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Original Research

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Culturally Responsive Domestic Violence Interventions for Immigrant Communities in the United States: A Scoping Review

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Abstract

Immigrants are at a higher risk of domestic violence (DV) victimization due to their unique positionality in the United States. The goal of this scoping review is to examine the extent to which cultural responsivity is incorporated in DV interventions developed for immigrant communities. Peer-reviewed articles between 2005-2021 were reviewed across 11 databases. Our sample included n=15 articles that highlighted interventions designed for diverse immigrant groups, including Latinx and Asian groups. Building unique interventions for specific immigrant groups would allow for prioritizing the needs of survivors while engaging in direct service provision by social workers.

Keywords: culturally responsive, interventions, domestic violence, culture, immigrants, social workers.

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Introduction

Immigrants comprised 13.7% of the total population in the United States in 2018, with the majority coming from Latin America and Asia (Batalova et al., 2020), followed by Europe, Canada, the Middle East, and sub-Saharan Africa (Radford, 2019). Immigrants emigrate for various reasons (e.g., following their spouse after marriage, fear of persecution, or pursuing education) with different types of immigration statuses, and with varying levels of education, socioeconomic status, and cultural and religious values that shape their acculturation to the mainstream society (Batalova et al., 2020). Due to the stress of migrating to a new country, immigrants may experience several issues such as social isolation, adjustment, mental health concerns, and domestic violence (DV) (Raj et al., 2005; Solis & Heckert, 2021).

DV has been increasingly recognized as a human rights violation with significant public health consequences that can be long-lasting and extensive. The terms DV or intimate partner violence (IPV) can sometimes be used interchangeably within immigrant communities and are defined as intentional emotional, psychological, physical, sexual, or economic abuse or threats of violence involving a perpetrator belonging to the victim's domestic environment, such as an intimate adult partner, husband, and/or family member, including in-laws (Breiding et al., 2015; Centers for Disease Control and Prevention, 2021). Minoritized and immigrant groups are more prone to DV victimization than others (Black et al., 2011). The cultural nuances of immigrant communities, including power imbalances, make women prone to victimization when compared to men. Even though research with men has been limited, evidence indicates that for Latinx (29.7% women vs. 27.1% men), South Asian (57% women vs. 41% men), and East Asian immigrant groups (15.3% women vs. 11.5% men) physical DV victimization is higher than that for non-immigrants (Centers for Disease Control and Prevention, 2014; Rai & Choi, 2021). Therefore, DV is a cause of growing concern across the United States, especially in immigrant communities. These numbers may be even higher due to the ongoing COVID-19 pandemic, where victims may possibly be trapped with their abusers for prolonged durations (Gupta & Stahl, 2020; Rai et al., 2020).

Domestic Violence Experiences in Immigrant Communities and Cultural Nuances

Due to the cultural complexities of immigrant communities, such as collectivism and control by in-laws in family matters, DV can manifest in ways that are different from American dominant communities, nonimmigrant, or Western communities (Goel, 2005; White et al., 2013; Rai et al., 2022). At times, DV within immigrant communities is not only perpetrated by the spouse but also by in-laws and extended family members (Dasgupta, 2005; Ahmad-Stout et al., 2021; Mirza, 2017; Rai & Choi, 2021; Rai et al., 2022). Most immigrant cultures discuss and view DV in heterosexual relationships (Dasgupta, 2005; Marrs Fuschel & Brummett, 2021; Menjivar & Salsido, 2002). Cultures of patriarchy, rigid gender-role stereotypes, and additional factors such as limited English language skills, lack of knowledge about U.S. legal protections, financial and immigration-related dependency on their spouses, social isolation, and lack of support systems make women more susceptible to DV than men (Ahmad et al., 2015; Orloff & Sullivan, 2004; Soli & Heckert, 2021). Research indicates that immigrant women may be more vulnerable to DV than non-immigrant women due to cultural (e.g., patriarchy, gender-role stereotypes) and structural reasons (e.g., visa and employment statuses) (Erez & Harper, 2018; Erez et al., 2009). Studies that generalize DV among immigrant populations based on findings from non-immigrant groups risk oversimplification (Paat, 2014; Rai & Choi, 2021; Yoshihama et al., 2011). Diversity among immigrant communities, the unique ways in which culture translates into violence, and the belief that violence is rare among immigrant communities (Kalra & Bhugra, 2013; Yick, 2007) indicate an urgent need to think of innovative and culturally appropriate ways to respond to DV among such groups and educate bystanders.

Factors Impacting Domestic Violence in Immigrant Families

Traditional societies, including some immigrant groups with defined gender roles and expectations, typically share asymmetrical power structures in relationships, which has been associated with a risk for violence (Ahmad et al., 2015; Hyman et al., 2004). Further, immigrating to the United States could mean disruption of familial and social support networks for many individuals (Erez & Harper, 2018; Sullivan et al., 2005; Ting & Panchanandeswaran, 2009), and additional immigration-related stress has been associated with risk of DV among immigrants (Balgamwalla, 2014; Chaze & Medhekar, 2017; Solis & Heckert, 2021). Low acculturation and lack of social support in the host society may especially enhance the vulnerability of immigrant women (Ammar et al., 2013; Bhanot & Senn, 2007). Generally speaking, immigrant women are at risk of DV because they may come from patriarchal cultures that may normalize gender-based violence (Reina et al., 2013).

In many cases, men migrate for economic and political reasons (Bouchoucha, 2012; Erez, 2000), and women migrate as dependents (Erez & Harper, 2018), hence, giving men more power in relationships. The experiences of women who are abused are intricately linked with their dependent status, especially for those who are first-generation (Cho et al., 2020; Erez & Harper, 2018; Erez et al., 2009; Reina & Lohman, 2015). A study of Russian-speaking immigrants in the United States found that abusive men threatened their partners with deportation and did not complete the paperwork required for their residential statuses (Crandall et al., 2005). This has also been the case in South Asian communities (Balgamwalla, 2014; Dasgupta, 2005). Even though there are opportunities for survivors to petition for resident status through petitions or by seeking Uvisas under the Violence Against Women Act (VAWA), many immigrant survivors may not be aware of the process (Balgamwalla, 2014; Bhuyan et al., 2005; Erez et al., 2009; Reina & Lohman, 2015). Often, to prevent survivors from fleeing, abusers may limit or deny survivors' access to financial resources (Morash et al., 2007) and transportation, including obtaining a driver's license and work permit (Galvez et al., 2011), leading to a higher dependency on their abusive partners. Even when some immigrant survivors have a legal work permit, they may be limited in their employment opportunities because they lack specific skills necessary for employment in the United States (Bernstein & Vilter, 2018; Ting & Panchanandeswaran, 2009).

