

1. Resolution in Regard to Public Accommodations and Policies that Target and Deny Rights to Transgender / Gender Non-Conforming Individuals

WHEREAS, oppression is a root cause of sexual violence;

WHEREAS, any law that denies an individual their rights leads to further oppression;

WHEREAS, laws that are designed to deny an individual's rights to use public facilities, such as bathrooms and restrooms that correspond to their gender identity are more likely to put transgender/gender non-conforming individuals at a greater risk of both physical and sexual violence;

WHEREAS, policies that support "bathroom bills" rely on false information that further perpetuates myths surrounding sexual assault;

WHEREAS, 50% of people who died in violent hate crimes against LGBTQ people were transgender women who were also sexually assaulted during the crime; the other half were male, many of whom were gender non-conforming¹;

WHEREAS, 70% of sexual assaults are committed by a perpetrator known or related to the victim, not by a stranger²;

WHEREAS, 84% of sexual victimization of children under age of 12 occurs in a residence³;

WHEREAS, 60 percent of transgender students report having been prohibited from using the bathroom or locker room that aligns with their gender identity;

WHEREAS, these bills designed to ensure "safety" and "protection" of young people, actually increases their danger and stigmatizes students who identify as transgender;

WHEREAS, transgender students who experience discrimination, like being prohibited from using the restroom, report higher levels of depression and lower self-esteem;

WHEREAS, non-discrimination laws that protect gender identity in public accommodations have existed in many states for over 12 years and have shown no record of increasing sexual violence⁴; and

WHEREAS, respect and equality for people of all gender identities and expression is an important value of Texas Association Against Sexual Assault; now therefore, be it

¹ www.ovc.gov/pubs/forge/sexual_numbers.html

² Busch-Armendariz, N.B., Olaya, D., Kerwick, M., Wachter, K., Sulley C. (2015). Health and Well-Being: Texas Statewide Sexual Assault Prevalence. The University of Texas at Austin, Institute on Domestic Violence & Sexual Assault: Austin, Texas.

³ Snyder, H. N. (2000). Sexual Assault of Young Children as Reported to Law Enforcement: Victim, Incident, and Offender Characteristics. National Center for Juvenile Justice NCJ 182990. Washington, DC: Bureau of Justice Statistics.

⁴ Steinmetz, K. (2016). LGBT Advocates say Bathroom Predators are a Red Herring. Time. <http://time.com/4314896/transgender-bathroom-bill-male-predators-argument/>

RESOLVED that TAASA will not be silent when communities attempt to leverage sexual assault myths in order to discriminate and further oppress transgender and gender non-conforming communities; and be it further

RESOLVED that the voices and histories of transgender victims of sexual violence are counted, valued, and become a part of the work that TAASA embodies; and be it further

RESOLVED that TAASA is dedicated to educating about the realities of sexual violence as well as utilizing evidenced-based approaches to prevent sexual assault and eliminate future violence; and be it further

RESOLVED that TAASA urges Policymakers concerned with public safety to allow evidence-based research concerning sexual violence perpetration guide their decisions; and be it further

RESOLVED that TAASA opposes all policies that seek to institutionalize transphobia and encourage oppression of transgender and gender non-conforming communities; and be it further

RESOLVED that TAASA urges all whom this resolution reaches to enact rules and regulations which respect and protect the rights of transgender and gender-nonconforming people.

This is a Statement Resolution.

Presented by the TAASA Board of Directors, TAASA Diversity Task Force, and TAASA Staff Member Rick Gipprich, Jr.

Contributors: TAASA Board, TAASA Talking Point's Regarding "Bathroom Bills", Katrina Stewart, GLSEN

The state anticipated cost of implementation is \$0.

Resolution proposed May 2021

2. Resolution Regarding the Use of At-Home/DIY Sexual Assault Evidence Collection Kits

WHEREAS, persons who have experienced sexual violence deserve quality, holistic, care including multi-disciplinary supportive resources where the focus is on the person as a whole being, versus focusing solely on the evidence collection;

WHEREAS, sexual assault is a deeply personal crime that affects more than the physical body;

WHEREAS, trauma-informed care incorporates the principles of safety, choice, collaboration, trustworthiness and empowerment;

WHEREAS, forensic nurses provide care following these principles so as not to re-traumatize the person who has experienced sexual violence and deliver care to ensure that they are given the information needed to make informed decisions to maintain their bodily autonomy, explaining each step and utilizing affirmative consent throughout the exam process confirming that nothing is done without their consent;

