

distributed a chart on Criminal Incidents of Domestic Violence for a three year period, 1999-2001 (**ATTACHMENT A**) and a chart outlining Domestic Violence Crime from January 1, 2002 to June 23, 2002 (**ATTACHMENT B**). He informed the committee that aggravated assault deals with using a weapon; simple assault deals with using a slap or a punch.

Councillor Murphy asked how are the incidents broken down. Detective O'Connor responded that as a general rule twenty percent of offenders commit eighty percent of the crimes. Recidivist crime is not tracked. Ms. Ryan stated that it is a good idea to track repeat offenders and put support in place for the victims. Detective O'Connor stated that repeat calls are in the computer and the dispatchers are put on notice. The results of these cases are not tracked. The cases can take one year to be adjudicated. Detective Carter-Wells informed the committee that recurrent crime does not mean that it is the same victim. Attorney Tellis-Warren asked if perpetrators are tracked. Detective O'Connor stated that the tracking is an address based system.

The committee heard from Susan Marine, the Domestic Violence Coordinator, Cambridge Health Department, who stated that the Domestic Violence Free Zone has eleven project areas established by collaboration with departments in the city to prevent and eliminate domestic violence **ATTACHMENT C**. Ms. Schoeff, Director of Community Health, stated that the core group of the DVFZ was established in 1997 and representatives were appointed by the City Manager from city departments. City employees have received information on domestic violence through the Employee Assistance Program, EAP. Training has been given to the Housing Authority, School, Police, Human Services Department and the Health Alliance. Specialized training was given to sixty School department employees to be Domestic Violence Resource Persons in the School Department. A group was convened for children who have witnessed domestic violence.

Ms. Marine informed the committee that domestic violence activity starts with teen dating. An evaluation has been done on the domestic violence program of the last five years and a preliminary report will be prepared by the end of the summer. Recommendations are being developed to consider a domestic violence policy for city employees. Assessment of services is being done to see if there is a gap in services. Services were discussed next.

Ms. Ryan stated that the Cambridge Domestic Violence Program is seen as a model throughout the country. Services need to be expanded. A list of services was distributed **ATTACHMENT D**. Children who witness violence is a new program. There are programs for men, but this is a challenge.

Councillor Murphy asked what are the entry places for services and do people who need help receive it. Ms. Marine stated that less orthodox means are being used to contact people who need services. More creative methods are needed. Ms. Ryan stated that people enter the circle of domestic violence services through a multiplicity of

organizations **ATTACHMENT E**. There is no one-entry place and there is no tracking mechanism.

Councillor Reeves stated that the group he is familiar with is not aware of the hot line, (617) 665-2992. The national hot line is 1-800-799-7233. Councillor Reeves stated that it is not clear where people go who are in pain. He asked where is the door to enter in to receive services for domestic violence; he does not know whom to call. The community is in crisis. Where is the Crisis Response Team and what has this team done. Ms. Ryan responded that the crisis intervention team does not talk to the community unless invited in by the community.

The committee heard from some of the service providers.

Ms. Janet Yassen, Victims of Violence, stated that there are many services, but the services are no good if unknown to the people who need them or there is no access to the services. People receive services in different ways such as primary care providers; victims and their families use clergy and friends. The crisis team does not handle the individual. One to one counseling is provided. Councillor Reeves stated that in the midst of this crisis the team needs to be involved, but there has been no involvement. He stated that with the murder/suicide incident that occurred in the city the public does not know that they can go to the Windsor Street Health Clinic for services. Mr. Cox stated that the Crisis Response Team (CRT) was actively involved with the Cambridge Housing Authority to think through what was needed in the community meeting. Information on CRT, Victim Advocacy Support Team and Victims of Violence Program was distributed, **ATTACHMENT F**.

Ms. Ilana Amrani-Cohen, Children with Voices, stated that she was called by the School Department to do counseling to the school on Tuesday morning. All teachers were met and the children who witnessed the violence were identified. Four first grade children witnessed the violence. The children talk to teachers. Services, she said are provided for children and parents of domestic violence. Her agency is spread thin, she said. She would like to have a program for offending fathers. Her agency serves 165 children and 113 families. She distributed information about the Guidance Center **ATTACHMENT G**.

In response to a question by Councillor Reeves, Ms. Ryan stated that she would get Richard Harding involved in this matter. Vice Mayor Davis asked if there are mental health services for men. Ms. Schoeff stated that there are many services offered to men through community based services. EMERGE offers services to men who batter and strive to prevent the battering. Ms. Susan Cayouette, Clinical Director of EMERGE, stated that EMERGE is a court ordered volunteer program which enrolls offenders. Wives or girlfriends voluntarily refer offenders. No one can be forced to participate in the program without a court order. Councillor Reeves stated that EMERGE has a fatal flaw -- that being it will only talk to men. Ms. Cayouette responded that people in this program have crossed the line, they are not just in controlling relationships they include physical violence.

Attorney Telles-Warren suggested to Councillor Reeves that he refer his inquiries to legal services. An advocate will work on the issue. It is better to filter victims to the right people. Word of mouth is the best way to get the word out, especially for non-English speaking people, she said. Passing the information inter-agency is the best way to gain access. Councillor Reeves asked about eligibility for legal services. Attorney Telles-Warren responded in theory all persons are to be helped.

Ms. Ryan asked Mr. Buel to give information on the Dating Violence Intervention Project (DVIP). Mr. Buel stated that the focus is to get men early to prevent them being an EMERGE participant. He works at the high school. An after school program is run at the Kennedy Middle School. This project must be made as attractive as possible to get participation. EMERGE does the training so that the counselors can be certified. A teen hot line is run by teens with adult supervision each day from 3-7 p.m.

The discussion now focused on the gaps in services. Ms. Marine outlined the gaps **ATTACHMENT H**. The problem is to get to people who do not have access to services. People who do not have children in the public schools are being missed. There are hidden victims. The hidden victims are being missed because they do not exhibit that they are victims. She further stated that the Domestic Violence Officer position at the Cambridge Housing Authority is vacant. People who do not use medical care are being skipped. People who do not use WIC, MAPS or Concilio Hispano are being missed. Outreach needs to be done at area businesses, churches, community and youth centers and public facilities.

Vice Mayor Davis asked of the 707 incidents in 2001 how many had contact with the system. Detective O'Connor responded that 33-36% of domestic violence calls result in arrests after the incident, rather than at the scene. Ms. Jenny Venturo, Police Department, does follow up with the calls, he said.

Vice Mayor Davis stated that she would like to have a goal where perpetrators were known ahead of the incident. Ms. Marian Ryan, Domestic Violence Unit, Middlesex District Attorney's Office, stated that it is a success if a victim of domestic violence reports the incident. There is an 80% success with intervention.

Vice Mayor Davis asked if there was an analysis done to determine if the service is effective. Ms. Ryan stated that there is no consistent data. Cambridge restraining orders have increased. Attorney Telles-Warren informed the committee that some clients have never had any police incidences. Batterers file several motions and CASLS has to respond. Ms. Marine stated that an effort would be made to talk to the survivors of domestic violence. Tracking batterers is cumbersome and dangerous, she said.

