CITY OF CAMBRIDGE NEEDS ASSESSMENT: ANTI-OPPRESSIVE ADVOCACY AND THE DOMESTIC AND GENDER-BASED VIOLENCE PREVENTION INITIATIVE

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Start by Talking

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City of Cambridge Needs Assessment: Anti-oppressive Advocacy and the Domestic and Gender-based Violence Prevention Initiative

Start By Talking, LLC

June 29th, 2022

Introduction

Sexual violence is the tip of the iceberg of oppression[1]. When supporting survivors of violence, service providers and community organizations often respond to consequences of experiencing trauma by facilitating access to essential supports and resources (e.g., provision of temporary housing, support navigating institutions and systems, mental and emotional support services, etc.). Supporting survivors through crisis is critical to facilitating healing and survivor resiliency and applying an anti-oppressive approach to advocacy presents service providers and community organizations with opportunities to proactively address some of the root causes of violence. Advancing anti-oppressive advocacy also presents a framework for centering the needs of survivors of color, when considering the ways that race and racism intersect with their experiences with violence and accessing supports or services, while navigating the impacts of trauma. The primary goal of this assessment is to clarify justice needs for survivors of color. To this end, Start By Talking (SBT) partnered with the City of Cambridge to confront oppression within the culture of the City of Cambridge and address the ways in which various forms of oppression show up within advocacy, legal, healthcare, and city organizational spheres. Specifically, the assessment aimed to examine:

- What resistance to anti-oppressive practice looks like and how it manifests within the City of Cambridge, and
- How resistance manifests across and within each level of the socioecological model within the City of Cambridge.

As the SBT research team analyzed the data they explored pathways, barriers, and opportunities to confront oppression at societal, community, interpersonal, and internalized levels, while examining the impact of these levels of oppression showing up in services and/or experiences of survivors accessing services provided in Cambridge. Taking in data insights from the assessment tool and engagement with the Cambridge steering committee to inform and

[1] Swann and Coleman. “Sexual Violence is the Tip of the Iceberg” First presented at the Georgia College Personnel Associate Conference, 2016

implement the assessment, the analyses intend to inform a report that provides evidence-supported actionable recommendations for the Cambridge community to develop sustainable anti-oppressive practices in their efforts to support survivors of violence, and particularly survivors of color.

Methods of Inquiry and Community Engagement

Start by Talking collaborated with City of Cambridge service providers, agents, and survivors to facilitate the assessment process, modeling an infrastructure that mirrors the expertise needed for anti-oppressive community-based transformation. The SBT team partnered with a multi-layered committee presence to gain insight into best practices of their respective work and how their strategies could cultivate a safer and more supportive Cambridge. Leveraging the engagement of the steering committee with key representatives from within the City of Cambridge, SBT co-created an assessment survey tool that examined an array of survivor experiences while cultivating an integrated learning space to introduce concepts of anti-oppressive advocacy to key community stakeholders and service providers.

Assessment Survey Tool

The assessment tool consisted of open- and closed-ended questions for respondents to share insight into what resources they have utilized in the City of Cambridge and how they experienced them, to describe their exposure to and history of violence, and to propose expansion suggestions for enhanced resources. The average completion time for the survey was projected to take 30-45 minutes. The SBT research team prioritized individuals who identified as survivors or witnesses of violence, persons of color, and members of the Cambridge community as potential respondents for the Survey. The survey was made available in English, Spanish, Haitian Creole, Simplified Chinese, Amharic, Bengali, Portuguese, Arabic, and Somali to increase language accessibility. Respondents also had the option to take the survey online via Qualtrics or via paper. Through collaboration with the steering committee, the survey was promoted through a variety of modalities, including the implementation of pop-up spots, which were staffed by organization volunteers and steering committee members. The survey tool also collected information about age, race/ethnicity, and various other demographic information to provide a snapshot of the participant profile, while allowing for comparing various communities along relevant demographic variables.

Integrated Learning Space

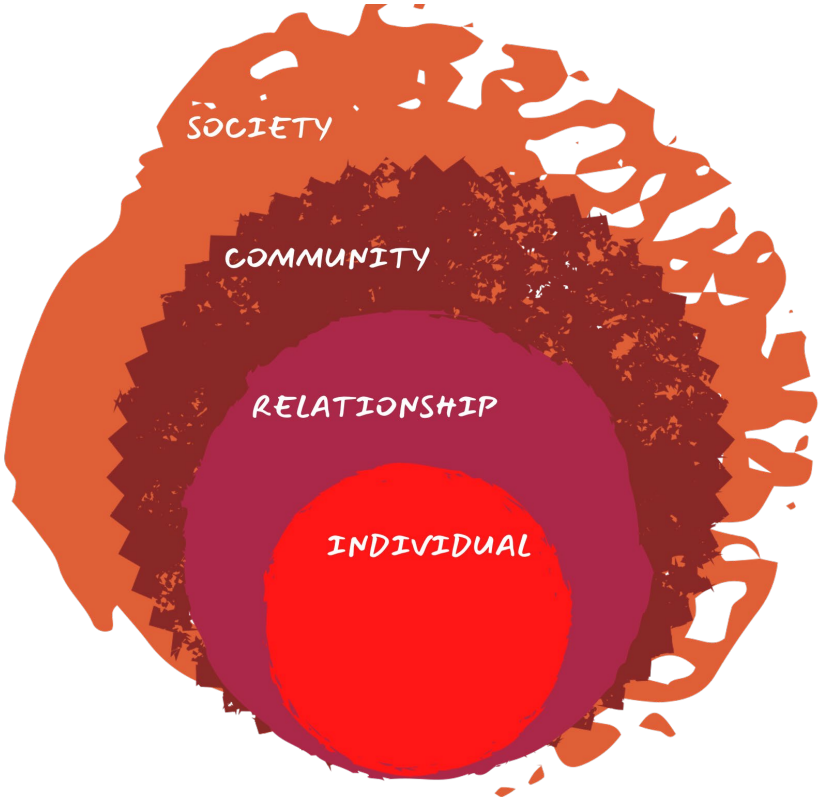
In addition to supporting the co-creation of the assessment survey tool, the steering committee was introduced to several of the tenets of SBT's anti-oppressive advocacy framework. The learning space was also used as an opportunity to solicit insight from community organizations

and service providers to frame our assessment approach and ensure the recommendations that SBT proposes are relevant considering the context in the City of Cambridge. Ultimately, insights gained from engaging with the steering committee also inform the recommendations with a particular focus on highlighting key successes of our collaborative effort to implement this assessment process.

For further discussion of assessment methodology, please see the "Full Survey Results" and "Assessment Limitations" sections below.

Start By Talking Definitions and Frameworks

The Social-Ecological Model



The social-ecological model is a public health theory-based framework for understanding the multifaceted and interactive effects of personal and environmental factors. The messages we receive and internalize at every level influence and shape not only our ideas, but our behaviors. We each have our own unique constellation that defines how we move through and experience the world around us. The model also helps to identify opportunities for intervention and where we can implement social, organizational, and cultural reform that confronts oppression.

Working in coalition across the Social-Ecological Model demands an acceptance that multiple truths can and will coexist, shift, and spontaneously combust in our society. If we put supportive structures in place that confront harm caused by cultural, social, and structural oppression, we can better serve minoritized communities whose lived experiences are constantly impacted and influenced by violence.

Start By Talking Anti-Oppression Framework

Service provision and framework that actively serves to unravel institutional and external oppression that impacts historically marginalized people and communities (Swan, 2017)

Fundamentals of Framework:

1. Increase emotional intelligence of the intersecting systems of oppression;
2. Inspire deeper reflection of one's own part in sustaining systems of oppression (Oppressive Muscle Memory and oppressive habit-forming strategies that sustain a race-based value system);
3. Critique how the default of anti-Blackness presents itself in one's value systems and environmental messaging, and
4. Learn and ultimately practice the ways Black Liberation counteracts White Supremacy and embraces human-centered care strategies

Within coaching and training spaces, learners achieve an understanding of this larger framework by using several tools including, but not limited to:

- The Four I's of Oppression (Ideological, Institutional, Interpersonal, Internalized)
- The Throuple of Whiteness (SBT-specific)
- Oppressive Muscle Memory (SBT-specific)
- Eight White Identities
- Watts (2006) Privilege Identity Exploration Model

Assessment Survey Tool Key Findings

- **87%** of respondents have experienced violence (unwanted sexual contact, abuse, harm, and/or hurt) done to them by another person.
    - **96%** of respondents who identify as African American reported experiencing violence, which is 20 percentage points higher than their white counterparts.

- Those who identify as Hispanic were 11 percentage points more likely to have experienced violence than their white counterparts (**88%**).
- **91%** of respondents who identify as female reported experiencing violence, compared to 84% of respondents who identify as male.
- Of those who have experienced violence, 27% percent said the perpetrator was a romantic and/or sexual partner, 25% said a colleague, and 24% said a family member.

- **94%** of respondents have been in a relationship with someone who has made them feel humiliated, controlled, or isolated.
- **83%** of respondents have used Cambridge services for themselves or to help someone else who has experienced violence.
  - Survey respondents were most familiar with the following services: Transition House (56%), Cambridge Police Department (43%) and the Department of Transitional Assistance (39%)
  - Survey respondents mostly utilized services relating to their physical or mental health.
- Those who chose not to use services reported feeling afraid of judgment from their own community (**26%**) or from service providers (**22%**) and expressed fear of being harassed or harmed by the police (**19%**).
- Personal history:
  - **33%** of respondents have witnessed and/or experienced violence within the home.
  - **36%** of respondents have had sexual experiences with people they did not like or felt forced to engage in sexual acts against their wishes.
  - **40%** of respondents have had relationships that felt physically or emotionally unsafe.
- **40%** of respondents felt they received enough education to make informed choices about their bodies and about having sex with others.
- **49%** of respondents said they feel comfortable calling the police in the event of an emergency.
  - A greater share of respondents who identify as white are comfortable calling the police (**59%**) compared to African American (**52%**) and Black (**49%**) respondents.

- **42%** of respondents said that the police are more likely to use physical force against members of their community

- Up to **40%** of respondents believe that the specific cultural needs of their community are not respected and considered while accessing services.

Recommendations

The following recommendations were developed by the SBT Research Team after careful review of both the assessment data and engagement with representatives from the Cambridge Steering Committee. Each of the following recommendations cannot be implemented without improving the infrastructure city-wide to center the needs of survivors of color. Necessary change across the social-ecological model cannot happen without funding, resources, equitable distribution of labor, and a collaborative, transparent, and comprehensive commitment to coalition-building within and across service provision organizations.

In examining the following assessment questions:

- What resistance to anti-oppressive practice looks like and how it manifests within the City of Cambridge, and
- How resistance manifests across and within each level of the socioecological model within the City of Cambridge.

one of the most glaring needs the team identified is that there is not only a dearth of data on the breadth and depth of experiences of survivors of color, but a perpetual dismissal of the ways in which the system supports communities of color versus White survivors. The overwhelming lack of information on the disparities between the needs of survivors of color and their experiences with service provision and service utilization points to a larger issue of systemic oppression ingrained in the very systems that support said organizations. Further research is required to undo the oppression ingrained within advocacy, legal, healthcare, and city organizational spheres. In immediate service of this larger need, an expansion of resources city-wide for culturally-specific organizations is required, given that many respondents felt that their linguistic and cultural needs were not prioritized within the services they accessed and care they received.

A fundamental tenet of SBT's philosophy is anti-oppressive advocacy that is rooted in understanding that change happens in coalition spaces – in spaces where we feel uncomfortable, are challenged by the biases and limitations of our socialization, are willing to lose and merge resources to center the marginalized and decenter the status quo, and are not only working to be non-racist, but anti-racist in thought, word, and action.

"If you're in a community and it's comfortable, it's probably not a broad enough coalition."

-- Bernice Johnson Reagon

A lack of safety and/or discomfort in coalition spaces - for example, among service providers in the city of Cambridge - is required in order to:

- expose different worldviews
- be transparent in our limitations
- highlight barriers to access
- confront, rewrite, and reimagine the implicit and explicit checklists we've internalized and that govern us and those whom we serve

The following recommendations are anchored by the levels of the social-ecological model and the form of anti-oppressive advocacy that these shifts aim to undo.

Level of the SEM: Community

I of Oppression: Institutional

Recommendation: Small group sessions for the community led by rape-crisis certified mental health workers who are also bilingual (specific to linguistically isolated communities.) Sessions and focus groups will explore and uncover the ways in which community members of different ethnicities and identities experience interactions with the police and various service providers. Recommendations on how to improve relations, engagement, and collaboration will be gathered. Each service provider as well as the Cambridge Police Department will appoint a liaison who will listen to community concerns and work to collaboratively come up with solutions.

Data: A greater share of respondents who identify as white are comfortable calling the police (59%) compared to African American (52%) and Black (49%) respondents. Those who identify as Hispanic had the smallest share of respondents who felt comfortable calling the police (32%), and the largest share who *strongly disagreed* that they felt comfortable calling the police in the event of an emergency (12%).

42% of respondents agreed that the police are more likely to use physical force against members of their community. 75% of respondents who identify as Middle Eastern or North African *strongly agree* that the police are more likely to use force against their community (though the small sample size of this group should be noted). Those who also *strongly agree* with this statement include respondents who identify as Black and/or African American (29%) American Indian or Alaskan Native (29%), and Hispanic (26%). In contrast, only 5% of white respondents strongly agree that the police are more likely to use force against their community.

Level of the SEM: Community

I of Oppression: Internalized & Interpersonal

Recommendation: Cambridge service providers must increase community engagement surrounding accessing and utilizing services related to interpersonal/domestic violence, and specifically address stigma that may exist around asking for help . This recommendation dovetails with improving community relationships with the police.

Data: The most common reason chosen as a barrier to access was fear of judgment from one's own community and from service providers. Additionally, many do not feel safe calling the police. Those who chose not to use services related to their physical health, safety, and wellness responded that this choice was due to

1) feeling afraid of judgment from their own community

2) from service providers, and

3) fear of being harassed or harmed by the police.

- Those who identify as Hispanic primarily selected fear of judgment from one's own community, fear of judgment from service providers, and fear of turning the person who harmed them over to the police as reasons for choosing not to utilize services.
- Those who Identify as Black or African American selected fear of judgment from one's own community, fear of judgment from service providers, and fear of being harassed or harmed by the police as reasons for choosing not to utilize services.

Level of the SEM: Society & Community

I of Oppression: Ideological/Institutional

Recommendation: The creation and implementation of a multi-pronged, community-led, and city-funded restorative justice model that serves as an alternate means to engaging with the police. The model will be based on the 5 Rs: relationship, respect, responsibility, repair, and reintegration. Committee will include representatives from all domestic violence related service providers, the City Manager, the Mayor's Office, representatives from the Cambridge Family Policy Council, and community leaders. External consultants trained in restorative justice practice will be hired to train the committee and help create the model and subsequent implementation plan. The inclusion of the Cambridge Family Policy Council is critical to address the needs of linguistically-isolated communities in Cambridge. The initial phase of the restorative justice model will be community-based therapy sessions as well as mediated

conversations with a licensed mental health worker for individuals interested in alternative means of healing and justice.

Data: When respondents were asked what options outside of engaging with the police would they like to have available to their community, 37% of respondents agreed that they would recommend services related to physical safety to someone in need based on their experience. Still, 40% agreed that they feel rushed to make a decision and 38% agree that the options available do not fit their personal needs. Additionally, 42% of respondents agreed that the police are more likely to use physical force against members of their community. Several respondents indicated the need for alternate options including mediation, therapy, counseling, and engaging with community elders.