WHEREAS, according to the Center for Disease Control, the consequences of sexual violence can be chronic, leading to post-traumatic stress disorder, re-occurring gynecological, gastrointestinal, cardiovascular and sexual health problems;

WHEREAS each of these consequences can be better identified and addressed by a certified medical professional who has received specialized training in caring for persons who have experienced sexual violence;

WHEREAS, strangulation is often utilized as a way to elicit complete control and ensure compliance during the execution of a sexual assault both in intimate partner violence/domestic violence situations as well as in stranger assaults and non-fatal strangulation has unrecognized potential for lethality and can have life-threatening consequences without any noticeable outward physical signs on the skin;

WHEREAS, forensic nurses have specialized training in screening for strangulation and suffocation and assessing for life-threatening injuries;

WHEREAS, the New York Attorney General expressed her fears of persons who have experienced sexual violence collecting evidence without knowing whether the evidence will be admissible in court;

WHEREAS, forensic nurses have specialized training in maintaining chain of custody and in providing expert testimony;

WHEREAS, medical forensic services are free of charge according to the Office of the Attorney General of Texas, whereas at-home sexual assault kits must be purchased by the person who has experienced sexual violence;

WHEREAS, during a medical forensic exam the person who experienced sexual violence has access to sexually transmitted infections (STI) and pregnancy prevention testing and resources, which are not available with at-home sexual assault kits;

WHEREAS, the National District Attorneys Association identified that the misinformation given by at-home sexual assault kits will lead persons who have experienced sexual violence to falsely rely on the marketing practices of these companies that have prioritized profit over safety;

WHEREAS, the California Association of Crime Laboratory Directors identified the significance of maintaining the integrity of evidence collection and having persons who have experienced sexual violence collect their own evidence jeopardizes the evidence collection objectivity and therefore the potential outcome of investigations and the adjudication process;

WHEREAS, persons who have experienced sexual violence that receive sexual assault examinations that are done by certified medical professionals have the option to be a “non-report” and consent to evidence collection without police involvement and at-home sexual assault kits require persons who have experienced sexual violence to make a report to law enforcement or forego evidence collection all together; therefore, be it

RESOLVED, that TAASA denounces the use of at-home sexual assault kits, including promoting local and statewide efforts to prevent the sale of these kits; and be it further

RESOLVED, that TAASA will work with sexual assault coalitions throughout the state to provide solutions to forensic nursing gaps in order to promote holistic care that is comprehensive and trauma informed.

This is a Statement Resolution
Presented by the TAASA Board of Directors
The state anticipated cost of implementation is \$0
Resolution proposed May 2021

3. Resolution Identifying Staff-Care as an Essential Aspect of Trauma-Informed Survivor-Centric Care

WHEREAS, as the statewide coalition of rape crisis centers, sexual assault programs, advocates, and survivors, TAASA is committed to fostering a culture that respects the fundamental rights and dignity of all;

WHEREAS, individuals involved in the anti-sexual violence movement are exposed to trauma on a regular basis;

WHEREAS, witnessing trauma can and does have a cumulative toll on a person's overall well-being¹;

WHEREAS, organizations working to address social injustices are founded in response to trauma, therefore, being consistently exposed to and impacted by trauma;

WHEREAS, an organization's recognition and response to all forms of trauma, including but not limited to acute, complex, interpersonal, vicarious, and historical traumas experienced by survivors, staff, and volunteers, can either cultivate a space for healing or compound the harmful effects of trauma²;

WHEREAS, while staff and volunteers possess astounding amounts of resilience, wisdom, and strength, resiliency can be impacted by prolonged trauma exposure, and the negative impact of trauma exposure can be compounded by organizational leadership and culture;

WHEREAS, organizations that impede or do not intentionally address trauma exposure, as well as the overall well-being of staff and volunteers, experience high rates of turnover that results in the loss of highly-skilled and dedicated individuals (which studies show impacts BIPOC professionals, especially Black professionals, at disproportionately higher rates)³;

WHEREAS, an organization's ability to be trauma-informed begins with organizational leadership and their commitment to fully integrating trauma-informed principles into organizational culture, including policies and practices, both documented and observed, that involve treatment of individuals that work and volunteer for the agency⁴;

WHEREAS, when organizations honor the experiences of volunteers and staff, it cultivates a larger culture of care that can transform trauma and create change for individuals as well as the movement⁵;

¹ Office for Victims of Crime. *The Vicarious trauma toolkit*. Department of Justice Office of Justice Programs.