Attorney Ryan stated that the number one thing that makes a difference in domestic violence is the first person of contact with the victim. The personal piece makes all the difference, she said.

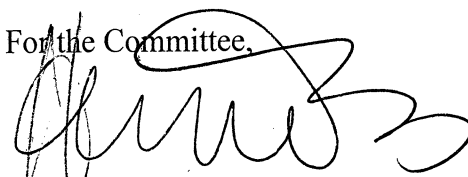
Councillor Reeves stated that there does not exist an outreach network for mental health and therapy. Numerous incidents have occurred in the area of the Windsor Street Health Clinic with little outreach made from the Health Clinic to the victims and their families. Mental health and depression for men of color is at dangerous proportions, he said.

Vice Mayor Davis asked what are the gaps with the services. Ms. Yassen stated that proper outreach cannot be done because there are two part-time advocates to see 100 people; the resources are just not there. Ms. Schoeff stated that she wanted to identify the needs and to work to meet the needs and to ensure that services are known and utilized. Councillor Murphy stated that there is a desire by the City Council to provide resources for outreach. Additional services may be needed if existing services are insufficient. Councillor Murphy requested a list of contacts at the various agencies for the City Council and School Committee.

Vice Mayor Davis thanked all attendees. She applauded all the service providers.

The meeting adjourned at three o'clock and fifty-five minutes p.m.

For the Committee,

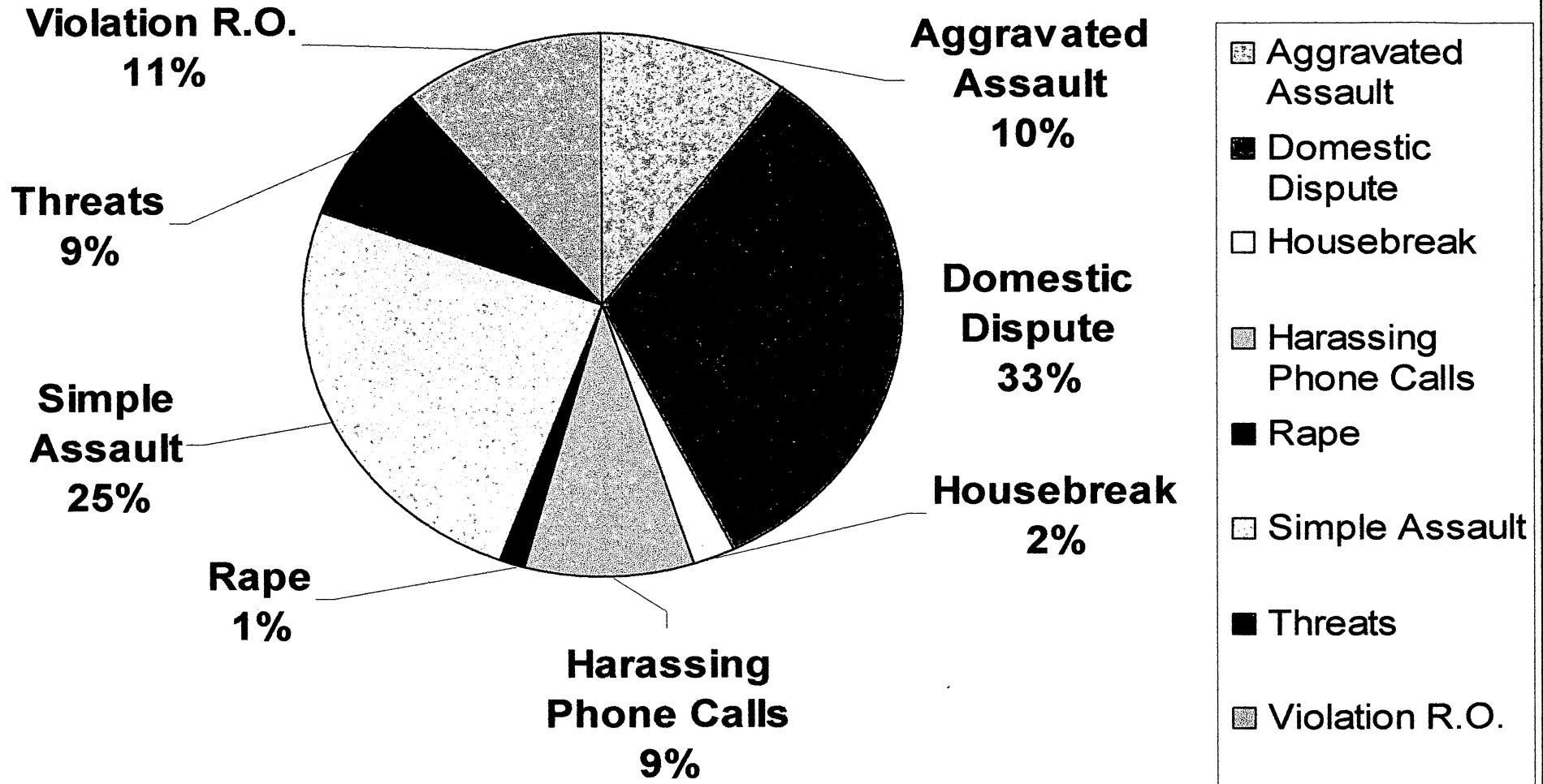
A handwritten signature in black ink, appearing to be 'Henrietta Davis', written over the text 'For the Committee,'.

Vice Mayor Henrietta Davis
Chair

DOMESTIC VIOLENCE

	1999	2000	2001
CRIMINAL INCIDENTS	653	643	707
a.) Simple Assault	43%	34%	32%
b.) Violation of Restraining Order	15%	17%	17%
c.) Aggravated Assault	15%	17%	15%
d.) Threatening	10%	13%	12%