Level of the SEM: Community & Relationship

I of Oppression: Interpersonal

Recommendation: Improve and increase engagement with and outreach to survivors from linguistically isolated communities. SBT recommends that service providers review and incorporate the findings of the Cambridge Family Council: Language Access Presentation into their service provision including, but not limited to: community outreach, representation, consistent engagement, and follow-up. Additionally, SBT recommends an ongoing collaboration with Crystal Rosa, Project Coordinator for the City of Cambridge, on translating essential documentation, assisting with outreach to linguistically-isolated communities, and resourcing marginalized and under-represented communities with the culturally-specific tools and supports required for their healing.

*Although SBT did not receive enough participation to hold confidential focus groups related to barriers to accessing services, the team acknowledges and understands the lack of representation of these groups in the data. SBT urges service providers to note this lack of representation in the data to request increased funding and devise collaborative, creative outreach solutions in order to connect with these marginalized communities.

Data: Respondents generally reported positive perceptions of services related to physical safety, such as the police and health care workers. The notable exception is the one third of respondents who did not agree that the specific cultural needs of their community are respected and considered, or that they are unable to employ the language they are most comfortable using while navigating services. 40% of American Indian/Alaskan Native respondents disagree or strongly disagree that the specific cultural needs of their community are respected and considered, followed by 38% of Asian respondents and 38% of African American respondents. Furthermore, 33% of Asian respondents disagree or strongly disagree that they are able to share their story in the language that is most comfortable to them,

followed by 33% of respondents who identify as Native Hawaiian or other Pacific Islander, and 29% of respondents who identify as American Indian or Alaskan Native.

When surveyed about experiences with services surrounding mental health safety and wellness, 37% of respondents disagreed that the specific cultural needs of their community are respected and considered. This number is even higher than the same metric for services related to physical safety, indicating that mental health and wellness providers need to focus efforts on understanding the linguistic and cultural group-specific needs of survivors who are not comfortable accessing services.

Level of the SEM: Community

Anti-Oppressive Advocacy: Institutional

Recommendation: 1) Expand city-wide resources and funding for culturally-specific organizations and community leaders, and **2)** Increase visibility and improve outreach of all service providers in the City of Cambridge, especially those that are culturally-specific.

Data: Almost all respondents recognized *at least one* Cambridge area service that was listed. Survey respondents were most familiar with the following services: Transition House (56%),

The Cambridge Police Department (43%) and The Department of Transitional Assistance (39%.)

These responses could indicate any of the following: 1) These are the organizations that are most visible in the community; 2) These are the organizations most active in outreach for this assessment; and/or 3) Transition House is one of the most visible and widely recognized service providers with respondents who identify as African American and/or Black (the most represented group of survey respondents were those who identified as African American and/or Black in the survey.)

To address this visibility issue, SBT recommends collaborating with the Cambridge Language Justice Project to implement the assessment tool again with linguistically-isolated communities for whom outreach was not successful during the May 2022 survey period. The translated versions of the assessment tool are already available in the following languages: Haitian Creole, Simplified Chinese, Bengali, Arabic, Amharic, Portuguese, Somali, and Spanish. Before implementation, a concerted community outreach effort to engage leaders and service providers in each of these communities is essential. Additionally, outreach to these communities must include appointing a liaison who will assist in the monitoring of the assessment tool throughout the survey period. These creative activities can include door-to-door engagement, hosting pop-up events, providing a safe and confidential space to take the survey, administering the survey over the phone, and/or redesigning the survey as a confidential focus group to elicit the same information.

Level of the SEM: Relationship & Community

Anti-Oppressive Advocacy: Institutional

Recommendation: Community push to expand sexual health education in schools. The data reveals that although 49% of respondents noted receiving detailed sexual health education in middle and high school, 35% said they did not receive enough information to make informed choices about having sex with others. SBT recommends that sexual health education be expanded beyond biology, puberty, and pregnancy to include comprehensive discussions surrounding consent, harassment, assault, pleasure, and how to access safe and confidential resources should one decide to become sexually active. Additional conversation addressing community and generational norms surrounding sexuality, gender, and the safe exploration of oneself and others is imperative for young people to learn their rights as their bodies are growing and changing.

*The school is an incredibly influential sphere of influence for young people - the messages one internalizes surrounding bodily autonomy and sexual/reproductive justice have a monumental impact in shaping adolescent - and ultimately, adult - sexual behaviors. Designing and implementing environment-specific sexual health education is critical. During the period of this assessment, the SBT Research team learned of two separate occasions where high school students at Cambridge Rindge staged a peaceful walkout in protest of sexual harassment allegations on campus. Community service providers must collaborate with school administrators, teachers, and parents to address the concerns of young people as and when they occur.

Data: When asked about childhood experiences, **33%** of respondents said they witnessed and/or experienced violence within the home. When asked about their sexual experiences, **36%** of respondents reported having sexual experiences with people they did not like, and 35% said they felt forced to engage in sexual acts against their wishes. When asked if they received detailed sexual health education in middle and high school, **25%** disagreed and **49%** agreed. When asked if they received enough education to make informed choices about having sex with others however, **35%** disagreed and **40%** agreed.

Full Survey Results

About the Survey

Start By Talking surveyed the Cambridge community from May 11-31, 2022. Survey respondents accurately reflect the goal of the survey tool (see Demographic Information), which was to capture the voices of people whose experiences have historically been excluded from research. Results from 435 respondents are included in the final analysis[2]. 91% of survey respondents selected a racial/ethnic identity other than white, including 46% who identify as Black and 32% who identify as a person of African descent. Respondent age ranged from 18-69 years, and 50% of respondents fell in the range of 25-34 years old. There were nearly equal numbers of male and female respondents, and equal numbers of transgender male and transgender female respondents. Other gender identities are not represented in the final dataset. A range of sexual orientations, relationship status, childcare responsibilities, disability diagnoses and education levels are represented. 91% of respondents are employed in some capacity.

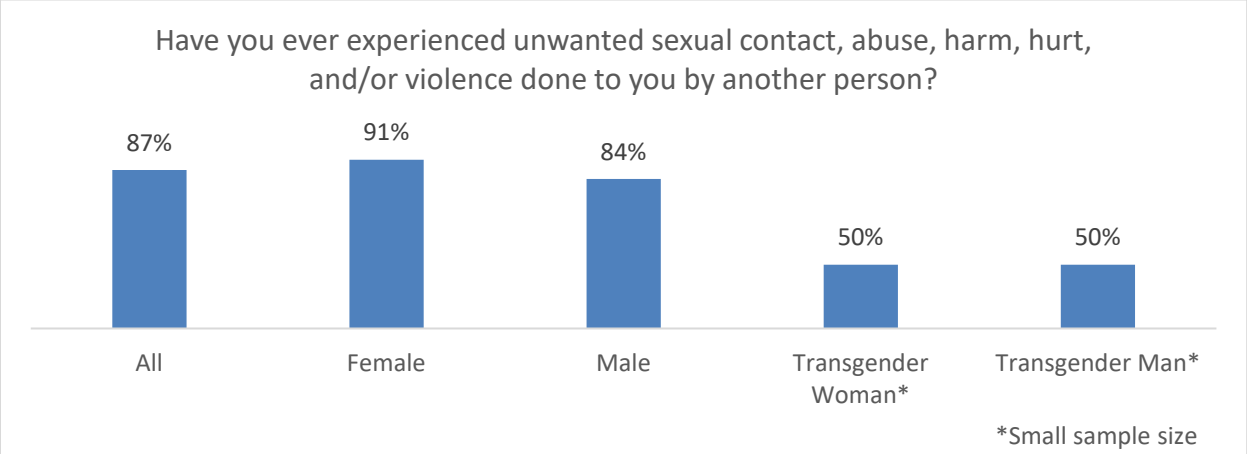
The survey did not reach and/or represent the gender-expansive community, with very few respondents selecting a gender identity other than "Male" or "Female" (both 49%) and only 2 respondents identifying as transgender male and transgender female, respectively. The LGBTQIA population is underrepresented in this assessment, especially when compared to national data from the 2021 report "We Are Here: Understanding the Size of the LGBTQ+ Community," analyzing recent results from the U.S. Census Bureau's Household Pulse Survey. Based on data from respondents in the Household Pulse Survey, a national household probability survey of adults in the United States, at least 20 million adults in the United States could be lesbian, gay, bisexual, or transgender - nearly 8% of the total adult population, almost double prior estimates for the LGBTQ+ community's size. The report also suggests that more than 1% of people in the United States identify as transgender. Additionally, it confirms prior research showing that bisexual people represent the largest single contingent of LGBTQ+ people, at about 4% of respondents.

After data cleaning, only 10 responses were submitted in Simplified Chinese and 1 in Haitian Creole, with the rest in American English - virtual and paper assessments included. The survey did not reach the following linguistically-isolated communities for which SBT had translated the assessment tool: Amharic, Arabic, Bengali, Portuguese, Somali, and Spanish. Additional details regarding survey tool limitations are discussed in the "Assessment Limitations" section below.

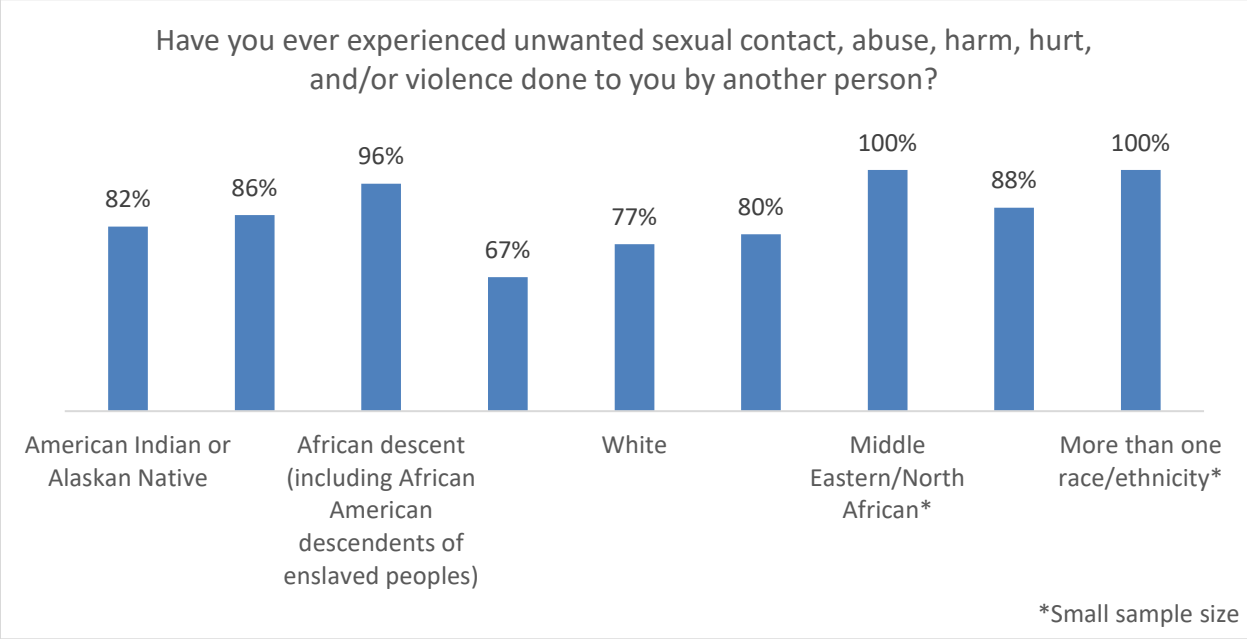
[2] For details regarding data-cleaning methods, please see the "Assessment Limitations" section on page 33.

Experience with Violence and Relationships

Survey respondents accurately reflect the intended audience for this assessment, which was survivors of violence and particularly survivors of color. 87% of respondents reported having experienced violence (unwanted sexual contact, abuse, harm, and/or hurt) done to them by another person. This number increased for those who identify as female (91%) compared to those who identify as male (84%) and those who identify as transgender (50%*).[3]

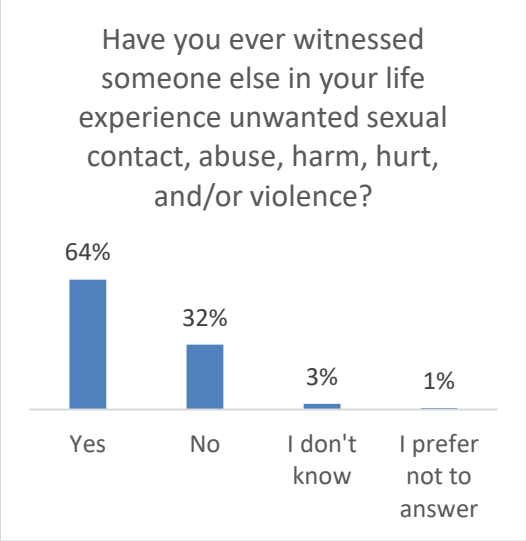


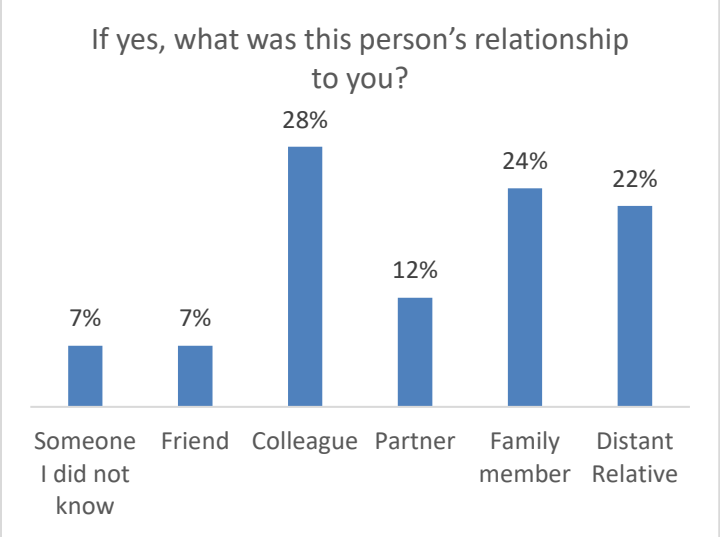
96% of respondents who identify as African American reported experiencing violence, which is almost 20 percentage points higher than their white counterparts (77%). Those who identify as Hispanic were 11 percentage points more likely to have experienced violence than their white counterparts.



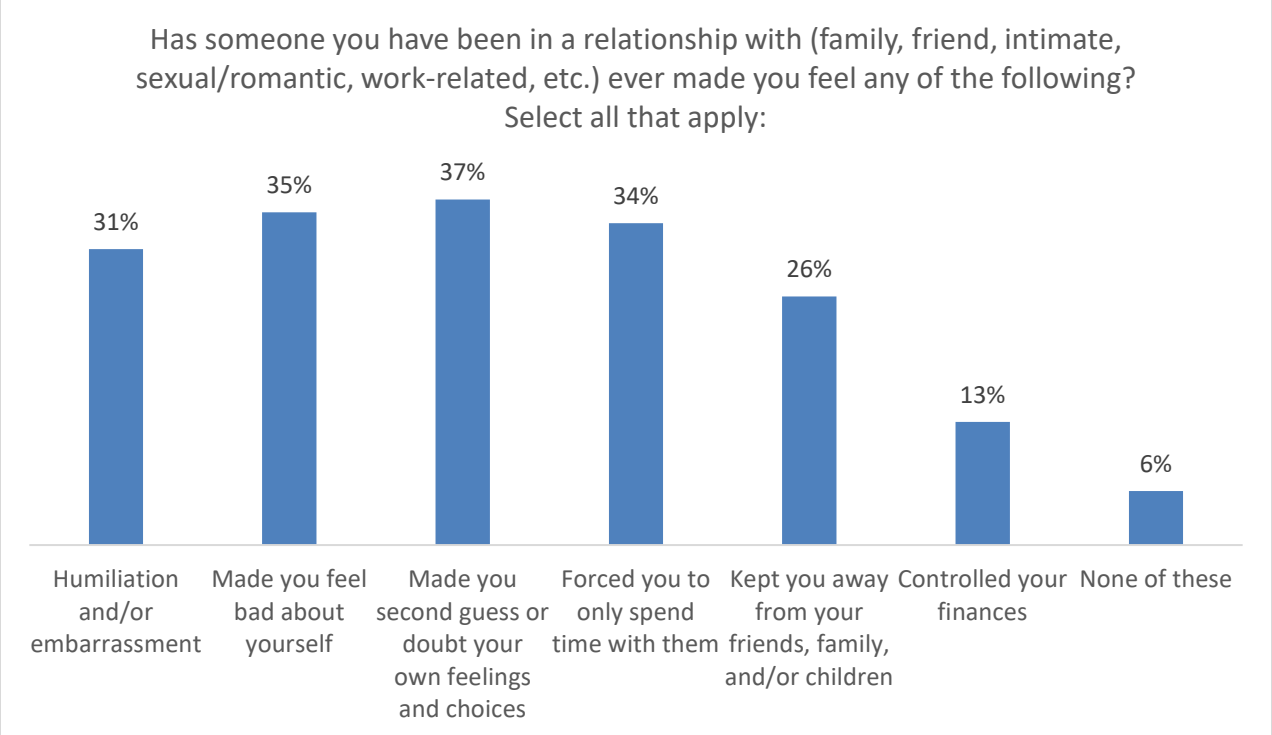
[3] *Only 2 respondents identified as transgender male and 2 as transgender female.