² Maul, A., & Menschner, C. (2016). *Key ingredients for successful trauma-informed care implementation*. SAMHSA.

³ Institute on Domestic Violence & Sexual Assault. (2019). *Victim services occupation, information, & compensation experiences survey*. The University of Texas at Dallas. https://sites.utexas.edu/idvsa/files/2019/03/VOICE-Summary-of-Findings_IDVSA_1.2018.pdf

⁴ The National Sexual Assault Coalition Resource Sharing Project & the National Sexual Violence Resource Center. (2017). *Building cultures of care: A guide of sexual assault services programs*. Sexual Assault Demonstration Initiative. https://www.nsvrc.org/sites/default/files/2017-10/publications_nsvrc_building-cultures-of-care.pdf

⁵ Darnoot Lipsky, L. (2009). *Trauma stewardship*. Barrett-Koehler Publishers, Inc.

WHEREAS, trauma-informed care is not a therapy or an intervention, but a comprehensive principle-based, culture-changing process aimed at recognizing strengths and resiliency, acknowledging the effects of trauma, and actively working to prevent re-traumatization, so that individuals can have healthy and positive lives ⁶; and

WHEREAS, organizations that integrate trauma-informed principles are better able to support and center the experiences of the survivors they serve; therefore, be it

RESOLVED, that TAASA encourages organizations serving sexual assault survivors to recognize and respond to all forms of trauma and understand the principles and pillars of trauma-informed care⁷; and be it further

RESOLVED, that TAASA urges organizations serving sexual assault survivors to strategize and integrate the following trauma-informed pillars throughout their entire agency in policies and practices regarding survivors, staff, and volunteers:

- Safety
- Trustworthiness and transparency
- Peer support
- Collaboration and mutuality
- Empowerment, voice, and choice
- Responsive to the intersecting needs of staff and the origins of trauma, including historical, collective, and the inter-generational impact of trauma; and be it further

RESOLVED, that TAASA emphasizes that trauma-informed organizations must actively take steps to support staff and volunteers and their physical, emotional, relational, and financial well-being; and be it further

RESOLVED, that TAASA believes those who work and volunteer for organizations that serve sexual assault survivors deserve to be compensated for their work rather than exploited for their dedication to the movement; and be it further

RESOLVED, that TAASA acknowledges that the findings of the Victim Services Occupation Information and Compensation Experiences (VOICES) survey are reflective of many individuals in the field and urges all organization to look to them for guidance; and be it further

RESOLVED, that TAASA urges all organizations serving sexual assault survivors to incorporate their staff and volunteers in decision-making processes and seek guidance and input on how the organization's policies, practices, and culture can facilitate an environment that supports overall health and well-being; and be it further

⁶ H. Res. 443, Recognizing the importance and effectiveness of trauma-informed care, 115th Cong. (2017). <https://www.congress.gov/bill/115th-congress/house-resolution/443/text>.

⁷ SAMHSA Trauma and Justice Strategic Initiative (2014). *SAMHSA's concept of trauma and guidance for a trauma-informed approach*. Substance Abuse and Mental Health Services Administration. https://ncsacw.samhsa.gov/userfiles/files/SAMHSA_Trauma.pdf

RESOLVED, that TAASA affirms the importance of having leadership that models and practices trauma-informed behavior, which includes actively assessing and attending to their own trauma as well as actively assessing and attending to organizational trauma; and be it further

RESOLVED, that TAASA commits itself to assist organizations in cultivating an environment where the individuals working and volunteering are honored, cared for, valued, heard, empowered, supported, and treated with fairness, dignity, and respect.

