

# MASS Collaboration

**Movement for  
Access  
Safety &  
Survivors**

## Needs Assessment Plan



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# Introduction

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The MASS Collaboration is a collaboration between:

- Boston Area Rape Crisis Center (BARCC)
- Boston Center for Independent Living (BCIL)
- Massachusetts Bay Transportation Authority (MBTA)
- MBTA Transit Police

In 2011, our collaboration received a three year grant through the Office of Violence Against Women through the Education, Training, and Enhanced Services to End Violence Against and Abuse of Women with Disabilities Grant Program. The goal of our collaboration is to create sustainable systemic change within and between our organizations, so that survivor/victims of sexual violence with disabilities in the Boston area have access to quality services that promote safety, empowerment and healing.

Research has shown that the rate of sexual violence against people with disabilities is very high. Both national and Massachusetts state data show that people with disabilities experience sexual violence at more than twice the rate of people without disabilities (National Crime Victimization Survey, 2007 and Massachusetts Behavior Risk Factor Surveillance System, 2010).

We believe that our project brings together an unconventional set of collaborators to create systemic change in awareness, access and services. In addition to the more typical access and service issues

that exist at a rape crisis center and an independent living center for survivors/victims with disabilities, our project includes the unique risk factors specific to using the transit system. Boston's public transportation system, with its own Transit Police force, is widely used by people with disabilities and this creates exciting possibilities for impacting broad change. We are committed to creating systemic change within and among these systems and organizations to improve response and services to survivor/victims of sexual violence with disabilities.

## **Purpose of Needs Assessment**

The MASS Collaboration will be conducting a needs assessment to better understand the strengths and barriers to safe and accessible responses and services for survivors/victims with disabilities within and between our collaborating organizations.

In order to accomplish this we will talk to:

- Survivor/victims of sexual violence
- People with disabilities
- Survivor/victims with disabilities
- Leadership, supervisors, staff and when applicable, volunteers at each collaborating organization.

The information gathered from this needs assessment will guide the strategic plan and the changes that will be implemented at each collaborating organization to improve response to and services to survivor/victims with disabilities.

## Language

We value the dignity of all people and recognize each individual as a unique person. To reflect this belief, we commit to using people first language.

Our collaboration also recognizes that people who experience sexual violence each have their own ways of identifying themselves and we are committed to respecting the preferences of each individual as well as being inclusive of the various language used by participating organizations. In general, we will use the term survivor/victim when talking about people who have experienced sexual violence. When referring to a specific organization or specific audience (for example with focus group and interview questions), we will use the preferred language of that organization or audience.

## Design

In our attempt to create a document that is as accessible as possible to a range of visual needs, including to those who are visual learners, we have decided to:

- Use Arial font;
- Use at minimum, 16 point font for the body of the text;
- Use spacing of at least 25 percent of font size<sup>1</sup>;
- Use Microsoft Word heading styles;
- Include tables, diagrams, and other visual depictions;

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<sup>1</sup> *Accessible Print Materials: Formatting Guidelines to Accommodate All Audiences*; Massachusetts Department of Public Health, Office on Health and Disability, 2007.

- Explain all tables, diagrams and other visual depictions in text to be accessible to screen readers;
- Offer this document in alternative formats including Braille and audio. To request this document in alternative formats contact Shelley Yen-Ewert at 617-649-1287 or [syewart@barcc.org](mailto:syewart@barcc.org).

In addition, all materials in the appendix have been organized to be as user-friendly as possible. This includes the addition of blank pages for ease of photocopying specific documents and sections.



## Vision Statement

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The MASS Collaboration envisions Boston as a city in which the culture within and between victim services, criminal justice, transportation, and disability advocacy and service systems promote the healing, empowerment, and safety of people with disabilities who have experienced sexual violence. Survivors/victims with disabilities will receive equal, responsive, safe, barrier-free services from compassionate professionals, staff, and volunteers who are knowledgeable about and confident when supporting survivors/victims with disabilities.

# Mission Statement

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The mission of the MASS Collaboration is to change the culture within and between all collaborating systems to enhance services to promote healing, empowerment and safety for people with disabilities who have experienced sexual violence. We will accomplish this by incorporating the voices and needs of survivors/victims with disabilities to:

- Build formal and informal connections between our organizations and systems;
- Increase the knowledge, skills and confidence of professionals, staff, and volunteers;
- Enhance and develop policies and protocols based on the findings from our needs assessment, best practices, and current research about serving survivors/victims with disabilities in order to increase access to safe, responsive services.

## **Collaboration Member Agencies**

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### **Boston Area Rape Crisis Center (BARCC)**

The mission of the Boston Area Rape Crisis Center (BARCC) is to end sexual violence through healing and social change. BARCC strives to fulfill this mission by offering free, comprehensive care to victims of sexual violence and their families, and by providing community awareness and prevention services to reduce victimization and perpetration. Since 1973 BARCC has helped thousands of victims; over 50,000 on the hotline alone. Today, BARCC remains committed to creating a world in which sexual violence is history. As a high volume center, BARCC is known for their ability to collect and analyze field practice data to gain knowledge of survivor and community needs. This information is combined with the latest research to develop new and improved programs and to create systemic change that benefits survivors and reduces perpetration. BARCC has received numerous awards including the National Crime Victim Service Award in 2009. More information on BARCC can be found at [www.barcc.org](http://www.barcc.org).

### **Boston Center for Independent Living (BCIL)**

The Boston Center for Independent Living (BCIL) is the second oldest Independent Living Center in the country. Through a team of over 30 staff, BCIL serves people with any disability and any age in Boston and 34 surrounding communities. As part of a national network of over 500 Independent Living Centers, BCIL's mission is to improve

the lives of people with disabilities by providing needed services and advocating for the rights of consumers. Services include a personal care attendant (PCA) program, peer mentoring, and support for people to obtain housing, secure benefits and health care, and gain employment. Advocacy work includes, among others, ensuring the accessibility of the MBTA on both the fixed and paratransit routes and the parity and quality of health care in hospitals. BCIL also offers information and referral to enhance consumer and community knowledge of available services and programs as well as to answer the general accessibility concerns facing residents and visitors to the city. In all, thousands are impacted each year through BCIL's work. More information on BCIL can be found at [www.bostoncil.org](http://www.bostoncil.org).

## **Massachusetts Bay Transportation Authority (MBTA)**

The MBTA is the nation's oldest and fifth largest public transportation agency. It consists of a network of fixed-route buses, subways, commuter rail trains and commuter ferries, as well as an extensive paratransit service. In total, the MBTA serves 175 cities/towns and provides 1.3 million trips per day.

Numerous departments comprise the MBTA, including The Department of System-Wide Accessibility, the Operations Department (which oversees the fixed-route system), Office for Transportation Access (i.e. THE RIDE) and the Transit Police Department—each of

which has a role within the collaboration. All four groups are distinct from one another and are overseen by the MBTA's General Manager/MassDOT Rail & Transit Administrator. More information on the MBTA can be found at [www.mbtta.com](http://www.mbtta.com).

## **MBTA'S Department of System-Wide Accessibility and Office of Transportation Access—THE RIDE**

The MBTA's Department of System-Wide Accessibility (SWA), established in 2007, works with all other MBTA departments to execute the T's mission of becoming the global benchmark for accessible public transportation. The Department was established as part of a comprehensive settlement agreement between the MBTA and Boston Center for Independent Living (BCIL), signed in 2006, that focuses on improving access to the fixed-route system. SWA is committed to creating a fixed-route system that is safe, dependable and inclusive, thereby expanding the transportation options for all customers, including those with disabilities. The Department is involved with the development of policies, procedures and trainings related to improving accessibility, the review of all design plans, and oversight of an internal access monitoring program.

The Office for Transportation Access—THE RIDE is the MBTA's door to door paratransit service. On average, THE RIDE provides over 8,000 customer trips per day. Organizationally, it is nested in the MassDOT Rail and Transit Division and overseen by the GM/Administrator of Rail and Transit.

The MBTA's Office for Transportation Access (OTA/THE RIDE) contracts with three distinct vendors, each of which is responsible for taking reservations, scheduling trips and providing door-to-door paratransit service to RIDE eligible customers. Each vendor has responsibility for a particular service area, together providing paratransit service to 60 cities and towns. All vendors serve the city of Boston directly.

Veterans Transportation, LLC, one of the three vendors, has been providing RIDE service for over twenty years and is currently owned by Harrison Global, a company that also provides limo and coach bus services. Joint Venture of Thompson Transit and YCN, another vendor, has operated for over thirty years and is owned by National Express, a multinational public transportation company. Finally, Greater Lynn Senior Services, a not-for-profit which provides a range of services for elders on the North Shore, has provided Paratransit services for over 30 years.

## **MBTA Transit Police**

In 1968, under Chapter 664 of the Acts of 1968, legislation signed into law the creation of a cross jurisdictional department that could police the Massachusetts Bay Transportation Authority's growing transportation network. The MBTA Transit Police's primary function is to protect the lives and safety of MBTA patrons, MBTA employees and the public in general. As part of that function, officers respond to possible criminal activity which occurs on the MBTA and investigate such crimes. In addition, responsibilities include the prevention and investigation of internal security issues, including employee theft and

contract / vendor fraud. The Department is also charged with the protection of MBTA property and revenue.

The MBTA Transit Police's fundamental duties are to safeguard lives and property within our transportation system and uphold the constitutional rights of all people by following a set of core values that reflect the finest nature of policing. Those set of core values are: Fairness, Truthfulness, Professionalism, Perseverance, Treating All Persons with Dignity and Respect, Service before Self and Integrity.

While the MBTA Transit Police Department has primary jurisdiction on MBTA property and vehicles, MBTA Transit Police Officers have full police authority throughout and within the 175 cities and towns comprising the MBTA service district. Policing responsibility is shared with local cities and towns by means of concurrent jurisdiction and in a few instances through mutual aid agreements.

## Needs Assessment Goals

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1. Identify what helps and what creates barriers to survivors/victims with disabilities feeling safe and comfortable:
  - Disclosing or reporting a sexual assault;
  - Self-identifying as having a disability and/or requesting accommodations.
2. Identify the strengths and barriers to services being safe, responsive and accessible to survivor/victims with disabilities.
3. Identify current attitudes, knowledge, skills and comfort/confidence of professionals, staff, and volunteers at every level of each organization regarding responding to and providing services to survivor/victims with disabilities.
4. Identify specific strengths and gaps within and between all organizations in the collaboration for providing safe, accessible, and responsive services to survivor/victims with disabilities.
5. Determine readiness/ability of each organization to engage in systems change to improve services for survivor/victims with disabilities.
6. Determine existing relationships (both formal and informal) between all organizations and opportunities and challenges to



developing and sustaining the relationship between all organizations in the collaboration.

As stated in our collaboration Charter, our collaboration defines:

**Safety** as:

- Services which are equal, non-judgmental, supportive, confidential and transparent
- Policies and protocols that work towards reducing the risk of re-victimization.

**Responsive** as:

Being knowledgeable and skilled, interacting with survivor/victims with disabilities as individuals, offering and explaining a wide range of options, and providing resources and services based on each individual's choices.

# Information Sources

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## A. Existing information

The MASS Collaboration searched through the following databases: Academic Search Premier, Medline, PubMed, and Web of Science; and asked several disability and sexual assault service providers about existing Massachusetts specific studies relevant to the experience of survivor/victims of sexual assault with disabilities as it relates to response and services. No local studies were found specifically about the experience of survivor/victims of sexual assault with response and services from sexual assault and disability service providers, law enforcement and transportation.

However, several studies were found that could help inform our work.

1. A former Equal Access to Safety grantee, the Equal Access to Safety Initiative in Hampden County, MA conducted a needs assessment as part of their collaboration work. Their needs assessment findings informed their strategic plan to create a safe, accessible, and respectful environment at their agencies (dual domestic violence/sexual assault agency and disability agency) for people with disabilities and those who are Deaf who have experienced domestic violence and/or sexual assault. Their findings could be especially helpful for informing BARCC and BCIL response and services.

2. A study of initial encounters of 16,672 female survivors of sexual assault who sought state-funded sexual assault survivor services in MA from 1987 through 1995 showed that there were differences in reporting and survivor service seeking patterns between survivors with disabilities and those without disabilities. Although these survivors were not interviewed to determine the reason for these differences the findings suggest that some of the differences may be the result of barriers to access while others are the result of individual survivor-level difference, not group difference. Data from this study could provide an initial framework for thinking about how to improve services for survivor/victims of sexual violence.<sup>2</sup>
  
3. In an exploratory study at Boston Medical Center 27 female domestic violence survivors from domestic violence programs were interviewed about what was helpful and not helpful in regards to disclosing domestic violence to health care providers. Although this study was specifically about response from health care providers with domestic violence disclosures and did not focus on survivor/victims with disabilities, the experiences shared by the participants could help inform our collaboration about helpful and unhelpful ways for responding to sexual violence disclosures.<sup>3</sup>

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<sup>2</sup> Nannini A. Sexual assault patterns among women with and without disabilities seeking survivor services. *Womens Health Issues*. 2006 Nov-Dec;16(6):372-9.

<sup>3</sup> Liebshutz, J. et al. Disclosing intimate partner violence to health care clinicians- What a difference the setting makes: A qualitative study. *BMC Public Health*. 2008 July.

4. A MA study on health care inequalities among adults with intellectual and developmental disabilities used focus groups and interviews with adults with intellectual disability/developmental disability and their parents/guardians to learn about their experience with health services, their interactions with health or medical staff, their perceptions on what medical or health staff should know about people with ID/D, and their recommendations for improvement of services. In addition, healthcare providers were asked about their experiences treating patients with ID/DD, their perceptions about their own knowledge and skills for treating patients with ID/DD, and their thoughts about barriers to health care and recommendations for improving health care services for patients with ID/DD. Although the participants interviewed were not survivor/victims of sexual assault and the focus was specifically on health care systems, the responses could be applicable to the work of our collaboration especially when thinking about creating welcoming and accessible services for survivor/victims with ID/DD.<sup>4</sup>
  
5. In March 2005, the MBTA conducted a comprehensive evaluation of its paratransit and fixed route services to improve accessibility and usability, ensure compliance with ADA, develop service monitoring procedures that are responsive to customer needs, and improve communications between the MBTA, riders with disabilities and seniors. The

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<sup>4</sup> Ward, R.L. et al. Uncovering health care inequalities among adults with intellectual and developmental disabilities. *Health and Social Work*. 35 (4). 2010 November. 280-290.

process included reviewing MBTA policies and procedures related to accessibility, gathering information about operating practices, and obtaining public input from seniors and persons with disabilities. Our collaboration can build on this study to look at creating an accessible response to survivor/victims of sexual violence at the MBTA.<sup>5</sup>

Although findings from these studies could help inform the development of our strategic plan, none of these studies look specifically at how to improve services within and between rape crisis centers, independent living centers, law enforcement, and transportation services.

## **B. New information**

We believe the data collected through our needs assessment will result in unique insights for how to create safe, accessible and welcoming responses and services within and between victim services, disability advocacy and service organizations, criminal justice systems and transportation systems. We will obtain first-hand perspectives of survivor/victims of sexual violence, people with disabilities, survivor/victims with disabilities and staff at all levels of our collaborating organizations to guide the development of our strategic plan. Ultimately, this information will help us build on existing strengths at each organization to create systemic change to improve

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<sup>5</sup> Evaluation of MBTA Paratransit and Accessible Fixed Route Transit Services Final Report. 2007 August. <http://www.mbta.com/uploadedFiles/Accessibility/final%20report%20082407%20on%20CD.pdf>

the response and services to survivor/victims of sexual violence with disabilities.

## Scope of Needs Assessment

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Within the MASS Collaboration, the sizes of the participating organizations vary widely; thus the scope of the needs assessment for each organization will vary.

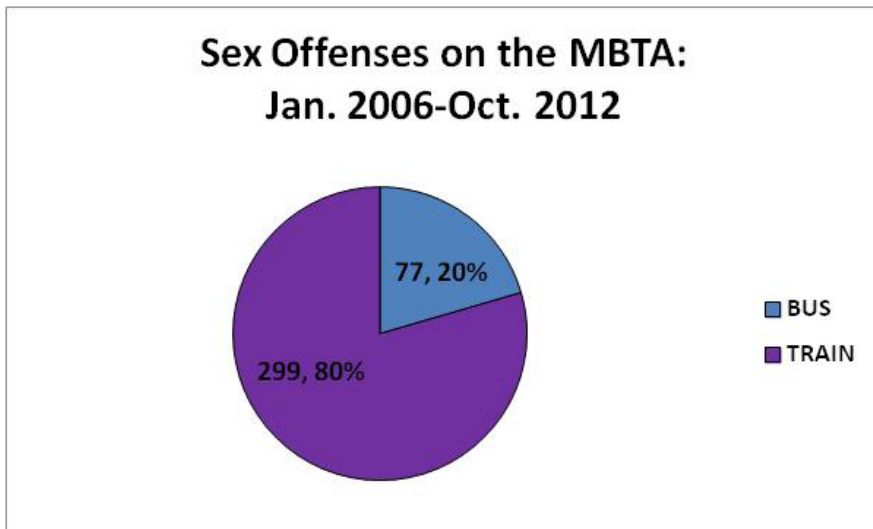
BARCC (approximately 30 staff) and BCIL (approximately 40 staff) are smaller organizations compared to Transit Police and MBTA; therefore, at BARCC and BCIL, the majority of staff who provide direct services will be included in the needs assessment. In addition to staff, BARCC has over 100 volunteers and a sample of volunteers who provide direct rape crisis services will be included.

The Transit Police Department's work encompasses the overall safety and security of the MBTA transit system. There are approximately 240 police officers at the Transit Police Department, including supervisors and leadership. For the needs assessment we will focus on obtaining a sample from officers who could or have responded to or investigated calls/crimes of sexual assault and/or crimes/incidents against people with disabilities. This includes the five Transit Police Service Area patrol officers and detectives from the Criminal Investigations Unit.

The MBTA provides services on both the fixed route systems, including the bus, subway, commuter rails and ferries; and the paratransit system, THE RIDE. Paratransit services are contracted by THE RIDE to three vendors, Joint Venture, Veterans Transportation

Services, and Greater Lynn Senior Services, Inc. All three vendors serve the Greater Boston area.

Given the size and scope of MBTA services, we have, through discussion between collaboration members and key staff at the MBTA, decided to narrow our needs assessment to the subway and paratransit systems, including all vendors. We are prioritizing the paratransit system because the customers who use this form of transportation are exclusively people with disabilities and therefore the potential impact of this project on survivor/victims with disabilities would be high. We are prioritizing the subway system because according to data collected from reports of sexual violence to Transit Police, eighty percent of reported sex offenses on the MBTA between January 2006 and October 2012 occurred on the trains (subway plus commuter rail), compared to twenty percent on the bus.



We believe that in the future we will be able to build on work that is piloted within the paratransit and subway systems to include other modes of transportation within the MBTA.



## Audiences

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This section outlines each audience that will be included in the needs assessment, why we are engaging them, and what information we hope to obtain from them.

One of the MASS Collaboration's values is the familiar saying "nothing about us without us." This slogan, used by the disability rights movement and other social justice movements, communicates the idea that no policy should be decided without the participation of the group(s) affected by that policy. We believe that our policies, protocols and services must be informed by the people to whom we provide services.

### **Survivors/Victims of Sexual Violence:**

Survivor/victims of sexual violence, as the experts of their own experiences, will be able to tell us how to make the responses and services they get from staff in our collaborating organizations more welcoming, comfortable and safe for survivor/victims of sexual violence. We will be engaging survivor/victims who, at the time of recruitment, are on-going clients of BARCC through their counseling, legal advocacy and case management programs. We will also be engaging survivors from BARCC's Survivor Speaker Bureau, a volunteer pool of survivors who educate communities through sharing their personal stories. Survivors from the Speaker's Bureau will be asked to speak about their experiences as survivors, not as volunteers.

From survivor/victims of sexual violence we hope to learn:

- How organizations can communicate that they are a welcoming and safe place for survivors/victims to disclose or report a sexual assault;
- Best practices for responding to disclosures or reports of sexual violence;
- How to better outreach to survivor/victims about services;
- How to make services more comfortable, safe and user-friendly for survivors/victims;
- What public transportation services can do to help customers who are survivors/victims feel safer using their services.

(See questions in Appendix J, pp. J-9 to J-18)

## **People with Disabilities:**

People with disabilities, as the experts of their own experiences, will be able to tell us how to make services more accessible and responsive to people with disabilities. We will be engaging consumers at BCIL and customers who work closely with the MBTA's Department of System-Wide Accessibility (SWA) and have experience using the MBTA's fixed-route services, The RIDE, or both.

From people with disabilities we hope to learn:

- How organizations such as service providers and police departments can communicate that they are accessible and welcoming to people with disabilities and responsive to requests for accommodations;

- How to better outreach to people with disabilities about available services;
- Best practices for providing accessible, responsive, and user-friendly services to people with disabilities;
- What police officers can do to help victims with disabilities feel more comfortable when reporting a crime;
- How public transportation services can help customers with disabilities feel safer using their services.

(See questions in Appendix J, pp. J-3 to J-7)

## **Survivor/Victims with Disabilities:**

Survivors/victims with disabilities have a unique lens of the intersection between sexual violence and disability. They will be able to share their experiences and ideas about how to make reports/disclosures and services more accessible, welcoming, comfortable and safe for survivor/victims with disabilities.

We will be engaging survivors/victims with disabilities:

- Who, at the time of recruitment, are on-going clients of BARCC through their counseling, legal advocacy and case management programs and who have already disclosed that they have a disability;
- Who are consumers at BCIL and have already disclosed that they are a survivor/victim of sexual violence;

- Through BARCC's Survivor Speaker Bureau, a volunteer pool of survivors who educate communities through sharing their personal stories. Survivors from the Speaker's Bureau will be asked to speak about their experiences as survivors with disabilities, not as volunteers.

Through asking survivor/victims with disabilities to share their positive experiences and recommendations we hope to learn:

- How sexual assault services can better outreach to survivor/victims with disabilities;
- Specific concerns that survivor/victims with disabilities have about disclosing or reporting a sexual assault, including concerns about mandated reporting;
- Best practices for responding to disclosures or reports of sexual violence from survivor/victims with disabilities;
- How sexual assault services can be improved to be more accessible, welcoming and responsive to survivor/victims with disabilities.
- How disability services can be improved to be more welcoming, responsive and trauma-informed for survivor/victims with disabilities.
- What police can do to increase access to the reporting process and improve their response to victims with disabilities.
- What public transportation services can do to help customers with disabilities who have experienced sexual violence feel safer using their services.

In addition to speaking to the people to whom we provide services, we will be speaking to leadership, supervisors and staff/volunteers from each collaborating organization, including THE RIDE vendors.

(See questions in Appendix J, pp. J-13 to J-17)

## **Front-Line Staff/Employees/Officers and Volunteers**

These are the individuals at each organization who have had or could have direct interactions with survivor/victims with disabilities. They have first hand knowledge of what works and what doesn't work when implementing policies and practices at their organization. When talking about these individuals across organizations we will refer to these individuals as "front-line staff;" otherwise we will use organization specific language. From these individuals we hope to learn:

- Their perspective on the concerns survivor/victims may have related to disclosing or reporting a sexual assault or disclosing the need for an accommodation.
- What existing organizational policies, practices, training, supervision, and resources assist front-line staff in being able to respond to or provide accessible and safe services to survivor/victims with disabilities.
- What front-line staff need in regards to organizational policies, practices, training, supervision and resources to be able to better respond to or provide accessible and safe services to survivor/victims with disabilities.

- How to best inform front-line staff about any changes to organizational policies and practices.

At **BARCC** the front-line staff includes:

- Client Services staff who provide crisis counseling, advocacy and case management to survivors of sexual violence;
- Hotline and Medical Advocacy volunteers who provide the majority of BARCC's 24/7 emergency services to survivors.
- Community Engagement and Prevention and Innovation staff who develop curricula and provide community awareness, outreach, and education to a variety of communities. Because sexual violence is pervasive we expect that there will be survivors present in each audience and that at times, these survivors may disclose to Community Engagement staff.

Our assumption is that BARCC has extensive experience and expertise with serving survivors of sexual assault, so the questions we ask will focus exclusively on disability.

We will be asking Client Services staff and Community Engagement staff two different sets of questions. Client Services staff will receive questions specific to working directly with survivors of sexual assault. The Community Engagement staff will receive questions specific to providing education to people with disabilities, including survivors with disabilities.

Client Services staff has had experiences working with survivors with disabilities; therefore, questions will be framed exclusively from these experiences. Because not all Community Engagement staff may have presented to audiences that include people with disabilities that they

were aware of, in addition to asking staff to speak from their experiences we will also provide the option to respond to some questions based on what staff think they would need if they were to present to an audience that included people with disabilities. (See questions in Appendix E on pp. E-21 to E-25)

At **BCIL** the front-line staff includes:

- Staff who provide services to consumers through housing assistance, information and referral, advocacy, direct services, the personal care attendant (PCA) program, nursing home transition support, and youth services (including young adults).

Our assumption is that BCIL has extensive experience and expertise with serving people with disabilities, so the questions we ask will focus exclusively on sexual violence.

Although some BCIL staff have received disclosures of sexual violence from consumers, not all staff have had this experience; therefore in addition to asking staff to speak from their experiences we will also provide a scenario to provide the option for staff to talk about what they think they would need to respond to a disclosure of sexual violence. (See questions in Appendix F on pp. F-15 to F-19)

At the **Transit Police** the front-line staff includes:

- Detectives
- Patrol Officers

Our assumption is that officers and detectives at the Transit Police Department have some experience with responding to victims of sexual violence and some experience with responding to victims with disabilities, but that the majority do not necessarily have expertise responding to either population. In addition, we anticipate that the majority will not have responded to victims of sexual violence with disabilities. Because of this, we will be asking questions both about sexual violence and disability.

Because officers have varying levels of experience responding to victims of sexual violence, victims of any crime with disabilities, and victims of sexual violence with disabilities, in addition to asking officers to speak from their experiences we will also provide the option for officers to talk about what they think they would need to be able to respond to a report of sexual violence from a victim with a disability. (See questions in Appendix G on pp. G-13 to G-17)

At the **MBTA** the front-line staff includes:

- Call Center Staff who field calls from customers of the MBTA.
- Subway Motor Persons and Customer Service Agents (CSA). The Subway Motor Persons operate the subway trains. The Customer Service Agents provide customer services within the subway stations. Employees at the MBTA may take on the dual roles of both Subway Motor Persons and CSAs.
- Inspectors are seasoned employees who provide both direct customer services within stations and additional support to Subway Motor Persons and Customer Service Agents during incidents.