Of those who have experienced violence, 27% percent said the perpetrator was a romantic and/or sexual partner, 25% said a colleague, and 24% said a family member. 64% of respondents reported witnessing someone else in their life experiencing violence.



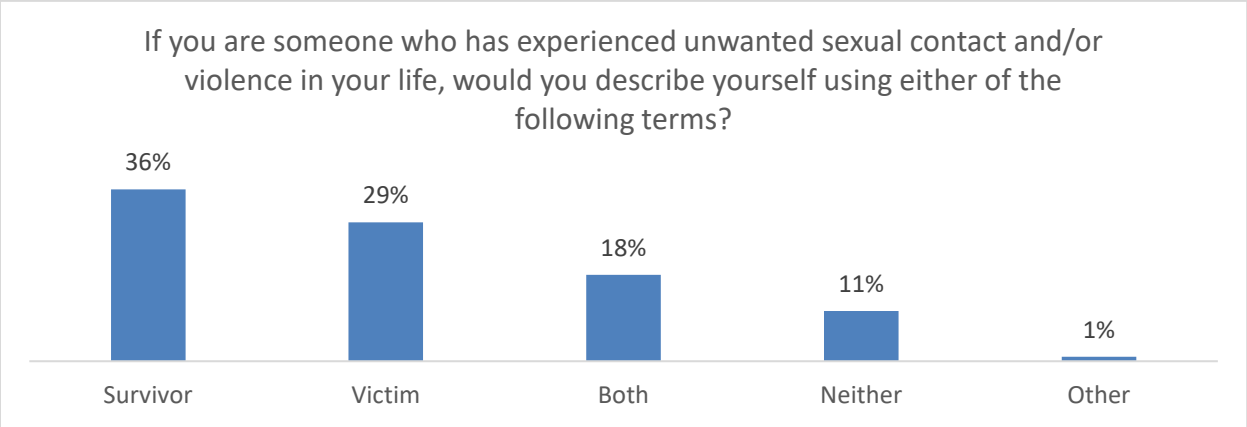


When asked about their relationship history, **94%** of respondents reported experiencing a relationship with someone who has made them feel humiliated, minimized, controlled, and/or isolated.



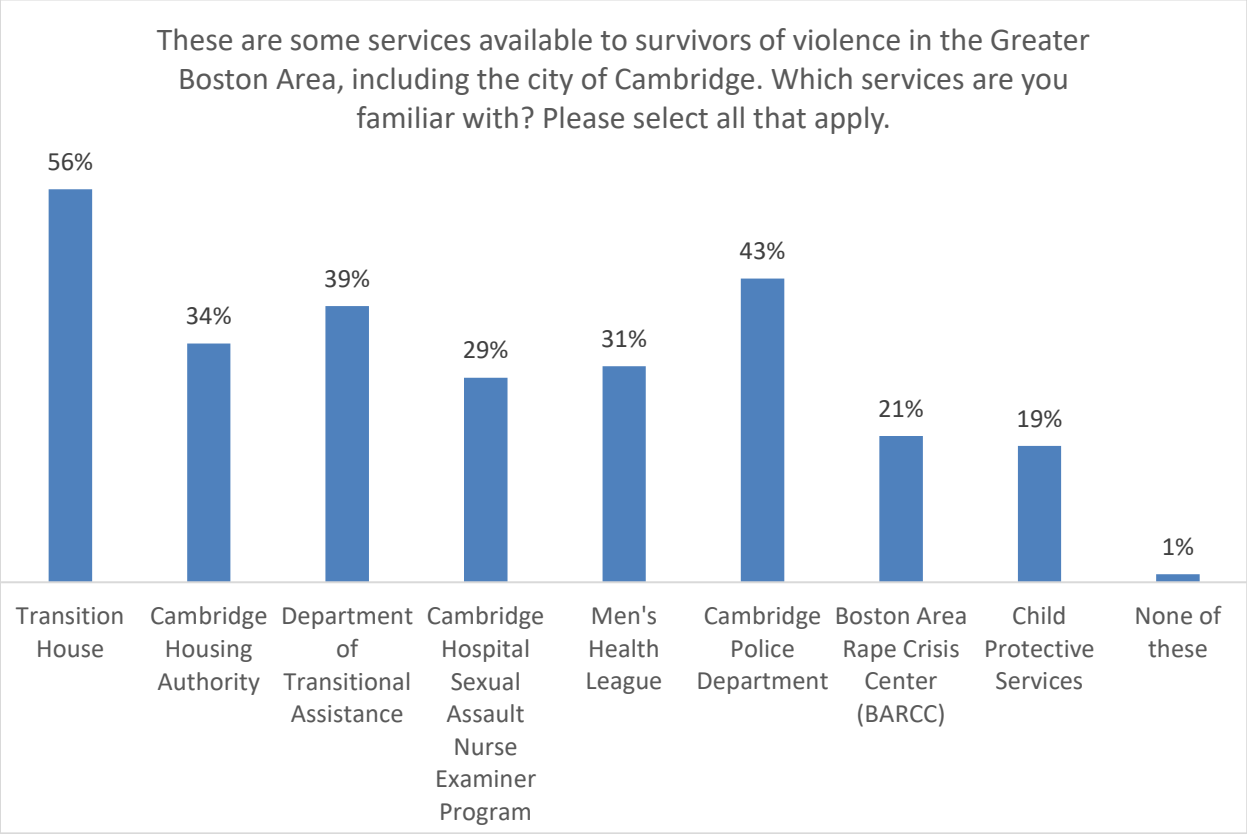
While many respondents reported experiencing a form of interpersonal violence, the way individuals understand and label their experience varies. When asked how they would describe

themselves, 36% of respondents selected 'survivor', 29% of respondents selected 'victim', and 11% selected 'neither'.

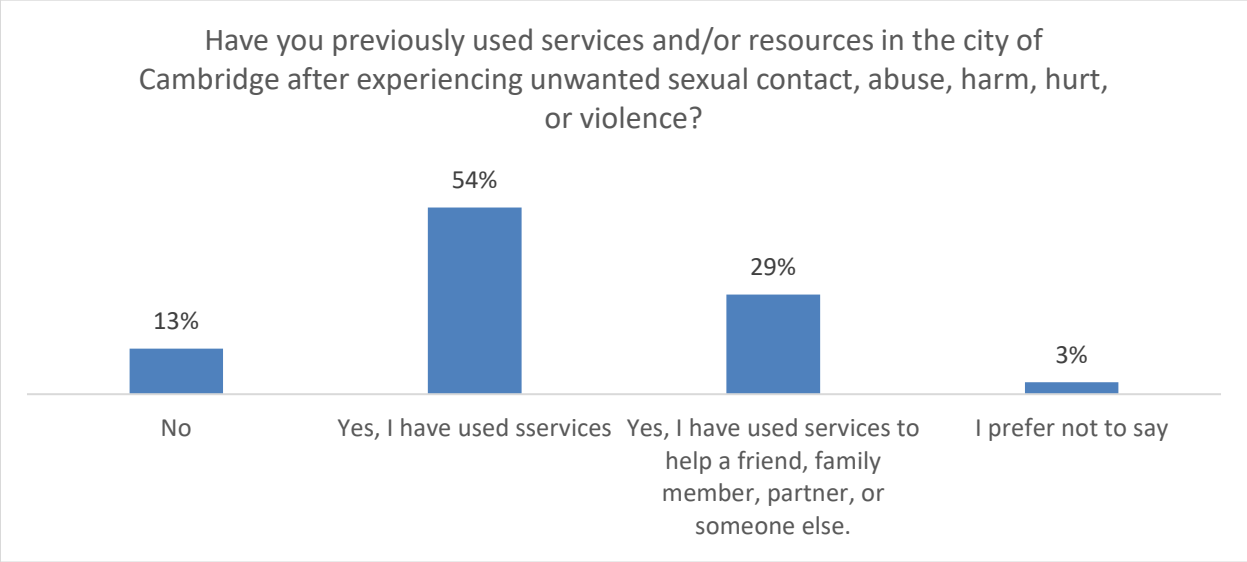


Utilization of Cambridge Resources

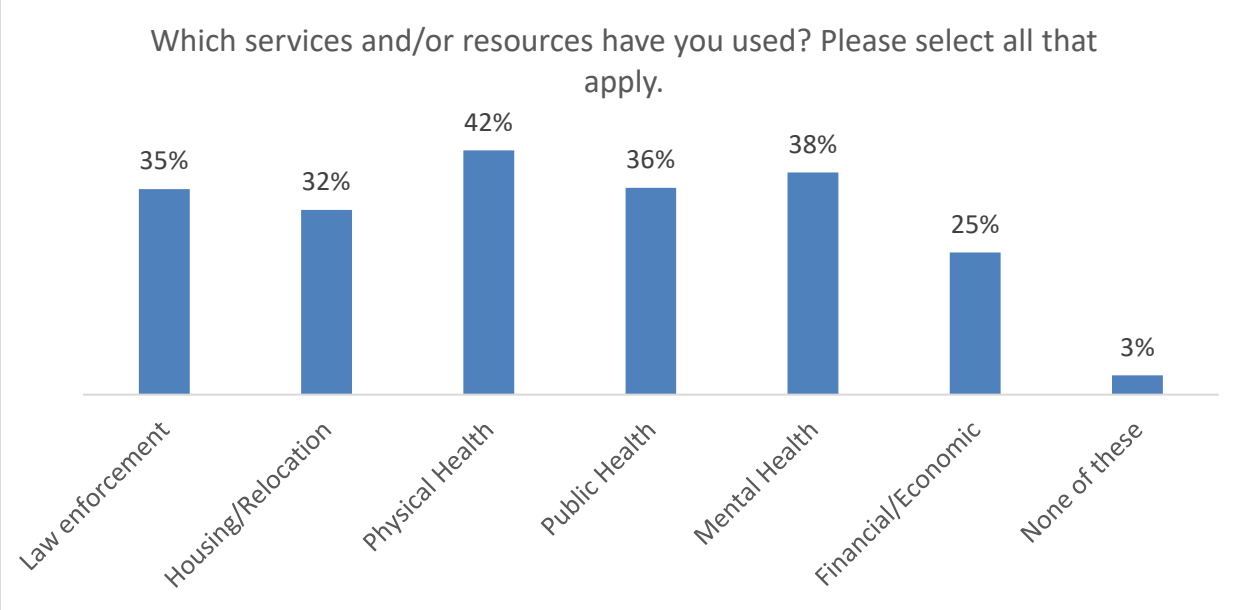
Almost all respondents recognized *at least one* Cambridge area service that was listed. Survey respondents were most familiar with the following services: Transition House (56%), Cambridge Police Department (43%) and the Department of Transitional Assistance (39%).



83% of respondents have used services for themselves or to help someone else who has experienced violence. 32% of respondents reported using services within the last 12 months, and 32% reported using services within the last few years. 5% of respondents said they were not aware that services were available to them.

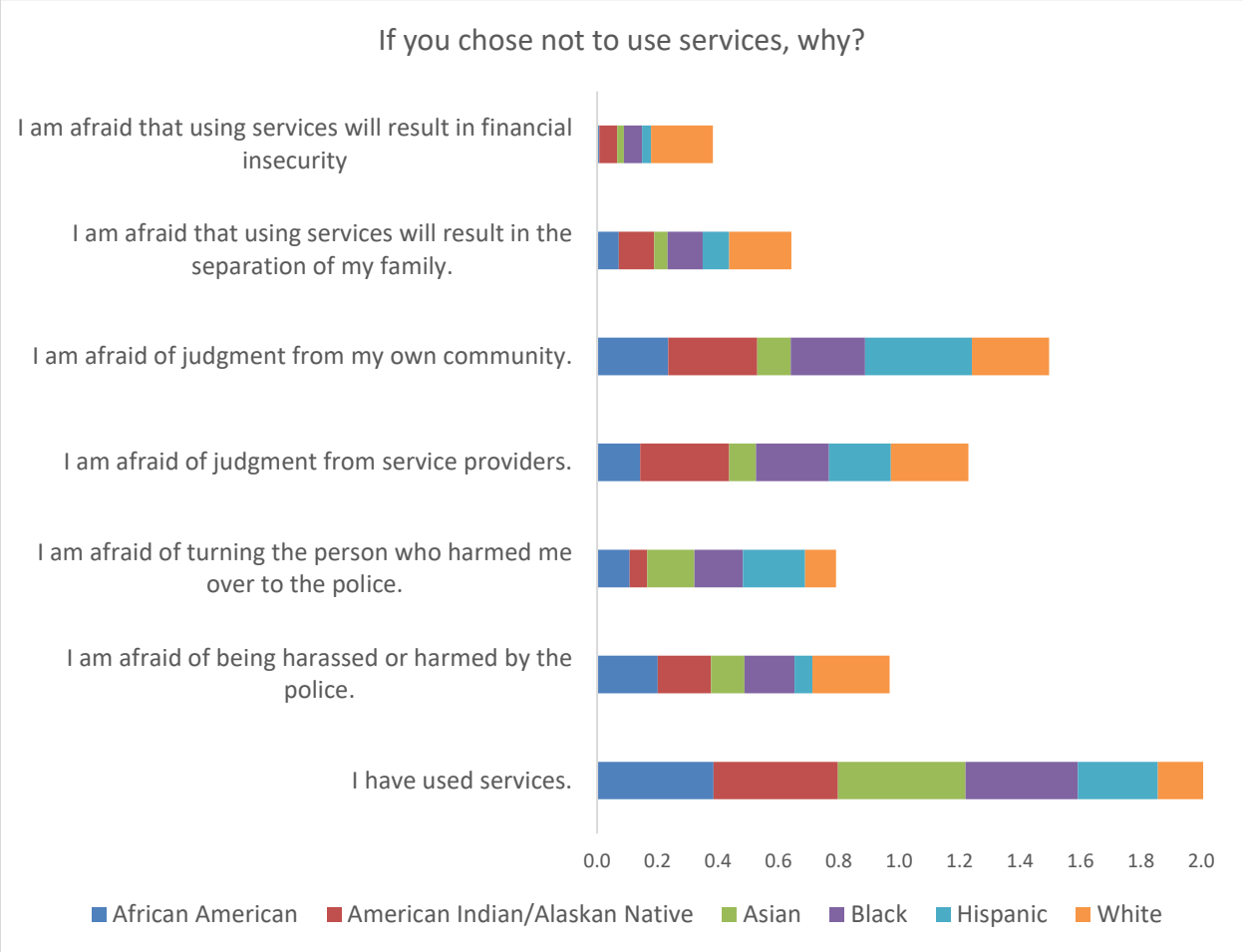


Survey respondents primarily utilized services relating to their physical or mental health.



