

The Cambridge, Massachusetts, USA *Domestic Violence Free Zone Initiative:* A Municipal Response to Domestic Violence



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SUMMARY

On March 7, 1994, the Cambridge, Massachusetts, USA City Council passed a resolution defining the city as a Domestic Violence Free Zone directing all municipal and city-affiliated organizations to work collaboratively to reduce family violence. This concept of a city as a Domestic Violence Free Zone represents a long-term commitment to decreasing incidents of domestic violence and promoting systemic changes to accomplish this goal. As a concept, it struggles to answer the question, "What is the role of local government when home is not safe?" The resolution was followed by the installation of signs posted throughout the city at major intersections, at the access points for public transportation and in front of every municipal health center, library and school.

A grass-roots summit of community members was convened to begin drafting a plan to manage the transformation of the city into this Domestic Violence Free Zone. Many of the summit participants had been in the forefront of addressing domestic violence beginning in the 1970s, including shelter founders and workers, lawyers and community organizers. The recommendations of the summit were then turned over to city officials who created an Implementation Panel. The panel, comprised of representatives of major departments and agencies as well as community organizations, developed an 11-point *Implementation Plan* to direct a series of collaborative projects involving the city's Public Health Commission, the School Department, the Police Department, the Human Services Department and the City Administration.

The main themes of the plan include: 1) establishing clear, consistent and appropriate domestic violence protocols for all municipal workers and departments; 2) undertaking basic and specialized training with all municipal employees to ensure competency in those protocols and in the elements of domestic violence; 3) coordinating a general public education Initiative focused on prevention, service utilization and cultural and linguistic accessibility; and 4) enhancing the city's direct service system. Each recommendation is accompanied by a timetable for implementation, e.g. one, three and five years. The City Manager appointed a Core Group to oversee and report on the progress being made toward these eleven Initiatives.

The purpose of this paper is to demonstrate how this **Domestic Violence Free Zone** project was conceived and organized, to discuss the efficacy of a local response and to identify the resources necessary to replicate the program. And please remember: this is a work in progress. We welcome all comments and suggestions.

► Copies of documents identified with an asterisk * (and all future documents) are available on the City of Cambridge home page at the URL listed below or by mail:
The Cambridge Commission on the Status of Women
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CONTEXT AND ANALYSIS

Cambridge, Massachusetts is situated on the East Coast of the United States across the Charles River from Boston, the state capitol. Founded in 1638, Cambridge is home today to a culturally diverse population of over 95,000. Over fifty languages may be heard on the streets of the city, including Spanish, Haitian Creole, Portuguese, Chinese, Amharic, and Korean. Children from 82 different countries of origin attend the public schools. College students from around the world study at Harvard, Radcliffe, the Massachusetts Institute of Technology, and Lesley College. Residents also include a large population of lesbian, gay, bisexual and transgendered persons who found a relatively tolerant atmosphere and government. The heavy industries of the 19th and early 20th centuries have been replaced by technology-based enterprises, including electronics, self-developing film and cameras, software and biotechnology research. A General Profile of the city is included later in the paper to give a sense of the city and its people.

In addition to the students and faculty of its colleges and universities, Cambridge draws additional residents to its cultural and intellectual ambience. The city is home also to the descendents of those who immigrated to the US several generations ago to work in its factories and to more recent arrivals from countries in conflict all over the world. Some neighborhoods are characterized by stately, spacious private homes and recently renovated condominiums. Other neighborhoods are filled with densely situated three-family wood-frame homes, many of which are rental units. In all of these homes, domestic violence is the fastest-growing crime. In fact, in 1997, a third of all assaults committed in the city were related to domestic violence.

It is important to remember that it has been only 25 years since domestic violence was recognized by the legal system and support programs were created for victims. In 1974, there were only two shelters for battered women in the entire state of Massachusetts, there were no statewide laws and most courts and judges treated women complaining of abuse as if they had caused the problem. In 1979, Massachusetts adopted one of the nation's first laws to address the issue, called the Abuse Prevention Act (M.G.L. Chapter 209A). The decade following passage of the act gave rise to dozens of shelters, many of them funded by the state. Abuse was no longer dismissed as a woman's private problem; public service announcements frequently decried domestic violence and popular movies were made showing the horrors experienced by women beaten by their partners. Police departments and judges were forced to deal with domestic violence more responsively. But the numbers of domestic violence cases continued to rise.

