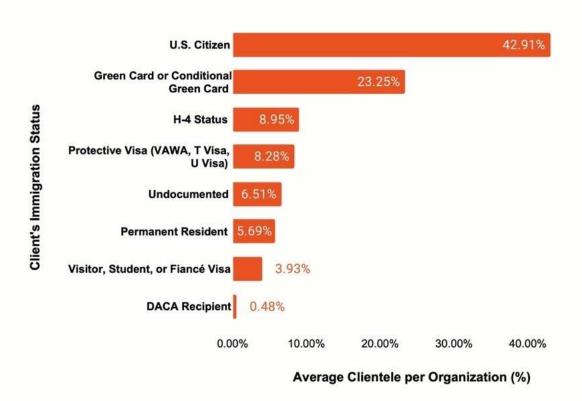


Less than half of the survivors served by each South Asian GBV organization are U.S. Citizens, and the remaining hold several different immigration statuses including H-4 Status, Permanent Resident, Undocumented, and more.

Collectively, just above 40% of the survivors supported by South Asian GBV organizations possess U.S. citizenship, with the remaining 23% holding a Green Card, 9% holding an H-4 status, 8% on a Protective Visa, 7% being Undocumented, 6% holding a Permanent Resident status, 4% on a Temporary Visa (Visitor, Student, or Fiance Visas), and 0.5% being DACA recipients.

Two organizations also mentioned that many of their clients are refugees or asylum seekers. As highlighted in *Together We Rise*, immigration status serves as a significant barrier, often exploited by abusers to exert control over survivors and prevent them from leaving abusive relationships. Within the realm of South Asian GBV organizations, this issue is particularly poignant due to their substantial immigrant clientele. For instance, as much as 90% of those supported by Sakhi for South Asian Women are immigrants. While federal legislation has made strides by incorporating tailored protections for immigrant survivors, the practical reality remains that legal recourse remains fraught with challenges, leaving survivors in urgent and unending need of extensive legal services and support.

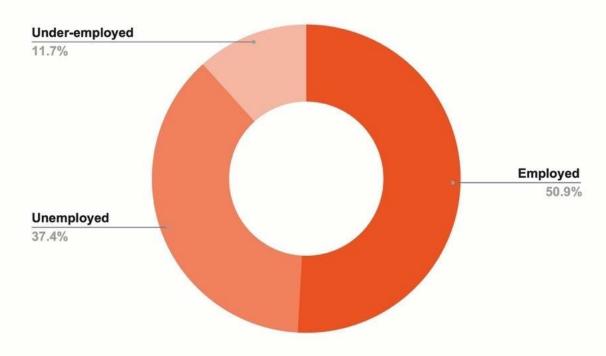
Figure 13: Immigration Statuses of Clients, on Average per Organization



### Almost 50% of the survivors served by South Asian GBV organizations are unemployed or under-employed, lacking access to sufficient salaries and benefits needed to establish financial stability.

Among survivors served by South Asian GBV organizations, 50% contend with unemployment or underemployment, meaning that they do not have a sufficient salary to meet their living costs or do not have a job that matches their qualifications, while the remaining half are employed. The impact of experiencing GBV on survivors' finances are profound, often thrusting them into the chasm of poverty and economic instability. Further research underscores that survivors' financial vulnerabilities are significantly shaped by economic abuse, a factor present in 99% of all Intimate Partner Violence (IPV) cases, which was further exacerbated during the COVID-19 pandemic.<sup>17</sup>

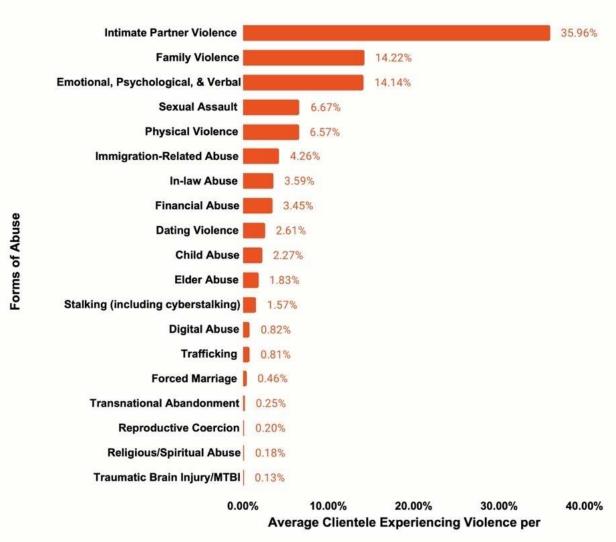
Figure 14: Employment Statuses of Clients, on Average per Organization



### South Asian survivors reported experiencing over 15 forms of gender-based violence and abuse.

GBV manifests in diverse forms, as illustrated by the following data showcasing the range of violence endured by South Asian survivors. While this list is not comprehensive and many forms of violence overlap, it serves as an indicator of the intricate and distinctive nature of each GBV experience, highlighting the varied services South Asian survivors require on their path to healing, safety, and justice.

