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Locating Women's Global Narratives and Local Needs in Our Own Backyard: Global Critical Race Feminism for Direct Social Work Practice

Carly Goldberg
carlygoldberg@gmail.com

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Locating Women's Global Narratives and Local Needs in Our Own Backyard: Global Critical Race Feminism for Direct Social Work Practice

Abstract

Global critical race feminism (GCRF) is a complex theory situated in legal scholarship that emerged from critical race feminism (CRF) at the end of the twentieth century to address the legal concerns of foreign-born women of color both in the United States and abroad. For nearly two decades, GCRF and CRF have not only been influential in the legal profession but have impacted other disciplines' understanding of women's multiple intersecting identities within a larger psychosocial context, including education, public policy, human rights, psychology, and liberal arts. Despite GCRF's applicability in a variety of contexts, GCRF has not previously been applied to the field of social work. Although social work has spent the last few decades developing a discourse around feminist theories and multicultural competencies to meet the needs of the diverse populations of women who are served by the field, there remains a gap in the literature and research specifically to meet the rapidly evolving needs of some of the most vulnerable and oppressed populations of women with whom social workers currently engage in direct practice: foreign-born women who are survivors of trauma and torture. Through a review of the literature, this dissertation offers a multi-paper examination that 1) introduces GCRF to social work's theory building and epistemology and 2) provides a conceptual framework for the integration of GCRF into direct practice to meet the needs of foreign-born women who are survivors of trauma and torture.

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Jeff Applegate

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Ram Cnaan

Third Advisor

Joan Berzoff

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LOCATING WOMEN'S GLOBAL NARRATIVES AND LOCAL NEEDS IN OUR OWN
BACKYARD: GLOBAL CRITICAL RACE FEMINISM FOR DIRECT SOCIAL WORK
PRACTICE

Carly L. Goldberg

A DISSERTATION

in

Social Work

Presented to the Faculties of the University of Pennsylvania

in

Partial Fulfillment of the Requirements for the

Degree of Doctor of Social Work

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Jeffrey Applegate, Ph.D.
Dissertation Chair

Richard Gelles, Ph.D.
Dean, School of Social Policy and Practice

Dissertation Committee
Ram A. Cnaan, Ph.D.
Joan Berzoff, MSW, Ed.D.

DEDICATION

To my mother, Jane. Because she always wanted more for me than she could ever have imagined for herself.

May her memory be for infinite blessings.

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They say it takes a village to raise a child. Did you also know that it takes a village to write a dissertation? This dissertation could not have been possible without my village. Jeffrey Applegate, from the moment I met you the first semester of the DSW program, it was academic love at first site. I knew by the end of our first class that I wanted to propose academic marriage. Well, you accepted my proposal and have been a faithful mentor and dissertation chair ever since. Your steadfast commitment and belief in my work is the backbone of this dissertation. Without your guidance, wisdom, and, most of all, *patience*, this dissertation would not have been possible – so, I thank you.

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ABSTRACT

LOCATING WOMEN'S GLOBAL NARRATIVES AND LOCAL NEEDS IN OUR OWN
BACKYARD: GLOBAL CRITICAL RACE FEMINISM FOR DIRECT SOCIAL WORK
PRACTICE

Author: Carly L. Goldberg

Dissertation Chair: Jeffrey Applegate, Ph.D.

Global critical race feminism (GCRF) is a complex theory situated in legal scholarship that emerged from critical race feminism (CRF) at the end of the twentieth century to address the legal concerns of foreign-born women of color both in the United States and abroad. For nearly two decades, GCRF and CRF have not only been influential in the legal profession but have impacted other disciplines' understanding of women's multiple intersecting identities within a larger psychosocial context, including education, public policy, human rights, psychology, and liberal arts. Despite GCRF's applicability in a variety of contexts, GCRF has not previously been applied to the field of social work. Although social work has spent the last few decades developing a discourse around feminist theories and multicultural competencies to meet the needs of the diverse populations of women who are served by the field, there remains a gap in the literature and research specifically to meet the rapidly evolving needs of some of the most vulnerable and oppressed populations of women with whom social workers currently engage in direct practice: foreign-born women who are survivors of trauma and torture. Through a review of the literature, this dissertation offers a multi-paper examination that 1) introduces GCRF to social work's theory building and epistemology and 2) provides a conceptual framework for the integration of GCRF into direct practice to meet the needs of foreign-born women who are survivors of trauma and torture.

TABLE OF CONTENTS

Dedication.....	2
Acknowledgments.....	3
Abstract.....	5
Introduction.....	7
Global Critical Race Feminist Theory for Clinical Social Work Practice: An Introduction	13
Think Globally, Practice Locally: Integrating Global Critical Race Feminist Standpoints into Direct Social Work Practice	32
Discussion	57
Conclusion	61
References.....	65

*Not like the brazen giant of Greek fame,
With conquering limbs astride from land to land;
Here at our sea-washed, sunset gates shall stand
A mighty woman with a torch, whose flame
Is the imprisoned lightning, and her name
Mother of Exiles. From her beacon-hand
Glow world-wide welcome; her mild eyes command
The air-bridged harbor that twin cities frame.
"Keep ancient lands, your storied pomp!" cries she
With silent lips. "Give me your tired, your poor,
Your huddled masses yearning to breathe free,
The wretched refuse of your teeming shore.
Send these, the homeless, tempest-tost to me,
I lift my lamp beside the golden door!*

– Emma Lazarus, “The New Colossus”

INTRODUCTION

Global critical race feminism (GCRF) is a multidisciplinary theory and praxis situated in legal scholarship that emerged from critical race feminism at the end of the twentieth century to address the legal concerns of foreign-born women of color in the United States. Rooted in previous scholarship in critical race feminism, critical race theory, feminist jurisprudence, Black feminist theory, and intersectionality theory, and influenced by the civil rights and feminist movements of the 1960s and 1970s, GCRF offered the field a new way to understand the multiple and intersecting realities specific to foreign-born women of color in the United States. In addition to the theoretical framework, GCRF offers legal scholars a standpoint and discourse from which to take action against the many injustices facing women of color both nationally and globally. As such, GCRF has been appropriated by other scholarly and practice-oriented fields such as education, human rights, and psychology (Berry, 2009; Few, 2007; Fischer & Reese,

2011; Gonzalez, 2001; Limbert & Bullock, 2005; Rubenstein-Avila, 2007; Sharp & Ispa, 2008; Thompson, 2004) for its comprehensive yet subversive, de-marginalizing, and critical understanding of the ongoing discriminatory perspectives and practices against individuals and/or groups of women and how these circumstances are enacted and viewed within a larger sociological context.

In the field of social work, however, a contemporary theoretical and conceptual understanding of one of the most marginalized populations of women – foreign-born women who are survivors of trauma and torture – has yet to be introduced. Most contemporary social work practitioners assume that work with foreign-born populations is almost solely limited to immigrant and refugee-specific agencies such as resettlement organizations, or in international social work efforts, working abroad cross-culturally in direct practice with indigenous populations or in macro-level policy development. The reality, however, is that immigrants, refugees, and other newcomers to the United States have long presented and continue to present in our mainstream direct social work practices.¹ Moreover, the intricacies of working with traumatized, foreign-born individuals who have experienced the perils of globalization—war, civil unrest, gender-based violence, medical pandemics, starvation, internal displacement, torture, and mass murder—have not been widely recognized, and the specific needs of this population often go unmet in mainstream direct social work practice. Through a review of the literature, this dissertation will show how GCRF, a theory not previously applied to social work, offers a theoretical and conceptual framework that can be integrated into mainstream direct

¹Mainstream direct social work practice refers to all areas of social work practice whose mission does not specifically relate to working directly with an immigrant and refugee population. Examples include schools, homeless shelters, hospitals, domestic violence shelters, mental health settings, and so on.

social work practice to ensure the voices of these women are heard and their complex and specific needs are met.

Brief History of Multicultural Standpoints in Social Work Practice

An awareness of the specific needs of foreign-born and newly immigrated clients in the United States is not new to social work. Historically, the field of social work was born in part out of its early work with immigrants from Southern and Central Europe, focusing a great deal on the needs of women and children (Fong, 2004; Padilla, Shapiro, Fernandez-Castro & Faulkner, 2008). Early social work pioneers in the late nineteenth and early twentieth centuries such as Jane Addams, Ida B. Wells-Barnett, Lillian Wald, and Birdye Henrietta Haynes were particularly concerned with the needs of the newly settled immigrants facing a foreign, rapidly modernizing, industrial American society. As feminists, abolitionists, and “race women,” settlement house pioneers maintained their idealism in the wake of burgeoning scientific, universalist, and modern principles, maintaining a worldview that included an understanding of gender, race, class, nationality, religion, ethnicity, and politics to serve the range of needs of the people living there (Carlton-LaNey & Alexander, 2001; Chambers, 1986; Lasch-Quinn, 1993). Settlement house workers were well known to have a great appreciation for understanding the needs of the immigrant experience and ensuring that the immigrant communities maintained their ethnic and familial connections while living in the United States (Healy, 2008; Payne & Askeland, 2008; Specht & Courtney, 1994; Wetzel, 1995). In fact, Jane Addams (1910) wrote in *Twenty Years at Hull-House* of the “indications of an internationalism, as sturdy and virile as it is unprecedented, which I have seen in our cosmopolitan neighborhoods” (1910, p. 217).

As the environment of the early twentieth century American landscape shifted, however, so too did the influences in the developing field of social work and social workers' involvement

with the distinctive needs of immigrants and refugees. Freudian psychoanalytic thinking, the need for social workers to embrace a psychiatric medical model of care for soldiers returning from World War I, and the push for a modern universal world-view of humanity moved the field away from a focus on people in their distinct cultures and environments and more towards the psychology of individuals (Curran, 2003). In the 1940s and 1950s social workers began to embrace a “melting pot approach” where “efforts were made to assimilate or integrate all ‘others’ within the Western notion of correct living” (Kholi, Huber & Faul, 2010, p.254). This perspective invited social workers to embrace a “cultural deficit model or mainstreaming of ‘others’ into the dominant ideological perspectives” (p.254). It was not until the late 1950s and 1960s that changing race relations at home and abroad began to influence the thinking around society’s cultural narrative (Curran, 2003; Kholi, Huber & Faul, 2010). However, in social work’s movement towards celebrating cultural difference, a culturally relativist stance was adopted that “foreshadowed the political and intellectual multicultural movement of that latter twentieth century,” often perpetuating racial stereotypes and racism (Curran, 2003, p.17). The 1950s brought a stronger awareness of social justice with the civil rights movement and major victories such as the 1954 desegregation ruling in *Brown V. Board of Education* (2003). Despite this newfound awareness, the commitment to racial equality that social workers brought to the field was limited (Curran, 2003) and mid-century social workers, especially social workers of color, continued having a difficult time making their voices and narratives heard.