The call for development of the Cambridge as a ***Domestic Violence Free Zone (DVFZ)*** came from City Councilor Katherine Triantafillou, co-author of the state Abuse Prevention act and an attorney with a long history of working on domestic violence prior to her election to the City Council. Despite the many institutional and attitudinal changes Triantafillou witnessed during her 20-year advocacy efforts on behalf of battered women, the services for abuse victims remained insufficient. New laws and additional support programs encouraged more reporting, demonstrating how pervasive domestic violence is in our society, but did little to stem the tide of domestic violence. Communities for whom services were virtually non-existent or inaccessible began seeking assistance. Lesbians and gay men had almost nowhere to turn if their relationships turned violent. Recent immigrants were afraid of utilizing law enforcement resources and, when they tried, could not receive services in their primary language.



Locally, when the DVFZ was proposed, the Cambridge Police Department was responding to nearly 2,000 calls for service for domestic violence assistance and was serving more than 800 domestic abuse restraining orders (orders issued by the local court requiring an abusive partner to stay away). It was the major municipal department directly engaged in confronting domestic abuse. The department had come a long way from the days in the mid-1970s when officers refused to distribute information and referral cards prepared by the local battered women's program. Led by a small group of officers, the department acknowledged its limited ability to understand and respond to domestic violence and sought new resources and connection with the women's organizations which had been leading the campaign against it.

By 1993, the Cambridge Police Department was in the forefront of developing a model domestic violence unit. The department hired Elizabeth Dillon, a seasoned advocate, as their full-time "Domestic Violence Liaison" to assist in developing protocols for police responses and linkages between the department and the community-based shelters and support organizations. That same year, the department successfully bid for federal funds to begin "Operation Safe Home," to create a comprehensive database of cases and to make electronic alarm systems available to victims at high risk for repeat abuse. All officers received in-service training coordinated by staff of Transition House and Emerge, a program for battering men. Key leadership of the Police Department began to meet regularly with the city's Women's Commission staff to evaluate and increase the scope of their work on domestic violence.

However, these efforts were not coordinated with other departments of city government. Hospital workers, for example, were not trained to identify signs of domestic violence exhibited by their patients nor were they trained to assist in preserving potential evidence against batterers. The schools rarely addressed the issue, even though domestic violence was proven to affect hundreds of children who either witness violence in their homes or are themselves subject to it. City staff coordinating recreation programs for youth and elders were not recognizing warning signs that their constituents might be reaching out for help on family violence.

Many of the leading thinkers or workers in the field of domestic violence had their roots in Cambridge. Transition House, one of the first shelters in the country is located here. Emerge, one of the first treatment programs for batterers is located here. The municipally-run Cambridge Hospital has been home to the Victims of Violence Program, one of the premier programs for the psychological treatment of trauma connected to physical, emotional and sexual abuse. Many of the lawyers active in services for battered women either work or live in Cambridge. In short, Cambridge is a center of some of the best intellectual and activist resources in the United States, yet the numbers of violent incidents was holding steady and there was no concerted effort to coordinate these resources and efforts locally. Given the size and depth of the problem of domestic violence, could it be addressed more successfully on a municipal level?

Often, institutional and attitudinal change require the intervention of key individuals. Once Councilor Triantafillou had created a framework for a citywide approach, Richard Wright, the city's Violence Prevention Coordinator, conceptualized and proposed a collaborative process to actualize the **DVFZ**. Wright and his colleague, Nancy Ryan, Director of the city's 20-year-old Women's Commission, convened a Domestic Violence Summit during which the



earliest activists could share their wisdom and experience. The Summit inspired a 6-month series of meetings all over the city and resulted in a set of comprehensive recommendations from the activists to the city. Wright promoted the analysis that any successful attempt at responding in a new way to domestic violence would require a program created from the bottom up with total support from the top down. This framework has informed every aspect of the DVFZ.

The City Manager accepted the recommendations and made a firm commitment to apply previously untapped municipal resources to challenge domestic violence in the city. John O'Brien, Commissioner of Public Health, brought the recommendations before the Health Policy Board which authorized a series of new efforts in the health care system to provide better patient screening and support. One primary resource, all agreed, would be the 10,000 employees of the municipality, the school system and the hospital. If every city worker received at least baseline training in recognizing the warning signs and danger of domestic violence and became a sensitive, effective source of support, information and referral for constituents, friends and relatives, the city would have a chance to change fundamentally the consciousness of its residents. Ultimately, the goal is to decrease the incidence of domestic violence in the city.

