



NCAPPS

National Center on Advancing
Person-Centered Practices and Systems

Culture and Person-Centered Practices

Dr. Sarmistha Talukdar – “Person-Centered Practices Help Immigrants Find Support, Belonging and Community”

SPEAKERS

Dr. Sarmistha Talukdar

Sarmistha Talukdar

Hello, my name is Sarmistha Talukdar, and I am a Bengali, queer, multiply-disabled person from India, currently, residing in Shocquohocan — or so-called Richmond, Virginia.

I am neurodivergent, disabled, and chronically ill.

I come from a family that was forced to become refugees in their own land after the partition of Bengal. As a Bengali, my history, language, and cultural practices are integral to how to exist, feel grounded, and move in my own being, as well as in the world. Living on occupied land often forces me to separate my identity from navigating even the most basic needs and day-to-day activity.

Even as I describe this experience in English, there is a certain range of violence happening as my cultural experiences are not, and never will be English. For me, person-centered practice would mean the ability to be my whole, complete self while I navigate the world, ask for, and receive, my access needs. It means considering my language barriers, challenges in communicating when I'm non-speaking, respecting my cultural practices and respecting my consent when I need support without assumptions, minimizations, or any form of forced assimilation.

Person-centered planning when they center the person, their lived experiences, their consent, asks, and needs are culturally responsive. However, person-centered practices are not what I have experienced so far.

Most providers do not know, understand, or ask about my cultural practices. Most providers do not prioritize Bengali speakers or non-speaking clients. ASL is not accessible to me either as it's still English — a non-native language.



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Bengali culture, queer, and trans culture that center disabled people of color, and respect their state and their caste is very different from the dominant cis, white, hetero-patriarchal, capitalistic American English-speaking, ableist culture.

These two cultures are very different and will not be the same ever. I have deep relationships with my human and non-human ancestors and those relationships are very important to me for my well-being.

If I have to expend my energy and explain myself in when I'm in crisis — to force myself to speak in English - a foreign language, or explain my queerness to a doctor, or how my neurodivergence and race further impacts how my disabled body-mind could be treated by the medical system, it puts me under further exhaustion and does not help me evaluate if my needs are truly being met.

It would be very helpful if providers related to my identity and how it intersects with various forms of oppression, be it gender, sexuality, race, language, citizenship status, or lack of.

That way I can focus more on receiving the care I need, than continuously having to explain myself, my sense of belonging and connection, or educating the providers.

I would feel supported, comforted, and relieved to find providers whom I can relate with the entirety of my human being. And I would feel celebrated if my access needs — that are tied up with my culture — were respected at all times.