During the early 1970s social workers of color began to consider the implications of culture outside of the dominant social work perspective and began writing about specific racial groups such as African Americans and cultural perspectives in light of current social work practice (Cross, 2007). An ethnic-minority perspective emerged and a shift towards the environmental

perspective in social work was influenced by political events such as the countercultural revolution including anti-war, civil rights, and women's liberation movements, the publication of books such as Michael Harrington's *The Other America: Poverty in the United States* (1962), and the growing development of practice theories, such as systems theory, that acted as an alternative to psychoanalysis (Kholi, Huber, & Faul, 2010; Sands, 2010). This shift was particularly noted in articles and books such as social work educator Barbara Bryant Solomon's (1976) landmark text *Black Empowerment: Social Work in Oppressed Communities* and text books in the early 1980s such as "*Ethnic Sensitive Social Work Practice* by Devore and Schlesinger (1981) and *Cultural Awareness in the Human Services* by Green and Associates (1982)" (Cross, 2007, p.2; Lum, 2007).

It was from these important early works that the term "cultural competence" evolved and was eventually coined by Green (1982) and Pinderhughes (1989) (Lum, 2007). Social workers have since adopted the idea that in providing *competent* – sufficient, adequate, and capable—services to individuals and groups, the *culture* of those individuals and groups, which "encompasses behavioral patterns, intergenerational passages, and particular group life experiences" should be considered outside of the dominant White, male, middle-class, privileged perspective that primarily influences the way in which services, education, research, administration, and policy are carried out in the social work profession (Lum, 2007, p.5-6; Sue, 2006). As consciousness began to be raised around the need for culturally competent social workers and social work practice, guidelines and policy began to be set into place in the 1990s as a number of professional organizations, federal agencies, and state governments began to embrace the principles of cultural competence (Cross, 2007). In 1999, the National Association of Social Workers (NASW) adopted culturally competent language into its Code of Ethics, "for

the first time making the delivery of culturally competent services an ethical issue” (2007, p.3). Additionally, in 2002 the Council on Social Work Education (CSWE), under pressure from “advocates of color and other diverse populations within the social work education community...adopted diversity standards that encompass and advance the established frameworks for culturally competent social work” (2007, p.3).

Despite these and other efforts of social workers to advance the practice of culturally competent social work, social workers continue to examine and critique the theoretical frames that lay the foundation for social work practice as well as researching and writing specifically on the topic of cultural competence (Cross, 2007). One major and repeated criticism of cultural competency is that it “implies a discrete knowledge set that focuses on the culture of the patient only as something ‘other’ and therefore aberrant from the norm” (Nunez, 2000, p. 1072). In the classroom and then in practice, this is translated into “[t]his is how you deal with this ilk of patient” (2000, p. 1072). The limits of cultural competency, then, open the door for a difference perspective that recognizes the range of human experience from multiple and intersecting standpoints.

GLOBAL CRITICAL RACE FEMINIST THEORY FOR CLINICAL SOCIAL WORK PRACTICE: AN INTRODUCTION

Global critical race feminism (GCRF) is a multifaceted theory and praxis situated in the field of law that emerged from critical race feminism (CRF) at the end of the twentieth century. GCRF, through its theoretical underpinnings, offers legal scholars a comprehensive yet subversive and critical standpoint from which to address the legal as well as the complex political and personal needs of foreign-born women of color residing in the United States. To date, many of the theories from which GCRF originated, such as intersectionality theory (Crenshaw, 1991; Dill & Zambrana, 2009), critical race theory (Crenshaw, Gotanda, Peller, & Thomas, 1995; Delgado & Steffancic, 2000; Delgado & Stefancic, 2001), narrative/storytelling methodology (Bell, 1993; Delgado, 1989), post-colonial theory (Alexander & Mohanty, 1997; Said, 1978) and Black feminist theory (Collins, 1998, 2008; Davis, 1983; hooks, 1981, 2000), have previously been introduced to the field of social work, but GCRF—a comprehensive framework for integrating and applying these theories—has not.

Despite both the historical and contemporary efforts of social workers to apply feminist and multicultural standpoints to some of society's most marginalized populations of women in direct practice, there still remains a gap in knowledge around the needs of foreign-born women who are survivors of trauma and torture. Given the growing numbers of immigrant and refugee women in communities throughout the United States who are known or thought to be survivors of psychological, social, and political trauma and torture (Lewis, 2003; Moio, 2006), mainstream direct social work practitioners are increasingly engaging with these women in all facets of direct social services (Engstrom & Okamura, 2004; Moio, 2006; Ross-Sheriff, 2011). GCRF and its five key tenets—globalization, intersectionality, antiessentialism, distinctive voice, and narrative/storytelling methodology—represent a particular standpoint for practice that would

greatly benefit the needs of this most vulnerable, oppressed, and chronically traumatized population of women and move their often silenced voices from the periphery of society to the center.

Unpacking Global Critical Race Feminism: The Building Blocks of a Theory

Critical Race Feminism

In order to decipher the nuances of global critical race feminism, a fuller understanding of critical race feminism (CRF) and critical race theory (CRT), the building blocks of GCRF, is required.

CRF critically examines jurisprudence from the perspective and intersection of race and gender. As Wing (2003) stated, there is no agreed-upon canon, however CRF draws upon theories such as critical race theory (CRT), critical legal studies (CLS), and Black feminist thought to expound the definition and meaning of CRF for use in law. This consideration of CRF will also address some of the works of CRF founders and contributors such as Richard Delgado(1989; 2000; 2001), Derrick Bell (1989; 1993; 2005), Mari Matsuda(1989; 1996), Adrienne Katherine Wing (2000; 2003; 2007), Patricia Williams (1992; 1998), and Kimberle Crenshaw (1991; 1995).

The term “critical race feminism” was coined by University of Colorado professor of law and Latino/a scholar Richard Delgado, one of the forefathers of critical race theory (CRT), to describe the “theoretical framework or prism with which to view women of color” (Wing, 2007 p.1). He chose this term to serve as an “echo and link to critical legal studies (CLS), critical race theory (CRT), and feminist jurisprudence” (p.1). In his book *Critical Race Theory: An Introduction*, Delgado further contextualizes CRF as a theory “scholars of color” have used to examine not only the “intersection of feminism, sexual orientation, and critical race theory,” but

to also specifically address such “issues of intersectionality...[as] relations between men and women of color, sterilization of black, Latino, and Indian women, and the impact of changes in welfare, family policies, and child support laws” (p. 83). CRF also “analyzes the way the ‘reasonable man’ standard that operates in many areas of the law incorporates a white male bias” (p. 83). Adrienne Katherine Wing (2003), in her first critical race feminist compilation *Critical Race Feminism: A Reader*, calls CRF “an embryonic effort in legal academia that emerged at the end of the twentieth century to emphasize the legal concerns of a significant group of people—those who are both women and members of today’s racial/ethnic minorities, as well as disproportionately poor” (p. 1).

Wing speaks of CRF not only as an academic vehicle to bring about critical analysis and further progress, but as a living entity in which legal scholars in particular can situate themselves to speak of their own experiences and through personal narrative offer a shift in consciousness in the field of law. As a living entity, CRF continues to be informed by cases involving race, class, and gender essentialism in tax literature, sexual harassment, employment law, domestic violence, immigration, and criminality (Wing, 2003). In her introduction Wing passionately and poignantly writes about her experience in sharing CRF with others in her field. She shares that she is met with a variety of responses from “stony silence” to “[o]h, that’s very nice,” as the conversation returns to ‘real law’” (p.1). Despite the varying degrees of skepticism that CRF may receive for its lack of rigor or criticism of its inherent task, the scholars who make use of CRF stay focused on two central questions that guide the ongoing contributions and development of CRF theory: “what is the legal status of women of color, whether they are minorities within the United States or Europe or part of majority cultures in the developing world [and] what can this focused theoretical framework do beneficially to affect their plight?” (Wing, 2007, p. 1). These

two central features support CRF in “evolving as a richly textured genre” as evidenced by Adriene Katherine Wing’s anthologies on *Critical Race Feminism* (1997; 2003) and *Global Critical Race Feminism* (2000). These two anthologies weave together articles and case examples that “illustrate existing legal paradigms under U.S., foreign, and international law [that] have permitted women of color to fall through the cracks—becoming literally and figuratively voiceless and invisible” (Wing, 2000, p. 2). According to Wing, the impetus of CRF is to “not only identify and theorize about those cracks in the legal regime, but to formulate relevant solutions as well” (p.2). CRF therefore acts as a praxis that bridges theory and scholarship to call attention to the voices of those women most marginalized by society and to address what Mari Matsuda calls “multiple consciousness” or what Wing calls “multiplicative identity” (Wing, 2000, p. 1). Multiple consciousness is the way in which women, especially those at the margins of society, experience “an awareness of oppression they face based simultaneously on their race/ethnicity and gender” (p.1). This awareness can lead women towards bifurcated thinking—the thought process “that allows one to shift back and forth between one’s personal consciousness and the white male perspective,” which Matsuda argues dominates the legal profession (Wing, 2003, p. 107-108). CRF allows all women to find their distinct voices in the presence of the dominant thinking and culture, in this case White, male-biased legal paradigms.

Critical Race Theory

From this premise we can now examine the theoretical underpinnings and contributions that gave shape to CRF. Critical race theory (CRT) is one of the major influences on CRF. CRT emerged on the heels of the countercultural revolution and in particular the civil rights, feminist, and postcolonial movements. While the term and its “intellectual underpinnings” were noted in

the work of CRT's "intellectual father figure" and then Harvard University civil rights law professor Derrick Bell's 1973 work *Race, Racism and American Law*, as well as by other scholars from the mid-1970's onward, "CRT emerged as a self-conscious entity in 1989" and the term was brought to life by scholars such as Richard Delgado (Wing, 2003, p.4; Harrell & Pezeshkian, 2008).

In 2001 Delgado and Jean Stefancic published *Critical Race Theory: An Introduction* as an accessible resource to understand CRT for legal and non-legal scholars and students as well as the general public. In their work they define CRT as part of a larger movement that arose in the mid-1970's as a response to the "heady advances of the civil rights era of the 1960's [that] had stalled and, in many respects, were being rolled back" (Delgado & Stefancic, 2001, p. 4). Though CRT has been applied to numerous disciplines, its main scholarship "challenges liberalist claims of objectivity, neutrality, and color blindness of the law and argues that these principles actually normalize and perpetuate racism by ignoring the structural inequalities that permeate social institutions" (Abrams & Moio, 2009, p.250). It is the task of CRT to use this lens through analysis and deconstruction to transform the relationship between race, racism, and power (Abrams & Moio, 2009; Delgado & Stefancic, 2001). Therefore, early proponents of CRT such as legal scholars Derrick Bell, Richard Delgado, and the late Alan Freeman, who were "instrumental in the development of CRT and wrote a number of foundational articles that critiqued racism in the U.S. Supreme Court's jurisprudence," organized the first CRT conference in Madison, Wisconsin, in 1989 to work towards combating the "subtler forms of racism that were gaining ground" (Delgado & Stefancic, 2001, p.4; Harrell & Pezeshkian, 2008).