Although MBTA front-line staff has experience assisting customers with disabilities in accessing the subway system, we are assuming that the majority of MBTA front-line staff may not have expertise responding to victims of sexual violence or victims with disabilities. Because of this, we will be asking questions in both areas with emphasis on sexual violence and disability issues as they directly relate to a disclosure of sexual violence.

Since we are assuming that many front-line staff will not have experience responding to victims of sexual violence, victims with disabilities and victims of sexual violence with disabilities we will use several scenario based questions to guide the discussion about what front-line staff need to be able to respond to victims with disabilities. (See questions in Appendix H pp. H-13 to H-23)

At the **MBTA Vendors** each vendor has its own front-line staffs which include:

- Paratransit (RIDE) drivers.
- Reservationists who coordinate the scheduling of services, but also field calls from customers of THE RIDE. The primary phone number given to customers of THE RIDE is the direct number to the reservationists.
- Dispatchers who have various roles, one of which is to take customer calls during the evening and overnight shifts. The needs assessment questions for dispatchers will focus specifically on this role.

Our assumption is that front-line employees from THE RIDE have extensive experience and expertise with serving people with

disabilities, so the questions we ask will focus exclusively on sexual violence.

Although some frontline employees have received disclosures of sexual violence from customers, not all employees have had this experience; therefore in addition to asking employees to speak from their experiences we will also provide a scenario to provide the option for employees to talk about what they think they would need to respond to a disclosure of sexual violence. (See questions in Appendix I pp. I-11 to I-18)

## **Supervisors**

Supervisors provide assistance and/or support to front-line staff. They have first hand knowledge of what works and what doesn't work in regards to assisting/supporting front-line staff. In addition, they manage departments or programs and can influence systemic change within their department or program.

We will be finding out from supervisors of all partner organizations:

- Their perspectives on the ability of front-line staff to respond to or provide services to survivor/victims with disabilities.
- What existing organizational policies, practices, training, and resources assist them with supervising front-line staff in responding to or providing services to survivor/victims with disabilities.
- What they need in regards to organizational policies, practices, training, and resources to be able to better supervise front-line

staff to respond to or provide services to survivor/victims with disabilities.

- The strengths and challenges to organizational communication structures between leadership, supervisors and front-line staff.
- Their experience with community partnerships.

In addition, at BARCC we hope to learn from supervisors how they integrate disability issues into their program's practices. At BCIL we hope to learn from supervisors how they integrate trauma-informed practices into their program.

At **BARCC** supervisors include:

- The Directors and Managers of the Client Services program.
- The Director of Prevention and Innovation and Manager of Community Engagement.

(See questions in Appendix E pp. E-8 to E-20)

At **BCIL** supervisors include:

- PCA Program Manager
- Director of Services

(See questions in Appendix F pp. F-9 to F-14)

At **Transit Police** we will engage a sample of the following two groups of supervisors:

- Lieutenants who manage their divisions.
- Sergeants who provide direct supervision of officers in the field.

(See questions in Appendix G pp. G-7 to G-11)

At the **MBTA** we will engage:

- Director of the Call Center
- Subway Supervisors

(See questions in Appendix H pp. H-7 to H-11)

At the **MBTA Vendors** the supervisors we will engage at each vendor include:

- Supervisors who provide management level oversight. These include the:
  - Safety Manager who oversees driver training, receives all incident reports, and implements safety policy and regulations.
  - Dispatch Manager who reviews paperwork, call logs and recordings on a daily basis to make sure that dispatchers are responding to calls appropriately.
- Supervisors who directly supervise front-line staff. These include:
  - Driver Managers who oversee the day to day driver shifts. They are present at the pull-out stations and provide direct assistance to drivers.

- Safety Supervisors who are out in the field to oversee and support drivers when incidents occur. In addition, they gather information and report on all incidents and collisions.
- Reservation Manager, who plans and implements call center strategies and operations, improves systems and processes, identifies and resolves problem, and manages reservationists.
- Assistant Dispatch Manager who oversees the dispatchers, works with the dispatchers to resolve difficult issues, and reports incidents to Safety Supervisors.

## **Leadership**

The leadership at each organization sets the vision, priorities and policies at their organization. They hold the big picture of the organization and can influence change throughout the entire organization.

From these individuals we hope to learn:

- How to build on existing organizational strengths to address how to better communicate (through physical building structure, signage, websites, social media etc) that their organization is accessible, safe and responsive to survivor/victims with disabilities.
- How to build on staff and organizational strengths to address identified gaps in organizational policies and protocols needed to

improve organization-wide response and/or services to survivor/victims with disabilities.

- How to best facilitate communication regarding policies and protocols between staff and leadership utilizing their organization's communication structures.
- Leadership's perspective on their organization's capacity for expanding effective responses to disclosures and/or improved services to survivor/victims with disabilities and their ideas for increasing capacity.
- Effective ways, based on each organization's past experiences with partnerships and organizational change efforts, to create change within their own organization and between our collaborating organizations.

At **BARCC** the leadership includes the Executive Director and Managing Director. (See questions in Appendix E pp. E-5 to E-7)

At **BCIL** the leadership includes the Executive Director. (See questions in Appendix F pp. F-5 to F-8)

At the **Transit Police** the leadership includes the Chief and the Superintendent-in-Chief. (See questions in Appendix G pp. G-3 to G-6)

At the **MBTA** the leadership includes:

- General Manager who has oversight over the entire MBTA.
- Chief Operating Officer
- Director of OCC/Training who has oversight of the operations of the fixed route of the MBTA. OCC does not work directly with customers, but any incidents or issues on the fixed route would be coordinated through OCC. This includes stopping trains if there are incidents, including crimes and coordinating accommodations that are needed. In addition to leadership questions, we have a few additional questions for OCC related to whether their policies or procedures for responding to or coordinating incidents are different if the incident is a sexual assault and if the victim has a disability. (See questions in Appendix H page H -25)
- Chief Safety Officer who has oversight of safety and security at the MBTA.
- Director of the Call Center
- Director of Planning and Schedules and Deputy Administrator and Assistant to the General Manager, MassDOT Rail and Transit/MBTA. The Director of Planning and Schedules currently has oversight over THE RIDE, but THE RIDE will be transitioning into MassDOT's and the Deputy Administrator's leadership.
- Assistant General Manager of System Wide Accessibility

(See questions in Appendix H pp. H-3 to H-6)

At the MBTA an additional category are the staff who manage THE RIDE.

- Management for THE RIDE. THE RIDE office at the MBTA oversees the contracts with the vendors ensuring that THE RIDE vendors receive and implement MBTA policies for THE RIDE. In addition, they communicate with the vendors and customers when there are incidents. The RIDE management will receive a different set of questions focused specifically on the relationship and communication between the MBTA THE RIDE and the vendors regarding policies, protocols and response to incidents.

(See questions in Appendix H pp. H-27 to H-29)

Each **RIDE Vendor** has its own leadership:

- General Manager (may also be called Project Manager). Each vendor receives the same set of policies from MBTA THE RIDE. From this group of leadership we hope to learn their perspectives about the policies they receive and communication with the MBTA THE RIDE; and how they implement the policies into their practices.

(See questions in Appendix I pp. I-3 to I-5)

## **Board of Directors**

We will talk to one or two key informants at the BARCC and BCIL Board of Directors. The Board has final approval of policies and budgets at these organizations and thus it is important to engage



them. The Board questions will focus on their perspectives of how change happens at their organization, the current ability to respond to or serve survivors with disabilities and the organization's capacity to expand response or services to survivors with disabilities. (See questions in Appendix E page E-3 and Appendix F page F-3)

## **Collaboration Representative**

In addition, all collaboration Representatives will be given the option to participate in the needs assessment if they wish. If applicable, representatives may choose to participate in their agency focus group or in an interview representing their perspective as agency staff.

# Data Collection Method

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We will be utilizing three methods of gathering information:

- Focus groups
- Interviews or small group interviews
- Surveys

Focus groups and interviews will be the primary methods for gathering information because the purpose of this needs assessment is to understand the perspectives of each audience through their personal experiences as they relate to obtaining or providing services. We believe that the best way to obtain this type of information is through open-ended conversations with each audience.

## Focus Groups

We are defining focus groups as groups that comprise at least four people in the group. We are using focus groups because:

- They provide the opportunity for participants to build off each other's comments which could result in richer conversations; and
- They are an efficient way to gather information.

We will be using focus groups for audiences in which there is a larger pool from which to recruit. These include:

- Survivor/victims of sexual violence
- People with disabilities
- Frontline staff and volunteers

- Client services supervisors at BARCC
- Supervisors at Transit Police. There will be separate focus groups for Lieutenants and Sergeants because of differences in rank and supervisory role.
- MBTA Supervisors
- RIDE Vendor supervisors

For THE RIDE Vendors, separate focus groups will be held at each vendor because although all vendors are provided identical policies from the MBTA, there may be some differences in how each vendor implements the policies.

Organization specific focus groups will bring together people in similar positions at their organization. Supervisors will not be in the same focus group as the staff they supervise.

In general, the length of time for all focus groups will be 1 ½ hours in length. Our collaboration understands that because of scheduling logistics this may not be possible for Subway MotorPersons and RIDE drivers. The minimum length for focus groups for these groups will be one hour.

For focus groups with survivor/victims and people with disabilities, the minimum number of participants is four and the maximum is seven. For focus groups with staff/employees at each organization, the minimum number of participants is four and the maximum is ten.

For more details see the following chart:

<b>Group</b>	<b>Number Focus Groups*</b>	<b>Number Participants Per Group</b>
Survivor	2	4 to 7
People with Disability	2	4 to 7
BARCC Client Service Staff	1	4 to 10
BARCC Community Engagement Staff	1	4 to 6
BARCC Medical Advocacy Volunteers	1	4 to 10
BARCC Hotline Volunteers	1	4 to 10
BARCC Client Service Supervisors	1	4
BCIL Community Based Staff	1	4 to 10
BCIL Office Based Staff	1	4 to 10
Transit Police Detectives	1	4 to 10
Transit Police Patrol Officers	2 to 3	4 to 10
Transit Police Sergeants	1	4 to 10
Transit Police Lieutenants	1	4 to 10
MBTA Call Center Staff	1	4 to 10
MBTA Subway Motor Persons and CSA	2 to 3	4 to 10
MBTA Subway Inspectors	1	4 to 10
MBTA Supervisors	1	4 to 10
RIDE Drivers	6 (2 per vendor)	4 to 10
RIDE Reservationists and Dispatchers	3 (1 per vendor)	4 to 10
RIDE Supervisors	3 (1 per vendor)	4
<b>Total</b>	<b>33 to 35</b>	

## **Interviews or Small Group Interviews**

We are defining interviews as one-to-one interactions between the facilitator and the participant. We are defining small group interviews as groups of two or three participants. We are using interviews because:

- There are some audiences who, because of their role, have a very specific unique perspective.
- They offer more privacy than focus groups;
- They can be tailored to individual needs (e.g. tight schedules, requests to not be tape recorded)

We will be using interviews for audiences that meet any of the above criteria and audiences which only have two to three people to recruit from:

- Survivor/victims with disabilities
- Leadership
- Key informant(s) from BARCC and BCIL Board
- BARCC community education supervisors
- BCIL supervisors
- MBTA Director of Call Center
- RIDE vendor managers. RIDE vendor managers will receive supervisor level questions, but because they have oversight of supervisors and have a different supervisory role, they will be interviewed separately.
- The BCIL Representative

In addition, for survivor/victims and people with disabilities we will offer the option of an interview. For staff, if we are unable to recruit enough staff participants, we may provide the opportunity for staff to participate in one-on-one interviews.

In general, interviews will be one hour in length. The length of interviews may be adjusted if agreed upon between the Project Manager, Facilitator and participant.

For more details see the following chart:

<b>Interview</b>	<b>Number Interviews</b>	<b>Number participants per interview</b>
Survivor with Disability	3 to 7	1
BARCC ED and Managing Director	1	2
BARCC Board Member	1	1
BARCC Community Engagement Supervisors	1	2
BCIL ED	1	1
BCIL Board Member	1	1
BCIL Supervisors	1	2
BCIL Representative	1	1
Transit Police Chief and Superintendent-in-Chief	1	2
MBTA General Manager	1	1
MBTA Chief Operating Officer and Deputy	1	2
MBTA Director of Operation and Control Center/Training	1	1
MBTA Chief Safety Officer	1	1
MBTA Director of Call Center	1	1
MBTA Assistant General Manager of System Wide Accessibility	1	1
MBTA Director of Planning and Schedules and Deputy Administrator and Assistant to the General Manager	1	2
MBTA RIDE Managers	1	2
RIDE General Managers	3 (1 per vendor)	1
RIDE Safety Manager and Dispatch Manager	3 (1 per vendor)	2
Total	24 to 29	26 to 32

## Surveys

We will supplement information gathered by focus groups and interviews with surveys for Transit Police because of the following two conditions:

- There are over 200 officers including detectives and patrol officers. Surveys will help ensure adequate representation. And,
- The Transit Police leadership has identified surveys as being an effective method for obtaining increased representation from officers as well as a useful tool for recruitment of focus group participants.

Surveys will be inputted into Survey Monkey and a link sent to officers by the Transit Police Chief. At the end of the survey, language will be included letting officers know that if they are interested in providing more input by participating in a focus group they can contact the Project Manager. (See survey questions in Appendix G pp. G-19 to G-28)



# Recruitment

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## Recruitment Methods

The MASS Collaboration is committed to recruiting participants in a manner that is in-line with the values stated in our Collaboration Charter and ensures:

- Choice
- Informed consent
- Safety of participants
- Access
- The inclusion of diverse perspectives

## Survivors

Survivors will be recruited from on-going clients at BARCC at the time of recruitment and from BARCC's Survivor Speaker Bureau.

Staff from the clinical, legal advocacy, and case management programs will be the recruiters for participants.

- Counselors will recruit participants in-person
- Advocates and case managers will recruit participants either in-person or over the phone because many of the legal advocacy and case management services are provided via phone.

The Coordinator of Community Engagement, who coordinates the Survivor Speaker Bureau, will be the recruiter for this group of survivors. She will send an e-mail that is drafted by the Project

Manager and members of the MASS Collaboration (also referred to as the Team) (see Appendix A pp. A-15 to A-18),

## **People with Disabilities**

People with disabilities will be recruited from:

- Consumers at BCIL. Recruiters from BCIL are staff who work in an on-going basis with consumers. Staff will recruit participants in-person.
- A pool of customers who work closely with the MBTA's Department of System-Wide Accessibility (SWA) and have experience using the MBTA's fixed-route services, The RIDE, or both. The MBTA Representative will be the recruiter for this group of participants. She will send an e-mail drafted by the Team. (see Appendix A pp. A-15 to A-18), , to these customers and will follow-up with phone calls.

## **Recruitment Process for Survivors, People with Disabilities and Survivors with Disabilities**

All recruiters will attend an orientation held by the Team prior to recruitment efforts.

During the orientation recruiters will be provided the following items:

- Recruitment script
- Project and Needs Assessment Information Sheet

- RSVP Form
- Project Manager Contact Cards. These cards will have only the Project Manager's name; a phone number with a voice mail that does not identify the collaboration's purpose or the collaborating organizations; and a space to fill in a meeting time for focus groups and interviews.

(See Appendix A pp. A-19 to A-27 for all handouts)

The following process will be followed for recruitment:

- Recruiters will only recruit individuals whom they believe can safely participate in the needs assessment.
- Recruiters will verbally cover the information in the Project and Needs Assessment Information Sheet. Invitees who wish to have written information to review further have the option of taking the Information Sheet with them. Prior to giving the invitee the Information Sheet the recruiter will review potential safety and privacy concerns with the invitee. (See Recruitment script in Appendix A pp. A-3 to A-13)
- Recruiters will follow the recruitment script provided to:
  - Explain the overall goal of the collaboration and the purpose of the needs assessment.
  - Discuss the benefits and risks to participating.

- Inform invitees that participation is optional. The decision whether or not to participate will not impact service provision or ability to participate in BARCC or BCIL programs or opportunities now or in the future.
- Inform the invitees about exceptions to confidentiality. (See pp. 75 to 81 under Confidentiality)
- Discuss incentives. Refreshments will be provided at focus groups. Participants can indicate food allergies on the RSVP form. All participants who attend will receive a \$25 gift card to be distributed during check-in on the day of the focus group. Our collaboration will select a gift card to a store that is widely available and easily accessible to participants.
- Review accommodation options including the need for financial assistance for transportation to focus groups or interviews. Let invitees know that because some participants for focus groups may have sensitivities to fragrances that the MASS Collaboration is requesting that participants refrain from wearing scented lotions, perfumes etc. to the focus group.
- For focus groups review options for date, time and location. These will be determined prior to recruitment by the Facilitator and Project Manager in conjunction with the MASS Collaboration Team.

- Offer the option of an interview for invitees who wish to participate, but do not wish to participate in a group format or who do not wish to be tape recorded.
- For invitees who would prefer an interview, the recruiter will obtain general availability of the invitee and ask if the Project Manager could contact the invitee or if the invitee would prefer to contact the Project Manager themselves to schedule the interview. Information about how to safely contact the invitee will be indicated on the RSVP form.
- Confirm whether or not the invitee would like to participate.
- Ask if the invitee would like a reminder call about the focus group/interview. The request along with safe ways to contact the invitee will be indicated on the RSVP form.
- Ask the invitee if they would like to be contacted in case there are circumstances that result in the necessity to change the focus group time, date or location. The request along with safe ways to contact the invitee will be indicated on the RSVP form. If the invitee would not like to be contacted, explain that the invitee could call the Project Manager on the day of the focus group for verification that no changes have been made. If there is a change to the focus group, the Project Manager will change the outgoing voice mail message to indicate the change.

- Let invitee know that if they are interested in hearing about the findings specifically from the survivor, people with disability and survivor with disability groups, the Project Manager can arrange an opportunity. If they are interested, obtain their contact information and a safe way to contact them. Let them know they can call the Project Manager to request to be taken off the contact list at any time.
- When discussing safe ways of contacting the invitee, let invitees know that if they have call block and would like their number unblocked by the Project Manager, “Boston Area Rape Crisis Center” will show up on the callerID. If the invitee has concerns, indicate the concern on the RSVP form and arrangements can be made to call from the Boston Center for Independent Living.
- Ask if the invitee would like a Project Manager Contact Card. If the invitee is participating in a focus group, write the date and time of the focus group on the card.
- If the invitee has questions that the recruiter is unable to answer, the recruiter can direct these questions to the Project Manager. Depending on the invitee’s preference, the invitee could call the Project Manager, receive a call from the Project Manager, or request that the recruiter obtain the information from the Project Manager.

- After verbally explaining the purpose of the needs assessment to invitees, recruiters will give invitees who are interested in participating a RSVP form to complete. For recruitment meetings that occur via the phone, the recruiter can read the RSVP form to the invitee and fill out the form. For recruitment invitations that are e-mailed, the RSVP form will be attached to the e-mail and invitees can e-mail the forms to the Project Manager.
- RSVP forms should be given to the Project Manager within two business days. The Project Manager will arrange with each agency the most efficient way to obtain RSVP forms.

## **Front-Line Staff and Volunteers**

E-mail will be the primary method of recruiting staff from all organizations. When applicable, e-mails will be supplemented with verbal announcements at meetings. An e-mail drafted by the Team will be sent to all staff. All staff will receive the Project and Needs Assessment Information sheet and can RSVP to the Project Manager, including any accommodation requests. Each Team Member has identified the most effective person(s) to recruit staff at each organization.

- Staff at BARCC and BCIL. The Project Manager and Representative will send an e-mail drafted by the collaboration to all staff and verbal announcements will be made at existing meetings.
- BARCC volunteers. The Hotline and Medical Advocacy Program Coordinators will send an e-mail drafted by the collaboration to

volunteers and verbal announcements will be made at existing meetings.

- Transit Police officers. The Transit Police Chief will e-mail a memo drafted by the collaboration to all officers. The survey will be included in the memo and will serve as an additional recruitment tool. Prior to recruitment, the Project Manager and Transit Police Representative will meet with the Transit Police Chief and other identified leadership to discuss recruitment strategies.
- MBTA front-line employees. Identified leadership and supervisors will recruit MBTA front-line staff and assist with coordinating logistics for focus groups. Leadership and supervisors do not need to invite all employees; however they will be instructed to ask a diverse group of employees, so that we can obtain diverse perspectives. Prior to recruitment, the Project Manager and MBTA representative will meet with the identified leadership and supervisors to further discuss plans for recruitment of front-line employees and focus group logistics.
- RIDE front-line employees. Identified Vendor leadership and supervisors will recruit RIDE front-line staff and assist with coordinating logistics for focus groups. Leadership and supervisors do not need to invite all employees; however they will be instructed to ask a diverse group of employees, so that we can obtain diverse perspectives. Prior to recruitment, the Project Manager, MBTA representative, and MBTA RIDE management will meet with identified leadership and supervisors



to further discuss plans for recruitment of front-line employees and focus group logistics.

All front-line staff will be assured that participation is optional and the decision whether or not to participate will not impact employment. If we are unable to obtain enough staff participants for focus groups, the Team may provide the opportunity for staff to participate in one-on-one interviews.

All front-line staff will receive the Project and Needs Assessment Information sheet and a staff specific RSVP form (see Appendix B pp. B-13 to B-18). Staff may e-mail RSVP forms to the Project Manager. The Project Manager will e-mail reminders prior to all focus groups.

For front-line staff recruited at the MBTA and RIDE Vendors, a process for obtaining RSVPs, including requests for accommodations will be determined at a meeting with the MBTA and RIDE Vendor leadership.

## **Supervisors**

E-mail will be the primary method of recruiting supervisors from all organizations. An e-mail drafted by the Team will be sent to all supervisors. All supervisors will receive the Project and Needs Assessment Information sheet and can RSVP to the Project Manager, including any accommodation requests. Each Team Member has identified the most effective person(s) to recruit supervisors at each organization.

- Supervisors at BARCC and BCIL. The Project Manager and Representative will send an e-mail drafted by the Team to supervisors.
- Lieutenants and Sergeants. The Transit Police Chief will e-mail a memo drafted by the Team to Lieutenants and Sergeants. Prior to recruitment, the Project Manager and Transit Police representative will meet with the Chief and other identified leadership to discuss recruitment strategies.
- MBTA supervisors. The MBTA Representative will send an e-mail drafted by the Team and cc: the Project Manager.
- RIDE supervisors. The RIDE Contract Manager will send an e-mail drafted by the Team and cc: the MBTA Representative, the MBTA Liaison and the Project Manager.

All supervisors will be assured that participation is optional and the decision whether or not to participate will not impact employment. If we are unable to obtain enough supervisor participants for focus groups, the Team may provide the opportunity for supervisors to participate in one-on-one interviews.

All supervisors will receive the information sheet and a staff specific RSVP form (see Appendix B pp. B-13 to B-18) Supervisors will e-mail RSVP forms to the Project Manager. The Project Manager will e-mail reminders prior to all scheduled interviews or focus groups.

## Leadership

E-mail will be the primary method of recruiting leadership from all organizations. An e-mail drafted by the Team will be sent to all leadership. All leadership will receive the Project and Needs Assessment Information sheet and can RSVP to the Project Manager, including any accommodation requests. Each Team Member has identified the most effective person(s) to recruit leadership at each organization.

- BARCC leadership is the collaboration Representative and will receive an e-mail that she can RSVP to from the Project Manager.
- BCIL leadership. E-mail will be sent by the Project Manager and BCIL Representative.
- Transit Police leadership: E-mail will be sent by the Project Manager ccing the Transit Police Representative.
- MBTA leadership: E-mail will be sent by the MBTA Representative ccing the Project Manager.
- RIDE Vendor leadership: E-mail will be sent by RIDE contract manager ccing the MBTA Representative, RIDE Liaison and Project Manager.

The Project Manager will e-mail reminders to all leadership prior to scheduled interviews.

## **BARCC and BCIL Board**

Key informant(s) from the BARCC and BCIL Board will be identified by BARCC and BCIL Representatives. Representative from BARCC and BCIL have identified the most effective method and person(s) to recruit their organization's Board Member.

**BARCC Board:** BARCC Executive Director will recruit the BARCC Board member by phone.

**BCIL Board:** BCIL Representative and BCIL Executive Director will recruit the BCIL Board Member. An e-mail will be sent to the Board Member by the BCIL Executive Director.

A Project and Needs Assessment Information Sheet will be provided to Board Members. Once a BARCC Board Member is confirmed to participate the Project Manager will schedule the interview with the Board Member, including obtaining requests for accommodations.

# Focus Group and Interview Procedures

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## Checking In:

- During check-in, the Project Manager will communicate with participants who requested accommodations to ensure that they have been adequately provided and to handle any related issues. If the Project Manager is not present, the Facilitator will ensure that all accommodations requests have been successfully met.
- Survivors, people with disabilities and survivors with disabilities will receive their selected gift cards during check-in and told that they can keep the card regardless of whether they stay for the full duration of the focus group/interview. The Project Manager, Facilitator or any staff identified to be responsible for the check-in will be responsible to document the distribution of gift cards.
- For focus groups, name tags will be provided. Participants will be encouraged to use a different identifying first name to enhance confidentiality and may also opt out of wearing a name tag.

## Focus Groups and Interviews

- Focus groups and interviews will involve a facilitated discussion using open-ended questions, unique for each audience, based on the goals of that particular group (see Appendices E to I for all questions).
- Each focus group will have a group Facilitator and Note Taker. Some focus groups may also have a Floater. (See below for additional information on roles.)
- Each interview will have a Facilitator and, based on available staffing, a Note Taker. (See below for additional information on roles).
- Only people who have a direct role in the focus group/interview will be present in the room. This includes the Facilitator, Note Taker and when applicable Floater, interpreters and alternate PCAs.
- Crisis counselors will be available for interviews with survivors with disabilities and focus groups for survivors, people with disabilities and staff at BCIL.
- A list of local community resources will be available at all focus groups and interviews. (See Appendix C pp. C-23 and C-24)

- Light refreshments will be provided at focus groups for survivors and people with disabilities. During recruitment, recruiters will obtain information about participant food allergies.
  
- At the beginning of each focus group and interview, the Facilitator will explain the following: (See Facilitator Scripts in Appendix C pp. C-3 to C-21)
  - Passive consent and voluntary participation.
  - The purpose of the focus group/interview.
  - Confidentiality and exceptions to confidentiality.
  - Availability of support services (resources and/or Crisis Counselor).
  - That the focus group will be recorded and that if a participant wants the audio recording turned off for a specific statement, they may make that request.
  
- At the end of each focus group/interview, the Facilitator, Note Taker and if applicable, Floater will debrief and jointly identify themes, significant comments, and new information related to the goals of the needs assessment. These notes as well as notes from the focus group/interview will be shared at Team meetings for further discussion.