Figure 15: Forms of Abuse Experienced by Clients, on Average per Organization



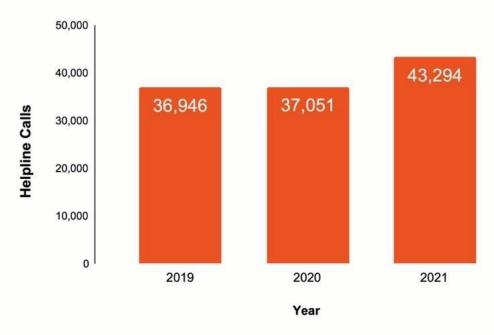
## Call & Client Volume

# Between 2020 and 2021, helpline calls to South Asian GBV organizations rose more than 15%. Between 2020 and 2021, the number of survivors served by South Asian GBV organizations nearly doubled.

In the tumultuous year of 2020, as the world grappled with the widespread COVID-19 pandemic, a shadow pandemic of GBV was quietly growing. The escalating trajectory of helpline calls between 2021 and 2020 mirrors a broader national pattern—GBV was on a distressing upsurge, and survivors were grappling with barriers to accessing essential aid and services brought about by the global lockdowns, resulting in a marked increase in helpline calls and client volume in 2021.

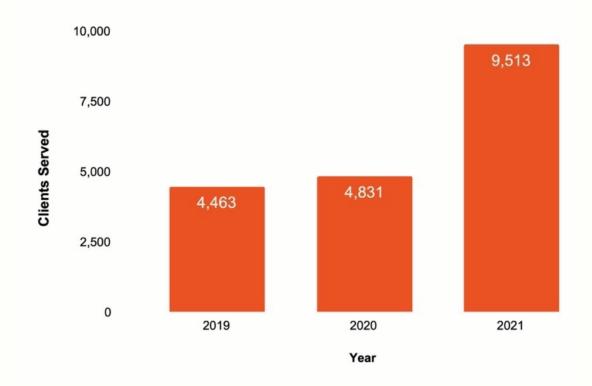
### Figure 16: Cumulative Helpline Calls 2019 - 2021

Helpline calls to South Asian GBV organizations include requests for help via Internet-based channels (e.g., email, social media, website), referrals from partner organizations, and phone-based inquiries.



### Figure 17: Cumulative Client Volume 2019 - 2021

The total client volume for South Asian GBV organizations always includes the "primary" survivor, or the individual(s) who directly experienced GBV, and sometimes includes "secondary" survivors, or those who might have been directly or indirectly impacted by the violence. For example, a mother who experienced physical abuse might be a primary survivor, while her child might be a secondary survivor.



# Programs & Services for Survivors

South Asian GBV organizations provide a wide range of assistance to survivors, encompassing over 50 different forms of support, including counseling, housing, transportation, employment assistance, legal support, and more.



Serving as sanctuaries for South Asian survivors and equipped with specialized proficiency in culturally tailored services, South Asian GBV organizations extend a wide spectrum of assistance and support. The following data illustrate the array of services offered directly, through referrals or partnerships, or not provided at all by South Asian GBV organizations. Their offerings encompass diverse areas such as counseling and case management, legal aid, financial support and empowerment, as well as community outreach and education, reflecting their remarkable and comprehensive commitment to addressing survivors' needs and ending GBV.

While we do not go into great detail about the data and services described below, we briefly share the purpose of the category of services to provide a better understanding of why survivors require these services. Overall, the complexity of this data has prompted the dialogue and need for more indepth exploration of the programs and services available, as well as those that are currently inaccessible, to South Asian survivors.

### Figure 18: Case Management & Safety Assistance Services

Case management and safety assistance services are required to ensure survivors' immediate safety, navigate complex reporting procedures, access crucial resources, and arrange for safety in the face of harm.

A crucial initial point of contact for survivors and South Asian GBV organizations are help lines, which are one of the top services provided. Currently, 35% of organizations operate their helpline during their business hours, 27% operate their helpline 24/7, and 8% have no helpline.

	Provide In-house (%)	Refer or Partner (%)	Do not Provide (%)
Crisis or Help Line (via Phone)	83%	9%	9%
Crisis or Help Line (via Text)	62%	10%	29%
Adult Protective Services (APS) Reports and Navigation	33%	33%	33%
Child Protective Services (CPS) Reports and Navigation	33%	48%	19%
Domestic Violence Response Team (DVRT) and/or Sexual Assault Response Team (SART)	11%	61%	28%
Referrals	69%	31%	0%
Safety Planning	86%	0%	14%

### Figure 19: Counseling & Mental Health Services

Counseling and mental health services are critical for survivors as they provide vital emotional support and tools for coping with trauma, anxiety, depression, and other short and long-term mental health challenges resulting from their experiences with GBV.

These services empower survivors to heal and rebuild their lives by addressing the emotional and psychological impact of the violence they have endured.

	Provide In-house (%)	Refer or Partner (%)	Do not Provide (%)
Couples Counseling	9%	45%	45%
Family Counseling	18%	41%	41%
Group Counseling or Support Groups	65%	30%	4%
Individual Counseling	65%	30%	4%
Mental Health Contracting/Reimbursement	33%	33%	33%
Parenting Support	46%	38%	17%
Restorative Justice Practices	25%	33%	42%
Services for Harm-Doers	13%	35%	52%
Transformative Justice Practices	27%	27%	45%

### Figure 20: Legal Services

Legal services are one of the most important services for South Asian survivors because they help survivors navigate complex legal systems, obtain restraining orders, and attempt to seek justice against abusers, providing a potential pathway to safety and accountability. Additionally, legal support can address immigration-related issues, such as obtaining visas or asylum, which is particularly vital for survivors facing immigration-related abuse.