Emerging from these efforts are the following six tenets of CRT, which have been identified from the scholarly writings and contributions to CRT. These tenets are:

- 1) “Racism is ordinary, not aberrational”—racism is a “fundamental part of American society and not an aberration that can easily be remedied by law” or cured with a Band-Aid approach like affirmative action (Delgado & Stefancic, 2001, p. 7; Wing, 2003, p.5).
- 2) “‘Interest convergence’ or material determinism” is a concept that examines how “racism advances the interests of both white elites (materially) and working-class people (physically)” (Delgado & Stefancic, 2001, p.7). Since racism then benefits these two major segments of society and continues to serve the “interests of the powerful to maintain the status quo,” there is little motivation to eliminate racism (Delgado & Stefancic, 2001, p.7; Harrell & Pezeshkian, 2008, p.1).
- 3) Social constructionism states that race is not biologically determined but socially constructed—“products of social thought and relations” (Delgado & Stefancic, 2001, p.7). This is a prominent feature of CRT as it argues against fixed biological or genetic reality as related to race. Delgado and Stefancic argue that although people with “common origins share physical traits...such as skin color, physique, and hair texture” this in reality has “little or nothing to do with distinctly human, higher-ordered traits, such as personality, intelligence, and moral behavior” (p.7-8).
- 4) “Differential racialization” brings our attention to the way in which “dominant society racializes different minority groups at different

times, in response to shifting needs such as the labor market” (2001, p.8).

- 5) Intersectionality and anti-essentialism are tenets of CRT and dominant in both CRT and CRF. Kimberle Williams Crenshaw popularized intersectionality theory in CRF. Intersectionality and anti-essentialism discuss the crossroads at which varying aspects of people's identities, be they race, gender, religion, sexuality, nationality, or other characteristics, converge and form their meaning and experience of self. This theme supports the “significance of within-group heterogeneity and the existence of simultaneous, multiple, intersecting identities” and challenges the notion of a “unidimensional identity... or that racial groups are monolithic entities” (Harrell & Pezeshkian, 2008, p.3).
- 6) Lastly, CRT concerns itself with the concept of “unique voice of color,” or what Mari Matsuda calls “distinctive voice,” another concept that is widely held in CRF and will be further looked at in this paper in light of GCRF (Wing, 2000, p. 2). For CRT, unique voice of color means that Black, Indian, Asian, and Latino/a writers and thinkers need to communicate to their White counterparts their historical experiences with which they are unlikely to be familiar (Delgado & Stefancic, 2001). Bound in this concept is the “‘legal storytelling’ movement [that] urges Black and Brown writers to recount their experiences with racism and the legal system and to apply their own unique perspectives to assess law's master narratives” (p.9).

These six tenets form the foundation from which CRT is utilized and other theories such as CRF are informed.

Critical Legal Studies

Another major influence on CRF has been critical legal studies (CLS). CLS emerged as a legal movement in the late 1970s to challenge the liberal Left on the premise that the law is neutral and that every case “has a single correct answer” (p.144). A conference on CLS was organized by men in the late 1970s who were a “collection of neo-Marxist intellectuals, former New Left activists, ex-counter-culturalists, and other varieties of oppositionists in law schools” (Wing, 2003, p.4). Like these men, critical race feminists are attracted to CLS because it challenges traditional ideals about the law that continue to oppress minorities, though mostly men. With the presence of feminist jurisprudence, CLS also addressed the oppression for centuries of white women in law. However, CRF recognizes that the presence of women of color in this discussion was still absent and critical legal scholars were unable to move beyond the worldview of the white male elites.

Black Feminist Thought

To address this lack of perspective and the voices of women of color and to critique feminist jurisprudence, CRF utilizes the work of Black feminist theorists such as Patricia Hill Collins (1998; 2000), Alice Walker (2003), bell hooks (1981; 1984/2000), Audre Lorde (2007), and Angela Davis (1983). At the time of the civil rights and women's liberation movements of the 1950s, 1960s, and 1970s, women of color and in particular Black women were finding themselves homeless among these movements and that their struggles and distinct voices as Black women were not being represented. bell hooks writes in the opening paragraph to her 1981 classic *Ain't I a Woman* that “[a]t a time in American history when Black women in every area

of the country might have joined together to demand social equality for women and a recognition of the impact of sexism on our social status, we were by and large silent” (p.1). It is the *silence* that hooks and the above mentioned scholars, authors, theorists, and storytellers point to as the foundation of Black women’s oppression. Black feminist critic Mae Henderson states, “It is not that black women... have nothing to say, but rather that they have had no say” (as cited in Collins, 1998, p.44). CRF acknowledges the silencing of women of color and lack of representation within theories of anti-essentialism, intersectionality, and distinctive voice.

Global Critical Race Feminism

Overview

Building on the abovementioned theoretical foundations and rich historical influences such as the civil rights, women’s liberation, New Left, sexual, anti-war, and free speech movements of the 1960s and 1970s (Brownmiller, 1999; Gottheimer, 2003), as well as the capitalist culture of the 1980s and 1990s, critical race feminism scholars began to turn their gaze toward developing an identity within a larger world view (Wing, 2000). This shift began to look at CRF through the lens of international law, as well as the multiplicative identities of women from around the globe. Cases such as those of Aboriginal women in Australia experiencing gender-based violence, patriarchal jurisprudence in Islamic law, human rights violations within the United States garment industry, and Japanese women and equal opportunity employment law influenced the development and use of GCRF in praxis working towards justice for women globally (Wing, 2000).

GCRF continues to be shaped by current social, political, psychological, and economic influences that not only affect international law and legal scholarship globally, but affect the individual rights of those foreign-born women living in the United States who are continuously

violated and victimized (Wing, 2000). The focus on capitalism and free markets in particular continues to influence our twenty-first century global economy, as the global cultural and economic commodification of women of color, minorities, and oppressed populations are on the rise. This phenomenon is also very much driven by the migration of women looking to make a better life for themselves and their families back in their home countries as well as involuntary migration through enslavement such as human and labor trafficking (Ehrenreich & Hochschild, 2004; Wing, 2000). Adrienne Wing's (2003) *Global Critical Race Feminism: A Reader* introduces the vast number of challenges facing women as a result of these opportunities, which have grave potential to turn into oppressions. Wing examples include the human rights violations of Thai-born women factory workers enslaved in a Los Angeles garment factory, undocumented Peruvian domestic workers (nannies and maids) working for the upper echelon of American society, enslavement of domestic workers in the United States, refugees who are survivors of female genital mutilation, and domestic violence against South East Asian women in Atlanta.

Thinking Globally

Central to GCRF are the same tenets as CRF—anti-essentialism, intersectionality, distinctive voice, and narrative/storytelling methodology—however for GCRF, the focus is on a global perspective of identity and the global position and intersection from which women tell their stories and make their distinctive voices heard. For women of color and in particular foreign-born women of color, GCRF helps them “delineate their multiple identities, examine how those identities intersect to privilege or lead them to face discrimination, and then design multidimensional programs that would enhance their life situations” (Wing, 2000, p.8). For example, if you are living in your home country, your nationality might not be central to your identity (though it certainly could be). However, if you are traveling abroad, an American

identity may privilege you or place you at risk to face discrimination (Wing, 2000). Nationality as a central focus of identity may also be central when you are living in the United States as a transnational migrant. You are then living with the identity of two nation-states and perhaps two sets of families, one local and one abroad, for whom a woman must be the caretaker and primary breadwinner across borders (Furman, 2010). Other aspects of identity such as ethnicity, gender, religion, race, class, language, and marital status have distinct and significant meaning to women who are foreign-born and living in the United States, especially in the face of multiple and intersecting oppressions. GCRF scholars and practitioners are also greatly concerned with the hegemonic practices of the United States as well as other global superpowers that threaten women worldwide (Wing, 2000, p. xii). That is why understanding the concept of globalization as a tenet central to GCRF is essential.

Major Tenets of GCRF

As we have seen, GCRF evolved as a natural extension of CRF to address the needs and voices of both the foreign-born legal scholars who are practicing in the tradition of CRF with their own distinctive global identity and for those women whose identities are in part born from various nation states worldwide seeking justice locally and globally. Since GCRF is a living theory and continues to be influenced by the shifting historical, political, social, and cultural landscape, the major tenets of GCRF are utilitarian in nature. They serve not only to elaborate and elucidate GCRF theory, but provide an opportunity for progress in praxis and an evolution of the theory itself. While there is no definitive GCRF canon, I will propose that the following are the basic tenets of GCRF that provide a distinctive analytic contribution to the movement: globalization, antiessentialism, intersectionality, distinctive voice, and narrative/storytelling (Wing, 2000; 2003; 2007).

Globalization

Globalization is a process driven by economics, as well as regional politics, and social, cultural, technological, and religious doctrines that are integrated and networked through the exchange of ideas, communication, transportation, and trade worldwide (Hare, 2004; Lyons, 2006; Mann, 2001; Ross-Sheriff, 2007). Global critical race feminists recognize globalization especially in the form of global identity, that is to say the multiple and various intersecting and overlapping identities that manifest from around the world. Global critical race feminists recognize that there is not one universal voice and pay particular attention to the ease with which Western hegemonic identities and practices can easily dominate women from the Global South. This can readily be seen in cases of patriarchal jurisprudence in Islamic law, especially when Islamic law permits the practice of female genital mutilation, prevents women from seeing a physician for routine care, and restricts them from receiving an education (al-Hibri, 2000; Kristoff & WuDunn, 2009; Lewis, 1995). Legal scholars and human rights activists alike walk a fine line ensuring that justice is not defined by White, male law and that women's distinct voice and experience of herself in her own positionality in society should prevail.

GCRF asserts that globalization is a process that has the potential to pose the greatest threat to women worldwide (Wing, 2000, p.xii). For example, human trafficking, the process of trapping, exploiting, buying, and selling humans as if they were objects and treated without any human dignity or decency for the sake of forced labor, debt bondage, and/or forced prostitution, affects 12.3 to 27 million people globally (Human Trafficking, 2011; Soroptimist, 2011). Sex trafficking, the trafficking of individuals for the sole purpose of sexual servitude, is estimated to affect 79% of the millions of people who are trafficked annually; 66% of these victims are women and 13% are girls (Soroptimist, 2011).

