



MEASURING THE ECONOMIC IMPACT OF COVID-19 ON SURVIVORS OF COLOR

**Research and findings
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me too.

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FROM

TABLE OF CONTENTS

LETTER FROM THE EXECUTIVE TEAMS	1
INTRODUCING OUR STUDY	4
STUDY FINDINGS	7
Key Findings	8
Qualitative Findings	11
METHODOLOGY	13
DEMOGRAPHICS	15
MOVING FORWARD	17
Predictive Value of Findings	18
Action Plan	19
APPENDIX	23
Glossary of Terms	24
References	27

A Letter from the Executive Teams



Tarana Burke



Dani Ayers



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Since March, the COVID-19 pandemic has illuminated the stark racial, gender, and socioeconomic health inequalities that have always existed in the U.S.

Black and Brown Americans are dying at much higher rates from COVID-19 than white Americans are. People of color are more likely to hold jobs that require them to put their lives at risk every day as essential front-line industry workers. Employment has dropped sharply, with Black and Latinx women facing the largest job losses. Monthly poverty rates have consistently increased since February 2020, and communities of color face the greatest poverty gaps.¹

This type of devastation within communities of varying marginalized experiences called us to question: what specifically has this crisis meant to us, women of color, who are the most vulnerable?

Little research has been done to explore the effects of structural racism on survivors in the wake of this global health crisis. The fiscal impact of sexual violence (SV) is staggering as survivors are already facing economic devastation. Prior to the pandemic, survivors were already facing economic devastation. Up to 60% of survivors of intimate partner violence (IPV) lose their jobs as a result of IPV, and 77% of survivors report that their harm-doer has interfered with their employment.² Pre-pandemic, survivors of sexual and intimate partner violence also faced a range of social disadvantages related to financial well-being and the ability to recover from violence. Housing insecurity, medical care affordability, and economic insecurity posed significant structural burdens for survivors and for their healing journeys, especially for Black and Brown women.

Then came COVID-19. As organizations on the front lines of advocacy for survivors, 'me too.' and FreeFrom took action to support those who are disproportionately impacted by SV, IPV, and the pandemic. We produced [COVID-19 response guides](#) and a safety fund to support the immediate needs of survivors. But we wanted to do more. Disrupting the systems of oppression that fuel gender-based violence requires structural change and policies that promote long-term solutions, especially for survivors of color, who face a nexus of oppressions that amplify the effects of violence in our lives.

This is why we are undertaking meaningful policy change grounded in survivor-led research. This meant starting from the ground up. So between June 27, 2020 and July 23, 2020, 'me too.,' FreeFrom and a team of trusted researchers led by Dr. Elena Ruíz of Michigan State University surveyed 737 people from across the U.S. about their status as survivors and the financial impacts of the pandemic in their lives. Nearly 85% of respondents identified as survivors of SV and IPV.

What we learned was sobering—but not surprising. The intersections of racism and economic inequality impacted women of color the most during COVID-19.

Our data show that survivors of color who are essential workers are especially at risk of facing pronounced food and housing insecurity during the COVID-19 pandemic with nearly twice as many survivors of color experiencing high economic insecurity during the pandemic compared with white survivors. White women have access to significantly more financial resources than Black and Brown women do. Survivors of color who have experienced financial abuse are at greater risk than white survivors of halting their education during the COVID-19 pandemic due to their financial situation. In fact, Black and Brown women of color survivors are at the greatest risk of being unable to pay multiple bills due to the impacts of COVID-19.

The pandemic poses a dire threat to the well-being and economic futures of survivors who are most marginalized. Addressing the devastating socio-economic effects of COVID-19 on survivors of color requires social and political investment in our lives. This takes more than a one-time \$1,200 stimulus check.

Our report makes seven policy recommendations for addressing the socio-economic effects of COVID-19 on survivors of SV and IPV. These include investments in housing, healthcare, childcare, and programs that enable survivors' financial freedom, but they are just the beginning.

Black and Brown survivors are uniting against systems of oppression and speaking up for what we need. Because we are advocating for ourselves, it is imperative that the people also advocating for us understand the consequences of this pandemic. We must make a commitment to center Black and Brown survivors and their needs in our movement. This report is one way to do just that.

This report is dedicated to the survivors who took time to complete our survey. We thank you for sharing your truth, and remind you that by doing so, you are not just shaping and documenting your own narrative, but you are also helping to speak for other survivors who can't. Together, there is power—both cultural and political—in our collective voices.

In solidarity,

Tarana Burke, Founder of 'me too.'

Dani Ayers, CEO of 'me too.'

