CJI
Imagine a Just Community

July 2026

IDENTITY & BELONGING

Understanding Identity-Based Harm and Hearing Voices for Justice and Healing Across Waterloo Region.

THIS LAND AND OUR DUTY

Community Justice Initiatives is located within what has been colonially named Waterloo Region. The Waterloo Region, as it is currently known, includes the cities of Cambridge, Kitchener, and Waterloo, as well as the townships of North Dumfries, Wellesley, Wilmot and Woolwich. The region sits within 950,000 acres of land that were historically set aside in the Haldimand Treaty of 1874 for the Six Nations of the Grand River. These lands are the traditional territories of the Haudenosaunee, Anishinaabe, and Chonnonton People. The region also lies within the lands protected by the Dish with One Spoon Wampum, an agreement set out between the Anishinaabe Three Fires Confederacy and the Haudenosaunee Confederacy in 1701. The Dish with One Spoon Wampum is intended to be an agreement among all Indigenous peoples and settlers who take residence in the Wampum area:

> "The Peacemaker said that nation leaders should eat from this common dish, sharing one spoon and only taking what each one needs. No knife should be used as there should be no conflict and violence; everyone has an equal right to eat from the dish or harvest from the land's bounty. There should always be something for others and future generations and the plate should be kept clean. Our harvest from and development of the land should be based on ethical, conscious practice as caring stewards." (Chung-Tiam-Fook, 2022)

Historically, white settler researchers have caused great harm to Indigenous peoples in Canada by conducting research on them, instead of with, by, or for them. Endeavors in learning from Indigenous community members through research should be reciprocal and beneficial for all. We have made conscious efforts throughout this project to embed the principle of reciprocity in our engagements with all community members. Resources such as the Indigenous Research Level of Engagement Tool from the First Nations University of Canada and the Indigenous Community Research Partnerships' online training have provided this project's facilitators with guidance on fostering partnerships, using strengths-based approaches, and understanding Indigenous ways of knowing.

PROJECT TEAM MEMBERS

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SUGGESTED CITATION

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HUMAN-CENTRED WORK

We are proud to name that there was no use of artificial intelligence across our project design, engagement, data-collection, analysis, or writing.

STATEMENTS OF POSITIONALITY

I, Jamie (she/her), am a white, Canadian-born settler, descended from German and Scottish settlers. I acknowledge the extent of unearned privilege I have been granted as a white, cisgender, able-bodied, university educated woman from a middle-class family background, and how my positionality while writing this report is shaped by my identity, background, and access to resources. I received my Master's degree in Criminology and Criminal Justice Policy from the University of Guelph in 2023, and I carry a background in the criminal legal system and academia – fields that have historically caused harm as tools of colonization in Canada and beyond. I am committed to research guided by lived experience of identity-based harm and critical analysis of my own biases, and I am welcoming of critical reflections on anything that is written herein.

I, Kamil (he/him), am a racialized, Pakistan-born settler, who immigrated to Canada with permanent residency in 2004. I am Muslim, Queer, and in my 20's. While I am a first-generation immigrant, I acknowledge that the languages, customs, and ways of knowing I leaned into upon arrival were those of colonial legacy; not Indigenous ones and in that way, I see myself as a settler. This truth informs my ethics and sense of duty. I received my Bachelor of Arts in Global Studies and Community Engagement from Wilfrid Laurier University in 2020 and have been practicing and mobilizing restorative justice in response and prevention to identity-based harm since 2022. I recognize my biases towards anti-carceral and non-punitive approaches to justice and am committed to addressing that bias in my centering of voices and needs across identities and experiences of identity-based harm.

ACKNOWLEDGEMENTS

This project was funded by the Region of Waterloo's Upstream Fund. We are grateful to the Upstream Fund's decision-making committee for granting us the resources and freedom to carry out this project.

We extend our sincere gratitude to all of the dedicated professionals at organizations across the region who completed our survey, helped us spread the word about our project, and collaborated with us in facilitating group dialogues. We would not have been able to engage with as many community members as we did without your help.

We are also grateful for the support of our incredible team at Community Justice Initiatives. Your input, encouragement, and energy inspired us as we journeyed through every stage of this project.

Finally, we are incredibly grateful to every community member who completed our survey, welcomed us into your space for a group dialogue, and shared this project among your networks. Your willingness to share your stories is deeply appreciated. The ongoing work to understand, prevent, and respond to identity-based harm in the Waterloo Region would not be possible without the voices of those with lived and living experience.

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BACKGROUND

CJI's Sulah program, a program birthed in collaboration with the Centre for Mutual Wellbeing, has been offering restorative intervention services in local cases of identity-based harm for several years. We have learned from our work in the Sulah program, and from publications from organizations across the Waterloo Region, that widespread identity-based harm exists in our community. It exists in vast and complex ways, in subtle forms and overt forms, in a wide variety of settings, affecting a wide variety of identities.

Still, we recognized significant gaps in what we know about identity-based harm in the Waterloo Region.

Upon receiving funding from the Region of Waterloo's Upstream Fund, we set out to understand:

- What is "identity-based harm"?
- What are the needs for healing and justice among community members who experience identity-based harm?
- What are the needs for accountability and healing among community members who cause identity-based harm?
- What are community members' opinions of current and potential strategies for preventing identity-based harm?

LITERATURE REVIEW

Defining Identity-Based Harm

In terms of definitions written in law, the Criminal Code of Canada includes a definition of hate crime as any of three specific acts:

- Advocating genocide: promoting or committing acts with intent to destroy in whole or in part any identifiable group (Criminal Code, 1985, s. 318).
- Public incitement of hatred: communicating statements in any public place to incite hatred against any identifiable group where such incitement is likely to lead to a breach of the peace (Criminal Code, 1985, s. 319).
- Willful promotion of hatred: communicating statements, other than in private conversation, to willfully promote hatred against any identifiable group (Criminal Code, 1985, s. 319).

These definitions are known to be narrow and require a very high threshold of evidence for conviction (Shafiq, 2022). The Criminal Code also lists hate-motivation in crime as an aggravating factor, meaning sentencing may be increased for any violation of law if it is proven to be motivated by hate, prejudice, or bias (Criminal Code, 1985, s.718.2(a)(i)). In addition to hate crimes and hate-motivated crimes, police in Canada may investigate "hate-motivated incidents", which refers to "incidents rooted in hate, bias, prejudice, or discrimination but are not breaches of any code, charter or law." (Waterloo Regional Police, 2025). The term "hate" has been defined by the Supreme Court of Canada in the case R. v. Keegstra as "an extreme emotion that, if exercised against members of an identifiable group, implies that those individuals are to be despised, scorned, denied respect, and made subject to ill treatment on the basis of group affiliation" (Department of Canadian Heritage, 2024, p.4).

Identity-based harm is not a term officially defined in Canadian legislation, but rather an umbrella that encapsulates a range of harm types, some of which have been officially defined in legislation and some not. Identity-based harm does not refer solely to hate crime, hate-motivated crime, hate-motivated incidents, violent extremism, discrimination, prejudice, or bias – rather, it is an overarching concept that includes all these types of harm, and more. It includes a range of both legal and illegal harms, and therefore, justice, accountability, and healing from these harms may occur through the criminal legal system and outside of it.

LITERATURE REVIEW

The Experience of Identity-Based Harm in Waterloo Region

Existing literature from local organizations has offered insight into how frequently community members experience identity-based harm. For instance, the Centre for Mutual Wellbeing (CMW) collects information through their Anti-Hate Services reporting system on incidents involving hate. The CMW's most recent report shares insights from 2025, in which 289 cases were reported through their reporting system and their online survey (Gordon et al., 2026). Of the cases that came through their reporting system, 41% were classified by CMW staff as "hate incidents", 33% as "hate crimes', 18% as "hate-motivated crimes", 7% as "online hate", and 2% as "discrimination" (Gordon et al., 2026).

The majority of community members who report to the CMW disclosed that they have not reported to the police (Gordon et al., 2026). As such, police-reported data on hate crime does not convey the entire prevalence of identity-based harm in the region. Still, we examine it to narrow in on a portion of local identity-based harm. The Waterloo Regional Police reported 224 hate-motivated crimes in 2025 (Gordon et al., 2026). Police-reported hate crimes in the Waterloo Region have been steadily increasing from 2019-2023, before decreasing slightly from 2023-2025 (Statistics Canada, 2024). Despite this decrease, in 2024 the Waterloo Region had the second highest rate of hate crimes per 100,000 people in Canada, second only to the Ottawa-Gatineau region (Statistics Canada, 2024). Waterloo Region has held one of the top two highest spots for rate of hate crimes in Canada since 2022 (Statistics Canada, 2024).

There is an abundance of literature from local community agencies that paints a detailed picture of identity-based harm in the Waterloo Region. This project aimed to build on the efforts put into previous projects from community members who shared their personal stories of identity-based harm and the research teams who mobilized those stories. Below is a list of sources that provide in-depth analyses of experiences around identity-based harm in our community. This list is non-exhaustive – though we made efforts to conduct a wide-ranging search for sources, literature may still be missing, and new literature continues to be published.

LITERATURE REVIEW

Table 1: Publications About Experiences of Identity-Based Harm in the Waterloo Region

Title	Author(s)	Link
2023 Youth Impact Survey Racial Identity Snapshot	Children and Youth Planning Table of Waterloo Region	https://childrenandyouthplanningtable.ca/wp-content/uploads/2024/11/Racial-Identity-Snapshot-YOUTH-IMPACT-SURVEY-Fast-Facts-FINAL.pdf
Autism & Mental Health Project: Final Report	Counselling Collaborative Waterloo Region (Kelly Reitzel, Allana Boussey, Amanda Wood-Atkinson, Kim Tremblay, Diane McGregor)	https://counsellingwr.ca/wp-content/uploads/2024/07/Autism-Mental-Health-Project-Report-2024-1.pdf
Belonging, Inclusion and Discrimination: 2023 Immigration Survey Results	Waterloo Region Immigration Partnership	https://www.immigrationwaterlooregion.ca/en/resources/Documents/2023-Immigrant-Survey-Snapshots/IS2023_-_Inclusion_Belonging__Discrimination_snapshot.pdf
Breaking the Silence on Hidden Violence: Addressing Hate Crime & Violence Against the LGBTQ Community in Waterloo Region	Waterloo Region Crime Prevention Council (William Walters, Christiane Sadeler, Juanita Metzger)	https://preventingcrime.ca/wp-content/uploads/2015/09/2015-BreakingTheSilence_web.pdf
Conversations of Substance: Youth in Waterloo Region on Issues of Substance Use	Waterloo Region Crime Prevention Council (T. Darisi, G. Van den Daele, Openly, and WRCPC staff)	https://preventingcrime.ca/wp-content/uploads/2019/04/WCPC0658-Report-ConversationsOfSubstance-web.pdf
"Don't Tell Them You're Homeless" Experiences of Gender-Based Violence Among Women Experiencing Homelessness in Waterloo Region	Project Willow Team (Jennifer Gordon, Rachael Walser, Kate Crozier, Roz Gunn)	https://ywkw.ca/wp-content/uploads/2024/06/Project-Willow-Dont-Tell-Them-Youre-Homeless-Impact-Report.pdf
Establishing Effective Trans-Autistic Support	Waterloo Region Family Health Network (Cayden Genik)	https://wrfn.info/userContent/documents/Assessing-Trans-Autistic-Support_GENIK.pdf

LITERATURE REVIEW

Table 1: Publications About Experiences of Identity-Based Harm in the Waterloo Region

Title	Author(s)	Link
Experiences of Gender-Based Violence and Resulting Housing Vulnerability Among Racialized Muslim Women in Waterloo Region	Centre for Mutual Wellbeing (Mitul Mahmud, Fauzia Mazhar, Sarah Shafiq, Jennifer Gordon)	https://cmw-kw.org/wp-content/uploads/2023/01/YWKW-ProjectWillow-CMWReport-R03-20230607.pdf
Experiences of LGBTQ Newcomers in Waterloo Region	The Outlook Study Team (R. Boles, C. Khalil, A. Mulholland, T. Ragonetti, V. LeFort, C. Davis, S. Coulombe, T. Coleman, R. Travers, and C. Wilson)	https://yourwrrc.ca/rcc/wp-content/uploads/2018/03/Newcomers-Factsheet-March-8-2018.pdf
Experiences of LGBTQ2S High School Students in Waterloo Region	The Outlook Study Team (R. Goldfarb, C. Davis, S. Coulombe, E. Armstrong, J. Calabria-Yaworski, M. Ishak, E. Kocovska, L. Martineau, E. Navaz, M. Woodford, and R. Travers)	https://yourwrrc.ca/rcc/wp-content/uploads/2019/10/OutLook-Experiences-of-High-School-Students.pdf
Experiences of Trans People in Waterloo Region	The Outlook Study Team (C. Davis, T. Coleman, C. Wilson, E. McLaren, E. Silk, E. Schmid, R. Travers, K. Luu, A. Mulholland, J. Bell, and S. Ashtianti)	https://yourwrrc.ca/rcc/wp-content/uploads/2019/05/Trans-Infosheet-v.06-SMALL.pdf
Fact Sheet: Lack of Community Support and Violence Experienced by LGBTQ2+ People	Spectrum	https://ourspectrum.com/wp-content/uploads/2021/07/Community-support-and-gender-violence.pdf
"I Don't Want to Have to Teach Every Medical Provider": Barriers to Care Among Non-Binary People in the Canadian Healthcare System	Drew Burchell, Todd Coleman, Robb Travers, Isabella Aversa, Emily Schmid, Simon Coulombe, Ciann Wilson, Michael R. Woodford, and Charlie Davis	https://www.tandfonline.com/doi/full/10.1080/13691058.2023.2185685
Islamophobia in Waterloo Region	Waterloo Region Crime Prevention Council (Sarah Shafiq)	https://preventingcrime.ca/wp-content/uploads/2019/05/REPORT-Islamophobia-WEB.pdf
It Takes a Village - Schooling Out of Place: School Experiences of Black African Youth in Waterloo Region	Olufunke Oba	https://scholars.wlu.ca/cgi/viewcontent.cgi?article=3130&context=etd