	Provide In-house (%)	Refer or Partner (%)	Do not Provide (%)
Court Accompaniment	65%	22%	13%
Filing Assistance for Crime Victims' Compensation	67%	14%	19%
Filing Assistance for Orders of Protection	57%	35%	9%
Immigration Support (VAWA, U-Visa, T-Visa, or Citizenship)	42%	54%	4%
Legal Representation for Divorce, Custody	21%	67%	13%
Liaising between Client & Law Enforcement	52%	36%	12%
Navigation Support (Rights Education, Legal Terms)	56%	36%	8%
Preparing Clients for Hearings	48%	40%	12%
Restorative or Transformative Justice	18%	36%	45%
Technical Assistance & Training for Law Enforcement	42%	29%	29%
Testifying	33%	42%	25%

### Figure 21: Economic Empowerment or Employment Services

Economic empowerment and employment services are essential for financial independence and stability, reducing survivors' reliance on abusers and facilitating their ability to leave abusive relationships. These services offer survivors the opportunity to secure employment, acquire job skills, and access financial resources, empowering them to build a future free from violence and economic abuse.

	Provide In-house (%)	Refer or Partner (%)	Do not Provide (%)
Academic Support (i.e. tutoring, applications)	46%	38%	17%
Budgeting Support	42%	42%	17%
Entrepreneurship Support (i.e. budgets, loans)	33%	48%	19%
Direct Financial Assistance for Education	50%	32%	18%
Direct Job Placement	22%	61%	17%
Financial Literacy Courses	46%	46%	8%
Job Search & Mentorship Assistance	46%	38%	15%
Resume & Interview Assistance	48%	41%	11%
<b>Networking Support and Opportunities</b>	38%	50%	13%
Supportive Services for Employment (i.e. childcare, transportation)	52%	33%	15%

### Figure 22: Food Assistance Services

Food assistance services alleviate a basic need, allowing survivors to focus on their safety and recovery without the added stress of food insecurity, or supporting them on an ongoing basis through their healing and rehabilitation.

	Provide In-house (%)	Refer or Partner (%)	Do not Provide (%)
Food Bank	15%	70%	15%
Gift Cards or Cash	80%	5%	15%
Grocery Donations	75%	15%	10%
Meals	38%	40%	25%
Meal Deliveries	30%	50%	30%

### Figure 23: Housing Services

Housing services are life-saving support that offer safe and stable accommodations, allowing survivors to escape abusive environments and find a secure place to rebuild their lives. These services offer a lifeline to survivors who may otherwise face homelessness, ensuring their safety and helping them regain independence.

	Provide In-house (%)	Refer or Partner (%)	Do not Provide (%)
Direct Rent Assistance	71%	17%	13%
Eviction Notice Response or Support	39%	38%	21%
Housing Benefits Assistance (i.e. Section 8, Vouchers)	35%	46%	17%
Housing Search Assistance (Short & Long-term Housing)	59%	42%	8%
Landlord Intervention Support	52%	25%	21%
Shelter	17%	58%	21%
Transitional Housing	32%	50%	13%
Utility Payments	59%	33%	13%

### Figure 24: Transportation Services

Transportation services provide the means for survivors to access critical resources, such as shelters, legal assistance, and counseling, without being dependent on their abusers for transportation. These services empower survivors with mobility, ultimately promoting their safety and independence.

	Provide In-house (%)	Refer or Partner (%)	Do not Provide (%)
Car Repairs	10%	33%	57%
Car Donations	11%	32%	58%
Gift Cards or Cash	77%	9%	14%
Public Transportation Tickets or Passes	73%	14%	14%
Rides (including from Volunteers, Staff, or Board)	76%	5%	19%
Rideshares	52%	14%	33%

### Figure 25: Financial & Benefits Services

Financial assistance is paramount for South Asian survivors of gender-based violence as they provide the resources needed to regain financial independence. These services offer a lifeline for survivors to access financial support, public benefits, and build financial literacy and security.

	Provide In-house (%)	Refer or Partner (%)	Do not Provide (%)
Direct Financial Assistance (including cash or gift cards)	77%	14%	9%
Disability Benefits Application Assistance	52%	27%	18%
Medicaid Application Assistance	52%	32%	14%
TANF or SNAP Application Assistance	61%	32%	9%

# Additional Programs & Services

In addition to providing direct services to survivors, South Asian GBV organizations often serve as a hub for their broader community, doing Community Outreach & Education, Advocacy, Research, Training & Consulting, and more.