Sonya Passi, Founder & CEO of FreeFrom

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2. Ridley, E. (2005). Domestic Violence Survivors at Work: How Perpetrators Impact Employment. Maine Department of Labor & Family Crisis Services. https://www.maine.gov/labor/labor_stats/publications/dvreports/survivorstudy.pdf

INTRODUCING OUR STUDY



The social and economic impact of COVID-19 (Coronavirus Disease 2019) has been especially hard for survivors of sexual violence (SV) and intimate partner violence (IPV) in the U.S.

The scale and magnitude of the pandemic has reverberated across many of the health and financial sectors that are correlated with an individual's ability to seek care or engage in recovery from violence, from access to medical services to financial resources for safe housing. Unemployment, unsafe work, food and housing insecurity, economic precarity, and health insecurity place heavy burdens on populations already facing trauma from violence. This creates a "collision of crises" (Goodman Smyth, Borges & Singer, 2009) that has the potential to negatively impact the long-term outcomes of those who experience SV and IPV for generations to come.

The intersections of this collision with *racial inequality* are even more alarming. When broken down by race and gender, our results reveal a stark picture of how COVID-19 has financially impacted survivors of color. Data shows that COVID-19-related financial insecurity is greatest *among Black and Brown women survivors*, and that financial security enables safety by reducing the likelihood of returning to a harm-doer. We also show that survivors of color who are essential workers are especially at risk of facing significant food and housing insecurity. For example, among survivors, *8 out of 10 essential workers* of color are facing food insecurity under COVID-19 compared to 5 out of 10 white essential workers. A similar pattern is evident in housing insecurity and patterns of interruption to asset-generating resources, such as education. The stakes could not be any higher. Survivors already face significantly higher burdens of material insecurity when compared with the average American (Doyle, Durrence, & Passi, 2020). The multiplicative and compounding socio-economic effects of COVID-19 on survivors of color represents a call to action and social investment in survivors' lives that cannot wait.

Structural Inequality and COVID-19

A range of known socio-structural factors impact the observations in this study. Systemic racism and racialized poverty are socially produced structural determinants that shape health outcomes in infectious disease outbreaks. They also negatively influence outlooks for recovery from physical, economic, and emotional trauma produced by these outbreaks. Emerging evidence suggests that COVID-19 has *amplified* existing racial inequalities and gender disparities that disadvantage people of color and women unfairly in the U.S. (Chen, Waterman, & Krieger, 2020; Cowper et al., 2020; Hall et al., 2020; Malghan & Swaminathan, 2020).

When we factor in educational advantages in generating household income, only 13% of those with four or more years of college education reported concerns in their ability to pay rent, versus 35% of those with less. The inequality gap in the ability to weather the economic challenges of public crises also carries over to gender. The National Women's Law Center's analysis of monthly jobs reports from the Bureau of Labor Statistics (BLS; Ewing-Nelson, 2020) shows coronavirus-related job losses disproportionately impact women. Yet the intersections of racism and economic inequality have impacted women of color the most during COVID-19. A June study from the Economic Policy Institute (Gould & Wilson, 2020) shows that Black women have had the *largest job losses of any group* (18.8% of Black women workers lost their jobs between February and April 2020), while Latinx women have the *highest unemployment rate* as of April 2020 (nearly 1 in 5 Latinx women are unemployed).

While much remains unknown about COVID-19, health experts agree that "this pandemic has reinforced important truths: inequities related to social determinants of health are magnified during a crisis, and sheltering in place does not inflict equivalent hardship on all people" (Evans, Lindauer, & Farrell, 2020). Crowded housing, unemployment, low-wage work, barriers to healthcare access, and multigenerational household arrangements with elder individuals and younger asymptomatic individuals have been reported as known or possible risk factors for the negative consequences of COVID-19. What is under-emphasized, however, is that these are socially produced disadvantages rather than solely the result of individual choices. Multigenerational housing alone is not a risk factor for negative outcomes in COVID-19 infection and recovery among wealthy white households. The ability to absorb and mitigate the negative impacts of a public health emergency depends largely on *resources* and access to resource-generating assets such as education, credit markets, and personal networks. It also depends on social investment in supporting the recovery of structurally vulnerable populations. Before the novel coronavirus emerged in late 2019, *survivors were already among the most likely to be impacted by socio-structural burdens* (Doyle, Durrenre, & Passi, 2020). Looking at how the picture of COVID-19 disease burden changes when we consider survivors is a key component of addressing the complex needs of individuals, families, and communities impacted by sexual and intimate partner violence during COVID-19 and its aftermath.