LITERATURE REVIEW

Table 1: Publications About Experiences of Identity-Based Harm in the Waterloo Region

Title	Author(s)	Link
OutLook: Victimization and Community Safety Among LGBTQ People in Waterloo Region	The Outlook Study Team (K. Luu, S. Ashtianti, T. Moyaert, E. Furman, E. Silk Moorlig, R. Travers, S. Coulombe, and C. Davis)	https://yourwrrc.ca/rcc/wp-content/uploads/2018/02/BtS_Infosheet-Victimization-2018.pdf
Police-Reported Information Hub: Hate Crime in Canada	Statistics Canada	https://www150.statcan.gc.ca/n1/pub/71-607-x/71-607-x2024013-eng.htm
Shaping Tomorrow: Understanding Muslim Youth Needs in the Waterloo Region	Centre for Mutual Wellbeing (Nakita Valerio)	https://cmw-kw.org/wp-content/uploads/2023/01/JULY%2030%20UPDATE-%20MUSLIM%20YOUTH%20ASSESSMENT%20IRSS-CMWKW%202023.pdf
Snapshot of Hate in Waterloo Region: A Milestone Report	Centre for Mutual Wellbeing (Jennifer Gordon, Fauzia Mazhar, Maryam Farooque)	https://centreformutualwellbeing.org/wp-content/uploads/2026/06/reduce-file-size-Online-2025-Anti-Hate-Report-CMW.pdf
The Muslimah Project: A Collaborative Inquiry into Discrimination and Muslim Women's Mental Health in a Canadian Context	Brianna Hunt	https://scholars.wlu.ca/cgi/viewcontent.cgi?article=3315&context=etd
Well-Being, Discrimination, and Self-Management Among Racialized LGBQ+ Newcomers Living in Waterloo Region, Ontario	Emily Cox	https://scholars.wlu.ca/cgi/viewcontent.cgi?article=3414&context=etd

METHODS

Before project activities commenced, the project team completed the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS2) training. This is a certificate research ethics training developed and used by federal research agencies including the Social Sciences and Humanities Research Council and the Canadian Institutes of Health Research. The Project Coordinator also completed Trent University's Community-Based Research Modules and the Indigenous Community Research Partnerships' online training.

The first phase of primary research for this project involved two surveys: an anonymous public survey for all Waterloo Region community members, and an anonymous survey for social and community service providers in the Waterloo Region. The public survey was advertised through physical posters around the region, posts on CJI's Instagram and Facebook pages, and location-based advertisements on Facebook, Instagram, and Reddit. Respondents were informed in writing of confidentiality and voluntariness before giving consent to start the survey. Those who completed the survey and entered their contact information in a separate form were given a chance to be randomly selected for one of six $50 cash prizes. Altogether, the public survey had 181 respondents.

The service provider survey was distributed through email to a wide-ranging list of organizations across the region. Those who received the survey were invited to share it via email or word-of-mouth to other professionals within or outside their organization. We first distributed the survey to service providers outside of CJI, then offered the survey to our CJI team. This way, we could analyze what effect working at a restorative justice-centred organization had on responses, if any. Respondents were informed in writing of confidentiality and voluntariness before giving consent to start the survey. Altogether, the service provider survey had 27 respondents.

Following the survey phase, the project team facilitated a series of group dialogues during regularly scheduled programming at community organizations in the region. To meet the unique needs of each group and recognize the unique knowledge each group's participants held , different activities and topics of discussion took place at each group. At the start of each group, participants were informed of the group's confidentiality and voluntariness, an d verbal consent for the project team to write notes and publish participants' ideas was gathered.

METHODS

At the end of each group, all participants were provided a cash, gift card, or food honourarium. We facilitated groups with 6 youth on the OK2BME Youth Leadership Team, 41 youth from the YMCA of Three Rivers' Newcomer youth and Moving Black Lives Forward youth programs, 5 youth from the YMCA of Three Rivers' Out and About youth program, 10 youth from OK2BME's OK2BHere high school group, and 18 adults from Interfaith Grand River. Altogether, 80 community members participated in a group dialogue.

RESULTS

Of the 181 public survey respondents, 90 (50%) indicated that they lived in Kitchener, 59 (33%) lived in Waterloo, 22 (12%) lived in Cambridge, 5 (3%) lived in the Townships of North Dumfries, Wellesley, Wilmot, or Woolwich, 4 (2%) did not live in the Waterloo Region, and 1 (1%) indicated they did not have a permanent place to live. Data from respondents who did not live in the Waterloo Region but still accessed services within the Waterloo Region were not removed from the data pool.

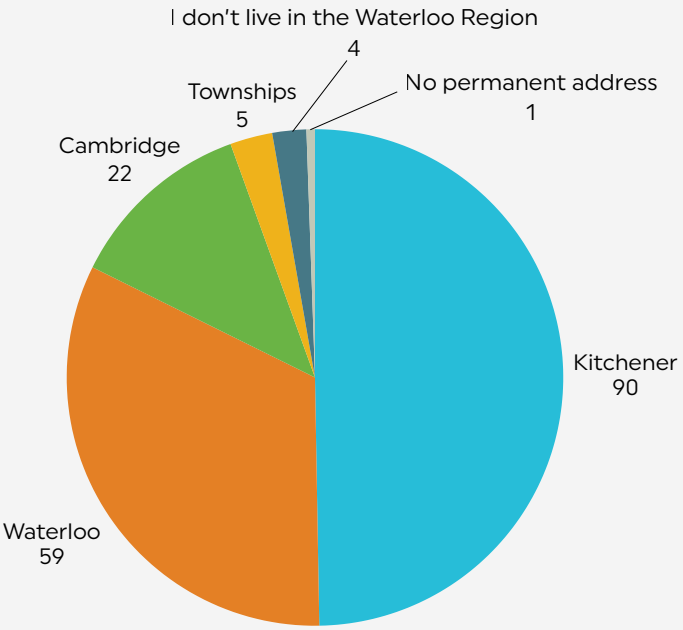


Figure 1: Locations of public survey respondents

We asked respondents to select any aspects of identity or experiences that they identify with from a list of identities or experiences that are historically and/or currently underserved or marginalized. This question was not mandatory, and respondents were welcome to select as many options as they would like. Some of the most frequently selected identities or experiences were woman (60% of respondents), experiencing mental illness (57%), individual with a disability (45%), Lesbian, Gay, Bisexual, or Pansexual (32%), and experiencing food insecurity (21%). Respondents were also invited to input any identities or experiences not listed in an "Other" box, and some of the identities or experiences provided included genderqueer, asexual, fat, mixed race, first generation Canadian, caregiver, rural, financial insecurity, and job insecurity.

RESULTS: PUBLIC SURVEY

Table 2: Public survey respondent identities and experiences

Identity or Experience	Number of Respondents	Percent of Respondents
Woman	109	60%
Experiencing mental illness	103	57%
Individual with a disability	82	45%
Lesbian, Gay, Bisexual, or Pansexual	58	32%
Experiencing food insecurity	38	21%
Individual with autism	36	20%
Older adult	30	17%
Transgender, Non-Binary, or Gender-Diverse	26	14%
Experiencing homelessness or housing insecurity	25	14%
Experiencing addiction	19	11%
Other experience	19	11%
Other identity	18	10%
Immigrant/Newcomer	17	9%
Black, African, or Caribbean	14	8%
South Asian	13	7%
Muslim	11	6%
Indigenous	10	6%
East Asian	9	5%
Jewish	8	4%
Middle Eastern	6	3%

RESULTS: PUBLIC SURVEY

Table 2: Public survey respondent identities and experiences

Identity or Experience	Number of Respondents	Percent of Respondents
Latin, South, or Central American	5	3%
Hindu	4	2%
Two-spirit	4	2%
Youth	4	2%
Incarcerated or having a criminal record	3	2%
Sikh	2	1%
Southeast Asian	1	1%

The following definition for identity-based harm was provided to respondents:

"Any action, behavior, or structural condition that targets, devalues, or excludes an individual or group based on any personal characteristic. These personal characteristics may include race, ethnicity, gender, sexuality, ability, faith, culture, language, or socioeconomic status, among others, as well as the ways these aspects of identity intersect with one another. The type of identity-based harm ranges from explicit harm, like harassment or violence, to subtle harm, like exclusion, microaggressions, or institutional barriers. The intent behind identity-based harm also falls within a broad range, from "well-meaning" actions driven by subconscious bias to willful, purposeful violence."

RESULTS: PUBLIC SURVEY

Respondents were then asked if there was anything they would add, remove, or change within this definition. Eleven respondents (6%) suggested adding categories to the list of personal characteristics provided in the definition, including suggestions around age, body size and appearance, caregiver status, gender expression, neurodivergence, health status, and accent. Seven respondents (4%) suggested specifying the term by adding more examples of harm, such as threats, lateral violence, stigma, inequality, ignorance of intersectionality, and barriers to housing, healthcare, or employment. Five respondents (3%) recommended simplifying and shortening the definition so it is more accessible.

Next, we asked survey respondents, "Have you ever experienced identity-based harm within the Waterloo Region?". There were 117 (65%) respondents who selected yes, 39 (21%) who selected no, and 25 (14%) who selected unsure.

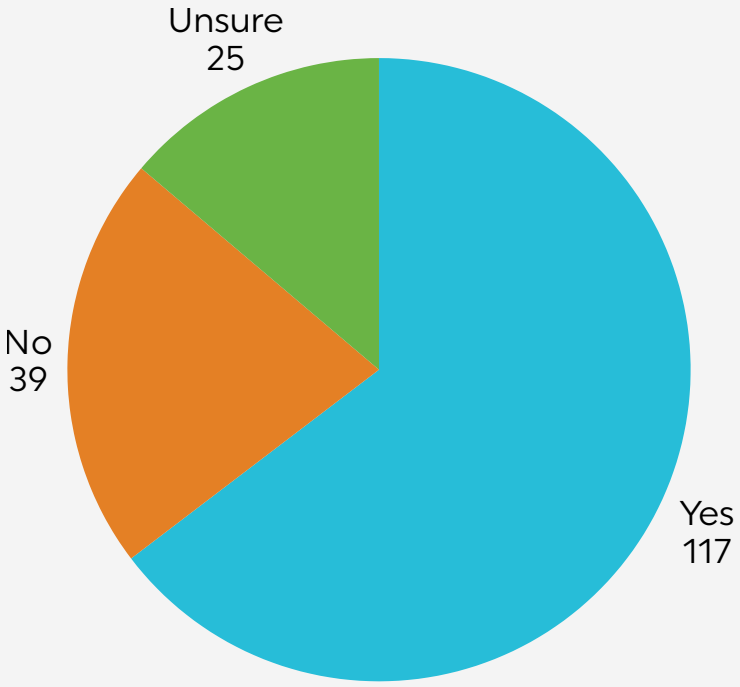


Figure 2: Public survey respondents' indications of whether they have experienced identity-based harm in the Waterloo Region

PUBLIC SURVEY RESULTS

Voices of Experiencing Identity-Based Harm

RESULTS: PUBLIC SURVEY

The 117 respondents who indicated that they had experienced identity-based harm in the Waterloo Region were asked a series of follow-up questions about their needs around justice and healing. First, respondents were asked what aspects of their identity or experiences have been targeted. The most commonly selected targets of identity-based harm included gender identity (41% of respondents), race (33%), neurodivergence (32%), sexual orientation (31%), ethnicity (30%), and disability (30%). Thirteen respondents provided "Other" aspects that were not listed, which were related to body size, employment status, and caregiver status.

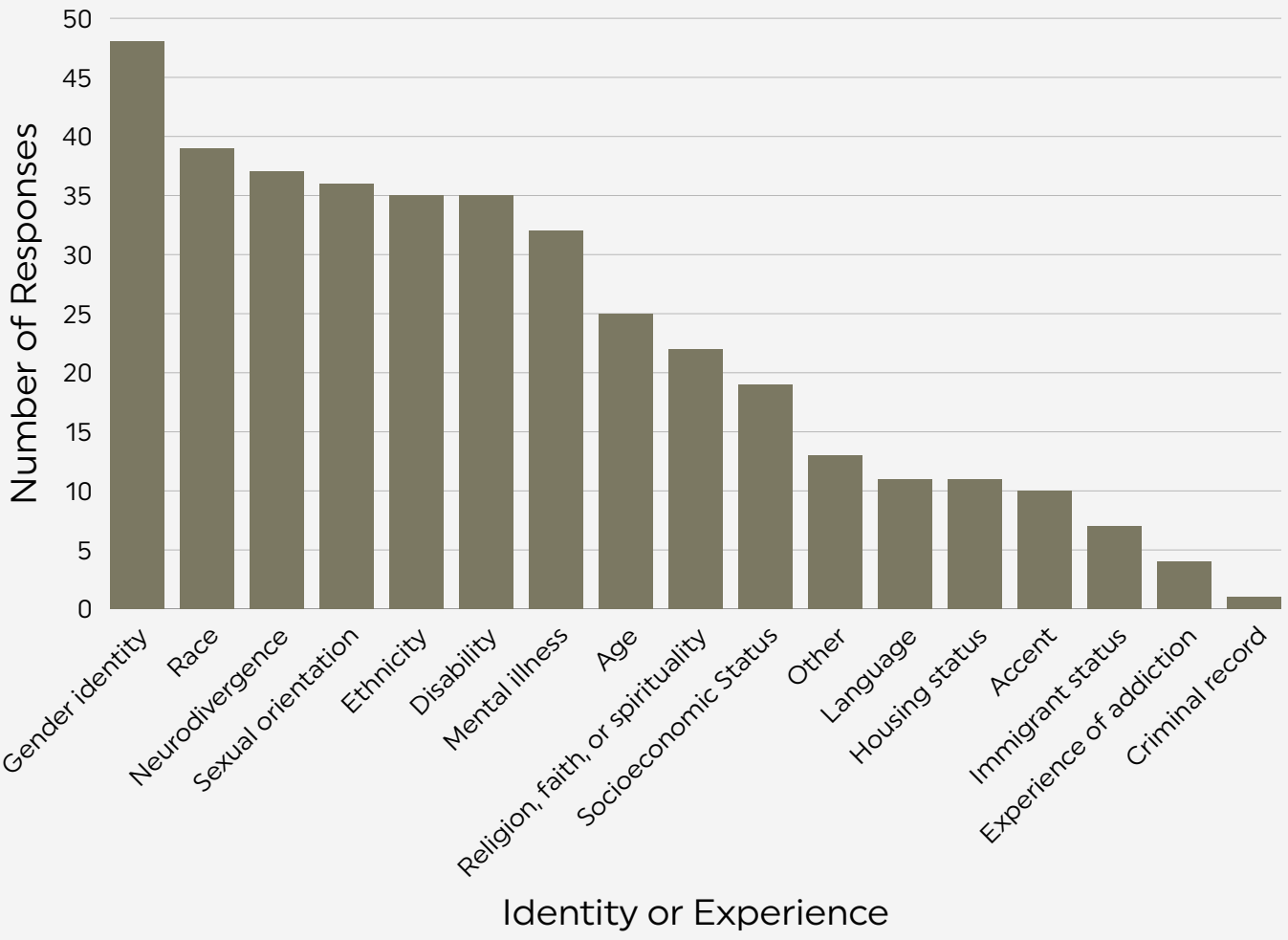


Figure 3: The aspects of public survey respondents' identity or experiences that have been targeted

RESULTS: PUBLIC SURVEY

Respondents were provided with a list of responsive and preventative measures and asked to select which option(s), if any, would help to meet their healing and/or justice needs related to identity-based harm. The most commonly selected measures included counselling from a mental health professional (56% of respondents), attending community events (49%), expressing myself creatively (45%), a support group with other people who have experienced identity-based harm (40%), and receiving an apology from the person who caused identity-based harm (37%).