Figure 26: Additional Programs & Services Offered by South Asian GBV Organizations

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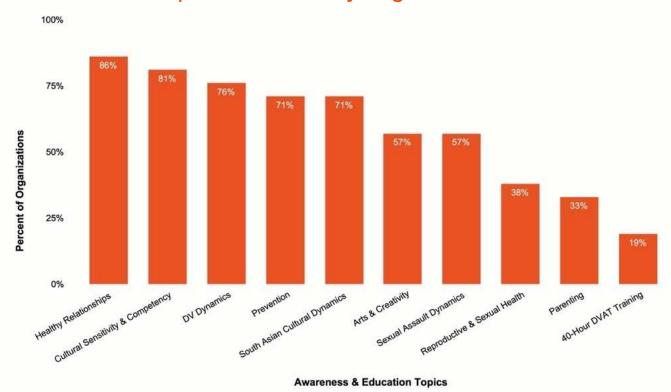


**Additional Programs & Services** 

Though advocacy was not explicitly defined in the survey, advocacy activities can range from public awareness campaigns to grassroots organizing, policy advocacy, and more.

In 2021, South Asian GBV organizations held a total of 1,275 community education and awareness events, reaching over 1 million people, on a variety of topics including healthy relationships, domestic violence, sexual assault, and cultural sensitivity and competency.

Figure 27: Community Awareness and Education Topics Provided by Organizations



Primarily, South Asian GBV organizations reach and engage their communities through social media (100%) and in-person events (95%), followed by online communication (86%) such as a newsletter or blogs.

## Impact of COVID-19

### The COVID-19 pandemic will have a lasting impact on South Asian GBV organizations, and especially their staff wellness, client needs, and community engagement.

Though this report does not contain quantitative data on the impact of the COVID-19 pandemic on South Asian GBV organizations, these quotes provide insight into the diverse yet meaningful consequences experienced by these organizations, with both positive and negative aspects. Crucially, the enduring effects of the pandemic continue to influence funding, client volume, and community needs.



"COVID has allowed us to become clearer on the role we play for our community during moments of crisis. We deepened into providing mutual aid like food support and financial assistance."

"We have been witnessing a significant Increase in meals and grocery requests, domestic & sexual violence cases, virtual socialization hours, support groups, and mental health care access."

"While our budgets and client base grew during **COVID, COVID-related** emergency funding is no longer here and yet we have grown the number of people we serve. So the pandemic created a larger demand for our work, funders tried to meet it, and then they disappeared."

"Being able to pivot to virtual services has been both good and bad for our organization. [It's] good because clients are able to easily access our services, but bad because sometimes staff morale suffers."

"We switched our efforts to social media and email campaigns to continue donor engagement and retention, but [it was] not as effective as inperson events."

### Conclusion & Recommendations

Our inaugural *State of the Field* survey and report underscore the unequivocal importance of investing in under-resourced community-based organizations that serve South Asian survivors of gender-based violence. These organizations play a pivotal role in addressing the distressingly high prevalence of GBV within the diverse South Asian diaspora in the U.S., where survivors grapple with significant challenges and disparities linked to their intersectional identities and backgrounds.

Over four decades, more than 40 culturally-specific organizations have emerged to offer essential services, outreach, advocacy, research, and education to South Asian survivors and communities. These organizations are foundational to survivor safety, healing, and recovery, forming the bedrock of the South Asian anti-GBV movement. However, they often operate with limited budgets and staff sizes, leading to high turnover and burnout across the field.

Recognizing these limitations, this report identifies immediate areas for programmatic investment. While South Asian GBV organizations effectively serve specific demographic groups, including ethnically Indian clients, women, heterosexual individuals, and those aged 24 to 49, there is a noticeable gap in serving marginalized groups, such as the LGBTQ+ community, younger survivors, and men. The data also surfaces the imminent need for increased legal, housing, mental health, economic empowerment, and employment services.

To enhance future data collection and analysis efforts, South Asian GBV organizations would benefit from standardizing data collection procedures, including client demographic indicators, client volume metrics, and streamlined intake forms. Such measures will enable accurate assessments of the organizations' operations and impact. Comprehensive information about these organizations can help secure additional funding and bolster the narratives of the survivor and gender justice movements.

### Recommendations

We cannot afford to let these organizations continue to operate in a perpetual state of underfunding. Effectively supporting survivors and addressing disparities requires urgent investment in South Asian GBV organizations. Unrestricted, trust-based funding from individuals, private foundations, and local, state, and federal governments will enable them to scale up organizational capacity, expand services to provide culturally-tailored support to survivors of diverse and marginalized backgrounds, and continue advocacy and education efforts in their communities.

In light of President Biden's National Plan to End Gender-Based Violence, we call for close collaboration between the administration and community-based organizations during plan implementation. These local partnerships are essential for understanding and addressing community needs and tracking the plan's impact. Additionally, we advocate for support of intersectional legislation like the HEAL and WISE Acts, which address the unique needs of immigrant survivors.

Our collective commitment to ending gender-based violence within the South Asian diaspora demands that we prioritize these community-based organizations with unwavering support. This isn't just about funding; it's about investing in the safety, healing, and joy of survivors. It's about dismantling systemic barriers, challenging harmful cultural norms, and creating a more equitable and just society.

Together, we can ensure that South Asian GBV survivors and organizations have the means to lead us toward a future free from gender-based violence.