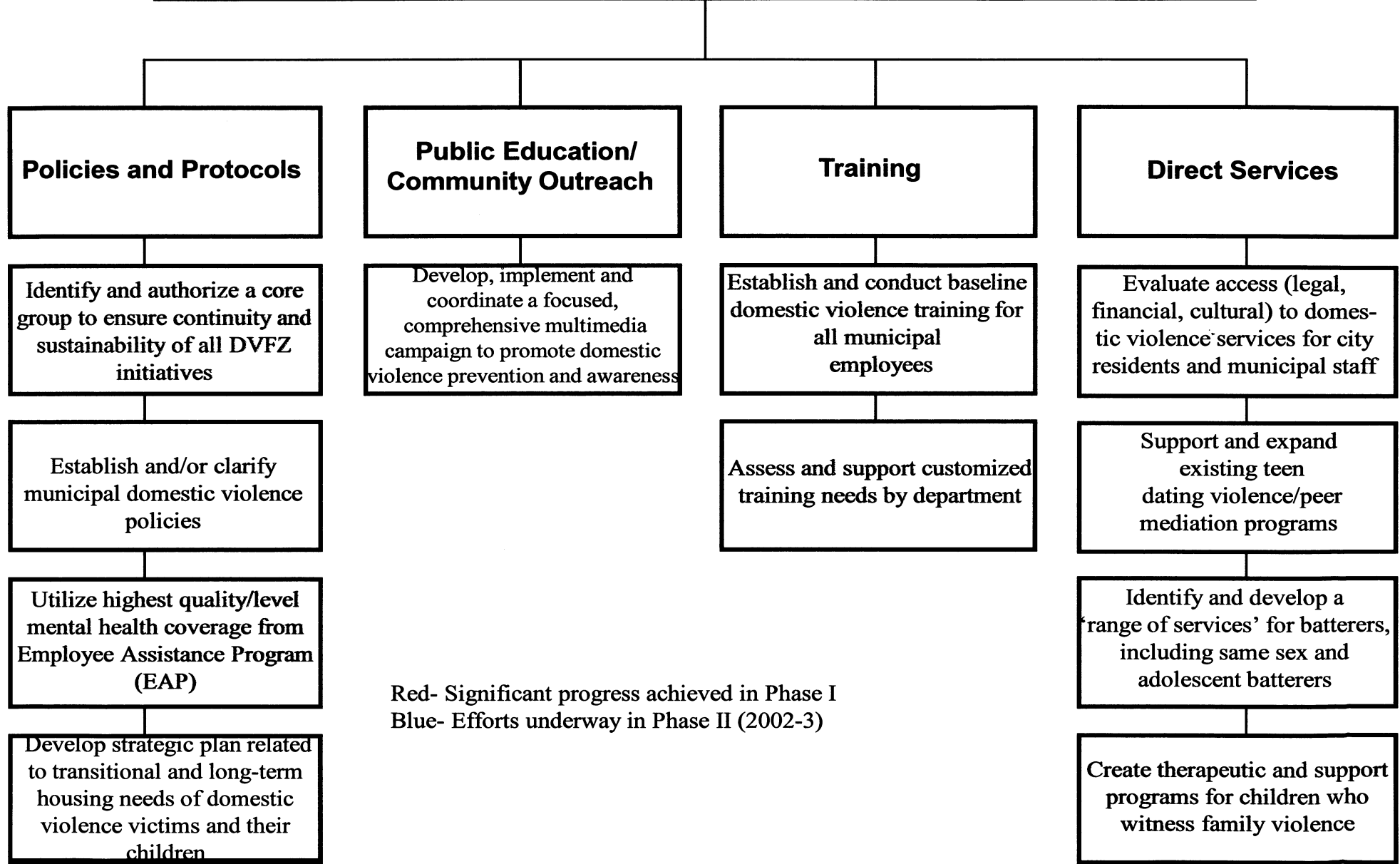
Domestic Violence Crime from 1/1/02 to 6/23/02



Due to their minimalist percentages, the following categorizations have other crimes incorporated with their totals:

- ▶ *Homicide* is included in Aggravated Assault – there was one Domestic Homicide in Cambridge this year
- ▶ *Indecent Assault* was included in Rape – there were 10 in Cambridge this year

Summary of Domestic Violence Free Zone Initiatives



Red- Significant progress achieved in Phase I
Blue- Efforts underway in Phase II (2002-3)

A Short, Annotated List of the Domestic Violence Programs and Services in Cambridge as a Way to Look at Strengths, Needs and Gaps

Some questions:

- 1. Who uses or can use the service/program?**
- 2. Who doesn't use it? Why?**
- 3. What groups or communities need more or better-targeted services?**
- 4. How do people find out about the services/programs?**
- 5. How are our city's services linked with each other, or not?**
- 6. Are there ways to support individuals as they make their way through the variety of services a victim might use?**

Shelters and Programs for Battered Women (24 hour service availability)

- **Transition House** – shelter, hotline, outreach, legal advocacy for battered women and their children; specific outreach, education and family support for Haitian community.
- **Respond** – shelter, hotline, outreach, support groups, legal advocacy for battered women and their children

Programs for Lesbians and Gay Men (24 hour service availability)

- **Network for Battered Lesbians** – individual and group counseling, legal advocacy
- **Gay Men's Domestic Violence Project** – counseling, legal advocacy, safe homes

Services for Battering Men:

- **EMERGE** – voluntary and court-mandated groups for battering men and lesbians, community education
- **Transition House Haitian-Kreyol Batterers' Intervention Group** – certified group counseling for Haitian men who batter
- **Common Purpose** -- voluntary and court-mandated groups for battering men and lesbians, community education
- **Roxbury Comprehensive Health Center (RoxComp)** – individual and group counseling for battering men utilized by many men in Cambridge

Programs/Services for Children Who Witness Violence

- **"Children with Voices / Mothers with Voices"** -- joint program of the Guidance Center and the Family Center – individual and group counseling for children who have witnessed and mothers who have experienced domestic violence, community education

- **Cambridge Health Alliance Department of Psychiatry** – specific counseling for children provided by Child Psychiatrists in the department

Programs/Services for Adolescents

- **Dating Violence Intervention Project** – a program of Transition House, provides individual and group counseling through the CRLS Teen Health Center and preventive education in CRLS and the Kennedy schools, runs “Respect Line,” a hotline for teens concerned with dating or family violence
- **STARS Program at CRLS** – peer education program for students regarding violence, abuse and disrespect
- **“Voices of Love and Freedom”** – a program of the Guidance Center which utilizes a violence prevention curriculum in eleven middle grades classrooms

Counseling Services for Adults:

- **Victims of Violence Program of the Cambridge Health Alliance** – individual and group counseling for victims of all kinds of violence and trauma, community education.
- **Community Crisis Response Team** – a program of the Victims of Violence Program, a multidisciplinary team with a small staff and trained volunteers who provide post-traumatic stress debriefings and community education for groups of people who have experienced or witnessed domestic violence, sexual assault or any other form of violence or trauma
- **Massachusetts Alliance of Portuguese Speakers (MAPS)** – individual and group counseling for victims of domestic violence, community outreach and education and batterer intervention groups for Portuguese-speaking communities.
- **Concilio Hispano** – mental health services with domestic violence component for Spanish-speaking communities
- **The Cambridge Health Alliance Mental Health Teams** – individual and group counseling and referrals in native languages at the Latino (Windsor Street), Haitian (North Cambridge) and Portuguese (East Cambridge) Neighborhood Health Centers
- **Community Legal Services and Counseling Center** – individual and group counseling for persons affected by domestic violence with companion legal services if desired

Supervised Visitation Services:

- **The Meeting Place** – a program of the Guidance Center which provides supervised visitation for children with offending parent if court approves

Services for Elders:

- **The Cambridge Council on Aging** – individual counseling, community education and outreach to elders on family violence and elder abuse

Police Department Services:

- **The Cambridge Police Department Domestic Violence Unit** – investigates incidents, monitors restraining orders, conducts community education and outreach. A civilian liaison assists victims with services and maintains linkages with community agencies

Legal Services:

- **Cambridge and Somerville Legal Services** – legal representation in areas of domestic violence, child custody, family law, disabilities, public benefits
- **Community Legal Services and Counseling Center** – legal representation in areas of domestic violence, child custody, family law, disabilities, public benefits, legal education, individual and group counseling

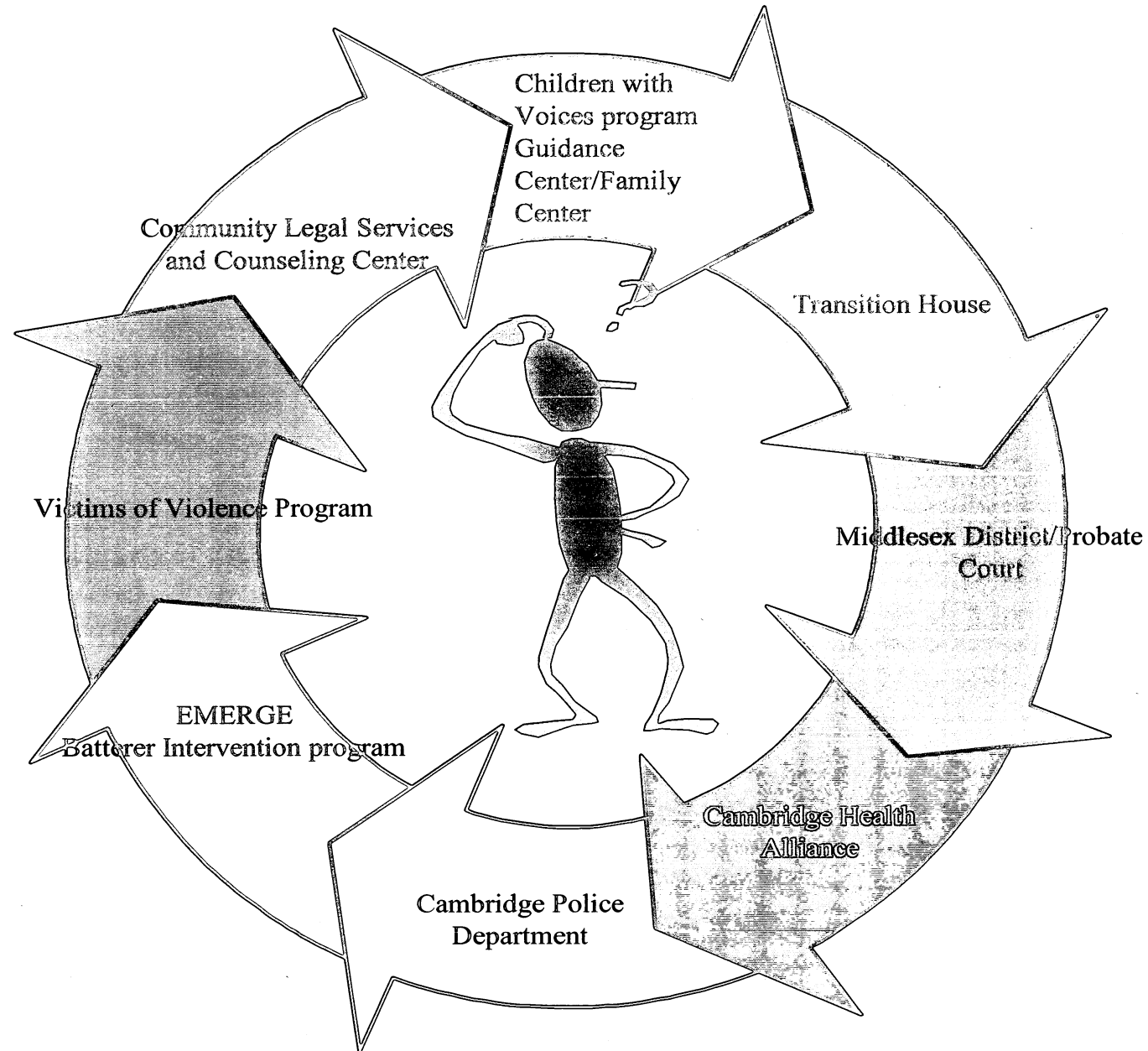
Court-based Services

- **District Attorney's Family Violence Unit** – specialized unit of prosecutors and advocates who handle cases involving family violence. **Victim/Witness Advocates** support and assist victims who bring criminal complaints of domestic violence to the district court
- **Court Clinic at Middlesex Probate Court** – services and referrals for teen offenders

Municipal Coordination / Program Development:

- **Domestic Violence Free Zone Initiative** – coordinated by the Cambridge Public Health Department, oversees a plan to integrate and expand local services, implement public awareness campaigns and provide training for municipal employees
- **Cambridge Women's Commission** – community education and outreach, linkage point to services for individuals, development of outreach materials specific to low-income women living in public housing

Some Selected Points of Intersection for Domestic Violence Services in Cambridge





Cambridge Health Alliance

ATTACHMENT F

1493 Cambridge Street • Cambridge, MA 02139 • 617.665.2300

CAMBRIDGE HEALTH ALLIANCE
VICTIM ADVOCACY AND SUPPORT TEAM

Advocates:

Carol Gomez
Yoko Harumi

If you or someone you love has been affected by violence, hatred or abuse, the Victim Advocacy and Support Team is here to help you rebuild your life

Please call us and leave us a message as to how we can best reach you:

617-665-2992

WHAT WE DO:

We provide crisis intervention and support for you and your loved ones

We assist with safety planning for you and your family

We provide information and advocacy with the legal and criminal justice system

We act as a liaison with social service agencies, the courts and police

We make referrals to health, legal and other community services

We assist in filing for Victim Compensation

We offer consultation services to Cambridge Health Alliance providers

We offer training and consultation services to the community

Our services are free and confidential

The VICTIM ADVOCACY AND SUPPORT TEAM is a service of the Victims of Violence Program and is partially supported by the Massachusetts Office of Victim Assistance through the 1984 VOCA grant from OVC, OJP, and the U.S. Department of Justice



Building Healthier Communities

The Cambridge Health Alliance is a unique healthcare system comprised of The Cambridge Hospital and Somerville Hospital as well as 20 neighborhood health centers in the Cambridge and Somerville communities. In affiliation with the Harvard Medical School, the Cambridge Health Alliance brings the brightest minds and most advanced medical and psychiatric programs to the patients and communities it serves.

Committed to healthcare accessibility, service excellence, and choice, the Cambridge Health Alliance provides care to people of all ages, from all cultures, and with all incomes. The cornerstone of its mission is a network of neighborhood health centers, which delivers everyday healthcare directly into the communities. Many of the physicians and nurses speak the languages and understand the cultures of specific neighborhoods. At the main hospital campuses, specialty services and programs are offered, as well as inpatient diagnostic testing and surgery. For more serious illness, the Cambridge Health Alliance is affiliated with the best hospitals in the Boston area.