Need for Culturally Responsive Domestic Violence Interventions for Immigrant Communities

To adequately respond to the exponential increase of DV in immigrant communities, as well as the varied needs of immigrants, it is imperative to consider immigrant cultures and positionalities while designing or employing existing interventions. The 2005 reauthorization of the VAWA added a provision to establish grant programs that provide culturally specific services to survivors. The 2013 VAWA reauthorization provided a definition of culturally specific services as "culturally relevant and linguistically specific services and resources to culturally specific communities" (para. 1). This remains in effect even in the most recent reauthorization of VAWA in 2022 (VAWA, 2022).

Culture is a vital factor when addressing the needs of immigrants and "could be defined as the growth, development, and expressions of a client system's worldview through an interaction with its biopsychosocial and spiritual environments" (Alvarez-Hernandez & Choi, 2017, p. 385). A person's culture influences their help-seeking behaviors (Kim & Zane, 2016; Villatoro et al., 2014), as well as experiences of DV and the risk factors they experience (Lockhart & Danis, 2010; Rai, 2020). Hence, culturally responsive interventions are necessary when working with immigrant communities and awareness needs to be raised about how to access such interventions (Lockhart & Danis, 2010). By accounting for the culture of an individual, an intersectional lens that looks at an intersection of factors influencing an individual's experience of violence can be adopted by social workers and service providers.

Existing Reviews of Culturally Responsive Domestic Violence Interventions

Culturally responsive interventions for immigrant groups have been developed in the areas of mental health (Na et al., 2016; Weaver & Lapidos, 2018) and substance use (Andrade et al., 2018). For quite some time, scholars have highlighted the need for culturally responsive DV interventions for minoritized and immigrant groups living in the United States (Sumter, 2006; Yoshioka & Choi, 2005). Previous research has made a case for cultural responsivity when addressing DV among immigrants, including Haitian women (Latta & Goodman, 2005), Latinas (Kapur et al., 2017; Whitaker et al., 2007), and South Asian women (Sabri et al., 2018), among others. Most recently, Henriksen and colleagues (2021) completed a scoping review of culturally sensitive interventions in high-income countries, including six studies from the United States that aimed to reduce or prevent DV during pregnancy. However, these studies focused on surface-level, apparent cultural sensitivity (e.g., language translation and bilingual/bicultural facilitators). Additionally, Marrs Fuschel and Brummett (2021) examined DV prevention and intervention group-format programs for immigrant Latinas that were culturally sensitive, but the main focus of the review was not the culturally responsive elements. Tripathi and Azhar (2020) conducted a systematic review of IPV interventions specifically for South Asian women, where they noted a dearth of interventions focusing on the cultural aspects of the community. Further, some existing DV interventions suffer from barriers such as being available only in English, limiting its accessibility to only those immigrants who are fluent in English, and also being unknown to immigrants (Kapur et al., 2017; Tripathi & Azhar, 2020). Therefore, there remains a need to explore the extent to which culturally responsive interventions have been developed relating to DV for immigrants. Programs for immigrant communities can be prevention-based/awareness or interventions (behavioral modifications, therapeutic) that can both be effective.

The unique challenges faced by immigrant groups call for interventions that are suited to their specific needs. Through this study, we seek to examine the extent to which culturally responsive interventions have been developed and utilized with immigrants in the United States thus far.

Purpose of the Study

The present scoping review seeks to understand the extent to which cultural responsivity is incorporated into DV interventions for immigrants in the United States and how the interventions are implemented. That is, in which settings and with which populations (e.g., victims, offenders, community leaders) were the interventions implemented? Since the purpose of the study is to examine the extent of the cultural responsivity and implementation of the intervention, it is not within the scope of the study to assess the effectiveness of the intervention. For the purposes of this study, we define interventions broadly to include programs, street plays, and campaigns aimed at raising awareness, providing education or impacting behaviors aimed at DV prevention.

A scoping review methodology was selected as opposed to a systematic review methodology due to the limited knowledge about the topic, the broad nature of the research question, and the purpose being to "map relevant literature" (Arskey & O'Malley, 2005, p. 20). The steps for conducting a scoping review recommended by Arskey and O'Malley (2005) were utilized in this study. We began our study by identifying a research question, followed by identification and selection of articles, charting the data, and reporting study results. The steps involved in the study will be described in more detail below. The broad research question for this study was, "How is cultural responsivity incorporated in domestic violence interventions for immigrant communities in the United States?" Our study findings are pivotal for social workers and service providers serving immigrant communities.

Identification and Study Selection

Our scoping review included articles that were: (a) published in English, (b) published in a peer-reviewed journal, (c) either conceptual or descriptive (intervention development) or empirical (intervention testing), (d) focused on DV interventions for adults in immigrant communities, and (e) conducted between 2005–2021. We included in the study interventions that focused on immigrant groups who were both first-generation (those who immigrated to the United States from another country) and second-generation (those who were born in the United States and raised by at least one immigrant parent). Interventions outside of the United States were excluded due to our focus on immigrants in the United States and their unique positionalities; however, the study has implications internationally. The year 2005 was selected to coincide with the 2005 reauthorization of the VAWA, which called for culturally specific DV services (VAWA, 2005). The databases searched were APA PsycInfo, APA PsycArticles, Cumulative Index to Nursing and Allied Health Literature (CINAHL), Medline, Social Work Abstracts, Social Services Abstract, SocIndex, Violence and Abuse Abstracts, Women's Studies International, Web of Science, and Academic Search Complete.

The keywords used to conduct the search were ("domestic violence" OR "intimate partner violence" OR "IPV" OR "wife abuse" OR "battered women") AND (immigra* OR immigrant*) AND (intervention OR program OR prevention) and (cultural* relevant OR focused OR sensitive). We consulted with a social sciences librarian to ensure that our search terms were all-encompassing of our research question and inclusive of the terminology used in DV research. Specifically, terms such as "wife abuse" and "battered women" often come up in DV research and hence were included in our list of keywords. Two articles that did not come up in the search results but were known to the research team through their research with immigrant communities were also included in our review. We maintained a detailed audit trail of our methodology. Mendeley, 1.19.6, a bibliographic software, was used to store results, screen for duplicates, and select the final sample of articles.

