A LOOK AT WOMEN IN CAMBRIDGE NOW

The Women's Data Workshop: Preliminary Findings and Recommendations for City Departments and Organizations to Improve Programming, Policy, and Funding Opportunities

In order to successfully deliver meaningful services, access, and programs to women and girls in the community, informed and effective policy and programming is essential. Particularly in times of scarce and disappearing resources, principal strategies must include collaboration and precision. In late 2008, sixty Cambridge community stakeholders and policy and program leaders attended the Women's Data Workshop to analyze and interpret the data in the Report on the Status of Women and Girls in Cambridge. Their combined expertise and experience produced three immediate strategies to increase general program impact, and also initial recommendations in five key areas—Economic Issues, Older Women, Women’s Health, Women’s Safety, and Young Women/Girls.

Three Strategies

1. **INCREASE INFORMATION SHARING**
   Capitalize on the community and professional connections made at the workshop. Provide a web-based tool for community-wide dialogue, sharing best practices, offering technical/collective assistance, and strategy. (The Cambridge Women’s Commission has created cambridgewomen.blogspot.com to start this conversation.)

2. **INCREASE GENDER-BASED DATA COLLECTION**
   The most marginalized populations—homeless women and children, immigrant populations, those in the lower socio-economic groups—are not sufficiently represented in the current data. Develop protocol and methods that enable agencies and City departments to collect better data.

3. **INCREASE ASSESSMENT AND EVALUATION**
   Expand program assessment and evaluation to include gender. Create an assessment tool for organizations and City departments to objectively gauge their gender climate and improve program outcomes.
## Initial Findings and Recommendations

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<th>ECONOMIC ISSUES</th>
<th>OLDER WOMEN</th>
<th>WOMEN’S HEALTH</th>
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<td><strong>Finding</strong></td>
<td>There is a lack of available data on housing services, career development programs, and child care access for homeless women, women living in poverty, and immigrant women in Cambridge.</td>
<td>A growing population of aging women will increase the number of elders looking for specific services from providers, such as the Senior Center, that are currently not offered.</td>
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| **Recommendation** | • Train women within these populations in data collection to facilitate a larger, more relevant picture of the community’s hard to reach populations  
• Change the definition of “poverty” by moving from the federal poverty threshold to Cambridge’s Self-Sufficiency Standard | • Target program expansion (and outreach) to specific elder populations – GLBT, grandparents raising grandchildren, etc.  
• Create better communication/outreach and develop enhanced programs for “active/well” seniors that include intellectual stimulation, physical activities (biking hiking, skiing, etc.) | • Create a public awareness campaign that broadens the concept of health and increases the information available to women about various services such as midwifery, dental, substance abuse, psychiatric  
• Host health data forums that target specific populations of women—homeless, immigrant, etc—to hear their concerns and better understand their experience interfacing with various health services  
• Design better access to “one-stop shopping” within the system and provide a more woman-centered setting with an added focus on self-care and holistic health |

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<th>WOMEN’S SAFETY</th>
<th>YOUNG WOMEN/GIRLS</th>
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<td><strong>Finding</strong></td>
<td>Excellent safety programs and services exist in Cambridge, however there are gaps in service delivery and these programs are not reaching those most in need.</td>
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| **Recommendation** | • Mandate health education and/or violence prevention as part of core curriculum in all Cambridge public schools  
• Create a Violence Prevention Specialist position at Cambridge Housing Authority  
• Require batterers with restraining orders to attend intervention groups  
• Include violence prevention training for all providers working with families | • Investigate and respond to the connection between depression and other risks factors, such as substance abuse, witness to violence, and poverty  
• Cultivate comprehensive mentoring programs that include 1:1 relationships and draw on other students as role models; focus on outreach and recruitment  
• Train teachers and administrators about the signs of depression—include it in other on-going, mandatory trainings |