Antiessentialism

Antiessentialism provides GCRF theorists “a critique of the feminist notion that there is an essential female voice, that is, that all women feel one way on a subject” (Wing, 2007, p.2). This notion is largely derived from the predominantly White women’s liberation movement of the 1970s, where the idea of an “essential voice” only represents some of the White, middle or upper-class women, “masquerading as a representation for all women” (p.2). Angela Harris (1990) also spoke to this concept of essentialism and suggested that while brilliant in many ways, the work of feminist legal scholars such as Catharine MacKinnon and Robin West relied heavily upon the idea of “gender essentialism—the notion that a unitary, ‘essential’ women’s experience can be isolated and described independently of race, class, sexual orientation and other realities of experience” (p.585). This tendency functions to silence some voices in order to privilege others and the voices that are silenced are often the ones of Black and other minority women. What is critical to understand is that the role of antiessentialism is not merely to replace one voice with another but to highlight the complexities and struggles between the various voices (1990). This recognition of what Mari Matsuda (1989) calls our “multiple consciousness” allows people to move between their own personal consciousness and that of dominant society (Harris, 1990; Wing, 2003).

Intersectionality

To best understand the position of the antiessentialism, it is important to look at another tenet of GCRF, *intersectionality*. The theory of intersectionality, which was popularized by Columbia University and UCLA Law School professor Kimberle Crenshaw, asserts that “to understand the distinctive, antiessentialist plight of women of color, you must look at the intersection of their race and gender” (Wing, 2007, p.2). Race, class, and gender were once seen

as discrete categories for members of both dominant and minority groups, however it is the way in which the intersection of these categories of identity interact (including nationality, ethnicity, sexuality, age, class, etc.) that more accurately reflects the experience of one's position in society (Berger & Guidroz, 2009). GCRF recognizes that "gender cannot be used as a single analytic frame without also exploring how issues of race, migration status, history, and social class, in particular, come to bear on one's experience as a woman" (Samuels & Ross-Sheriff, 2008, p. 5). Additionally, those who utilize the theory "must attend to myriad overlapping and mutually reinforcing oppressions that many women face in addition to gender [therefore] it is not long acceptable to produce analyses that are embedded solely within an essentialist or universal collective experience as 'woman'" (p.5).

Distinctive Voice

Distinctive voice, as coined by Mari Matsuda (1996), allows people of color to speak about their own unique experience and oppression from their own point of view, allowing a space for "other" and not just one essential voice or experience (Wing, 2000, p.2). For example, Wing (2000) stated in the introduction to her anthology that as an editor she deliberately chose to feature the writing and voices of legal scholars who are women of color themselves "in an effort to break the silence and invisibility of such women in legal discourse" (p.2). Wing provided examples of a Japanese legal scholar, Kiyoko Kamio Knapp, who immigrated to the United States, earned her law degree, and writes from her perspective as a Japanese woman. Taime Bryant, a distinguished UCLA law professor, also contributes to the writings on Japanese women, but as Wing asserts, Bryant's writings "cannot be from the same perspective as Knapp's" (p.3). Wing goes on to say that although both Knapp's and Bryant's writing may or

may not be similar, Bryant's views are "not wrong" nor is there "one essential Japanese view" on any one issue—both voices need to be considered (p.3).

Additionally, another nuance of the distinctive voice perspective allows for women of color from different ethnicities to write about the experiences of other women of color. Wing gives an example of her writing and work on Black South African and Palestinian women even though she states she does not belong to either group. She said that "[a]s an African American whose people have suffered discrimination for nearly four hundred years in the United States, I can empathize with the struggles of these women to confront various forms of oppression" (p.3). She also makes the very critical point that she does not delude herself to think that her own voice makes her perspective identical to the women she is writing about or that she is superior to these women. Despite these caveats, distinctive voice has been criticized by conservative scholars such as Richard Posner, who claims that the "elite" legal scholars could not possibly speak on behalf of "disenfranchised people of color" (p.3). However, while Wing agrees with the argument that this sample of voices consists of elite lawyers and legal scholars, she disagrees with the inference that there could not be any shared experiences or commonalities with people of the same oppressed group. The critical point is that antiessentialism and intersectionality allow an individual's distinctive voice to emerge in a way that is not limited by discrete classifications of race, gender, or class.

Narrative/Storytelling Methodology

In order to implement GCRF as a legal practice, GCRF scholars and activists have embraced an often controversial *narrative or storytelling methodology* in legal practice. Storytelling carves out a space for bringing to consciousness the multiple experiences of women of color. However, this practice as a methodology is often criticized and attacked for lacking

intellectual rigor, being overly emotional and subjective, and in the end, non-legal (Wing, 2000). Despite these criticisms, GCRF pushes to show the significant value and historical importance of the oral tradition. Wing states that “[m]any of us prize our heritages in which the oral tradition has had historical importance—where vital notions of justice and the law are communicated generation to generation through the telling of stories” (p.5). She also makes the crucial point that telling stories “enables us to connect to those who do not understand hyper-technical legal language, but may nonetheless seek understanding of our distinctive voices” (p.5). The best known works utilizing the narrative/storytelling methodology are Derrick Bell’s *Faces at the Bottom of the Well* (1992) and *Afrolantica Legacies* (1997). Through his popular fictional heroine and lawyer-prophet Geneva Crenshaw, Bell uses this methodology to tackle complex systems such as race and class.

Future Directions in Integrating A Global Critical Race Feminist Theory into Clinical Social Work Practice

As a social worker working in mainstream direct practice, I engage with a foreign-born population of women who have experienced the most horrendous human rights violations and are survivors of trauma and torture. The voices of this diverse population of women continue to highlight for me the increasingly complex and dynamic world in which we live. Despite the arsenal of theories and techniques with which social workers are equipped upon graduation from our undergraduate or graduate programs and continuing education courses, I believe the field of social work is not fully prepared to support this particular population of women, who are often invisible, live on the periphery of society, and are perpetually silenced. Given the ease with which these women are re-oppressed and traumatically silenced, foreign-born women who are survivors of trauma and torture have complex needs that must be met.

Implications

While there is currently no empirical evidence supporting the efficacy of GCRF in social work practice, there are several reasons to believe that social work education and practice would benefit from an application of GCRF theory. The first direction for the application of GCRF theory would be to raise awareness in our own profession about the needs of the most vulnerable and oppressed women around their multiplicative identities in our twenty-first century society, both locally and globally. Butler, Ford, and Tregaskis (2007) have written about the frequent silencing of women's voices in social work practice. They posited that it is part of the human condition to "give shape to personal experiences, seek coherence through the process of selection and synthesis, ascribe consequence and value by such means, and make those accounts available to others" (p.285). They went on to show that "human understanding operates through storytelling and identity, indeed a sense of self is constructed through the interrelation of life events and the meaning ascribed to the life story" (p.44). An application of GCRF in social work practice could then offer a means to bring storytelling and identity to the forefront of an understanding of women's experiences, giving a voice to the voiceless.

Additionally, McPhail (2008) called for a re-gendering of the social work curriculum. In particular she addressed the need for cultivating a critical consciousness to address "the new complexities and realities of gender" in social work theory and practice (p.43-44). She stated that a crucial piece to updating the social work curriculum and thereby informing our clinical practice is to move "beyond specific content to teach critical gender awareness and consciousness" (p. 44). I believe that GCRF has the potential to support that critical consciousness. Although the social work profession is noted to be a female dominated profession, White male theorists dominate our curricula and practice.

The second direction for the application of GCRF to social work would be a re-examination of our clients' "concerns" that may be embedded in their intersectional and multiple realities. GCRF and CRT talk about color-blindness, a liberalist standpoint of disregarding an individual or group's race for the sake of seeking equality, a condition to which the social work profession falls prey more often than many social workers would like to admit. As social workers who want to seek justice, inherent in that presupposition is equality. But in seeking equality for the people with whom we work, we reinforce the notion that race is an aberration, not an essential ingredient to the human experience that needs to be acknowledged as such. This perspective is particularly important in our understanding of cultural competency and multiculturalism in social work theory and practice. Abrams and Moio (2009) argued that although cultural competency is "a fundamental tenet of social work education... [c]ritics charge that the cultural competence model is largely ineffective and that its tendency to equalize oppressions under a 'multicultural umbrella' unintentionally promotes a color-blind mentality that eclipses the significance of institutionalized racism" (p.245).

Lastly, Paulo Freire, progressive Brazilian educator, activist, and author of the globally acclaimed classic *Pedagogy of the Oppressed* (1970), addressed social workers at the Social Workers World Conference in Stockholm, Sweden, on July 30, 1988. In his plenary address he spoke to the heart of the social worker's work. He said "[i]t is impossible for a social worker to continue being progressive when he or she only talks progressive but acts conservative or reactionary... how is it possible to be progressive, but at the same time to be racist or sexist?" (Freire, 1990, p. 6). I believe that there is only so much talking we can do about the *multicultural* or *gendered* needs of our profession. Though some elements of GCRF, including narrative therapy and feminist therapy, are being utilized marginally by social workers, the full

application of GCRF to social work may provide our profession an opportunity to chart future directions towards the development of more enlightened, connected, and integrated critical social work practice.

As we have seen, GCRF is a rich, complex, and comprehensive theory that has many implications for furthering our knowledge base and practice skills as social workers. As the field of social work continues to develop in the twenty-first century, the challenges and needs of the people that we seek to serve are ever evolving and becoming more and more complicated. A progressive and critical standpoint from which to begin to understand these challenges is in great demand, and it is the hope that GCRF can begin to open a dialogue in our field that addresses this demand as it appears in our direct practice and education.

THINK GLOBALLY, PRACTICE LOCALLY: INTEGRATING GLOBAL CRITICAL RACE
FEMINIST STANDPOINTS INTO DIRECT SOCIAL WORK PRACTICE

Introduction – A Case Example

She was dark, very dark. Petite and drowning in remnants of African garb layered with donated clothing from decades past. Her face served as the backdrop to a story that reverberates around the globe. An African woman infected with HIV. With her narrow back pressed up against the dimly lit office wall, covered in local HIV/AIDS resources and pamphlets promoting safer sex practices, she was lost. Her eyes, though; they stood out, all on their own. In the first few minutes of our meeting her eyes alone told me her story. The terror, the loss, the isolation, the trauma. The second Liberian civil war displaced not only Rachel's body, but her mind and spirit too. Via a refugee camp in Ghana, Rachel arrived in New York City just three months prior to our initial meeting. She came with her three young children, her decreasing CD4 count, susceptibility to opportunistic infections, and her all-too-vivid memories of murder and rape. I, a white, privileged, American-born, ethnically Jewish and faithfully Buddhist, licensed and master's-trained social worker, was to acquaint her with the ways of safer sex practices and how she could reduce the spread of HIV infection. Her eyes drifted off and her gaze became noticeably fixed on her not so distant past. The tears gently rolled down her face. Stumbling for words, like a fish out of water gasping for air, I choked. I choked on my discomfort, my lack of experience in working with refugee survivors of genocide and civil unrest, choked on my mother tongue, and choked on the knowledge and experience on which I had come to rely in my social work practice. To proceed and meet the agency requirements for our initial meeting and complete a psychosocial assessment I feared may have resulted in a further trauma given her precarious mental status. I was paralyzed by indecision. I did not know if I should meet Rachel where she was, as that was a very scary, difficult, and unfamiliar place for not only me but for

her as well, or to continue with the assessment, risking further injury. I am sure that in that moment, my desperate attempt to search for the right words sounded just as convoluted to her as it sounded to me, if not more so. Clinically, the only thing I felt that I could do in that instance was to reassure her that she had great courage and strength coming to meet with me and that she was not alone. However, the “not knowing,” my uncertainty in that moment, seemed like a curse and not at all the gift I would later recognize it to be.