### **About South Asian SOAR**

South Asian SOAR is a national collective of survivors, 35+ organizations, and allies advancing the movement to end gender-based violence in the South Asian diaspora. Our mission is to grow survivor and collective power to transform the culture and conditions that lead to violence. Our vision is joy, healing, and justice for all South Asian survivors and communities.

### We build collective power

We provide forums and programs for survivors and allies to build community and leadership so that they are at the forefront of cultural and systemic change.

### We strengthen the field

We convene a network of 35+ direct-service and advocacy organizations and individuals that serve South Asian survivors to evolve the sector of anti-violence work.

### We shift the narrative

We publish data, community-based research, and stories to generate knowledge, awareness, and dialogue about gender-based violence in the South Asian diaspora.

www.southasiansoar.org hello@southasiansoar.org @SouthAsianSOAR









### South Asian GBV Organizations in the US

To the best of our knowledge, there are no South Asian GBV Organizations that are located in the following states: Alaska, Arkansas, Colorado, Delaware, Hawaii, Idaho, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Mexico, North Dakota, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Utah, Vermont, West Virginia, Wisconsin, or Wyoming.

If you know of any organizations, please email hello@southasiansoar.org.

### <u>Alabama</u>

### **AshaKiran**

Website: ashakiranonline.org

City: Huntsville, AL

### **Arizona**

### Arizona South Asians for Safe Families (ASAFSF)

Website: asafsf.org City: Scottsdale, AZ

### **California**

### Maitri

Website: maitri.org City: Santa Clara, CA

### Narika

Website: narika.org City: Fremont, CA

### North American Islamic Shelter for the Abused (NISA)

Website: asknisa.org City: Fremont, CA

### Saahas for Cause

Website: saahasforcause.org

City: Cerritos, CA

### Sahara

Website: saharacares.org

City: Artesia, CA

### South Asian Network (SAN)

Website: southasiannetwork.org

City: Artesia, CA

### **Connecticut**

### Sneha

Website: sneha.org City: West Hartford, CT

### **Florida**

### Shakthi US

Website: shakthius.org

City: Orlando, FL

### **Georgia**

### Raksha

Website: raksha.org City: Atlanta, GA

### **Noor Family Services**

Website: noorfamilyservices.org

City: Suwanee, GA

### **Illinois**

### **Apna Ghar**

Website: apnaghar.org

City: Chicago, IL

### Maryland/Viringia/ Washington D.C.

### Ashiyanaa (formerly ASHA for Women)

Website: ashiyanaa.org City: Bethesda, MD

### Asian/Pacific Islander Domestic Violence Resource Project (DVRP)

Website: dvrp.org City: Washington D.C.

### **Massachusetts**

### Saheli Inc.

Website: saheliboston.org

City: Burlington, MA

### <u>Michigan</u>

### **Mai Family Services**

Website: maifs.org City: Livonia, MI

### **Minnesota**

### SEWA-AIFW (Asian Indian Family Wellness)

Website: sewa-aifw.org City: Brooklyn Center, MN

### **New Jersey**

### Manavi

Website: manavi.org City: New Brunswick, NJ

### Wafa House

Website: wafahouse.org

City: Clifton, NJ

### **New York**

### **Domestic Harmony Foundation**

Website: www.dhfny.org

City: Hicksville, NY

### Jahajee Sisters

Website: jahajeesisters.org

City: New York, NY

### Laal NYC

Website: laalnyc.org

City: Bronx, NY

### Sakhi for South Asian Women

Website: sakhi.org City: New York, NY

### **Sanctuary for Families**

Website: sanctuaryforfamilies.org

City: New York, NY

### Sapna NYC

Website: sapnanyc.org City: New York, NY

### **South Queens Women's March**

Website: southqueenswomensmarch.org

City: Queens, NY

### Saathi

Website: saathiofrochester.org

City: East Rochester, NY

### **Turning Point for Women & Families**

Website: tpny.org City: Flushing, NY

### **North Carolina**

Kiran, Inc.

Website: kiraninc.org City: Raleigh, NC

### Ohio

Asha Ray of Hope

Website: asharayofhope.org

City: Columbus, OH

### **Texas**

**Asians Against Domestic Abuse** 

Website: aadainc.org City: Houston, TX

Asian Family Support Services of Austin (AFSSA)

Website: afssaustin.org

City: Austin, TX

Awaaz

Website: awaazsa.org City: San Antonio, TX

Chetna

Website: chetna-dfw.org

City: Dallas-Fort Worth area, TX

**Daya Houston** 

Website: dayahouston.org

City: Houston, TX

**Texas Muslim's Womens Foundation** 

Website: tmwf.org City: Plano, TX

### **Washington**

**API Chaya** 

Website: apichaya.org City: Seattle, WA

### **National**

Asian Pacific Institute on Gender Based Violence (API-GBV)

Website: api-gbv.org City: Oakland, CA

Sahiyo

Website: sahiyo.org City: Burlington, MA

Sikh Family Center

Website: sikhfamilycenter.org

City: National

**South Asian SOAR** 

Website: southasiansoar.org

City: National

Malikah

Website: malikah.org

City: National

## Appendix A: Additional Report Methodology

### Overview

The State of the Field survey and report are designed to bridge the existing gap in quantitative data, offering insights into the demographics, challenges, and needs of South Asian GBV organizations and the survivors they serve in the United States. The aim of this appendix is to further elaborate on the methodology deployed for the "State of the Field" survey, ensuring transparency and a deeper understanding of the current landscape of client demand, service uptake, and organizational capacity. This section offers a meticulous examination of the survey design, question types, and calculation processes, allowing a more robust grasp on the narrative presented in the main report. The collective insights gathered, supplemented by the methodological clarity provided herein, aim to contribute to the ongoing advocacy for essential support and funding needed to meet the needs of South Asian survivors.