Existing research demonstrates that no universal definition for cultural responsivity exists. For instance, Flaskerud (1986) referred to cultural responsivity as the extent to which therapists can understand the culture and communicate in the language of their client. Cultural responsivity has also been defined to include training service providers to work with culturally diverse clients, employing more bilingual and bicultural providers, and creating services that are specifically designed for various cultural groups (Sue et al., 1991). Further, Ahrens and colleagues (2021) highlight the importance of including the cultural norms and values of a specific population. Marrs Fuschel and Brummett (2021, p. 211) discuss cultural responsivity in the context of DV as "cultural realities and values related to IPV, including those involving immigration status, family, religion and gender." After reviewing these definitions, for the purposes of this paper, we defined cultural responsivity to include interventions that discuss power and oppression, positionality, cultures, values or norms, language, acculturation issues or immigration-related structural barriers, such as visa-related challenges, and relationship with the criminal justice system and other systems of power. Studies that included these aspects were considered culturally responsive and were included in the review. Mere language translations of the interventions were not considered within our definition of cultural responsivity.

Charting the Data

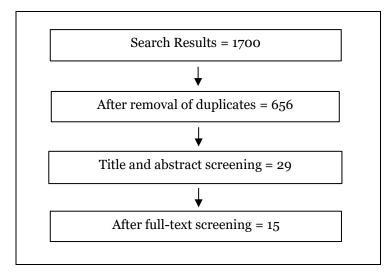
The first and second authors conducted the search and data charting processes using a shared Excel worksheet. A total of 1,700 articles were initially retrieved. Please see Table 1 for a detailed view of the article count through the various databases.

Table 1. Database Search Results (N = 1700)

Database	Article Count
APA PsycInfo	300
APA PsycArticles	6
CINAHL	240
Medline	198
Social work abstracts	15
Social services abstract	114
SocINDEX	190
Violence and abuse abstracts	57
Women's studies international	95
Web of science	207
Academic search complete	278

Upon removal of duplicates, 656 articles remained. A screening of the titles and abstracts of these articles against the inclusion criteria was conducted by the first two authors, after which a total of 29 articles remained. Upon a full-text reading of these articles, the authors mutually decided to include a total of 15 articles (nine unique interventions) (see Figure 1) that met the inclusion criteria of the study. These study results were shared with other members of the research team to allow for a more detailed discussion regarding article selection. The main reasons for excluding articles at the full-text level were due to the studies not culturally adapting the interventions (n = 5), the interventions not being conducted in the United States (n = 5), and not including an intervention in the articles (n = 4).

Figure 1. Study flow diagram



An acceptable percent agreement of 96.55% was reached between both researchers (Chaturvedi & Shweta, 2015). The final sample of 15 articles (nine unique interventions) was charted with the following information: (a) article title, (b) authors, (c) year of publication, (d) immigrant population studied, (e) geographical location, (f) intervention information, (g) how the intervention incorporates cultural responsivity, and (h) study type.

Results

Study Information and Type

Studies included in our review were conducted between 2008 and 2020 (Fig. 2). Of the 15 articles, seven were conceptual papers (Choi et al., 2017; Hancock & Ames, 2008; Hancock & Siu, 2009; Sabri et al., 2019; Yick & Oomen-Early, 2009; Yoshihama et al., 2012; Yoshihama & Tolman, 2015). Three studies were qualitative (Marrs Fuschel & Hysjulien, 2013; Marrs Fuschel, 2014; Parra-Cardona et al., 2013), two were quantitative (Choi et al., 2019; Hancock et al., 2014), and three were mixed methods (Fig. 3; Marrs Fuschel et al., 2016; Marrs Fuschel et al., 2018; Marrs Fuschel, 2020).

Figure 2. Number of Published Articles

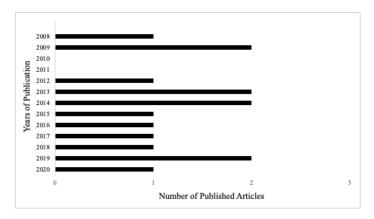
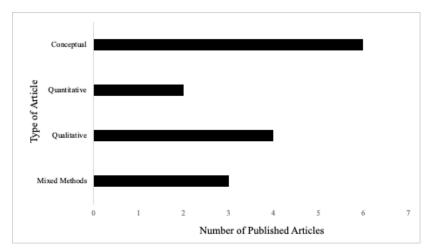


Figure 3. Types of Published Articles



The majority of the studies were conducted in either the Midwestern United States (n = 8) (Marrs Fuschel & Hysjulien, 2013; Marrs Fuschel, 2014; Marrs Fuschel et al., 2016; Marrs Fuschel et al., 2018; Marrs Fuschel et al., 2020; Parra-Cardona et al., 2013; Yoshihama et al., 2012; Yoshihama and Tolman, 2015) or Southeastern United States (n = 3) (Choi et al., 2017; Choi et al., 2019; Hancock et al., 2014). The remaining studies did not identify specific regions of the United States (Hancock & Ames, 2008; Hancock & Siu, 2009; Sabri et al., 2019; Yick & Oomen-Early, 2009). It is noteworthy to mention that multiple studies were conducted by the same researchers. Please see Table 2 for study details.

Table 2. Charting the Data (N = 15)

Article Title	Author	Year	Study Population	Geographical Location	Definition of DV used in intervention	Intervention details	How it incorporates cultural sensitivity	Study Type
Negotiating the cultural steps in developing an online intervention for Korean American intimate partner violence	Choi et al.	2017	Korean clergy	Georgia, United States	Physical, psychological, sexual, and economic abuse by an intimate partner	Korean clergy for healthy families (KOCH) is an intervention to positively influence the attitudes and beliefs of Korean clergy members about IPV/DV and IPV/DV prevention strategies to help them address the issue in their congregations.	The intervention took into account that Korean cultural values patriarchy, prioritizing family interests over one's own individual interests, feeling of shame, hesitation in recommending divorce, religious beliefs which disempower women.	Conceptual/ developmental
Korean clergy for healthy families: online intervention for preventing intimate partner violence	Choi et al.	2019	Korean clergy (n = 55)	Georgia, United States	Physical, psychological, sexual, and economic abuse by an intimate partner	Korean clergy for healthy families (KOCH) is a religiously and culturally sensitive on-line training for Korean Clergy to prevent and intervene with DV in their congregation.	Targets Korean cultural values norms (e.g., family appearance, status, collectivist family values, patriarchy gender roles) and Christian values (i.e., sanctity of marriage). Includes facts related to DV/IPV in Korean American immigrant community.	Small randomized trial comparing KOCH to a waitlist (Quantitative)