STUDY FINDINGS



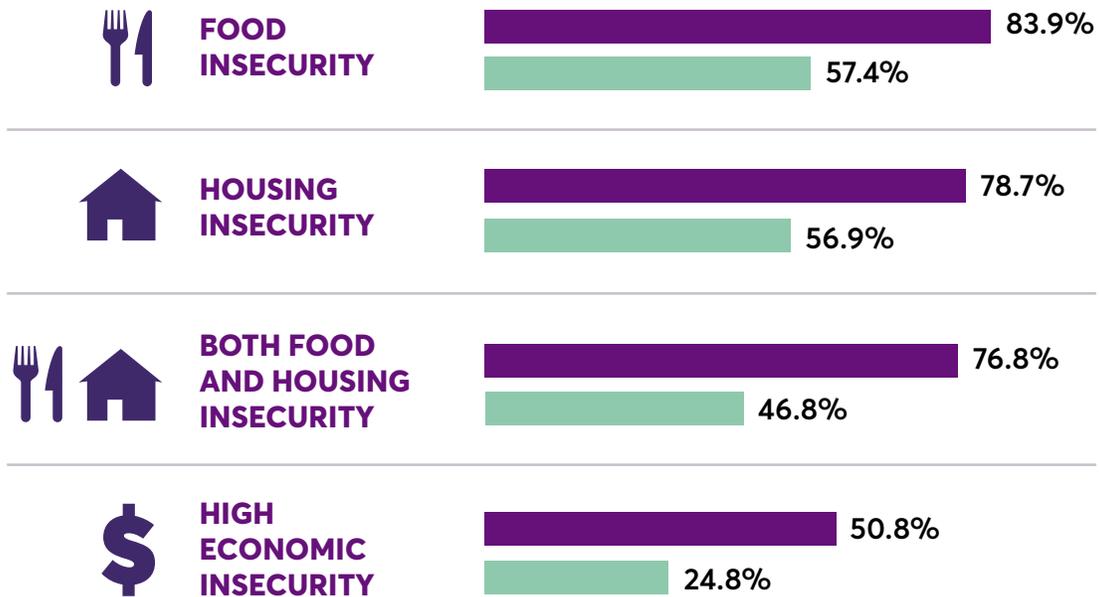
Key Findings

1

Survivors of color are especially at risk of facing pronounced food and housing insecurity during the COVID-19 pandemic

Resource insecurities during COVID-19 among survivor essential workers

■ Essential workers of color
 ■ White essential workers



8 OUT OF 10
essential workers of color are facing food insecurity compared to
5 OUT OF 10
white essential workers

8 OUT OF 10
essential workers of color are facing housing insecurity compared to
6 OUT OF 10
white essential workers

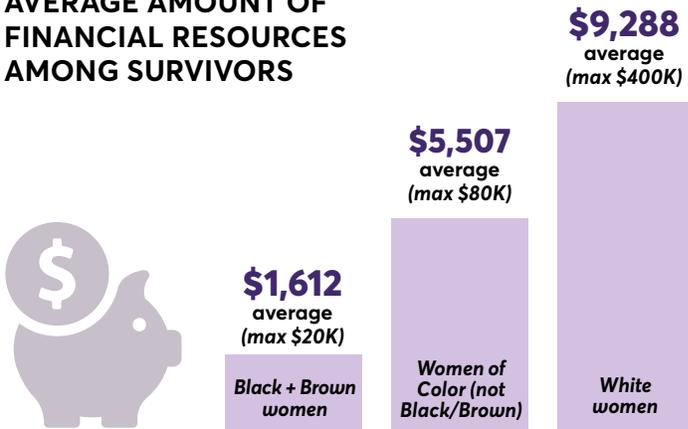
NEARLY TWICE AS MANY
survivors of color experienced high economic insecurity during the pandemic compared to white survivors

ONLY 12.5%
of women of color who are essential workers report experiencing neither food nor housing insecurity during COVID-19 (vs. 30.9% of white women essential workers)

2

Financial insecurity is greatest among Black and Brown women survivors

AVERAGE AMOUNT OF FINANCIAL RESOURCES AMONG SURVIVORS



White women had **5.76x** the average amount of financial resources that Black and Brown women had

Women of color who are not Black or Brown had **3.42x** the average amount of financial resources that Black and Brown women had.*

*Please see our demographics on page 16 for a breakdown of survey respondents by race/ethnicity.