In presenting this report, we underscore the fundamental premise that data, in all its quantitative precision, can never fully encapsulate the tireless work being done to prevent and respond to GBV within the South Asian community. The diverse and multifaceted lived experiences of individuals and organizations in this defy complete representation in numerical form. context Moreover, categorization within the survey, while aimed at inclusivity and comprehensive coverage, may not perfectly align with the varied and unique services or attributes of all organizations. There is an inherent limitation in the use of predetermined categories, and we are mindful that some nuances may be lost in this format. Nevertheless, the systematic collection and analysis of data hold indispensable value in our ongoing efforts. While imperfect, data serves as a potent tool that sheds light on areas of strength within organizations and unveils critical opportunities for growth and enhancement. It aids in identifying patterns, assessing needs, and charting the course for informed, impactful action. By sharing this data, we hope to augment the collective understanding and contribute to the evolution of the movement against GBV.

### Survey Design

In response to the identified challenges faced by South Asian GBV organizations in data gathering and reporting, SOAR developed the *State of the Field* survey. This comprehensive questionnaire was formulated with a dual purpose: to collect robust, actionable data and to facilitate ease of completion for the participating organizations.

### **Structure and Categories**

The survey is structured with 51 meticulously designed questions, grouped into seven distinct categories to ensure clarity and organization. The categories include:

- 1. Organization Questions: This section gathers vital information about the participating organizations, offering insights into their year of establishment, catchment area, and mission.
- 2. Call & Client Volume: This category focuses on quantifying the volume of calls and clients handled by the organizations, offering an assessment of the demand for GBV-related assistance.
- 3. Client Demographics: Detailed demographic information is collected in this section, aiding in the identification of the specific communities and groups being served.
- 4. Direct Services: This section delves into the various direct services offered by the organizations, from counseling to legal aid, providing a comprehensive overview of the support available to survivors.
- 5. Additional Programs & Services: Beyond direct services, this category explores other programs and services offered, illuminating the multifaceted approach taken to address GBV within South Asian communities.
- 6. Impact of COVID-19: The survey examines the specific impact of the COVID-19 pandemic on both the organizations and the survivors they serve, uncovering challenges and adaptations made during this unprecedented time.
- 7. Organizational Questions: Queries regarding funding are addressed in this final section, further enriching the dataset.

### **Question Types & Analysis Method**

### **Short Free-Text Response**

Several questions sought a short response. For example:

In what state is your organization located?

Response #1: New York

Response #2: NY

These responses were refined to correct for spelling, case differences, and abbreviations.

For quantitative questions requiring a numeric answer, a more systematic method of data cleaning was employed: For example:

In 2021, how many helpline calls that your GBV/DV program received? If you don't know the exact number, please share the approximate number of calls.

Response #1: 100

Response #2: Approximately 250

Response #3: 100-200

Recoded #1: 100 Recoded #2: 250 Recoded #3: 150

Sum: [100] + [250] + [150] = 500

Percent: [100] / 500 = 20%

The combination of text, numeric ranges, and approximations necessitated a specialized data cleaning process. Responses lacking numerical information were marked as NaN (Not a Number). All numbers were standardized to a consistent format, and when responses provided a range, the midpoint was calculated for analysis. For instance, a response of 100-200 was recorded as 150. Upon completion of the cleaning process, the data were analyzed using standard summary statistics like sums, averages, and quartiles. Where appropriate, text responses were converted to categorical variables, and respective counts were tabulated.

### **Limitations of Numeric Responses**

For questions seeking quantitative data on organizational aspects such as the hotline calls received, number of clients served, maximum length of offered service, community events held, and financial figures like annual budget, a notable variability in responses was observed. Broad ranges in responses (10 versus 1000) indicate that summary statistics such as sums, averages, and quartiles are likely influenced by larger organizations, potentially skewing the results. It is important for readers and stakeholders to consider this aspect while interpreting the data and findings from these questions. The impact of larger organizations was noticeably substantial in specific questions: client's country of origin, immigration statuses, and annual budget in 2021.

To address this, a distinct analytical method was implemented for questions about clients' countries of origin and immigration statuses. Instead of aggregating data across all organizations, the analysis was conducted by normalizing the data within each organization based on its size. Specifically, the proportion of each category within each organization was calculated and then averaged across all organizations. This method ensures that each organization, irrespective of its size, has an equal contribution to the overall average, preventing larger organizations from disproportionately influencing the results. For instance, rather than asserting "90% of clients from all organizations are from India," the analysis concludes, "On average, 50% of clients within each organization are from India." This technique significantly limits the sway of larger organizations on the final data, presenting a more balanced and fair insight into the clients' country of origin and immigration statuses across all organizations.