## **Roles of Those Conducting Focus Groups and Interviews**

The following is a list of those conducting focus groups and interviews, and a description of each role.

### **Facilitator**

To maximize resources, a consultant will be hired within the federal rate for consultants to be the Facilitator for focus groups and interviews. The Facilitator will be skilled in interviewing techniques and group facilitation, and will have familiarity with disability services and/or sexual assault services. Consultants will submit a resume and meet with the Team prior to being hired. Once hired the Project Manager in conjunction with the Team will orient the Facilitator to the needs assessment process, facilitation script and questions. The consultant will also be asked to sign a confidentiality form (See Appendix D).

The Project Manager will also facilitate some interviews and as needed, may facilitate some focus groups.

The Facilitator will:

- Ensure that the focus group/interview begins on time.
- Welcome participants, introduce other people conducting the meeting, and review general housekeeping details.
- Review the purpose of the focus group.
- Review confidentiality including exceptions to confidentiality
- Ensure that people feel comfortable and safe, and understand that they can leave at any time.



- Ensure that the discussion is focused on the questions and quickly intervene if there are personal disclosures.
- Turn off and on the audio recorder if a participant makes a request for a specific comment not to be recorded.
- Debrief focus groups with the Note Taker and when applicable, the Floater. (See template in Appendix C page C-27)
- Write up notes from interviews and provide them to the Project Manager in an agreed upon time frame.
- Ensure that the meeting ends on time.

## **Note Taker**

There will be a NoteTaker at all focus groups. There may be a NoteTaker at some of the interviews. The Project Manager and an alternate Note Taker selected by the Team will share the responsibility of taking notes. The alternate Note Taker will sign a project confidentiality form and be oriented to the project and goals of the needs assessment in order to understand the focus of the notes.

The Note Taker will not participate in the discussion and will sit in a part of the room that will be the least distracting for participants when possible. The Note Taker will be responsible for:

- Objectively taking notes of the discussion.
- Ensuring confidentiality by not linking any information shared to specific participants and will exclude any identifying information other than which organization and type of group they are from (for example, “Staff from BARCC...”).
- Ensuring that all written information and notes are kept in a safe and confidential place. If the Note Taker is not the Project

Manager, the Note Taker will give the Project Manager the notes within a time frame and in a confidential manner as pre-determined by the Project Manager and Note Taker. (See Preserving Confidentiality pp. 70 to 75)

- Assisting the Facilitator with keeping track of time.
- Debriefing focus groups with the Facilitator and when applicable, the Floater.

## **Crisis Counselor**

A Crisis Counselor will be available at focus groups and interviews with survivors, people with disabilities, and survivors with disabilities to provide emotional support either during or just following the group session. Our collaboration has also decided, based on our discussions, to have a Crisis Counselor available at the focus group for staff at BCIL. The Crisis Counselor will be in a separate, private, accessible space to ensure confidentiality and safety.

Crisis Counselors will be staff, interns, or volunteers from BARCC. All counselors are trained rape crisis counselors in Massachusetts. The Project Manager will orient all Crisis Counselors to the collaboration's agreements regarding confidentiality and exceptions to confidentiality.

## **Floater**

The Team may decide to have a Floater present during focus groups if the Team decides that either the participants, the Facilitator and/or Note Taker need additional support and if there is available staff. If a Floater is needed, the Team will identify the appropriate person for each focus group ensuring that the floater does not know any of that

group's participants in order to preserve confidentiality. If the Floater is not a Team member, the Floater will be asked to sign a project confidentiality form.

Roles of the Floater could include:

- Assisting with room set-up and food (if applicable).
- Keeping track of time.
- Assisting the facilitator with turning on and off audio recorder if a request is made by a participant.
- Escorting participants to the Crisis Counselor or their PCA if requested.
- Providing other support to the Facilitator and Note Taker as needed.
- Debriefing focus groups with the Facilitator and Note Taker.

# Consent

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We will be using a passive consent process for all focus groups and interviews because it provides more confidentiality for participants and is more efficient. The process of passive consent will be explained by the Facilitator during the focus group/interview (See Facilitator Scripts in Appendix C pp. C-3 to C-21). Participants will be told they can leave or discontinue at any time and that they are demonstrating consent by choosing to participate. Participants of focus groups and interviews are agreeing to:

- Participate in a focus group/interview.
- Have their comments as much as possible anonymously recorded in writing. No names or identifying information will be written in the notes or report; however we acknowledge that because there are fewer individuals in a leadership position it may be possible for readers to draw a connection between leadership and the comments made by them.
- Be audio recorded if the focus group/interview is being audio recorded. Participants can request that audio recording be turned off for specific comments during the focus group/interview. Audio recordings may be professionally transcribed at the discretion of the Project Manager if transcription of a particular focus group/interview would be beneficial to the development of the needs assessment report.

- Have their comments anonymously used in the needs assessment report. The needs assessment report can be viewed by every one directly involved in developing the report, the collaboration executive leadership representative, staff at collaborating organizations as determined by the executive leadership (see note on p. 74 under Confidentiality), the Vera Institute of Justice (our technical assistance provider) and the Office on Violence Against Women (our funder). If the leadership of all collaborating organizations provides permission, the needs assessment report, a summary or portions of the report may be available on-line on the Accessing Safety website.
- Have their comments anonymously used for developing the collaboration's strategic plan and implementation activities.

## Access

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The MASS Collaboration is committed to providing fully accessible focus groups and interviews for all participants throughout the needs assessment process. To the best of our ability, accessibility will be ensured through the following:

- Focus groups and interviews will take place in a location that is accessible via public transportation.
- The building, interview or focus group room, and bathrooms will be accessible. We will most likely use space that is already commonly used by participants, so that they are already familiar with the space and assumedly have been provided with what is needed for accessibility.
- If the cost of transportation to the focus group or interview will cause financial difficulty for survivors, people with disabilities or survivors with disabilities, financial assistance will be provided in the following ways:
  - For participants using the subway or bus, a Charlie ticket (fare ticket) for one round-trip will be given to the individual as reimbursement for the trip. The ticket will be given to the participant during check-in.
  - For participants using The RIDE, a money order will be provided to reimburse the participant. This will be given to the participant during check-in.

- For participants who are unable to afford to pay upfront, the Recruiter will notify the Project Manager of this issue. The Project Manager will coordinate with the Representative of the MBTA to determine options.
- Reasonable accommodation will be provided to the participant. The RSVP form for focus groups and interviews will include a checklist of available accommodations and an option to name additional accommodations needed (See pp. A-25 to A-27 and B-16 and B-17). The Project Manager will be responsible for overseeing requested accommodations.
- All participants for focus groups will be asked not to wear perfume, scented lotions etc. for the safety and comfort of anyone with chemical sensitivities.
- Recruiters and Facilitators will be instructed to communicate in a way that is accessible to all participants and adjust their language and communication method as needed. In addition, Recruiters and Facilitators will be instructed to use people first language.
- Printed material that is distributed will be written in accessible language, formatted to be accessible to screen readers and in 16 point font.

# Confidentiality

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The MASS Collaboration is committed to protecting the confidentiality of all needs assessment participants and being upfront and transparent about the situations where we may be unable to maintain confidentiality.

## Preserving Confidentiality

The following information outlines the steps we are proactively taking to preserve confidentiality.

### RSVP Forms

- Identifying information about participants will only be collected during the RSVP process.
  - For organizational participants (leadership, staff etc) RSVP forms will include the participant's full name and contact information. This will allow the Project Manager to connect names of participants with requested accommodations. Participants will send these forms directly to the Project Manager. RSVP forms will be shredded after completion of the focus group/interview.
  - For individuals participating in the survivor, people with disability and survivor with disability groups/interviews, RSVP forms will include the participant's first name and last initial. This will allow the Project Manager to connect names of participants with requested accommodations. If



participants indicate that they would like a reminder call or would like to be contacted in case there's a change to their focus group/interview, the RSVP form will include their phone number and safe ways to contact them. RSVP forms will be shredded after completion of the focus group/interview.

- For survivors, people with disabilities and survivors with disabilities, if the participant indicates that they would be interested in hearing about the findings from people with disability, survivor and survivor with disabilities focus group/interviews, names and contact information will be shredded after the participant is provided with this opportunity. Participants may contact the Project Manager if they are no longer interested in this opportunity and the Project Manager would then shred their contact information immediately.
- The Project Manager will work with each Representative to determine a confidential manner for the Project Manager to obtain RSVP forms from each organization.
- The Project Manager will be responsible for storing RSVP forms in a secure, locked location and shredding forms upon completion of focus groups/interviews or upon completion of sharing findings with survivors, people with disabilities and survivors with disabilities. In addition, electronic copies of RSVP forms will be deleted.

- The number of participants who attend focus groups and interviews will be aggregated for the needs assessment report. No other RSVP information will be aggregated or shared in the report.

## **Focus Groups**

- Any one staffing focus groups/interviews who is not part of the Team (e.g. consultant hired as facilitator) will be asked to sign a confidentiality form.
- Participants will be informed about exceptions to confidentiality.
- Focus group participants will be asked not to share the identity of other participants in the group as well as anything shared during the focus group. Additionally, participants will be asked not to discuss what is said in the group with other participants once the group is over except in general ways (i.e. it was validating for me to hear that other people have struggled with accessing services). We will acknowledge, however, that although we are encouraging participants to keep information confidential that we can not enforce this.

## **Notes and Needs Assessment Report**

- Whoever is taking notes (Note Taker or Facilitator) will not link names or identifying information to comments made during any focus groups or interviews.

- If the Note Taker is not the Project Manager, the Note Taker will give the Project Manager the notes within a pre-determined time frame and in a confidential manner (such as in a sealed manila envelope) as determined by the Project Manager and Note Taker.
- The Project Manager will ensure that all notes, needs assessment report drafts and as applicable, transcripts and recordings are kept in a secure, locked location. All electronic notes and drafts will be kept on a secure, password protected computer.
- Notes, transcripts and recordings will be viewed only by those directly involved in note taking, transcribing, analysis, and development of the needs assessment report. This includes the Facilitator, Note Taker, Team Members, professional transcribers, and other individuals identified by the Project Manager and Team Members as being directly involved in the development of the report.
- The final needs assessment report will identify themes, trends, strengths and barriers to effective responses to disclosure and access to services. Information and comments will be linked to what specific organizations and groups as-a-whole say. No names or individual identifying information will be written in the notes or report; however we acknowledge that because there are few people in leadership position that it may be possible for

readers to draw a connection between leadership and the comments made by them.

- The report will not be shared outside of the collaboration, Vera, and OVW unless permission is granted by all Executive Leadership. The Project Manager will meet with all Executive Leadership to discuss the findings relevant to their organization prior to completing the final report.

The goal of the needs assessment report is to obtain information about specific strengths, barriers, and gaps present in and between our organizations. This document is intended to assist our collaboration in meeting our vision of accessible, safe and welcoming responses and services for survivor/victims with disabilities. In order to be able to effect change within our organizations, it is the intent that the report be transparent within all of our organizations; however we respect the various organizational structures and the political context that each organization operates in. Therefore, authority is given to the leadership of each organization to determine who within the collaborating organizations (e.g. staff within their agency, staff within a collaborating agency) will see information specific to their organization in the final report, and how and when it is disseminated. All collaboration representatives will see the full report.

- All notes, transcripts, and recordings will be destroyed after the strategic plan has been developed and approved by OVW.

## **Exceptions to Confidentiality**

The MASS Collaboration has determined that in certain situations safety concerns outweigh confidentiality. We may break confidentiality only in the following situations:

- Mandated Reporting
- If it's disclosed that an employee at one of the collaborating organizations is abusing a client, consumer or customer
- Suicidality
- Intent to Harm

The Facilitator, Note Taker, Floater, and Crisis Counselor may break confidentiality in the above situations. The following outlines the process that will be taken in the following situations:

**Mandated Reporting:** In Massachusetts there are several laws mandating that certain professionals report suspected abuse or neglect with protective services. Below are brief summaries of the laws; however, the MASS Collaboration understands that not everyone in the collaboration is a mandated reporter, that even non-mandated reporters can make reports, and that decision making about mandated reporting at the individual and organizational level is complex.

Mass. General Law Chapter 119, Section 51A mandates reporting suspected abuse or neglect of individuals under 18 to the Department of Children and Family.

Mass. General Law Chapter 119, Section 51A mandates reporting suspected abuse or neglect of individuals under 18 to the Department of Children and Family.

Mass. General Law Chapter 19A mandates reporting suspected abuse, neglect, financial exploitation and self-neglect of individuals 60 years and older to the Office of Elder Affairs.

Mass. General Law Chapter 19C mandates reporting suspected abuse or neglect of persons with disabilities between 18-59 years old, whether in state care or in a private setting and who suffer serious physical and /or emotional injury through the act and/or omission of their caregivers, to the Disabled Persons Protection Commission. For purposes of this reporting statute, a person with a disability must be wholly or partially dependent on another for assistance with daily living needs. For example, dressing, hygiene, medication administration, eating etc.

Mass General Law Chapter 111 Sections 72F and 72G mandates reporting suspected abuse or neglect of patients and residents of certain facilities, as defined by the law, to the Department of Public Health.

The following are mandated reporters from our collaboration:

- All BARCC staff and volunteers including the Representative, the Project Manager and Crisis Counselors
- All BCIL staff including the Representative
- All Transit Police staff including the Representative

The MBTA System Wide Accessibility Office and the representative of the MBTA is not a mandated reporter; however staff from THE RIDE are mandated reporters.

The consultant who is hired as a facilitator is not a mandated reporter. During individual interviews the consultant may choose to consult with the Project Manager who is a mandated reporter, however, should a situation arise where the consultant learns that the participant's immediate safety is at risk. Since this could trigger a mandated report, the consultant will inform participants of this possibility, so that participants are fully aware of all exceptions to confidentiality. Because there will be multiple staff at focus groups, there will always be a mandated reporter present at focus groups.

Prior to asking questions, Facilitators will inform participants of all exceptions to confidentiality and what could trigger confidentiality to be broken. For the needs assessment, if a participant makes a disclosure during the focus group/interview or when meeting with the Crisis Counselor that could trigger a mandated report, the participant will be informed that a report may need to be made. The Project Manager will assess the situation, determine whether a report needs to be made, work with the participant to determine the most

empowering method possible for making the report and make the report. If the Project Manager is not present at the focus group/interview, the individual who receives the disclosure will contact the Project Manager immediately. Back-up staff at BARCC will also be identified in case the Project Manager can not be reached.

The Project Manager will discuss with the participant the option of sharing the fact of the report with staff who they are working with at BARCC or BCIL, but will not disclose any information without the expressed permission from the participant.

After completion of all the focus groups/interviews, the Project Manager will share with the MASS Collaboration Team (also referred to as the Team) aggregate information about the number of reports made, if any, and any lessons learned from the process. Detailed information about the report will not be provided.

**Employee Abuse:** Prior to asking questions, Facilitators will inform participants of all exceptions to confidentiality and what could trigger confidentiality to be broken. If a participant makes a disclosure during the focus group/interview or when meeting with the Crisis Counselor that they are being abused by a specific employee at one of the collaborating organizations, the participant will be informed that a report to the organization may need to be made. The Project Manager will assess the situation, determine whether a report needs to be made, work with the participant to determine the most empowering method possible for making the report and make the report to leadership at the organization. Prior to beginning the needs



assessment, the Project Manager will obtain the appropriate leadership to notify from each Representative. If the Project Manager is not present at the focus group/interview, the individual who receives the disclosure will contact the Project Manager immediately. Back-up staff at BARCC will also be identified in case the Project Manager can not be reached.

The Project Manager will discuss with the participant the option of sharing the fact of the report with staff who they are working with at BARCC or BCIL, but will not disclose any information without the expressed permission from the participant.

After completion of all the focus groups/interviews, the Project Manager will share with the Team aggregate information about the number of reports made, if any, and lessons learned from the process. Detailed information about the report, including to which agency the report was made, will not be provided.

**Suicidality:** Prior to asking questions, Facilitators will inform participants of all exceptions to confidentiality and what could trigger confidentiality to be broken. If a participant makes a disclosure during the focus group/interview or when meeting with the crisis counselor that generates concerns about suicidality, an assessment will be made by the person receiving the disclosure. If there is imminent risk the Project Manager will assess the situation and determine whether to call 911, work with the participant to determine the most empowering method possible for calling 911 and make the call. If the Project Manager is not present at the focus group/interview, the

individual who receives the disclosure will contact the Project Manager immediately. Back-up staff at BARCC will also be identified in case the Project Manager can not be reached.

The Project Manager will discuss with the participant the option of sharing the incident with staff who they are working with at BARCC or BCIL, but will not disclose any information without the expressed permission from the participant.

After completion of all the focus groups/interviews, the Project Manager will share with the Team aggregate information about this type of intervention, if any, and lessons learned from the process. Detailed information about the intervention will not be provided.

**Homicidality:** Prior to asking questions, Facilitators will inform participants of all exceptions to confidentiality and what could trigger confidentiality to be broken. If a participant makes a disclosure during the focus group/interview or when meeting with the Crisis Counselor that generates concerns about homicidality, an assessment will be made by the person receiving the disclosure. If there is imminent risk the Project Manager will assess the situation and determine whether to call 911, work with the participant to determine the most empowering method possible for calling 911 and make the call. In addition, if the person being threatened is known by the Project Manager (e.g. staff at a collaborating organization), every effort will be made to notify the individual. If the Project Manager is not present at the focus group/interview, the individual who receives the disclosure will contact the Project Manager immediately. Back-up staff at

BARCC will also be identified in case the Project Manager can not be reached.

The Project Manager will provide the option to the participant to share the incident with staff who they are working with at BARCC or BCIL, but will not disclose any information without the expressed permission from the participant.

After completion of all the focus groups/interviews, the Project Manager will share with the Team aggregate information about this type of intervention, if any, and lessons learned from the process. Detailed information about the intervention will not be provided.

## **Minimizing Disclosures**

In order to best protect confidentiality, participants will be informed about the exceptions to confidentiality and the following measures will be taken to minimize the possibility of disclosures:

- Questions have been formulated to ask specifically about experiences with services; not sexual violence incidents or other forms of violence/abuse.
- Recruiters and Facilitators will state the goals of the needs assessment and focus on obtaining information about services, not experiences of sexual violence or other forms of violence/abuse/neglect.
- Recruiters and Facilitators will remind participants about exceptions to confidentiality.

- Participants will be reminded not to share stories about either their own or other people's experiences with violence during focus groups and interviews. If concerns are raised by the discussion, participants may speak with the crisis counselor.
- If someone begins to disclose during the focus group/interview, the Facilitator will contain the disclosure and re-direct the discussion. The participant may be supported to speak with the counselor if desired.

# Safety

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The Team has had in-depth discussions regarding how to balance participant safety with self-determination. We are committed to maximizing the safety of participants and have created a process to, as much as possible, empower participants while maintaining safety.

## During Recruitment

- Recruiters will not recruit any one who they think could be unsafe participating in the needs assessment.
- We are only recruiting people with disabilities who are their own guardians.
- Only current clients who are receiving on-going services will be recruited at BARCC.
- Recruiters will be reminded not to use victim-blaming language or language that draws on violent origins when recruiting.
- Invitees will be told that participation is optional. There will be no consequences to employment/services for anyone who chooses to participate or not participate in the needs assessment.

- Individual interviews will be offered for survivors and people with disabilities if they are uncomfortable participating in a group setting.
- For survivors, people with disabilities and survivors with disabilities, only the first name and last initial will be written on the RSVP form.
- If contact information of survivors, people with disabilities and survivors with disabilities is obtained on the RSVP form, the safest way to contact the participant will also be indicated on the RSVP form.
- The Project Manager contact card (see Appendix A page A-27) and voice mail will not include any information about the project, the organizations participating in the project and any information connecting the project to sexual violence and sexual violence against people with disabilities.
- For survivors, people with disabilities and survivors with disabilities, if an invitee would like written information about the project, they have the option of taking the Project and Needs Assessment Information Sheet. Recruiters will inform invitees about possible risks to taking the Information Sheet prior to giving it to the invitee. (see Recruitment Script pages A-3 to A-13)

- For survivors, people with disabilities and survivors with disabilities, if an invitee believes it will be a risk for them to obtain the gift card at the focus group/interview, alternative arrangements will be made.
- All RSVP forms will be shredded upon completion of focus groups/interviews.

## **During Focus Groups and Interviews**

- To the best of our ability, sites selected for focus groups and interviews will be where participants will feel safe. Mostly, sites will be selected based on where participants already have a routine so as not to bring attention to this group.
- An individual's own Personal Care Attendant (PCA) will not be permitted in the room during focus groups or interviews. However, we will make accommodations for anyone requiring the assistance of a PCA.
- Participants have the option of not wearing a name tag or putting an alternative first name on their name tag.
- Facilitators will be reminded not to use victim-blaming language or language that draws on violent origins.
- Participants will be told that can leave or discontinue at any time with no consequences.

- Participants will be told that they can choose to answer or not answer any question.
- Questions have been formulated to focus specifically on services provided and received; not about experiences of sexual violence or other forms of violence.
- Participants will be reminded not to share their own or other people's personal experiences of violence or abuse.
- Facilitators will quickly contain disclosures in a supportive but clear way and direct participants to the Crisis Counselor as needed.
- A resource list will be available to all participants.
- A Crisis Counselor will be present at focus groups/interviews for survivors of sexual violence, people with disabilities, survivors with disabilities and BCIL staff. The Crisis Counselor will be able to meet with participants in a private, accessible space.



## **Work Plan**

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The following work plan will guide our work during the three years of this grant. This schedule may be adjusted as needed.

### **October 2011**

Hire Project Manager

### **November 2011**

New Grantee Orientation

### **December 2011**

Vera Site Visit

### **January to September 2012**

Develop Collaboration Charter

### **September to June 2012**

Develop Needs Assessment Plan

### **June to November 2013**

Conduct Needs Assessment

### **November and December 2013**

Develop Needs Assessment Report

### **January and February 2013**

Develop Strategic Plan

### **March 2013 to October 2014**

Implementation



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## **A. Recruitment Material for Survivors, People with Disability, and Survivors with Disabilities**

- **Recruitment Scripts**
- **Information Sheet**
- **RSVP Form**
- **Contact Card**

## **B. Recruitment Materials for Organizations**

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**I. RIDE Vendor Question**

**J. People with Disability, Survivor, Survivor with  
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**Appendix A:**  
**Recruitment Materials**  
**For Survivors, People with**  
**Disabilities, Survivors with Disabilities**

- ❖ **Recruitment Script**
- ❖ **Recruitment E-mail for Survivor Speaker  
Bureau and Select MBTA Customers**
- ❖ **Information Sheet**
- ❖ **RSVP Form**
- ❖ **Project Manager Contact Card**



# Recruitment Script Template

For recruitment of:

- Survivor/victim
- People with disabilities
- Survivor/victims with disabilities

## Overview

Recruiters for survivors of sexual violence will be staff at BARCC who provide on-going services.

Recruiters for people with disabilities will be staff at BCIL who provide on-going services and the Representative at the MBTA. The Representative will send an e-mail to customers whom she is recruiting and may use portions of this script for follow-up phone conversations.

Recruiters for survivors with disabilities will be staff members at BARCC and BCIL who provide on-going direct services.

An e-mail template has also been developed for recruitment through BARCC's Survivor Speaker's Bureau and for specifically identified MBTA customers. The Project Manager may use portions of this script for follow-up phone conversations with interested invitees from the Survivor Speaker's Bureau.

## **Script**

[Insert agency name] is part of a collaboration working to create more accessible, safe and welcoming responses and services.

The organizations which are part of this partnership are the Boston Area Rape Crisis Center, the Boston Center for Independent Living, the MBTA, and the MBTA Transit Police. We are asking many people to contribute to our learning for this project. Can I tell you a little more about it to see if you are interested in participating? [If yes, continue]

## **Project Overview**

The MASS Collaboration came together because of a three-year federal grant from the Office on Violence Against Women. The grant provides a unique opportunity for our organizations to develop a strong partnership that will work towards improving response and services.

In order to learn how to improve response and services, we will be conducting a needs assessment. We will be talking to staff from all partner agencies and also people who identify themselves as a:

- Survivor of sexual violence,
- A person with a disability (ies)
- A survivor of sexual violence with a disability (ies)

We will write a report based on the information that we gather that will be shared with all of the agencies in our collaboration as well as Vera, our technical assistance provider, and the Office on Violence Against Women, who provides our funding. We will use the report to develop



a plan for how our organizations can work together to improve our response and services.

## **Invitation**

### For Survivors

I would like to invite you to be part of a focus group with other survivors for the needs assessment. There will be about 4 to 7 people in the group and we will be asking about your thoughts for improving response and services for survivors of sexual violence. We will only ask about your experiences as a survivor with disclosing, obtaining services and if applicable, reporting to police and using public transportation. We will not be asking you to share any specific experience of sexual violence that you or someone you know has been through. If you would like to participate, but do not want to participate as part of a group, you have the option to request an one-on-one interview.

### For People with Disabilities:

I would like to invite you to be part of a focus group with other people with disabilities for the needs assessment. There will be about 4 to 7 people in the group and we will be asking about your thoughts for improving services for people with disabilities. We will only ask about your experiences, as a person with a disability with obtaining services and using public transportation. Although you or someone you know may have experienced sexual violence we will not be asking you to share these experiences. If you would like to participate, but do not want to participate as part of a group, you have the option to request an one-on-one interview.

(Do not ask whether the invitee has experienced sexual violence, but if the invitee discloses, ask if they are interested in resources/support. Depending on the circumstances –e.g. someone who has already received support and is currently safe - you may let them know there is an option to participate in an interview to provide their perspective as a survivor with a disability.)

### For Survivors with Disabilities:

I would like to invite you to be part of an interview for the needs assessment. We will ask for your recommendations with how sexual assault services, disability services, police, and public transportation can be improved for survivors with disabilities. We will also ask about positive experiences you've had with these services. We will not be asking you to share any specific experience of sexual violence that you or someone you know has been through. If you would prefer to talk only about your experiences as a survivor or only about your experiences as a person with a disability, I can talk to you about those opportunities (These will be the focus groups described above).

### Information about the Focus Group/Interviews

Before you decide, I want to share more information about the [focus group/interview] and see if you have any questions.

- **Focus Groups:** Will last 1½ hours. It is possible that you may know someone in the group.  
**Interviews:** Will last 1 hour.

- Participating is completely up to you. There are no consequences to any services you receive whether you choose to participate or not.
- You can change your mind at any time and decide not participate. Even if you go to the [focus group/interview] you can choose to leave at any time. You do not have to complete the [interview/focus group].
- You can choose which questions you want to answer and which ones you do not want to answer.
- **Focus Groups:** There will be name tags at the focus group, but you can choose to write any name you would like or you can choose to not wear a name tag.
- You do not have to sign anything to participate. If you go to the [focus group/interview] and respond to the questions, we will assume that you are freely choosing to participate.
- What you say will be kept confidential by staff. This means that we will not connect anything you say to your name or to anything that would identify you. In our notes and in the report we would say something like “A survivor/person with disability, survivor with disability said...” or we will use a pseudonym (a made-up name).