3

Survivors who lack financial resources during the COVID-19 pandemic are at greater risk of returning to a harm-doer

AVERAGE AMOUNT OF FINANCIAL RESOURCES AMONG SURVIVORS WHO

\$3,734 vs **\$8,322**

reported **likelihood** of returning to an abusive partner

reported **no likelihood** of returning to an abusive partner

Women survivors who reported likelihood of returning to an abusive partner had **fewer than half** the financial resources on average than women who reported no likelihood of returning to an abusive partner

4

Experiencing landlord sexual coercion is associated with a greater risk of food and housing insecurity

38.7%
MORE RISK

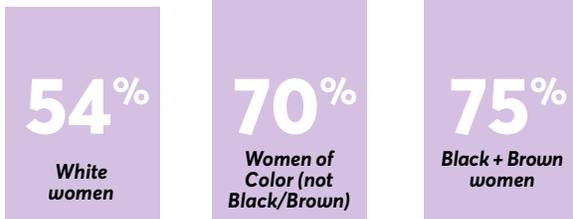


Survivors who experienced landlord sexual coercion were by 38.7% more likely to experience food and housing insecurity than those who did not

5

Survivors of color are at greater risk than white survivors of halting their education during the COVID-19 pandemic. This is especially true for those who have experienced financial abuse.

Survivors who experienced financial abuse and reported that their financial situation would likely cause them to stop or change their education / training programs



A higher portion

of Black and Brown women survivors of color who experienced financial abuse reported that their financial situation would likely cause them to stop or change their education, or other training programs when compared to the proportion of other women of color survivors and their white women counterparts.

6

Black and Brown women survivors are at the greatest risk of being unable to pay multiple bills due to the financial impacts of COVID-19



Survivors unable to pay multiple bills due to COVID-19



The proportion of Black and Brown women survivors who were unable to pay multiple bills due to COVID-19 was **more than twice** that of survivors who were white women or non-Black or Brown women of color.

Qualitative Findings

Participants shared a range of qualitative responses that depicted experiences of resource needs for survivors under COVID-19. Some recurring patterns include the following experiences:

Survivors reported the following resources to be of greatest importance:

- Child support payments
- Student loan debt relief
- Job opportunities for safe work
- Access to critical and family therapy
- Car payment and transportation legal assistance
- Relief for undocumented and underdocumented individuals and families
- Unemployment assistance due to sexual harassment
- Hazard pay for essential workers
- Health insurance and sick day pay
- Relief from 401k tax withdrawal penalty

For financial liabilities of greatest concern due to past inability to pay or anticipated inability to pay:

- Credit card bills
- Car payment and repair bills
- Student loan, tuition, and educational materials
- Health, house, car, and life insurance
- Groceries
- Moving expenses
- Legal fees
- Gas and electric
- Counseling fees

Participants also had the opportunity to answer open-ended questions that paint a compelling picture of what economic hardships survivors are facing during COVID-19. These were some of their answers:

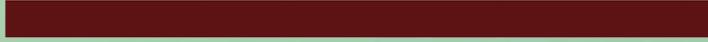
"I am about to be foreclosed on and be homeless."

"The roof is caving in and my house is filled with mold but I have nowhere to go."

"I have nowhere to go and no money to move."

"I'm not sure what to do."

METHODOLOGY



Between June 23, 2020 and July 27, 2020 the survey was distributed online through a link generated by Qualtrics, an online survey platform. The link was available on the 'me too.' official website (metoomvmt.org) and was distributed via social media platforms, e.g., Twitter. A total of 737 individuals consented to participate in the study. All participants were 18 years or older.

QUANTITATIVE ANALYSIS:

SPSS version 23 and Excel were used to code for variables of interest (IBM Corp, nd; Microsoft Corporation). Final analyses were performed on SPSS version 23.

QUALITATIVE ANALYSIS:

Final analyses were performed using an intersectional framework for public health research (McGibbon & McPherson, 2011).

DEMOGRAPHICS



Demographics presented below represent the 657 surveys from survivors only.

GENDER	
Women	93.2%
Men	2.3%
Transgender	1.1%
Cisgender	10.8%
Genderqueer/genderfluid	1.8%
Nonbinary	2.9%
I prefer to self-describe	1.5%
I prefer not to answer	0.6%

ETHNICITY/RACE	
Alaskan Native/ Native American	4%
Asian	4%
Black/ African Descent	13.2%
Brown Latinx	3.3%
Hispanic	9.6%
Middle Eastern	1.7%
Native Hawaiian or Pacific Islander	0.5%
White	62.7%
I prefer to self-describe	6.4%
Prefer not to answer	2.3%

RESIDE IN THE UNITED STATES	
Yes	87.1%
No	12.0%
Prefer not to answer	0.8%
Missing	0.2%

AGE	
18-24	17.5%
25-29	12.9%
30-39	22.1%
40-49	19.5%
50-59	16.3%
60-64	6.1%
65+	5.6%

ESSENTIAL WORKER STATUS	
Yes	29.1 %
No	67.1 %
Did not know	2.7%
Prefer not to answer	0.9%
Missing	0.2%