KEY PRINCIPLES:

- Ask fundamental questions, like “What is the Role of Local Government When Home is not Safe?” Is municipal government responsible to promote a climate of intolerance toward violence and intimidation? What are our municipal responsibilities to residents who seek refuge from home, a place which is most often define as a ‘sanctuary’?”
- Establish commitment at the highest levels of government to a long-term, multi-layered, collaborative process to answer those questions
 - Elected officials
 - Appointed/Administrative officials
 - Commit to a major government project led by its most informed and affected residents
- Involve key community organizations and individuals at every level and stage of process
- Develop a response to the problem which has support from the top down but is created from the bottom up
 - Utilize the expertise of the founders and wise elders of domestic violence programs; lead with their insights
 - Ask community activists to envision a desirable future, rather than limit themselves to what appears practical and achievable at the moment
- Establish an overall principle of inclusion at the start of the project
 - Fully incorporate marginalized communities including gay/lesbian/bisexual/transgender individuals and groups;
 - Develop mechanisms for involvement of those who speak non-mainstream languages; incorporate culture-specific recommendations; beware assumptions based on cultural stereotypes



- Prepare for a long-term planning process that ensures parity between community and municipal representatives; establish goals, timetables and measurements

RESOURCES AND METHODOLOGIES:

- Ensure that municipality will assign staff to support the process, including coordinating, scheduling, convening, drafting, editing, distributing
- Identify and engage all key municipal entities, with support from top leadership and assignment of key staff, such as
 - Public Health Department, local hospitals, health centers
 - Law Enforcement (Police Department, Local Courts)
 - Municipal programs providing childcare, youth, elder, recreation services
 - Human Resources Department
 - Public Housing Authority

 - Public School Department
 - Commission for Persons with Disabilities
 - Human Rights Commission
- Identify and involve all key community-based organizations as “consultants” to the municipality such as
 - Women’s Center(s), Women’s Studies Programs
 - Shelter and Counseling Programs for Battered Women
 - Programs for Battered Lesbians, Gay Men, Bi-sexual, Transgendered persons
 - Programs for Adolescents dealing with Dating Violence
 - Legal Services Programs, local attorneys
 - Programs supporting racial, cultural and linguistic minorities and immigrants
 - Programs for Battering Men
 - Faith-based programs, individuals
 - Health care providers
- Seek funds to fulfill final established goals which involve collaboration between community and municipal agencies as well as among the municipal agencies to maximize impact of program
- Acknowledge and thank all participants in public forums in as many ways as possible to create shared ownership of the project and reinforce overall commitment to challenging domestic violence on every front.

SOME EARLY OUTCOMES AND LESSONS:



In 1998, we are in year 2 of the Implementation Plan. Some outcomes and lessons are beginning to be evident, but they are not necessarily quantifiable at this early stage. A summary follows:

- The numbers of calls to our Police Department for assistance remain at about 1500 per year – we would expect that our efforts would produce at least the same number of cases, until our prevention and early intervention efforts really took hold.
- Domestic violence victims report they feel supported and vindicated by the presence of the signs all over the city.
- Battered women’s shelters report that the DVFZ has relieved some of the burden of response to domestic violence from their under-funded programs and has made them feel part of a citywide network of caring and responsible individuals and groups.
- Physicians, nurses and other health care professionals reported they had been afraid to raise questions about domestic violence with patients because they did not know how to help; training made a huge difference, but they needed a system of support and reinforcement to change their own behavior; the DVFZ provides that on-going accountability and support.
- A Core Group meets monthly to monitor the progress of the **DVFZ Implementation Plan** as required by the plan’s **Initiative #1**.
- A policy/protocol has been developed by the Cambridge Housing Authority for its staff and 10,000 residents; municipal policies are under discussion are prescribed by **Initiative #2**.
- Domestic Violence outreach and intervention services are being integrated into the Employee Assistance Program and monitored for quality and accessibility as indicated in **Initiative #3**.
- Baseline and specialized training for multiple levels of staff have been undertaken in four major areas: the Cambridge Police Department, the Cambridge Health Alliance (the hospital and its neighborhood health centers, the Human Services Department and the Cambridge Housing Authority as efforts to fulfill **Initiatives 6 and 7**.
- A study has been conducted of the city’s existing services and needs for therapeutic and support programs for children who witness family violence as the first step toward fulfilling **Initiative #11**.



Two anecdotal accounts by participants in the DVFZ process:

Sgt. Joe McSweeney, Cambridge Police Department Domestic Violence Unit:

“Attitudes of the police officers have changed dramatically since this became a total city project. Officers now challenge each other if there is a question about how a domestic violence case was handled.

We now follow up with every victim: each one gets a packet with information and support services and we follow up in 90 days with another letter and packet to make sure the victim is getting whatever she (or he) needs.

The City Manager now requires us to send him monthly reports on the domestic violence cases, the number of arrests and the number of prosecutions. Every officer knows her or his work is being monitored on this issue.