Table 3: Public survey respondents' preferences for measures that would meet their justice and/or healing needs related to identity-based harm

Responsive or Preventative Measure	Number of Respondents	Percentage of Respondents
Counselling from a mental health professional	65	56%
Attending community events	57	49%
Expressing myself creatively (e.g. artwork, poetry, dance)	53	45%
Support group with other people who have experienced identity-based harm	47	40%
The person who caused me harm apologizing to me	43	37%
The person who harmed me paying me restitution (e.g. for therapy, property repairs, legal costs, etc.)	35	30%
Having a discussion with the person who harmed me and a trained mediator	31	27%
Telling the person who harmed me how I feel in a letter	27	23%
Telling the person who harmed me how I feel face-to-face	25	21%
Connecting with religion, spirituality, or faith	21	18%
None of the above	11	9%
The person who caused me harm being arrested	10	9%
The person who caused me harm going to prison	5	4%

RESULTS: PUBLIC SURVEY

Respondents were then provided an optional, open-ended space to name any other responsive or preventative measures that would meet their healing and/or justice needs related to identity-based harm.

The most common theme, mentioned by 10 respondents (9%), was public education. This included suggestions for educating the public about specific identities, such as asexuality, Judaism, neurodivergence, and transgender identity, as well as educating the public and those who have caused harm about identity-based harm more generally.

"I think the presence of accessible 'unlearning bias' courses that people could refer to would be helpful. Instead of going to prison (where they likely won't learn), I think it would be better to have a mandatory course to educate folks about their actions."

"I would feel better knowing that [Waterloo Region's] young people are learning not to participate in identity-based harm."

"I think we need more education on asexuality in queer spaces. The A gets demonized a lot as 'straight who wants to be oppressed' instead of a real identity with its own unique spectrum."

"More education in institutions about identity-based harm, especially against understudied or misunderstood identities/harms like modern forms of Jew hatred that are ostensibly politically motivated and ableism against neurodivergence."

"Learning how to cope with the harm without feeling like I have to dispose of the person I love."

RESULTS: PUBLIC SURVEY

Another commonly mentioned theme was systemic change, mentioned by 7 respondents (6%). Specific systemic issues brought up by respondents included gender equality and health equality within state-operated systems, and getting help with system navigation.

"Working towards gender equality in personal, public and political spheres, calling out sexist systems, actions and language and encouraging others to do so in daily life."

"Having support with systems navigation when harmed within powerful structures like school or work."

"If agencies especially run by the region or funding provided by the government use a trauma-informed approach."

"We need policies, procedures, accountability and enforcement and systems levels solutions, not individual solutions."

RESULTS: PUBLIC SURVEY

A third recurring theme was involvement of political or authority figures in addressing identity-based harm. Seven respondents (6%) left comments around this theme, mentioning desire for political figures to voice support for marginalized groups and for authority figures to condemn identity-based harm and enforce accountability measures.

"I'd like for an authority figure to inform the individuals perpetuating harm that it's not okay. And if a mediator cannot change their mind, I would want there to be measures in place for my protection. And unfortunately, fear of authority sometimes is the only way that some individuals mind their business and stay away from causing harm."

"I wouldn't want extreme measures like arresting off the bat, unless they've taken it too far. But perhaps a visit or a warning letter from the WRPS, reminding said offender of the law, how discrimination is illegal, and if they repeat this offence, they will be met with more severe consequences."

"I want to see cisgender people with influence visibly supporting trans people."

"I feel there should be some form of accountability or consequence. Seeing that there are real outcomes for harmful behavior is important. Not only for justice, but also to help individuals recognize the impact of their actions."

"Official programs from government supporting my identity (i.e. mayor visiting my ethnicity meetings to show that we're welcomed in this city)."

RESULTS: PUBLIC SURVEY

A final recurring theme, mentioned by 6 respondents (5%), was improving community spaces for specific identity groups. Respondents mentioned a need for greater accessibility to spaces honouring Indigeneity, queerness, asexuality, and experiences of gender-based violence, as well as having more service providers attend existing community spaces to raise awareness of services offered in the region.

"More queer spaces."

"Movie festivals & music festivals that also have booths that introduce different services available to communities."

"Indigenous Ceremony and Healing Circles"

"More [gender-based violence] supports for IPV and sexual assault."

RESULTS: PUBLIC SURVEY

The final question around public survey respondents' experiences of identity-based harm asked, who would you contact in the Waterloo Region if you experienced or witnessed identity-based harm? The most common answer, selected by 77 respondents (66%), was a personal contact like family or friends. Other common answers included a mental health counsellor or therapist (45 respondents, 39%), a non-police reporting service (36 respondents, 31%), police (35 respondents, 30%), or a community organization (35 respondents, 30%). Contacts entered in the "Other" category included by-law, workplace human resources, school authorities, human rights agencies, a local Member of Provincial Parliament, and healthcare providers.

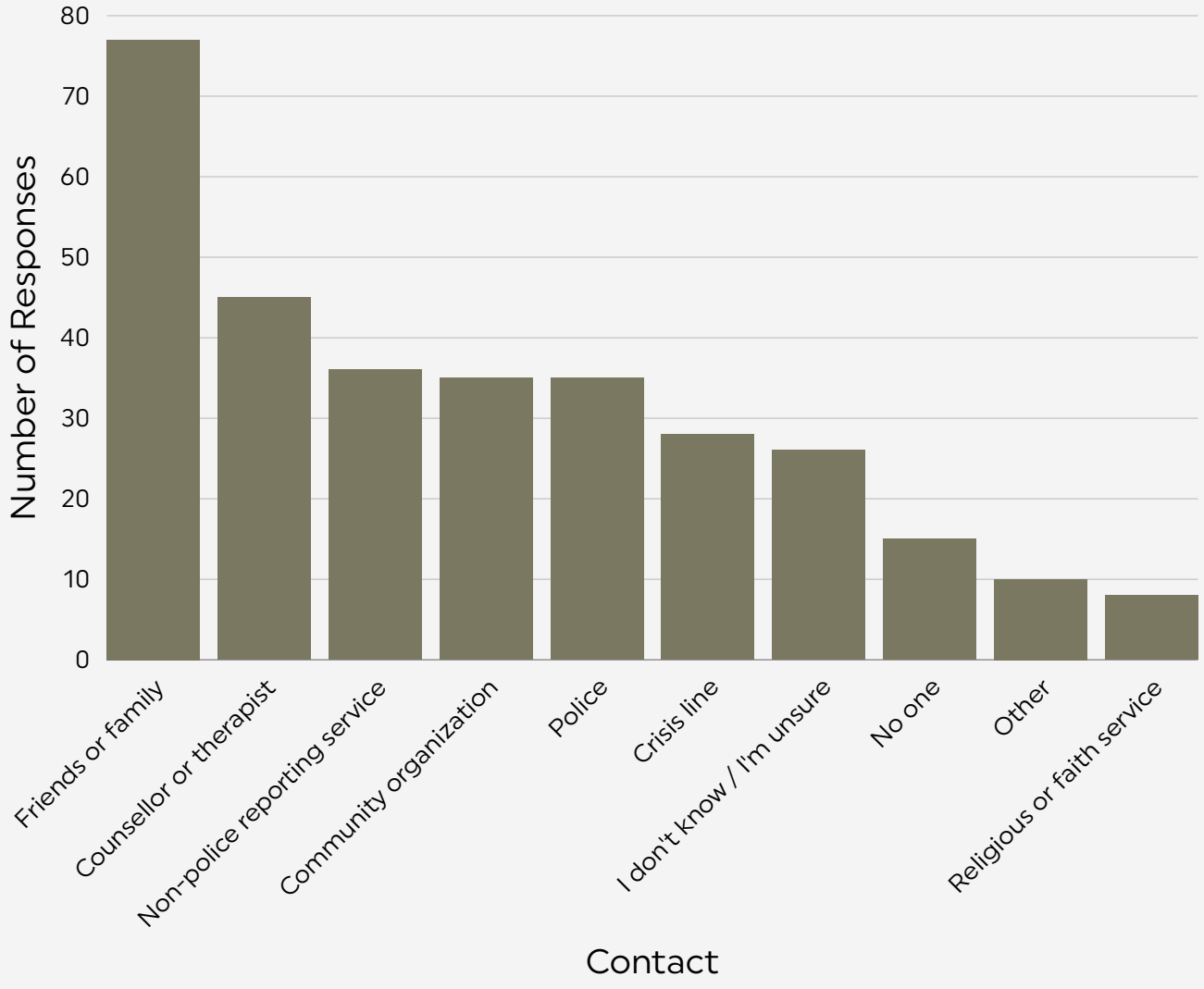


Figure 4: Public survey respondents' indications of who they would contact if they experienced or witnessed identity-based harm in the Waterloo Region

RESULTS: PUBLIC SURVEY

Following their selection, respondents were given the option to explain why they had chosen that person or organization to contact after experiencing or witnessing identity-based harm. The most frequently mentioned theme was negative perceptions of police, mentioned by 27 respondents (23%). Respondents frequently mentioned a lack of trust in police and feeling unsafe when in police presence. They cited that police unnecessarily escalate situations, do not provide a helpful or desired outcome, and have caused harm to them in past situations.

"I do not like to involve police if at all possible because they are among those that have caused me the most harm."

"I would not be comfortable contacting police, I would much rather seek help from someone trained in deescalation, trauma informed care, and/or restorative justice, as the police tend to escalate or resort to violent or punitive 'solutions'."

"I would never contact the police as they feel incredibly unsafe."

"When I've witnessed identity-based violence in the region I worried about calling the police fearing they might make the situation more dangerous for both the perpetrator and victims."

"I don't trust the police to actually care about marginalized individuals. The justice system almost always fails to bring about actual justice in instances of hate crimes."

RESULTS: PUBLIC SURVEY

Positive perceptions of personal connections were another recurring theme, mentioned by 26 respondents (22%). Factors such as understanding, respect, safety, empathy, venting, trust, and ease were cited as reasons why respondents feel comfortable telling personal contacts like friends or family about experiences of identity-based harm.

"I usually receive some degree of understanding and respect with personal connections."

"Relying on my community is most important, and the least retraumatizing."

"For someone new to the region, it is safest to confide in friends and family they can trust and who will not want to act as a saviour."

"My friends and community understand the transphobia and ableism I face in a way that most formal services don't."

"I am more comfortable talking with someone with similar background who would understand my feelings."

RESULTS: PUBLIC SURVEY

A third recurring theme was positive perceptions of community organizations, which was commented on by 13 respondents (11%). It was mentioned that local organizations are able to provide trauma-informed, non-judgmental, in-depth conversations about identity-based harm, and that they provide a sense of trust, ease, comfort, safety, and care for respondents.

"In depth conversation, not just a report."

"Easier and convenient, and I can trust them."

"I would feel more comfortable disclosing the incident to them as I feel I wouldn't be scrutinized."

"I feel like they are more qualified to handle hate-based problems, and care more about it."

"Organizations feel much safer and more welcoming."

RESULTS: PUBLIC SURVEY

Positive perceptions of police were a recurring theme as well, mentioned by 7 respondents (6%). Reasons given for this stance included belief that police authority can ensure accountability, and that police are best suited to respond to extreme circumstances.

"If it were extreme and especially directed towards someone else - I would definitely call non-emergency police. I attended citizens police academy and know that they pay a visit to individuals who have caused harm."

"Police only because they are one of the few groups with much authority to get legal justice involved."

"Because it's the right thing to do."

"The options above, except for police, can offer no action or remedies to change the system."

"They are trusted authorities."

PUBLIC SURVEY RESULTS

Expressions of Causing Identity-Based Harm

RESULTS: PUBLIC SURVEY

Our public survey also asked respondents if they had ever caused identity-based harm to another person in the Waterloo Region. Here, 16 respondents (9%) said they had, 113 respondents (62%) said they had not, and 51 respondents (28%) said they were unsure.