MOVING FORWARD



Predictive Value of Findings

One thing we know about disasters is that they not only exacerbate the impacts of structural inequalities, they *entrench* them. They also remove many of the safety nets available and limit the exit strategies out of situations produced by interlocking structural oppressions. The value of education as a possible pathway of economic mobility, for instance, is well-established. The COVID-19 pandemic has disrupted educational opportunities across populations, but the effects on education for women of color survivors has been especially pronounced. A full three quarters of Black and Brown women survivors who had experienced financial abuse reported that the financial effects of the pandemic were likely to cause them to stop or change their education or other training programs. The pandemic is acting as a conduit for the harms of structural oppression. It is amplifying and exacerbating the material harms caused to women of color by the intersection of patriarchy and racialized capitalism. And it is removing and blocking many of the already very limited ways of escaping the racial, economic, and gender-based harms that are available to those made most vulnerable by systems of exploitation and abuse. Decades of gains in trauma-informed responses to gender-based violence are being slowly but surely rolled back and will continue to be obliterated if we don't act now.

What does it mean to talk about the cost of inaction?

Systems of oppression are not just patterns of inequality—they are stable, resilient, self-correcting structures that manifest harmful material consequences for the most vulnerable across our social institutions. And the pandemic is currently strengthening and shoring up the systems of oppression that structurally produce these harms predictably and reliably for particular populations. Given what we know about how structures of oppression work, we can only expect these harmful outcomes to be reproduced and magnified for decades to come. The need for strategies of material harm reduction and financial resource transfers has never been greater and the stakes have never been higher. Failure to invest in Black and Brown women and girl's futures is problematic in unique ways that elicit known and preventable harms. We need action plans that move our society forward in producing *real commitments* to the economic freedom and holistic well-being of survivors of IPV and SV.

Action Plan

Our calls for healing and change are highlighted in 7 key actions:

1	2	3	4	5	6	7
Change the federal definition of domestic violence to include economic abuse	Address economic abuse in Violence Against Women Act (VAWA)	Create paid and protected leave for survivors	Provide effective relief for coerced and fraudulent debt	Pass the Survivor Safety Banking Act	Identify and fund resource structures for survivors that remove information barriers	Build capacity by supporting survivor-led initiatives to end sexual violence

Action 1: Change the federal definition of domestic violence to include economic abuse

Call on the new administration and the Department of Justice's Office on Violence Against Women to reinstitute the expansive, Obama-era definition of Domestic Violence to include non-physical violence and behaviors that encompass emotional, psychological, and economic abuse.

Action 2: Address economic abuse in Violence Against Women Act (VAWA)

While 99% of survivors of IPV experience economic abuse, VAWA has never acknowledged or addressed it as a form of IPV. We must call on the next administration and Congress to amend VAWA to address economic abuse by:

- Expanding VAWA's definition of IPV to explicitly include economic abuse
- Reforming funding structure away from a law enforcement framework and towards capacity building for survivors. Divesting funding from law enforcement responses and reinvesting in programs and initiatives that help survivors build financial security includes:
 - Funding economic security programs for survivors including those that create jobs for survivors, offer credit and debt relief, and innovate to meet and support survivors in their individual circumstances
 - Funding direct unrestricted cash assistance programs for survivors
 - Removing funding restrictions on Legal Assistance for Victim grants which prevent attorneys from offering survivors pro bono legal representation in tort claims
 - Requiring that all VAWA grants include enough funding to pay service providers a living wage

Action 3: Create paid and protected leave for survivors

Up to 60% of survivors lose their job as a result of IPV, and 77% of survivors report that their harm-doer has interfered with their employment. This means that in addition to finding survivors jobs, we must also support survivors in keeping their jobs once they are employed. However, no laws require that employers are trained in IPV or economic abuse, and there are no federal protections providing survivors with much-needed paid and protected leave from work to deal with any number of urgent matters relating to IPV. We must call on the next administration and Congress to create paid and protected leave for survivors by amending the Family Medical Leave Act in the following ways:

- Expand eligible grounds for leave to explicitly include IPV, human trafficking, sexual assault, and stalking
- Require covered employers to provide at least 10 days of paid and protected leave to deal with the consequences of abuse that does not deplete accrued sick or vacation days
- Prohibit discrimination and retaliation against employees based on their status as a survivor or their use of the leave
- As called for in the [Survivors' Agenda](#), Expand Family and Medical Leave Act coverage to include paid safe days for all survivors of sexual violence, regardless of duration of employment and size of the employer.