The Cambridge Health Alliance has been recognized as a national model of community health. In 1993, it received the Foster G. McGaw Prize for Hospital Excellence in Community Service from the American Hospital Association and the Baxter Foundation.

Building for the future, the year 2000 will bring a new ambulatory care facility, parking garage, emergency department, day surgery service and intensive care unit to the Cambridge Hospital campus.

Central Street Health Center
26 Central St., Somerville, MA 02143
(617) 498-1180



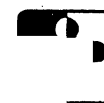
Cambridge Health Alliance
A COMMUNITY OF CARING

Community Crisis Response Team

Crime and violence affect entire communities. The Community Crisis Response Team (CCRT) provides short-term crisis intervention and consultation services to communities traumatized by violence. The CCRT tailors its services to the particular persons, crime, and community involved. Working closely with community representatives to assess local needs, CCRT Staff develop appropriate response plans — ensuring that team member skills, backgrounds, and affiliations complement those of local resources.



A Service of the Victims of Violence Program
At the Cambridge Health Alliance



Cambridge Health Alliance
A COMMUNITY OF CARING

What Is Community Trauma?

Violent events have a traumatic emotional impact on many levels: on individual victims, witnesses, family members, friends and co-workers, and entire communities. Events that can cause community trauma include:

- Three teenagers from the same neighborhood are killed in a 3-month period.
- Two residents of a senior citizen housing development commit suicide.
- On their way home from school, several children witness a shooting in their neighborhood.
- An active member of a religious congregation is assaulted while walking home from services.
- An employee of a small business is beaten and raped after work.

What is the CCRT?

The Community Crisis Response Team was formed in July, 1986 in response to an absence of coordinated services for community groups traumatized by violence. The team unites professional representatives of mental health, social service, criminal justice, medical, religious, educational and other human service agencies in the greater Boston area.

All agencies participate on a voluntary basis. Team members include specialists in victimization, psychological trauma and crisis intervention, and professionals experienced in working with special populations such as children, minorities, and the elderly.

With this wide range of Team membership and skill, responses can be planned to address the specific needs of the individuals and communities affected.

In addition to their individual experience and expertise, all CCRT members participate in an intensive training program and in on-going in-service education. Training focuses on the application of the Team's empowerment model of community-level crisis intervention.

The Community Crisis Response Team is a service of the Victims of Violence Program of the Cambridge Health Alliance and is affiliated with Harvard Medical School.

CCRT Services

The CCRT works closely with local agencies and grassroots organizations when providing assistance to traumatized community settings. Services provided by the Team include:

- Consultation and support to community settings as they plan and implement their own crisis response activities
- Direct crisis intervention, primary in the form of community "debriefing" meetings, for those directly affected by a traumatic event. These meetings help participants regain a sense of control over their lives and foster community-wide coping and support
- Training of local service providers in understanding the psychological impact of acute and chronic trauma
- Follow-up consultation and assistance to affected communities

MEMBER AGENCIES

Beth Israel Deaconess Medical Center
Boston Center for Independent Living
Boston Police
Boston Public Health Commission
Boston Public Schools
Cambridge Commission for Women
Cambridge Peace Commission
Cambridge Police Department
City of Boston
Dimock Community Health Center
Episcopal Divinity School
Essex County DA's Office
Fayerweather Street School
Fenway Community Health Center
Lesley College
Massachusetts Attorney General's Office
Massachusetts Department of Education
Massachusetts Department of Youth Services
Middlesex County DA's Office
Mt. Calvary Holy Church
National Association of Black Social Workers (Boston Chapter)
Northeastern University- Department of Criminal Justice
On The Rise
Peabody District Court
Peace Games
Positive Edge
Roxbury Youthworks, Inc.
Roxbury Court Clinic
Suffolk County DA's Office
The Cambridge Hospital (Dept. of Psychiatry)
The Family Center (Somerville)
Urban Edge
Visions, Inc.
Wheelock College

To learn more about the CCRT or to request intervention services, contact the CCRT Coordinator at:

**(617) 498-1180 or
(617) 591-6360 Victims of Violence Program**

Community Crisis Response Team
A Service of the Victims of Violence Program

Supported in part by the Federal Victims of Crime Act (VOCA) Fund



Cambridge Health Alliance
A COMMUNITY OF CARING

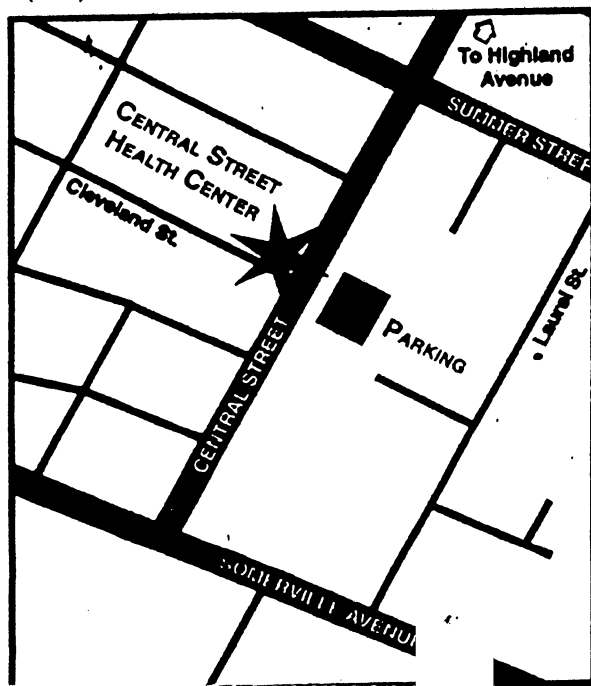
Seeking Help is a Sign of Strength

People who have been victimized sometimes feel isolated and alone, reluctant to reach out to others. But reaching out is important, and seeking help is part of the healing process.

The multi-disciplinary staff of the Victims of Violence Program recognizes and understands the difficulties people have in accepting and dealing with feelings that follow violence and abuse. We are here to help.

If you have been victimized, if someone you love has been hurt, or if you have witnessed violence and abuse, you don't have to cope with your feelings alone.

For information about the CCRT, call:
(617) 498-1180
For information about VAST, call:
(617) 665-2992



Building Healthier Communities

The Cambridge Health Alliance is a unique healthcare system comprised of The Cambridge Hospital and Somerville Hospital as well as 18 neighborhood health centers in the Cambridge and Somerville communities. In affiliation with the Harvard Medical School, the Cambridge Health Alliance brings the brightest minds and most advanced medical and psychiatric programs to the patients and communities it serves. Committed to healthcare accessibility, service excellence, and choice, the Cambridge Health Alliance provides care to people of all ages, from all cultures, and with all incomes. The cornerstone of its mission is a network of neighborhood health centers, which delivers everyday healthcare directly into the communities. Many of the physicians and nurses speak the languages and understand the cultures of specific neighborhoods. At the main hospital campuses, specialty services and programs are offered, as well as inpatient diagnostic testing and surgery. For more serious illness, the Cambridge Health Alliance is affiliated with the best hospitals in the Boston area. Building for the future, the year 2000 has brought a new ambulatory care facility, parking garage, emergency department, day surgery service and intensive care unit to the Cambridge Hospital campus.



