# FINDINGS FROM
# MICHIGAN'S COMMUNITY SEXUAL VIOLENCE PREVENTION ASSESSMENT

## EXECUTIVE SUMMARY

# Background on the Project

We know there's a critical need for focused attention on sexual violence prevention (SVP) in our under-resourced communities, particularly around the unique needs of four core communities, including those identifying as **Black, Native/Indigenous/American Indian, LGBTQ+, and Disabled\***. We also know that Michigan communities are the experts when it comes to knowing what they need to prevent violence.

The Michigan Community Sexual Violence Prevention Assessment (CSVPA), led by Michigan Public Health Institute (MPHI) was a first step to listen and learn from under-resourced community members about what sexual violence looks like in their communities, how risk and protective factors for violence unequally affect them, and what their prevention resources and needs are.

**\*IDENTITY AND LANGUAGE** are very complicated. The authors of this report intentionally use terms endorsed by the project's Advisory Council to describe the core communities and their members. As a reflection of the varied preferences within the disability community, we will use both person-first language (e.g., "people with disabilities") and identity-first language (e.g., "disabled people").

MPHI used a community-based participatory approach to guide the design and implementation of the assessment. A CSVPA Advisory Committee, comprising organizations and individuals with experience in the core communities and in SVP in Michigan, worked alongside MPHI to guide the work. Their counsel was essential to ensuring the assessment remained culturally responsive, timely, and community informed.

Risk and protective factors make it more or less likely that individuals, relationships, communities, and societies will experience violence[1]. At the individual and relationship levels, these could be factors like a person's past experiences with violence or their connection to school or a caring adult. At the societal and community levels, these might be factors like connectedness, economic opportunities, and social norms about violence.

Because risk and protective factors impact Michigan communities in similar and unique ways depending on their diverse identities, histories, and contexts, we are pleased to share findings from this assessment about the experiences of Black, Native, LGBTQ+, and Disability communities related to four key community and societal level protective factors determined and defined by our collaborators:

**COMMUNITY CONNECTEDNESS**     **ECONOMIC SUPPORTS**     **COMMUNITY SAFETY**     **BODILY AUTONOMY**

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[1] Wilkins, N., Tsao, B., Hertz, M., Davis, R., Klevens, J. (2014). Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention Oakland, CA: Prevention Institute.

# What We Did

The assessment utilized three main sources of data:

## 1  SEMI-STRUCTURED INTERVIEWS

MPHI conducted **semi-structured interviews** with individuals familiar with the experiences of the four core communities in Michigan. Participants were eligible if they 1) identified as a member of one or more of the four core communities[2] *and* 2) had an in-depth county or statewide view of the experiences of one or more of our focus communities. Participants were recruited via snowball sampling through the CSVPA Advisory Committee and other public health partners. Twenty-six individuals, many representing the experiences of more than one core community, participated in Zoom interviews in Spring 2022. The interview topics covered strengths, assets, and needs in the core communities related to community connectedness, financial stability, community safety, and safety within romantic and intimate relationships. Interviews were analyzed for dominant themes and trends using a team-based analysis approach.

## 2  REVIEW OF EXISTING LITERATURE

MPHI conducted a **review of existing literature** related to the key themes of connectedness, economic supports, bodily autonomy, community safety, and sexual violence prevention in the Black, LGBTQ+, Native, and Disability communities.

## 3  SECONDARY DATA

MPHI also gathered current statewide and national **secondary data** related to these themes.

Themes and trends from interviews, secondary data, and literature review were triangulated, synthesized, and shared with the Advisory Committee through a series of data presentation sessions for further sensemaking. This process resulted in the key assessment findings outlined in this report.

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[2] In a small number of cases, caretakers or family members of Disabled individuals spoke to their perceptions of the experiences of the Disability Community; however, the majority speaking about people with disabilities personally identified as Disabled.

# What We Learned

Communities know which existing assets should be supported, what gaps need to be filled, and where the hard work of systems change is urgently needed. Across Michigan, under-resourced groups are telling us that more work is necessary to protect our communities from violence. What follows are key shared findings and community-informed recommendations resulting from the CSVPA related to community connectedness, bodily autonomy, economic supports, and community safety[3]. We invite readers to deeply consider and act upon these recommendations as they center the perspectives of Black, Native, LGBTQ+, and Disability communities in future SVP work.

## CONNECTEDNESS

**Community connectedness** is an important protective factor for SVP because it establishes a degree of cohesion, trust, support, and sense of safety between community members who hold multiple identities and experiences. Connectedness is found in many different types of communities, including in systems and institutions, the workplace, and among family, friends, and neighborhoods. Connectedness also involves connection to the culture, language, lived experiences, and tradition within a given community, and to communal spaces, land, and region. Several major findings emerged related to connectedness in the core communities. We learned:

+ The core communities described the **importance of safe, intra-community spaces** to access collective care around shared challenges and trauma, to learn about heritage and culture, and to establish healthier relationships. **More opportunities to grow these assets** and keep them sustainable were stressed as a major need.

+ Despite reporting substantial intra-community assets, Black, LGBTQ+, Native, and Disability communities described notable **gaps in feeling connected with the mainstream community**. Communities emphasized that more intersectional, anti-oppression work is needed for connectedness to grow, and more cross-community **efforts that focus on building greater understanding and trust** between the core communities and the larger community is crucial.

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[3] While this executive summary focuses on shared findings and recommendations, future briefs on this work will highlight the unique perspectives of each community related to these protective factors.

## CONNECTEDNESS
# COMMUNITY-INFORMED RECOMMENDATIONS

+ Expand on existing opportunities for connectedness and collective care within the core communities.

+ Create and sustain safe, accessible physical spaces for members of the core communities to be together to build connectedness without fear.