Exploring a domestic violence intervention curriculum for immigrant Mexican women in a group setting: A pilot study	Marrs Fuschel et al.	2013	Latina immigrants from Mexico (n = 20)	Midwestern state, United States	Verbal, physical, financial abuse	The Domestic Violence Intervention Model curriculum is a culturally competent psychoeducational program in Spanish. The curriculum is 11 weeks long and addresses a variety of domestic violence topics. The goal is to enhance awareness about IPV/DV, increase awareness about current relationships, enhance self-esteem, empower women to seek help, and improve women's decision making.	The Spanish curriculum included concepts about familismo, machismo that are deep-rooted within the Latino culture. The program also focused on other concepts of family being the primary source of happiness, genderrole attitudes, power-relationships in a marriage, selfesteem and the meaning of domestic violence.	Qualitative
Exploratory evaluation of Si, Yo Puedo: a culturally competent empowerment program for immigrant Latina women in group settings	Marrs Fuschel et al.	2014	Latina immigrants from Mexico (n = 20)	Midwestern United States	Verbal, physical, and financial abuse	SYP prevention and intervention program designed for Mexican immigrants who are not able to access IPV/DV-related services. SYP is a psychoeducational program conducted in Spanish designed to provide education and raise awareness about DV/IPV, raise self-esteem, and discuss healthy relationships using a cultural framework. SYP developed to be used by mental health professionals in social service agencies.	SYP includes cultural concepts of machismo and familismo and how they can influence DV/IPV in relationships.	Qualitative Exploratory

Sí, Yo Puedo (SYP) curricula: latinas examining domestic violence and self	Marrs Fuschel et al.	2016	Latina immigrants (n = 14) majority from Mexico (n = 11) and one participant from Honduras and two from Ecuador	Minneapolis and St. Paul, MN	Verbal, physical, financial abuse	SYP is a culturally specific empowerment program for immigrant Latina women about healthy relationships and IPV/DV that promotes selfesteem. SYP is a 2-hour, 11-week psycho-educational group conducted in Spanish at Centro, a community-based agency for Latinos. SYP includes an intersectional framework (experiences related to gender, race/ethnicity, immigration sttaus, language, SES).	Cultural topics included cultural influences on dating and understanding relationships, how IPV/DV is perceived among immigrant Latina women. Included cultural content related to machismo (i.e., males are strong and dominating), familismo (i.e., integrated and supportive families), and collectivism.	Program evaluation Mixed methods: (Quantitative/ Qualitative)
Sí, Yo Puedo curricula and police departments: educating immigrant Latinas	Marrs Fuschel et al.	2018	Latina immigrants from Mexico (n = 14)	West Chicago, IL	Verbal, physical, and financial abuse	SYP is a culturally- specific empowerment program for immigrant Latina women about healthy relationships and IPV/DV that promotes self- esteem. SYP is a 2- hour, 11-week psycho-educational group conducted in Spanish in a police department. SYP includes an intersectional framework (experiences related to gender,	The intervention is conducted completely in Spanish and one week of the intervention is dedicated to the cultural concepts of machismo (ie., males are strong and dominating), marianismo (i.e., female passivity and sexual purity), and familism.	Mixed methods program evaluation

						race/ethnicity, immigration status, language, SES).		
Sí, Yo Puedo (Y es, I Can) Curriculum and empowerment program for immigrant Latina women in group settings: utilization of the program at a police department	Marrs Fuschel et al.	202	Latina immigrants from Mexico (n = 19)	West Chicago, IL	Verbal, physical, financial abuse	Si, Yo Puedo (SYP) is a culturally specific empowerment program for immigrant Latina women about healthy relationships and IPV/DV that promotes selfesteem. SYP is a 2 hour, 11-week psycho-educational group conducted in Spanish in a police department. SYP includes an intersectional framework (experiences related to gender, race/ethnicity, immigration status, language, SES.	SYP curriculum includes information about the dynamics of dating in Latino culture, cultural concepts of machismo (i.e., males are strong and dominating), marianismo (i.e., female passivity and sexual purity), and familismo (i.e., integrated and supportive families), and how these impact knowledge of healthy relationships.	Program evaluation Mixed methods: (Quantitative/ Qualitative)
Toward a model for engaging Latino lay ministers in domestic violence intervention	Hancock et al.	200 8	Latino church leaders (Did not specify ethnicity)	Rural areas of the United States	Emotional and physical	The three-part model engages with lay Latino church leaders by furthering the collaboration between church leaders and social work professionals.	Resources for culturally specific services and safety information for Latino families, knowledge and attitudes about domestic violence, oppression and dehumanization experienced by Latino men, patriarchial values and upholding the supremacy of the husband/father, machismo culture of drinking,	Conceptual/ developmental

							respect and care of all family members, unacceptability of abuse, worth and dignity of men, environmental stressors of abuse such as job loss/ temporary unemployment, etc.	
A culturally sensitive intervention with domestically violent Latino immigrant men	Hancock et al.	200 9	Latino immigrants (specific ethnicities not reported)	United States	Did not specify how DV was defined in the intervention	The goal of the 26-week group intervention was to engage with courtmandated men who used violence to take ownership of their behavior and improve the overall quality of their family life.	Incorporated the three domains of Chinese American and immigrant cultural identity, relationships, and cultural empowerment. Suggested including family in DV/IPV education and intervention, using Chinese speaking radio and television programs to spread DV/IPV prevention information, and incorporating cultural values of harmony, respect, family, and forgiveness.	Conceptual/ developmental
Protecting rural church-going immigrant women from family violence	Hancock et al.	2014	Latinx church leader $(n = 72)$	North Carolina	Cites definition of family violence that includes physical, sexual, emotional abuse, neglect, or other forms of maltreatment	CBPR research to develop and implement culturally sensitive, faith-based family violence prevention, and intervention (training manual) to be used by Latinx church leaders with	Manual provides information about IPV/DV in Latinx families (i.e., cultural and immigration consideration). bible-based rationale for pastors to	Program evaluation (Quantitative)

						their congregation. Provides outlines of sermons that pastors can use to educate congregation about IPV/DV.	intervene when IPV/DV is occurring in families. Provided information about consequences of IPV/DV in the Latinx immigrant community.	
"En el Grupo Tomas Concienc ia (In Group You Become Aware)": Latino immigrants' satisfaction with a culturally informed intervention for men who batter	Parra- Cardona et al.	2013	Latino immigrant men Majority (n = 21) from Mexico and one participant from Puerto Rico	United States (Midwest)	Verbal, physical, and controlling behaviors	Raices Nuevas (New Roots) is a culturally informed intervention, specifically the culturally informed version of the Spanish version of the Duluth curriculum.	The intervention was delivered as a group and it dealt with issues like challenging machismo/ negative masculinity, gender-role attitudes that make men abusive, recognizing the need for having an egalitarian relationship and Latino values about respecting family. Additionally, the intervention also included values specific to Latino immigrants in the Midwest region.	Qualitative
The weWomen and our Circle randomized controlled trial protocol: A web- based intervention for immigrant, refugee and indigenous women with	Sabri et al.	2019	Immigrant/ refugee women (<i>n</i> = 1250) will be recruited	Diverse states in the U.S.	Physical	WeWomen is the cultural adaptation of the MyPlan intervention for immigrant and refugee women. This intervention arose as a response to the need to encourage safety planning and accessibility of	Integrating concepts of stigma, lack of knowledge of resources, culturally specific risk and protective IPV factors into intervention. Cultural appropriateness was also ensured	Conceptual/ developmental