Action 4: Provide effective relief for coerced and fraudulent debt

52% of survivors experience coerced and fraudulent debt averaging \$15,936 a year, with 46% reporting resulting credit damage and another 14% reporting that they were unsure about the state of their credit because they have not checked their credit score. In order to build the financial security they need to stay safe, survivors need access to effective relief for IPV-related debt and the high costs of SV survivorship. However, current federal law as well as the policies and practices of credit reporting agencies, credit card companies, and other creditors, are designed to deal with fraud by *strangers* -- not intimate partners. We must call on the next administration and Congress to provide survivors with effective relief for coerced and fraudulent debt by:

- Amending the Fair Credit Reporting Act and Fair Credit Transactions Act, by:
 - Expanding the definition of identity theft to include IPV-related coerced and fraudulent debt
 - Explicitly removing police report requirements to access relief offered under the Acts and replacing such requirements with alternative certifications that survivors can access and produce outside of interacting with law enforcement or the courts
 - Requiring that credit reporting agency staff is trained in IPV and economic abuse and creates written protocols for dealing with IPV-related coerced or fraudulent debt
 - Creating an Economic Abuse Fraud Alert
- Expanding the Equal Credit Opportunity Act to prohibit discrimination by creditors on the basis of someone's status as a survivor of IPV, including economic abuse

Action 5: Pass the Survivor Safety Banking Act

Only 21% of survivors report having access to a safe and protected bank account because harm-doers are actively monitoring and at times even depleting survivors' online accounts. Without access to secure and protected bank accounts, survivors are trapped in abusive situations as they try to save the money by (for example) hiding cash around their home. We must call on the next administration and Congress to protect survivors when they bank by passing the Survivor Safety Banking Act (modeled after the Senior Safe Act). This Act would require financial institutions to:

- Train management and staff in how to detect, prevent, and respond to economic abuse
- Report suspected cases of economic abuse to federal authorities in order to collect and publish data
- Designate internal teams to handle survivor accounts
- Implement enhanced fraud protections
- Allow survivors to open accounts with ID and address alternatives

The Survivor Safety Banking Act would also provide financial institutions with immunity from regulatory enforcement and private causes of action related to the requirements.

Action 6: Identify and fund resource structures for survivors that remove information barriers which negatively impact the ability to heal from violence.

Survivors face many kinds of structural obstacles when recovering from SV and IPV. One socially-produced obstacle is the damaging public narratives that exist about alleged metrics for survivor's credibility (such as the length of time it took to report, or whether a report was initiated and to whom). These impose undue restrictions on survivors and lack a powerful *counter narrative* that is accessible, resource-driven, and informed by survivors' own experiences. We need paradigm shifts in cultural conversations about SV and IPV that undo the damage caused by the structural harms outlined in this study. *Funding survivor-led research initiatives* like this one, developing accessible terminology and resources for healing like the 'me too.' glossary and healing guides, can all help offer a shared, survivor-centric approach that promotes healing from violence, especially among underserved and marginalized populations who are disproportionately impacted by violence.

Funding research is critical to understanding the scope of survivors' needs and allows us to follow the direction that the data provide.

As this report outlines, survivors need tangible resources to obtain enough independence from the person causing them harm to be able to begin their journey of healing and recovery. Resource funding needs include (but not limited to) the following priorities:

Safe and affordable housing

In October 2020, the [Support Allowing Volume Exception \(SAVE\) for Federally-Assisted Housing Act](#) was introduced to combat some of the economic impact of COVID-19. Though this act is not specific to survivors, focusing on improving access to affordable housing will ultimately be helpful for survivors. Extending and focusing this type of protection and accessibility for survivors beyond COVID-19 will foster survivors' capacity for gaining independence from harm-doers. Increasing housing stability

and safety for survivors is known to increase self-efficacy, higher safety-related empowerment, and decreased depressive symptoms (Sullivan, Goodman, Virden, Strom, & Ramirez, 2018).

Food security

As FreeFrom's research has shown, when survivors are given unrestricted cash, many spend their grant money primarily on food. We need to trust that survivors can and will prioritize their own needs when given financial support and not continue to give them restrictions of how to spend cash assistance.

Childcare support

Passing the Child Care is Infrastructure Act ([H.R. 7201](#)) is another resource funding priority for removing structural barriers to survivors' healing. The act establishes grants for childcare facilities and higher education loan repayment and creates scholarship programs for childcare educators. Providing family support to survivors is an opportunity that will allow survivors to continue their journey of economic independence by supporting a schedule required for maintaining a job.