A Brief Look at Immigration

Women like Rachel are a growing part of the client population in mainstream direct social work practice in the United States. Immigrants have been journeying to the United States since the seventeenth and eighteenth centuries, weaving together the unique tapestry that is American culture. Between 2000 and 2009 there was a 23.8% increase in the foreign-born population, meaning anyone not a U.S. citizen by birth. By 2009 there were 38,517,316 foreign-born individuals in the United States, a 57.4% increase from the previous decade. In 2009, the foreign-born population made up 12.5% of the total U.S. population, compared to 11.1% in 2000 and 7.9% in 1990 (Migration Policy Institute, 2012). It is estimated that among this foreign-born population, 2,200 refugees arrive daily in the United States (about 800,000 annually) and 1,000 enter illegally across the Mexican border daily (Kokaliari, 2011, p. 374; Migration Policy Institute, 2012). While a majority of immigration to the United States used to be from Europe, currently immigrants from Latin America make up 53.1% of new arrivals, followed by Asia at 27.7%, Europe at 12.7%, Africa at 3.9%, North America at 2.1% ,and Oceania at .5% (Migration Policy Institute, 2012).

Whether individuals are migrating because of a “push effect,” the effect of people being pushed out of their country of origin usually due to negative factors such as “poor economic

conditions, lack of opportunity, discrimination, political oppression, and war,” or a “pull effect,” the effect of people being pulled or drawn to immigrate to another country usually due to positive factors such as “better economic opportunity, political freedom, and favorable reception toward immigrants” (Fong, 2004; Lee, 1966; Potocky-Tripodi, 2002, p. 13), the migration process is very difficult. Refugees like Rachel typically migrate because of push factors, fleeing war or political oppression in their homelands and fearing for the lives of themselves and their families. These factors often cause long term traumatic effects on an individual’s physical and mental health (Brown, 2008; Fong, 2004; Kokaliari, 2011).

When social workers work with women like Rachel, the complexities of their immigration experience and trauma history can be overlooked easily, especially within an agency context. Clinical and academic efforts in the field of social work have responded to changing demographics and developed varying understandings and presentations of “culturally competent” social work practice among immigrant populations (Chang-Muy & Congress, 2009; Fong, 2004; Lum, 2007; Potocky-Tripodi, 2002). However, despite these efforts, there still does not exist a means of fully recognizing and hearing the voices of the most vulnerable and oppressed populations of women with whom we work—foreign-born women who are survivors of trauma and torture—despite a great need to do so. The field of social work needs a standpoint to integrate into our curriculum and mainstream direct social work practice that fully and skillfully addresses the range and severity of trauma that transpires in the life of a highly tortured and traumatized immigrant woman (Brown, 2008). Therefore, I offer the theoretical and conceptual framework of global critical race feminism (GCRF) as a standpoint from which to practice social work with an all too often silenced and nearly hidden population.

Foreign-Born Women Who Are Survivors of Torture and Trauma

Foreign-born women, defined as women residing in the United States who are not U.S. citizens by birth, including naturalized citizens, lawful permanent immigrants, refugees and asylees, legal nonimmigrants (including those on student, work, or certain other temporary visas), and persons residing in the country without authorization (Chang-Muy & Congress, 2009; Potocky-Tripodi, 2002), have been migrating for the last three decades in increasing numbers, especially due to political, economic, and social forces outside of their control (Kokaliari, 2011). Of particular significance among foreign-born women migrating to the United States are those who are survivors of trauma and torture as experienced in their home countries who are then re-oppressed and re-traumatized during the migration and resettlement process in the United States (Chang-Muy & Congress, 2009; Kokaliari, 2011; Migration Policy Institute, 2011). The effects of the experience of torture on these women represents one of the most significant challenges for social workers.

Definition of Torture

Torture by its very nature is meant to obliterate an individual's identity, autonomy, power, control, and sense of self. Torture strips a person of his or her dignity at the hands of another (Amnesty International, 2011). The United Nations Convention Against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment defines torture as:

... any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official

or other person acting in an official capacity. It does not include pain or suffering arising only from, inherent in or incidental to lawful sanctions (United Nations, 1975, Article 1, ¶1).

Some of the most common forms of physical torture include “beating, electric shocks, stretching, submersion, suffocation, burns, rape and sexual assault,” as well as psychological tortures that often have the most serious and long-lasting consequences for the victims, which include “isolation, threats, humiliation, mock executions, mock amputations, and witnessing the torture of others” (International Rehabilitation Council for Torture Victims, 2012).

By definition, torture occurs at the hands of public officials or those acting in an official capacity in which they give consent or acquiesce to the practice of torture (2012). These perpetrators can include prison officers/detention staff, police, military, paramilitary forces, and state-controlled contra-guerilla forces. Other perpetrators may also include health professionals, legal professionals, co-detainees acting with the approval or on the orders of public officials, and death squads, as well as opposition forces and in the case of a civil war, the general population (2012).

Gender and torture

While anyone can be a victim of torture and no one is immune, women and girls are particularly susceptible to these heinous acts despite the common belief that torture most often occurs among males (Amnesty International, 2011). One reason for this belief is that the way in which women are tortured and by whom has not been widely accepted or even understood among law enforcing communities worldwide, until recently (Amnesty International, 2011; Brown, 2008). Legal scholar Catherine MacKinnon spoke out about this very problem, stating, “[e]ither these forms of violence are so normal they become invisible and marginalised, or they

are so extreme they become exceptional or a one-off or the woman is simply disbelieved” (Amnesty International, 2011, p.12). This is because acts of torture that are specific to women not only take place in the public sphere but also in the private sphere, such as in homes or communities and not in state sanctioned spaces, and thus not considered a problem of the state. For example, when a woman is tortured, more often than not she and/or her children are sexually assaulted, thereby bringing shame to her family, and her family then in turn shames or betrays her, leaving her more susceptible to domestic violence and further trauma (2011). Other harms that are specific to women are so-called “honor-based” violence, trafficking, violence against lesbian, bisexual, and transgendered people, female genital mutilation, denial of reproductive rights, or forced sterilization and abortion (2011). MacKinnon argued that the state should not be absolved of responsibility for the rape of women because “such crimes are neither random nor individual but *defined by the distribution of power in society*” (2011, p.19). MacKinnon also claimed that “the abuse is systematic and known, the disregard is official and organized, and the effective governmental tolerance is a matter of law and policy” (p.19). How then as social workers does this experience of torture manifest in our mainstream direct practice in the United States?

Consequences of Torture

As a consequence of torture in all its various forms, many survivors experience some degree of trauma or suffer from post-traumatic stress disorder (PTSD) due to the experience of violence that falls well beyond the standards of acceptable human behavior (Engstrom & Okamura, 2004). The sequelae of these traumatic experiences may include symptoms such as flashbacks, dissociation, persistent symptoms of increased arousal, anger, difficulty concentrating, hypervigilance, exaggerated startle response, intrusive thoughts, severe anxiety,

insomnia, nightmares, depression, and memory lapse (American Psychiatric Association, 2000; Herman, 1997; International Rehabilitation Council for Torture Victims, 2012). In addition to the physical and psychological scars, torture survivors experience difficulty in their social functioning as well. They often experience feelings of guilt and shame as triggered by the humiliation of what they have endured, along with the experience and related feelings of betrayal by their family, friends, or even their nation. Their experience is often so debilitating that they are unable to work, and are further isolated from their friends and family, which inculcates a feeling of distrust in one's intimate circles and that of the government and state authorities (Engstrom & Okamura, 2004; International Rehabilitation Council for Torture Victims, 2012; Winter, 2011). Given these pervasive and persistent realities, survivors of torture avoid talking about their experiences not only because of the psychic pain that surrounds the retelling but also because so many victims have been told by their torturer that no one will believe them if they disclose what happened to them (Fabri, 2001) or for fear that the disclosure may result in further violence to them and/or their family.

Refugees and in particular asylum seekers are often re-traumatized during the migration process. Premigration experiences may include leaving family members, homes, and material and sentimental belongings behind. Additionally, for those who are leaving hastily, departure can be disorganized, chaotic, and dangerous. Entering a country that is completely unfamiliar, amid the risk of deportation, only intensifies the terror, especially for those refugees whose means of transport itself is dangerous. These refugees can continue to witness or be the victims of violence, face physical sickness such as dehydration and hypothermia, and risk death by drowning or at the hands of their smugglers or border patrols (Potocky-Tripodi, 2002). As Silove, Tarn, Bowles, and Reid (1991) suggested, rather than thinking about the consequences of

torture in terms of “post” traumatic stress, we should think about it as “continuous” traumatic stress. Unfortunately, there is limited literature to guide our profession when we do engage with this population, and the literature that does exist notes that there are few social service professionals who are even aware when a survivor of torture comes across our paths in our mainstream direct social work practice (Engstrom & Okamura, 2004; Winter, 2011).

Current Social Work Practice with Immigrant and Refugee Populations

To date, the way in which social work practitioners have come to understand the particular needs of immigrant and refugee populations is usually through elective courses in schools of social work or through work directly with foreign-born populations in resettlement or immigration-specific agencies. Schools of social work are beginning to address the more current understandings of the experience of immigration and are offering opportunities for their students to learn about their clients' experience both here in the United States and abroad. For example, Chang-Muy and Congress (2009) talked about the New York City Social Work Education Consortium Immigrant Child Welfare Fellowship Project, which offered students the opportunity to travel to Ghana to learn about the premigration experience of their clients who come from West African countries (2009). Schools of social work at the University of Pennsylvania, Boston College, Smith College, and Rutgers University are beginning to offer opportunities as well for international studies. Most recently, the Fourth Conference on International Social Work was held at the University of Southern California's School of Social Work and focused on innovations in teaching, research, and exchange of knowledge between nations and cultures (Conference on International Social Work, 2011), and the fourth annual Global Social Work Student Conference will take place supplementary to social work day at the United Nations.