- **Focus Group:** We will be audio-recording the focus group. The only reason we are audio-recording is to make sure that we understand what every one says accurately. The only people who will hear the recording will be people who are directly involved with putting together the report. This includes the Project Manager, the person facilitating the focus group, possibly a professional transcriber, and possibly representatives from each of the organizations. The recording will be destroyed afterwards. If you would prefer not to be audio-recorded, you can participate in an one-on-one interview.

**Interview:** We will be audio-recording the interviews. The only reason we are audio-recording is to make sure that we get what every one says accurately. The only people who will hear the recording will be people who are directly involved with putting together the report. This includes the Project Manager, the person facilitating the focus group, possibly a professional transcriber, and possibly representatives from each of the organizations. The recording will be destroyed afterwards. If you would prefer not to be audio-recorded you can let me know.

- All notes will be stored in a private, secure place and will be destroyed after we finish our strategic plan.
- As I mentioned earlier, the needs assessment report will be seen by all our partner agencies, our technical assistance

provider and our funder. If the leadership of all of our agencies give permission, it could also be on a website that has information about other projects who are also working to improve services for survivors with disabilities. After the report is complete, if you are interested, the Project Manager for the MASS Collaboration can provide an opportunity for you to hear about the input specifically from survivors, people with disabilities and survivors with disabilities.

- There are some exceptions to confidentiality.
  - Staff at the focus groups and interviews may be mandated reporters. This means they may need to make a report to a protective service agency if you tell them that someone under 18, someone 60 years and older, or someone with a disability who is at least partially reliant on care for daily activities is being abused.
  - If you tell them that you are being abused by an employee at one of our partner agencies, they may need to tell the partner agency in order to keep you and others safe.
  - If you tell them that you are suicidal or have a plan to harm someone else, they may need to call 911.
  - Staff at the focus group/interview will not ask you any questions about personal experiences with violence and you are encouraged not to share these experiences in

the focus group/interview. Our focus is on your experience with services, not on the incident itself.

- There will be a counselor at the focus group/interview. Whether or not you have personal experience with violence, we know that the discussion may bring up feelings for you. You can speak to the counselor any time during or right after the focus group/interview. The counselor will keep what you say confidential except for the exceptions that I just explained. A list of resources will also be available to all participants.
- **Focus Groups:** We will ask all participants to maintain confidentiality as well, but unfortunately can not guarantee that everyone will keep what is said confidential.
- If you have your own personal care assistant, they can bring you to the focus group, but they can't be in the room with you during the group. They can wait for you outside of the group and can be available for you at any time if you need help outside of the group. If you need a personal care assistant during the group, we will provide an alternate PCA.
- If you would like written information about this project and needs assessment we can provide you with this information; however if you are uncomfortable, unsafe or have any concerns about people who live with you or who come to your home seeing the information, we suggest that you review the

information here instead of taking it with you. (If the invitee expresses interest, give the Information Sheet to them.)

- If you feel that being in the focus group will make you feel unsafe or uncomfortable, we suggest that you don't participate.
- To thank participants, we will be giving each participant a \$25 gift card. Light refreshments will be served at focus groups.

Do you have any questions?

#### Confirming Interest to Participate

After hearing this information, would you be interested in participating?

If the invitee would like to think about it, let them know they can contact you if they decide they are interested.

If the invitee has questions that you can not answer, let them know you can get the answer from the Project Manager or have the Project Manager contact them. Obtain information about the safest way to reach them.

## RSVP

If the invitee is interested in participating review the RSVP form with them. The invitee could fill out the form or you can fill out the form. If the invitee is not interested in participating, you do not need to fill out an RSVP form. Key notes for RSVP form:

- The invitee only needs to fill out their first name and last initial. This will help to protect the invitee's privacy.
- The invitee should only check-off one of the groups that they would like to participate in. Survivors with disabilities can choose to participate from the perspective of a survivor with a disability or from the perspective of a survivor or a person with a disability.
- Invitees interested in attending the survivor with disabilities interview can skip question 2. All survivors with disabilities will be interviewed.
- If someone needs financial assistance for transportation the MASS Collaboration can reimburse for one round trip on the bus/subway or one round trip on THE RIDE. If an invitee says that they would not be able to pay upfront to attend, ask if the Project Manager can contact them with options and indicate safe ways to contact them.
- If the invitee answers yes to questions 5, 6 or 7 fill out all information regarding safe ways to contact the invitee.



- Recruiters should complete the information below the dotted line in case the Project Manager has questions.

### Conclusion

Would you like a card with the Project Manager's contact information and the date and time of your focus group/interview?

Thanks so much for your interest in participating. Remember, that participation is completely optional. You can change your mind at any time. If you do change your mind, please contact the Project Manager and let her know.



## **Recruitment E-mail**

### **For Survivor Speaker Bureau and Select MBTA Customers**

Dear...

[Insert agency name] is part of a collaboration working to create more accessible, safe and welcoming responses and services. The organizations which are part of this partnership are the Boston Area Rape Crisis Center, the Boston Center for Independent Living, the MBTA, and the MBTA Transit Police. We are asking many people to contribute to our learning for this project.

In order to learn how to improve response and services, we will be conducting a needs assessment. For the needs assessment we will be talking to staff from each partner agency and to people who identify themselves as one of the following:

- Survivor/victim of sexual violence,
- A person with a disability (ies)
- A survivor/victim of sexual violence with a disability (ies)

We will write a report based on the information that we gather that will be shared with all of the agencies in our collaboration as well as Vera, our technical assistance provider, and the Office on Violence Against Women, who provides our funding. We will use the report to develop a plan for how our organizations can work together to improve our response and services.

For MBTA Customer:

We are writing to invite you to participate in a focus group with other people with disabilities for the needs assessment. There will be about 4 to 7 people in the group and we will be asking about your thoughts for improving services for people with disabilities. We will ask about your experiences, as a person with a disability, with obtaining services. We will also be asking about your opinions regarding how public transportation can be safer for customers with disabilities. Although you or someone you know may have experienced sexual violence we will not be asking you to share these experiences. If you would like to participate, but do not want to participate as part of a group, you have the option to request an one-on-one interview.

For Survivor Speaker Bureau:

I would like to invite you to participate either by sharing your perspective as a survivor or as a survivor with a disability.

If you are participating as a survivor you will participate in a focus group with about 4 to 7 survivors. We will be asking about your thoughts for improving response and services for survivors of sexual violence. We will only ask about your experiences as a survivor with disclosing, obtaining services and if applicable, reporting to police and using public transportation. We will not be asking you to share any specific experience of sexual violence that you or someone you know has been through. If you would like to participate, but do not want to participate as part of a group, you have the option to request an one-on-one interview.

If you choose to participate as a survivor with a disability you will participate in an one-on-one interview. We will ask about positive experiences you've had as a survivor with a disability with sexual assault services, disability services, police, and taking public transportation. We will also ask for your recommendations about how these services can be improved for survivors with disabilities. We will not be asking you to share any specific experience of sexual violence that you or someone you know has been through.

### For All

To thank you for participating you will receive a \$25 gift card to [insert store]. We will also provide light refreshments at focus groups.

Attached is a Project and Needs Assessment Information Sheet that will give you more detailed information. If you have any questions, feel free to contact [insert contact person and contact information].

If you are interested in participating, please fill out the attached RSVP form. You may e-mail or fax the completed form to the MASS Collaboration Project Manager, Shelley Yen-Ewert at:

E-mail: [syenewert@barcc.org](mailto:syenewert@barcc.org)

Fax: 617-492-3291

Your input will be valuable to improving response and services for survivors with disabilities. Thank you for considering being a part of this needs assessment.

Sincerely,

[Insert Name]

**MASS Collaboration  
Informational Fact Sheet  
(For Survivors, People with Disabilities, Survivors with  
Disabilities)**

**What is the MASS Collaboration?**

The MASS Collaboration is a collaboration between:

- Boston Area Rape Crisis Center (BARCC)
- Boston Center for Independent Living (BCIL)
- Massachusetts Bay Transportation Authority (MBTA)
- MBTA Transit Police

In 2011, our collaboration received a three year federal grant through the Office on Violence Against Women. The goal of our collaboration is to build on existing strengths at each of the partner organizations in order to improve response and services.

**Who has been working on this project?**

Our collaboration is made up of a core team of representatives from each organization who have been meeting weekly for over a year.

**What is the purpose of the needs assessment?**

The MASS Collaboration will be conducting a needs assessment to better understand the specific strengths and gaps to safe and accessible responses and services within and between our collaborating organizations.

## **Who will be involved in the needs assessment?**

- Survivor/victims of sexual violence
- People with disabilities
- Survivor/victims with disabilities
- Leadership, supervisors, staff and when applicable, volunteers at each collaborating organization.

## **How much time will this involve?**

In most cases, focus groups will be 1 ½ hours long and interviews will be 1 hour.

## **What are the expectations of my involvement?**

Participating is completely up to you. There are no consequences to [services/employment] whether you choose to participate or not. You can change your mind at any time even during the focus group/interview. You can also choose which questions you want to answer and which ones you don't want to answer.

## **How is this information going to be used?**

We will write a report based on the information that we gather. We will use the report to develop a plan for how our organizations can work together to improve our response and services.

## **Who will see the report?**

The report will be seen by all our partner agencies, Vera, our technical assistance provider and the Office on Violence Against Women, our funder. If the leadership of all partner agencies give their permission, it could also be included on a website that has information



about other projects who are also working to develop safe, accessible, and welcoming services.

### **Will my name be on the report?**

No. Everything you say will be kept confidential by staff. This means that we will not connect anything you say to your name or to anything that would identify you. In our notes and in the report we would say something like “A [insert group] said...” or we will use a made-up name.

### **Will everything I share be confidential?**

Everything you say will be kept confidential by staff except for in the following situations:

- Staff at the focus groups and interviews may be mandated reporters. This means that we may need to make a report to a protective service agency if you share that someone under 18, someone 60 years and older or someone with a disability who is at least partially reliant on care for daily activities is being abused.
- If you tell us that you are being abused by an employee at one of our partner agencies, we may need to tell the partner agency.
- If you tell us that you are suicidal or have a plan to harm someone else, we may need to call 911.

We also ask that all participants keep each other's identity and what other participant's share confidential; however we can not guarantee this.

**For more information contact:**

[Insert organization representative name and contact information]

or

Shelley Yen-Ewert, Project Manager

[syewart@barcc.org](mailto:syewart@barcc.org)

617-649-1287

# MASS Collaboration Needs Assessment RSVP Form (Survivor/Person with Disability/Survivor with Disability)

First Name \_\_\_\_\_ Last Initial \_\_\_\_\_

## 1. Group participating in (check one):

- Survivor
- Person with disability
- Survivor with disability

## 2. For Survivor and Person with Disabilities Groups only

### Select group (check one):

- [Options for times dates and locations inserted here]
- I would prefer an individual interview. If you select this please indicate general availability: \_\_\_\_\_

3. If you need financial assistance for transportation to focus groups/interviews, the MASS Collaboration can reimburse one roundtrip ticket on the bus/subway or RIDE. **If you need financial assistance, please check off the type of transportation you will be taking:**

- Bus/subway
- RIDE

**4. Check off any accommodations you need:**

- ASL interpreter
- Other language interpretation  
Which language? \_\_\_\_\_
- Assistive listening devices
- CART service
- Wheelchair accessible space
- Handouts in alternate formats
  - Large Print
  - Braille
  - Other \_\_\_\_\_
- Alternate PCA\*
- Food Allergies \_\_\_\_\_
- Other \_\_\_\_\_

\*Your PCA can bring you to the focus group, but can't be in the room. They can wait for you outside of the group and can be available for you if you need help outside of the group. If you need a PCA during the group, we will provide an alternate PCA.

5. **Would you like a reminder call?**  Yes  No

6. **Would you like to be contacted if there are changes to the focus group/interview?**  Yes  No

7. **Are you interested in hearing about the findings from the people with disability, survivor and survivor with disabilities focus group/interviews?**  Yes  No

**8. If you would like to be contacted, please provide the following information:**

**Phone Number:** \_\_\_\_\_

**Good times to call:** \_\_\_\_\_

**Is it safe for us to leave a voicemail?**  Yes  No

Do you have specific instructions for us regarding leaving a voicemail? \_\_\_\_\_

**Does anyone else ever answer the phone at this number?**

Yes  No

If so, may we leave a message with another person?  Yes  No

If yes, with whom? \_\_\_\_\_

Do you have specific instructions for us regarding leaving a message? \_\_\_\_\_

**Do you have call block?**  Yes  No

Our number will always appear as “private” or “unknown”. Would you prefer that we unblock our number?  Yes  No

If we unblock our phone, “Boston Area Rape Crisis Center” will appear on caller ID. Do you have concerns about this?

Yes  No

=====

Name of Recruiter: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number of Recruiter: \_\_\_\_\_



## **Template for Project Manager Contact Card**

To be used when recruiting survivors, people with disabilities, and survivors with disabilities.

### **Meeting Reminder**

**Date:**

**Time:**

For any changes or cancellations contact:  
Shelley at 617-649-1287





# **Appendix B: Recruitment Materials For Organizations**

- ❖ **Recruitment E-mail**
- ❖ **Recruitment Script MBTA and RIDE**
- ❖ **Information Sheet**
- ❖ **RSVP Form**



# **Recruitment E-mail**

## **For Organization Leadership, Supervisor and Staff**

Dear...

[Insert agency name] is part of a collaboration working to create more accessible, safe and welcoming responses and services for survivor/victims of sexual violence with disabilities. The organizations which are part of this partnership are the Boston Area Rape Crisis Center, the Boston Center for Independent Living, the MBTA, and the MBTA Transit Police.

In order to learn how each of our organizations can improve response and services, we will be conducting a needs assessment. For the needs assessment we will be talking to leadership and staff from each partner agency and to survivor/victims of sexual violence, persons with disabilities, and survivor/victims with disabilities.

### For Leadership

We are writing to invite you to participate in an interview. We will be asking you to share your perspectives about strengths and gaps in your agency's structures (e.g. trainings, policies, procedures, resources) for creating safe, accessible environments and responding to/serving survivor/victims with disabilities. We would also like to learn from you how change happens at your agency.

### For Supervisors

We are writing to invite you to participate in a focus group with other [insert staff position] from [insert agency]. The leadership from all of the partner agencies recognizes that there are both strengths and gaps at their agencies regarding responding to and providing services to survivor/victims with disabilities. Your input will help the collaboration determine how to improve services within our organizations. We will be asking you to speak about your experiences supervising frontline staff with responding/providing services to survivor/victims with disabilities and your thoughts about how [insert agency] can assist you with assisting frontline staff.

### For Staff

We are writing to invite you to participate in a focus group with other [insert staff position] from [insert agency]. The leadership from all of the partner agencies recognizes that there are both strengths and gaps at their agencies regarding responding to and providing services to survivor/victims with disabilities. Your input will help the collaboration determine how to improve services within our organizations. We will be asking you to speak about your experiences responding/providing services to survivor/victims with disabilities and your thoughts about how [insert agency] can assist you with responding/providing services to survivor/victims with disabilities.

### For Transit Police Officers

(in addition to invitation to focus group)

To ensure that as many of you as possible have the opportunity to provide input, we are asking you to complete a brief survey about

your experiences and opinions related to responding to reports of sexual violence from victims with disabilities. This survey will take approximately 10 to 15 minutes of your time and is anonymous. Please click the following link to access the survey: [insert link to survey monkey]. If you have any difficulty accessing the survey, please contact the Project Manager (see contact information below).

### For All

We will write a report based on the information that we gather. This information will be shared with leadership and representatives from all of the agencies in our collaboration as well as Vera, our technical assistance provider, and the Office on Violence Against Women, who provides our funding. We will use the report to develop a plan for how our organizations can work together to improve the way we respond and serve victims/survivors of sexual assault with disabilities.

Attached is a Project and Needs Assessment Information Sheet that will give you more detailed information. If you have questions, feel free to contact your agency representative, [insert name] or the Project Manager.

If you are interested in participating, please fill out the attached RSVP form. You may e-mail or fax the completed form to the MASS Collaboration Project Manager, Shelley Yen-Ewert at: E-mail: [syewart@barcc.org](mailto:syewart@barcc.org) Fax: 617-492-3291

Your input will be valuable to improving response and services for victims/survivors with disabilities. Thank you for considering being a part of this needs assessment.

Sincerely,

[Insert Name]

# Recruitment Script Template

For recruitment of:

- MBTA Staff
- RIDE (Vendor) Staff

## Overview

Recruiters will be leadership/supervisors at the MBTA and at each Vendor company.

## Script

[Insert agency name] is part of a collaboration working to create more accessible, safe and welcoming responses and services for survivor/victims of sexual violence with disabilities. The organizations which are part of this partnership are the Boston Area Rape Crisis Center, the Boston Center for Independent Living, the MBTA, and the MBTA Transit Police. We are asking many people to contribute to our learning for this project. Can I tell you a little more about it to see if you are interested in participating? [If yes, continue]

## Project Overview

The MASS Collaboration came together because of a three-year federal grant from the Office on Violence Against Women. The grant provides a unique opportunity for our organizations to develop a strong partnership that will work towards improving response and services for people with disabilities who've been sexually assaulted.

In order to learn how to improve response and services, we will be conducting a needs assessment. We will be talking to staff from all partner agencies and also people who identify themselves as a:

- Victim of sexual violence
- A person with a disability (ies)
- A victim of sexual violence with a disability (ies)

We will write a report based on the information that we gather that will be shared with the leadership and representatives in our collaboration as well as Vera, our technical assistance provider, and the Office on Violence Against Women, who provides our funding. We will use the report to develop a plan for how our organizations can work together to improve the way we respond and serve victims of sexual assault with disabilities.

## **Invitation**

I would like to invite you to be part of a focus group with other [insert position] for the needs assessment. There will be about 4 to 10 people in the group and we will be asking about your experiences responding to victims with disabilities and thoughts about how [the MBTA/RIDE] can help [insert position] with responding to victims with disabilities.

## Information about the Focus Group

(Give invitee Information Sheet)

Before you decide, I want to share more information about the focus group and see if you have any questions.

- **Focus Groups:** Will last [1 or 1½ hours].



- Participating is completely up to you. There are no consequences whether you choose to participate or not.
- You can change your mind at any time and decide not to participate. Even if you go to the focus group you can choose to leave at any time. You do not have to complete the focus group.
- You can choose which questions you want to answer and which ones you do not want to answer.
- You do not have to sign anything to participate. If you go to the [focus group/interview] and respond to the questions, they will assume that you are freely choosing to participate.
- What you say will be kept confidential by project staff. This means that they will not connect anything you say to your name or to anything that would identify you. In our notes and in the report they would say something like “Staff from [MBTA/RIDE] said...” or we will use a pseudonym (a made-up name).
- The focus groups will be audio-recorded to make sure project staff get what every one says accurately. The only people who will hear the recording will be people who are directly involved with putting together the report. This includes the Project Manager, the person facilitating the focus group, possibly a professional transcriber, and

possibly representatives from each of the organizations.  
The recording will be destroyed afterwards.

- All notes will be stored in a private, secure place and will be destroyed after we finish our strategic plan.
- As I mentioned earlier, the needs assessment report will be seen by all our partner agencies, our technical assistance provider and our funder. If the leadership of all of our agencies give permission, it could also be on a website that has information about other projects who are also working to improve services for survivors with disabilities.
- We will ask all participants to maintain confidentiality as well, but unfortunately can not guarantee that everyone will keep what is said confidential.

Do you have any questions?

### Confirming Interest to Participate

After hearing this information, would you be interested in participating?

If the invitee would like to think about it, let them know they can contact you if they decide they are interested.

If the invitee has questions that you can not answer, let them know you can get the answer from the Project Manager or have the Project Manager contact them.

## RSVP

If the invitee is interested in participating review the RSVP form with them. The invitee could fill out the form or you can fill out the form. If the invitee is not interested in participating, you do not need to fill out a RSVP form. Key notes for RSVP form:

- If there are options for focus group times, invitees should check-off only one option.
- The invitee should check-off whether as a [MBTA/RIDE] employee they have responded to victims of sexual violence, victims of any crime with a disability and/or victims of sexual violence with a disability. They can check-off as many as apply.

## Conclusion

Would you like a card with the Project Manager's contact information and the date and time of your focus group?

Thanks so much for your interest in participating. Remember, that participation is completely optional. You can change your mind at any time. If you do change your mind, please contact the Project Manager and let her know.



## **MASS Collaboration Informational Fact Sheet (For Organizations)**

### **What is the MASS Collaboration?**

The MASS Collaboration is a collaboration between:

- Boston Area Rape Crisis Center (BARCC)
- Boston Center for Independent Living (BCIL)
- Massachusetts Bay Transportation Authority (MBTA)
- MBTA Transit Police

In 2011, our collaboration received a three year federal grant through the Office on Violence Against Women. The goal of our collaboration is to build on existing strengths at each of the partner organizations in order to improve response and services for survivors/victims with disabilities.

### **Why are all of these organizations committed to this project?**

Research has shown that the rate of sexual violence against people with disabilities is very high. Both national and Massachusetts state data show that people with disabilities experience sexual violence at more than twice the rate compared to people without disabilities. (National Crime Victimization Survey, 2007 and Massachusetts Behavior Risk Factor Surveillance System, 2010).

We recognize that survivor/victims with disabilities experience barriers to response and services at all collaborating organizations. Each of us is committed to addressing these gaps in order to create safe,

accessible, and welcoming responses to disclosures and services for survivor/victims with disabilities.

### **Who has been working on this project?**

Our collaboration is made up of a core team of representatives from each organization who have been meeting weekly for over a year.

### **What is the purpose of the needs assessment?**

The MASS Collaboration will be conducting a needs assessment to better understand the specific strengths and gaps to safe and accessible responses and services for survivors/victims with disabilities within and between our collaborating organizations.

### **Who will be involved in the needs assessment?**

- Survivor/victims of sexual violence
- People with disabilities
- Survivor/victims with disabilities
- Leadership, supervisors, staff and when applicable, volunteers at each collaborating organization.

### **How much time will this involve?**

In most cases, focus groups will be 1 ½ hours long and interviews will be 1 hour.

### **What are the expectations of my involvement?**

#### *Staff*

Participating is completely up to you. There are no consequences to [services/employment] whether you choose to participate or not. You

can change your mind at any time even during the focus group/interview. You can also choose which questions you want to answer and which ones you don't want to answer.

### **How is this information going to be used?**

We will write a report based on the information that we gather. We will use the report to develop a plan for how our organizations can work together to improve the way we respond and serve survivor/victims of sexual assault with disabilities.

### **Who will see the report?**

The report will be seen by all our partner agencies, Vera, our technical assistance provider and the Office on Violence Against Women, our funder. If the leadership of all partner agencies give their permission, it could also be included on a website that has information about other projects who are also working to improve services for survivor/victims with disabilities.

### **Will my name be on the report?**

No. Everything you say will be kept confidential by staff. This means that we will not connect anything you say to your name or to anything that would identify you. In our notes and in the report we would say something like "A [insert group] said..." or we will use a made-up name.

**For more information contact:**

[Insert organization representative name and contact information]

or

Shelley Yen-Ewert, Project Manager

[syewart@barcc.org](mailto:syewart@barcc.org)

617-649-1287



# MASS Collaboration Needs Assessment RSVP Form (Staff)

Agency (circle) BARCC BCIL MBTA Transit Police

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

## 1. Check off the focus group that you would like to participate in:

- [Options for times dates and locations inserted here]
- I would prefer an individual interview

## 2. Check if you have ever:

[The following will be tailored to each organization]

- Responded to or provided services to survivor/victims of sexual violence.
- Responded to or provided services to people with disabilities who have experienced violence/abuse/crime.
- Responded to or provided services to people with disabilities who have experienced sexual violence.

### 3. Check off any accommodations you need:

ASL interpreter

Other language interpretation

Which language? \_\_\_\_\_

Assistive listening devices

CART service

Wheelchair accessible space

Handouts in alternate formats

Large Print

Braille

Other \_\_\_\_\_

Alternate PCA

Other \_\_\_\_\_

\*Your PCA can bring you to the focus group, but can't be in the room. They can wait for you outside of the group and can be available for you if you need help outside of the group. If you need a PCA during the group, we will provide an alternate PCA.

# **Appendix C:**

## **Facilitator Materials**

### **❖ Facilitator Scripts**

- Survivors of Sexual Violence and People with Disability Focus Group**
- Survivors with Disabilities Interview**
- Leadership (Organization Interview)**
- Staff and Volunteer(Organization Focus Group)**

### **❖ Resource List**

### **❖ Debriefing Template**



# Facilitator Script for Survivors of Sexual Assault and People with Disabilities Focus Group

## Introduction

- Welcome participants.
- Thank you for participating in this focus group for [insert group].;
- Introduce self and role facilitating conversation.
- Facilitator covers basic housekeeping (e.g. location of bathrooms, temperature of room etc).

## Overview

I'd like to start by reviewing who we are and why we're here today. The Boston Area Rape Crisis Center, Boston Center for Independent Living, MBTA and MBTA Transit Police are working together to improve how we respond to and serve survivors of sexual assault with disabilities.

In order to know how to do this we are talking to survivors of sexual assault, people with disabilities, survivors with disabilities, and the leadership and staff of all of the organizations I mentioned. Your input will help us make our services safer, more welcoming and more accessible to survivors with disabilities.

For Survivors: The focus of our conversation will be to learn from you the best ways to respond to disclosures of sexual assault and how to make services (whether that's social services, law enforcement or transportation services) more comfortable and safe for survivors. We will be talking to you about what has been helpful and what can be

improved in these areas. We will not be discussing your or anyone else's experience with sexual assault or any other form of violence/abuse during the focus group. Please do not share yours or any one else's experiences with violence/abuse during the focus group.

For People with Disabilities: The focus of our conversation will be to learn from you how to make services accessible and welcoming to people with disabilities. We will be talking to you about what has been helpful and what can be improved in these areas. Given the statistics of sexual assault in the US we know that there may be people here who have experienced sexual assault or know someone who has. We will not be discussing your or anyone else's experience with sexual assault or any other form of violence/abuse during the focus group. Please do not share yours or any one else's experiences with violence/abuse during the focus group.