A cross-tabulation of annual budget data with the year of each organization's establishment was used to enhance the depth of the results. This analytical approach showed that older organizations generally commanded larger budgets.

### Long Free-Text Response

Two questions in the survey asked for a longer response from respondents.

First, we asked for the mission statement of each participating organization. Each encapsulated the goals and values of each organization. In order to maintain the integrity and original expression of these statements, a straightforward text frequency analysis was conducted instead of a more detailed breakdown. This approach was chosen to identify the most commonly used words and phrases in the mission statements, providing an overview of the shared priorities and focus areas among the participating organizations. We hope this approach provides an understanding of the collective emphasis of these organizations in a manner that respects and preserves the unique expression of each entity's mission.

Second, we asked about the short and long-term impacts of COVID-19. To understand the collective impact, each response was carefully read to comprehend the experiences of these organizations. Responses were then compiled into different categories to identify common themes and shared challenges. The most frequently reported impacts were: Organizational Change, Changes in Client Needs, Engagement, Challenges with Capacity or Resources, and both Increased Demand or Client Volume and Staff Burnout. This categorization helps in giving a clear and concise view of the major areas affected by the pandemic within these organizations, and aids in identifying where more support and resources might be needed in the future.

### Multiple Select

A significant portion of the survey was dedicated to understanding the range of services offered to South Asian survivors of GBV. In section four, Direct Services, most questions allowed for multiple selections. Questions were analyzed using two methods:

1. Average selection rate, which provides the percent of organizations (respondents) that selected a specific category

To what age groups do you provide counseling?

	Children (0-11 years)	Teens (12-17 years)	Young adults (18-30 years)	Adults (31-64 years)	Seniors (65+ years)	Other (please specify)
Response #1	x			×	X	
Response #2	x	Х				
Calculation(2 is the total number of respondents)	2/2 = 100%	1/2 = 50%	0/2 = 0%	1/2 = 50%	1/2 = 50%	

2. Proportional selection rate, which provides information about a category's popularity relative to other categories in terms of selections made. It tells you the proportion of total selections that each category represents.

To what age groups do you provide counseling?

	We offer this in- house	We refer or partner for this	We do not provide this
Academic support	5	3	0
Calculation (7 is the total number of selections)	5/7 = 62.5%	3/8 = 37.5%	0/8 = 0%

Here, the results indicate that offering in-house academic support is more common than referring or partnering. This method provides for more accurate comparison across service categories as it corrects for different numbers of respondents for each category.

This format enabled respondents to comprehensively detail the array of services their organizations provide, whether in-house, referred, or not provided at all. To maintain uniformity, all service-related questions utilized a consistent three-point scale. For enhanced clarity and precision in responses, questions were organized into distinct categories: case management & safety assistance, counseling & mental health, legal, economic empowerment or employment, housing, transportation, food assistance, and financial benefits and assistance. Despite their utility in capturing a broad spectrum of services, multi-select questions inherently bear limitations. They may potentially lead to ambiguous or overlapping responses, as respondents might select all applicable options without hierarchical distinction, making it challenging to discern the prioritization or significance of each selected service. It's crucial to approach the analysis of these questions with an awareness of these limitations, ensuring a balanced and thoughtful interpretation of the findings.

## Appendix B: Survey Questions & Tables

### Figure 2 - Question & Table

In what state is your organization located?			
Years	Frequency	Percent	
New York	6	23.10%	
Texas	6	23.10%	
California	5	19.20%	
Washington DC	2	7.70%	
Massachusetts	2	7.70%	
Minnesota	1	3.80%	
Georgia	1	3.80%	
Illinois	1	3.80%	
North Carolina	1	3.80%	
Virginia	1	3.80%	
Washington	1	3.80%	
n = 26			

n = 26

Type: Short free response

Method: Sums and proportions were computed.

### Figure 3 - Question & Table

What is your organization's mission statement?			
Keyword	Count		
South-Asian	28		
community	26		
violence	23		
women	15		
services	13		
survivors	11		
culturally	10		
empower	9		
domestic	8		
gender	7		
end	7		
support	7		
education	7		
advocacy	7		
rights	6		
immigrant	6		
organization	5		
family	5		
promote	5		
outreach	4		

n = 26

Type: Long response free text

Method: Stop words (i.e., it, not, who) were removed. A word frequency analysis was conducted where similar or connected words were collapsed. For example, 'South' and 'Asian' were combined as 'South-Asian' and 'communities' was combined with 'community'.

### Figure 9 - Question & Table

In 2021, how many clients belonged to or believed in the following religions?	
Religion	Average Portion of Clients
Hinduism	46.05%
Islam	33.35%
Christianity	12.17%
Atheism or Agnosticism	4.12%
Catholicism	1.95%
Sikhism	1.68%
Buddhism	0.92%
Jainism	0.04%

n = 21

Type: Short response free text (matrix style)

Method: Responses were cleaned according to methods described in appendix 1. The proportion of respondents that practice each religion within each organization was calculated and then averaged across all organizations.