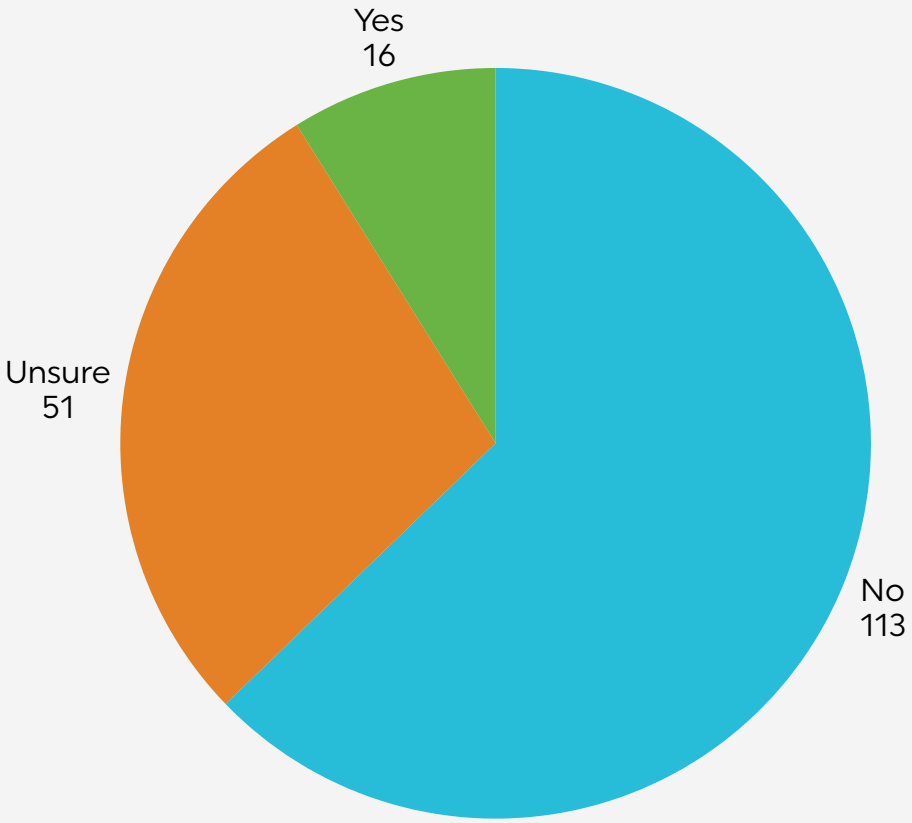


Figure 5: Public survey respondents' indications of whether they have caused identity-based harm in the Waterloo Region

Respondents who indicated that they had caused identity-based harm were then asked a series of follow-up questions. First, we asked, towards what aspect of identity have you caused identity-based harm? The greatest number of respondents selected race (6 respondents, 38%), followed by ethnicity (4 respondents, 25%), gender identity (3 respondents, 19%) and sexual orientation (3 respondents, 19%). Four respondents selected "Other", and wrote aspects that were not listed including body size, "Probably all at some point in my life", and "We all have biases that we are not aware of".

RESULTS: PUBLIC SURVEY

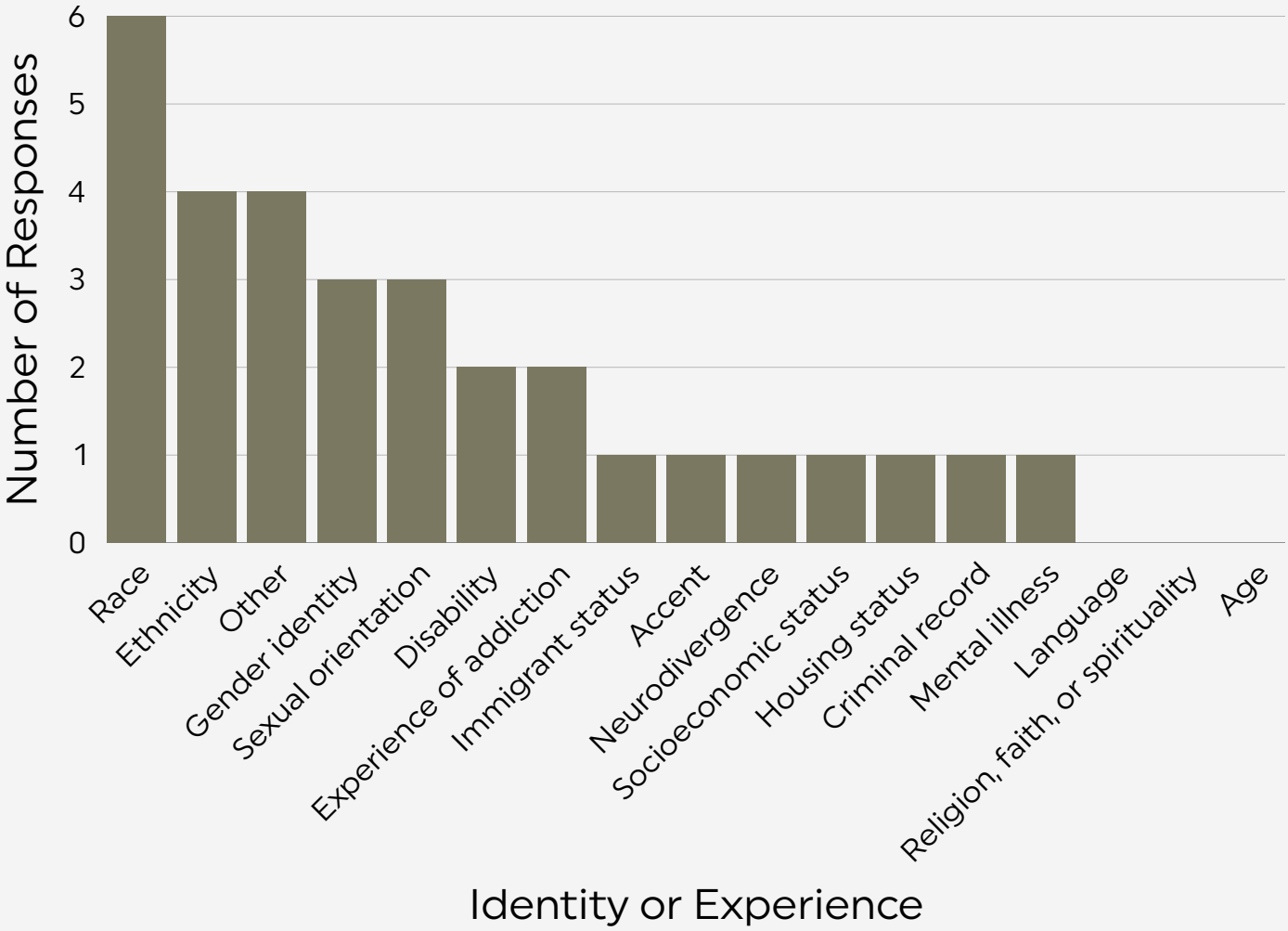


Figure 6: Aspects of identity or experiences that public survey respondents disclosed causing identity-based harm towards

RESULTS: PUBLIC SURVEY

Next, we asked respondents to indicate what factors led them to cause identity-based harm. Here, the greatest number of respondents (12 respondents, 75%) wrote in their own reasons in the "Other" box. Five respondents wrote that the harm they caused was unintentional, four wrote that the harm was caused because of ignorance, and other reasons given included internal bias, "tit for tat", and following workplace policy. Pre-written options that respondents selected included religious, spiritual, or faith-based beliefs (2 respondents, 13%), peer pressure (2 respondents, 13%), and I don't know (1 respondent, 6%).

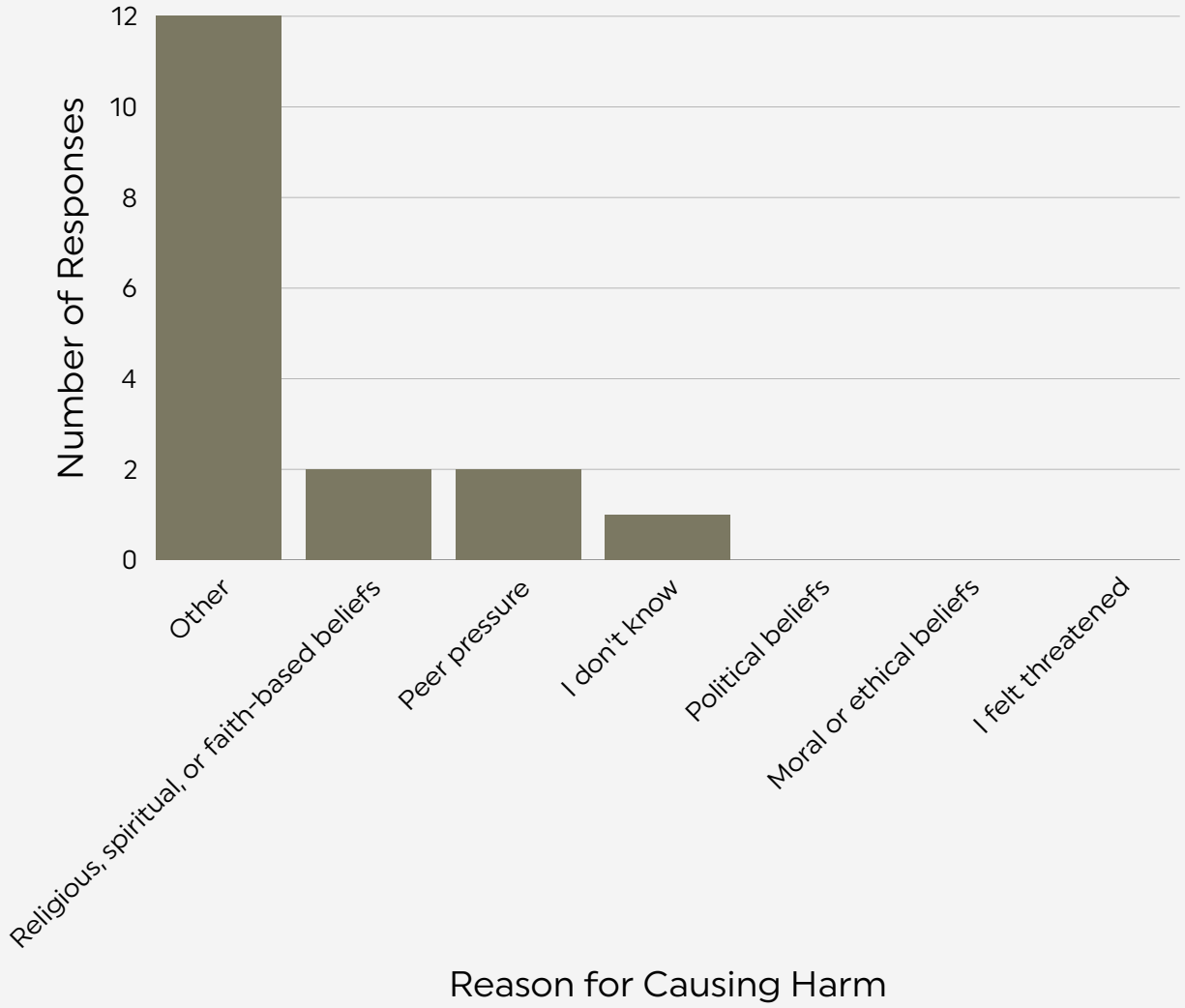


Figure 7: Reasons for causing identity-based harm that public survey respondents identified

RESULTS: PUBLIC SURVEY

The final question we asked in our public survey for respondents who indicated they had caused identity-based harm was, "Which of the following measures do you think would support your needs around accountability and healing?". The greatest number of respondents chose apologizing to the person harmed (9 respondents, 56%). Five respondents (31%) chose having a mediated discussion with the person harmed, four (25%) chose counselling from a mental health professional, and four (25%) chose hearing face-to-face how I made the person who was harmed feel. Additionally, six respondents wrote in the "Other" box, and offered measures such as education about bias and identity-based harm, speaking with friends, and participating in a restorative justice process.

Table 4: Public survey respondents' indications of measures that would meet their accountability and/or healing needs related to causing identity-based harm

Responsive or Preventative Measure	Number of Respondents	Percentage of Respondents
Apologizing to the person(s) I harmed	9	56%
Other	6	38%
Having a discussion with the person(s) I harmed and a trained mediator	5	31%
Counselling from a mental health professional	4	25%
Hearing face-to-face how I made the person(s) I harmed feel	4	25%
Expressing myself creatively (e.g. artwork, poetry, dance)	3	19%
Attending community events	3	19%
Reading in a letter how I made the person(s) I harmed feel	3	19%
Paying restitution to the person(s) I harmed (e.g. for therapy, property repairs, legal costs, etc.)	2	13%
Support group with other people who have caused identity-based harm	1	6%
Connecting with religion, spirituality, or faith (e.g. prayer, attending place of worship, meditation, speaking with faith leader, reading religious texts)	1	6%
None of the above	1	6%

SERVICE PROVIDER SURVEY RESULTS

"When harm happens, if we do not respond in appropriate ways, it diminishes trust. Trust is a major barrier."

- Service Provider Survey Respondent

RESULTS: SERVICE PROVIDER SURVEY

For the 27 service providers who responded to our survey, we began by asking where in the Waterloo Region their organization was located. Respondents were able to choose more than one answer if their organization's reach extended beyond one city or township. The greatest number of service providers selected Kitchener (23 respondents, 85%), followed by 11 respondents (41%) choosing Cambridge, 10 respondents (37%) choosing Waterloo, 7 respondents (26%) choosing North Dumfries and Wilmot, and 6 respondents (22%) choosing Wellesley and Woolwich.