This is a Statement Resolution

Presented by the TAASA Board of Directors and TAASA Staff Member Haleh Cochran

The state anticipated cost of implementation is \$0

Resolution proposed May 2021

4. Resolution for LGBTQ+ Inclusion and Support in Sexual Violence Services and Employment

WHEREAS, the sexual violence field employs and serves members of the LGBTQ+ community;

WHEREAS, oppression of all communities is a cause of sexual violence, including homophobia, transphobia and all systemic violence towards the LGBTQ+ community¹;

WHEREAS, the LGBTQ+ community experiences high rates of poverty, incarceration, and homelessness, putting them at higher risk for sexual violence²;

WHEREAS, the LGBTQ+ community experiences sexual violence at a disproportionate rate in comparison to their heterosexual peers and general population³;

WHEREAS, 85% of victim advocates surveyed by the NCAVP (National Coalition of Anti-Violence Programs) reported having worked with an LGBTQ survivor who was denied services because of their sexual orientation or gender identity⁴;

WHEREAS, The LGBTQ+ community is targeted and discriminated against in public and private services, such as health care, education, employment, mental health care, social services and more⁵;

WHEREAS, the LGBTQ+ community experiences overwhelming rates of violence within the workplace and during employment⁶, especially in the non-profit sector; and

WHEREAS, laws and policies do not provide protection for LGBTQ+ employees in all sectors, laws that impact their access to defensive and safe employment⁷; therefore be it

RESOLVED, that the Texas Association Against Sexual Assault (TAASA) stands with the LGBTQ+ community and will actively pursue opportunities to grow our efforts in support of this community; and be it further

¹ <https://transforminghate.eu/chapter3/>

² 1 in 5 trans people incarcerated are sexually assaulted by facility staff, homeless shelters see high rates of sexual assault towards trans people, and homeless LGBTQ+ are 7.4 times more likely to experience sexual violence and sex trafficking. James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). *The Report of the 2015 U.S. Transgender Survey*. Washington, DC: National Center for Transgender Equality.

<https://www.dressemer.org/blog/the-link-between-lgbtq-youth-and-human-trafficking>

³ National Intimate Partner and Sexual Violence Survey (2011). *NISVS: An Overview of 2010 Findings on Victimization by Sexual Orientation*. Centers for Disease Control and Prevention.

https://www.cdc.gov/violenceprevention/pdf/cdc_nisvs_victimization_final-a.pdf

⁴ <https://www.hrc.org/resources/sexual-assault-and-the-lgbt-community>

⁵ <https://www.uft.org/news/union-resolutions/resolution-promoting-health-care-and-human-rights-protections-transgender-people>

⁶ National Sexual Violence Resource Center (2012). *Sexual violence & individuals who identify as lgbtq*.

⁷ <https://www.aclu.org/legislation-affecting-lgbt-rights-across-country>

RESOLVED, that TAASA takes a stance against homophobia, transphobia, and all violence towards this community and chooses to join in the fight to end such violence, as it directly relates to sexual violence and those who are impacted by it; and be it further

RESOLVED, that TAASA, as an agency, will consistently acknowledge and review internal and external policies and procedures to ensure they are trauma-informed and updated for growing practices that better support LGBTQ+ survivors and employees; and be it further

RESOLVED, that TAASA will also support and encourage all agencies in the sexual violence field to do the same, so as to better serve and support LGBTQ+ survivors and employees; and be it further

RESOLVED, that TAASA will focus future state level policy efforts to combat laws that discriminate and harm LGBTQ+ survivors and employees, and pursue efforts to establish laws that protect and better serve this community; and be it further

RESOLVED, that TAASA will continue to grow itself to be a place that holds space for healing, progress, support, and better change for the LGBTQ+ community as a whole.

This is a Statement Resolution

Presented by TAASA Staff Member Madison Jackson

The state anticipated cost of implementation is \$0

Resolution proposed May 2021

5. Resolution in Support of Trauma-Informed, Evidence-Based Therapies for Sexual Assault Survivors

WHEREAS, survivors of sexual assault and abuse may experience trauma;

WHEREAS, the most commonly cited definition on trauma is from the Substance Abuse and Mental Health Services Administration (SAMHSA)¹: ““Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.”;

WHEREAS, the consequences of sexual assault are far-reaching, including physical and emotional impacts such as mental health disorders such as major depression, anxiety, suicidal ideation, of Post-Traumatic Stress Disorder (PTSD), substance use disorders, as well as physical health impacts such as migraines, physical disabilities, gastrointestinal disorders, and chronic health conditions and physical disabilities²;

WHEREAS, most persons impacted by sexual assault and violence experience some symptoms of PTSD³;

WHEREAS, lifetime prevalence of Post-Traumatic Stress Disorder (PTSD) for persons who have been sexually assaulted far exceeds US National estimates⁴;

WHEREAS, research has also indicated that with appropriate supports and intervention, people can overcome traumatic experiences;