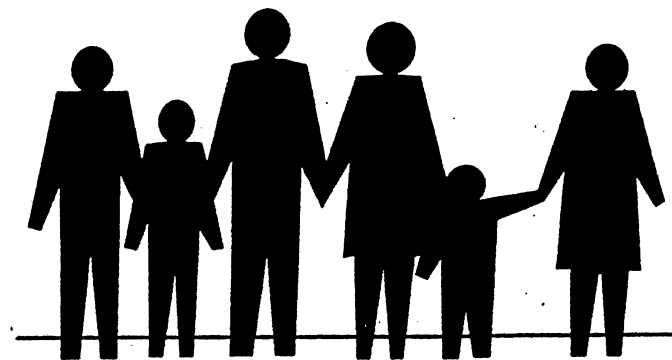
Cambridge Health Alliance
a community of caring



Central Street Health Center
26 Central Street, Somerville, MA 02143
(617) 591-6000

Victims of Violence Program

Violence and abuse take many forms: rape, robbery and physical assault; child abuse, incest and domestic violence; hate crimes, murder and political violence. Acts of violence are committed by strangers, by casual acquaintances and by people well-known to their victims. Crimes of violence do not discriminate. Anyone can become a victim of violence. If you have been victimized by violence or abuse, you are not alone.



A Service of the Victims of Violence Program
At the Cambridge Health Alliance



Cambridge Health Alliance
a community of caring

Pain and Distress are Normal Reactions to Violence

Many people feel great anxiety and distress after a single incident of violence. Many remain troubled and confused long after. Even witnessing severe or prolonged violence can be traumatic. Common reactions to violence include:

- *Shock or "Numbness"*
- *Anxiety and Confusion*
- *Powerlessness*
- *Shame and Guilt*
- *Fear*
- *"Jumpiness" and Irritability*
- *Sadness and Separateness*
- *Anger, even Rage*

These feelings and many others are normal, understandable consequences of violence. Remember, there are as many reactions to violence and abuse, as there are victims of violence.

Help is Available

The Cambridge Health Alliance's Victims of Violence (VOV) Program offers confidential help to victims, families, friends and witnesses. VOV services include:

- **Crisis Intervention and Support**
VOV staffs respond within 72 hours and remain available throughout the first weeks and months of recovery.

- **Supportive Psychotherapy**
VOV clinicians work with victims to assess and ensure sensitive and ongoing response to emotional distress.
- **Group Support**
VOV offers supportive psychotherapy groups for adult survivors of rape and incest, women and men with early abuse histories, mothers of sexually victimized children, male sexual assault victims and others.
- **Community Crisis Response**
VOV sponsors a multi-agency Community Crisis Response Team (CCRT) to help local communities respond to violence.
- **Victim Advocacy and Support Team**
VOV also sponsors the Victim Advocacy and Support Team (VAST) to work directly with victims to ensure that they have access to community resources, medical services, police and the courts.

How to Get Help

Services of the Victims of Violence Program are available through The Cambridge Health Alliance Outpatient Psychiatry Department at the Central Street Health Center. A variety of third-party payers, including Medicaid and Blue Cross/Blue Shield, will cover program services. Applications can be made to the hospital for free or low cost care. Some victims and witnesses may apply to the state for Victims Compensation funds.

Services of the CCRT and VAST are available at no charge to individuals, local agencies and groups.

Staff

Mary R. Harvey, Ph.D., Director
Judith L. Herman, M.D., Director of Training
Elizabeth Parsons, Psy.D., Associate Training Director
Usha Tummala-Narra, Ph.D., Acting Training Director
Lois Glass, L.I.C.S.W., Senior Clinician
Emily Schatzow, M.Ed., Senior Consultant
Jayme Shorin, L.I.C.S.W., Clinical Services Director
Janet Yassen, L.I.C.S.W., Crisis Services Coordinator
Robin Zachary, L.I.C.S.W., Team Coordinator
Barbara Hamm, Psy.D., Group Service Coordinator
Patricia Harney, Ph.D., Research Psychologist
Anne Mondesir, LCSW, Coordinator, CCRT
Jennifer Piemme, Community Liaison, CCRT
John Harden, Community Liaison, CCRT
Carol Gomez, Senior Victim Advocate, VAST
Yoko Harumi, Victim Advocate, VAST
Bernadette Louis, Administrative Coordinator

To learn more about the Victims of Violence Program please call: (617) 591-6360.

To make an initial appointment call the Central Intake Department at: (617) 591-6033



Cambridge Health Alliance
A community of caring



ATTACHMENT C

THE GUIDANCE CENTER, INC.

Meeting the Changing Needs of Children and Families Since 1954

5 Sacramento Street, Cambridge, MA 02138 (617) 354-2275 Fax: (617) 547-4356

Executive Director

Susan C. Ayers, LICSW

Frequently asked questions about our program

Why?

According to the Bureau of Justice Statistics special report of May 2000, there were 900,000 women who “experienced violent offences at the hands of an intimate “. Although these numbers are down from the 1.1 million reported in 1993, these are pretty staggering statistics. “In 4 out of 10 cases female victims of intimate partner violence lived in a household with children under the age of 12.” These numbers suggests that about 360,000 children under that age of 12 are exposed to and witness domestic violence across the country. Given this picture there is great necessity to develop services that can address the needs of both women victims and their voiceless silent children.

Who are we?

“Children With Voices” is a child witness to violence program housed at the Cambridge Youth and Guidance Center. This is a collaborative effort between the Guidance Center Inc. the Family Center Inc. in Somerville, as well as, local battered woman shelters such as RESPOND and Transition House and other local agencies treating domestic violence.

Funded by the Department of Social Services central office, our program’s objectives are to coordinate and provide services to the residents of Cambridge and Somerville as well as to families temporarily relocated to our area for safety reasons. Our services focus on children ages 0-18, who are affected and exposed to domestic violence and their non-offending (non-abusive) parents.

What services do we provide?

The program focuses on children ages 0-18, who are affected and exposed to domestic violence and their non-offending (non-abusive) parents. The services that we provide include: **comprehensive psychosocial evaluation** of children and their non-offending parent by a multidisciplinary team. **Developing a treatment plan** that will address the child and family **mental health** needs as well as **housing, income, court** and other needs present as a result of domestic violence. In addition because the Children With Voices program is nested in a clinic with a full range of out patient services we are able to make referrals for **psychological testing, psychiatric evaluation and medication consultation and monitoring**. Our **individual, family and group** modalities are provided within an **empowerment and strength** model by clinicians from diverse background and language abilities.