## **Introduction of Other Staff in Focus Group**

### Note Taker

This is [insert name]. [Insert name] will be taking notes about what is said during the group discussion. [Insert name] will not write down any names or identifying information in the notes. The notes from all the groups will be used to write a report that will be used to help our organizations develop a plan for improving services. This report will be seen by people within our organizations, our technical assistance provider who will assist us with writing the report, and our funder. If the leadership of our organizations give permission, it may also be

posted on a website that includes information about our project and other projects like ours. Again, your names will not be mentioned in the report or any other written material. Instead, we might write something like “[Survivors/People with disabilities] said ...” Even if we quote something you say, we will not include your name.

We will also be audio recording the discussion. This will ensure that we write down what you say accurately. Only people directly involved in writing the report will hear the audio recording. If you have something specific to say that you do not want recorded please let us know and we can turn the audio recorder off for that moment.

### Counselor

This is [insert name]. [Insert name] is a crisis counselor from the Boston Area Rape Crisis Center. Even though we are not talking about any incidents of sexual violence, talking about how responsive or unresponsive services are can bring up feelings. The counselor is here for any of you who would like to talk during or after the group today. [Insert name] will be sitting in [insert location]. Please feel free to leave the discussion to speak with her or take a break to take care of yourself if you need it. We will also have a list of local resources available for you.

### Floater (if there is one)

This is [insert name]. [Insert name] will be helping out in different ways during our discussion. Don't hesitate to ask [insert name] if you need any assistance like adjusting the temperature in the room, showing you where the counselor is etc.

## **Confidentiality**

Everything that is said in this room will be kept confidential meaning that we will not talk about the names of the people who are here or connect anything you say to your name.

We also ask that all of you keep the identity of every one present and everything that is said here confidential. We want everyone to feel free to share their ideas and comments. We acknowledge that although we are asking all of you to keep everything confidential, that we are not able to enforce this, so please keep this in mind when sharing.

If you talk to the counselor she will not tell any one else, including [name of note taker] and myself what you talked about.

There are a couple of exceptions though. In order to keep you and others safe, we may have to break confidentiality and tell someone else if you tell us that you are being abused by a caregiver that you are at least partially reliant on for daily activities because of your disability or that you are being abused by someone working at one of our organizations or that you are suicidal or plan to hurt someone else. We may also have to break confidentiality if we learn that someone under 18 or 60 years and older is being neglected or abused by a caregiver. We will talk to you first before talking to others.

## **Consent**

If at any time you don't wish to continue, you may leave the discussion. There are no consequences to choosing not to participate.



You will be able to keep your gift card regardless of whether you finish the discussion. We will assume that if you are staying that you are freely agreeing to participate.

## **Questions**

I'll be asking you some questions which will help guide the conversation. Again, there are no right or wrong answers.

I won't be calling on people, and you may choose to answer or not answer any particular question. I'll be sure to pause in between each question to make sure that anyone who wants to speak has a chance.

I ask that you respect what each person has to say even though you might not agree with it. I also ask that you allow a person to finish speaking before you speak and take turns, keeping in mind the amount of time you speak, so that everyone who would like to speak gets the opportunity.

Does anyone have any questions before we begin?

## **Concluding Statement**

Thank you so much for your time today and for answering these questions. Your responses will help us improve response and services to survivors with disabilities. If you would like any additional information, please ask one of us before you leave today and we will be glad to help.



# **Facilitator Script for Survivors of Sexual Assault with Disabilities Interview**

## **Introduction**

- Thank participant.
- Introduce self and role facilitating conversation.
- Facilitator covers basic housekeeping (e.g. location of bathrooms, temperature of room etc).

## **Overview**

I'd like to start by reviewing who we are and why we're here today. The Boston Area Rape Crisis Center, Boston Center for Independent Living, MBTA and MBTA Transit Police are working together to improve how we respond to and serve survivors of sexual assault with disabilities.

In order to know how to do this we are talking to survivors of sexual assault, people with disabilities, survivors with disabilities, and the leadership and staff of all of the organizations I mentioned. Your input will help us make our services safer, more welcoming and more accessible to survivors with disabilities.

The focus of our conversation will be to learn from you the best ways to respond to disclosures of sexual assault and how to make services more accessible, welcoming, and safe for survivors with disabilities. We will be talking to you about any positive experiences you've had with sexual assault services, disability services, police, and public transportation. In addition, we'd like to hear your recommendations for

how these services can be improved. We will not be discussing your or anyone else's experience with sexual assault or any other form of violence/abuse during the interview. If you would like support you may speak with a crisis counselor during or after the interview.

## **Notes**

I will be taking notes about what is said during our conversation. I will not write down any names or identifying information in the notes. The notes from all the interviews will be used to write a report that will be used to help our organizations develop a plan for improving services. This report will be seen by people within our organizations, our technical assistance provider who will assist us with writing the report, and our funder. If the leadership of our organizations give permission, it may also be posted on a website that includes information about our project and other project's like ours. Again, your names will not be mentioned in the report or any other written material.

(If the interview is being audio recorded)

I will also be audio recording our conversation. This will ensure that I write down what you say accurately. Only people directly involved in writing the report will hear the audio recording. If you have something specific to say that you do not want audio recorded please let me know and I can turn the audio recorder off for that moment.

## **Crisis Counselor**

We have a crisis counselor available who can meet with you during or after the interview if you would like support. Even though we are not talking about any incidents of sexual violence and are focusing on

positive experiences you've had with services, talking about your experience with disclosures and services may bring up feelings. Please let me know at any time if you'd like to talk to the counselor or take a break. We also have a list of local resources available for you.

### **Confidentiality**

Everything that you say will be kept confidential meaning that I will not connect anything you say to your name.

### **Consent**

If at any time you don't wish to continue, please let me know. There are no consequences to choosing not to participate. You will be able to keep your gift card regardless of whether you finish our interview. You can also choose to not answer specific questions. I am assuming that if you continue with the interview that you are freely agreeing to participate.

Do you have any questions before we begin?

### **Concluding Statement**

Thank you so much for your time today and for answering these questions. Your responses will help us improve response and services to survivor/victims with disabilities. If you would like any additional information, please let me know.



# Facilitator Script for Leadership (or organizational interviews)

## Introduction

- Thank participants.
- Introduce self and role facilitating conversation.

## Overview

I'd like to start by reviewing who we are and why we're here today. The Boston Area Rape Crisis Center, Boston Center for Independent Living, MBTA and MBTA Transit Police have received a federal grant through the Office on Violence Against Women to work together to improve how we respond to and serve survivor/victims of sexual assault with disabilities.

In order to know how to do this we are talking to survivors/victims of sexual assault, people with disabilities, survivors/victims with disabilities, and the leadership, staff and when applicable, volunteers, of all of the organizations I mentioned. Your input will help us make our services safer, more responsive and more accessible to survivors/victims with disabilities.

We are working on this project together because we know that all of our agencies have both strengths and gaps when it comes to responding to and providing services to survivor/victims with disabilities. In order to meet this goal, it is important for us to hear from you about what works well and what needs to improve at [agency name].

## **Notes**

I will be taking notes about what is said during our conversation. I will not write down any names in the notes. The notes from all the interviews and focus groups will be used to write a report that will be used to help our organizations develop a plan for improving services. We will meet with [you or the identified Executive leadership for this project] to discuss the findings for your organization before releasing the report. This report will be seen by people within our organizations, our technical assistance provider who will assist us with writing the report, and our funder, the Office on Violence Against Women. If the leadership of all organizations give permission, the report may also be posted on a website that includes information about our project and other project's like ours. Do you have any questions or concerns about this?

I will also be audio recording our conversation. This will help me write down what you say accurately. Only people directly involved in writing the report will hear the recording. If you have something specific to say that you do not want audio recorded please let me know and I can turn the tape recorder off for that moment.

## **Confidentiality**

Everything that is said in this room will be kept confidential meaning that we will not connect anything you say to your name; however we acknowledge that because there are few people in your position it may be possible for readers to draw a connection between you and your comments.



## **Consent**

If at any time you don't wish to continue, please let me know. I am assuming that if you continue with the interview you are freely agreeing to participate.

Please remember that there are no right or wrong answers to any of the questions I ask you.

Do you have any questions before we begin?

## **Concluding Statement**

Thank you so much for your time today and for answering these questions. Your responses will help us improve response and services to survivor/victims with disabilities. If you would like any additional information, please let me know.



# **Facilitator Script for Staff and Volunteers (or organizational focus groups)**

## **Introduction**

- Welcome participants.
- Thank you for participating in this focus group for [insert group]
- Introduce self and role facilitating conversation.
- Facilitator covers basic housekeeping (e.g. temperature of room etc)

## **Overview**

I'd like to start by reviewing who we are and why we're here today. The Boston Area Rape Crisis Center, Boston Center for Independent Living, MBTA and MBTA Transit Police are working together to improve how we respond to and serve survivor/victims of sexual assault with disabilities.

In order to know how to do this we are talking to survivors/victims of sexual assault, people with disabilities, survivors/victims with disabilities, and the leadership, staff and when applicable, volunteers, of all of the organizations I mentioned. Your input will help us make our services safer, more responsive and more accessible to survivors/victims with disabilities.

We are working on this project together because we know that all of our agencies have both strengths and gaps when it comes to responding to and providing services to survivor/victims with disabilities. When writing the proposal for this grant, the leadership of

all organizations involved acknowledged a desire to improve our services for survivors/victims with disabilities. In order to meet this goal, it is important for us to hear from you about what works well and what needs to improve at [agency name]. There is no right or wrong answer to any of the questions. We want to learn about your experience and perspectives.

For all organizations except BCIL

(For BCIL, see Counselor below)

At any time if you need a break please feel free to take one.

## **Introduction of Other Staff in Focus Group**

### Note Taker

This is [insert name]. [Insert name] will be taking notes about what is said during the group discussion. [Insert name] will not write down any names or identifying information in the notes. The notes from all the groups will be used to write a report that will be used to help our organizations develop a plan for improving services. This report will be seen by people within our organizations, our technical assistance provider who will assist us with writing the report, and our funder. If the leadership of our organizations give permission, it may also be posted on a website that includes information about our project and other project's like ours. Again, your names will not be mentioned in the report or any other written material. Instead, we might write something like "[Agency] staff said ..." Even if we quote something you say, we will not include your name.

We will also be audio recording the discussion. This will ensure that we write down what you say accurately. Only people directly involved in writing the report will hear the recording. If you have something specific to say that you do not want audio recorded please let us know and we can turn the tape recorder off for that moment.

### Floater (if applicable)

This is [insert name]. [Insert name] will be helping out in different ways during our discussion. Don't hesitate to ask [insert name] if you need any assistance like adjusting the temperature in the room, etc.

### Counselor (for BCIL)

This is [insert name]. [Insert name] is a crisis counselor from the Boston Area Rape Crisis Center. Even though we will be talking specifically about our organizations, we know that these discussions can bring up feelings. As a result, the counselor is here for any of you who would like to talk before, during, or after the group today. [Insert name] will be in [location]. Please feel free to leave the discussion to speak with her or take a break to take care of yourself if you need it. We will also have a list of local resources available for you.

### **Confidentiality**

Everything that is said in this room will be kept confidential meaning that we will not share who is participating or connect anything you say to your name.

We also ask that all of you keep the identity of everyone present and everything that is said here confidential. We want everyone to feel

free to share their ideas and comments. We acknowledge that although we are asking all of you to keep everything confidential, that we are not able to enforce this, so please keep this in mind when sharing.

For BCIL If you talk to the counselor she will not tell any one else, including [name of note taker] and myself what you talked about. There are a couple of exceptions though. We will have to break confidentiality and tell someone if you tell us that you are being abused by a caregiver that you are at least partially reliant on for daily activities because of your disability or that you are being abused by someone working at one of our organizations or that you are suicidal or plan to hurt someone else. We may also have to break confidentiality if we learn that someone under 18 or 60 years and older is being neglected or abused by a caregiver. We will talk to you first before talking to others.

## **Consent**

If at any time you don't wish to continue, you may leave. There are no consequences to choosing not to participate. We will assume that if you are staying that you are freely agreeing to participate.

## **Questions**

I'll be asking you some questions which will help guide the conversation. Again, there are no right or wrong answers. I won't be calling on people, and you may choose to answer or not answer any particular question. I'll be sure to pause in between each question to make sure that anyone who wants to speak has a chance.

I ask that you respect what each person has to say even though you might not agree with it. I also ask that you allow a person to finish speaking before you speak and take turns, keeping in mind the amount of time you speak, so that everyone who would like to speak gets the opportunity.

Does anyone have any questions before we begin?

### **Concluding Statement**

Thank you so much for your time today and for answering these questions. Your responses will help us improve response and services to survivor/victims with disabilities. If you would like any additional information, please ask one of us before you leave today and we will be glad to help.





# Resources

## **Boston Area Rape Crisis Center**

Provides free and confidential services for survivors of all forms of sexual assault and their family and friends.

[www.barcc.org](http://www.barcc.org)

24 hour hotline: 800-841-8371

TTY: (9am to 5pm) 617-492-6434

## **Boston Center for Independent Living**

Provides information, referrals and a range of services to promote independence for people with disabilities.

[www.bostoncil.org](http://www.bostoncil.org)

617-338-6665

Toll Free: 866-338-8085

TTY: 617-338-6662

## **Disabled Persons Protection Commission**

Receives, screens and investigates cases of suspected abuse or neglect of a person with a disability.

<http://www.mass.gov/dppc/>

617-727-6465

V/TTY: 888-822-0350

## **FINEX House Shelter for Battered Women**

Domestic violence shelter for women and their children with expertise in serving women with disabilities.

<http://finexhouse.org/>

24 hr hotline (V/TTY): 617-288-1054

## **Greater Boston Legal Services**

Provides free non-criminal legal assistance to people who are income eligible.

<http://www.gbls.org/>

617-371-1234

Toll Free: 800-323-3205

TDD: 617-371-1228

## **Massachusetts Bay Transit Authority**

For assistance with obtaining accessible transportation options.

[www.mbta.com](http://www.mbta.com)

617-222-3200

Toll Free: 1-800-392-6100

TTY: 617-222-5146

## **Massachusetts Office on Disability**

Provides information and advocacy for people with disabilities.

<http://www.mass.gov/anf/employment-equal-access-disability/oversight-agencies/mod/>

All numbers V/TTY:

617- 727-7440

Toll Free: 800-322-2020

## **Safelink**

Statewide 24 hour domestic violence hotline.

[http://www.casamyrna.org/index.php?option=com\\_content&view=article&id=29&Itemid=45](http://www.casamyrna.org/index.php?option=com_content&view=article&id=29&Itemid=45)

24 hour hotline: 877-785-2020

TTY: 877-521-2601

## **Transit Police Department**

<http://www.mbta.com/transitpolice/>

617-222-1212

TTY: 617-222-1200



## Focus Group and Interview Debriefing Template

**Organization** (for organization specific focus group/interviews only): \_\_\_\_\_

**Group:**

- Survivor
- People with Disability
- Survivor with Disability
- Staff (if applicable, specify group) \_\_\_\_\_
- Supervisors (if applicable, specify group) \_\_\_\_\_
- Leadership (if applicable, specify) \_\_\_\_\_

**Date of Focus Group/Interview:** \_\_\_\_\_

**Facilitator:** \_\_\_\_\_

**NoteTaker:** \_\_\_\_\_

**Floater:** \_\_\_\_\_

1. Common themes identified for each of the following goals:

A. [Insert goals specific to the group] etc.

2. If applicable, other common themes identified.

3. If applicable, other key observations.



# **Appendix D: Confidentiality Form**





## **MASS Collaboration Confidentiality Agreement**

I \_\_\_\_\_ agree to abide by all agreements outlined in the MASS Collaboration Needs Assessment Plan and to keep confidential all information obtained through participation in the MASS Collaboration needs assessment including, but not limited to:

- The identity of all focus group and interview participants.
- All statements made by focus group and interview participants.
- Notes taken from focus groups and interviews.
- Audio recordings taken during focus groups and interviews.
- Transcripts obtained from focus group/interview audio recordings.
- The needs assessment report and drafts of the report.
- Personal contact information for all staff, interns and volunteers participating in the MASS Collaboration.
- Full names of any BARCC volunteers and interns participating in the MASS Collaboration.

Confidentiality means: I will share information I receive through the needs assessment only with the MASS Collaboration Project Manager and the representatives from each partner organization. I will not reveal information to anyone outside of these individuals, including agency staff and leadership. I will not discuss or have accessible any needs assessment materials in a place where someone who is not privy to such information might overhear/obtain it.

I will not utilize any information obtained through this needs assessment in any research or publication.

I understand that failure to comply with this agreement may result in removal from this project.

---

**Name (Printed)**

---

**Signature**

---

**Date**

# **Appendix E:**

## **BARCC Questions**

- ❖ **Board Member**
- ❖ **Leadership**
- ❖ **Client Services Supervisor**
- ❖ **Community Engagement Supervisors**
- ❖ **Client Services Staff and Volunteers**
- ❖ **Community Engagement Staff**



## **BARCC Board Member**

1. What is your perspective on:

A. The accessibility of BARCC services?

B. How well BARCC communicates that its services are:

- Welcoming to survivors with disabilities?
- Accessible to survivors with disabilities?

2. What is BARCC's policy for handling complaints from survivors regarding discrimination or bias from staff and/or volunteers?

3. What is BARCC's capacity for increasing services to survivors with disabilities? What resources does BARCC currently have? What are the challenges for BARCC regarding resources?

A. Budget including line-item for accommodations

B. Human resources

C. Physical facility

D. Other

E. What are your ideas for increasing capacity to serve survivors with disabilities?

4. Think about a time when there was a change or shift at BARCC (e.g. a new concept, program, policy, a new way of doing something, a new way of working with partners).

A. What and/or who initiated the change effort or shift?

B. Who else was involved in the process?

C. How did you get buy-in from the rest of the organization?

D. What were the challenges to making the change?

E. What made the change sustainable?



## **BARCC Leadership**

1. How does the BARCC environment and communications, such as office space, website and materials, communicate to people with disabilities that BARCC is welcoming to survivors with disabilities and that survivors can request accommodations?

- A. Office space, including signage is welcoming to people with disabilities? Communicates that survivors can request accommodations?
- B. Website is welcoming to people with disabilities? Communicates that survivors can request accommodations?
- C. Print material is welcoming to people with disabilities? Communicates that survivors can request accommodations?
- D. Other?

2. How do you as a leader hear about the needs of survivors with disabilities in the communities to which you provide services?

3. In the next few questions, we want to learn how disability issues are integrated into some of BARCC's practices.

- A. How are disability issues integrated into HR practices?
- B. How are disability issues integrated into trainings received by BARCC staff and volunteers?
- C. How are disability issues, including the impact of ableism, integrated into the ways BARCC provides services to survivors with disabilities?
- D. Other ways BARCC integrates disability issues?

4. What are the strengths and challenges of BARCC's structures for communication between leadership and staff/volunteers?

- A. How would you find out about challenges/barriers that staff and volunteers experience when providing services to survivors with disabilities?
- B. How do new policies and protocols get disseminated to staff and volunteers?

5. If BARCC has the following policies and/protocols, what do you see as the strengths and barriers to them in regards to being able to provide accessible, responsive services to survivors with disabilities?

- A. Policies regarding obtaining accommodations
- B. Policies regarding communications with survivors (e.g. requesting services, electronic communications)
- C. Mandated reporting of adults with disabilities
- D. Situations when there are questions of competency/ability to consent to services
- E. Situations when a survivor has a legal guardian
- F. What are your ideas for resolving barriers in your policies?

6. What is BARCC's policy for handling complaints from survivors regarding discrimination or bias from staff and/or volunteers?

7. What is BARCC's capacity for increasing services to survivors with disabilities? What resources does BARCC currently have? What are the challenges for BARCC regarding resources?

- A. Budget including line-item for accommodations
- B. Human resources



- C. Physical facility
- D. Other?
- E. What are your ideas for increasing capacity to serve survivors with disabilities?

8. Think about a time when there was a change or shift at BARCC (e.g. a new concept, program, policy, a new way of doing something, a new way of working with partners).

- A. What and/or who initiated the change effort or shift?
- B. Who else was involved in the process?
- C. How did you get buy-in from the rest of the organization?
- D. What were the challenges to making the change?
- E. What made the change sustainable?

9. What is BARCC's experience with community partnerships?

- A. In addition to this collaboration, what partnerships does BARCC have with organizations that work with people with disabilities?
- B. Think about past partnerships that BARCC has had with other organization (does not have to be disability specific organizations).
  - How have past partnerships influenced BARCC's practices?
  - What made partnerships work well?
  - What made partnerships challenging?
- C. What are ways in which you envision our collaborating organizations (BCIL, BARCC, MBTA and Transit Police) continuing to partner together long-term?

## **BARCC Client Services Supervisors**

Our collaboration is defining disability as the interaction between a person, their functional ability, and the environment. This includes a broad range of disabilities including but not limited to: physical disabilities, sensory disabilities (visual, hearing), mental health disabilities, disabilities that impact cognition (intellectual disability, traumatic brain injury).

For the first two questions, we will be asking you about your experiences supervising staff at BARCC when they were working with survivors with disabilities. In many cases, there were likely both things that went well and things that were challenging. We will first ask you about the things that went well.

1. Think about times when things went well when you were supporting staff who were providing services to a survivor with a disability.

A. What worked well?

- How were you able to support staff in regards to meeting requests for accommodations?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  
- How were you able to support staff in regards to

knowledge and skills for supporting survivors with disabilities?

- For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
- 
- How were you able to support staff in regards to obtaining resources, both internal and external to BARCC, for the survivor?

B. What structures within BARCC helped you support staff who were providing services to survivors with disabilities?

- How did BARCC policies and procedures help?
- How did BARCC resources help?
- Was there anything else at BARCC that helped?
- If so, what?

C. Is there anything else you want to share about the experience?

2. Think about times when things did not go well when you were supporting staff who were providing services to a survivor with a disability.

A. What were the challenges?

- What were the challenges to supporting staff in regards to meeting requests for accommodations?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  
- What were the challenges to being able to support staff in regards to knowledge and skills for supporting survivors with disabilities?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  
- What were the challenges to supporting staff in regards to obtaining resources, both internal and external to BARCC, for the survivor?

B. What structures within BARCC would have been helpful?

- What policies and/or protocols would have helped you?
  - What policies and protocols need to be clarified?
  - What polices and protocols are missing?
  
- What BARCC resources would have helped?

C. Is there anything else you want to share about the experience?

3. How comfortable, knowledgeable and equipped do you feel about your ability to support staff in their work with survivors with disabilities?

A. How does the type of disability impact your comfort or ability to support staff?

B. How does the presence of a family member/guardian or provider (PCA, group home staff etc) impact your comfort or ability to support staff?

C. What would you need from BARCC to be more comfortable and equipped to support staff?

- What training would help you feel more comfortable, knowledgeable and equipped to support staff in their work with survivors with disabilities?

4. What do you see as potential barriers to BARCC services for survivors with disabilities?

- A. What do you see as the gaps in knowledge and skills regarding staff's ability to respond to survivors with disabilities?
- B. How do existing BARCC policies and practices create potential barriers to accessing services?

5. In the next few questions, we want to learn how disability issues, including ableism, are integrated into your program's practices. Our collaboration defines ableism as: The conscious or unconscious belief that people with disabilities are inferior to people without disabilities. Prejudice and discrimination against people with disabilities leads to segregation, social isolation, and policies and practices that limit opportunities to full societal participation and access to services.

A. (Clinical) How are disability issues, including the impact of ableism, integrated into the ways BARCC provides counseling services to survivors with disabilities?

- How aware are counselors of the impact of ableism on survivors with disabilities?
- How self-aware are counselors of how they are influenced by ableism?
- What is the ability of counselors to modify approaches to counseling/treatment for survivors with disabilities? How does the type of disability impact the ability to modify counseling/treatment approaches?

(Advocacy) How are disability issues, including the

impact of ableism, integrated into the ways BARCC provides advocacy services to survivors with disabilities?

- How aware are advocates of disability issues, including the impact of ableism on survivors with disabilities?
- How self-aware are advocates of how they are influenced by ableism?

B. How are disability issues, including the impact of ableism, integrated into meetings and trainings within your department?

C. How are disability issues, including the impact of ableism, integrated into your supervisory practices?

- How do you help staff understand and navigate the impact of disability issues, including the impact of ableism on survivors with disabilities?
- How do you help staff navigate how they are influenced by ableism?
- How do you think ableism influences you in your interactions (or potential interactions) with both clients and staff who have disabilities?

6. What are the strengths and challenges of BARCC's structures for communication between leadership, supervisors, and staff/volunteers?

A. How would you find out about challenges/barriers that staff and volunteers experience when providing services to survivors with disabilities?

- B. If you saw a need for policy change, how would you go about influencing change?
  - C. What do you see as your role in disseminating policy/protocol to staff and volunteers?
7. What is your program's experience with community partnerships?
- A. How familiar are you with the collaborating organizations (BCIL, MBTA, and Transit Police)?
  - B. In addition to this collaboration, what partnerships does your program have with organizations that work with people with disabilities?
  - C. Think about past partnerships that BARCC has had with other organizations (does not have to be disability specific organizations).
    - What made partnerships work well?
    - What made partnerships challenging?



## **BARCC Community Engagement Supervisors**

Our collaboration is defining disability as the interaction between a person, their functional ability, and the environment. This includes a broad range of disabilities including but not limited to: physical disabilities, sensory disabilities (visual, hearing), mental health disabilities, disabilities that impact cognition (intellectual disability, traumatic brain injury).

For the first two questions, we will be asking you about your experiences supervising staff at BARCC when they were presenting to an audience that could include survivors with disabilities. In many cases, there were likely both things that went well and things that were challenging. We will first ask you about the things that went well.

1. Think about times when things went well when you were supporting staff who were providing a presentation to a survivor with a disability.

A. What worked well?

- How were you able to support staff with ensuring that the presentation and location of the engagement was accessible?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  - For learning disabilities?

- How were you able to support staff with meeting accommodation requests?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  - For learning disabilities?
- If there was a disclosure from a survivor with a disability, how were you able to support staff with responding to the disclosure? With obtaining resources?

B. What structures within BARCC helped you support staff who were presenting to survivors with disabilities?

- How did BARCC policies and procedures help?
- How did BARCC resources help?
- Was there anything else at BARCC that helped? If so, what?

C. Is there anything else you want to share about the experience?

2. Think about times when things did not go well when you were supporting staff who were providing a presentation to a survivor with a disability.

## A. What were the challenges?

- What was challenging to supporting staff with ensuring that the presentation and location of the engagement was accessible?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  - For learning disabilities?
  
- What was challenging to supporting staff with meeting accommodation requests?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  - For learning disabilities?
  
- If there was a disclosure from a survivor with a disability, what was challenging to supporting staff with responding to the disclosure? With obtaining resources?

## B. What structures within BARCC would have been helpful?

- What policies and/or protocols would have helped you?
  - What policies and protocols need to be clarified?