Those who chose not to use services said it was due to 1) feeling afraid of judgment from their own community or 2) from service providers, and 3) fear of being harassed or harmed by the police.

- Respondents who identify as Hispanic primarily selected fear of judgment from one's own community, fear of judgment from service providers, and fear of turning the person who harmed them over to the police as reasons for choosing not to utilize services.
- Respondents who Identify as Black or African American selected fear of judgment from one's own community, fear of judgment from service providers, and fear of being harassed or harmed by the police as reasons for choosing not to utilize services.

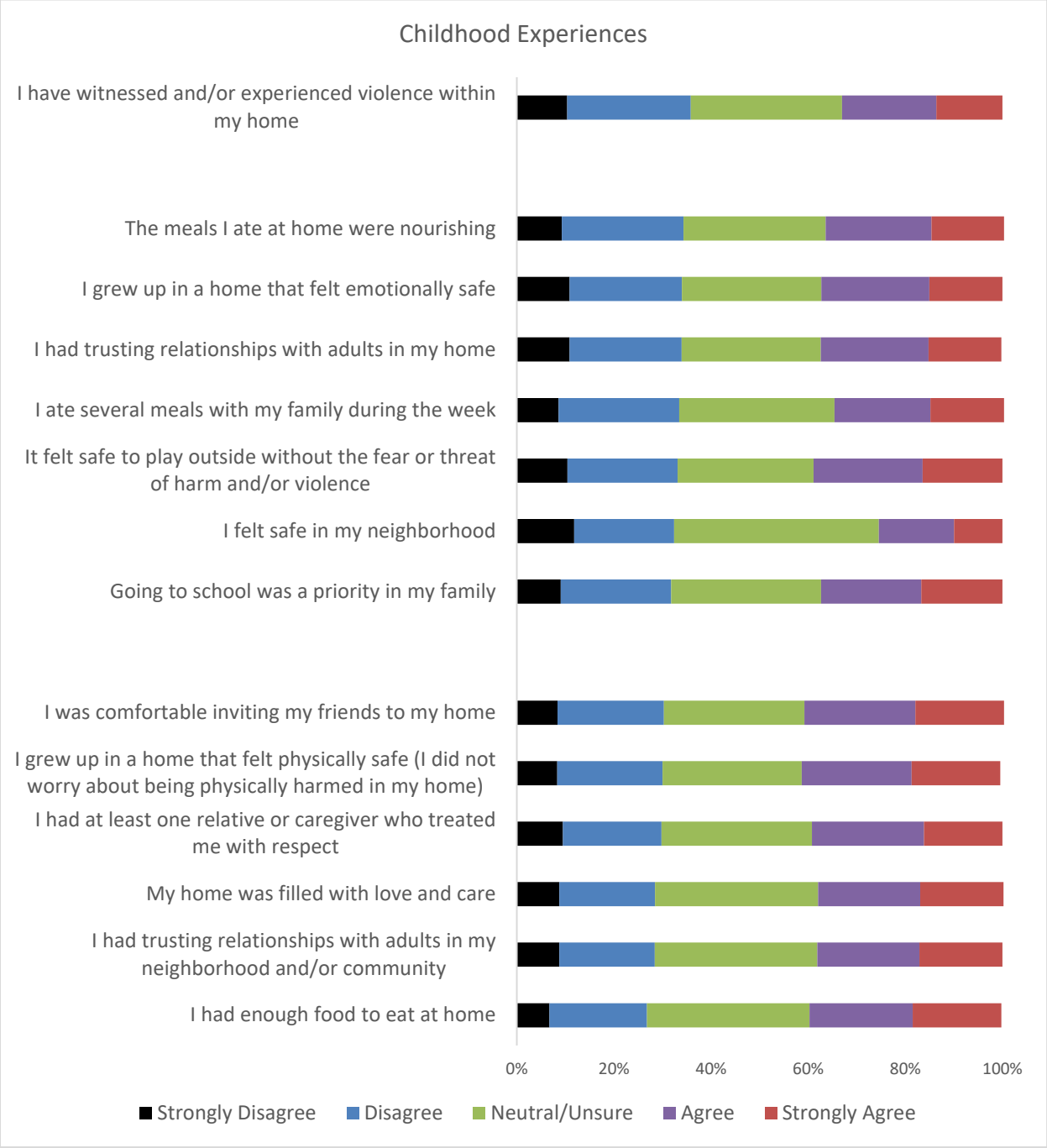


Life Experiences

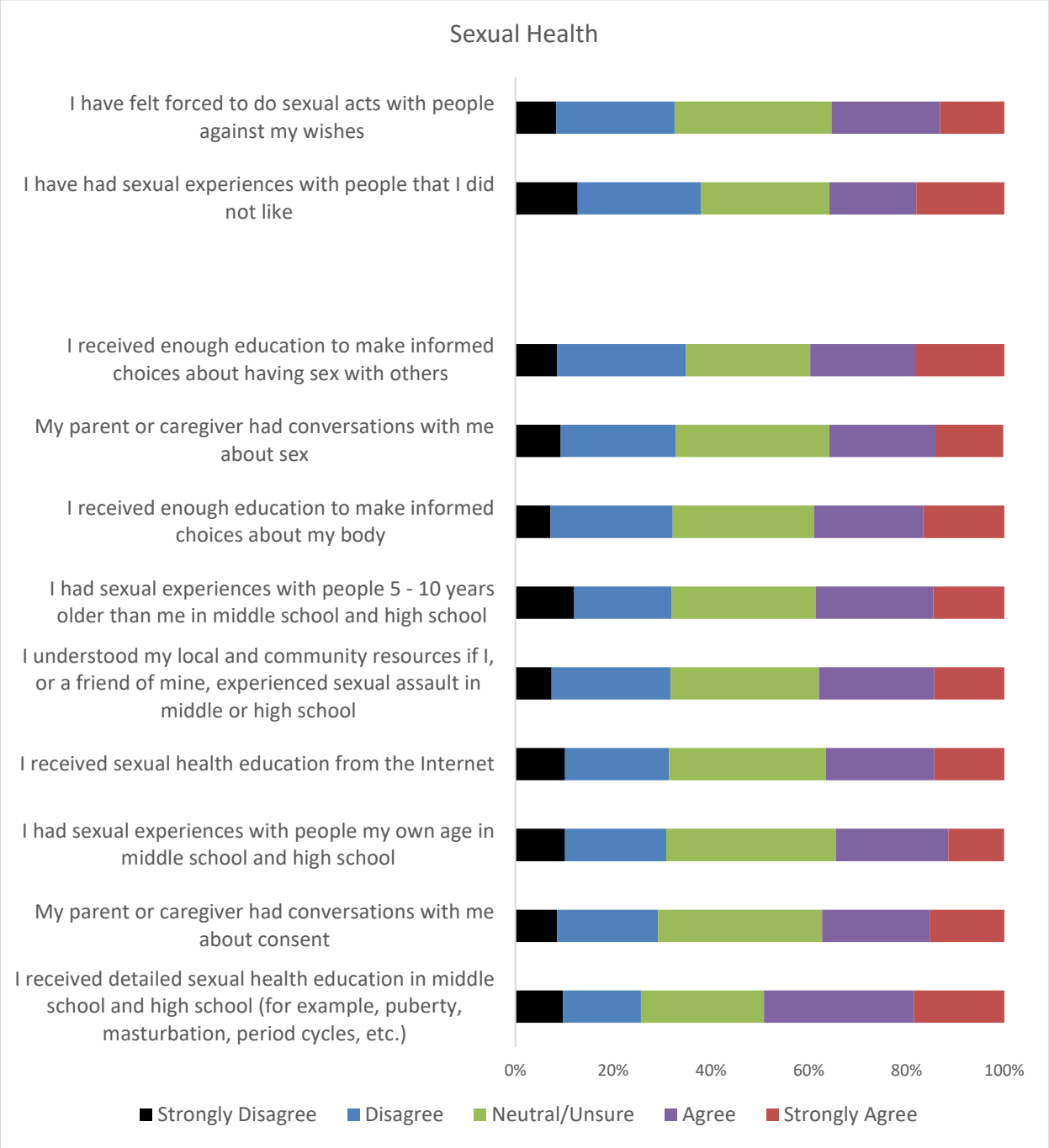
Early life experiences and relationships with family and community are highly influential in shaping one's identity. These early experiences influence how we understand ourselves as individuals, how we relate to one another as adults, and how we fit into larger social structures. We asked respondents to share the degree to which they felt safe, nourished, and mentored

throughout childhood to better understand their lived experiences. These experiences may influence someone's ability to find safety and security in their relationships and trust in public services as adults, and understanding these experiences presents an opportunity for service providers to address the root causes of violence more holistically.

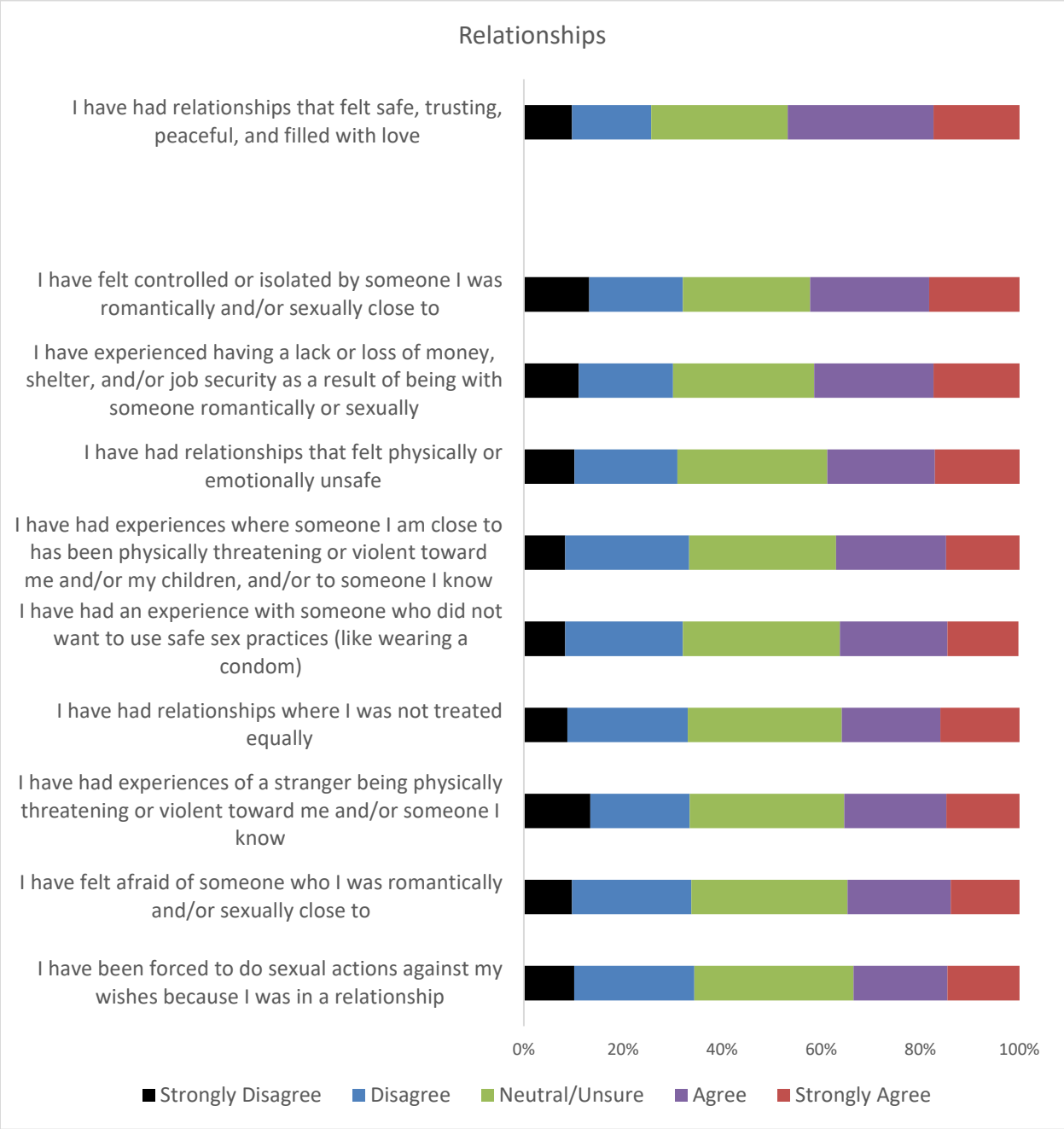
When asked about childhood experiences, 33% of respondents said they witnessed and/or experienced violence within the home.



When asked about their sexual health, 36% of respondents reported having sexual experiences with people they did not like, and 35% said they felt forced to engage in sexual acts against their wishes. When asked if they received detailed sexual health education in middle and high school, 25% disagreed and 49% agreed. When asked if they received enough education to make informed choices about having sex with others, 35% disagreed and 40% agreed.



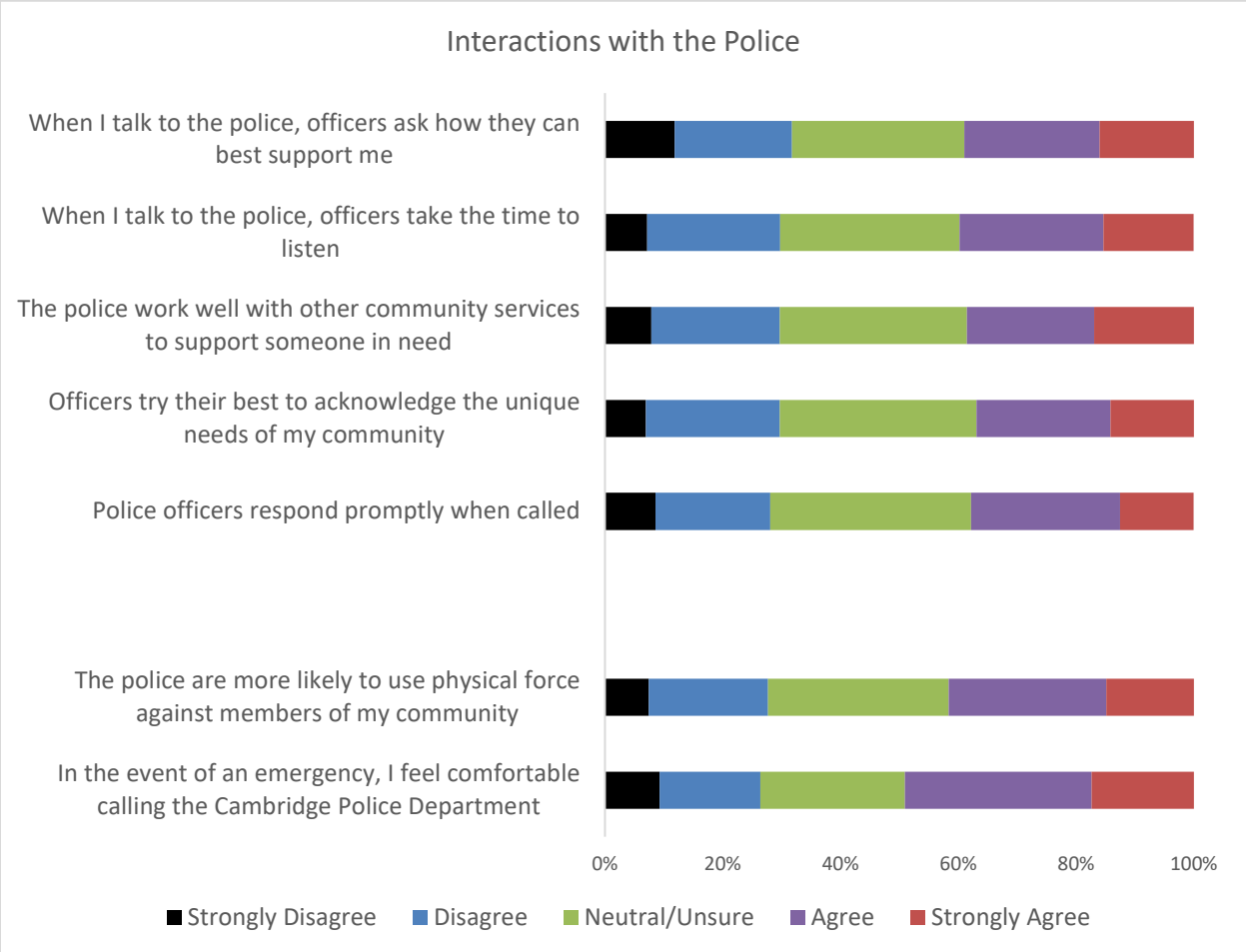
When asked about past relationship experience, 47% of respondents said they have had relationships that felt safe, trusting, peaceful, and filled with love. In contrast, 42% of respondents have felt controlled or isolated by someone they were romantically and/or sexually close to; 41% report having experienced having a lack or loss of money, shelter, and/or job security as a result of being with someone romantically or sexually; 40% have had relationships that felt physically or emotionally unsafe.