Now, 40% of the cases we investigate go to court – this is a significant increase from several years ago when many fewer victims followed through with prosecution.”

Carole Sousa, Training Coordinator, Violence Against Women Act Grant, speaking about her project to provide general and specialized domestic violence training to two major city departments, including the development of a video to be used for on-going staff training:

“People from all divisions of the Department of Human Service Programs and the Cambridge Housing Authority desire more training and information, particularly on how domestic violence affects different cultural groups and recent immigrants.

“Both Richard and I viewed the trainings and video project as organizing tools as well as opportunities to impart some information on domestic violence. The video project is an incredible experience. One of the things I did not foresee was the recruitment of formerly battered victims into the video project. These are women who work for the city, are residents or past clients of providers who are now volunteering to help others leave by participating in the video project.”

“My six-month report goes to each department’s staff meeting, so the status of the training gets discussed as part of the department’s regular business.

“My meeting with people and asking them what they needed and tailoring the trainings to meet those needs as led to staff having not only a fruitful training experience but some real buy-in to working toward ending the problem of domestic violence.”

“With the Housing Authority, we developed a policy/protocol before we even set up the training schedule. This led to the higher level staff and CHA board members having to think through what it means to address domestic violence in an environment where staff have access to peoples’ homes. We are creating real institutional and policy change.”



CONCLUSION:

The City of Cambridge is on an accountable pathway toward challenging domestic violence. While it is too early to identify quantifiable results, we have seen institutional and individual change which was unthinkable ten years ago. We invite inquiries and suggestions as we continue to fill out the skeleton of the *Implementation Plan* and measure our progress toward the city as a **Domestic Violence Free Zone**.

TIMELINE AND PROCESS:

1994

January: The Cambridge Police Department initiates *Operation Safe Home* with the hiring of a civilian Domestic Violence Liaison to link victims with community services, the institution of a training program for all police officers, the use of personal electronic alarms for victims at high risk for additional harm and the creation of a comprehensive database to track all cases and identify repeat offenders.

March: The City Council passes a resolution defining the City as a Domestic Violence Free Zone and outlining a series of initial steps toward this goal.

May: The City Clerk's office develops a packet of educational and resource materials on domestic violence to be distributed to all who visit the office for marriage, birth, death certificates.

July: The city's Health Policy Board ranks violence as the number one Public Health issue, with a focus on domestic violence.

September: The City posts 55 official signs throughout the city at major intersections, at the access points for public transportation and in front of every municipal health center, library and school declaring "Cambridge is a Domestic Violence Free Zone: Abuse Prevention Laws Will Be Enforced."

October: The City hires a Violence Prevention Coordinator to oversee and coordinate all municipal efforts; he sets his focus as domestic violence.

1995

April: The first Cambridge Domestic Violence Summit, convened by the Violence Prevention Coordinator and Women's Commission Director brings together 60 area activists, lawyers and domestic violence specialists to draft a longitudinal, holistic, grassroots-oriented plan to guide the municipality in establishing the Domestic Violence Free Zone.

May through October: Focus groups and working sessions are convened to incorporate into the final document aspects of domestic violence which usually are marginalized, such as same-sex battering and racial and cultural paradigms of domestic violence; initial participants review several drafts to ensure accuracy and inclusion.

October: The Violence Prevention Coordinator presents the report and recommendations from the Summit, ***A Working Document: A Longitudinal Framework Towards Establishing Cambridge As a Domestic Violence Free Zone****.

December: The Cambridge Public Health Commission reviews and adopts the report from the Summit and urges the city administration to act on its recommendations.



1996

January to April: The City Manager convenes a group of high-level department and agency heads to present the Summit recommendations. Each department is assigned to evaluate its programs and resources to determine its ability to transform the recommendations into a municipal action plan.

March: The Cambridge Hospital and its network of Neighborhood Health Centers create a Domestic Violence Working Group to analyze needs for increased training for medical personnel and others with a focus on reaching out to patients to encourage disclosure of domestic violence problems.

May: Departmental analyses, called Feasibility Assessments, are submitted to the City Manager.

September: The City Manager appoints an Implementation Panel composed of key department representatives and Summit participants to shape the recommendations into an Implementation Plan.

1997

April: ***The Domestic Violence Free Zone Implementation Plan**** is completed and presented to the city; through ten meetings the panel identified eleven (11) city-wide Initiatives with one, three and five year timelines.