Action 7: Resource and support survivor-led initiatives to end sexual violence

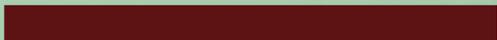
Interrupting the powerful intersection between sexual violence and racial violence requires multi-level strategies and tactics that build systems change in various ways, including policy change and institutional reform. Individuals from all social sectors can each participate in supporting survivor-led initiatives like the Act Too platform, safety fund initiatives, and the Survivors' Agenda, a new international collective for sexual assault survivors that is designed to build coalition and engagement through virtual town halls, kitchen table conversations, and deep listening to survivors. Supporting survivor-led initiatives to determine specific policy changes is critical to a just system of change that is truly inclusive, better supports the needs of survivors, and works to end systemic sexual violence in the U.S. and throughout the world.

As laid out in the Survivors' Agenda:

- All health insurance policies to fully cover mental health services without co-pay, including a range of trauma-informed therapies, community healing services, substance abuse treatment, and harm reduction services, and culturally-competent and identity-affirming services and healers.
- Expand and allow federal funds to be disseminated as direct cash transfers for mental health, medical, holistic, and other healing services.
- Fund the federal Sexual Assault Services Program at \$200 million, a transformative increase from the current appropriation of \$38 million to allow a greater number of survivors to access federally-funded rape crisis centers, and expand the services provided by those programs.
- Provide targeted funding for culturally specific community-based organizations primarily focused on enhancing access to services and well-being for survivors from communities of color, immigrant communities, and other underserved communities.

There is something that all of us can do, and it starts with centering the voices and material conditions of those who have experienced the greatest harm. We need administration and elected officials at both the local and federal levels who will prioritize a remedy to the pandemic and an adequate response to the main source of societal ills that keep us from moving forward and seeing real progress.

APPENDIX



Glossary of Terms

COVID-19: Abbreviation for “coronavirus disease 2019”. In COVID-19, ‘CO’ stands for ‘corona,’ ‘VI’ for ‘virus,’ and ‘D’ for disease. It is a new disease caused by a novel coronavirus that has not previously been seen in humans and spread rapidly throughout the globe in the first quarter of 2020, thus gaining pandemic status by the World Health Organization in March 2020. (CDC, 2020)

Domestic Violence: A pattern of assaultive and coercive behaviors (including physical, sexual, and psychological attacks, as well as economic coercion) in which an individual establishes and maintains power and control over another with whom they have an intimate, romantic, marital, or family relationship.

Economic Abuse: The act of controlling a person’s ability to use, access, or acquire financial resources, or pressuring a person to take on debt.

Economic Insecurity: The material, mental, and social hardships experienced as a result of exposure to adverse economic events, or by the anticipation of the difficulty to recover from them.

Essential Worker: Someone who performs services that are vital to the health and welfare of a population such as healthcare, public safety, food industry, custodial work, and transportation.

Financial Abuse: The act of controlling someone’s ability to use, access, or acquire financial resources such as cash, credit, or savings, or to pressure someone into incurring debt.

Food Insecurity: A household-level economic and social condition of limited or uncertain access to adequate food, including access to nutrient-rich food. (USDA)

Gender: The socially constructed characteristics of individuals (such as women, men, boys, and girls) that ascribe normative roles, behaviors, and social expectations throughout an individual’s life, but which are not fixed, immutable, or reducible to biological categories or genetic determinants.

Gender Identity: An individual’s own sense of their gender, whether they identify with the gender they were assigned at birth, another gender or no gender.

Gender Non-Conforming: Refers to practices of gender expression that do not align with normative expectations for demonstrations of gender as strictly binary under heteropatriarchy.

Healing: The process of restoring wellness beyond physiological processes related to curing in medicine. In trauma-informed practice it is associated with themes of wholeness, identity, and narrative that support the holistic recovery of survivors of violence, including for secondary survivors and the wider net of community relationships affected by violence.

Heteropatriarchy: A system of oppression that positions heterosexuality and cisgender gender identity as normative while enforcing a gender binary. It is a structural mechanism of settler colonial white supremacy that has been used to facilitate Indigenous land dispossession as well as racial oppression.

Housing Insecurity: An umbrella term for the many obstacles people face in obtaining safe and reliable housing, including concerns about affordability, loss of housing for oneself and/or one’s dependents, quality, or discrimination in redlining and mortgage discrimination.

Intersectionality: A framework created by Black women and developed by women of color for

thinking about the ways structures of oppression produce harm for marginalized populations and complex identities, including the non-accidental ways structures of oppression overlap, co-create, and mutually reinforce one another to produce harm.

Intimate Partner Violence (IPV): A form of interpersonal violence. Interpersonal violence refers to violence between individuals and is subdivided into *family and intimate partner violence* and *community violence*. The former category includes child maltreatment; intimate partner violence (IPV); and elder abuse, while the latter is broken down into *acquaintance* and *stranger* violence and includes youth violence; assault by strangers; violence related to property crimes; and violence in workplaces and other institutions. IPV often co-occurs and overlaps with youth violence, elder violence, as well as sexual violence. (World Health Organization)

Life chances: A term used in public health research and the social sciences to refer to the range of opportunities individuals have to improve or maintain their quality of life, and to theorize the disparities that exist among different populations for accessing these opportunities.