WHEREAS, culturally meaningful trauma healing practices are integral for many survivors;

WHEREAS, peer and spiritual support can be helpful tools for survivor healing in addition to use of evidence-based therapies;

WHEREAS, therapies such as Cognitive Behavioral Therapy (CBT), Cognitive Processing Therapy (CPT), Prolonged Exposure (PE), Cognitive Therapy (CT), Eye Movement Desensitization and Reprocessing (EMDR), and Narrative Exposure Therapy (NET) have been identified as recommended by the American Psychological Association and the Veterans Administration/Department of Defense Clinical Practice Guideline Working Group as recommended therapies for the treatment of PTSD⁵;

¹ SAMHSA (2014). SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach SAMHSA’s Trauma and Justice Strategic Initiative. Available at: <http://store.samhsa.gov/product/SAMHSA-s-Concept-of-Trauma-and-Guidance-for-a-Trauma-Informed-Approach/SMA14-4884>.

² Busch-Armendariz, N., Olaya-Rodriguez, D., Kammer-Kerwick, M., Wachter, K., Sulley, C., Anderson, K., & Huslage, M. (2015). Health and well-being: Texas statewide sexual assault prevalence study. Institute on Domestic Violence and Sexual Assault. <https://sites.utexas.edu/idvsa/files/2019/03/TX-SA-Prevalence-Study-Final-Report.pdf>

³ Creamer M, Burgess P, McFarlane AC. Post-traumatic stress disorder: Findings from the Australian National Survey of Mental Health and Well-being. *Psychol Med.* 2001;31(7):1237–1247

⁴ National Center for Post Traumatic Stress Disorder. Epidemiological Facts About PTSD - A National Center for PTSD Fact Sheet. Retrieved April 1, 2005 from http://www.ncptsd.va.gov/facts/general/fs_epidemiological.html; 2005.

⁵ Watkins, L. E., Sprang, K. R., & Rothbaum, B. O. (2018). Treating PTSD: A Review of Evidence-Based Psychotherapy Interventions. *Frontiers in behavioral neuroscience*, 12, 258. <https://doi.org/10.3389/fnbeh.2018.00258>

WHEREAS, evidence supports that the majority of individuals who meet the diagnostic criteria for PTSD are not able to access evidence-based treatment options⁶;

WHEREAS, the state of Texas ranks 50th in access to mental health care and those with limited income or inadequate healthcare coverage may not be able to receive therapy⁷;

WHEREAS, clinical services offered by sexual assault programs are able to remove financial barriers and increase access to evidence-based mental healthcare; therefore be it

RESOLVED, that TAASA urges the use of recommended evidence-based therapies for sexual assault survivors seeking clinical mental health support and treatment; and be it further

RESOLVED, that TAASA encourages organizations serving sexual assault survivors to provide access to and support, financially and by allotting time to attend, training and supervision for therapists and counselors in evidence-based therapies; and be it further

RESOLVED, that TAASA implores mental health providers treating sexual assault survivors to receive specific training around the treatment of trauma, as well as specific sexual assault trauma treatment; and be it further

RESOLVED, that TAASA emphasizes that therapists practicing mental health treatment must be in good standing, adhering to all licensing requirement and ethics including addressing their own trauma history as well as the impacts of providing trauma treatment, such as vicarious traumatization; and be it further

RESOLVED, that TAASA urges agencies and organizations to provide access to evidence-based treatment modalities to mental health practitioners impacted by exposure to trauma through supporting sexual assault survivors; and be it further

RESOLVED, that TAASA advises agencies to have policies for clinical staff therapists and counselors which are in alignment and compliant with the current rules for licensees, including the use of clinical case notes, practices around retention of records, and HIPAA regulations; and be it further

RESOLVED, that TAASA supports transparency of the services an agency is able to provide to sexual assault survivors and should access to effective and evidence-based mental health treatment be a limitation of the organization that the agency will make best efforts to assist survivors in accessing those services.

This is a Statement Resolution

Presented by the TAASA Board of Directors and TAASA Staff Member Haleh Cochran

The state anticipated cost of implementation is \$0

Resolution proposed May 2021

⁶ Harvey, A., & Gumport, N. (2015). Evidence-based psychological treatments for mental disorders: modifiable barriers to access and possible solutions. Behavioral Research and Therapy 86, 1-12. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4395546/>.