January through June: The city seeks and receives \$100,000 from federal Community Oriented Policing program to cross-train six young bi-lingual police officers and staff from each of the city's 10 neighborhood health centers. The trainees, including front desk workers, nurses and social workers, form domestic violence teams to work with patients and create local educational programming; a police officer is assigned to each team and makes the center part of her/his regular policing route. The training program begins to fulfill Initiative #7, "Assess and support customized training needs by department."

May: The City Manager appoints and authorizes a Core Group "to ensure continuity and sustainability of all DVFZ Initiatives," thus fulfilling the first of the eleven Initiatives.

July: The City successfully competes for a grant of \$50,000 from the federal Violence Against Women Act appropriation to conduct general and specialized training for every staff member of the city's Human Services Department and Public Housing Authority; the seventeen-month training program begins fulfillment of the DVFZ Initiative #7 which specifies that the city will "Assess and support customized training needs by department." The two departments represent municipal employees who work with children, adolescents, elders, recreational services and all aspects of public housing. A video will be created for future training of staff with similar constituencies and needs.

October: The City incorporates expertise in domestic violence as a requirement into its public bidding process for a contractor to provide Employee Assistance Programs (EAP) in fulfillment of the Initiative #3 which specifies "Utilize highest quality and level of mental health coverage from EAP." Core Group representatives begin meetings with the successful bidder.

November: Under the guidance of the city's Violence Prevention Coordinator, a graduate student at the Harvard University Kennedy School of Government begins to develop a survey and in-depth interview process to determine the status of support services for children who witness violence in their homes or families;



1998

March: The Cambridge Public Housing Authority adopts a Domestic Violence Protocol specifying the responsibilities of employees and management to provide a sensitive and effective response to reported or suspected cases of domestic abuse within resident families; this is the first municipal agency to establish a formal domestic violence policy under Initiative #2.

May: The report, ***Building an Integrated Community Response to Children Who Witness Violence*** *, is submitted to the Core Group and the City by graduate student Sharon Riva. The study, which engaged service providers in the schools, private practices and community agencies, included a review of 'best practices, an analysis of existing Cambridge data related to child witnesses, a survey of 105 Cambridge providers and a set of key findings. The study begins fulfillment of Initiative #11 to "create therapeutic and support programs for children who witness family violence."

September: Nancy Ryan and Katherine Triantafillou present an analysis of the DVFZ at the First World Conference on Domestic Violence in Singapore.

1999 - 2000

March: City Manager approves \$40,000 grant to the Cambridge Public School Department to provide year-long training program on family violence and its impacts on children to all school personnel.

June: Cambridge Public Health Department receives award of \$75,000 from federal Department of Health and Human Services to coordinate training throughout the Cambridge Health Alliance, including its hospitals and affiliated neighborhood health centers.

September, 1999 – June, 2000: School-based training continues throughout the school year; each school identifies Domestic Violence Resource Persons for specialized training and on-going roles as point persons for students and staff.

March, 2000 : Training of health providers throughout Cambridge Health Alliance begins.

September, 1999 – June, 2000: School-based training continues through the school year; each school identified Domestic Violence Resource Persons for specialized training and on-going roles as point persons for students and staff.

2001-2002

February, 2001: Richard Wright, Katherine Triantafillou and Nancy Ryan travel to Lubbock, Texas to work with city officials to formalize a Domestic Violence-Free Zone in that community; representatives from city government, law enforcement, university, medicine, battered women's program, women's center and private citizens spend two days finalizing their plan.

November, 2001: Susan Marine replaces Richard Wright as Cambridge Violence Prevention Coordinator and assumes coordination of DVFZ.

January, 2002: The DVFZ received a grant of \$100,000 from the Department of Health and Human Services to prepare and conduct a Teen Dating Violence campaign. An advisory committee of high school and post-high school young people is formed and CauseMedia, a marketing and communications firm is hired to work with them to develop materials and themes.



March, 2002: The DVFZ Core Group conducts the “Second Cambridge Domestic Violence Summit” with participants from the first Summit in 1995 and continuing community partners to review progress, plan Phase II and rekindle community commitment .

April, 2002: City of Cambridge alots \$20,000 to begin year-long evaluation of the first 5 years of the DVFZ Initiative; Emily Rothman is hired to conduct evaluation.

October, 2002: The Teen Dating Violence campaign is inaugurated with posters and literature for young people and adults in 4 languages with the theme “Cambridge Says NO to Abuse;” a fiesta is held on the grounds of Cambridge Rindge and Latin high school; magnets are placed on each student’s locker.

November, 2002: Evaluation report is reviewed by DVFZ Core Group and is submitted to Cambridge City Manager, Cambridge Health Alliance CEO, Superintendent of Schools and Police Commissioner.





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