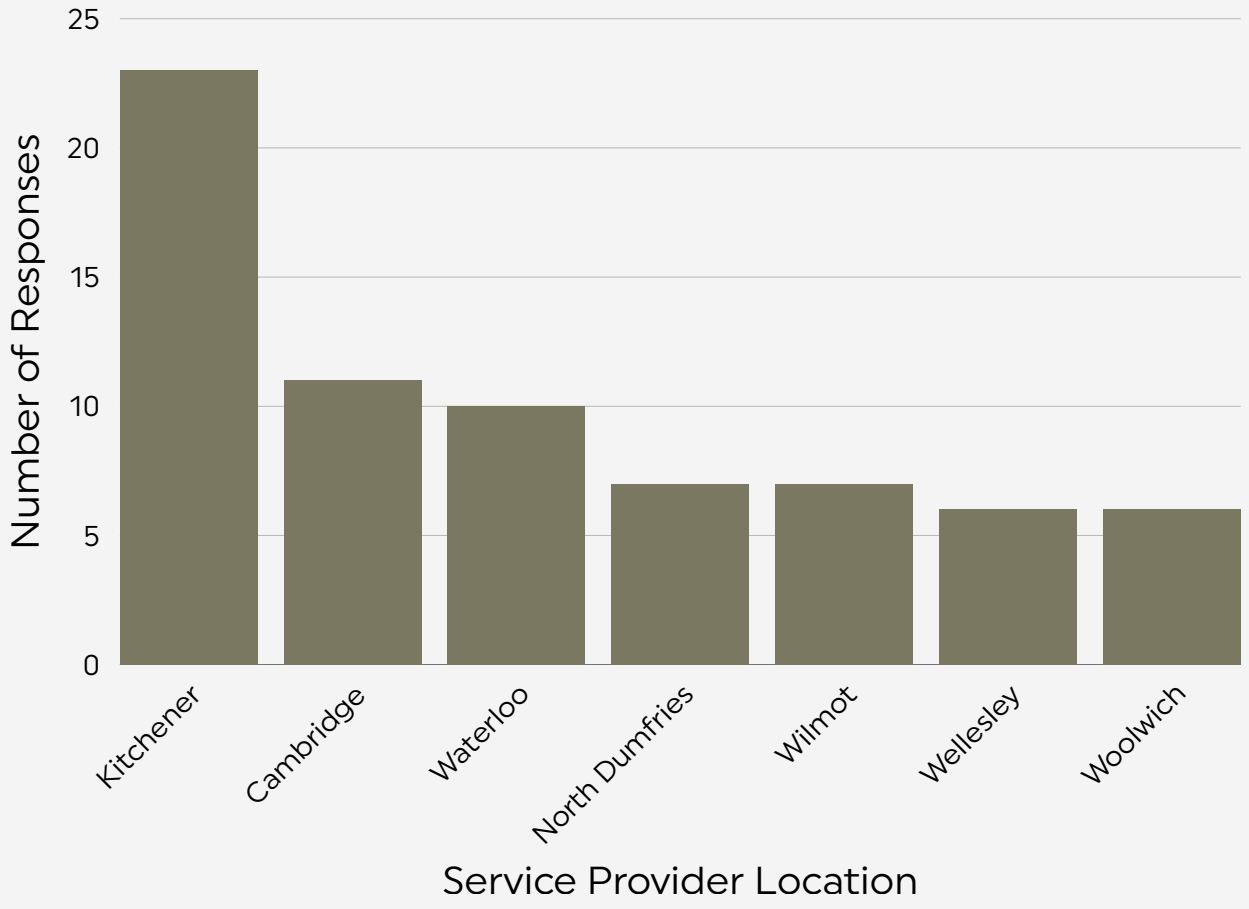


Figure 8: Locations served by service provider survey respondents

RESULTS: SERVICE PROVIDER SURVEY

Also, for service provider demographics, we asked who respondents provided service for.

Respondents were able to select multiple options if applicable. The identity or experience most often selected was women (cisgender, transgender, non-binary, or two-spirit), which was selected by 23 respondents (85%). This was followed by 21 respondents (78%) selecting youth under 18 years old, 20 respondents (74%) selecting 2SLGBTQIA+, 20 respondents (74%) selecting immigrants and/or newcomers to Canada, and 19 respondents (70%) selecting older adults over 55 years old. Under "Other", one respondent wrote "students in K to 12 Catholic Schools", and one respondent wrote that they did not serve any specific group.

RESULTS: SERVICE PROVIDER SURVEY

Table 5: Service provider survey respondents' indications of the identities or experiences they offer service to

Identity or Experience	Number of Respondents	Percentage of Respondents
Women (cisgender, transgender, non-binary, or two-spirit)	23	85%
Youth (under 18 years old)	21	78%
2SLGBTQIA+	20	74%
Immigrants and/or Newcomers to Canada	20	74%
Older adults (age 55+)	19	70%
Black, African, and Caribbean	18	67%
Individuals with a disability	18	67%
Asian	17	63%
Latin, South, or Central American	17	63%
Indigenous	16	59%
Experiencing food insecurity	15	56%
Experiencing mental illness	15	56%
Jewish	14	52%
Muslim	14	52%
Incarcerated	13	48%
Experiencing homelessness	13	48%
Experiencing addictions	13	48%
Individuals with autism	13	48%
Sikh	13	48%
Hindu	13	48%
Other	2	7%

RESULTS: SERVICE PROVIDER SURVEY

Service providers were offered the same definition of identity-based harm as was offered in the public survey, and were asked if there was anything they would, add, remove, or edit within the definition. The most common theme, put forward by six respondents (22%), was suggestions to specify terms within the definitions. This included suggestions around specifying impact and intent, intersectionality, power structures, explicit and subtle harm, violence, and subconscious bias. Adding categories to the list of personal characteristics was another theme, mentioned by three respondents (11%). Recommendations included adding neurodiversity, experience of homelessness, and political beliefs. One respondent also recommended that the definition be simplified for accessibility.

We asked a series of questions to understand service providers' perceptions of prevention measures put in place by different levels of government. First, we asked how familiar respondents were with the Waterloo Region's Community Safety and Wellbeing Plan (CSWP). Ten respondents (37%) selected "not at all familiar", 13 respondents (48%) selected "somewhat familiar", and 4 respondents (15%) selected "very familiar".

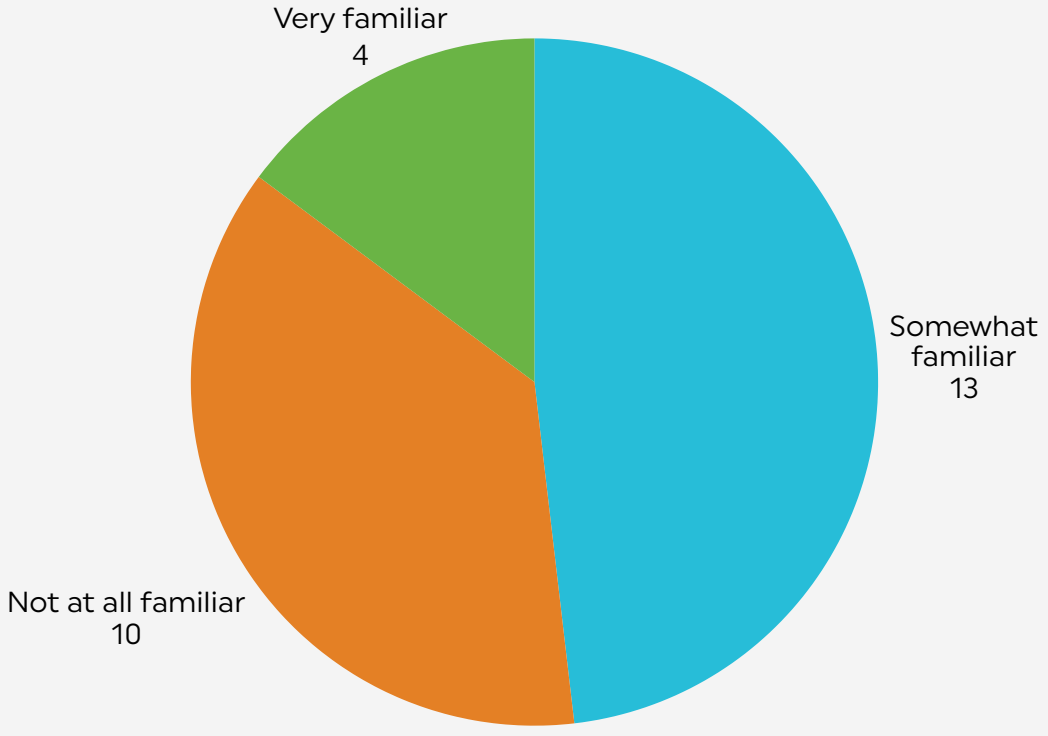


Figure 9: Service provider survey respondents' familiarity with the Waterloo Region Community Safety and Wellbeing Plan

RESULTS: SERVICE PROVIDER SURVEY

Service providers who indicated being somewhat or very familiar with the CSWP were then asked their opinion of the plan's effectiveness for preventing identity-based harm in the Waterloo Region. Four respondents (24%) selected "not at all effective", 9 respondents (53%) selected "somewhat effective", and 4 respondents (24%) selected "unsure". No respondents selected "very effective".

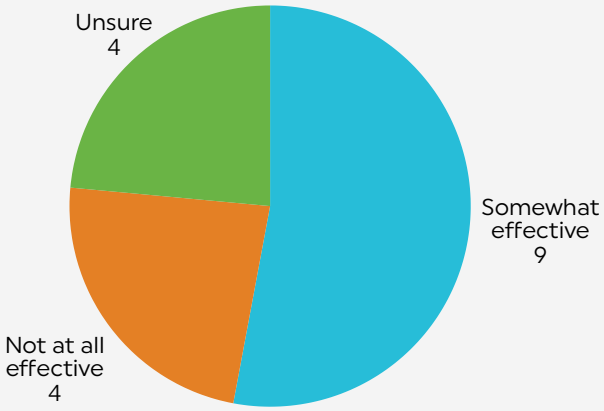


Figure 10: Service provider survey respondents' opinions of the Waterloo Region Community Safety and Wellbeing Plan's effectiveness in preventing identity-based harm

Next, we inquired about service providers' familiarity with the Waterloo Region's "We All Belong Here" campaign. Here, 8 respondents (30%) selected "not at all familiar", 10 respondents (37%) selected "somewhat familiar", and 9 respondents (33%) selected "very familiar".

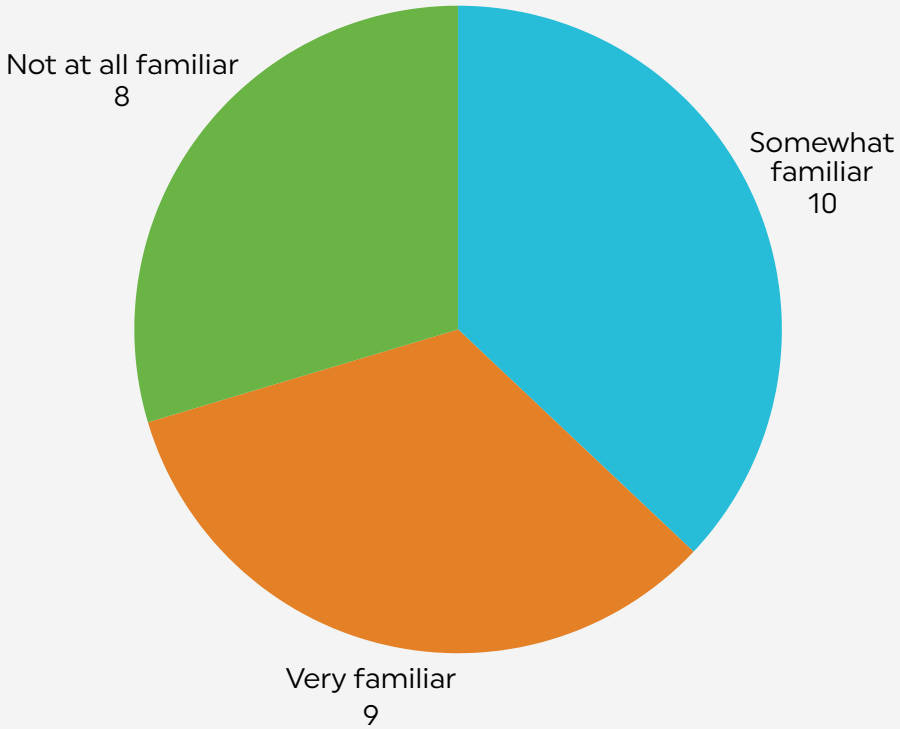


Figure 11: Service provider survey respondents' familiarity with the Waterloo Region's "We All Belong Here" campaign

RESULTS: SERVICE PROVIDER SURVEY

Again, service providers who indicated they were somewhat or very familiar with the "We All Belong Here" campaign were asked for their opinion on its effectiveness in preventing identity-based harm. Five respondents (26%) chose "not at all effective", 10 respondents (53%) chose "somewhat effective", and 4 respondents (21%) chose "unsure". No respondents chose "very effective".

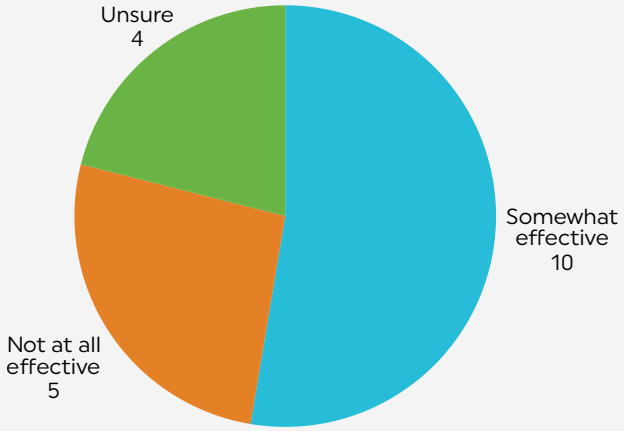


Figure 12: Service provider survey respondents' opinions of the Waterloo Region "We All Belong Here" campaign's effectiveness in preventing identity-based harm

Next, we focused on the federal government's Action Plan on Combatting Hate, and asked service providers' familiarity. Seventeen respondents (63%) selected "not at all familiar", 8 respondents (30%) selected "somewhat familiar", and 2 respondents (7%) selected "very familiar".