- What policies and protocols are missing?
- What BARCC resources would have helped?

C. Is there anything else you want to share about the experience?

3. How comfortable, knowledgeable and equipped do you feel about your ability to support staff with providing community education to survivors with disabilities and when necessary to adapt presentations?

- A. How does the type of disability impact your comfort or ability to support staff?
- B. What training would help you feel more comfortable, knowledgeable and equipped to support staff in presenting to survivors with disabilities?

4. What do you see as potential barriers to BARCC services for survivors with disabilities?

- A. How does BARCC communicate to organizations serving people with disabilities that we can provide presentations about sexual violence to survivors with disabilities?
  - How do BARCC's materials, website or other public communication indicate or suggest that BARCC can provide community education about sexual violence to survivors with disabilities?

B. What do you see as the gaps in knowledge and skills regarding staff's ability to present to survivors with disabilities?

5. In the next few questions, we want to learn how disability issues, including ableism, are integrated into your program's practices. Our collaboration defines ableism as:

The conscious or unconscious belief that people with disabilities are inferior to people without disabilities. Prejudice and discrimination against people with disabilities leads to segregation, social isolation, and policies and practices that limit opportunities to full societal participation and access to services.

A. How are disability issues, including the impact of ableism, integrated into BARCC curricula and presentations?

- Integration of content
- Integration of methodology

B. How are disability issues, including the impact of ableism, integrated into meetings and trainings within your department?

C. How are disability issues, including the impact of ableism, integrated into your supervisory practices?

- How do you help staff understand and navigate the impact of disability issues, including the impact of ableism on survivors with disabilities?

- How do you help staff navigate how they are influenced by ableism?
- How do you think ableism influences you in your interactions (or potential interactions) with both clients and staff who have disabilities?

6. What are the strengths and challenges of BARCC's structures for communication between leadership, supervisors, and staff/volunteers?

- A. How would you find out about challenges/barriers that staff and volunteers experience when providing services to survivors with disabilities?
- B. If you saw a need for policy change, how would you go about influencing change?
- C. What do you see as your role in disseminating policy/protocol to staff and volunteers?

7. What is your program's experience with community partnerships?

- A. How familiar are you with the collaborating organizations (BCIL, MBTA, and Transit Police)?
- B. In addition to this collaboration, what partnerships does your program have with organizations that work with people with disabilities?
- C. Think about past partnerships that BARCC has had with other organizations (does not have to be disability specific organizations).
  - What made partnerships work well?
  - What made partnerships challenging?

## **BARCC Client Service Staff and Volunteers**

Our collaboration is defining disability as the interaction between a person, his or her functional ability, and the environment. This includes a broad range of disabilities including but not limited to: physical disabilities, sensory disabilities (visual, hearing), mental health disabilities, disabilities that impact cognition (intellectual disability, traumatic brain injury).

1. What circumstances in your work is it helpful to know whether a survivor has a disability?
  
2. In your role at BARCC, how do you find out whether a survivor has a disability and/or needs an accommodation?
  - A. How do BARCC's materials or office environment communicate that survivors can request accommodations? How do they communicate that BARCC is a welcoming and safe environment to disclose having a disability?
  - B. Do you inform survivors that they can request accommodations? Do you inform survivors that they can disclose a disability? How? When?
  - C. Do you ask survivors directly if they need an accommodation? Do you ask survivors directly if they have a disability? How? When?
    - Do you ask everyone or only under certain circumstances? What circumstances?

- D. Do you wait until the survivor discloses the need for an accommodation to you? Do you wait until the survivor discloses a disability?
- E. Anything else?

3. What, if anything, guides your process of finding out whether a survivor has a disability and/or needs an accommodation?

- A. What policies and procedures at BARCC guide you?
- B. What training have you received about this?
- C. How does your supervisor guides you in this process?
- D. What else, if anything, guides you in this process?

4. What are the concerns that survivors have expressed or that you think survivors might have about disclosing a disability and/or a need for accommodation to BARCC (e.g. mandated reporting, concern about assumptions being made about them, not given the same choices as those without a disability)?

- A. What are some personal concerns victims might have?
- B. What concerns might survivors with disabilities have around interactions with staff?

For the next two questions, we will be asking you about your experiences working with survivors with disabilities at BARCC. In many cases, there were likely both things that went well and things that were challenging. We will first ask you about the things that went well.



5. Think about a time when things went well when you were working with or providing a service to someone that you feel may have had a disability.

A. What worked well?

- In what ways were services accessible?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  
- In what ways were you able to meet requests for accommodations?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  
- Which resources were available?
- When community relationships or partnerships were helpful, what aspects of the partnership was helpful?

B. What structures within BARCC helped you?

- How did BARCC policies and procedures help?
- How did supervisor and/or organizational support, including support for secondary trauma help?

C. Is there anything else you want to share about the experience?

6. Tell me about a time when things did not go well for you in working with or providing a service to someone that you feel may have had a disability.

A. What did not work well?

- If services were inaccessible, what were the access issues?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  
- If you had difficulty meeting the client's accommodation request, what were the challenges?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  
- What limitations to resources did you experience?
- If there were challenges with community partnerships what were they?

B. What would have helped you?

- What policies and/or protocols would have helped you?
  - What policies and protocols need to be clarified?
  - What polices and protocols are missing?
- What additional supervisor and/or

organizational support would have helped?

C. Is there anything else you want to share about the experience?

7. How comfortable, knowledgeable and equipped are you to work with survivors with disabilities?

A. How does the type of disability impact your comfort or ability to provide services?

B. How does the presence of a family member/guardian or provider (PCA, group home staff etc) impact your comfort or ability to provide services?

C. What training would help you feel more comfortable, knowledgeable and skilled to work with survivors with disabilities?

8. What do you think are effective ways for you to learn about changes to policies and protocols at BARCC?



## **BARCC Community Engagement Staff**

Our collaboration is defining disability as the interaction between a person, his or her functional ability, and the environment. This includes a broad range of disabilities including but not limited to: physical disabilities, sensory disabilities (visual, hearing), mental health disabilities, disabilities that impact cognition (intellectual disability, traumatic brain injury).

1. When coordinating community engagements, how do you find out whether an accommodation is needed?

A. How do BARCC's materials communicate that accommodations can be requested for community engagements?

B. How do you inform community members/organizations that they can request accommodations?

C. Do you ask community members/organizations directly if a participant would need an accommodation?

- Do you ask everyone or only under certain circumstances?  
What circumstances?

D. Do you wait until the community member/organization discloses the need for an accommodation to you?

E. Anything else?

2. What, if anything, guides your process of finding out whether an accommodation is needed for a community engagement?

A. What policies and procedures at BARCC guide you?

B. What training have you received about this?

C. How does your supervisor guide you in this process?

D. What else, if anything, guides you in this process?

3. How are BARCC's curricula/presentations inclusive of people with disabilities?

A. How is the content of BARCC's presentations (e.g. scenarios, statistics) inclusive?

B. How is the methodology of BARCC's presentation inclusive?

- For physical disabilities?
- For mental health disabilities?
- For cognitive disabilities?
- For sensory disabilities?
- For learning disabilities?

For the next set of questions please share with us from the experiences that you've had. If you've never presented to an audience that includes people with disabilities think about what you might need in order to be able to present to a survivor with a disability.

4. Think about a time when things went well when you were providing a presentation to someone that you think may have had a disability.

A. What worked well?

- In what ways was the presentation and location of the engagement accessible?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?

- In what ways were you able to meet accommodation requests?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  - For learning disabilities?
- If there was a disclosure, which resources were available to you?
- When community relationships or partnerships were helpful, what aspects of the partnership was helpful?

B. What structures within BARCC helped you?

- What policies and procedures at BARCC helped?
- How did supervisor and/or organizational support, including support for secondary trauma help?

C. Is there anything else you want to share about the experience?

5. Tell me about a time when things did not go well for you in providing a presentation to someone that you feel may have had a disability.

A. What did not work well?

- If the presentation or location of the engagement was inaccessible, what were the access issues?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  
- If you had difficulty meeting accommodation requests, what were the challenges?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  
- If there was a disclosure, what limitations to resources did you experience?
- If there were challenges with community partnerships, what were they?

B. What would have helped you?

- Are there policies and/or protocols that would have helped?
  - What policies and protocols need to be clarified?
  - What polices and protocols are missing?
- Would additional supervisor and/or organizational support have helped? In what way?



C. Is there anything else you want to share about the experience?

6. Do you feel comfortable, knowledgeable and equipped to provide community education to survivors with disabilities and when necessary adapt presentations?

A. Does the type of disability impact your comfort or ability to provide services? If so, how?

B. What training would help you feel more comfortable, knowledgeable and skilled to work with survivors with disabilities?

7. What do you think are effective ways for you to learn about changes to policies and protocols at BARCC?



# **Appendix F:**

## **BCIL Questions**

- ❖ **Board Member**
- ❖ **Leadership**
- ❖ **Supervisors**
- ❖ **Staff**



## **BCIL Board Member**

1. What is your perspective on:
  - A. BCIL's response to disclosures of sexual violence from consumers?
  - B. How well BCIL communicates that it is welcoming to disclosures of sexual assault from consumers?
  
2. What is BCIL's capacity for increasing services to survivors with disabilities? What resources does BCIL currently have? What are the challenges for BARCC regarding resources?
  - A. Budget including line-item for accommodations
  - B. Human resources
  - C. Physical facility
  - D. Other
  - E. What are your ideas for increasing capacity to serve survivors with disabilities?
  
3. Think about a time when there was a change or shift at BCIL (e.g. a new concept, program, policy, a new way of doing something, a new way of working with partners).
  - A. What and/or who initiated the change effort or shift?
  - B. Who else was involved in the process?
  - C. How did you get buy-in from the rest of the organization?
  - D. What were the challenges to making the change?
  - E. What made the change sustainable?



## **BCIL Leadership**

1. How does the BCIL environment and communications, such as office space, website and materials, communicate to consumers that BCIL is welcoming to disclosures of sexual violence?

- A. Office space, including signage communicates that BCIL is welcoming to disclosures of sexual violence?
- B. Website communicates that BCIL is welcoming to disclosures of sexual violence?
- C. Print material communicates that BCIL is welcoming to disclosures of sexual violence?
- D. Other?

2. How do you as a leader hear about the needs of survivors with disabilities in the communities to which you provide services?

3. In the next few questions, we want to learn how issues of sexual violence and trauma are integrated into some of BCIL's practices.

- A. How is the issue of sexual violence integrated into trainings for staff?
- B. How is consideration of the impact of trauma on consumers integrated into the ways BCIL provides services?
- C. What is the organizational system/structure, if any, for supporting staff regarding the emotional impact of their work, including hearing disclosures of sexual violence from consumers?
- D. Other ways BCIL integrates sexual violence?

4. What are the strengths and challenges of BCIL's structures for communication between leadership and staff/volunteers?

- A. How would you hear from staff about barriers they experience to providing services to consumers?
- B. How do new policies and protocols get disseminated to staff?

5. If BCIL has the following policies and/protocols, what do you see as the strengths and barriers to them in regards to being able to provide confidential, safe and responsive services to survivors with disabilities?

- A. Privacy/Confidentiality of conversations including use of physical space, policies regarding translation/interpretation
- B. Record-keeping policies
- C. Mandated reporting
- D. Safety, including policies for addressing violence or inappropriate behaviors (including verbal harassment) between consumers
- E. What are your ideas for resolving barriers in your policies?

6. We are asking the following questions because people who commit sexual violence seek to exploit what they perceive as vulnerable environments, situations or individuals. As a result of this, they may seek employment in disability services. If BCIL has the following policies, what are the strengths and challenges of these policies?

- A. Screening of employees



- B. Appropriate boundaries between employees and consumers, employee to employee and supervisor to employee
- C. Addressing allegations by consumers of sexual violence (including verbal harassment) from staff, including how staff are held accountable

7. What is BCIL's capacity for increasing services to survivors with disabilities? What resources does BCIL currently have? What are the challenges for BCIL regarding resources?

- A. Budget
- B. Human resource
- C. Physical facility, including private space to meet with consumers
- D. Other?
- E. What are your ideas for increasing capacity to serve survivors with disabilities?

8. Think about a time when there was a change or shift at BCIL (e.g. a new concept, a program, policy, a new way of doing something, a new way of working with partners).

- A. What and/or who initiated the change effort or shift?
- B. Who else was involved in the process?
- C. How did you get buy-in from the rest of the organization?
- D. What were the challenges to making the change?
- E. What made the change sustainable?

9. What is BCIL's experience with community partnerships?
- A. In addition to this collaboration, what partnerships does BCIL have with organizations that work with survivors of sexual or domestic violence?
  - B. Think about past partnerships that BCIL has had with other organizations (does not have to be sexual/domestic violence specific organizations).
    - How much have past partnerships influenced BCIL's practices?
    - What were the things that made partnerships work well?
    - What were the things that made partnerships challenging?
  - C. What are ways in which you envision our collaborating organizations (BCIL, BARCC, MBTA and Transit Police) continuing to partner together long-term?

## **BCIL Supervisors**

Our collaboration is defining sexual violence as a wide spectrum of sexual acts, including acts that may or may not be defined in criminal law, that is non-consensual, forced or coerced. Coercion may be physical, mental, emotional or due to a power imbalance between the person who is offending and the victim. A person is not able to consent if they are incapacitated or if they have a mental disability that results in the inability to consent. Sexual violence may or may not involve touching. Examples of sexual violence include, but are not limited to rape, unwanted sexual touching, excessive or inappropriate bathing or care of breasts and/or genital area, verbal sexual harassment, and forcing someone to watch sexual acts.

For the first two questions, we will be asking you about your experiences supervising staff at BCIL when they were responding to disclosures of sexual violence from consumers. In many cases, there were likely both things that went well and things that were challenging. We will first ask you about the things that went well.

1. Think about times when things went well when you were supporting staff who were responding to disclosures of sexual violence from consumers.

A. What worked well?

- How were you able to support staff with privacy needs of survivors?
- How were you able to support staff with safety needs of survivors?
- How were you able to support staff with knowledge and skills for responding to disclosures of sexual violence?
- How were you able to support staff with mandated reporting?
- How were you able to support staff in regards to obtaining resources, both internal and external to BCIL, for the survivor?

B. What structures within BCIL helped you support staff who were responding to disclosures of sexual violence?

- How did BCIL policies and procedures help?
- How did BCIL resources help?
- Was there anything else at BCIL that helped? If so, what?

C. Is there anything else you want to share about the experience?

2. Think about times when things did not go well when you were supporting staff who were responding to disclosures of sexual violence from consumers.

A. What were the challenges?

- What were the challenges to supporting staff with privacy needs of survivors?
- What were the challenges to supporting staff with safety needs of survivors?
- What were the challenges to supporting staff with knowledge and skills for responding to disclosures of sexual violence?
- What were the challenges to supporting staff with mandated reporting?
- What were the challenges to supporting staff in regards to obtaining resources, both internal and external to BCIL, for the survivor?

B. What structures within BCIL would have been helpful?

- What policies and/or protocols would have helped you?
  - What policies and protocols need to be clarified?
  - What polices and protocols are missing?
- What BCIL resources would have helped?

C. Is there anything else you want to share about the experience?

3. How comfortable, knowledgeable and equipped do you feel about your ability to support staff in their work with survivors with disabilities?

- A. How does the relationship of the survivor to the person committing the sexual violence impact your ability to support staff?
- B. If the person committing the sexual violence was also a consumer at BCIL, how would that impact your ability to support staff?
- C. What would you need from BCIL to be more comfortable and equipped to support staff?
  - What training would help you feel more comfortable, knowledgeable and equipped to support staff in their work with survivors with disabilities?

4. What do you see as potential barriers at BCIL to disclosures of sexual violence?

- A. What do you see as the gaps in knowledge and skills regarding staff's ability to respond to disclosures of sexual violence from consumers?
- B. How do existing BCIL policies and practices create potential barriers to disclosures of sexual assault?

5. In the next few questions, we want to learn how issues of sexual violence and trauma are integrated into some of your program's practices.

- A. (Services) How is consideration of the impact of trauma on consumers integrated into the ways BCIL

provides services?

(Consumer Education) How is sexual violence and the impact of trauma on consumers integrated into education BCIL provides to consumers regarding PCAs?

B. How are issues of sexual violence and trauma integrated into meetings and trainings within your department?

C. How are issues of sexual violence and trauma integrated into your supervisory practices?

- How do you support staff with the emotional impact of their work, including disclosures of sexual violence?
- Given the statistics for sexual violence, it is possible that some of your staff may have experienced sexual violence. How do or would you integrate this with supporting your staff?

6. What are the strengths and challenges of BCIL's structures for communication between leadership, supervisors, and staff?

A. How would you find out about challenges/barriers that staff experience when providing services to survivors with disabilities?

B. If you saw a need for policy change, how would you go about influencing change?

C. What do you see as your role in disseminating policy/protocol to staff and volunteers?

7. What is your program's experience with community partnerships?
- A. How familiar are you with the collaborating organizations (BCIL, MBTA, and Transit Police)?
  - B. In addition to this collaboration, what partnerships does your program have with organizations that work with survivors of sexual or domestic violence?
  - C. Think about past partnerships that BARCC has had with other organizations (does not have to be sexual/domestic violence specific organizations).
    - What made partnerships work well?
    - What made partnerships challenging?



## BCIL Staff

Our collaboration is defining sexual violence as a wide spectrum of sexual acts, including acts that may or may not be defined in criminal law, that is non-consensual, forced or coerced. Coercion may be physical, mental, emotional or due to a power imbalance between the person who is offending and the victim. A person is not able to consent if they are incapacitated or if they have a mental disability that results in the inability to consent. Sexual violence may or may not involve touching. Examples of sexual violence include, but are not limited to rape, unwanted sexual touching, excessive or inappropriate bathing or care of breasts and/or genital area, verbal sexual harassment, and forcing someone to watch sexual acts.

1. In your role at BCIL, how do you find out whether a consumer has experienced sexual violence?
  - A. Do BCIL's materials or office environment communicate that BCIL is a welcoming and safe environment to disclose a sexual assault? If so, how?
  - B. Do you inform consumers that they can disclose a sexual assault? How? When?
  - C. Do you ask consumers directly about experiences with sexual violence? How? When?
    - Do you ask everyone or only under certain circumstances? What circumstances?
  - D. Do you wait until the consumer discloses to you?
  - E. Anything else?

2. What, if anything, guides your process of finding out whether a consumer has experienced sexual violence?

- A. What policies and procedures at BCIL that guide you?
- B. What training have you received about this?
- C. How does your supervisor guide you in this process?
- D. What else, if anything, guides you in this process?

3. What are the concerns consumers have expressed or that you think consumers might have about disclosing a sexual assault at BCIL (e.g. loss of privacy and confidentiality, mandated reporting, concerns about losing independence, concerns about not being believed or judged)?

- A. What are some personal concerns victims might have?
- B. What concerns might survivors have around interactions with staff after a disclosure?

For the next two questions, we will be asking you about your experiences working with consumers at BCIL who have experience sexual violence. In many cases, there were likely both things that went well and things that were challenging. We will first ask you about the things that went well.

4. Think about a time when things went well when you were responding to or working with a survivor of sexual violence at BCIL. What things were in place within your organization to help you?

A. What worked well?

- How were you able to meet with the consumer privately (either within office or in external settings)?
- Which resources were available?
- When community relationships or partnerships were helpful, what aspects of the partnership was helpful?

B. What structures within BCIL helped you?

- How did BCIL policies and procedures help?
- How did BCIL and/or your supervisor support you in responding to or working with a survivor of sexual violence?

5. Tell me about a time when things did not go well for you in working with or providing a service to someone that you feel may have had a disability.

A. What did not work well?

- If there were barriers to meeting with the consumer privately (either within office or in external settings), what were the barriers?
- What limitations to resources did you experience?
- If there were challenges with community partnerships what were they?

B. What would have helped you?

- What policies and/or protocols would have helped you?
  - What policies and protocols need to be clarified?
  - What polices and protocols are missing?
  
- What additional supervisor and/or organizational support would have helped?

(Back-Up Scenario)

If you have never received a disclosure of sexual violence, from a consumer at BCIL, imagine the following scenario:

Susan is a 26 year old woman with a disability. Susan hired a new personal care attendant (PCA) about a month ago. Susan's PCA, Mike, rapes Sara when she is helping her with her bath. Susan goes to the Boston Center of Independent Living the next day and says she wants help getting a new PCA because she doesn't like Mike. You find out that Mike raped Susan.

In order for things to go well in responding to and working with Susan, what would you need from BCIL?

- What policies and/or protocols would have helped you?
  - What policies and protocols need to be clarified?
  - What polices and protocols are missing?

- What additional supervisor and/or organizational support would have helped?

6. How comfortable, knowledgeable and equipped are you to respond to survivors with disabilities?

- A. How does the relationship of the survivor to the person committing the sexual violence impact your response or ability to provide services?
- B. If the person committing the sexual violence was also a consumer at BCIL, how would that impact your response or ability to provide services?
- C. What training would help you feel more comfortable, knowledgeable and skilled to respond to survivors with disabilities?
- D. Responding to survivors of sexual violence may impact you emotionally. What would you need from BCIL to support you?

7. What do you think are effective ways for you to learn about changes to policies and protocols at BCIL?



# **Appendix G:**

## **Transit Police Questions**

- ❖ **Leadership**
- ❖ **Supervisors**
- ❖ **Patrol Officers and Detectives**





## **Transit Police Leadership**

1. How does the Transit Police environment and communications, such as signage, website and materials, communicate that Transit Police is welcoming to reports from victims of sexual violence?

- A. Signage in police station and subway station and cars communicates that Transit Police is welcoming to reports of sexual violence?
- B. Website and social media communicates that Transit Police is welcoming to reports of sexual violence?
- C. Public announcements communicate that Transit Police is welcoming to reports of sexual violence?
- D. Other?

2. How does the Transit Police environment and communications, such as signage, website and materials, communicate to people with disabilities that Transit Police is welcoming to victims with disabilities and that victims can request accommodations?

- A. Signage in police station and subway station and cars communicates that Transit Police is welcoming to reports of sexual violence?
- B. Website communicates that Transit Police is welcoming to reports of sexual violence?
- C. Public announcements communicate that Transit Police is welcoming to reports of sexual violence?
- D. Other?

3. How do you as a leader hear about the needs of victims of sexual violence in the communities to which you provide services? What about victims with disabilities? What about victims of sexual violence with disabilities?

4. How are issues of sexual violence, including the impact of trauma on victims, integrated into training of police officers?  
How are disability issues integrated into training of police officers?

5. What are the strengths and challenges of Transit Police's structures for communication between leadership and officers?

- A. How would you find out about challenges/barriers that officers experience when responding to victims of sexual violence and/or victims with disabilities?
- B. How do new policies and protocols get disseminated to officers?

6. If Transit Police has the following policies and/or protocols, what do you see as the strengths and gaps to them in regards to being able to provide an accessible response to victims of with disabilities?

- A. Policies regarding obtaining accommodations
- B. Policies regarding communications with victims (e.g. follow-up communication with victims)
- C. Mandated reporting of adults with disabilities
- D. Situations when there are questions of competency/ability to consent to services
- E. Situations when a victim has a legal guardian
- F. What are your ideas for resolving barriers in your policies?

7. What is Transit Police's policy for handling complaints from victims regarding discrimination or bias from officers?

8. What is Transit Police's capacity for increasing response to victims of sexual violence with disabilities? What resources does Transit Police currently have? What are the challenges for Transit Police regarding resources?

- A. Budget including line-item for accommodations
- B. Human resources
- C. Physical facility
- D. Other?
- E. What are your ideas for increasing capacity to serve survivors with disabilities?

9. Think about a time when there was a change or shift at Transit Police (e.g. a new concept, program, policy, a new way of doing something, a new way of working with partners).

- A. What and/or who initiated the change effort or shift?
- B. Who else was involved in the process?
- C. How did you get buy-in from the rest of the organization?
- D. What were the challenges to making the change?
- E. What made the change sustainable?

10. What is Transit Police's experience with community partnerships?
- A. In addition to this collaboration, what partnerships does Transit Police have with organizations that work with victims of sexual or domestic violence?
  - B. In addition to this collaboration, what partnerships does Transit Police have with organizations that work with people with disabilities?
  - C. Think about past partnerships that Transit Police has had with other organizations (does not have to be disability or sexual/domestic violence specific organizations). What were the things that made partnerships work well? What were the things that made partnerships challenging?

## Transit Police Supervisors

Our collaboration is defining disability as the interaction between a person, their functional ability, and the environment. This includes a broad range of disabilities including but not limited to: physical disabilities, sensory disabilities (visual, hearing), mental health disabilities, disabilities that impact cognition (intellectual disability, traumatic brain injury).

For the first two questions, we will be asking you about your experiences supervising officers at the Transit Police Department when they were responding to victims with disabilities. In many cases, there were likely both things that went well and things that were challenging. We will first ask you about the things that went well.

1. Think about times when things went well when you were assisting an officer who was responding to a victim with a disability.

A. What worked well?

- How were you able to assist officers with obtaining accommodations?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?

- How were you able to assist officers with the knowledge and skills to respond to victims with disabilities? What if the victim had experienced a sexual assault?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  
- How were you able to assist officers with obtaining resources for the victim? What if the victim had experienced a sexual assault?

B. What structures within Transit Police helped you assist officers when they were responding to victims with disabilities? What if the victim had experienced a sexual assault?

- How did Transit Police policies and procedures help?
- How did Transit Police resources help?
- Was there anything else at Transit Police that helped? If so, what?

C. Is there anything else you want to share about the experience?

4. Think about times when things did not go well when you were assisting an officer who was responding to a victim with a disability.

A. What were the challenges?

- What were the challenges to assisting officers with obtaining accommodations?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  
- What were the challenges to assisting officers with the knowledge and skills to respond to victims with disabilities? What if the victim had experienced a sexual assault?
  - For physical disabilities?
  - For mental health disabilities?
  - For cognitive disabilities?
  - For sensory disabilities?
  
- What were the challenges to assisting officers with obtaining resources for the victim? What if the victim had experienced a sexual assault?

B. What structures within Transit Police would have been helpful to assisting officers with responding to victims with disabilities? What if the victim had experienced a sexual assault?

- What policies and/or protocols would have

helped you?

- What policies and protocols need to be clarified?
- What polices and protocols are missing?
- What Transit Police resources would have helped?

C. Is there anything else you want to share about the experience?

5. How skilled, knowledgeable and equipped are you with assisting officers to respond to victims with disabilities?

A. How does the type of disability impact your ability to assist officers?

B. How does the presence of a family member/guardian or provider (PCA, group home staff etc) impact your ability to assist officers?