intimate partner violence experiences						resources for abused. Immigrant/refugee women.	by making word- specific modifications to the existing content of the main MyPlan intervention.	
Using the PEN-3 model to plan culturally competent domestic violence intervention and prevention services in Chinese American and immigrant communities	Yick et al.	2009	Chinese American and Chinese Immigrant Women	U.S.	Pattern of coercive behavior that includes physical, psychological/ emotional, financial/economic, and sexual aggression	PEN-3 Model is an intersectional, culturally relevant framework that includes three interrelated domains 1) cultural identity, 2) relationships, and 3) cultural empowerment.	Cultural identity-family should be the center of education and intervention planning due to collectivistic culture. Collaborate with community members at all stages of program development to promote community ownership. Churches or other religious/ spiritual places could be helpful to raise awareness about IPV/DV and dispel myths. Relationships and Expectations-Chinese American and immigrant communities tend to be closed system so respecting privacy and confidentiality are vital.	Conceptual/developmental
Using interactive theater to create sociocultural	Yoshihama and Tolman	2015	South Asians (n = 35)	Midwestern U.S. (southeast Michigan)	Verbal abuse, threat of physical violence, power and control	This intervention uses interactive theatre, skits and audience response	The authors built on the community norms within the Asian	Qualitative

relevant community- based intimate partner violence prevention						to create a community-focused bystander intervention. An interactive theatre method was used at a community walk to raise awareness about IPV/DV and intervention strategies by bystanders within the Asian community.	community while developing the intervention. The role of men and women, and patriarchal beliefs entrenched within this community were incorporated into the scenarios played out during the community walk event.	
Intimate partner violence prevention program in an Asian immigrant community: integrating theories, data, and community	Yoshihama et al.	2012	Indian/Gujarati community	Major urban area within a midwestern state (United States)	Physical violence abuse, verbal abuse, emotional, power and control	This pilot intervention (Shanti project) aimed at developing positive community norms that denounced IPV/DV, promoted egalitarian attitudes and behaviors to empower bystanders to intervene in cases of IPV/DV. The intervention design relied on the use of a social media communications campaign to design IPV prevention messages.	The authors built on the concept of Shanti (harmony/ peace), challenging the structures of power, control and respect, passing down the peaceful tradition to the next generation, "role models" for children, challenging patriarchal beliefs.	Conceptual/ developmental

Populations of Interest Included in the Studies

The majority (60%) of the studies (n = 9) developed interventions for Latinx immigrants from Mexico, Honduras, and Ecuador. Of these, five were for women (Marrs Fuschel & Hysjulien, 2013; Marrs Fuschel, 2014; Marrs Fuschel et al., 2016; Marrs Fuschel et al., 2018; Marrs Fuschel, 2020). Two of the interventions were specifically created for men (Hancock et al., 2014; Parra-Cardona et al., 2013), and two sampled Latinx church leaders (Hancock & Ames, 2008; Hancock et al., 2014). Five studies (33%) were designed exclusively for Asian immigrants from Korea, India, China, and other South Asian subgroups.

Two of the studies were developed for use with Korean clergy (Choi et al., 2017; Choi et al., 2019). One study discussed an intervention for immigrants from Gujarat, India (Yoshihama et al., 2012). Another intervention was developed for Chinese immigrant women (Yick & Oomen-Early, 2009). Yoshihama and Tolman (2015) described a community theater intervention conducted with South Asians; however, they did not specify specific subgroups. Another study only stated that the intervention was created for women who identified as immigrants, refugees, or indigenous women broadly without highlighting specific within-group differences (Sabri et al., 2019). It is also noteworthy to mention that three studies included intersectionality as their theoretical framework (Marrs Fuschel et al., 2016; Marrs Fuschel, 2020; Yick & Oomen-Early, 2009). The other studies (n = 12) did not explicitly refer to the use of a theoretical framework in their intervention.

Intervention Aims and the Manner in Which Interventions Incorporate Cultural Responsivity

The foundation of each intervention included in this review had been the culture of the community that it was designed for. We will discuss the interventions based on the immigrant groups for which they were designed. These groups include South and East Asians and Latinx groups, as well as various immigrant groups that were not disaggregated to depict specific communities.

South Asian and East Asian Immigrants

Two studies (Yoshihama et al., 2012; Yoshihama & Tolman, 2015) described interventions that were part of the New Visions community—university participatory action bystander prevention project. New Visions aimed to prevent DV by changing the perceptions and community norms related to DV among Koreans and South Asians. Although New Visions was aimed at changing community norms for both Koreans and South Asians, the two studies included in this review did not provide information about the interventions for Koreans. Two interventions developed for South Asians as part of New Visions included the Shanti Project (Yoshihama et al., 2012) and an interactive community theater intervention referred to as forum theater organized within the community (Yoshihama & Tolman, 2015).

Yoshihama and colleagues (2012) designed the Shanti Project for the Indian/Gujarati community. The idea of Shanti, which refers to harmony and peace, was included in the intervention. By challenging the patriarchal structures in the culture and power imbalances that can lead to the disruption of family life and violence within families, this intervention appealed to the intrinsic attitudes of participants to maintain peace in their familial lives and relationships. The community for which the intervention was designed, Gujaratis, values Shanti. By building an intervention on a belief that is fundamental to this community, the authors aimed to encourage bystanders to peacefully intervene and discourage violent behaviors within Indian-Gujarati families. The goal of the intervention was to denounce DV and promote positive attitudes, ultimately empowering bystanders to effectively intervene in cases of DV. In order to truly respond to the community being served, materials for the intervention were developed both in English and Gujarati.

Regarding the forum theater intervention, Yoshihama and Tolman (2015) provided a case study of a DV awareness walk intervention that was designed for and delivered to South Asians in English. Peer educators created and performed a brief vignette of a fictional South Asian couple, Omar and Mina, depicting verbal and

threatened physical abuse. The vignette demonstrated the theme of power and control by having the husband order the wife to stay home and care for their child instead of going to work, highlighting cultural norms of gender roles and the impact on their young daughter, Sharmin. After viewing the scene, the audience was asked to think about how they could intervene in the situation. During the walk, they encounter the characters who shared more information with the participants about the abusive relationship. As part of the intervention, participants were asked to try and intervene, and a total of 21 out of the 135 participants attempted to offer help to the characters.