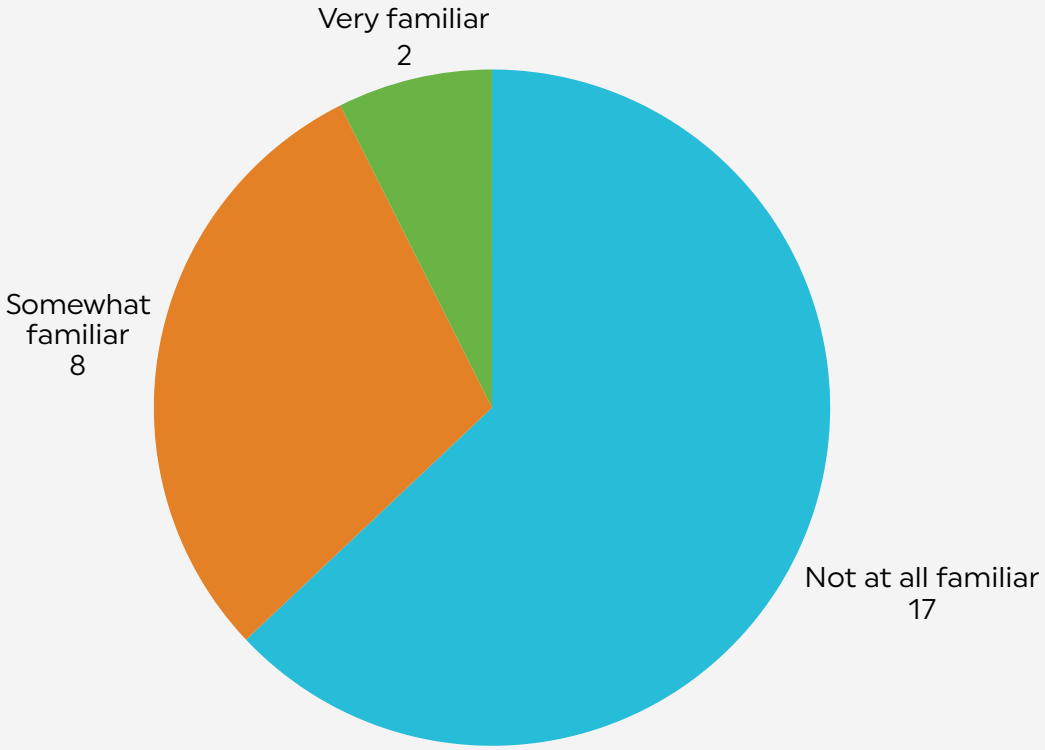


Figure 13: Service provider survey respondents' familiarity with the federal government's Action Plan on Combatting Hate

RESULTS: SERVICE PROVIDER SURVEY

For service providers who were somewhat or very familiar, we asked for their opinion on the effectiveness of the Action Plan on Combatting Hate in preventing identity-based harm. Two respondents (20%) chose "not at all effective", 6 (60%) chose "somewhat effective", and 2 (20%) chose "unsure". Again, no respondents chose "very effective".

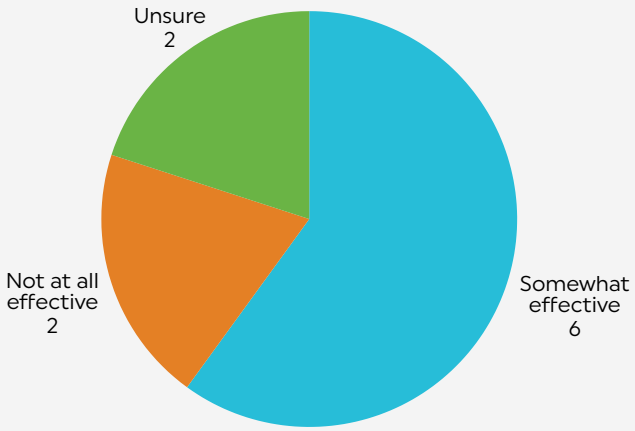


Figure 14: Service provider survey respondents' opinions of the federal Action Plan on Combatting Hate's effectiveness in preventing identity-based harm

The final question in this section inquired about service provider survey respondents' familiarity with the federal government's Bill C-9 – titled the "Combatting Hate Act". The greatest number of respondents, 15 (56%), selected "not at all familiar", followed by 9 respondents (33%) being "somewhat familiar", and 3 respondents (11%) being "very familiar".

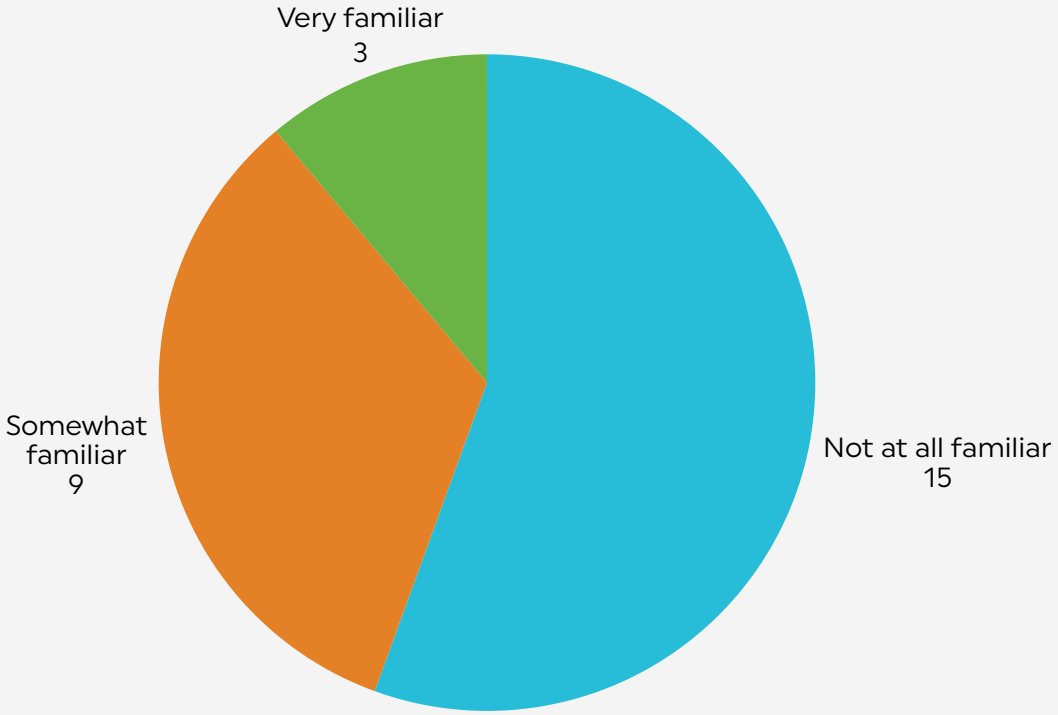


Figure 15: Service provider survey respondents' familiarity with the federal government's Bill C-9 (the "Combatting Hate Act")

RESULTS: SERVICE PROVIDER SURVEY

Respondents who were somewhat or very familiar with the federal Bill C-9 were asked how effective they think the bill will be at preventing identity-based harm, considering the bill has not been passed through the federal government yet. One respondent (8%) selected "not at all effective", 5 respondents (41%) selected "somewhat effective", and 6 respondents (50%) selected "unsure". No respondents selected "very effective".

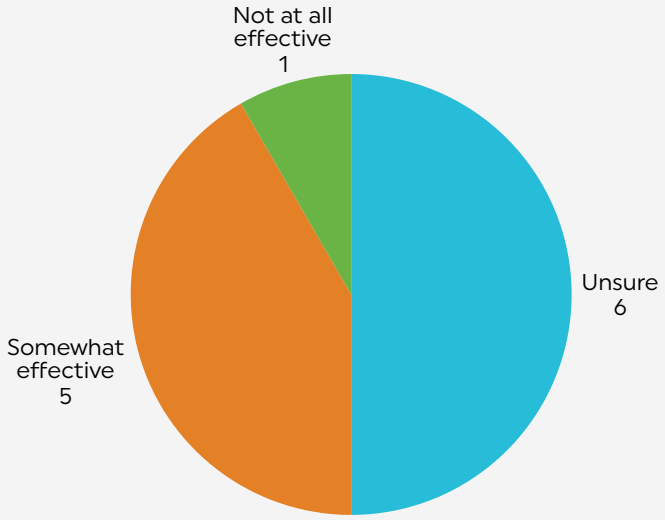


Figure 16: Service provider survey respondents' opinions of the federal Bill C-9's (the "Combatting Hate Act") potential effectiveness in preventing identity-based harm

We then asked service provider survey respondents, "Based on your knowledge and lived and professional experience, what measures do you think would be most effective for preventing identity-based harm?" We provided a list of preventative measures, along with an option to write in an "Other" box, and respondents were invited to choose as many options as they wanted. For the entire sample of 27 service providers, including CJI staff, the most frequently selected prevention measure was school curriculum on identity-based harm, which was selected by 24 respondents (89%). Following this was investment into community and social services (23 respondents, 85%), social and economic investment towards those who experience identity-based harm (20 respondents, 74%), public education about the benefits of diversity, equity, and inclusion (19 respondents, 70%), and workplace training on identity-based harm (19 respondents, 70%).

RESULTS: SERVICE PROVIDER SURVEY

Table 6: Service provider survey respondents' (including CJI staff) opinions of what measures would be most effective for preventing identity-based harm

Prevention Measure	Number of Respondents	Percentage of Respondents
School curriculum on identity-based harm	24	89%
Investment into community and social services (e.g. housing, healthcare, mental health, employment)	23	85%
Social and economic investment towards those who experience identity-based harm	20	74%
Public education about the benefits of diversity, equity, and inclusion	19	70%
Workplace training on identity-based harm	19	70%
Public education about the negative effects of identity-based harm	17	63%
Political figures condemning identity-based harm	17	63%
Criminal laws against identity-based harm	15	56%
Neighbourhood social events	13	48%
Municipal by-laws against identity-based harm	13	48%
Other	5	19%

Of the 27 service provider survey respondents, 7 were CJI staff and 20 were employed elsewhere. When we compare the above responses to the responses of the service providers not including CJI staff, there are a few key differences. While 56% of the sample including CJI staff selected "criminal laws against identity-based harm", this option was selected by 70% of the sample not including CJI staff. Similarly, while 48% of the sample including CJI staff selected "municipal by-laws against identity-based harm", this option was selected by 60% of the sample not including CJI staff. In other words, we note that CJI staff skewed the results of this question by decreasing the rate of respondents who selected criminal or municipal by-laws.

RESULTS: SERVICE PROVIDER SURVEY

Table 7: Service provider survey respondents' (not including CJI staff) opinions of what measures would be most effective for preventing identity-based harm

Prevention Measure	Number of Respondents	Percentage of Respondents
School curriculum on identity-based harm	18	90%
Investment into community and social services (e.g. housing, healthcare, mental health, employment)	17	85%
Workplace training on identity-based harm	15	75%
Social and economic investment towards those who experience identity-based harm	14	70%
Public education about the benefits of diversity, equity, and inclusion	14	70%
Political figures condemning identity-based harm	14	70%
Criminal laws against identity-based harm	14	70%
Public education about the negative effects of identity-based harm	12	60%
Municipal by-laws against identity-based harm	12	60%
Neighbourhood social events	9	45%
Other	3	15%

RESULTS: SERVICE PROVIDER SURVEY

To better understand the type of work being done around identity-based harm locally, we asked service providers how much of their current day-to-day work involves preventing identity-based harm in the Waterloo Region. No respondents selected "none of my work". The most frequent choice was "some of my work" (16 respondents, 59%), followed by "very little of my work (7 respondents, 26%), "most of my work" (3 respondents, 11%), and "all of my work" (1 respondent, 1%).

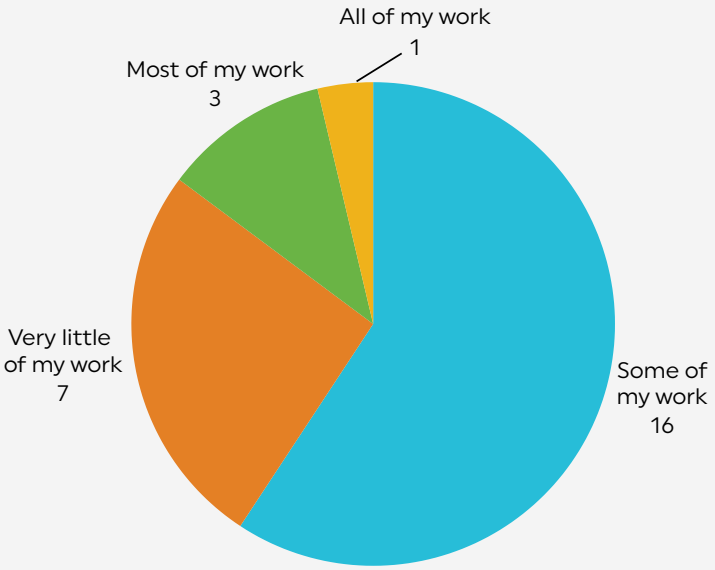


Figure 17: Service provider survey respondents' indications of how much of their day-to-day work involves preventing identity-based harm in the Waterloo Region

As a follow-up, we offered an open-ended space for service provider survey respondents to name any barriers that they experience in working to prevent identity-based harm in the Waterloo Region. The most common theme in this question, mentioned by 17 respondents (63%), was systemic barriers. This included 11 respondents (41%) naming lack of funding for prevention work, along with other barriers such as not prioritizing prevention, systems disregarding some identity groups, a culture of white supremacy, and a lack of allyship.

"In my work, preventing the harm is difficult due to very disproportionate resources/services."

"Identity-based harm towards unhoused folks, particularly in Cambridge, is a rampant problem, and our institutions are not designed to (or interested in) protecting these folks."