Note: 13 of the 21 respondents stated they do not collect this information. Therefore, while 21 organizations responded to this question, the results are based on numbers from 8 organizations.

### Figure 10 - Question & Table

In 2021, how many clients originally came from the following countries?	
Country	Average Percent of Clients (%)
India	54.60%
Pakistan	15.90%
Bangladesh	11.30%
Iran	5.60%
Guyana	4.70%
Trinidad & Tobago	3.10%
Afghanistan	2.00%
South Asian Diaspora of Africa	1.40%
Nepal	1.10%
Sri Lanka	0.50%

n = 19

Type: Short response free text (matrix style)

Method: Responses were cleaned according to methods described in appendix 1. The proportion of respondents from each country within each organization was calculated and then averaged across all organizations.

Note: 5 respondents stated they do not collect or have this information

### Figure 11 - Question & Table

In 2021, how many clients identified with the following gender identities?	
Gender Identity	Average Percent
Woman	93.59%
Man	4.27%
Non-Binary	1.74%
Transgender	0.31%
Gender Non-Conforming	0.08%

n = 21

Type: Short response free text (matrix style)

Method: Responses were cleaned according to methods described in appendix 1. The proportion of clients with each gender identity within each organization was calculated and then averaged across all organizations.

Note: 6 out of 21 respondents stated that they do not collect this information.

### Figure 12 - Question & Table

In 2021, how many clients identified with the following sexual orientations?	
Sexual Identity	Average Percent
Heterosexual or Straight	82.48%
Lesbian	8.43%
Queer	4.38%
Gay	4.21%
Bisexual	0.45%
Asexual	0.05%
Pansexual	0.00%

n = 21

Type: Short response free text (matrix style)

Method: Responses were cleaned according to methods described in appendix 1. The proportion of clients with each sexual identity within each organization was calculated and then averaged across all organizations.

Note: 8 out of 21 respondents stated they do not collect this information

### Figure 13 - Question & Table

In 2021, how many clients had the following immigration statuses?	
Immigration Status	Average Portion of Clients
U.S. Citizen	42.91%
Green Card or Conditional Green Card	23.25%
H-4 Status	8.95%
Protective Visa (VAWA, T Visa, U Visa)	8.28%
Undocumented	6.51%
Permanent Resident	5.69%
Visitor, Student, or Fiancé Visa	3.93%
DACA Recipient	0.48%

n = 21

Type: Short response free text (matrix style)

Method: Responses were cleaned according to methods described in appendix 1. The proportion of clients with each immigration status within each organization was calculated and then averaged across all organizations.

Note: 5 out of 21 organizations stated they do not collect this information. 4 out of 21 organizations provided numbers in the other category, but they were not integrated.

### Figure 14 - Question & Table

In 2021, how many clients held the following employment statuses?	
Employment Status	Average Portion of Clients
Employed	50.89%
Unemployed	37.43%
Under-employed	11.68%

n = 20

Type: Short response free text (matrix style)

Method: Responses were cleaned according to methods described in appendix 1. The proportion of clients with each employment status within each organization was calculated and then averaged across all organizations.

Note: 8 out 20 organizations stated they do not collect this information.

### Figure 15 - Question & Table

How many clients indicated experiencing the following types of abuse or violence?		
Type of Violence	Average portion of clients	
Intimate Partner Violence	35.96%	
Family Violence	14.22%	
Emotional, Psychological, & Verbal Abuse	14.14%	
Sexual Assault	6.67%	
Physical Violence	6.57%	
Immigration-Related Abuse	4.26%	
In-law Abuse	3.59%	
Financial Abuse	3.45%	
Dating Violence	2.61%	
Child Abuse	2.27%	
Elder Abuse	1.83%	
Stalking (including cyberstalking)	1.57%	
Digital Abuse	0.82%	
Trafficking	0.81%	
Forced Marriage	0.46%	
Transnational Abandonment	0.25%	
Reproductive Coercion	0.20%	
Religious/Spiritual Abuse	0.18%	
Traumatic Brain Injury/MTBI	0.13%	

IT = 20 Type: Short response free text (matrix style)
Type: Short responses were cleaned according to methods described in appendix 1. The proportion of clients who reported each type of violence within each organization was calculated and then averaged across all organizations.

Note: 16 out of 20 respondents provided an answer for this question. 4 respondents stated they do not collect this information.

### **Additional Question Types**

The following questions follow the multiple select question format and were analyzed using the average selection rate method described in Appendix A.

- Which of the following additional programs or activities does your organization provide or participate in?
- What topics do you provide community awareness and education on?
- What forms of community engagement does your organization use?

The following questions pertaining to service provision follow the multiple selection question format and were analyzed using the proportional selection rate method described in Appendix A.

- In 2021, which of the following Case Management & Safety Assistance services did your organization provide?
- Which of the following Counseling & Mental Health services does your organization provide?
- In 2021, which of the following Legal services did your organization provide?
- In 2021, which of the following Economic Empowerment or Employment services did your organization provide?
- In 2021, which of the following Housing services did your organization provide?
- In 2021, which of the following Food Assistance services did your organization provide?
- In 2021, which of the following Financial & Benefits Assistance services did your organization provide?

### **Endnotes**

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