UNITED WAY
OF MASSACHUSETTS BAY

formerly The Cambridge Mental Health Association

As part of the community we work in collaboration with all service providers and facilitate **monthly community roundtable discussions** with our colleagues on issues related to working with families affected by domestic violence. The goal of these discussions is to share our accumulated knowledge, create a common language and network. The ultimate beneficiaries of these discussions are the families we all serve.

As we work to provide services, we realized that not much effort is directed towards helping professionals manage the stress and vicarious trauma they experience as related to our work. Our annual mini-conference on “Understanding Trauma and Caring for Caretakers” is geared to address this concern. In our last conference we were fortunate to have Dr. Bessel Van der Kolk a world renown expert on trauma address our community of professionals as well as Dr. Maxin Weinreb a nationally renown expert on trauma and vicarious trauma.

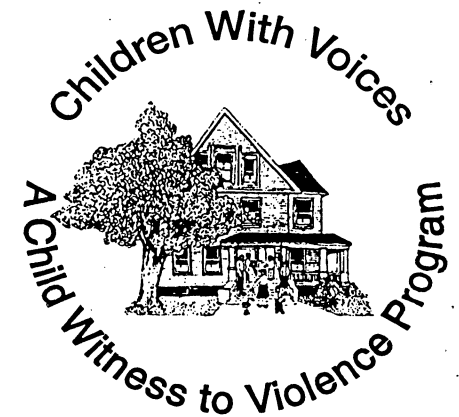
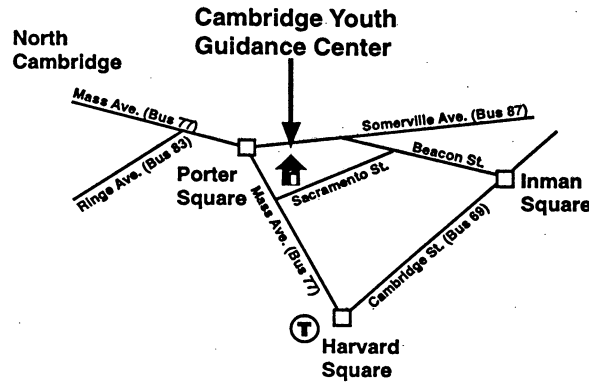
How to make a referral?

Individuals may call directly to refer themselves or their children. Professionals at community agencies such as schools, battered women shelters, churches, courts and the Department of Social Services as well as other organizations may also refer families. In order to provide services in a safe and confidential way professionals referring need to discuss the referral with the family and receive their permission to do so.

Children With Voices
A Child Witness to
Violence Program

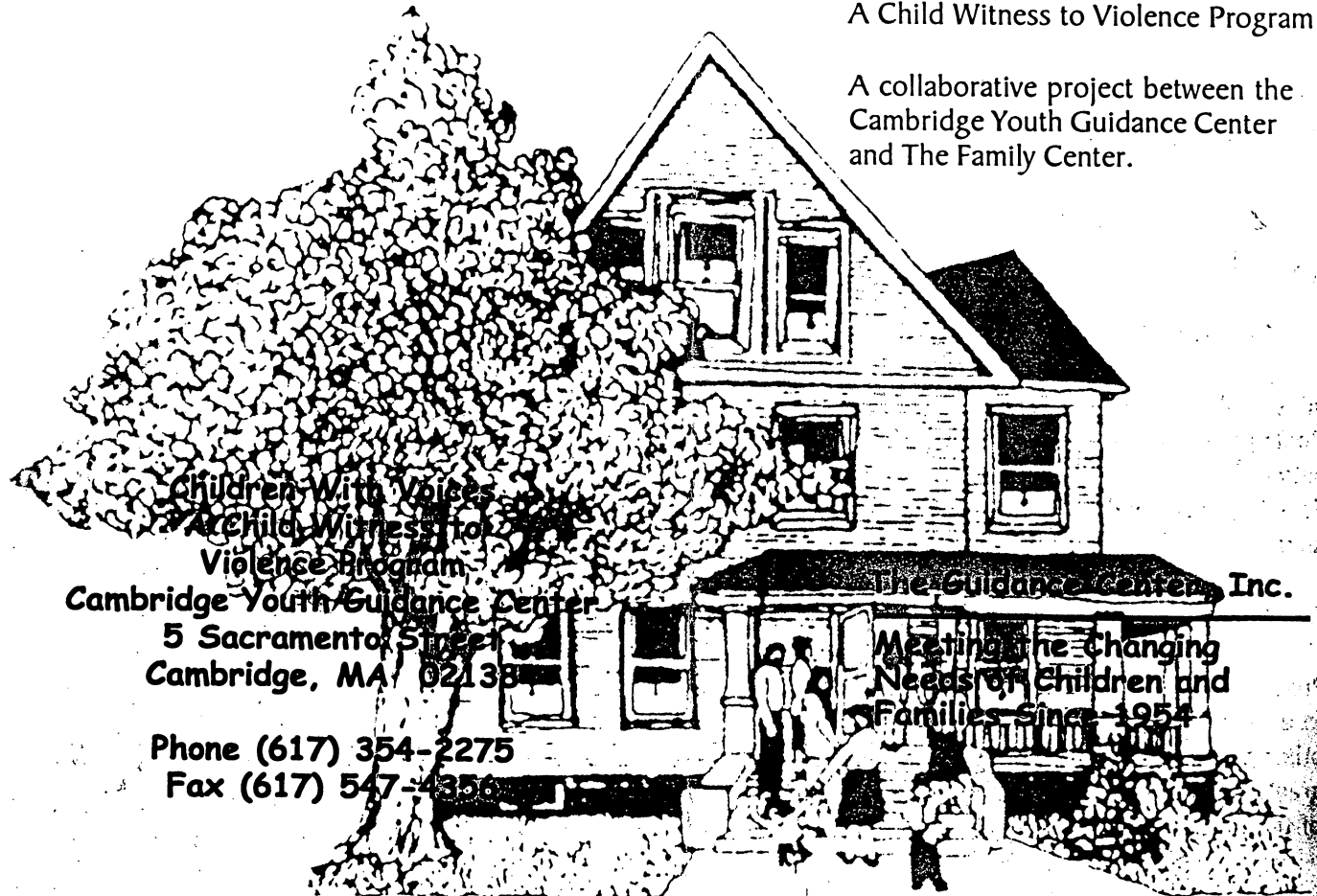
- * Has your child witnessed or been affected by domestic violence?
- * Do you live in Cambridge or Somerville?
- * Do you have questions about which services are available for your child?

Assistance is available.
Contact Dr. Ilana Amrani-Cohen,
Program Director
The Cambridge Youth
Guidance Center
617/354-2275, ext. 140



A Child Witness to Violence Program

A collaborative project between the
Cambridge Youth Guidance Center
and The Family Center.