RESULTS: SERVICE PROVIDER SURVEY

"Funding is the main barrier. Funders are starting to come around but for a long time it was extremely difficult to attain funding for prevention efforts."

"Decision-makers need to prioritize prevention work, and they are not always doing that."

"Lack of recognition that our systems and structures are built to serve some identities over others."

"Many sources of funding are geared towards either creating brand new programs or responding to issues in a reactionary fashion. It's much more difficult to demonstrate the impact of upstream preventative measures because they are often not as flashy or quantifiable as what funders are looking for. Funders in Waterloo Region (and provincially, and federally) need to step up and invest in services that are preventative as well as reactionary."

Another common theme mentioned by 6 respondents (22%) was barriers within their workplace that inhibited prevention work. Respondents mentioned their organization not prioritizing prevention work, lateral violence among their service recipients, and a lack of diversity among employees and leadership.

"Many employees believe that talking about identity-based harm in the workplace is unnecessary. Many employees believe our workplace is 'woke' and want it to be less so."

"Addressing identity-based microaggressions or misinformation that leads to identity-based bias technically being outside of our scope."

RESULTS: SERVICE PROVIDER SURVEY

"Competing priorities within the organization; as a fully government funded service, political priorities can dictate what is resourced or valued within the system."

"I am the only staff member that has equity work as part of their portfolio, so attempting to get training and education out about anything related to equity, including identity-based harm, proves to be a challenge."

"We are also a public institution that welcomes everyone, which can create equity tension in our space that could lead to harm."

"Capacity is a major barrier. The time and resources required to be trained and learn about identity-based harm and time to integrate knowledge to collectively work to prevent identity-based harm in our services."

"Historically, very white dominant workspace with very little to no 'diversity' (age, socioeconomic status, race, sexual orientation to name a few) at leadership and board level. Barrier at many points has felt like a result of not having different lived experiences perspectives at the table and/or emotional labour created for the few team members who are considered 'diverse'."

A third dominant theme around barriers for prevention work, mentioned by 5 respondents (19%), was public opinion influencing organizations' work. Respondents named negative public perceptions of Jews and Immigrants, wavering public trust in their organization, and public awareness of their organization as barriers.

RESULTS: SERVICE PROVIDER SURVEY

"Public perception among some, that Jews are white, privileged oppressors and thus not eligible/worthy of sympathy or support."

"When harm happens, if we do not respond in appropriate ways, it diminishes trust. Trust is a major barrier."

"When folks come to our organization seeking housing and start blaming newcomers for 'taking our housing', we try to correct misinformation and provide education on why this isn't true. However... we continue to see lateral violence persist."

"Negative cultural stigma and stereotypes regarding newcomers and refugees... and targeted use of AI to flag refugee status."

On the other hand , we also asked service provider survey respondents what opportunities they see within their organization for preventing identity-based harm in the Waterloo Region. The most commonly cited theme, mentioned by 14 respondents (52%), was educating the public. This included educating the public about identity-based harm and its effects, and about other initiatives in the community that are combatting identity-based harm.

"We seek to inform and educate our community through media, social media, speaking events, organizational events... [about] equity, deservingness, community building through knowledge and care."

"Ability to spread knowledge on immigration and newcomers."

RESULTS: SERVICE PROVIDER SURVEY

"We are slowly working towards teaching people how to stop harm when they see it, how to stand up for themselves - and against the "customer is always right" mentality - basic respect needs to be in place at all times and there needs to be consequences for actions."

"Throughout individual conversations and through using our platform (socials, etc), we do our best to counter misinformation that may contribute to stigma or discrimination. Finally, our office strives to amplify community-led initiatives that promote community, inclusion and safety."

"Raising awareness regarding these structural barriers that refugees face - hopefully exposing the root causes for many of the issues that they face."

Additionally, a theme mentioned by 9 respondents (33%) was increasing their organization's capacity. This included mentions of identity-based harm training in their organization, addressing identity-based harm that happens within their organization, conducting research, and offering trauma-informed and culturally-responsive service.

"We could be doing more work internally to talk about identity-based harm and how we as an organization can work to prevent it... We work with very marginalized populations, and while our work may in some ways help to prevent that harm, usually by the time we encounter folks they have a long history of experiencing harm."

"We have a large opportunity to educate our staff on preventing identity-based harm and have had many conversations about microaggressions, but do not have a formal framework for how to address those."

RESULTS: SERVICE PROVIDER SURVEY

"We are prioritizing research (both qualitative and quantitative) that helps us get a lay of the land both on the macro level and the micro level of what people are experiencing."

"Challenge and advocate for change at every level, everything from our recruitment practices to student and volunteer onboarding etc... Invest in wellbeing of current team members who already endure so much in society and also show up in the workplace."

"We do our best to provide trauma-informed, culturally-responsive service, interpretation support, and continue to engage in ongoing learning to strengthen this approach. Our office helps to identify systemic gaps, provide advocacy for equitable access to services and programs, and support policy changes that address barriers."

A third theme around opportunities seen for prevention work was engaging youth, mentioned by 3 respondents (11%). This theme included mentions of educating youth about identity-based harm, and supporting youth belonging in community spaces.

"There are immense opportunities to support youth to build critical thinking skills, cultivate a sense of belonging and establish a foothold for a meaningful future that strengthens the protective factors that lessen the likelihood of vulnerability to the adoption of viewpoints that can lead people to cause identity-based harm."

"Working in schools to help build relational understanding on the impacts of identity-based harm."

RESULTS: SERVICE PROVIDER SURVEY

In addition to our inquiries about prevention work, we asked service provider survey respondents how much of their day-to-day work was focused on responding to the needs of those who have experienced identity-based harm. Two respondents (7%) selected "none of my work", 3 respondents (11%) selected "very little of my work", 14 respondents (52%) selected "some of my work, 6 respondents (22%) selected "most of my work", and 2 respondents (7%) selected "all of my work".

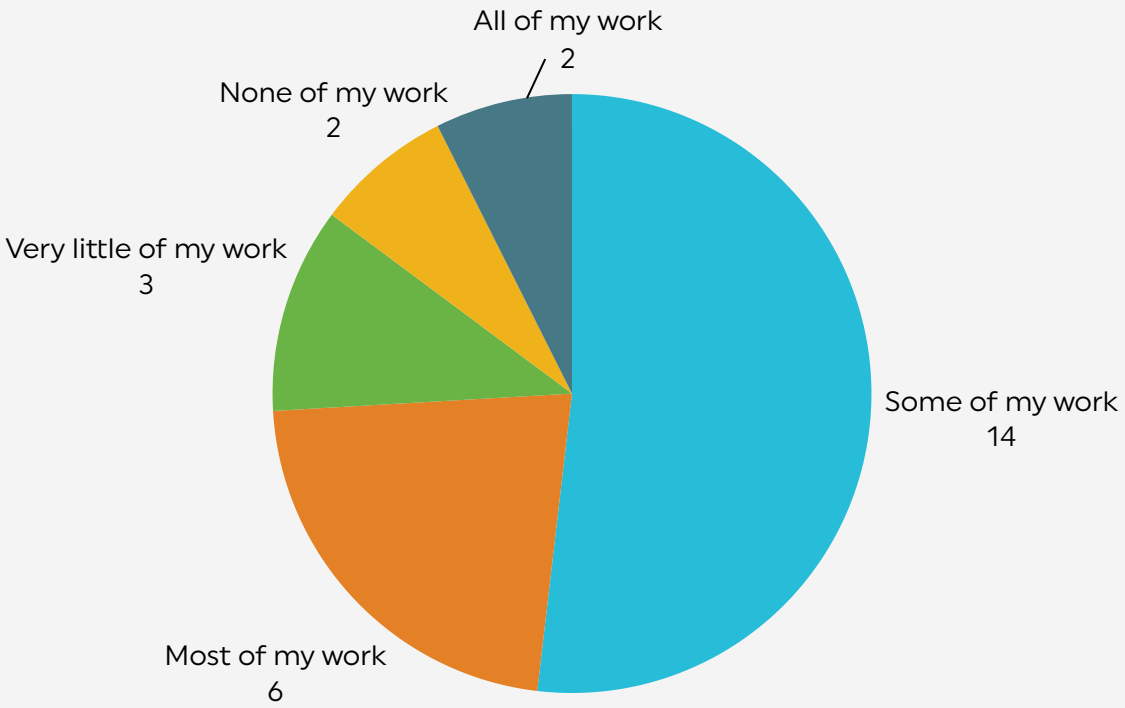


Figure 18: Service provider survey respondents' indications of how much of their day-to-day work involves responding to the needs of those who experience identity-based harm in the Waterloo Region

We then offered another open-ended space to write what barriers service provider survey respondents experience in responding to needs around identity-based harm. Systemic factors were the most frequent theme, mentioned by 16 respondents (59%). Ten respondents (37%) cited lack of funding, and other barriers in this category included lack of space in systems, the political climate, restrictions on how to use funding, lack of research, and experiencing identity-based harm as a service provider.

RESULTS: SERVICE PROVIDER SURVEY

"Institutional polices and attitudes (e.g. rapid evictions of encampments), the political climate, trying to balance being a service organization (and needing funding for our programs) and being an advocacy organization."

"Again, funding is always an issue. But even bigger than that is the difficulty in working within broken systems. Our systems are not designed to meet the needs of most people, and so we see people fall through the cracks as a result."

"Restrictions in how we are allowed to use funding mean that we are sometimes constrained and prevented from putting that funding towards where it is needed most."

"Not enough of everything - not enough housing, harm reduction services, shelter beds."

"Obviously funding constraints makes it hard to give trainings externally or spend the time and resource it takes for dedicated outreach and (un)learning outside the organization - even within our own organization it's hard to do this successfully all the time."

"Poor governance that negatively impacts the social, psychological, physical, economic etc. wellbeing of those they represent leading to increased fear, conflict and hate. Right-wing propaganda. Rigidness of the criminal legal system; refusal to address structural barriers."

"Systemic barriers, such as unfair policies and laws that disproportionately impact those who are equity denied... Often times this is in addition to experiencing microagressions as a service provider while trying to advocate or access information on supports on behalf of participants."

RESULTS: SERVICE PROVIDER SURVEY

Workplace barriers were also named as inhibiting response to the needs of those who experience identity-based harm. This theme, mentioned by 8 respondents (30%), touched on limited staff capacity, lack of understanding of identity-based harm in the workplace, and lack of formal strategies to address identity-based harm in the workplace.

"People in decision making roles who do not have lived experience or try to empathize with those who do. There needs to be a real overhaul in our Human Resources department but that won't happen."

"Lack of organizational coordination around building capacity to respond to this kind of harm."

"I don't think we have good formal strategies for navigating a response that is human-centred to identity-based harm."

"Key barriers include limited resources and capacity, underreporting due to fear or mistrust, and gaps in accessible, culturally responsive services needed to fully support those affected by identity-based harm."

"Capacity constraints - we do our best to provide timely culturally responsive service, however we are still a small team and have our limitations."

RESULTS: SERVICE PROVIDER SURVEY

We also asked about opportunities that service provider survey respondents saw within their organization for responding to the needs of those who have experienced identity-based harm. The most frequently mentioned theme was increasing organizational capacity for response work, mentioned by 9 respondents (33%). This included staff training on identity-based harm, expanding program capacity, and gathering data.

"Always more room for learning and training - how we can respond to it as individuals and how we can respond to it as a witness."

"Expand staff training to better respond to and support those experiencing identity-based harm."

"We are working on gathering data and are working more intentionally to educate ourselves regarding the role we play as therapists in providing trauma-informed and culturally-infused therapy."

"I see opportunities in growing staff capacity to support people who experience identity-based harm through our varied services. I also see opportunities in applying for grants to expand the funding for supporting folks."

"Capacity of staff and volunteers as support people, advocates, role-models, educators etc. in community."

Additionally, 5 respondents (19%) touched on the theme of mobilizing the voices of those with lived experience as an opportunity for responding effectively to needs around identity-based harm.

"We listen to the voice of our people and ask for lived experience so we better understand who is in our organization and what they need from us."

RESULTS: SERVICE PROVIDER SURVEY

"Bringing individual stories into larger systemic advocacy (with consent)."

"Create space to support those who have experience harm to discuss... the impact of the harm and what they may need to repair the harm that has occurred."

A final theme in the area of opportunities for responding to needs around identity-based harm was collaboration. Five respondents (19%) mentioned collaboration between organizations and individuals as an opportunity to reach more community members who have experienced identity-based harm.

"Working collaboratively with folks who do understand that this is something that needs to be taken seriously and addressed."

"There are opportunities to strengthen collaboration with community partners, enhance culturally responsive services."

"Maintaining strong working relationships with other organizations who can provide more support to these folks."

"More collective advocacy, partnerships between like-minded service providers."

"Increasing and deepening relationship with other agencies."

RESULTS: SERVICE PROVIDER SURVEY

To further understand how service provider survey respondents attend to needs around identity-based harm, we asked the open-ended question, "based on your professional experience, what needs stand out as most prevalent among those who have experienced identity-based harm in the Waterloo Region?". The most commonly mentioned theme here was systems support, named by 10 respondents (37%). Topics brought up around this theme included support reporting identity-based harm, working with the police, identifying alternatives to the police, and navigating housing, healthcare, employment, and education systems.

"I think underreporting makes it tricky... knowing that many people don't report to police, but will disclose to their family or friends."

"Housing and shelter. When people are in fight or flight on where they can stay at night, so many other important needs (mental health challenges, substance use issues, etc) fall to the back burner."

"More trusted spaces to report harm and receive appropriate care and advocacy."

"Feeling stigmatized which... has impact on their capacity to seek meaningful employment, access to adequate/quality health care options, affordable housing, mental health supports etc."

"Access to suitable education, housing, healthcare, cultural resources, etc."

"Working relationships with WRPS."