Despite these efforts, a majority of students are not exposed to this content in their core classes and few elect to take courses on immigration that do cover this material or attend the auxiliary events that address working with this population (Healy, 2001; Negi & Furman, 2010). Practitioners and scholars such as Potocky-Tripodi (2002), Wetzel (1995), Donald Lum (2007), Fong (2004), Chang-Muy and Congress (2009), Perez-Foster (2001), and Berzoff (2011; 2012) have offered significant and essential guidance for working with multicultural and diverse populations at the margins of society. Chang-Muy and Congress (2009) and Mollica (2006; 2011) have noted, however, that even the most current theories and evidence-based applications for working with those who are traumatized may not be appropriate for individuals who are survivors of trauma, torture, and conflict generated abroad.

GCRF Tenets for Social Work Practice

Beginning to think about how social work educators and practitioners can incorporate an appropriate epistemology to meet the needs of this very complex population in our direct social work practice is challenging. I believe that global critical race feminism is a fitting framework to offer as a conceptual model to begin to address the needs of this population in social work practice. Therefore, in an effort to illuminate the way in which we understand social work practice with foreign-born women who are survivors of trauma and torture, I will apply the five tenets of global critical race feminism—globalization, antiessentialism, intersectionality, distinctive voice, and narrative/storytelling methodology—to direct practice.

Globalization

The first tenet, globalization, offers social work practitioners the opportunity to recognize social problems not only as they occur internationally, but locally in the United States.

Globalization as a construct is quite complex, and to fully deconstruct it is beyond the scope of

this paper. However, for the purpose of this paper, globalization can be understood as a “set of *social processes* [italics appear in original] that appear to transform our present social condition of weakening nationality into one of globality²... globalization is about shifting forms of human contact” (Steger, 2008, p.9). Recognizing the tenet of globalization in direct social work practice honors the various and intersecting ways in which our clients come to engage with us as social workers. For social work practice, globalization functions as a construct to speak of geography, location, and dislocation. As social workers, it is critical that we understand the places and spaces from which our clients have migrated and those locations and spaces towards which they are migrating.

Akhtar (2011) and Brown (2008) spoke at length about the psychology of dislocation and the fundamental importance of acknowledging the trauma of geographical dislocation in the therapeutic relationship. For example, Akhtar spoke of how understanding the places from which our clients come geographically, socially, politically, and psychologically can tell us a lot about where they are moving in their physical, familial, communal, and psychological spaces (2011). In practice when working with foreign-born women, it is important to keep in mind the tenet of globalization as it encourages us to work from a global space and not to forget the importance of location and displacement. While it may not initially be necessary to explicitly discuss the details of a client's³ migration, to acknowledge and validate the client's loss of homeland and dislocation (even if it was for safety or better opportunities for herself and her family) offers a

²Steger (2008) coined the term “globality” to speak to a social condition that is “characterized by tight global economic, political, cultural, and environmental interconnections and flows that make most of the currently existing borders and boundaries irrelevant” (p.8)

³*Client* will be used as a general term to refer to a member of a population being served by social workers. In other contexts these members might be termed patients, consumers, students, and so on.

starting point to build a safe, trusting relationship and more equal distribution of power (Fabri, 2001; Mollica, 2006, 2011; Silove, Tarn, Bowles, & Reid, 1991; Winter, 2011).

Antiessentialism

Antiessentialism speaks to the notion that there is not one essential female voice (Wing, 2007). In other words, the collective voice of all women is not represented by the dominant culture, which in the United States is represented by White, middle-to-upper-middle class women of privilege. Instead, women are comprised of multiple identities that intersect, giving rise to the way in which a woman experiences herself in her world. This concept can translate to how we understand the various and diverse populations of women with whom we work, as well as inform our conceptual understanding of women as clients.

Historically, social work developed out of a modern industrial worldview, and as a product of nineteenth century industrialization, social work flourished during a time when the ideal for addressing social problems was through a universal and positivist framework. Because of this universalist thinking, the social work field developed its commitment to science as a way of intervening in people's lives that applies in the same way to everyone, independent of their culture and society (Payne & Askeland, 2008). Though the development of a cultural competency standpoint gave way to a better understanding of our clients' needs in their distinct cultural environment, understanding the needs of our clients within an agency setting or institution is quite complicated. Given the way in which agencies, institutions, and schools operate, there is often little room to meet all the distinct cultural needs of our clients. In fact we may easily essentialize all immigrant and refugee populations without recognizing the distinction between the multitude of experiences, including those who are survivors of trauma and torture. As such, the role of antiessentialism in social work is to recognize that there is not one essential

client. The concept of antiessentialism pushes back against the traditional voice of the social worker and/or agency trying to fit a client into one type of system that may overlook her complex individual needs.

To integrate the concept of antiessentialism in mainstream direct social work practice, social workers can consider “adjustments to the therapeutic frame” when meeting with foreign-born women who are survivors of trauma and torture (Fabri, 2001, p.452). These adjustments include creating a safe environment where clinicians who have limited experience working with survivors of torture begin to develop the awareness for the need to believe the “unbelievable” (p.453). Often, acts of torture that clients will either allude to or overtly share are so heinous as to generate disbelief in the worker. The social worker then unconsciously begins to collude with the torturers, thus risking re-traumatization. It is essential then to allow the survivor to become, as Fabri puts it, the “teacher and guide of the clinician” in order to make the necessary adjustments to treatment (p.453). Another adjustment to consider is the power dynamic between the social worker and the client. Survivors of trauma and torture have experienced an extreme imbalance of power, rendering them wary of trusting anyone in positions of power or authority (Silove, Tarn, Bowles & Reid, 1991). In addition, because there are numerous ways in which the client may have experienced this imbalance of power through the acts of torture, she may not feel comfortable sitting face to face in an office with a closed door. She may also feel uncomfortable in a large group feeling as if she is on display, or uncomfortable sitting in a conference room with a long table and many chairs, as any of these scenarios may remind a survivor of her interrogation or public displays of cruelty (Fabri, 2001). In situation like these, the social worker must be prepared for the verbal and non-verbal cues that a client may offer and make adjustments accordingly.

Intersectionality

In order to fully understand the concept of antiessentialism, social workers must also understand intersectionality. Intersectionality asserts that in order to understand the distinctive and antiessentialist plight of women, we must first understand women in their multiple and intersecting identities, which include gender, race, ethnicity, nationality, sexuality, religion, and so on (Wing, 2007). No longer can gender, race, or ethnicity be used as single analytic frames for understanding the experience or plight of any one person; rather, observing and analyzing the depths at which the intersection of identities captures “both the structure and dynamic consequences of the interaction between two or more axes of subordination” are critical to understanding the needs of foreign-born women who are survivors of trauma and torture (Crenshaw as cited in Murphey, Hunt, Zajicek, Norris, & Hamilton, 2009, p. 2). While intersectionality is not a new concept for the field of social work, it can be especially useful in conceptualizing the needs of these clients and our role in helping them.

Keeping in mind that torture does not discriminate, Fabri wrote that “[t]orture survivors do not have a specific profile. They are children—daughters and sons. They are women—grandmothers, mothers, wives, sisters, and aunts... They are educated and uneducated, the rich and poor, the politically active and apolitical, the working and unemployed, the farmer and businessperson, the rural and urban. A survivor of torture does not fit one composite” (2001, p.452). Though we all live with multiple and intersecting identities, survivors of trauma and torture, more so than others, are faced with the immediate destruction of their identities by the acts of violence alone (Boulanger, 2007). Brown (2008) asserted that the way in which we come to understand identities in a multicultural and trauma-informed context is to address both the

private and public domains of identity. Therefore, exploring with our clients the ways that the trauma events have impacted all areas of their lives, internally and externally, is critical.

Distinctive Voice

Distinctive voice is the term coined by Mari Matsuda (1989; 1996) that refers to people of color speaking about their own unique experience and oppression from their own point of view and in their own native and nuanced language. As social workers, we can think about distinctive voice in two ways: 1) linguistics and the literal use of language and 2) figuratively, giving clients the opportunity to have their voice and narrative heard.

Of the many issues that foreign-born populations encounter during the immigration process, language is a key challenge facing foreign-born populations immigrating to a new country (Kolkaliari, 2012; Perez Foster, 2001). Although not speaking a country's native language may pose a barrier to accessing many needs while settling into a new homeland, there are specific challenges to the social work community. One of these unique practice challenges is being able to assess the psychic pain and psychological needs of our clients. Brown wrote that "[f]or members of some target ethnic groups English is not the language of emotion" (2008, p. 166). In fact, Perez Foster (1996) wrote extensively about how different representations of self are organized around a person's different languages. Therefore, when working with survivors of trauma and torture it is critical to understand that a client's ability to share information about the experience of trauma may only be possible in the client's native language. Although resources do exist in the social work community to access interpreters, Brown shared her experience of encouraging one of her clients to speak about her trauma in the client's native language of French without an interpreter. This act, she stated, empowered her client to speak her narrative of pain in the most honest and authentic way she could (2008, p. 166) while Brown as a clinician

paid careful attention to her affect. Brown concluded that it is not as necessary for the clinician (or social worker) to always comprehend the content of what the client is saying; rather, it is more important to encourage the client to share the actual narrative and for the social worker to be present with the client's affect, to support the client in recognizing her experience in a language that is meaningful for her, and to reflect what Brown called "the emotional syntax of their culture" (p.167).

Finding opportunities for our clients to be heard is not only challenging literally but figuratively as well. Though universally people want to be heard, for some people, being heard is psychologically, socially, politically, and culturally complicated (Abels & Abels, 2001). Having a "voice" has become in the past several decades a metaphor for civil, sexual, and human rights—a powerful way to acknowledge one's existence (2001). However, as Abels and Abels stated, "[t]o the degree that you have power, you have a voice" (p.159). Working with survivors of trauma and torture means, by definition, working with those whose power has been taken away. Therefore, reestablishing "voice" is critical in this work. Social workers must consider several important questions when thinking about a client's voice. How do people communicate in the client's homeland? What are customs of communicating with family members, close personal friends, acquaintances, authority figures, and the general public? Was the client silenced in her homeland because of traditional or religious beliefs? With whom does the client openly communicate and about what? As a survivor of torture, is the client afraid to speak to authority figures or psychiatric or medical personnel due to the nature of the trauma? Whether we speak on behalf of those unable to do so or empower those who are most marginalized to speak for themselves, distinctive voice helps us to live up to our professional duty as social workers to give voice to the oppressed and marginalized.

Narrative/Storytelling Methodology

In the field of law, sharing a narrative or encouraging a legal scholar to write about her experience as a legal scholar and female practitioner of color is unusual and often not regarded as being intellectually rigorous. In fact, narrative and storytelling methodology is often seen as being overly emotional and subjective, and in the end, non-legal (Wing, 2000). Legal practice in fact discourages sharing one's subjective experience. GCRF practitioners, however, use a methodology of storytelling to show that one's position in society and multiple and intersecting identities do in fact matter and influence the way in which (in the field of law) legal cases are understood and rulings made. Unlike the field of law, the field of social work relies on the methodology of our clients sharing their narratives, telling their stories to move beyond their individual and systemic oppression, understand their inner most psychological processes, overcome hardships, and improve their life circumstances. For many foreign-born women who are survivors of trauma and torture, their narratives are not readily accessible to share with others. As noted in the discussion of distinctive voice, sharing one's narrative may be difficult due to linguistic and literal language barriers, and just as often the narratives that these women have to share are incredibly painful and difficult to articulate in any language.