Additionally, three interventions were designed for immigrants belonging to East Asian communities. Two of the studies (Choi et al., 2017, 2019) developed and piloted an intervention for Korean American clergy called Korean Clergy for Healthy Families (KOCH). KOCH aimed to positively influence the knowledge, attitudes, and behaviors of Korean clergy related to DV. The intervention educated clergy both in Korean and English about DV by including facts related to DV among Korean Americans and prevention strategies that they can use with their congregations. This intervention targeted cultural values such as patriarchal beliefs, the importance of family appearance, and collectivism. The intervention also considered Christian values such as the sanctity of marriage, which may reinforce DV or prevent help-seeking (Choi et al., 2019). It further provided information to clergy about any risk factors pertaining to DV, how to reach out and have conversations with members of their congregation, safety planning, how to help an abusive partner, and ways to incorporate religious teachings and suggestions for worship that denounce DV (Choi et al., 2017).

Yick and Oomen-Early (2009) developed the PEN-3 intervention to address DV among Chinese Americans and immigrants. The PEN-3 intervention incorporates the domains of cultural identity, relationships and expectations, and cultural empowerment. For example, including family in DV education and intervention is important considering the Chinese American and immigrant collectivist family value. Privacy and confidentiality are especially crucial since, often, Chinese American and immigrant communities are closed systems and prefer that personal information remains within the family. Yick and Oomen-Early (2009) suggested that men modeling positive relationship behavior (i.e., beliefs or activities that reduce DV) and helping other men seek support for their abusive behaviors towards women was vital to addressing cultural beliefs that may be harmful to women. Moreover, Yick and Oomen-Early (2009) advised incorporating positive cultural values such as harmony, respect, family, and forgiveness is critical to DV interventions.

Latinx Immigrants

Nine studies used interventions that were designed for Latinx immigrant community members. The two designed for church leaders (Hancock & Ames., 2008; Hancock et al., 2014) were built on the premise that faith and religion uphold family values. Both interventions appear to be similar in some ways but are not identical. In Hancock and Ames (2008), the authors proposed a three-part model that was built on Latinx values of family strength and respect. The first part helped church leaders identify educational materials and resources that could be utilized to prevent re-victimization among members of the community. The second part empowered church leaders to assess abuse and make referrals. The third part of the intervention enabled church leaders to offer counseling and advice to DV victims.

This model was built on the premise that church leaders who were exposed to the intricate cultures of Latinx communities, such as unequal power relations and the importance of masculinity and internalized oppression within the community, may be better equipped to respond to emerging DV within the community. The model emphasized that families must focus their energies positively on leading respectful lives with stronger family cohesion rather than being dismissive or disrespectful of one another. Despite this model being delivered in Protestant churches, due to its focus on family values rather than religion, Hancock and Ames (2008) maintained that it could be expanded to Catholic churches and other non-Christian religious settings.

The intervention by Hancock and colleagues (2014) was also designed to intervene with the Latinx pastoral community with the goal of providing a biblical rationale for church officials to be involved in DV prevention efforts. This Spanish-language intervention reinforced the religious values of safeguarding the well-being of women who may be DV victims and the critical role of pastors in supporting them. The pastor workshop was conducted in Spanish and the intervention manual was written in English and subsequently translated into Spanish. It should be noted that the study did not specify the sub-ethnicities of the Latinx sample.

Other interventions by Hancock and Siu (2009) and Parra-Cardona and colleagues (2013) were for Latino immigrant men. Hancock and Siu (2009) designed an intervention to support Latino immigrant offenders (specific sub-ethnicities not reported) enrolled in a court-ordered DV treatment program. The original intervention was built on the tenets of the Duluth model. According to Hancock and Siu (2009), Latino immigrant men, culturally, consider authority and control signs of masculinity, and any program that undermines it may not work for them. Therefore, while delivering the model designed by Hancock and Siu (2009), the facilitator had to accept men's authoritarian attitudes in engaging them to become non-abusive and respectful toward their partners. Some behaviors that the program targeted included changing habits such as drinking, lying, and infidelity, which were thought to be partially derived from the definition of DV, along with some aspects of the masculine attributes identified by the participants. This program was provided in Spanish to effectively engage participants.

Parra-Cardona and colleagues (2013) also delivered a culturally responsive version of the Duluth model called Raíces Nuevas (New Roots) for men who batter women. This program was made for Latino immigrant men (primarily from Mexico) living in the Midwest. Raíces Nuevas included common challenges experienced by men in that region, such as employer exploitation. The intervention was delivered in Spanish and incorporated specific Spanish phrases that men could relate to.

The remaining Spanish-language intervention was geared toward Latina immigrant women in different settings (Marrs Fuschel, 2014, 2020; Marrs Fuschel & Hysjulien, 2013; Marrs Fuschel et al., 2016; Marrs Fuschel et al., 2018). The original Marrs Fuschel and Hysjulien (2013) article discussed the development and pilot testing of a culturally competent DV curriculum for Mexican immigrant women. The values of familismo (integrated, supportive families), machismo (dominance and authority of Latino males), and marianismo (female caregiving and passivity) defined by authors were discussed. Culturally relevant topics about women's self-esteem, their perceptions of dating and relationships, and the influence of values such as familismo, marianismo, and machismo on these relationships were interwoven into the intervention. This model highlighted the importance of intersectionality in understanding the IPV experiences of Latina immigrant women, such as the impact of discrimination based on their gender, race, and ethnicity stemming from structural barriers (e.g., immigration status, language barriers, lack of access to education). Subsequent works by Marrs Fuschel and colleagues (2014, 2016, 2018, 2020) described the testing of the Sí, Yo Puedo (Yes, I Can) curriculum with different groups of Latina women including (a) Mexican and Colombian immigrant women and Mexican American women in intimate relationships (Marrs Fuschel, 2014); (b) Latina immigrant women from Mexico, Honduras, and Ecuador in intimate relationships while being a parent at the time of the study (Marrs Fuschel et al., 2016); (c) Mexican immigrant women involved with the criminal justice system (Marrs Fuschel et al., 2018); and (d) immigrant women who sought help from the police department (Marrs Fuschel et al., 2020).

Immigrant and Refugee Women in General

An intervention by Sabri and colleagues (2019) focused on immigrant and refugee women in general rather than on a specific group. In this conceptual article, the authors discussed the culturally adapted web-based danger assessment safety plan (myPlan) intervention for immigrant and refugee women. The intervention is available in multiple languages, including Spanish, Arabic, Somali, Kiswahili, French, and Hmongic languages. For survivors with low literacy levels, the material included an audio option in various languages.