Perception of Cambridge Public Services - The Police

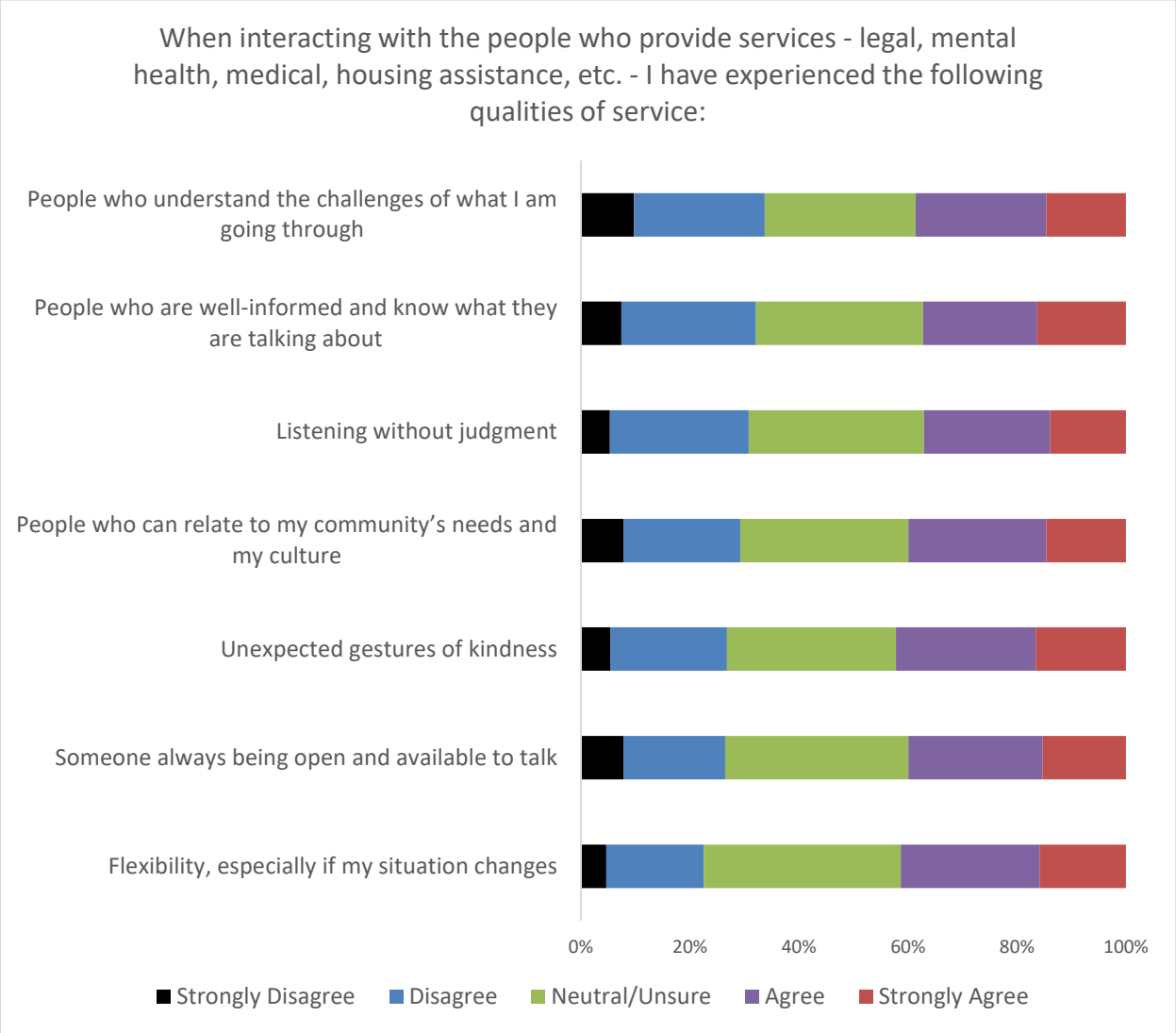
More respondents agreed than disagreed with generally positive statements regarding the police. Almost half (49%) of respondents said they feel comfortable calling the police in the event of an emergency. A greater share of respondents who identify as white are comfortable calling the police (59%) compared to African American (52%) and Black (49%) respondents. Those who identify as Hispanic had the smallest share of respondents who felt comfortable calling the police (32%), and the largest share who *strongly disagreed* that they felt comfortable calling the police in the event of an emergency (12%).

42% of respondents agreed that the police are more likely to use physical force against members of their community. 75% of respondents who identify as Middle Eastern or North African *strongly agree* that the police are more likely to use force against their community (though the small sample size of this group should be noted). Those who also *strongly agree* with this statement include respondents who identify as Black and/or African American (29%) American Indian or Alaskan Native (29%), and Hispanic (26%). In contrast, only 5% of white respondents strongly agree that the police are more likely to use force against members of their community.



Perception of Cambridge Public Services - Representation

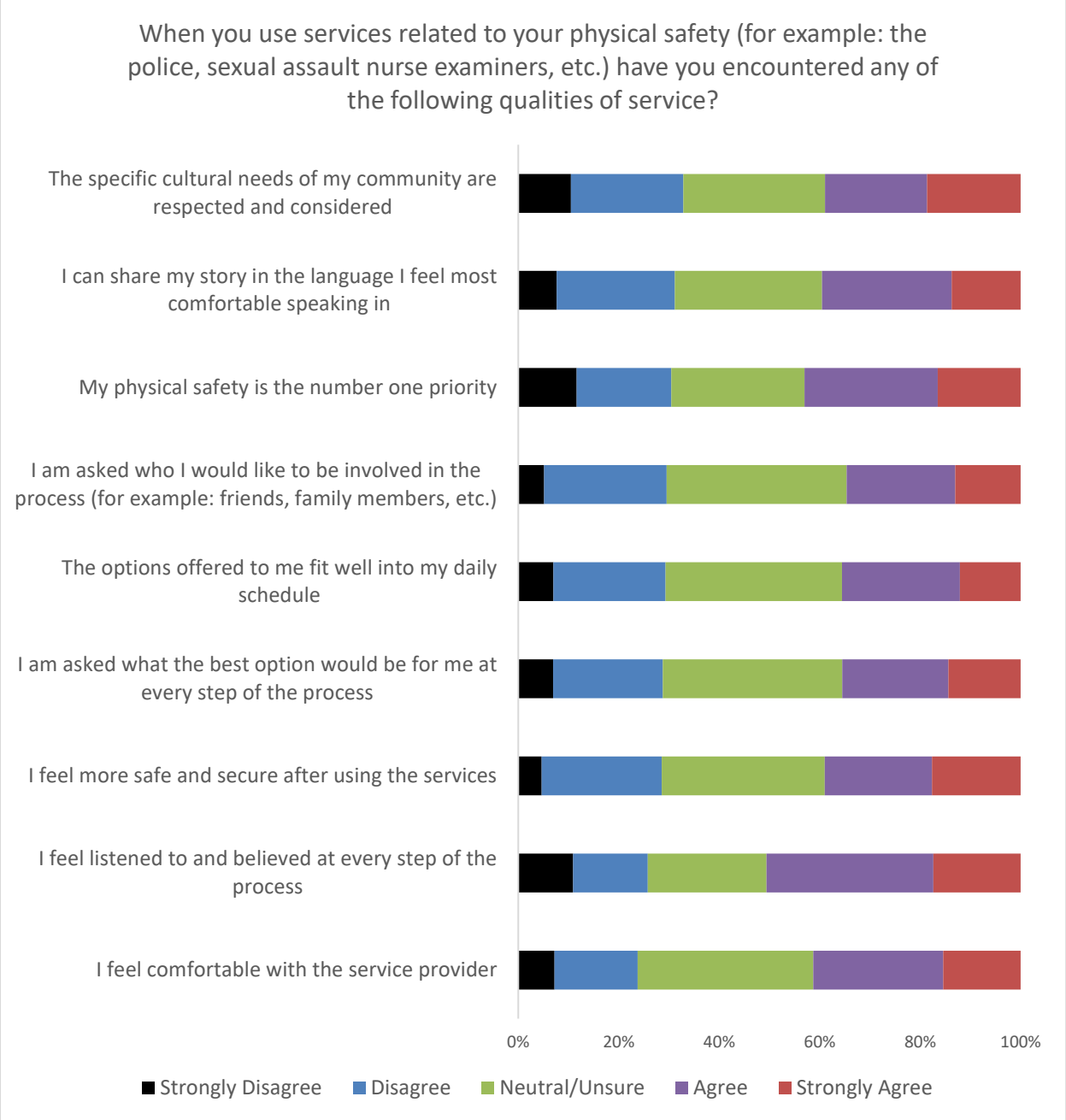
Positive perceptions of representation dominated over negative perceptions when considering representation in service provision. Generally, more people agree than disagree that they have experienced the qualities listed which reflect compassion, flexibility, and understanding among service providers.



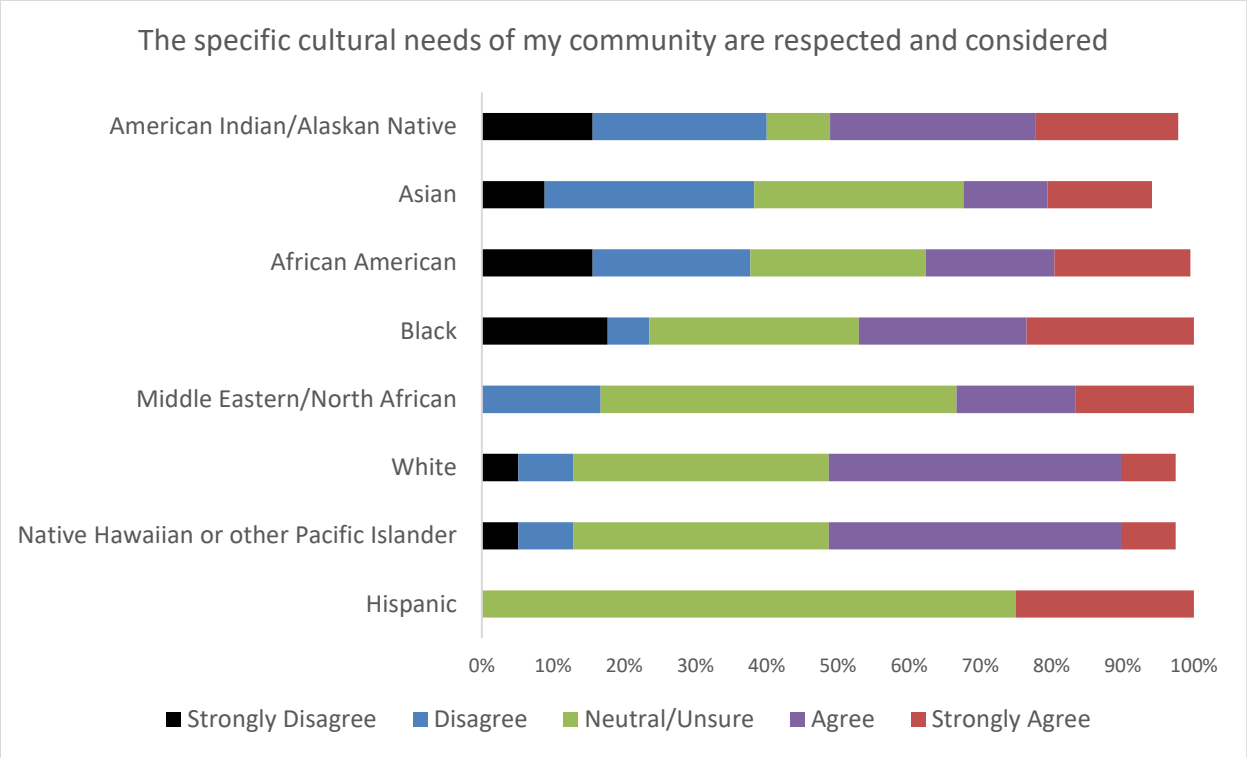
Perception of Cambridge Public Services – Physical Safety and Health

Respondents generally reported positive perceptions of services related to physical safety, such as the police and health care workers. Namely, many respondents feel comfortable and listed to by service providers, and feel that their physical safety is prioritized. The notable exception is

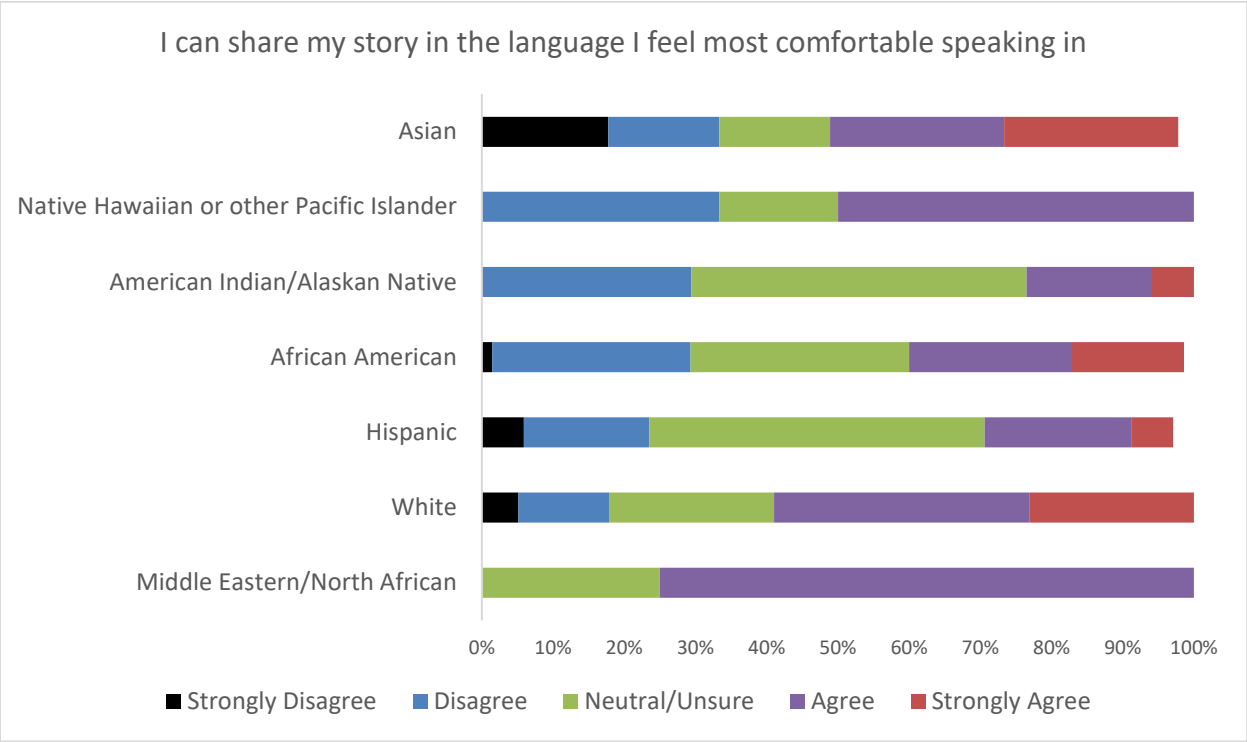
the one third of respondents who *do not* agree that the specific cultural needs of their community are respected and considered or that they are able to employ the language they are most comfortable using while navigating services.