Life course: A term used in public health research and the social sciences to refer to the entirety of a person's life context, including the entirety of developmental stages that begin at birth and the social, structural, and cultural contexts that determine a person's situation through these stages.

Misogynoir: The specific forms of anti-Black racialized misogyny that Black women face under white supremacist capitalist heteropatriarchy. The concept was introduced by Moya Bailey and further developed by Trudy on her blog gradientlair.com.

Patriarchy: A society organized through male lineage and inheritance structures that privileges

men and produces social obstacles and disadvantages that reinforce male privilege

Racial Capitalism: The intersection between race and capitalism. It describes the specific mechanisms, variables, and processes that produce economic value and wealth for white populations through the exploitation of peoples racialized as non-white through colonial categories of race and the social enforcement of those categories.

Resource: A tangible good or monetary asset that facilitates effective functioning in society through access to income, savings, credit, and other financial instruments.

Secondary Survivor: A person who is close to a survivor, such as a family member or friend, who may experience trauma or share in some of the side effects survivors of IPV and SV may experience.

Sexual Assault: Any sexual act which is unwanted, obtained through coercion, or for which consent is not given.

Sexual Coercion: Any practices relying on manipulation, gaslighting, emotional abuse, implied threats of harm or loss, and/or use of physical force in order to pressure someone to engage in or accept sexual acts or diminish resistance to them.

Sexual Harassment: A form of sex discrimination that occurs as a result of unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature that in any way affects an individual's ability to perform their job. It violates Title VII of the Civil Rights Act of 1964. (EEOC)

Sexual Violence: Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed, against a person's sexuality using coercion, by any person regardless of their

relationship to the victim, in any setting, including but not limited to home and work. (World Health Organization)

Slow Violence: A form of administrative violence that describes how institutions use administrative systems to enact harm and produce barriers to equity for different populations under the guise of neutral administrative procedures.

Structural burden: The intersection between structural oppression and population burdens in public health research. It describes the impact of overlapping structures of oppression such as systemic racism and sexual violence on populations through metrics such as loss of health from disease, lower quality of life years, financial costs, or risk factors for worse outcomes in public health emergencies.

Survivor: Someone who has experienced non-lethal sexual violence or intimate partner violence in any form and for any duration of time during any stage of their life.

Systems of Oppression: Interdependent sets of political, economic, and social practices, norms, and institutions that subordinate, harm, and exploit historically marginalized groups for the material benefit of dominant groups. Examples include white supremacy, heteropatriarchy, cis-supremacy, and ableism.

Title IX: 'Title nine' is a federal civil rights law passed in 1972 as part of the Education Amendments of 1972 that makes it illegal to discriminate against a person on the basis of sex in any activity funded by the federal government.

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About 'me too.'

'me too.' serves as a convener, innovator, thought leader, and organizer across the mainstream and the grassroots to address systems that allow for the proliferation of sexual violence, specifically in Black, queer, trans, disabled, and all communities of color. Leveraging its model and framework, grounded in existing research and theory, 'me too.' centers individual and community healing and transformation, empowerment through empathy, shifting cultural narratives and practices, and advancing a global survivor-led movement to end sexual violence.

'me too.' International envisions a world free of sexual violence. We assert that the transformation of oppressive systems, narratives, and cultures, grounded in the lived experiences and leadership of survivors, creates space for generative ideas, practices and relationships rooted in love, respect, empathy, and wellness. We imagine communities that are abundant with joy, safety, and resources and committed to radical healing, and we are committed to the work to live toward this vision.

About FreeFrom

FreeFrom is a national organization, based in Los Angeles, whose mission is to dismantle the nexus between intimate partner violence and financial insecurity. FreeFrom believes in the creativity, resourcefulness, and power that each survivor has to achieve financial independence and to build communities that support individual, intergenerational, and collective healing. We also believe that intimate partner violence is a systemic problem in our society which we are severely lacking the infrastructure to address.

FreeFrom's work is to create that infrastructure, by growing the capacity of the anti-violence movement, building tech resources for survivors, creating peer networks that foster survivors' collective power, changing existing laws and advocating for the passage of new and survivor-centered laws at the state and federal level, expanding the data and research that exists to support the field, and bringing in employers, banks, and other institutions as part of the ecosystem working to support survivor's financial security and safety.

FreeFrom is a team of survivors. We are a proudly queer, feminist, and people of color-led organization. Each of us brings unique experiences, insights, and drive to our work to end the cycle of violence.

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