⁷ Mental Health America (2020). Ranking the states. MHA. <https://www.mhanational.org/issues/ranking-states>

6. Resolution in Support of Pronouns in Rape Crisis Center Services

WHEREAS, language is the lens through which we understand the world, and has the power to affirm and legitimize, as well as invalidate and harm;

WHEREAS, asking community members what their gender pronouns are and consistently using them correctly is a basic way to show your respect for their gender identity;

WHEREAS, pronouns are often used with dichotomous language, placing individuals who identify as transgender, non-binary, genderfluid, genderqueer, and/or any other gender that is not cis, at a higher risk of physical and verbal violence¹; and

WHEREAS, LGBTQIA+ individuals have reported being excluded from services or mistreated by service providers by using incorrect pronouns²; therefore be it

RESOLVED, that TAASA will respect others by using gender neutral pronouns and/or use names in place of pronouns until someone's pronouns are disclosed with consent; and be it further

RESOLVED, once pronouns are known, TAASA will mirror the language a survivor is using to identify themselves and their experiences; and be it further

RESOLVED, as aspiring allies, TAASA also commits to providing and pursuing education around pronoun use and trauma-informed practices; and be it further

RESOLVED, that TAASA supports and encourages the option of using pronouns in official professional correspondence and representation, as in business cards, and email signatures; and be it further

RESOLVED, that TAASA stands to create a culture where sharing pronouns are commonplace; and be it further

RESOLVED, that TAASA will ensure there are learning opportunities around LGBTQ+ issues and language.

This is a Statement Resolution

Presented by TAASA Staff Member Alexis Hinojosa

The state anticipated cost of implementation is \$0

Resolution proposed May 2021

¹ PCAR - Technical Assistance Bulletin - Proactive Inclusion of LGBTQIA+ Survivors of Sexual Violence
https://pcar.org/sites/default/files/resource-pdfs/tab_2107_inclusion-of-lgbtqia-survivors.pdf

² MEYER, D. (2015). *Violence against Queer People: Race, Class, Gender, and the Persistence of Anti-LGBT Discrimination*. Rutgers University Press. Retrieved March 9, 2021, from <http://www.jstor.org/stable/j.ctt1bc53v7>

7. Resolution in Support of Culturally-Grounded Healing and Sexual Violence

WHEREAS, trauma results from an event or series of events caused by individuals, communities, systems, and/or set of circumstances experienced as physically, sexually, psychologically harmful and/or life-threatening;

WHEREAS, trauma may cause adverse effects on an individual's physical, social, emotional, relational, mental, and/or spiritual well-being and functioning;

WHEREAS, historical trauma is defined as the cumulative emotional and psychological wounding across generations, including the lifespan, which emanates from massive group trauma¹ and includes the suppression of cultural healing practices through historical processes and continued through systemic racial and ethnic oppression;

WHEREAS, healing modalities are imbedded in specific cultural contexts and worldviews thus the intersection of racial and ethnic identity, sexuality, gender identity and expression are primary in determining the most appropriate therapeutic interventions;

WHEREAS, professionalized healing modalities are not always the most appropriate for all survivors who may benefit from healing modalities more resonant with their cultural identity and are practiced outside of the those offered in most sexual assault programs;

WHEREAS, despite suppression and marginalization, there are culturally-grounded organizations and healing practices developed by and for the communities they serve and may be distinct from formal, professionalized forms of therapeutic interventions; and

WHEREAS, it is imperative that we respect, value, and credit the cultures and people who developed particular culturally-grounded healing modalities so as not to continue racial and ethnic oppression; therefore be it

RESOLVED, that TAASA will move with intention and integrity to reach out, build trust and relationships with culturally-grounded organizations and healers; and be it further

RESOLVED, that TAASA will support culturally-grounded healers and their work and sharing their services with appropriate audiences; and be it further

RESOLVED, that TAASA will support the professional development of culturally-grounded healers and the intersections of sexual violence, and be it further

RESOLVED, that TAASA will support sexual assault programs with opportunities to learn about historical trauma, culturally-grounded organizations/healers, when and how culturally-grounded

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https://www.ihs.gov/sites/telebehavioral/themes/responsive2017/display_objects/documents/slides/historicaltrauma/htreturns/acredpath0513.pdf

healing modalities are appropriate and developing a working relationship with culturally-grounded healers and organizations.

This is a Statement Resolution

Presented by the TAASA Staff Members

The state anticipated cost of implementation is \$0

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