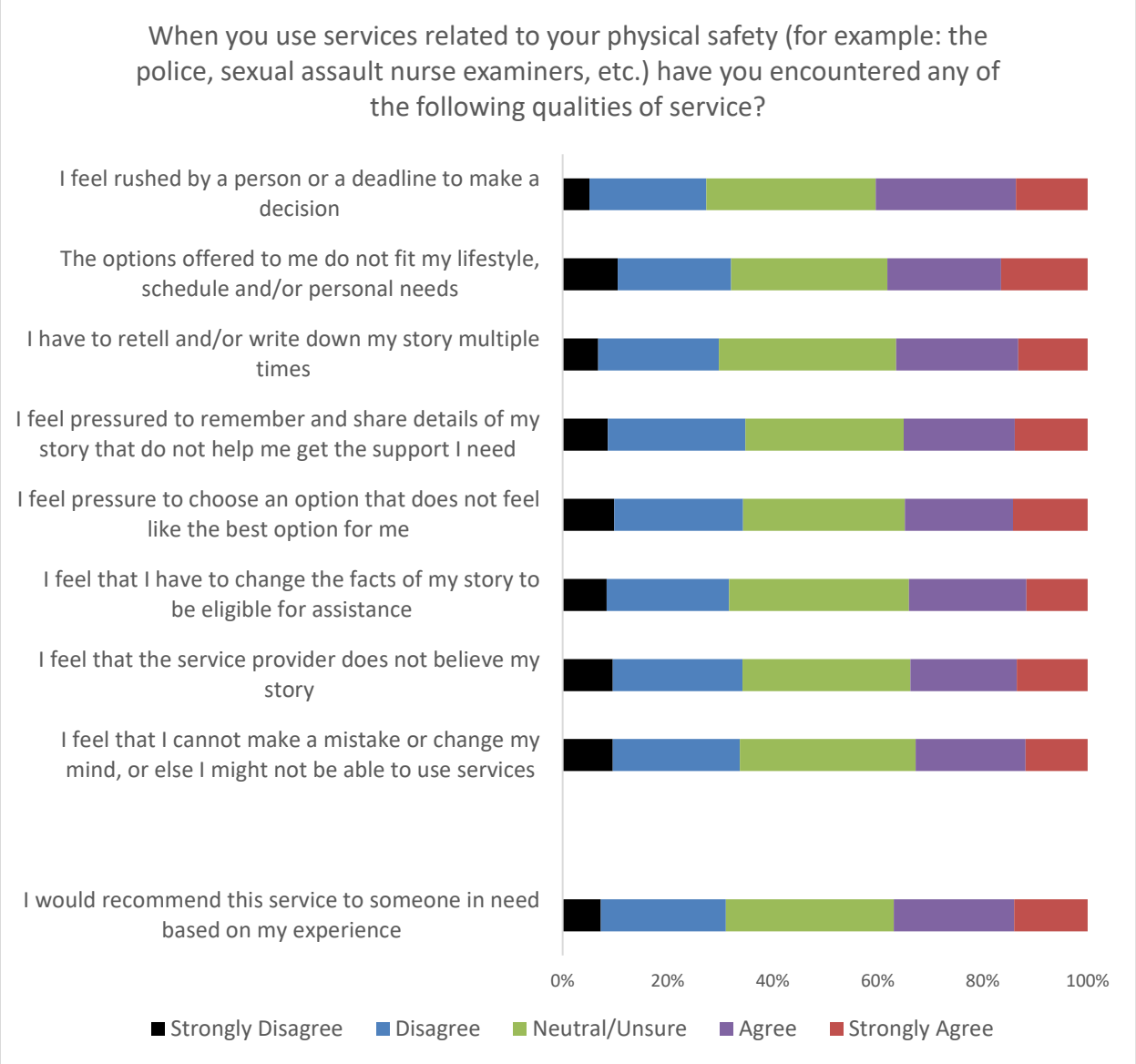
40% of American Indian/Alaskan Native respondents disagree or strongly disagree that the specific cultural needs of their community are respected and considered, followed by 38% of Asian respondents and 38% of African American respondents.



Furthermore, 33% of Asian respondents disagree or strongly disagree that they are able to share their story in the language that is most comfortable to them, followed by 33% of respondents who identify as Native Hawaiian or other Pacific Islander, and 29% of respondents who identify as American Indian or Alaskan Native.



37% of respondents agree that they would recommend services related to physical safety to someone in need based on their experience. Still, 40% agree that they feel rushed to make a decision and 38% agree that the options available do not fit their personal needs.

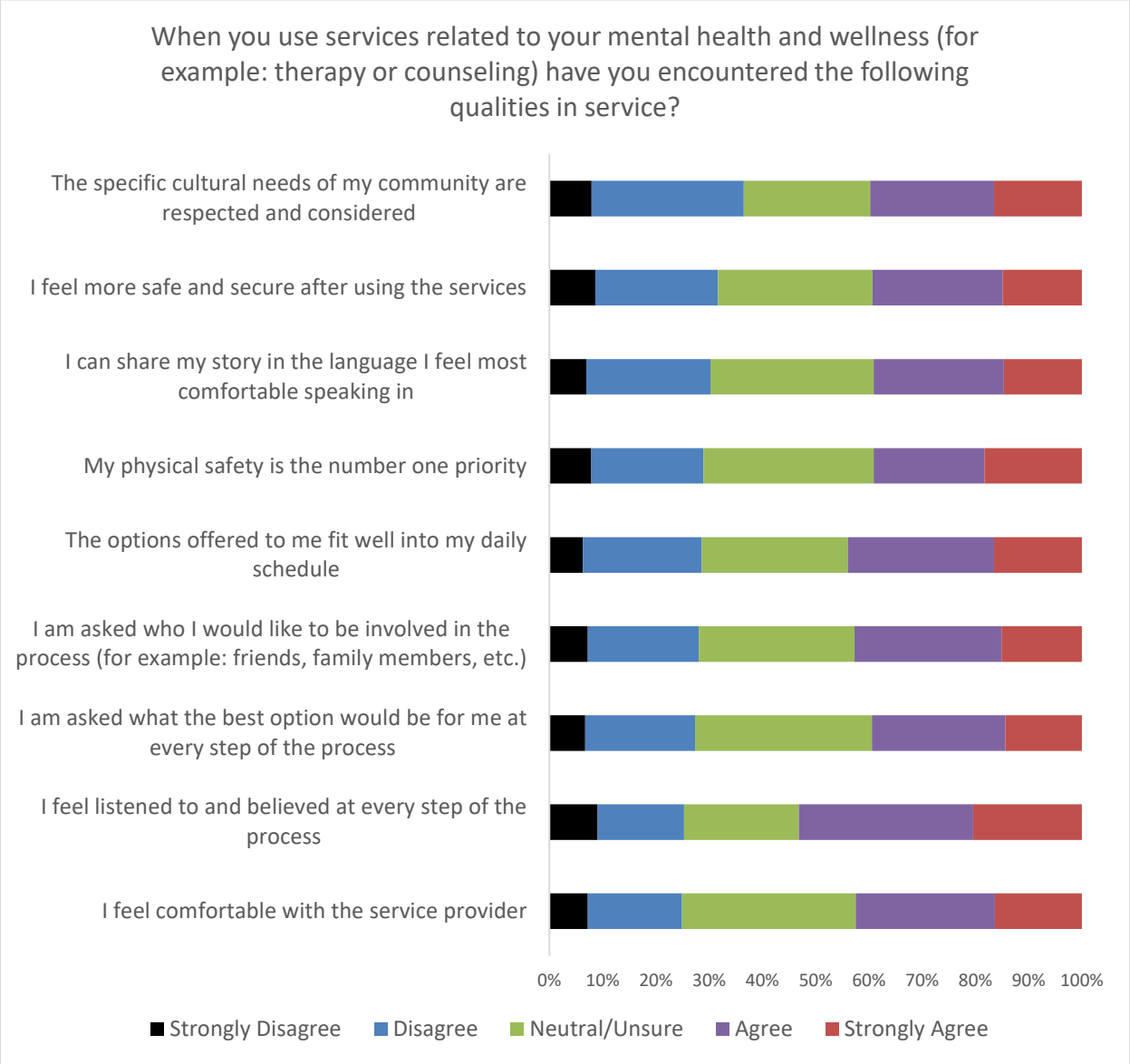


Perception of Cambridge Public Services – Mental Health and Wellbeing

Respondents indicated positive perceptions regarding providers of services related to mental health and wellness (for example, therapy or counseling). A majority of respondents (53%) feel listened to and believed at every step of the process, and 42% feel comfortable with the service provider. One respondent wrote:

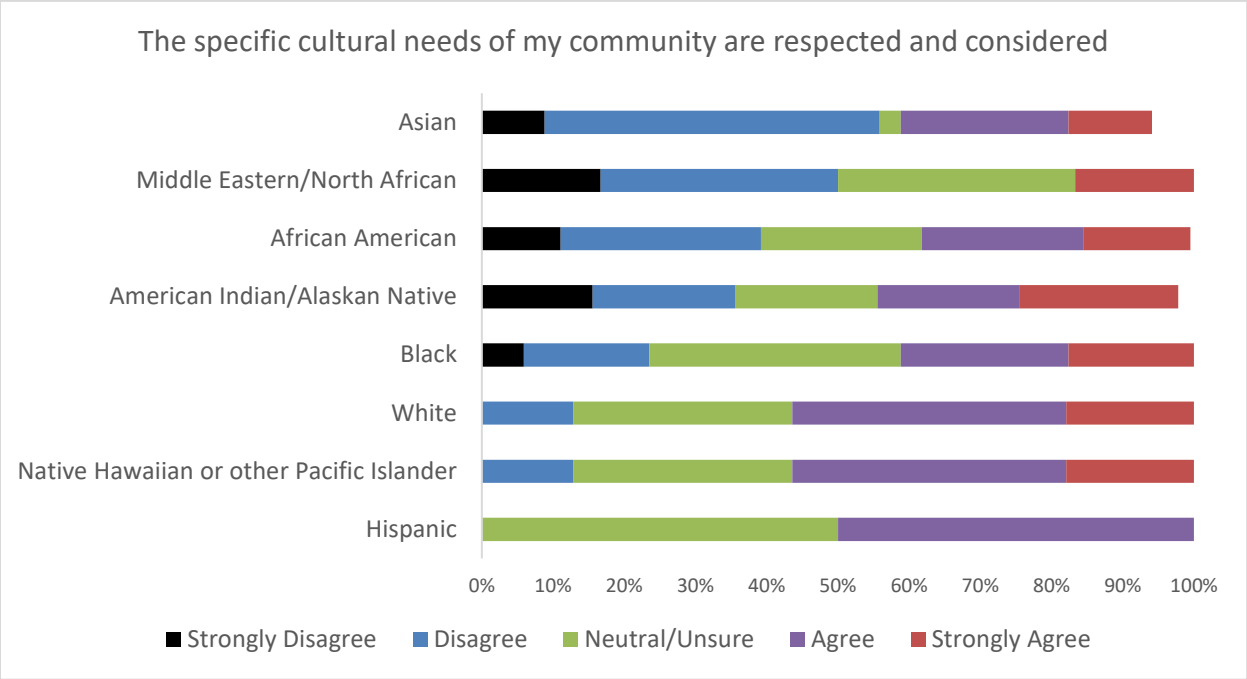
> "Mental health providers are good and sensitive people, and they have helped me a lot (even though I always tend to fall back to the same problems)."

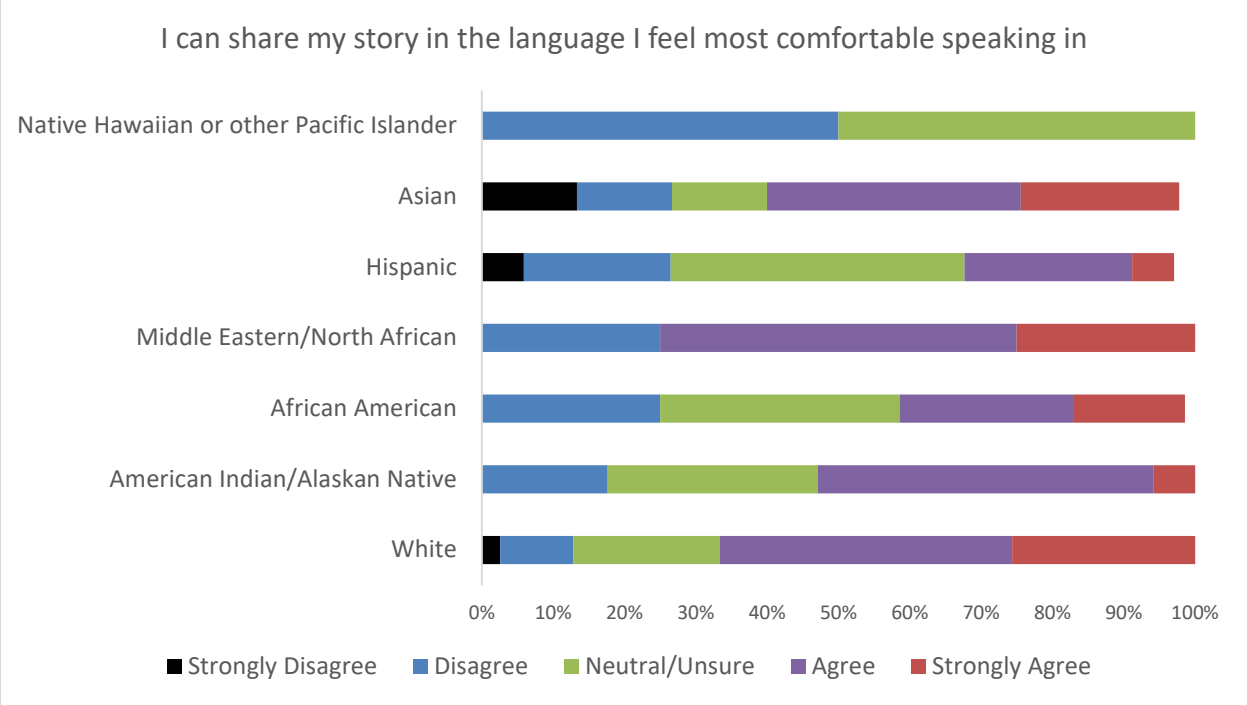
37% of respondents disagree that the specific cultural needs of their community are respected and considered. This number is even higher than the same metric for services related to physical safety, indicating that mental health and wellness providers may need to focus on improving the cultural competency of the care they provide.