Children With Voices
A Child Witness to
Violence Program
Cambridge Youth Guidance Center
5 Sacramento Street
Cambridge, MA 02138
Phone (617) 354-2275
Fax (617) 547-4356
The Guidance Center, Inc.
Meeting the Changing
Needs of Children and
Families Since 1954

Children With Voices

The Children With Voices Program is a collaborative project between The Guidance Center, Inc; The Family Center, Inc.; RESPOND; and Transition House, local agencies treating domestic violence. The program focuses on enhancing and facilitating services for child witnesses of domestic violence and their caretakers. It serves residents of the Cambridge/Somerville community, as well as families from other communities who have been temporarily placed in Cambridge/Somerville shelters.

Who does the program serve?

- * Children, ages 0-18, who have witnessed domestic violence.
- * Non-offending (non-abusive) parents.

How does the program work?

- * Making a Referral

Individuals may call directly to refer themselves. Community agencies such as the school system, battered women's shelters, the Department of Social Services and others may also refer families.

- * Evaluating Needs

Program staff contact the non-offending parent to arrange an intake. Staff will also contact other care providers, when signed permission is granted, in order to make a thorough assessment of the client's safety and therapeutic needs.

- * Developing a Treatment Plan

A treatment plan is developed by the program's Multi-Disciplinary Team. The team considers the therapeutic needs of the child and the family, as well as safety, language and transportation needs.

Treatment for the non-offending parent and the child may take place at The Cambridge Youth Guidance Center (CYGC) or the Family Center. A referral may also be made to another appropriate community agency.

Who is on the staff?

- * social workers
- * psychologists
- * psychiatrists
- * family therapists
- * domestic violence advocate



What services are available?

- * Evaluation and Assessment

Trauma assessments, which may take place in the school, a shelter or at CYGC, are provided for children. When appropriate, the child may be referred for psychological testing and medication evaluations.

- * Individual and Family Therapy

Children and parents are referred for individual therapy at CYGC, the Family Center or elsewhere in the community. Children, along with their non-offending parents, may also be referred to family therapy.

- * Group Therapy

CYGC and the Family Center offer support groups, a mother/child group and a parenting group for single moms who have survived domestic violence. Referrals may also be made to other groups in the community.

- * Advocacy Services

Parents are connected with resources to help them obtain housing and public benefits, manage criminal and probate court matters and other life stressors.

- * Consultations

Program staff are available for consultations to families or other professionals on a variety of issues relating to domestic violence.

Preliminary Assessment of Gaps in Accessibility of Domestic Violence Services in Cambridge

Services for victims and perpetrators of domestic violence (and their families) appear to be comprehensive and readily available in Cambridge. However, in order to access these services, a victim or perpetrator must be able to easily locate information and referrals. If a victim or perpetrator intersects with any one of the service providers, we have confidence that they will be connected to related services in the area. However, there are gaps in awareness of services for:

- People who do not utilize the police or criminal justice system to address their experience of domestic violence
- People who do not have children who attend the Cambridge Public Schools, or have children who are 'hidden victims' (children who do not disclose or show any apparent signs of abuse)
- People who do not live in public housing or are 'hidden victims' (until recently, there was a full time domestic violence safety specialist working within the Housing Authority-- this position is currently vacant, and the status of the position is unclear).
- People who do not utilize medical care.
- People who do not utilize other service centers, cultural organizations, or community agencies (i.e. WIC, DTA, MAPS, Concilio Hispano, etc.)

Thus, there are intersections victims/perpetrators have with the community where efforts to do outreach should be expanded. These points of community intersection include:

- Area businesses
- Faith communities
- Public facilities (government buildings, post offices, libraries, etc.)
- Community centers and youth centers

Outreach to these possible intersection points would require:

- An outreach specialist to reach underserved communities of women, boys and men
- Additional outreach materials- fliers, brochures, tear off posters for public restrooms, etc.

Currently, we are exploring sources for support for a unique partnership involving the Police Department (and others) to create a comprehensive outreach plan. In future months, we may look to the City Council for visibility of this effort as well as input in directing outreach efforts for maximal impact. Our goal is one of mutual accountability and collaboration with city leaders to advance this issue.

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City of Cambridge

HEALTH AND ENVIRONMENT

*Vice Mayor Henrietta Davis, Chair
Councillor Anthony D. Galluccio
Councillor Brian Murphy*

PUBLIC SAFETY

COMMITTEE MEMBERS

*Vice Mayor Henrietta Davis, Chair
Councillor David P. Maher
Councillor Timothy J. Toomey*

In City Council July 29, 2002

The Health and Environment and the Public Safety Committees conducted a joint public meeting on Wednesday, June 26, 2002 at two o'clock and ten minutes p. m. in the Ackermann Room.

The purpose of the meeting was to discuss the issue of domestic violence.

Present at the meeting were Vice Mayor Henrietta Davis, Chair of the Health and Environment and the Public Safety Committees, Councillor David Maher, Councillor Brian Murphy, Councillor Timothy J. Toomey, Jr., Councillor Kenneth E. Reeves, Jill Herold, Assistant City Manager for Human Services, Susan Pacheco, Council on Aging, Nancy Ryan, Director, Women's Commission, Harold Cox, Chief Public Health Officer, Lynn Schoeff, Director of Community Health, Health Department, Susan Marine, Violence Prevent Coordinator, Health Department, Sergeant Joseph McSweeney, Domestic Violence Unit, Police Department, Pauline Carter-Wells, Domestic Violence Unit, Police Department, Thomas O'Connor, Detective, Police Department, Jenny Venturo, Police Department and Donna P. Lopez, Deputy City Clerk.

Also present were representatives from other agencies: Antonia Chronis, Department of Social Services, Metro Regional Office, Linda McMaster, Transition House, Janet Yassen, Victims of Violence Program, Cambridge Health Alliance, Ilana Amrani-Cohen, Children with Voices, the Guidance Center, Loleta Collins, DTA, Domestic Violence Unit, Attorney Patricia Telles-Warren and Yvette Goulet, Cambridge/Somerville Legal Service (CASLS), Erin O'Hearn, The Family Center, Susan Cayouette, Clinical Director, EMERGE, Jacey Buel and Tanya Daniel, Dating Violence Intervention Project (DVIP).

Vice Mayor Davis called the meeting to order and stated the purpose. She stated that this community was touched by the violence that recently occurred in the city. She turned the meeting over to Nancy Ryan, Women's Commission, Harold Cox, Chief Public Health Officer and Susan Marine, Domestic Violence Unit, Health Department and to the agencies that provide service to the community.

Ms. Ryan informed the committee that there is a need to develop a dialogue about what services are needed. In 1995 the Domestic Violence Free Zone (DVFZ) was established by City Council order. The entity that deals most with domestic violence is the Police Department. Ms. Ryan introduced Detective Thomas O'Connor who

S-247

Committee Report #11

Committee Report from Vice Mayor Henrietta Davis, Chair of the Health and Environment and the Public Safety Committees, for a meeting held on June 26, 2002 to discuss the issue of domestic violence.

In City Council July 29, 2002

**REPORT ACCEPTED.
PLACED ON FILE.**