Narrative/storytelling methodology in the field of social work goes beyond the typical therapeutic conversation and becomes a way of testifying to the extreme experiences that foreign-born women who are survivors of trauma and torture endured that are outside the purview of everyday knowledge. Giving testimony or *testimonio*, or in some circles, testimony therapy, is the process by which survivors of organized violence, extreme trauma, and torture are helped to heal from their traumatic experiences (Abels & Abels, 2001; Aron, 1992; Felman & Laub, 1992; Herman, 1997; Mollica, 2006; 2011; Potocky-Tripodi, 2002). Bearing witness to

narrative accounts of these experiences revives in clients a sense of power that has been taken from them. (Boulanger, 2007; Felman & Laub; 1992). Inherent in the narrative/storytelling methodology is the idea of bearing witness. While it may be enough for a women of color to share her stories of discrimination and oppression, there is great value to having her story witnessed by others. As social workers it is our role to not only encourage and support the telling of our client's narratives but bear witness to the experience of pain and suffering endured in their life.

Rachel: GCRF Case Analysis

"Rachel" is a composite of multiple women with whom I have worked. I will use her case to explicate the use of GCRF in social work practice.

Globalization

I first met Rachel when working as a prevention specialist at a New York City-based HIV/AIDS organization. My initial introduction to Rachel was through her intake sheet, completed by a case manager who had referred her to our organization from a local health center. I learned that Rachel was a 35-year-old mother of three and a recent refugee to the United States from Monrovia, Liberia, via a refugee camp in Ghana. When I first read this I thought, "OK, what do I do with this information" and "Where exactly is Monrovia?" Going immediately to the internet to figure out exactly where Monrovia and Ghana are located, I in turn learned about the first and second Liberian civil wars, the violent atrocities perpetrated during the wars, and the multitude of human rights violations that had been occurring over the course of nearly ten years. Despite my efforts to learn a bit more information about the client's background, I couldn't imagine how this would impact our work together.

Our initial meeting took place in my dimly lit office, which was shared with two other coworkers and covered in HIV/AIDS prevention pamphlets and posters promoting safer sex education and HIV testing awareness. Though I engaged her in the same kind and warm way as I did all my clients, my initial meeting with Rachel felt terrible. As noted in my earlier introduction to Rachel, “I felt like a fish out of water gasping for air,” and felt that I lacked not only the conceptual framework and skills to engage with her but quite simply and literally the words to even begin a conversation. I remember feeling quite out of place, dislocated from my usual confident and knowledgeable professional self—like I was a foreigner in my own office and in my own job. Though I didn’t realize it at the time, I think it is fair to say that this may describe the way she too was feeling, dislocated from the familiar—her homeland, family, friends, and daily way of life. If I had had this perspective, I would have begun the initial session very differently. Instead of trying to complete the required psychosocial assessment (which was mandated protocol upon meeting new clients) I would have spent our time together simply discussing geography and location.

As suggested earlier, thinking about globalization offers opportunities for social workers to recognize the importance of the intersection between global and local spaces. I had come to learn that Rachel was in deep mourning over the loss of her family, who had been brutally murdered in front of her eyes, her home, her worldly possessions, her job in Monrovia’s bustling market, her dignity after being violently raped as an act of war, and her health after learning while in the refugee camps that she was HIV-positive. Now, she comes to find herself in the United States alone with her three young children, no family or friends, an unwanted pregnancy, and quickly deteriorating health. She is sitting in an unknown office building, with a White woman who is a stranger, being asked questions about her knowledge about her HIV infection,

risk behaviors, and prevention practices. Her journey in the course of a few months from her home to my office was ignored. I later came to find out through our work together that she longed for her dead relatives, friends, work, religious community, home, and her ordinary activities of daily living. If I had been able to acknowledge the loss of her homeland and everything that was connected to this loss, and the pain that I could see on her face and the tears in her eyes, I would have validated how she was feeling in our initial few meetings and grounded our work together while honoring her homeland and experiences in West Africa and the new experiences and life she was working hard to forge in the United States.

Antiessentialism

In my initial interaction with Rachel as a client, I recognized that our work together would be different from the way in which I engaged and worked with other HIV-positive clients who needed HIV prevention education and counseling. Rachel, unlike many of the American-born clients with whom I worked, was not familiar with the social service and health care system. Furthermore, for Rachel, navigating an unfamiliar system of physicians and other persons in positions of power and authority may have been overwhelming, confusing, and terrifying. Early on in our working relationship I came to believe that our work could not be confined to the four walls of my office but would require assisting her to navigate a complex system of care. I felt that accompanying her to her numerous appointments with infectious disease, internal medicine, and OBGYN physicians would give us an opportunity to ground ourselves in our work together by visiting the unfamiliar environments that she would encounter.

It was in these moments that our relationship began to develop and she began to put her trust in me. Fabri (2001) named this concept “therapeutic accompaniment,” a powerful tool in developing a working relationship with a survivor of trauma and torture. It was in the waiting

rooms, hallways walking to and from various appointments, in the actual examination room, on the streets of New York City, at fast food restaurants, and in her home in Harlem that she began to develop trust in the therapeutic relationship, allowing for our work to progress. This was evidenced by her increasingly reaching out to me over the phone, asking for my opinion about things related to her children and their needs in school or calling when she didn't feel well to see if and how I could help her. When she gave birth to her fourth child she wanted me to visit her in the hospital and at home to get to know the baby in addition to her three other children. Having reached this point in our relationship, we could return to the initial reason for our meeting and collaboratively work to reduce the risk of HIV transmission to her unborn child, reduce her risk of becoming re-infected with HIV, and ensure that she was able to address her overall health needs related to her HIV infection. As a social worker, I was able to recognize that while her needs in the area of HIV prevention were similar to the needs of the many other clients with whom I worked, her needs as an HIV positive woman from West Africa resettling in an urban landscape were quite distinct. Therefore, as a client her particular needs needed to be reframed through a cultural context and not the universal, essential, and positivistic framework through which many of our agencies still demand we view our clients.

Intersectionality

In being able to address her HIV prevention needs, it was imperative that together we understood who Rachel was in her distinct and intersecting identities as a woman, Liberian, daughter, mother, survivor of rape and torture, refugee, sister, person living with HIV, Christian, client, and so on. Though we did not explicitly discuss her identity formation via the concept of intersectionality, in practice many of her intersecting identities and experiences influenced the way in which we worked together.

This was most evident when she became pregnant with her fourth child. It is unclear how she became pregnant, though I suspect she was either raped by her landlord or was trading sex for rent. Either way, she and I needed to address her sexual behaviors and safe practices as well as her pregnancy. Because she was terrified to have another child and unsure of how to terminate a pregnancy here in the United States, she reported that she tried to end the pregnancy by using a hanger, throwing herself down the stairs, and taking special herbs from Africa. I discussed what pregnancy termination is like in the United States, emphasizing that it is not a crime. She feared being deported if authorities learned that she terminated the pregnancy. Additionally, she was afraid of giving birth. Many Liberian mothers died in childbirth, and Rachel was terrified that she would die as well, especially if it were a caesarian delivery, a necessary course of action to decrease the risk of HIV transmission to the baby. Recognizing these fears, I worked to connect her with a doula in the New York City West African community to support her during her pregnancy, labor, and delivery. Thus she was able to honor the birthing practices from Liberia with which she was familiar while accommodating her needs here in the United States.

Distinctive Voice

My initial biggest challenge in working with Rachel centered around language. Though Rachel spoke English, it was Liberian English, a distinct dialect that was at times very difficult for me to understand. I am sure she found my American English, accent, and cadence difficult to understand as well. We spent many a conversation responding to each other with “huh?” or “what?” or “could you say that again?” When she spoke American English her affect seemed more flat and more dissociated than during the times I observed her speaking a more familiar dialect of Liberian English to her friends in the community. When she would speak in her native language I was able to observe her shifting in her affect and feeling states more readily than

when she was speaking to anyone else in American English. While this contrast could be attributed to a number of different factors, it was clear that her native language put her more at ease and allowed for her feelings to more easily surface.

Moreover, beyond “hearing” her linguistic voice, it became imperative to listen for her voice as a survivor of trauma and torture. For example, her status as a survivor of torture was easily overlooked in the medical establishment. One morning I accompanied her to an OBGYN appointment. As she was lying on the table being examined by the resident, the resident interrupted the procedure to call for her attending for what seemed to me like an eternity, leaving a specula in place protruding out of her vagina. Tears of discomfort and utter fear flowed down Rachel’s face. She quietly spoke, briefly telling me about the violence that took place to her body and that “they” hurt her and they “put things inside of her.” She then became silent as we sat together exposed to the horrors of her past and present circumstances. Embedded in the principle of distinctive voice is the assumption that often there are many voices and narratives that go unheard or are silenced. Had Rachel’s distinctive voice been heard before this moment, I could have helped her physician better understand Rachel’s torture history and avoid situations that might re-traumatize her.

Narrative/Storytelling Methodology

Rachel was a very quiet woman with a depressed affect, and we spent much of our time together in silence. While she did not speak much verbally, her eyes and body language shared a great deal. I would observe her drifting off into dissociative states, crying quietly to herself. At times she would share glimpses of her life story, most often of the trauma she experienced in Liberia and upon arrival to the United States. She revealed in bits and pieces her experience of witnessing the murder of her parents and siblings, her experience of rape in Liberia and the

United States, learning of her HIV status in Ghana, and missing her life back in Monrovia. She shared with me what it was like to live in Monrovia and the difficulties of what it is now like living in a foreign land and working so very hard to negotiate her new life. It was in the moments of silence, in our travels together to her various appointments, in her home, and through her words that she began to construct her trauma narrative. I bore witness to her testimony through her verbal and non-verbal exchanges.

The literature of GCRF that explicates narrative and storytelling methodology, as well as work on narrative therapy, argues for the healing benefits to reconstructing one's past trauma narrative and creating a new narrative for one's present and future lives both privately and publically. In private, this methodology allows women survivors of trauma and torture to process their traumatic experience and create a new narrative of growth and healing. This narrative can then be used in various forms of media such as fiction and non-fiction literature (Cleave, 20120; Kara, 2012; Kassindja, 1999; Kristoff & WuDunn, 2012; Levine, 2010), documentaries such as *Pushing the Elephant*, (Davenport, Mandel, Chevigny, Tucker, & Mapendo, 2010) and *Women, War, and Peace* (PBS, 2012), and through social action organizations and activism to allow the public to be educated about the atrocities occurring among women worldwide in the hopes of bringing these actions to an end.