More specifically, respondents who identify as Asian (56%), Middle Eastern (56%), and African American (50%) disagree that the specific needs of their communities are respected and considered. 22% of American Indian or Alaskan Native respondents *strongly* disagree that the specific needs of their communities are respected and considered by mental health service providers. Those who disagree that they can share their story in the language most comfortable

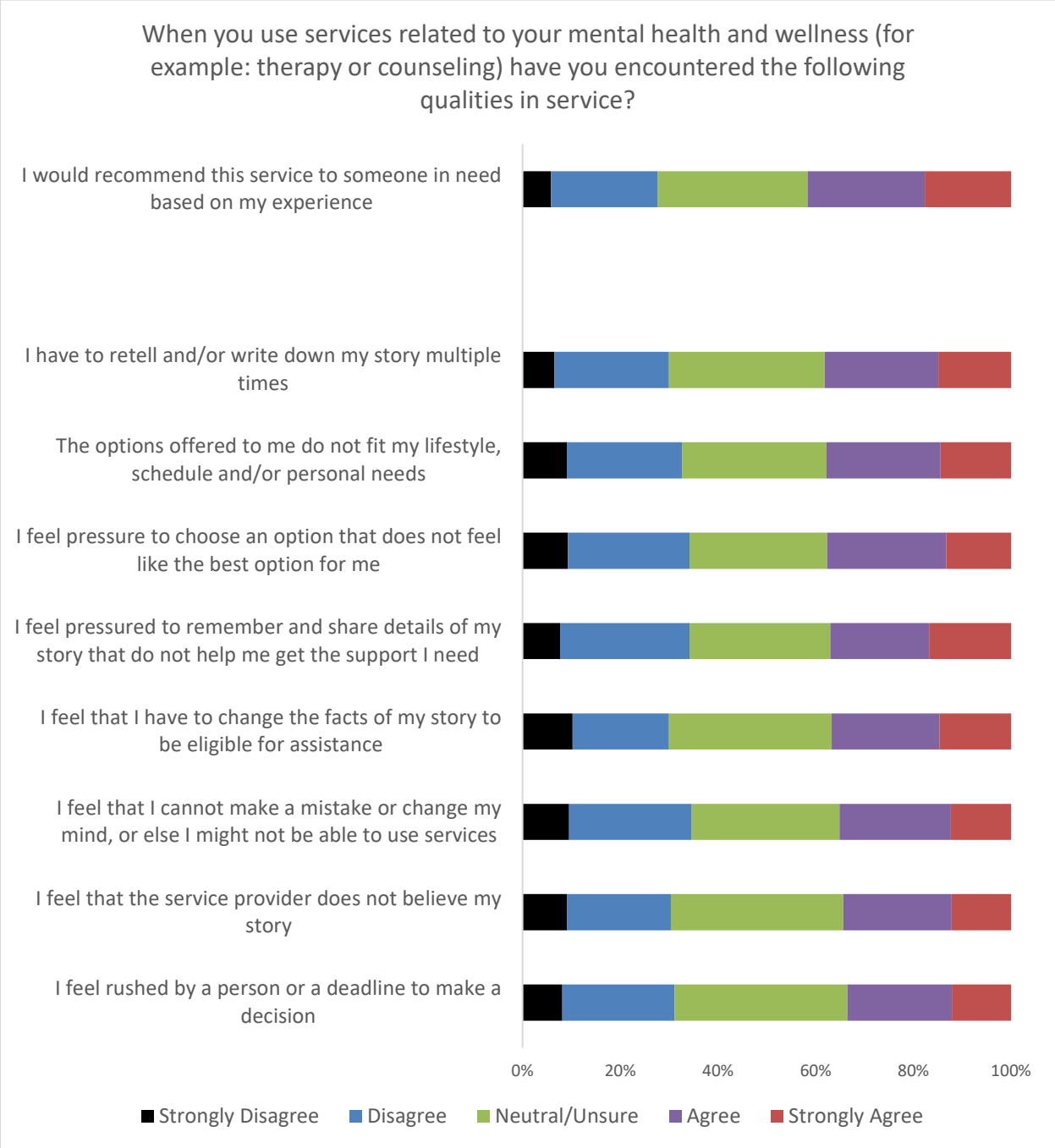
to them include respondents who identify as Native Hawaiian or other Pacific Islander (50%), Asian (27%), and Hispanic (26%).





42% of respondents agree that they would recommend services related to mental health and wellness to someone in need based on their experience (the greatest percentage of all the

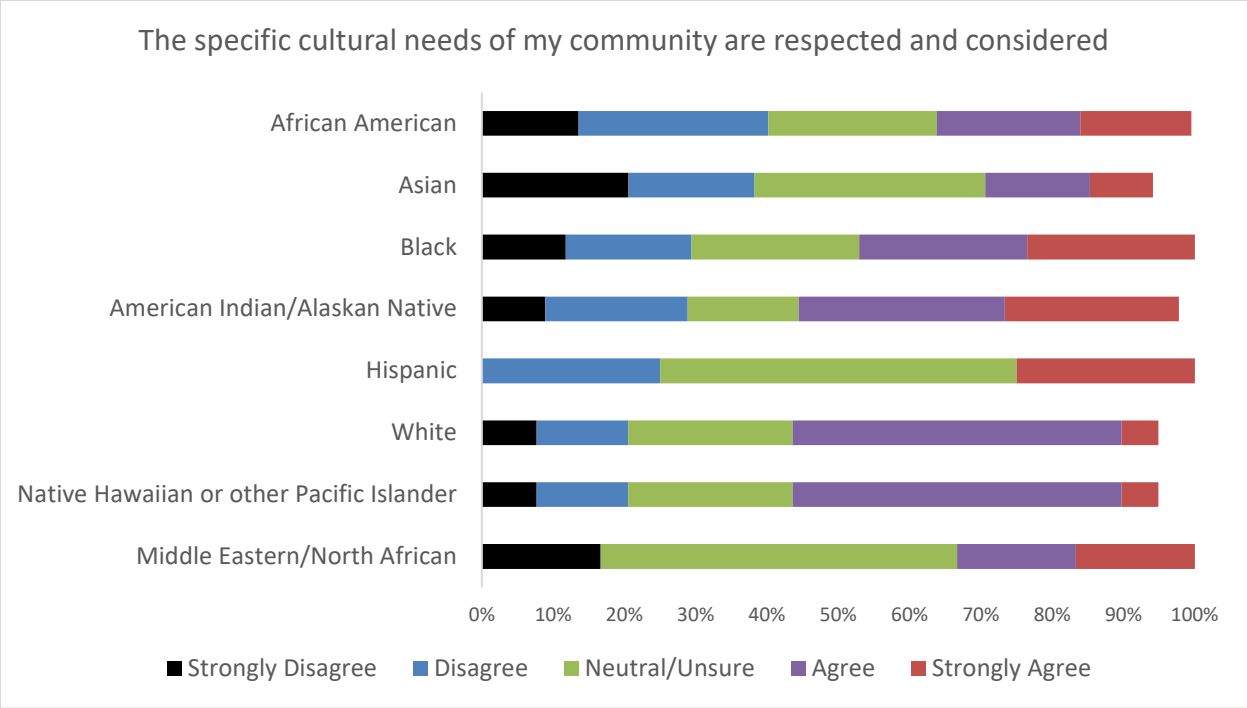
service categories). Still, 38% of respondents agree that they 1) have to retell their story multiple times, 2) feel pressure to choose an option that isn't the best for them, and 3) feel pressure to remember and share details of their story that do not help directly with obtaining support.



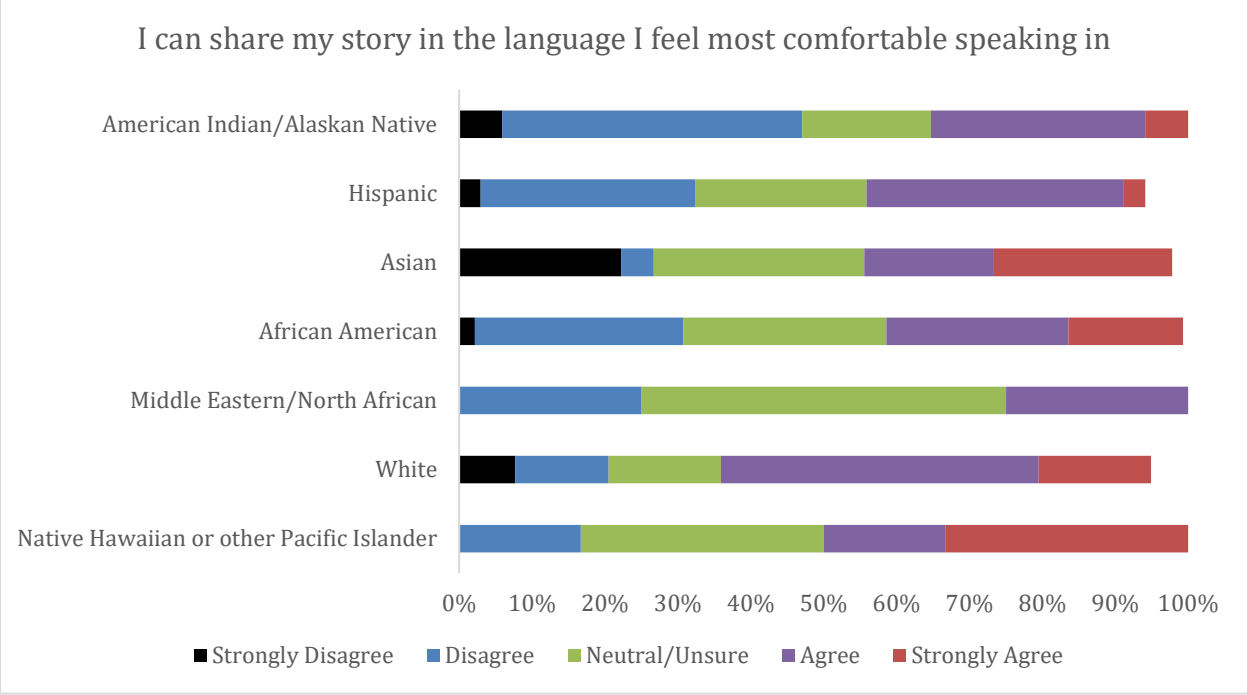
Perception of Cambridge Public Services – Financial, Housing, and Job Security

Like previous categories, more respondents agreed than disagreed with positive statements about services related to financial, housing and job security.

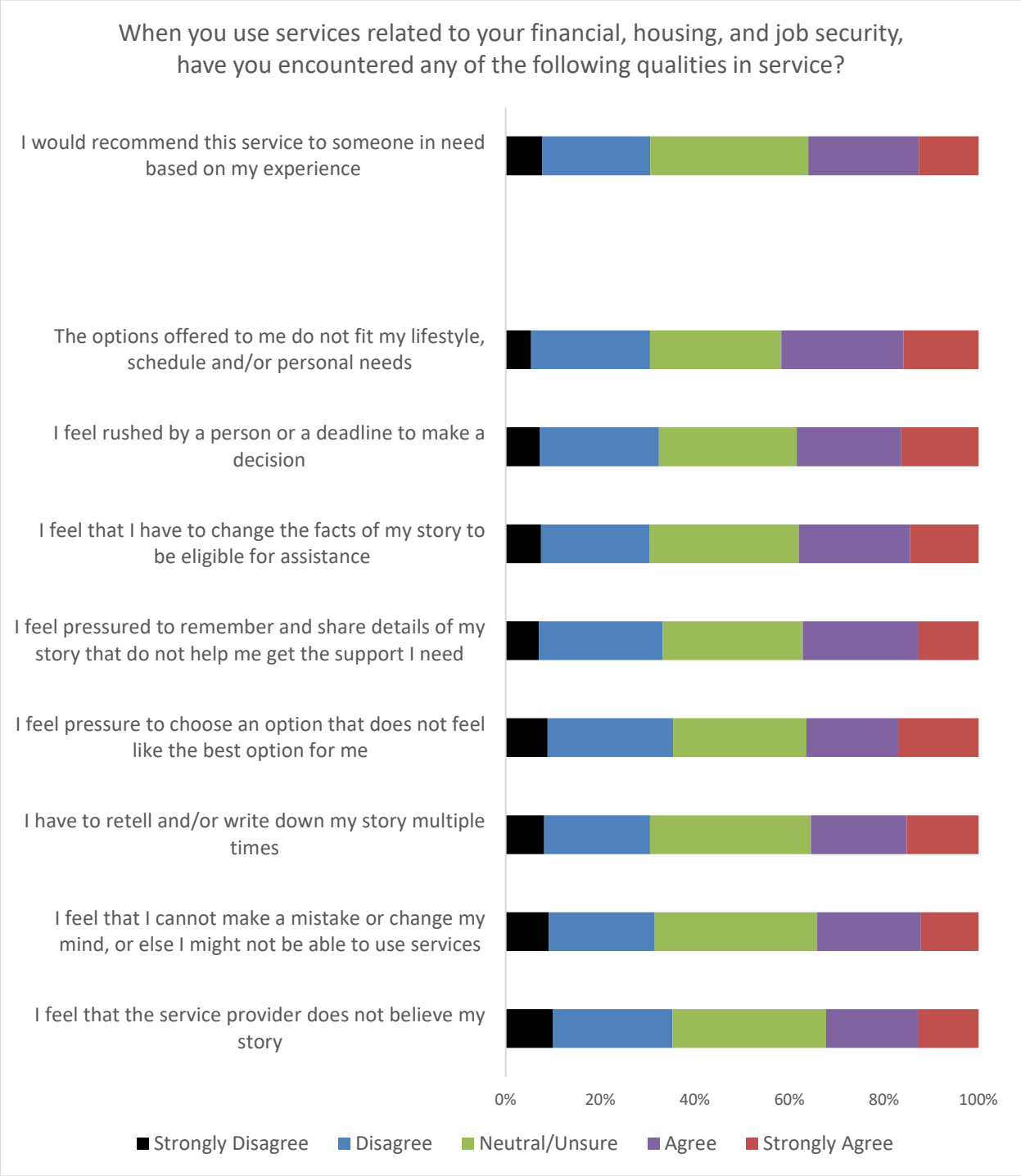
40% of respondents who identify as African American *disagreed* that the specific cultural needs of their community are respected and considered followed by 38% of Asian respondents, with 24% of Asian respondents saying that they *strongly* disagree.



47% of respondents who identify as American Indian or Alaskan Native disagree that they are able to share their story in the language they feel most comfortable, followed by 32% of Hispanic respondents and 27% of Asian respondents.



Only 36% of respondents agree that they would recommend services related to financial, housing, and job security. The top concerns of respondents were 1) feeling that they had to change the facts of their story to be eligible for assistance, 2) feeling rushed to make a decision, and 3) feeling that the options available do not fit personal needs.



Open-ended Feedback and Participant Stories

What additional services would be helpful to your support/healing/safety/peace of mind?

"Community leagues of mental health advocates should exist so that folks can actually address the issues they're facing when a situation has escalated."

"Check ins at my new apartment and to be able to call for advice"

"A domestic violence support group"

"Meeting with others who have been hurt and recovering"

"Access to lawyers or legal advice"

"Assistance with filling out forms and child care services"

"Infant home care for new mothers", "Women with children need a lot of help!", "Child care services while I am getting the help I need"

"More time to talk to a counselor and figure out what I need"

"Transportation assistance"

"More blended community support within the police"

"I need financial support to divorce an abusive, controlling spouse"

"Victim advocates available after hours and direct contacts"

"Help with filling out forms, for legal assistance, for services, for everything"

"Community spiritual places, meditation and drop-in spaces"

"[Speak to] the elders of the community"

"An advocate who speaks my native language helps a lot more"

"Work with church elders, like Stephen's Ministry"

What would make the services easier to use and more helpful to you?