The intervention was developed based on findings from focus groups and in-depth interviews with survivors from various countries in Asia, Africa, Central America, and Caribbean regions to identify culturally specific risk and protective factors of DV to tailor the intervention. Examples of adaptations included changing the words "violence/abuse" to "mistreatment," adding a question about in-law abuse, adding community support as a possible priority for the survivor, and information about immigration services as a potential resource need. Upon adapting the interventions, Sabri and colleagues (2019) sought input from culturally specific experts who served immigrant and refugee survivors.

Discussion

The empirical evidence of this study points to a scarcity in the existence of culturally responsive interventions in the area of DV. To our knowledge, this is the first scoping review to explore the extent to which interventions have been adapted for diverse immigrant communities. Before delving into the specifics of the salience of culturally responsive interventions, we will first elaborate on the main findings from our review.

Overall, we found that almost an equal number of studies were conceptual (n = 7) versus empirical (n = 8). A large proportion of the studies (60%) were designed for individuals belonging to Latinx communities, followed by a third of the interventions being designed for South and East Asians, and one that focused on immigrants atlarge. Across interventions, the authors emphasized the importance of incorporating the unique attributes and experiences of each community's culture into the DV intervention to be more responsive.

For the culturally responsive interventions included in our review, we observed that scholars were deconstructing some values of South and East Asian groups, as well as Latinx cultures, by including content that (a) challenged patriarchy and promoted peace/Shanti (Choi et al., 2017, 2019; Yoshihama et al., 2012; Yoshihama & Tolman, 2015), and (b) challenged dogmatic religious beliefs while using some religious principles through religious texts, bible sermons, and writings as positive influences (Choi et al., 2017, 2019; Hancock & Ames, 2008; Hancock et al., 2014). The interventions designed for clergy across the East Asian and Latinx communities were built on the premise of empowering members of the clergy to not only assume the role of confidants for community members experiencing DV; but also to support victims by connecting them with appropriate resources and helping them reframe the cultural notions of abuse, influencing community-members positively to further mutual trust and respect in relationships (Choi et al., 2017, 2019; Hancock & Ames, 2008; Hancock et al., 2014). This support is important because immigrant survivors may experience negative interactions with clergy, such as clergy attributing DV to a spiritual problem (i.e., evil) and advising the victims to do things to please God (Postmus et al., 2014).

Interventions that were not designed for members of religious congregations centered around the values common to various immigrant communities surrounding respect, care and concern for partners, and the importance of engaging in non-abusive behaviors (Marrs Fuschel et al., 2013, 2014, 2016, 2018, 2020; Hancock & Siu, 2009; Parra-Cardona et al., 2013; Sabri et al., 2019; Yick & Oomen-Early, 2009). These interventions encouraged participants to move away from the gender roles prescribed by specific communities to ultimately further mutual respect in relationships, which is key to mitigating DV (Ahmad et al., 2015). For instance, male dominance and authority were seen as common traits across Latinx and East and South Asian immigrant cultures, which could possibly lead to an imbalance in power and control in the relationship between intimate partners (Ahmad et al., 2015). Therefore, the fundamentals of the interventions centered around deconstructing these power imbalances among Latinx couples, educating both men (Hancock & Siu, 2009; Parra-Cardona et al., 2013) and women (Marrs Fuschel et al., 2013, 2014, 2016, 2018, 2020) to reconsider notions of machismo or marianismo as critical since gender-related power imbalances are related to DV (Sabina et al., 2013). In engaging with members of the South and East Asian communities, Yoshihama and colleagues (2012) and Yoshihama and Tolman (2015) appealed to the community members' intrinsic values to overcome patriarchal

structures that disempower women and perpetuate abusive behaviors in families. It is noteworthy to mention that despite highlighting the unique attributes of each community, the interventions had areas that overlapped, such as overcoming cultural impediments of patriarchy, toxic masculinity, and promoting mutual love and respect in relationships with the ultimate goal of eliminating the oppression of victims. These elements have been found to be essential to preventing DV (Marrs Fuschel & Brummett, 2021).

Of the studies that were included in this scoping review, the majority were conducted in various community-based locations such as police departments, health clinics, and churches. None of the interventions were conducted within a DV service setting. The dearth of studies on culturally responsive interventions within DV shelters may be related to the barriers that immigrant survivors often face seeking help from formal DV services (Ravi et al., 2021). Additionally, few of the studies included the theoretical framework of intersectionality, with the exception of Marrs Fuschel and colleagues (2016), Marrs Fuschel and colleagues (2020), and Yick & Oomen-Early (2009), who considered systemic factors like immigration status, immigrant needs, gender roles, and cultural values as frameworks that can impact help-seeking behaviors. We discuss the implications of the interventions and these gaps below.

Implications for Practice, Research, and Policy

It is essential to highlight that there still needs to be more research to examine the extent to which cultural responsivity is integrated in DV interventions for immigrants. However, implications for social work and areas of future intervention are important to emphasize. We highlight specific implications for practice, research, and policy in Table 3.

Table 3. Summary of Implications for Social Work

Develop research knowledge about understudied immigrant groups in future studies. Future studies can help translate the applicability of intersectionality theory in research with immigrant communities. Future studies to utilize community-based participatory approaches in engaging with participants and other stakeholders Future studies to generate knowledge about domestic violence both for men and women Practice Social work practitioners to develop culturally responsive interventions for diverse immigrant communities Practitioners to incorporate the unique needs of each community in current and future interventions Agency staff to partner with researchers to test the efficacy of culturally responsive interventions at domestic violence agencies Culturally responsive agencies to partner with mainstream agencies to make services more accessible Policy Making known the provisions of the Violence Against Women Act (VAWA) and others as applicable in specific countries Advocating for independent visa options for those on dependent visas Providing information to culturally specific organizations about the opportunity to apply for VAWA funding to create culturally specific DV programming and others as	Research	Social work researchers to partner with practitioners to make them aware of the cultural nuances and needs of diverse immigrant communities. Scholars to investigate the distinct ways in which domestic violence manifests across immigrant cultures and communities.
research with immigrant communities. Future studies to utilize community-based participatory approaches in engaging with participants and other stakeholders Future studies to generate knowledge about domestic violence both for men and women Practice Social work practitioners to develop culturally responsive interventions for diverse immigrant communities Practitioners to incorporate the unique needs of each community in current and future interventions Agency staff to partner with researchers to test the efficacy of culturally responsive interventions at domestic violence agencies Culturally responsive agencies to partner with mainstream agencies to make services more accessible Policy Making known the provisions of the Violence Against Women Act (VAWA) and others as applicable in specific countries Advocating for independent visa options for those on dependent visas Providing information to culturally specific organizations about the opportunity to apply for VAWA funding to create culturally specific DV programming and others as		
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apply for VAWA funding to create culturally specific DV programming and others as		Advocating for independent visa options for those on dependent visas
applicable across countries		

Immigrant groups form a prominent part of American society, given the increasing numbers of these communities in the United States (Batalova et al., 2020). Hence, it is pivotal for social work researchers and practitioners to develop interventions that can respond to the cultural and systemic needs of diverse immigrant groups (Marrs Fuschel & Brummett, 2021; Agha & Rai, 2020, Rai et al., 2022), by providing them with adequate support in DV experiences. Immigrants occupy a unique position in the United States due to their experiences of acculturation and adaptation to life in the United States and because they bring their culture and norms from their countries of origin (Berry, 2007, 2015). Their lived realities and standpoints may be different from individuals belonging to non-immigrant and predominantly White communities (Magnussen et al., 2007; Rai et al., 2022; Ravi et al., 2022).