+ Invest in additional opportunities for core communities to learn about their heritage and history, and to practice their cultural traditions.

+ Support collective and individual healing from trauma to establish healthier patterns in relationships.

+ Build acceptance and support for diverse, intersectional identities and experiences within the core communities.

+ Challenge prejudicial attitudes toward the core communities in the mainstream community.

+ Make new and existing spaces, services, and systems inclusive and accessible to the core communities.

+ Engage in anti-oppression work to cultivate trust and promote healing between the mainstream community and the core communities.

# ECONOMIC SUPPORTS

**Economic supports** make communities less vulnerable to SV by providing social, economic, and workplace supports for present and future financial security. Such supports include policies that invests in families and communities, crucial resources such as food, housing, healthcare, debt reduction, and the creation of generational wealth. We learned:

+ The core communities valued the work of organizations, programs, and resources that help with meeting basic needs. They noted, however, that **ensuring financial stability requires additional supports**. These included long-term, sustainable efforts toward equitable and inclusive employment opportunities, livable wages, comprehensive workplace benefits, and strategic and expanded support for everyday basic needs including food, childcare, and housing.

+ **The absence of generational wealth is a profound area of need** and was most often described as intricately tied to the lack of home ownership in the core communities. More affordable and accessible housing options, housing and rental assistance supports, and policies to address the enduring structural and historical roots of housing discrimination practices were some of the economic needs mentioned across all the communities.

## ECONOMIC SUPPORTS
## COMMUNITY-INFORMED RECOMMENDATIONS

+ Improve employment opportunities by paying living wages, improving benefits packages, and implementing workplace policies and practices that promote accessibility and diversity, equity and inclusion.

+ Increase housing security by increasing affordable, accessible housing options, expanding housing supports, and addressing historic and current discriminatory policies and practices.

+ Close the generational wealth gap by reforming policies with strict income limitations on benefits, building financial literacy and expanding programs to alleviate generational debt and increase home ownership and entrepreneurship.

+ Streamline and expand services and programs that help people meet basic needs.

+ Break down barriers to higher education and employment through expanded financial supports, student loan forgiveness, and programs that support job searches, placement, and skills.

# COMMUNITY SAFETY

Being able to engage (or not) with **community safety** systems (e.g., legal, law enforcement, and health care services) without fear of experiencing shame, stigma, discrimination, retaliation, harm, or death is another critical aspect of SVP. Feeling safe requires these systems actively address historically rooted community concerns about safety and wellbeing so that community members can access the support they need. Numerous major findings emerged related to community safety in the core communities, most notably:

+ The core communities described valuing health care policies and practices that are inclusive, anti-racist, and representational, and actively seeking out providers that embody these principles. Yet communities asserted that most **health care systems and providers need to do more work to develop and promote inclusive models of care**.

+ All the core communities expressed a **need for trust building with local law enforcement and criminal courts,** supported by system-wide changes in law enforcement and court policies, procedures, and trainings to address historically rooted, ongoing issues of discrimination, violence, re-traumatization, and community mistrust.

## COMMUNITY SAFETY
## COMMUNITY-INFORMED RECOMMENDATIONS

+ Address discriminatory behaviors, violence and brutality, and community fear and mistrust for police through policy and procedural change, and ongoing training among law enforcement.

+ Develop a workforce of health care professionals who provide equitable, unbiased, person-centered, and affirming care informed by historical and contemporary contexts.

+ Increase access to medical and behavioral/mental health care by expanding care models that meet patients where they are and offering more culturally responsive support.

+ Shift policies, practices, and mindsets in the criminal and civil legal systems that insufficiently protect or re-traumatize marginalized communities.

+ Inform and demand laws and policies to promote protective environments in public and private places, businesses, and community institutions.

# BODILY AUTONOMY

**Bodily autonomy** is the right for a person to have complete control over their body, including informed choices about their sexuality, reproduction, and medical care. Being able to safely express yourself anywhere, make informed choices, and consent to what happens to your body without external influence and coercion is a key protective factor for SVP. Several findings emerged related to bodily autonomy in the core communities, including:

+ Core communities stressed that **youth need comprehensive formal sex and healthy maturation education through schools**. The majority expressed a desire for policy that establishes and funds formal comprehensive sex education for youth that uses an inclusive and intersectional curriculum, including information on sexuality, healthy and unhealthy relationships, and dating violence.

+ The core communities commonly described how **mainstream existing social and cultural norms about gender, sexuality, and identity are often deeply harmful**. Most described community-oriented messaging and positive role modeling for youth, families, adults, and systems as necessary to shift these norms.

## BODILY AUTONOMY
## COMMUNITY-INFORMED RECOMMENDATIONS

+ Promote and provide intersectional, comprehensive, accessible, and all-inclusive sex and healthy maturation education for youth, families, and adults.

+ Create and support safe, welcoming community spaces that promote bodily autonomy through informal education, access to healthy role models, and support for positive identity formation.

+ Implement campaigns that transform harmful societal norms around bodily autonomy, including consent, relationships dynamics, gender roles, and violence using community informed messaging.

# What's Next

Preventing sexual violence requires collaborative, sustainable community, state, and federal partnership that takes seriously the risk and protective factors that make some communities more vulnerable than others. Michigan needs community-driven and targeted SVP strategies to support the diverse needs of all communities. We hope that community leaders, organizations, and programs in the Black, LGBTQ+, Native, and Disability communities will use this information to assess and expand on the important work they are already doing, and to shape new perspectives and approaches to sexual violence prevention. It is also our hope that the many local, state, and national partners who are working hard to end violence will use this information to prioritize engagement and partnership with under-resourced communities; develop policy, funding, and evaluation mechanisms to scale and adapt community-driven solutions; and center the community-informed recommendations outlined above to guide their prevention work.

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