"Have a direct contact or phone listed"

"More respect for racial differences"

"Health Insurance"

"Transportation if in person"

"A job source"

"Language translation help"

"Computer training"

"More choices"

"Having them always connecting with each other or a liason who can help a person go through the work so they don't have to do it alone. It can be hard and lots of work"

"Provide more safe shelter"

"Protect our privacy"

"Have a more diverse police force"

"The police should have more patience"

"I wish the police would listen more"

Is there anything else you would like us to know about your experience using services provided to survivors of violence in the City of Cambridge?

"I've had both amazing and terrible experiences."

"This program [Transition House] is the best thing that has happened to me and the people here are very helpful in every way"

"The Transition House literally saved my life and they are very understanding of my story"

"Yes I am very grateful to each and everyone who is a part of this organization. Transition House took me as a scared broken down woman who didn't even like myself, but because of them I now love myself and I want to become an advocate for women just like me. Because of this place I am whole again."

"In the event of an emergency, I would be happy to call Cambridge Police, The police responded quickly after receiving the call. I'm happy with it."

"I am comfortable being with nurses and doctors but not the police"

"Having more community members supported by the police, with the police, to allow the community to know that it's ok to trust the police with certain situations, especially abuse"

"They [the police] are getting better"

"The staff knows how serious my situation is and are very helpful problem solving and listening to my concerns. (No law enforcement involved with my situation)"

"Kind advocates"

"Better protection for survivors of violence"

“Deal with racial discrimination and protect the interests of people of color”

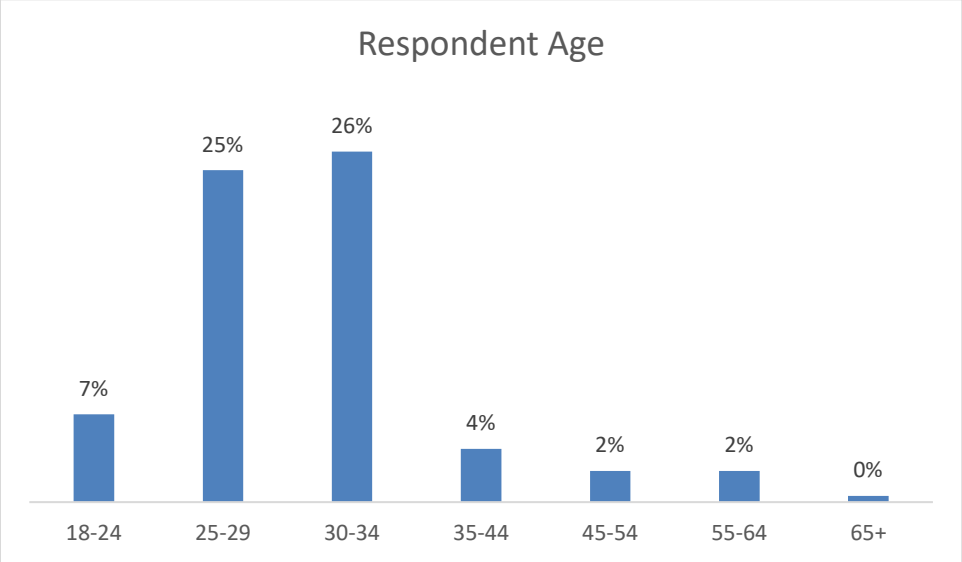
“It's not easy for everyone. It can be a lot of survivors working together”

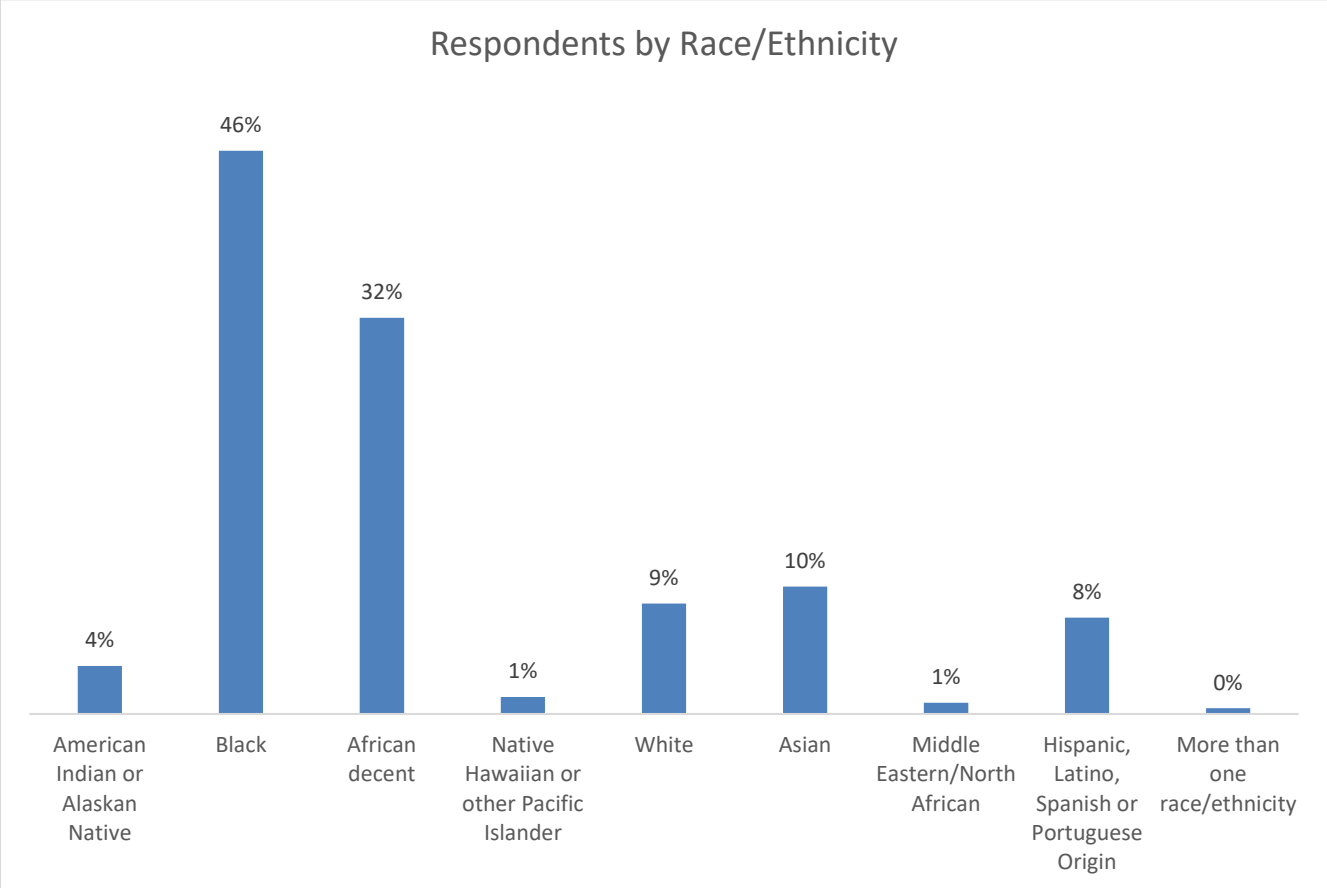
“Talking about my experience with a counselor took the pressure off”

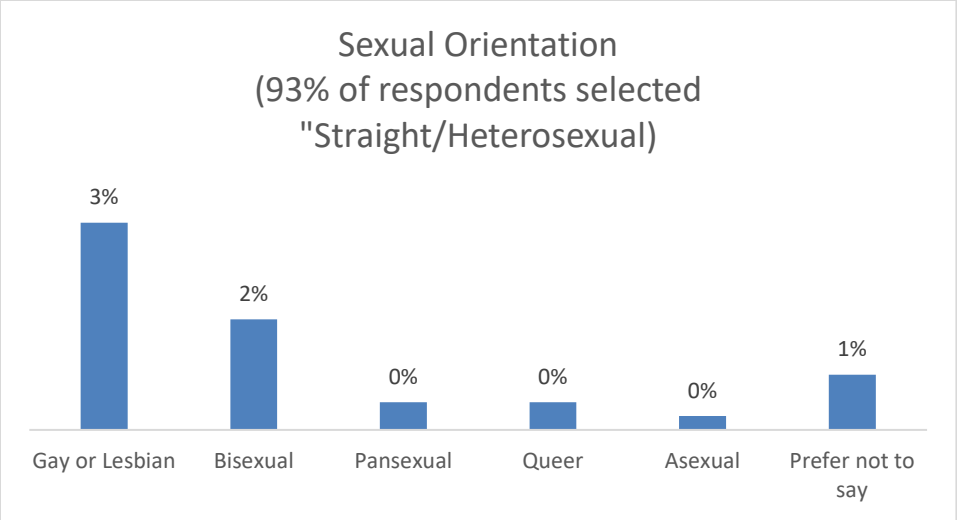
Assessment Limitations

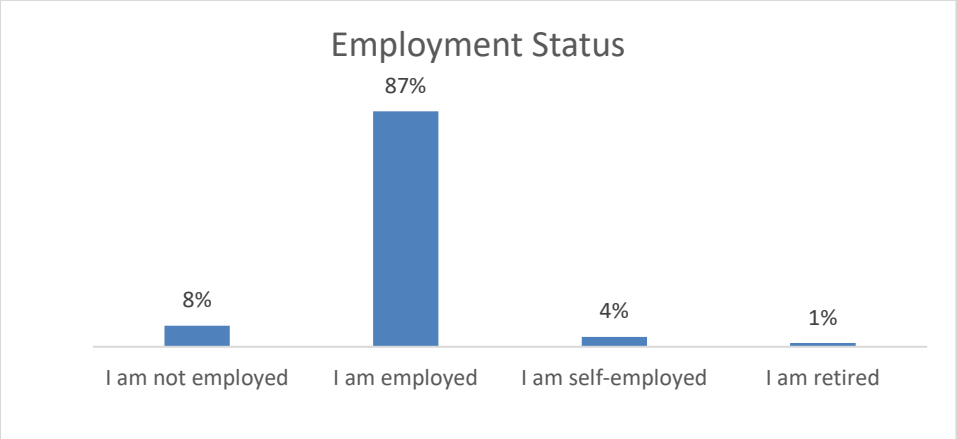
1) The survey tool received a high level of bot activity during the allotted two-week period of engagement, on par with other assessments and surveys that are launched virtually. This served as an immediate limitation to understanding true outreach numbers, as deciphering authentic assessment results from a software application imitating human activity was initially quite challenging. The SBT team quickly introduced additional security and validation parameters embedded in the Qualtrics platform within twenty hours of initial bot activity detection. The research team then implemented an extensive and multi-layered data-cleaning process to validate submissions based on the following qualities: reCAPTCHA score (responses scoring <0.5 were removed), IP address, response duration, response completeness, “click-through” response quality, and email address validity. Only high-quality responses that passed each of these parameters were included in the final analysis.
2) Integrated learning spaces with the Steering Committee lacked representation of stakeholders with a prioritized identity of survivorship despite the initial (and subsequent) requests made by Start By Talking to have survivors present. Additionally, low attendance on several mandatory meetings by Steering Committee members resulted in delayed sessions, a reduced timeline to apply toward the curriculum, and extended assessment timelines by at least a month.
3) Lastly, financial restraint for assessment incentives presented a barrier in our efforts to compensate the most minoritized members of the Cambridge community for sharing their personal narratives of trauma. Initial suggestions of $5 gift cards per participant were increased to $15 per participant after discussions that acknowledged the possible impacts and exploitative practices of White-centered systems undervaluing the expertise of the communities of color from whom they seek to solicit highly sensitive information. The city initially provided funding for 110 gift cards (50 were physical cards sent to Cambridge to support Pop-Up Events) with the agreement to provide more should more residents participate. This agreement was not upheld by the City and resulted in another local program holding themselves responsible for providing funding to the participants who had already submitted assessments before the incentive program was abruptly ceased. This materialized as a prominent barrier to engaging with communities of color within the city and most certainly had an impact on the number of survivors that might have engaged with filling out the survey.

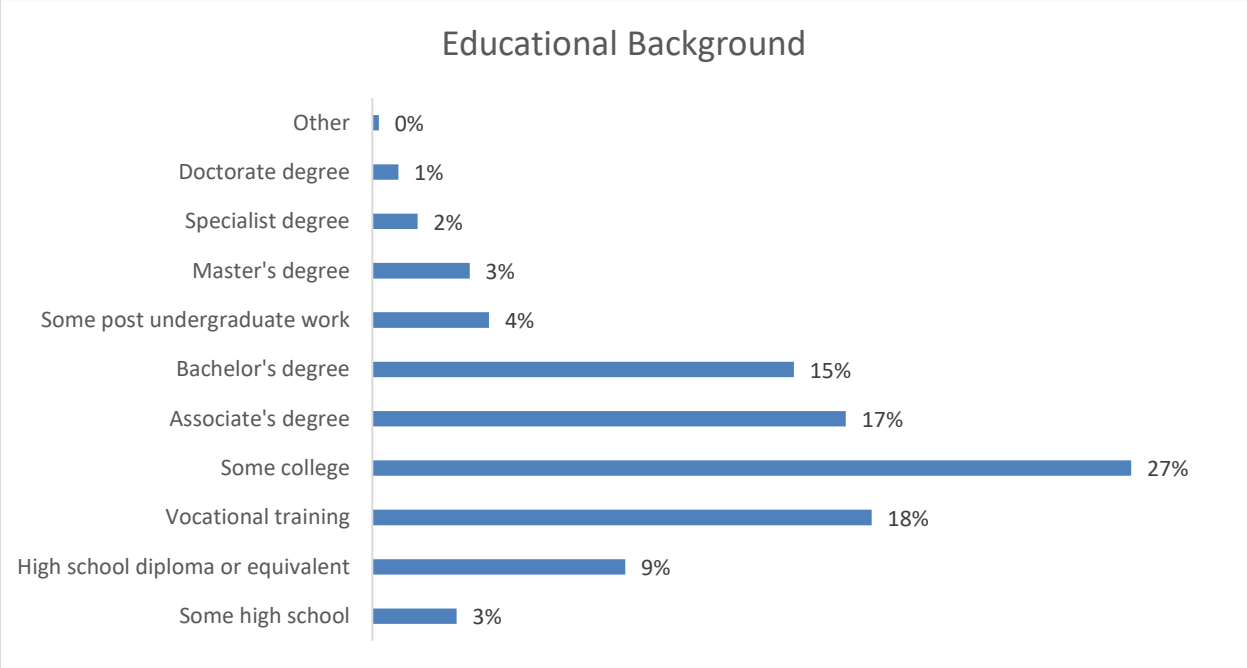
Demographic Information






Sexual Orientation
(93% of respondents selected
"Straight/Heterosexual)
3%
2%
0%
0%
0%
1%
Gay or Lesbian
Bisexual
Pansexual
Queer
Asexual
Prefer not to say


Employment Status
87%
8%
4%
1%
I am not employed
I am employed
I am self-employed
I am retired


Educational Background
Other 0%
Doctorate degree 1%
Specialist degree 2%
Master's degree 3%
Some post undergraduate work 4%
Bachelor's degree 15%
Associate's degree 17%
Some college 27%
Vocational training 18%
High school diploma or equivalent 9%
Some high school 3%

In what language do you feel most comfortable having a conversation?	
English	**Other**
359	32
91%	8%

In what language do you feel most comfortable writing and reading?	
English	**Other**
356	41
90%	10%

Gender Identity							
Male	**Female**	**Transgender Man**	**Transgender Woman**	**Gender queer**	**Prefer not to say**	**Non-binary/ third gender**	**Agender**
213	215	2	2	1	1	0	0
49%	49%	0%	0%	0%	0%	0%	0%

Are you currently in a relationship?	
Yes	**No**
345	88
79%	20%

Do you provide care for any children?	
Yes	**No**
173	256
40%	59%

Disability Diagnosis	
Yes	**No**
93	330
21%	76%