Social workers, as a process of self-reflection, also co-create narratives of their experiences while working with this particularly oppressed and silenced population. Working with Rachel forced me outside of my personal and professional comfort zone and challenged me to put my clinical practice and theoretical underpinnings to the test. I was unfamiliar and uncomfortable with her multiple traumatic experiences as well as her process of migration and resettlement. Within this unknowing, however, we were able to be open to learning about one

another and create new knowledge about how we would best work with one another.

Additionally, co-creating a narrative about Rachel's experience affords me the opportunity to share a narrative that can advocate for the needs of others, ensuring that silenced and oppressed voices like hers are heard.

Conclusion: A Collaboration in Knowing

There is much we do not know about direct social work practice with foreign-born women who are survivors of trauma and torture. Current multicultural theories and cultural competency practice models require that we acquire and assume knowledge of the populations with whom we work, which may result in essentializing certain groups of people and not being open to acknowledging populations with whom we are less familiar, including foreign-born women who are survivors of trauma and torture. GCRF not only offers an explicit multicultural and feminist standpoint from which to address this population, but approaches clients from an anti-essentialist and client centered perspective. In working with Rachel, I was most challenged by "not knowing." I came to learn that "not knowing" can be productive, not paralyzing. A GCRF standpoint means not simply understanding immigrants, or Liberians, or HIV-positive women, but understanding a client like Rachel within her multifaceted and intersectional identities. GCRF affords clients and practitioners alike the opportunity to create a deeper, richer dialogue and space in which to work and heal.

As Rachel and I went our separate ways after her appointment with the gynecologist, just being slightly more comfortable in our "not knowing" proved to be the beginning of what would be one of my most important social work relationships. I was able through her distinctive voice, narrative and storytelling to reflect upon my own story and narrative as a social worker, and together we began to sit with each other's differences, uniqueness, and consciousness, thereby

creating a deeper, richer dialogue and space in which to work. In this way, the theoretical standpoint and conceptual framework of GRCF has the potential to bring this perspective to all direct practitioners and make a great contribution to the field of social work.

DISCUSSION

Introduction

Historically the field of social work developed as a profession with international sensibilities through the work of early social work pioneers in the late nineteenth and twentieth centuries. Working closely with immigrants mainly originating from Southern and Central Europe, social workers played an essential role in supporting men, women, and children to maintain their ethnic identities while acculturating to their new homeland. Despite these efforts, social workers were pulled towards a rapidly modernizing, industrial landscape that included a universalist and modern rhetoric that began to pervade social work discourse and practice. This shift moved social work practitioners away from a focus on people's distinct culture and towards a "melting pot approach" with an effort to assimilate individuals and groups into an American way of life (Kholi, Huber, & Faul, 2010).

It was not until the late 1970s and 1980s, when social work scholars and practitioners began to question the absence of the voice of African Americans in research and practice, that scholarship towards ethnically sensitive social work began to take place. A new frontier for cultural awareness began to develop in the field during the 1980s, reaching a fuller expression with research, education and practice mandates in the late twentieth and early twenty-first century. Despite the efforts of social workers to advance the practice of culturally competent social work throughout the past two decades, there remains a gap in social work theory and practice that addresses work with immigrant and refugee populations, particularly foreign-born women who are survivors of trauma and torture. The aim of this dissertation is to offer a theoretical and conceptual framework, global critical race feminism, as a means of filling this gap. Through a literature review, the purpose of this dissertation is to introduce GCRF as a

theoretical framework for the field of social work as a means of contributing to social work epistemology, offering GCRF as a conceptual framework to be integrated into direct practice with foreign-born women who are survivors of trauma and torture.

Paper One

The first paper of this dissertation introduces a theory, global critical race feminism, that has not previously been applied to the field of social work. The impetus for this introduction is to offer a historical and theoretical overview of GCRF in order to later contextualize its use for integration in mainstream direct social work practice specifically with foreign-born women who are survivors of trauma and torture. GRCF, a theory founded in the field of law, can be traced from its roots in legal scholarship through its appropriation in other fields such as psychology, education, human rights, and liberal arts.

The paper traces the trajectory of GCRF from its more specific roots in critical race theory, critical legal studies, and Black feminist thought through its development into critical race feminism and later global critical race feminism. In tracing the development of GCRF, five main tenets emerge that serve as the foundation for understanding the theory: globalization, antiessentialism, intersectionality, distinctive voice, and narrative/storytelling methodology. The first paper serves to explicate these tenets as they are understood in the field of law; the second paper serves to apply these five tenets to social work practice with foreign-born women who are survivors of trauma and torture.

Paper Two

The second paper of this dissertation illustrates how GCRF can be applied to the field of social work for building an epistemology in working with foreign-born women who are survivors of trauma and torture. This paper introduces the population for which GCRF can be

applied, outlining the prevalence of foreign-born women who are migrating world-wide due to both push and pull effects of migration. Push effects include individuals and families being pushed out of their homelands due to poor economic conditions, discrimination, and oppression based on gender and sexual orientation, or political conflicts and war. Pull effects involve individuals and families immigrating to a new country looking for better economic opportunities and political freedom. Foreign-born women who are survivors of trauma and torture often migrate seeking refuge from traumatic experiences such as political oppression, gender-based war crimes such as rape, sterilization, denial of reproductive care, forced abortions, fear of “honor-based killings,” genital mutilation, and sexual and labor servitude.

As evidenced by the literature, social workers are not prepared to engage with this particular population in our mainstream direct social work practice. Often students of social work elect to work with immigrant and refugee populations, but even when they do, the unique psychological, medical, and social needs of this population may not be understood. Those social workers who do not seek to work specifically with immigrant and refugee populations may be ill equipped to begin to engage with this population, even as women who are survivors of extreme violence and trauma are presenting in increasing numbers in our direct social work practices. Therefore, in an effort to address the lack of literature and knowledge about the needs of this population, I offer global critical race feminism as a conceptual framework for understanding the needs of this population. To do so, the five tenets from the first paper—globalization, antiessentialism, intersectionality, distinctive voice, and narrative/storytelling methodology—were reintroduced, this time explicated in light of their use in social work practice. All five tenets were then applied to a composite case study, “Rachel,” to further elaborate on their applications for use in practice. The culmination of these two papers suggests that global critical race

feminism is a much needed standpoint and theoretical framework that adds to our already existing multicultural competencies but speaks to the most current needs of both a highly vulnerable and oppressed population and the evolving needs of our mainstream direct social work practice in the United States.

CONCLUSION AND IMPLICATIONS

Conclusion

This dissertation opens with Emma Lazarus's poem, "The New Colossus." This poem was commissioned by a friend of Lazarus in an effort to raise money for the completion of the construction of the base of the Statue of Liberty. Although the poem was read at the 1886 opening dedication of the statue, it was not until 1903, after the death of Lazarus, that her poem was engraved on the plaque on the base of the Statue. With Lazarus's words and the passing boats carrying thousands of immigrants through New York harbor to Ellis Island, the Statue of Liberty came to symbolize not only freedom and democracy but the plight of immigrants entering the United States (Jewish Women's Archive, 2012). Though cultural, social, and political influences continually change and challenge the sentiments of Americans regarding immigration to the United States, Lazarus's words continue to speak the truth for so many of the immigrants in the United States today. Though written well over a century ago, the themes that speak of the struggle between old and new, voice and silence, freedom and oppression are salient today just as they were one hundred and twenty six years ago (2012).

Today, women and men, boys and girls worldwide migrate across the globe looking for better opportunities and often come to the United States in search of the American dream. As social workers, we often meet these men, women, and children at the front doors of our agencies and in our social work practice. As this dissertation has shown, despite the development of multicultural competencies to meet the needs of the diverse populations we serve, we have not yet met the needs of some of the most marginalized and oppressed members of the immigrants and refugee populations—foreign-born women who are survivors of trauma and torture.

Conceptual frameworks such as GCRF can aid the field in developing further epistemologies and applications to better serve this population.

Implications

Research

Utilizing the foundations set forth in this dissertation, further research is needed to better understand the unique experiences and needs of foreign-born women who are survivors of trauma and torture, while at the same time understanding the needs of mainstream direct social work practitioners engaging with this population. Both quantitative and qualitative research would be useful to further understand the needs of this population. Utilizing a qualitative approach can allow for the field to hear a gender-specific narrative of women to better inform the phenomenon of displacement, process of migration, and experience of political torture and gender based war crimes—all areas that have not yet been addressed with a gendered and intersectional approach in the field of social work. Quantitative research can offer opportunities to learn about barriers to foreign-born women who are survivors of trauma and torture accessing social and medical services especially as it affects family planning and the health care of their children. Quantitative research can also be utilized to further study the effects of gender-based traumas to learn of their outcomes and further implications for psychological and social services.

Education

The second major implication of this work would be to use GCRF to move the epistemology about this particular population forward in social work education. At the master's level, I believe that this conceptual framework can be integrated into the curricula of both foundation courses such as practice, human behavior, policy, and research, as well as elective classes. Elective classes could take an in-depth look at the relationship between globalization and

direct social work practice in the United States. I envision a course focusing on GCRF being offered in MSW programs that have a concentration in “international social work,” so that research in the area of direct practice with a globalized population becomes incorporated into and relevant to direct practice in the United States.

For social workers already in the field, I believe this work has great implications for continuing education opportunities. These opportunities can range from a basic workshop that raises awareness of the needs of this population and brings further attention in the field, to training programs specifically designed for direct social work practitioners. In the same vein, I would also present this material to the Council on Social Work Education (CSWE) and advocate that this new epistemology be included in the cultural competency discourse. It is from an electronic learning and web-based standpoint, I would be interested in developing opportunities for social workers to access the most up-to-date and relevant knowledge about various populations of women worldwide based on migration patterns, human rights violations, areas of war and conflict, and opportunities to hear these women's narratives in real-time. This could take shape as an interactive map and website to aid in social work education.

Practice

Lastly, along with research and education I envision the development of a practice model for agency use that addresses the G.A.I.N.S. (globalization, antiessentialism, intersectionality, narrative/distinctive voice, storytelling methodology) needed to be made for this population. This dissertation only provided a standpoint to think about the development of a practice model. Therefore, the development of a practice model would emphasize understanding not only the best psychological and social service practices for working with foreign-born women who are survivors of trauma and torture, but emphasize the importance of direct social work practitioners

to be knowledgeable about the challenges to the human rights of women worldwide.

Additionally, I would encourage social work practitioners to collaborate with interdisciplinary allied health professionals to design specific services and programming for this population within social service agencies, schools, and other medical and mental health settings and possibly establish a free-standing center to cater specifically to the needs of this population. While centers for survivors of trauma and torture exist nation-wide, gender specific programming can benefit the needs of women survivors of torture, their families, and the community.

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