C. If the victim had experienced a sexual assault, how would that impact your ability to assist officers?

D. What would you need from Transit Police to be more effective in assisting officers with responding to victims with disabilities? To assisting officers with responding to victims of sexual assault with disabilities?

- What training would make you more effective in assisting officers to respond to victims with disabilities? To assisting officers with responding to victims of sexual assault with disabilities?



6. What do you see as potential barriers to Transit Police's ability to respond to victims with disabilities?

- A. What do you see as the gaps in knowledge and skills regarding officer's ability to respond to victim with disabilities? What if the victim had experienced a sexual assault?
- B. How do officers' personal attitudes about people with disabilities impact the response?

7. What are the strengths and challenges of Transit Police's structures for communication between leadership, supervisors and officers?

- A. How would you find out about challenges/barriers that officers experience when responding to victims?
- B. If you saw a need for policy change, how would you go about influencing change?

8. What is your program's experience with community partnerships?

- A. How familiar are you with the collaborating organizations (BCIL, MBTA, and Transit Police)?
- B. In addition to this collaboration, what partnerships does your program have with organizations that work with people with disabilities?
- C. Think about past partnerships that Transit Police has had with other organizations (does not have to be disability or sexual violence specific organizations).
  - What made partnerships work well?
  - What made partnerships challenging?



## **Transit Police Patrol Officers and Detectives**

Our collaboration is defining disability as the interaction between a person, his or her functional ability, and the environment. This includes a broad range of disabilities including but not limited to: physical disabilities, sensory disabilities (visual, hearing), mental health disabilities, disabilities that impact cognition (intellectual disability, traumatic brain injury).

1. What are the concerns that victims have said or that you think victims might have about reporting a sexual assault to Transit Police?
  - A. What are some personal concerns victims might have?
  - B. What concerns might victims have around being involved in the criminal justice system?
  - C. What concerns might victims have around interactions with officers?
  - D. What do you think would be different/specific concerns, if any, for victims of sexual assault with a disability?
  
2. In your role, how have you found out whether a victim has a disability and/or needs an accommodation?
  - A. In your experience have you informed victims that they can request accommodations? Have you informed victims that they can disclose a disability? How? When?

- B. In your experience have you asked victims directly if they need an accommodation? Have you asked victims directly if they have a disability? How? When?
- Have you asked everyone or only under certain circumstances? What circumstances?
- C. In your experience, have you waited until the victim discloses the need for an accommodation to you? Have you waited until the victim discloses a disability?
- D. Anything else?

3. What, if anything, at Transit Police assists you in finding out whether a victim has a disability and/or needs an accommodation?

- A. What policies and procedures at Transit Police assist you? If so, what are they?
- B. What training have you received about this?
- C. In what ways does your supervisor assist you?
- D. What, if anything else, assists you?

For the next set of questions please share with us from the experiences that you've had. If you've never had any of the above experiences, think about what you might need in order to be able to respond to a victim of sexual violence with a disability.

4. What resources from the Transit Police Department would you need to be able to effectively respond to a victim of sexual violence with a disability?

A. In what ways are your services accessible?

- What resources or equipment does Transit Police have to take calls from victims who are deaf or hard of hearing?
- If you needed to transport a victim, for example to the department or to their home, how would you provide accessible transportation to a victim with a physical disability?
- What resources at Transit Police would assist you with communicating to a victim who is deaf? Have you been able to access interpreters such as ASL interpreters when needed?
- What resources at Transit Police would assist you with communicating to a victim who has a disability that impacts speech? (e.g. trainings on topic, communication boards etc)
- What resources at Transit Police would assist you with communicating to a victim with a disability that impacts cognition? (e.g. trainings on topics, materials with pictures etc.)
- What resources at Transit Police would assist you with communicating to someone with a mental health disability?

- If you have been asked by a victim for an accommodation, how was Transit Police able to provide the accommodation?

B. What policies and/or protocols at Transit Police would help you in responding to a victim with a disability?

- What policies and protocols regarding responding to victims with sexual violence (regardless of whether they have a disability) need to be clarified?
- What policies and protocols regarding responding to victims with sexual violence are missing?
- What policies and protocols regarding responding to victims with disabilities (of any crime) need to be clarified?
- What policies and protocols regarding responding to victims with disabilities are missing?

C. How could additional supervisor and/or organizational support help you in responding to a victim with a disability?

5. What community resources are you currently aware of that would be helpful to you when responding to a victim of sexual violence with a disability? What additional community resources would you need?

6. In cases when you've had to interact with employees from MBTA, how was the interaction?

- A. What went well with the interaction?
- B. What did not go well?
- C. What would you want employees from MBTA to know in order to benefit your response and investigation?

7. How knowledgeable and equipped are you to work with victims of sexual violence with disabilities?

- A. How does the type of disability impact your ability to provide services?
- B. What would increase your knowledge and skills to work with victims of sexual violence with disabilities?
  - What trainings would help?

8. What are effective ways for you to learn about changes to policies and protocols at Transit Police?





## **Survey-Transit Police Officers**

(These questions will be inputted into Survey Monkey and a link e-mailed to Transit Police officers by the Transit Police Chief.)

### **Part I:**

1. How long have you worked as a police officer?

- A. 0-1 year
- B. 1-5 years
- C. 5-10 years
- D. 10-20 years
- E. 20+ years

2. How long have you worked at the Transit Police Department?

- A. 0-1 year
- B. 1-5 years
- C. 5-10 years
- D. 10-20 years
- E. 20+ years

3. Have you ever responded to a victim of any crime with disabilities?

- A. Yes
- B. No

4. Have you ever responded to a sexual violence case regardless of whether the victim had a disability or not?

A. Yes

B. No

5. Have you ever responded to a victim of sexual violence with disabilities?

A. Yes

B. No

**Part II:**

1. In your opinion, what do you think are the top three concerns that victims might have about reporting a sexual assault to Transit Police?

A. Retaliation

B. Privacy and confidentiality

C. Concerns about the criminal justice system.

D. Concerns that officers may be inexperienced

E. Concerns about lack of empathy from officers

F. Concerns about not being believed or being judged by officers

G. Concerns that an officer's beliefs or attitudes about them will cause the officer to treat them differently from other victims

What other concerns do you think victims of sexual assault might have about reporting to Transit Police?

2. In your opinion, what do you think are the top three concerns that victims with disabilities might have about reporting a sexual assault to Transit Police?

- A. Retaliation
- B. Privacy and Confidentiality
- C. Concerns about the criminal justice system
- D. Concerns that officers may be inexperienced
- E. Concerns about lack of empathy from officers
- F. Concerns about not being believed or being judged by officers
- G. Concerns that an officer's beliefs or attitudes about them will cause the officer to treat them differently from other victims

What other concerns do you think victims with disabilities might have about reporting a sexual assault?

3. How do you usually find out whether a victim has a disability?

- A. Provide the same information to all victims letting them know that they can disclose a disability.
- B. Ask all victims directly whether they have a disability.
- C. If I thought a victim might have a disability, ask whether they had a disability.
- D. Wait until the victim discloses that they have a disability.
- E. Find out from a family member or professional.
- F. Other \_\_\_\_\_

4. How do you usually find out whether a victim needs an accommodation?

- A. Provide the same information to all victims letting them know that they can request accommodations.
- B. Ask all victims directly whether they need an accommodation.
- C. If I thought a victim might have a disability, asked whether they need an accommodation.
- D. Wait until the victim discloses that they need an accommodation.
- E. Find out from a family member or professional
- F. Other\_\_\_\_\_

5. What, if anything, at Transit Police assists you in finding out whether a victim has a disability and/or needs an accommodation?  
(select all that apply)

- A. It is part of protocol
- B. It is part of my training
- C. My supervisor assists me with this
- D. Other officers assist me with this
- E. Other\_\_\_\_\_
- F. There is nothing at Transit Police that assists me with this.

6. When asked for an accommodation, how often are you able to provide the accommodation?

- A. All of the time
- B. Most of the time
- C. Half of the time
- D. Seldom
- E. Never

7. How difficult is it to obtain the following accommodations?

(All of the following will have scale 1 to 5 with 1 being not difficult and 5 being very difficult)

- A. Interpreter (American Sign Language or other interpreters for victims who are deaf)
- B. Written materials in Braille or audio, or formatted for screen readers
- C. Accessible transportation for victim
- D. Accessible facilities (e.g. interview rooms, restrooms etc)
- E. Materials using pictures, icons or other visuals to communicate with a victim

What additional accommodations have you needed? How easily were you able to obtain those accommodations?

8. How much of a barrier have the following been to responding to a victim with a disability?

(All of the following will have scale 1 to 5 with 1 being not a barrier and 5 being high barrier)

- A. Inability to communicate with the victim
- B. Issues with physical access for the victim
- C. Inability to provide a requested accommodation
- D. Lack of knowledge about how to interact with people with disabilities
- E. Unclear or lack of written policies or protocols
- F. Insufficient support from supervisors or other officers
- G. Lack of community resources
- H. Lack of professional assistance

What are other barriers you've experienced to responding to a victim with a disability?

9. How equipped are you to work with people with the following disabilities?

(All of the following will have scale 1 to 5 with 1 being not equipped and 5 being fully equipped)

- A. Cognitive disability
- B. Physical disability
- C. Sensory disability (deaf, blind)
- D. Mental health disability
- E. Other\_\_\_\_\_

10. Have you received training about responding to victims of sexual violence?

- A. Yes
- B. No

If yes, how frequently do you receive training about responding to victims of sexual violence?

- A. Once during recruit training
- B. At least once a year
- C. At least once every 2 to 5 years
- D. At least once every 6 to 10 years
- E. Once in awhile, but not routinely

11. Have you received training about responding to victims with disabilities?

- A. Yes
- B. No

If yes, how frequently do you receive training at Transit Police in working with people with disabilities?

- A. Once during recruit training
- B. At least once a year
- C. At least once every 2 to 5 years
- D. At least once every 6 to 10 years
- E. Once in awhile, but not routinely

12. Have you received training about responding to victims of sexual violence with disabilities?

- A. Yes
- B. No

If yes, how frequently do you receive training at Transit Police in working with people with disabilities?

- A. Once during recruit training
- B. At least once a year
- C. At least once every 2 to 5 years
- D. At least once every 6 to 10 years
- E. Once in awhile, but not routinely

13. Do you have policies and protocols that guide your response to victims of sexual violence?

- A. Yes
- B. No

If yes, how effective are they in helping you to respond to victims of sexual violence with disabilities?

- A. Very effective
- B. Mostly effective
- C. Somewhat effective
- D. Minimally effective
- E. Not effective



14. Do you have policies and protocols that guide your response to victims with disabilities?

- A. Yes
- B. No

If yes, how effective are they in helping you to respond to victims of sexual violence with disabilities?

- A. Very effective
- B. Mostly effective
- C. Somewhat effective
- D. Minimally effective
- E. Not effective

15. Do you have mandated reporting policies and protocols for adults with disabilities?

- A. Yes
- B. No

If yes, how effective are they in helping you with making mandated reports?

- A. Very effective
- B. Mostly effective
- C. Somewhat effective
- D. Minimally effective
- E. Not effective

16. What would be the most effective way for you to learn about changes to policies and protocols at Transit Police?

- A. Memo
- B. Roll call
- C. In-Service Training
- D. Other?

Thank you so much for your taking the time to complete this survey. Your input will be valuable to improving the response to victims with disabilities who report to Transit Police. If you would like to provide additional input, you may participate in a focus group with other Transit Police Officers. If you are interested, please contact the MASS Collaboration Project Manager, Shelley Yen-Ewert at [synewert@barcc.org](mailto:synewert@barcc.org) or 617-649-1287.

# **Appendix H:**

## **MBTA Questions**

- ❖ **Leadership**
- ❖ **Supervisors**
- ❖ **Subway Motorpersons and Station Staff**
- ❖ **Call Center Staff**
- ❖ **Operations Control Center**
- ❖ **RIDE Management**



## **MBTA Leadership**

These questions were developed for multiple senior leaders; therefore we understand that you may not have knowledge about every question asked. Please just respond from your perspective with whatever feedback you may have.

1. How do you as a leader hear about the safety and security concerns/needs of customers as they relate to crimes targeted at individuals? How does this knowledge inform decisions about safety and security priorities, policies and practices? What else influences how you make decisions regarding safety and security?

2. How does the messaging at the MBTA communicate to customers that the MBTA is welcoming to reports of sexual violence, including verbal harassment?

- A. (Subway) How does signage within stations and subway cars communicate that the MBTA is welcoming to reports of sexual violence?
- B. How does MBTA's website communicate that the MBTA is welcoming to reports of sexual violence?
- C. How do public announcements communicate that the MBTA is welcoming to reports of sexual violence?
- D. How do print materials (e.g. flyers) communicate that the MBTA is welcoming to reports of sexual violence?
- E. What other methods, if any, communicate that the MBTA is welcoming to reports of sexual violence?
- F. How does the MBTA communicate the ways in which

customers can report sexual violence, including verbal harassment, to the MBTA?

3. When customers report sexual violence, what systems are in place at the MBTA to coordinate the response?

- A. What systems are in place to coordinate responses when the person committing the sexual violence is another customer?
- B. What systems are in place to coordinate responses when the person committing the sexual violence is an employee?
- C. What systems are in place to coordinate responses if a customer doesn't want to make a report to Transit Police? Are there differences if the person committing the sexual violence is a customer or an employee?

4. If the MBTA has the following policies and/protocols, what do you see as the strengths and gaps to them in regards to being able to provide confidential, safe and responsive services to victims with disabilities?

- A. Policy on obtaining accommodations
- B. Policies regarding privacy and confidentiality
- C. Policies regarding record-keeping policies
- D. Policies regarding mandated reporting
- E. Policies around ensuring customer safety following an incident if the person committing the incident is another customer
- F. What are your ideas for resolving gaps in your policies?

5. In the following questions, we will be asking about some personnel policies and practices which may influence safety at the MBTA.

- A. What are your policies and protocols regarding screening of employees?
- B. What are your policies and protocols regarding boundaries between employees and customers, supervisors and employees and employees with each other?
- C. What are your policies and protocols regarding addressing allegations by customers of sexual violence (including verbal harassment) from drivers, including how drivers are held accountable?
- D. What do you see as the strengths and gaps of these policies?

6. What do you see as the gaps in knowledge and skills regarding employees' ability to respond to victims of sexual violence with disabilities? What training related to this topic is provided at the MBTA? How do you evaluate the effectiveness of the training?

7. How does the messaging at the MBTA communicate to customers with disabilities that they can request accommodations?

- A. (Subway) How does signage within stations and subway cars communicate that customers can request accommodations?
- B. How does MBTA's website communicate that customers can request accommodations?
- C. How do public announcements communicate that

customers can request accommodations?

D. How do print materials (e.g. flyers) communicate that customers can request accommodations?

E. What other methods, if any, communicate that customers can request accommodations?

8. What is MBTA's capacity for increasing safety and response to victims with disabilities? What resources does MBTA currently have? What are the challenges for MBTA regarding resources?

A. Budget including line-item for accommodations

B. Human resource

C. Physical facility (train station, elevators)

D. Other?

E. What are your ideas for increasing capacity to serve survivors with disabilities?

9. Think about partnerships that MBTA has had with other organizations (does not have to be sexual/domestic violence or disability specific organizations).

A. How have past partnerships influenced MBTA's practices?

B. What made partnerships work well?

C. What made partnerships challenging?

D. What are ways in which you envision our collaborating organizations (BCIL, BARCC, MBTA and Transit Police) continuing to partner together long-term?



## **MBTA Supervisors**

Our collaboration is defining sexual violence as a wide spectrum of sexual acts, including acts that may or may not be defined in criminal law, that is non-consensual, forced or coerced. Coercion may be physical, mental, emotional or due to a power imbalance between the person who is offending and the victim. A person is not able to consent if they are incapacitated or if they have a mental disability that results in the inability to consent. Sexual violence may or may not involve touching. Examples of sexual violence include, but are not limited to rape, unwanted sexual touching, excessive or inappropriate bathing or care of breasts and/or genital area, verbal sexual harassment, and forcing someone to watch sexual acts.

Our collaboration is defining disability as the interaction between a person, his or her functional ability, and the environment. This includes a broad range of disabilities including but not limited to: physical disabilities, sensory disabilities (visual, hearing), mental health disabilities, disabilities that impact cognition (intellectual disability, traumatic brain injury).

1. In your role, how would you typically become aware of an incident of sexual violence if the person who committed the assault was a customer? How would you typically become aware of an incident of sexual violence if the person committing the assault was an employee (E.g. from an employee, Transit Police, OCC, as part of an investigation)?

For the next set of questions we will be providing case scenarios about victims of sexual violence and victims with disabilities. If any of

you have experiences assisting front-line staff with responding to a victim of sexual violence or a victim of sexual violence with a disability, please share those experiences. If you have not, please use the case scenario to think about your responses.

Scenario: A customer tells front-line staff that another customer groped her on the subway train.

2. What structures within the MBTA help you to be able to assist front-line staff with addressing a disclosure of sexual assault?

A. How do MBTA policies and procedures help you with assisting front-line staff with:

- What to say to the victim immediately after the disclosure?
- How to address the immediate safety of the victim prior to police involvement or prior to police arriving at the scene?
- Determining whether and when to contact Transit Police
  - What role does the victim have, if any, in making this decision?
- Determining who else at the MBTA to involve and how to get them connected to the situation?
- Determining whether to and what to document?

B. How do MBTA resources help you with assisting front-line staff?

C. How would you assist front-line staff differently with addressing a disclosure of sexual violence if the allegation was that an employee of MBTA committed the assault? What would be the different challenges of addressing a disclosure of an assault committed by an employee?

3. What else would you need from the MBTA to be able to assist front-line staff with addressing a disclosure of sexual violence?

A. If the allegation was that a customer committed the sexual assault:

- What policies and procedures need to be clarified?
- What policies and procedures are missing?
- What additional resources would you need?

B. If the allegation was that an employee of the MBTA committed the sexual assault:

- What policies and procedures need to be clarified?
- What policies and procedures are missing?
- What additional resources would you need?

4. Change the scenario, so that the customer making the disclosure of groping has a disability that could impact communication (e.g. deaf, disability that impacts speech or language).

A. How do MBTA policies and procedures help you with assisting front-line staff with:

- Obtaining accommodations?

- How to address the immediate safety of the victim (prior to police involvement)?
- Determining whether and when to contact Transit Police
  - What role does the victim have, if any, in making this decision?
- Determining who else at the MBTA to involve and how to get them connected to the situation?
- Determining whether to and what to document?

B. What additional resources would you need?

5. Change the scenario to one in which a customer with a disability discloses that another customer has been making sexually inappropriate gestures at her? (Or think of a time when front-line staff responded to a disclosure that you thought was not clear cut)

A. What challenges would you experience assisting front-line staff?

B. What, if anything, would you do differently in assisting front-line staff?

6. How skilled, knowledgeable and equipped are you with assisting front-line staff respond to victims with disabilities?

A. Does the type of disability impact your ability to assist? If so, how?

7. What do you see as the gaps in knowledge and skills regarding front-line staff's ability to respond to victims of sexual violence with disabilities? What training related to this topic is provided at the MBTA? How do you evaluate the effectiveness of the training?

8. What are the strengths and challenges of MBTA structures for communication between leadership, supervisors and front-line staff?

A. How would you find out about challenges/barriers that front-line staff experience when responding to victims of sexual violence? How would you find out about challenges/barriers that front-line staff experience when responding to persons with disabilities?

B. If you saw a need for policy change, how would you go about influencing change?



## **Subway Motorpersons and Station Staff**

Our collaboration is defining sexual violence as a wide spectrum of sexual acts, including acts that may or may not be defined in criminal law, that is non-consensual, forced or coerced. Coercion may be physical, mental, emotional or due to a power imbalance between the person who is offending and the victim. A person is not able to consent if they are incapacitated or if they have a mental disability that results in the inability to consent. Sexual violence may or may not involve touching. Examples of sexual violence include, but are not limited to rape, unwanted sexual touching, excessive or inappropriate bathing or care of breasts and/or genital area, verbal sexual harassment, and forcing someone to watch sexual acts.

Our collaboration is defining disability as the interaction between a person, his or her functional ability, and the environment. This includes a broad range of disabilities including but not limited to: physical disabilities, sensory disabilities (visual, hearing), mental health disabilities, disabilities that impact cognition (intellectual disability, traumatic brain injury).

1. In your role, how would you typically become aware of an incident of sexual violence on the MBTA (e.g. witnessing it, a customer tells you, you're contacted as part of an investigation)?

For the next set of questions we will be providing case scenarios about victims of sexual violence and victims with disabilities. If any of you have experiences responding to a victim of sexual violence or a

victim of sexual violence with a disability, please share those experiences. If you have not, please use the case scenario to think about your responses.

Scenario: A customer tells you that another customer groped her on the subway train.

2. What has prepared you to be able to address a disclosure of sexual assault?

A. How would you know what to say to the victim immediately after the disclosure?

- What policies and protocols help you?
- What training helps you?
- What supervisor support helps you?

B. How would you know what steps to take to address the immediate safety of the victim?

- What policies and protocols help you?
- What training helps you?
- What supervisor support helps you?
- (Note to facilitator: If participants only talk about calling the police, ask what steps they would take prior to police involvement or prior to police arriving at the scene)



C. How would you determine who else at the MBTA to involve and how to get them connected to the situation?

- What policies and protocols help you?
- What training helps you?
- What supervisor support helps you?

D. How would you determine whether to involve the Transit Police? How would you know what steps to take to communicate with Transit Police?

- What policies and protocols help you?
- What trainings help you?
- What supervisor support helps you?
- What role does the victim have, if any, in making the decision to contact Transit Police?

How have your interactions with Transit Police been?

- What has gone well?
- What can be improved?

E. How do you determine whether to and what to document?

- What policies and protocols help you?
- What training help you?
- What supervisor support helps you?

F. If there is a difference between how you would address a disclosure of sexual violence if the person who committed the assault is a customer vs. an employee of the MBTA, how would you know what to do differently? What would

be the different challenges of addressing a disclosure of an assault committed by an employee?

3. What else would you need from the MBTA to be able to address a disclosure of sexual violence?

- A. What policies and procedures need to be clarified?
- B. What policies and procedures are missing?
- C. What additional supervisor and/or MBTA support would you need?

4. Change the scenario, so that the customer making the disclosure of groping has a disability that could impact communication (e.g. deaf, disability that impacts speech or language).

- A. What challenges would you experience?
- B. What MBTA resources would help you to be able to communicate with the customer?
  - What policies and protocols help you?
  - What accommodations (e.g. interpreters etc) are you able to obtain through the MBTA? What accommodations have been challenging to obtain?
  - What training would help you?

5. Change the scenario to one in which a customer with a disability discloses that another customer has been making sexually inappropriate gestures at her? (Or think of a time when you responded to a disclosure that you thought was not clear cut)

- A. What challenges would you experience?
  - B. What, if anything, would you do differently?
6. What do you believe are concerns that customers like the ones in the scenarios above may have regarding disclosing experiences of sexual assault at the MBTA (e.g. loss of privacy and confidentiality, concerns about lack of experience from staff regarding disability and/or sexual violence, not being believed, being judged, concerns about being treated differently from other customers)?
- A. What are some personal concerns victims might have?
  - B. What concerns might victims have around interactions with employees after disclosing sexual violence?
7. What concerns do you think employees might have about reporting or getting involved in a disclosure of sexual violence on the MBTA (e.g. paperwork, being implicated or implicating a coworker, time, lengthy investigation)?
8. What do you think are effective ways for you to learn about changes to policies and protocols at the MBTA?



## **MBTA Call Center Staff**

Our collaboration is defining sexual violence as a wide spectrum of sexual acts, including acts that may or may not be defined in criminal law, that is non-consensual, forced or coerced. Coercion may be physical, mental, emotional or due to a power imbalance between the person who is offending and the victim. A person is not able to consent if they are incapacitated or if they have a mental disability that results in the inability to consent. Sexual violence may or may not involve touching. Examples of sexual violence include, but are not limited to rape, unwanted sexual touching, excessive or inappropriate bathing or care of breasts and/or genital area, verbal sexual harassment, and forcing someone to watch sexual acts.

Our collaboration is defining disability as the interaction between a person, his or her functional ability, and the environment. This includes a broad range of disabilities including but not limited to: physical disabilities, sensory disabilities (visual, hearing), mental health disabilities, disabilities that impact cognition (intellectual disability, traumatic brain injury).

For the next set of questions we will be providing case scenarios about victims of sexual violence and victims with disabilities. If any of you have experiences responding to a victim of sexual violence or a victim of sexual violence with a disability, please share those experiences. If you have not, please use the case scenario to think about your responses.

Scenario: A customer tells you that another customer groped her on the subway train.

1. What has prepared you to be able to address a disclosure of sexual assault?

A. How would you know what to say to the victim immediately after the disclosure?

- What policies and protocols help you?
- What training helps you?
- What supervisor support helps you?

B. How would you know what steps to take to address the immediate safety of the victim?

- What policies and protocols help you?
- What training helps you?
- What supervisor support helps you?
- (Note to facilitator: If participants only talk about calling the police, ask what steps they would take prior to police involvement or prior to police arriving at the scene)

C. How would you determine who else at the MBTA to involve and how to get them connected to the situation?

- What policies and protocols help you?
- What training helps you?
- What supervisor support helps you?

D. How would you determine whether to involve the Transit Police? How would you know what steps to take to communicate with Transit Police?

- What policies and protocols help you?
- What trainings help you?
- What supervisor support helps you?
- What role does the victim have, if any, in making the decision to contact Transit Police?

How have your interactions with Transit Police been?

- What has gone well?
- What can be improved?

E. How do you determine whether to and what to document?

- What policies and protocols help you?
- What training helps you?
- What supervisor support helps you?

F. If there is a difference between how you would address a disclosure of sexual violence if the person who committed the assault is a customer vs. an employee of the MBTA, how would you know what to do differently? What would be the different challenges of addressing a disclosure of an assault committed by an employee?

2. What else would you need from the MBTA to be able to address a disclosure of sexual violence?

- A. What policies and procedures need to be clarified?
- B. What policies and procedures are missing?
- C. What additional supervisor and/or MBTA support would you need?

3. Change the scenario, so that the customer making the disclosure of groping has a disability that could impact communication (e.g. deaf, disability that impacts speech or language).

- A. What challenges would you experience?
- B. What MBTA resources would help you to be able to communicate with the customer?
  - What policies and protocols help you?
  - What accommodations (e.g. interpreters etc) are you able to obtain through the MBTA? What accommodations have been challenging to obtain?
  - What training would help you?

4. Change the scenario to one in which a customer with a disability discloses that another customer has been making sexually inappropriate gestures at her? (Or think of a time when you responded to a disclosure that you thought was not clear cut)

- A. What challenges would you experience?
- B. What, if anything, would you do differently?