The 2021 amendment of the NASW Code of Ethics standard 1.05, Cultural Competence, highlights the importance of social workers demonstrating an understanding of the client's culture and that this knowledge should guide their practice (Murray, n.d.). For social workers to adequately respond to the DV experiences in immigrant communities and the unique needs of immigrants, it is imperative to consider the specific cultures of immigrant communities while designing or employing existing interventions with them (Kapur et al., 2017; Tripathi & Azhar, 2020), as was seen through our review. The culture of a community can influence the manner in which the community perceives and responds to DV (Dasgupta, 2005; Rai & Choi 2018). The studies in the present review highlight that gender-role stereotypes, stigma around divorce, values of collectivism, and the role of bystanders can influence DV victimization. Thus, it is imperative for researchers and social work practitioners, along with other helping professionals (psychologists, counselors) to partner with community organizations working with specific immigrant communities as well as members of those groups. These partnerships are essential while investigating the cultural nuances and values specific to immigrant groups (Kapur et al., 2017; Whitaker et al., 2007), which can subsequently be incorporated into interventions suitable for these groups.

The ethnic groups in the scoping review were limited to South Asians, two East Asian groups (i.e., Korean Americans and Chinese Americans and immigrants), and Latinx immigrants primarily from Mexico. Future research is needed to examine culturally responsive interventions among other immigrant groups such as individuals living in the United States from Africa, the Caribbean, the Middle East, Central Asia, various countries in Central and South America, and other groups from South and East Asia who were not found in the present review.

The cultural values and systemic experiences of community members may deter them from seeking help or reporting DV victimization. Immigrant women may be more hesitant to do so because they may fear having their partner deported due to a criminal DV case (Balgamwalla, 2013, 2014; Bhuyan et al., 2005) or be afraid of community ostracism due to help-seeking (Goel, 2005; Villatoro et al., 2014; Yick & Oomen-Early, 2009). In such cases, an intervention that allows victims to have a conversation with culturally responsive service providers is critical. Moreover, ensuring that culturally responsive interventions administered by social workers focus on making the provisions of VAWA known to potential beneficiaries of this policy is crucial. Including knowledge about applying for independent visas, such as U-visas under VAWA, is equally essential as discussed by Choi and colleagues (2017). Encouraging practitioners from social service agencies to advocate for independent visa options for immigrants on dependent visas can help balance power in marital relationships as well. Additionally, it is critical that culturally specific community-based organizations are aware that VAWA provides avenues for funding to address DV in immigrant communities from a culturally responsive manner.

Considering the culture of the community was also an important approach within the interventions included in our review; however, there is a need to utilize an intersectionality framework when designing and implementing DV interventions, including one-on-one case counseling by social workers, therapists, and other service providers. The benefits of cultural adaptations to mental health treatment of minoritized groups have been established (Nagayama Hall et al., 2016). However, there is a need to focus on culturally responsive DV interventions that address issues of intersectionality among immigrant communities. Intersectionality

theory highlights the power dynamics that oppress marginalized groups due to racism, xenophobia, and sexism, among other types of oppression (Crenshaw, 1991; Hill Collins & Bilge, 2016). Immigrant groups, particularly immigrant women as seen through the articles in our review, face social and systemic oppression at the same time that they are experiencing DV. Hence, culturally responsive DV interventions should address issues of intersectionality that go beyond the couple or family systems. Even though the discussion in this review is in the context of immigrants in the United States, immigrants in other countries may face comparable challenges, which point to the need to adapt an intersectional perspective while developing DV interventions even in those settings.

Building and disseminating culturally responsive interventions for immigrant communities is especially important now given the disproportionate impact of the COVID-19 pandemic on their lives (Campbell, 2020; Gupta & Stahl, 2020). It is vital for social work practitioners and researchers to be adequately prepared for accessing these communities and ensure they have the support that they need. Furthermore, utilizing approaches incorporating community-based participatory research (CBPR) where community members are invited to participate in intervention design along with practitioners (United Nations Women, 2020) and researchers is vital in ensuring the cultures and values of specific communities are included in the interventions. Through our review, it became evident that interventions that provided DV support were developed for women, who are often seen as the sole victims in the DV research space. However, developing DV interventions for both men and women is vital in moving away from DV conversations being limited solely to women and the dichotomy of viewing men as offenders and women as victims.

Limitations and Strengths

Despite the unique contributions of this scoping review, it is not without limitations. First, cultural responsivity can have a broad connotation and the manner in which interventions incorporate and address them can vary. In the present review, even though adapted from previous definitions, we utilized our own approach to deconstruct and define cultural responsivity within interventions, which includes our own biases and past experiences of working with immigrant and minoritized communities. Second, our review only included studies published in English, which limited us from reviewing articles in other languages. Third, our review focused on interventions developed and disseminated for immigrants in the United States; however, this can be treated as a starting point for scholars in other countries with a high proportion of immigrants. Last, we adopted a rather broad definition of interventions, given the nature of a scoping review.

Notwithstanding these study limitations, to the best of our knowledge, our scoping review is the first one to examine the extent to which cultural responsivity has been incorporated in DV interventions for immigrant communities in the United States. The research team included members from diverse immigrant communities, which contributes to all of us incorporating our cultural lenses and understandings of cultural responsivity into this review. Our research and practice experiences with diverse immigrant communities are an added strength of our study.

Conclusion

Our scoping review is vital in comprehensively synthesizing culturally responsive interventions in the areas of DV prevention and awareness among diverse immigrant groups in the United States. This scoping review can be a resource for social work practitioners and researchers to develop a nuanced approach and enhance their preparedness to respond to the needs of immigrant communities. Both scholars and practitioners are strongly encouraged to partner while investigating other effective interventions that may currently be delivered in languages other than English across immigrant communities. Furthermore, we urge practitioners to explore the issue of access to DV services so that these interventions are accessible to all members of the immigrant group for which it was designed.

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