5. Change the scenario to one in which the customer is calling specifically regarding an incident that happened on the RIDE.
  - A. What policies and procedures are there to assist you with handling the disclosure?
  - B. What policies and procedures are missing?
  - C. What differences, if any, are there between policies and procedures if the person committing the sexual violence was an employee compared to if they are a customer?
  
6. What do you believe are concerns that customers like the ones in the scenarios above may have regarding disclosing experiences of sexual assault at the MBTA (e.g. loss of privacy and confidentiality, concerns about lack of experience from staff regarding disability and/or sexual violence, not being believed, being judged, concerns about being treated differently from other customers)?
  - A. What are some personal concerns victims might have?
  - B. What concerns might victims have around interactions with employees after disclosing sexual violence?
  
7. What do you think are effective ways for you to learn about changes to policies and protocols at the MBTA?



## **MBTA Operations Control Center (OCC) QUESTIONS**

1. Are there differences between policies and procedures for responding to and coordinating an incident of sexual violence compared to other incidents that occur within the subway system? If so, what are the differences?

2. If a victim of sexual violence had a disability, what would you take into consideration in your response and coordination?

3. What is OCC's capacity for effectively and efficiently responding to and coordinating a request for assistance?

A. What resources does OCC currently have?

B. What are the challenges to being able to effectively and efficiently respond to and coordinate a request for assistance?

C. What do you think would be OCC's capacity for responding to and coordinating an increased volume of reports of sexual violence from victims with disabilities?



## THE RIDE Management Questions

1. In your role, how do you hear about the safety and security concerns/needs of customers as they relate to crimes targeted at individuals? How does this knowledge inform decisions about safety and security policies, priorities and practices at THE RIDE? What else influences how you make decisions regarding safety and security?
  
2. When customers report sexual violence, what systems are in place at THE RIDE to coordinate the response?
  - A. What systems are in place to coordinate responses when the person committing the sexual violence is another customer?
  - B. What systems are in place to coordinate responses when the person committing the sexual violence is an employee?
  
3. If THE RIDE distributes the following policies and/protocols to vendors what do you see as the strengths and gaps to them in regards to being able to provide confidential, safe and responsive services to victims with disabilities?
  - A. Policy on obtaining accommodations
  - B. Policies regarding privacy and confidentiality
  - C. Policies regarding record-keeping policies
  - D. Policies regarding mandated reporting
  - E. Policies around ensuring customer safety following an incident if the person committing the incident is another customer

F. What are your ideas for resolving gaps in policies?

4. In the following questions, we will be asking about some personnel policies and practices which may influence safety at THE RIDE.

A. What policies and protocols regarding screening of employees do you distribute to vendors?

B. What policies and protocols regarding boundaries between employees and customers, supervisors and employees and employees with each other do you distribute to vendors?

C. What policies and protocols are distributed regarding addressing allegations by customers of sexual violence (including verbal harassment) from drivers including the investigation process and how drivers are held accountable?

D. What do you see as the strengths and gaps of these policies?

5. What are the strengths and gaps regarding the communication structure between the MBTA (RIDE management) and vendors:

A. Regarding questions or concerns about the implementation of policies?

B. Regarding responding to incidences/allegations of sexual violence, other crimes or customer discomfort with drivers/employees or other customers?

C. What are your suggestions for improving any gaps in communication?

6. What is THE RIDE's capacity for increasing safety and response to victims with disabilities? What resources does THE RIDE currently have? What are the challenges for THE RIDE regarding resources?

A. Budget including line-item for accommodations

B. Human resource

D. Other?

E. What are your ideas for increasing capacity to serve victims with disabilities?





# **Appendix I:**

## **RIDE Vendor Questions**

- ❖ **Leadership**
- ❖ **Supervisors**
- ❖ **Drivers**
- ❖ **Reservationists/Dispatchers**



## **RIDE Vendor Leadership**

1. How do you as a leader hear about the safety and security concerns/needs of customers as they relate to crimes targeted at individuals? How does this knowledge inform decisions about safety and security priorities and practices? What else influences how you make decisions regarding safety and security?

2. When customers report sexual violence, what systems are in place at the MBTA and within [Vendor name] to coordinate the response?

A. What systems are in place to coordinate responses when the person committing the sexual violence is another customer?

- At [Vendor]
- At MBTA

B. What systems are in place to coordinate responses when the person committing the sexual violence is an employee?

- At [Vendor]
- At MBTA

3. If the MBTA has provided you with the following policies and/protocols, how helpful are they to informing your practices? What do you see as the strengths and gaps to them in regards to being able to provide confidential, safe and responsive services to victims with disabilities?

- A. Policy on obtaining accommodations
- B. Policies regarding privacy and confidentiality
- C. Policies regarding record-keeping policies
- D. Policies regarding mandated reporting
- E. Policies around ensuring customer safety following an incident if the person offending is another customer
- F. What are your ideas for resolving gaps in MBTA policies?

4. In the following questions, we will be asking about some personnel policies and practices which may influence safety at the MBTA and [Vendor name]. If the MBTA has provided you with the following policies and/protocols, how helpful are they to informing your practices? What do you see as the strengths and gaps to them in regards to being able to provide confidential, safe and responsive services to victims with disabilities?

- A. Policy on screening of employees
- B. Policies and protocols regarding boundaries between employees and customers, supervisors and employees and employees with each other
- C. Policies and protocols on addressing allegations by customers of sexual violence (including verbal harassment) from drivers including the investigation process and how drivers are held accountable

5. What are the strengths and gaps regarding the communication structure between the MBTA (RIDE management) and [Vendor]?

- A. Regarding questions or concerns about policies and the implementation of policies?
- B. Regarding responding to incidences/allegations of sexual violence, other crimes or customer discomfort with drivers/employees or other customers?
- C. What are your suggestions for improving any gaps in communication?

6. What do you see as the gaps in knowledge and skills regarding employees' ability to respond to victims of sexual violence with disabilities? What training related to this topic is provided at [Vendor name]? How do you evaluate the effectiveness of the training?

7. What is [Vendor name's] capacity for increasing safety and response to victims with disabilities? What resources does [Vendor] currently have? What are the challenges for [Vendor] regarding resources?

- A. Budget including line-item for accommodations
- B. Human resource
- C. Other?
- D. What are your ideas for increasing capacity to serve victims with disabilities?



## **RIDE Vendor Supervisors**

Our collaboration is defining sexual violence as a wide spectrum of sexual acts, including acts that may or may not be defined in criminal law, that is non-consensual, forced or coerced. Coercion may be physical, mental, emotional or due to a power imbalance between the person who is offending and the victim. A person is not able to consent if they are incapacitated or if they have a mental disability that results in the inability to consent. Sexual violence may or may not involve touching. Examples of sexual violence include, but are not limited to rape, unwanted sexual touching, excessive or inappropriate bathing or care of breasts and/or genital area, verbal sexual harassment, and forcing someone to watch sexual acts.

1. In your role, how would you typically become aware of an incident of sexual violence at the [vendor] (e.g. witnessing it, a customer tells you, you're contacted as part of an investigation)?

For the next two questions, we will be asking you about your experiences assisting front-line staff with responding to victims with disabilities. In many cases, there were likely both things that went well and things that were challenging. If you have not responded to a disclosure of sexual violence from a customer, please use the following case scenarios to think about your responses.

**Scenario 1:** Upon pick-up, a customer who uses a wheelchair discloses to you that the driver who drove her to her destination in the morning rubbed up against her breasts unnecessarily when applying the lap/shoulder belt.

**Scenario 2:** A customer discloses that another customer has been making sexually inappropriate gestures at her.

2. Think about a time when things went well when you were assisting front-line staff with responding to a victim of sexual violence. What things were in place within [vendor] to help you assist front-line staff?

- A. How did RIDE policies and procedures help?
- B. How did [vendor] and/or MBTA RIDE resources help?
- C. Was there anything else at [vendor] that helped? If so, what?
- D. Is there anything else you want to share about the experience?

3. Think about a time when things did not go well for you when you were assisting front-line staff with responding to a victim of sexual violence.

- A. What were the challenges?
  - What were the challenges to assisting front-line staff with the knowledge and skills to respond to victims of sexual violence?



- What were the challenges to assisting front-line staff with obtaining resources for the victim?

B. What structures within [vendor] would have helped you assist front-line staff to respond to victims of sexual violence?

A. What RIDE policies and/or protocols would have helped?

- What policies and protocols need to be clarified?
- What policies and protocols are missing?

B. What [vendor] or MBTA RIDE resources would have helped?

C. Is there anything else you want to share about the experience?

4. How comfortable, knowledgeable and equipped are you to assist front-line staff who are responding to victims of sexual violence?

A. Does whether or not the sexual violence occurred on the RIDE impact your comfort or ability to assist? If so, how?

B. If the person committing the sexual violence was a customer would that impact your comfort or ability to assist? If so, how? If the person committing the sexual violence was an employee of [vendor] would that impact your ability to assist? If so, how?

C. What training would help you feel more comfortable, knowledgeable and skilled to assist?

5. What do you see as the gaps in knowledge and skills regarding front-line staff's ability to respond to victims of sexual? What training related to this topic is provided at [vendor]? How do you evaluate the effectiveness of the training?
  
6. What are the strengths and challenges of MBTA structures for communication between leadership, supervisors and front-line staff?
  - A. How would you find out about challenges/barriers that front-line staff experience when responding to victims of sexual violence?
  - B. If you saw a need for policy change, how would you go about influencing change?

## **RIDE Drivers**

Our collaboration is defining sexual violence as a wide spectrum of sexual acts, including acts that may or may not be defined in criminal law, that is non-consensual, forced or coerced. Coercion may be physical, mental, emotional or due to a power imbalance between the person who is offending and the victim. A person is not able to consent if they are incapacitated or if they have a mental disability that results in the inability to consent. Sexual violence may or may not involve touching. Examples of sexual violence include, but are not limited to rape, unwanted sexual touching, excessive or inappropriate bathing or care of breasts and/or genital area, verbal sexual harassment, and forcing someone to watch sexual acts.

1. In your role, how would you typically become aware of an incident of sexual violence at the [vendor] (e.g. witnessing it, a customer tells you, you're contacted as part of an investigation?)

For the next two questions, we will be asking you about your experiences responding to victims with disabilities. In many cases, there were likely both things that went well and things that were challenging. If you have not responded to a disclosure of sexual violence from a customer, please use the following case scenarios to think about your responses.

**Scenario 1:** Upon pick-up, a customer who uses a wheelchair discloses to you that the driver who drove her to her destination in the morning rubbed up against her breasts unnecessarily when applying the lap/shoulder belt.

**Scenario 2:** A customer discloses that another customer has been making sexually inappropriate gestures at her.

2. Think about a time when things went well when you were responding to a victim after you became aware that a customer had been sexually assaulted (either by witnessing the incident, the customer disclosing the incident, or your having reason to believe...).

What things were in place within [vendor] to help you?

- A. In what ways did trainings that you attended help?
- B. In what ways did RIDE policies and procedures help?
- C. What did the [vendor] and/ or your supervisor do to support you in responding to victims with sexual violence?
- D. What aspects of working with the Transit Police Department were helpful?
- E. Is there anything else you want to share about the experience?

3. Think about a time when things did not go well for you when you were responding to a victim after becoming aware (either by witnessing the incident, the customer disclosing the incident, or your having reason to believe...) that a customer/rider had been sexually assaulted.

A. What did not work well?

- If there were limitations in your work with the Transit Police Department, what were the limitations?

B. What would have helped you?

- What training could have helped?
- What RIDE policies and/or protocols would have helped?
  - What policies and protocols need to be clarified?
  - What polices and protocols are missing?
- In what ways could additional supervisor and/or support from [vendor] have helped?

C. Is there anything else you want to share about the experience?

4. What are the concerns that you think customers might have about disclosing experiences of sexual assault, including verbal harassment, at the RIDE (e.g. loss of privacy and confidentiality, loss of access to transportation options, mandated reporting, concern about inexperience with sexual violence, not being believed or judged, concern about being treated differently)?

- A. What are some personal concerns victims might have?
- B. What concerns might victims have around interactions with employees after disclosing sexual violence?

5. What concerns do you think employees have about reporting or getting involved in a disclosure of sexual violence at [vendor] (e.g. paperwork, being implicated or implicating a coworker, time, lengthy investigation)?

6. How comfortable, knowledgeable and equipped are you to respond to victims of sexual violence?

- A. Does whether or not the sexual violence occurred on the RIDE impact your comfort or ability to respond? If so, how?

- B. If the person committing the sexual violence was a customer would that impact your comfort or ability to respond? If so, how? If the person committing the sexual violence was an employee of [vendor] would that impact your comfort or ability to respond? If so, how?

- C. What training would help you feel more comfortable, knowledgeable and skilled to respond to victims with disabilities?

7. What do you think are effective ways for you to learn about changes to policies and protocols at the MBTA/RIDE?

## **RIDE Vendor Reservationists/Dispatchers**

Our collaboration is defining sexual violence as a wide spectrum of sexual acts, including acts that may or may not be defined in criminal law, that is non-consensual, forced or coerced. Coercion may be physical, mental, emotional or due to a power imbalance between the person who is offending and the victim. A person is not able to consent if they are incapacitated or if they have a mental disability that results in the inability to consent. Sexual violence may or may not involve touching. Examples of sexual violence include, but are not limited to rape, unwanted sexual touching, excessive or inappropriate bathing or care of breasts and/or genital area, verbal sexual harassment, and forcing someone to watch sexual acts.

For the following set of questions we will be providing case scenarios about victims of sexual violence and victims with disabilities. If any of you have experiences responding to a victim of sexual violence or a victim of sexual violence who is a RIDE customer, please share those experiences. If you have not, please use the case scenario to think about your responses.

**Scenario:** A customer who uses a wheelchair discloses to you that the RIDE driver who drove her to her destination rubbed up against her breasts unnecessarily when applying the lap/shoulder belt.

1. What has prepared you to be able to address a disclosure of sexual assault?

A. How would you know what to say to the customer immediately after the disclosure?

- What policies and protocols help you?
- What training helps you?
- What supervisor support helps you?

B. How would you know what steps to take to address the immediate safety of the victim?

- What policies and protocols help you?
- What training helps you?
- What supervisor support helps you?
- (Note to facilitator: If participants only talk about calling the police, ask what steps they would take prior to police involvement or prior to police arriving at the scene)

C. How would you determine who else at the [Vendor] to involve and how to get them connected to the situation?

- What policies and protocols help you?
- What training helps you?
- What supervisor support helps you?

D. How do you determine whether to and what to document?

- What policies and protocols help you?
- What training helps you?
- What supervisor support helps you?



E. Is there a difference between how you would address a disclosure of sexual violence if the person who committed the assault is a customer vs. an employee of the [vendor] If so, how would you know what to do differently? What would be the different challenges of addressing a disclosure of an assault committed by an employee?

2. What else would you need from [vendor] to be able to address a disclosure of sexual violence?

A. What policies and procedures need to be clarified?

B. What policies and procedures are missing?

C. What additional supervisor and/or [vendor] support would you need?

3. Change the scenario to one in which a customer discloses that another customer has been making sexually inappropriate gestures at her. (Or think of a time when you responded to a disclosure that you thought was not clear cut.)

A. What challenges would you experience?

B. Would you do anything differently? If so, what?

4. What do you believe are concerns that customers like the ones in the scenarios above may have regarding disclosing experiences of sexual assault on THE RIDE (e.g. loss of privacy and confidentiality, concerns about lack of experience from staff regarding sexual violence, not being believed, being judged, concerns about being treated differently from other customers)?

A. What are some personal concerns victims might have?

B. What concerns might victims have around interactions with employees after disclosing sexual violence?

5. What do you think are effective ways for you to learn about changes to policies and protocols at the [vendor]?

**Appendix J:**  
**People with Disability, Survivor and  
Survivor with Disability Questions**



## **People with Disabilities**

1. As a person with a disability, where do you go to find out about services (such as medical, housing, counseling services etc)? What are your suggestions for ways that agencies can let people with disabilities know about their services?
  
2. In your experience using services as a person with a disability what has gone well?
  - A. In what ways were services accessible?
  - B. What made you feel comfortable asking for accommodations?
  - C. What gave you a sense of control?
  - D. What were the attitudes of staff?
  - E. What were the interactions with staff like?
  - F. What language did people use that made you feel comfortable?
  
3. In your experience using services as a person with a disability what has not gone well?
  - A. In what ways were services not accessible?
  - B. What made you feel uncomfortable asking for accommodations?
  - C. What made you feel like you didn't have control?
  - D. What were the attitudes of staff?
  - E. What were the interactions with staff like?
  - F. What language did people use that made you feel uncomfortable or unwelcome?

4. How can an organization communicate that they are willing and able to serve you?

- A. How can their physical environment (e.g. building, office space etc) communicate this?
- B. How can their materials, websites, social media etc communicate this?
- C. How can staff communicate this?
- D. How can they communicate that they are accessible?
- E. How can they communicate that they welcome requests for accommodations?
- F. How can they communicate that they have experience or know how to work with people with disabilities?

5. How do organizations communicate that they are not welcoming to you?

- A. How does their physical environment (e.g. building, office space etc) communicate this?
- B. How do their materials, websites, social media etc communicate this?
- C. How does staff communicate this?
- D. How do they communicate that they are not accessible?
- E. How do they communicate that they do not welcome requests for accommodations?
- F. How do they communicate that they do not have experience or know how to work with people with disabilities?

6. As a person with a disability, what makes services easy to connect to and use?
- A. What would be important to you in terms of the location of the service?
  - B. What would be important to you in terms of the business hours of the service?
  - C. What kind of information would you like to know about the agency before getting services?
  - D. How would you like to schedule appointments for services (e.g. walking in, phone call, over e-mail/web/text etc)?
  - E. What kind of support, if any, would you like for getting connected to a new service (e.g. someone making the call with you, going with you etc)?
  - F. Other?

In addition to working towards improving services, our collaboration includes a focus on law enforcement and public transportation. The next two sets of questions will specifically address these two areas.

7. What do you think police can do to help people with disabilities feel comfortable with reporting a crime?
- A. How can their materials, websites, social media etc. communicate that they are welcoming to people with disabilities?
    - How do they communicate that their police department is accessible?
    - How do they communicate that they are welcoming to requests for accommodations?

- B. What could police officers do to make you feel comfortable if you were the victim of a crime?
- C. What might police officers do that would make you feel uncomfortable if you were the victim of a crime?

8. Next we want to talk specifically about your sense of safety in regards to using public transportation systems such as subways, paratransit systems like THE RIDE, cabs, trains etc:

- A. As a person with a disability, when using public transportation what conditions make you feel safe?
  - How does the physical space (e.g. lighting, cameras, number of people around etc) make you feel safe?
  - What do drivers and/or other transportation employees say and do to make you feel unsafe?
    - What do drivers and/or other transportation employees do that lets you know your privacy is protected?
  - What do other passengers say and do to make you feel safe?
  
- B. As a person with a disability, when using public transportation what conditions make you feel unsafe?
  - How does the physical space (e.g. lighting, cameras, number of people around etc) make you feel unsafe?
  - What do drivers and/or other transportation employees say and do that make you feel unsafe?



- What do drivers and/or other transportation employees say or do that make you concerned about your privacy?
- What do other passengers say and do that make you feel unsafe?

C. If you've been assisted by a driver or transportation employee (e.g. securing your wheelchair, getting in or out of the vehicle etc) what have drivers/transportation employees done to make you feel more comfortable and respected? What have they done that made you feel uncomfortable?

D. If you were to express concerns or make a complaint, what can the transportation provider say or do to let you know that they're taking the complaint seriously? What might they say or do that would indicate that they weren't taking your complaint seriously?

9. Do you have any additional recommendations to service providers, police or transportation providers about what they can do to be more disability-friendly?



## Survivors of Sexual Violence

1. As a survivor, how did you find out about services related to sexual violence? What do you think are the best ways for survivors to find out about these services?
  
2. How can an organization communicate that they are welcoming and safe to receive disclosures of sexual assault?
  - A. How can their physical environment (e.g. building, office space etc) communicate this?
  - B. How can their materials, website, social media etc. communicate this?
  - C. How can staff communicate this?
  - D. How can they communicate that your privacy and confidentiality is important to them?
  - E. How can they communicate that they have experience or know how to work with survivors of sexual assault?
  
3. When you told people, including service providers, about your experience of sexual assault, what did people say or do that was helpful?
  - A. What did people say or do that indicated that your privacy and confidentiality was important to them?
  - B. What did people say or do to help you feel believed?
  - C. What did people say or do to help you feel not judged?
  - D. What did people say or do to help you feel in control?

4. When you told people, including service providers, about your experience of sexual assault, what did people say or do that was not helpful?

- A. What did people say or do that made you concerned about your privacy and confidentiality?
- B. What did people say or do to make you feel like you weren't believed?
- C. What did people say or do to make you feel judged?
- D. What did people say or do to take away your sense of control?

5. As a survivor, what makes services easy to connect to and use?

- A. What would be important to you in terms of the location of the service?
- B. What would be important to you in terms of the business hours of the service?
- C. What kind of information would you like to know about the agency before getting services?
- D. How would you like to schedule appointments for services (e.g. walking in, phone call, over e-mail/web/text etc)?
- E. What kind of support, if any, would you like for getting connected to a new service (e.g. someone making the call with you, going with you etc.)?
- F. Other?

In addition to working towards improving services, our collaboration includes a focus on law enforcement and public transportation. The next two sets of questions will specifically address these two areas.

6. First we'll talk about questions specific to reporting to the police:
  - A. If you reported to the police, what about the interaction made you feel comfortable or safe? What made you feel uncomfortable or unsafe?
  - B. If you didn't report, what were your concerns about reporting?
  - C. How could law enforcement communicate that they would be a welcoming and safe place for reports of sexual assault?
  
7. Now we'll talk about questions specific to transportation:
  - A. If you use (or used to use) transportation systems such as subways, buses, cabs, trains etc. what, if anything, changed for you after the sexual assault?
    - What, if anything, changed about the way you used public transportation?
    - What, if anything, changed about your perspective about using public transportation?
  
  - B. As a survivor, when using public transportation (e.g. subway, buses, cabs, trains etc), what conditions make you feel safe?
    - How does the physical space (e.g. lighting, cameras, number of people around etc) make you feel safe?
    - What do drivers and other transportation employees say and do to make you feel safe?

- What do other passengers say and do to make you feel safe?

C. As a survivor, when using public transportation what conditions make you feel unsafe?

- How does the physical space (e.g. lighting, cameras, number of people around etc) make you feel unsafe?
- What do drivers and other transportation employees say and do to make you feel unsafe?
- What do other passengers say and do to make you feel unsafe?

D. If you were to express concerns or make a complaint, what can the transportation provider say or do to let you know that they're taking the complaint seriously? What might they say or do that would indicate that they weren't taking your complaint seriously?

8. Do you have any additional recommendations to service providers, police or transportation providers about what they can do to be more survivor-friendly?

## **Survivors with Disabilities**

1. How did you find out about sexual assault services? How did you get connected to sexual assault services?

2. As a survivor with a disability, what were some of the concerns that you had when you were thinking about disclosing the sexual assault to someone?

A. If you knew about the possibility of mandated reporting prior to disclosing or seeking services, how did this impact your decision-making process regarding whether to disclose or seek services?

B. If a report was made to DPPC, what was helpful to you about the process of making the report? What would be your recommendations for making the process of reporting as helpful as possible to survivors?

3. How did people respond to you when you disclosed the sexual assault?

A. Do you think attitudes about disability (such as attitudes about disability and sexuality) impacted the response you received? If so, how?

B. What did people say or do that was helpful to you (made you feel believed, not judged, in control)?

C. What would be your recommendations for improving response to disclosures of sexual assault?

4. The following questions are specific to your experience using sexual assault services:

A. If you called a hotline or tried to call a hotline:

- As a survivor with a disability, what went well with your experience using the hotline?
- What would be your recommendations for how hotline services can be improved for survivors with disabilities?
- What would be your recommendations for how hotline services can be more accessible for survivors with disabilities?

B. If you had evidence collected (rape kit) at a hospital or tried to access this service:

- As a survivor with a disability, what went well with your experience getting evidence collected?
- What would be your recommendations for how the evidence collection process could be improved for survivors with disabilities?
- What would be your recommendations for how the evidence collection process can be more accessible for survivors with disabilities?

C. If you received or tried to access counseling services specific to the sexual assault:

- As a survivor with a disability, what went well with your experience getting counseling?
- What would be your recommendations for how counseling services could be improved for survivors with disabilities?



- What would be your recommendations for how counseling services can be more accessible for survivors with disabilities?

D. If you received or tried to access legal advocacy and/or case management services (e.g. financial assistance, housing etc) specific to the sexual assault:

- As a survivor with a disability, what went well with your experience getting legal advocacy/case management services?
- What would be your recommendations for how legal advocacy/case management services could be improved for survivors with disabilities?
  - What would be your recommendations for how legal advocacy/case management services can be more accessible for survivors with disabilities?

5. The following questions are specific to using disability services:

- A. As a survivor with a disability what made you feel comfortable and safe using the disability service(s)?
- B. What did staff do or say that made you feel like they understood how trauma could impact survivors?
- C. What are your recommendations for how disability services can better support survivors with disabilities?

6. The following questions are specific to reporting to police:

- A. As a survivor with a disability what concerns did you

have about reporting to the police?

- B. As a survivor with a disability, if you reported to the police, what went well with your experience reporting?
- C. What would be your recommendations for how police could make the reporting process more accessible to survivors with disabilities?
- D. What would be your recommendations for how police could improve their response to survivors with disabilities?

7. Next we want to talk specifically about your sense of safety in regards to using public transportation systems such as subways, paratransit systems like THE RIDE, cabs, trains etc:

- A. As a survivor with a disability, when using public transportation what conditions make you feel safe?
  - How does the physical space (e.g. lighting, cameras, number of people around etc) make you feel safe?
  - What do drivers and/or other transportation employees say and do to make you feel safe?
    - What do drivers and/or other transportation employees do that lets you know your privacy is protected?
  - What do other passengers say and do to make you feel safe?
  - What recommendations do you have for what public transportation systems can do to help survivors with disabilities feel safer?

B. If you've been assisted by a driver or other

transportation employee (e.g. securing your wheelchair, getting in or out of the vehicle etc) what have drivers/transportation employees done to make you feel comfortable and respected? What could drivers/transportation providers do to help survivors with disabilities feel more comfortable and respected?

C. If you were to express concerns or make a complaint, what can the transportation provider say or do to let you know that they're taking the complaint seriously? What could drivers/transportation providers do to let survivors with disabilities know that their concerns are being taken seriously?

8. Do you have any additional recommendations to service providers, police or transportation providers about what they can do to be more welcoming to survivors with disabilities?