Additionally, 7 respondents (26%) touched on the theme of need for understanding from fellow community members. Along these lines, respondents brought up public education about identity-based harm, interaction between different identity groups, allyship, and challenging misinformation.

RESULTS: SERVICE PROVIDER SURVEY

"Initiatives like "We all belong here" which include events that facilitate face-to-face-encounters between diverse groups."

"Identifying misinformation as the root of much bias, promoting understanding of shared humanity."

"Allyship - other people, who have power and privilege, need to step up!"

The need for safety and belonging was also a theme named by 7 respondents (26%). Respondents named that this need shows up through spaces to build belonging and relationship, and through safety measures to protect against identity-based harm.

"Culturally relevant, identity-based and affirming opportunities for healing (reactively) and identity formation and belonging (proactive)."

"Need to feel safe. Walking in a community where their safety cannot always be assured."

"My opinion is that regardless of the need, healing happens in relationship."

"Emotional and relational safety (access to safer spaces), space and process to voice and express impact and explore genuine accountability, and need for community and connection."

"I would also include social inclusion as well, it is often undervalued, yet can have such a negative or positive impact on someone's level of hope, confidence, and capacity to continue to push through all the barriers."

RESULTS: SERVICE PROVIDER SURVEY

Finally, service provider survey recipients commonly brought up a need for relevant supports for those who have experienced identity-based harm. This theme was mentioned by 6 respondents (22%), and respondents touched on peer support needs, needs of specific identity groups, and the complexity of intersectionality of identities.

"The intersectionality is often overlooked. I worry about the racialized 2SLGBTQIA+ community members who do feel comfortable in the region. Most of the organizations serving the 2SLGBTQIA+ community members have White, upper-middle class, and well-educated leaders. They are not serving the broad community."

"The disproportionate rates of identity-based harm for certain identities is a challenge as well, especially when considering intersecting identities."

The final question of our service provider survey asked if there was anything else respondents would like to share about their professional experience around identity-based harm. Among those who provided a response, one theme was around the current political climate, mentioned by 3 respondents (11%).

"It is getting harder to support this work in meaningful and thoughtful ways in the current social and political climate."

"From my perspective the focus needs to be on prevention and developing a deep understanding of the social/political/economic factors that drive identity-based harm."

"Dismantling of the education and health care systems as well as extreme mismanagement of public funds and resources by the provincial government will increase identity-based harm."

RESULTS: SERVICE PROVIDER SURVEY

An additional 3 respondents (11%) touched on the theme of tension between identities. This included thoughts around identity groups with opposing viewpoints, lateral violence, and intersectionality.

"There is an intersectionality around the unhoused and race. Many of the folks that are in the encampments are White and I worry for the racialized individuals who are seeking community that are not receiving the same services because the lack of inclusion."

"I would be curious how we navigate identity-based harm when there is equitable tension. By this, I mean two folks from equity-deserving communities that have viewpoints related to their identity/identities that may cause identity-based harm."

"Lack of awareness of cultural difference and understanding for individuals that have experienced harm or identity-based harm from the countries from which they are fleeing."

A further 3 (11%) respondents touched on the theme of increasing organizational capacity around identity-based harm. This included thoughts around leadership inaction, educating staff, and staff experiencing identity-based harm.

"Senior members are not prioritizing this work."

"Broader education for service providers on how to support and respond to experiences of identity-based harm."

"More conversation is needed about the impacts of identity-based harm on self, while trying to provide identity-based harm support for others."

GROUP DIALOGUES

"Justice is not needing to talk about justice - if justice existed, we wouldn't have to talk about it."

- Group Dialogue Participant

RESULTS: GROUP DIALOGUES

We facilitated a series of group dialogues across the region on the topic of identity-based harm. One activity that was facilitated across several groups was offering group participants statements related to identity, harm, and justice, and having participants indicate whether they agreed, disagreed, or were unsure about the statement. This activity was only done with three of the groups, and different statements were offered to different groups. Therefore, the total number of participants who responded to each statement differs.

Table 8: Group dialogue participants' opinions on statements related to identity, harm, and justice

Statement	Total Participants	Yes / Strongly Agree / Always	Sometimes / Agree	No / Disagree / Never	I don't know
Conflict is normal	40	0 (0%)	25 (63%)	14 (35%)	1 (3%)
Conflict is bad	59	21 (36%)	18 (31%)	18 (31%)	2 (3%)
Words can hurt me	40	32 (80%)	8 (20%)	0 (0%)	0 (0%)
Things people say online can hurt me	40	19 (48%)	16 (40%)	5 (13%)	0 (0%)
Punishment helps change people	47	22 (47%)	15 (32%)	10 (21%)	0 (0%)
People should get second chances	52	31 (60%)	18 (35%)	1 (2%)	2 (3%)
I would want to talk to my friends after something hard happens	52	26 (50%)	20 (38%)	3 (6%)	3 (6%)
I would want to talk to a trusted adult after something bad happens	52	25 (48%)	14 (27%)	10 (19%)	3 (6%)
I can heal without an apology	52	29 (56%)	7 (13%)	8 (15%)	8 (15%)

RESULTS: GROUP DIALOGUES

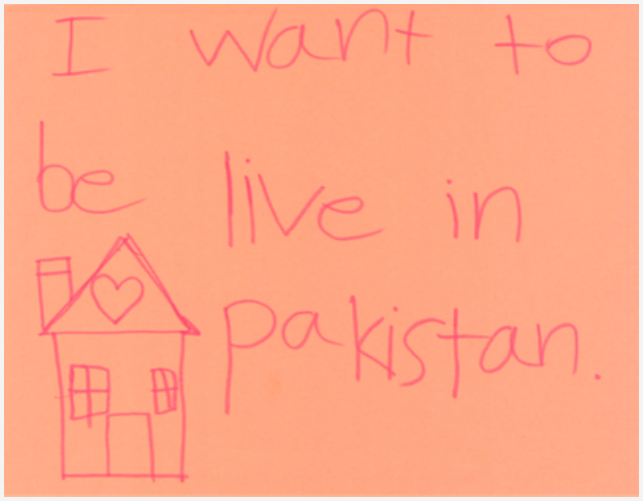
Table 8: Group dialogue participants' opinions on statements related to identity, harm, and justice

Statement	Total Participants	Yes / Strongly Agree / Always	Sometimes / Agree	No / Disagree / Never	I don't know
I need an apology after someone has hurt me	7	2 (29%)	4 (6%)	0 (0%)	1 (14%)
Only police can help to stop crime	59	20 (34%)	7 (12%)	26 (44%)	6 (10%)
Young people understand justice better than adults think we do	40	15 (38%)	11 (28%)	13 (33%)	1 (3%)
Safety means different things for different people	40	33 (83%)	0 (0%)	0 (0%)	7 (18%)
People who hurt others or commit crime should go to jail	59	8 (14%)	38 (64%)	7 (12%)	6 (10%)
When there is conflict or rule-breaking at school, a teacher is needed to decide about who's right and who's wrong	12	1 (8%)	0 (0%)	9 (75%)	2 (17%)
When there is conflict or rule-breaking at work, a supervisor is needed to decide about who's right and who's wrong	12	1 (8%)	0 (0%)	4 (25%)	7 (58%)
When there is conflict or rule-breaking in the community, the police are needed to decide about who's right and who's wrong	12	1 (8%)	0 (0%)	11 (92%)	0 (0%)

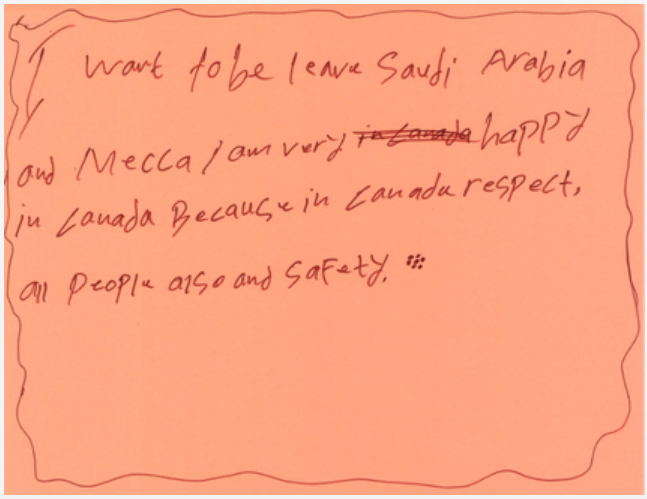
RESULTS: GROUP DIALOGUES

Another activity, facilitated in two group dialogues, asked participants to design their vision of a just community. In small groups or individually, participants were asked to create a visual representation of a just community, and were encouraged to consider what spaces and services would be featured, what the layout would be, and what they would call it. In total, we received 47 visualizations of participants' just communities.

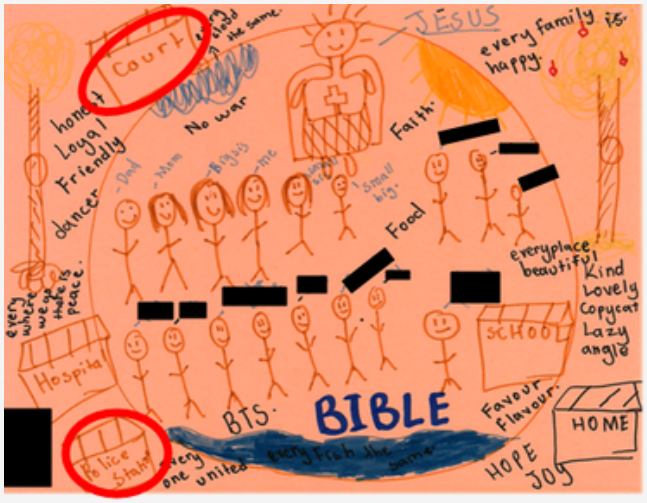
One theme that arose from participants' just communities was a focus on location. In total, 16 participants (34%) specified where in the world they envision their just community to be. While some participants highlighted places in Canada, others featured their home countries, and a few represented both Canada and another country.

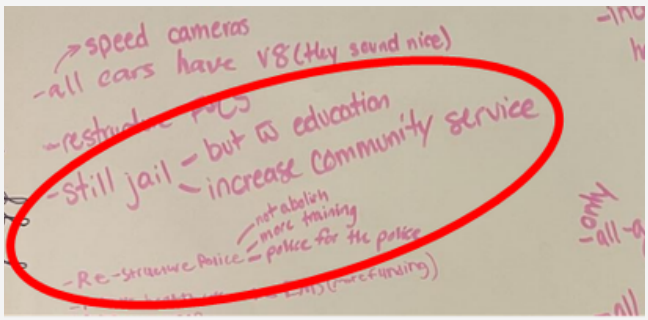


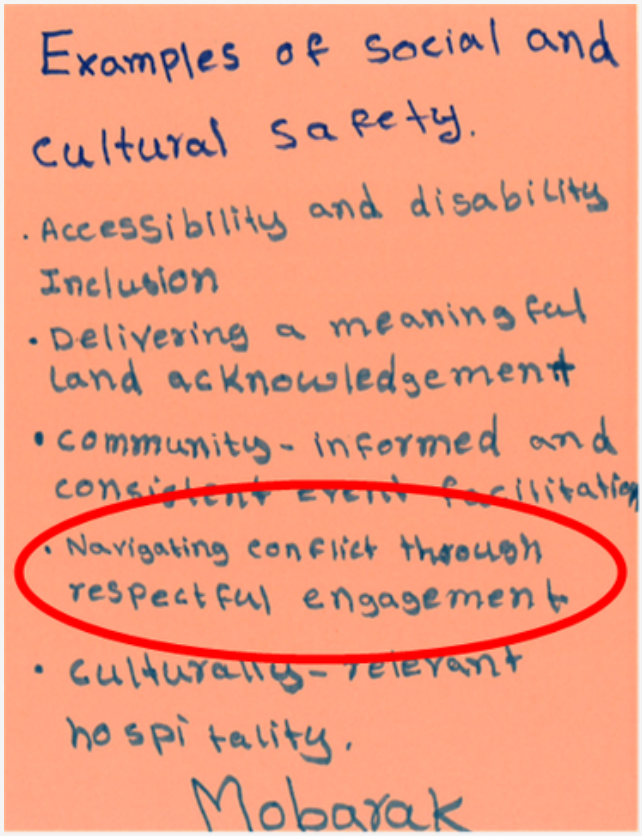
RESULTS: GROUP DIALOGUES



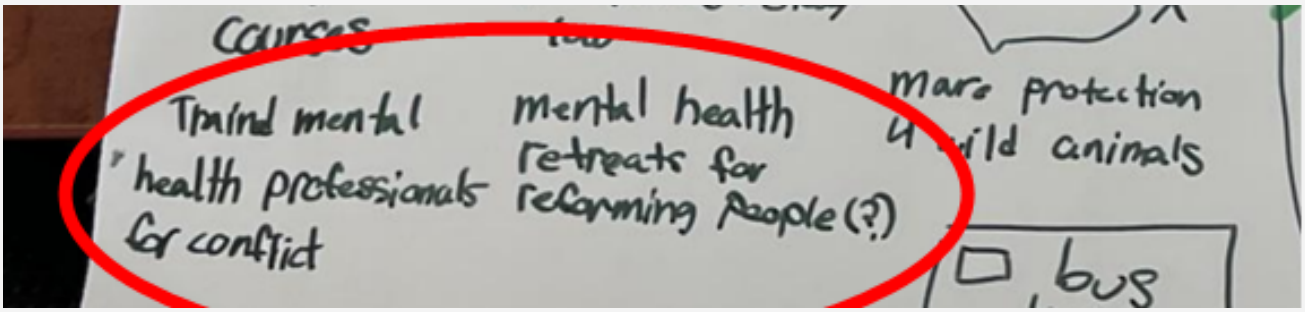
Another theme among participants' just communities was considerations of a justice or legal system. Nine submissions (19%) included some mention of how crime or conflict would be addressed. Some included systems that are currently in place, like police and courts, while others named methods outside of the formal legal system.



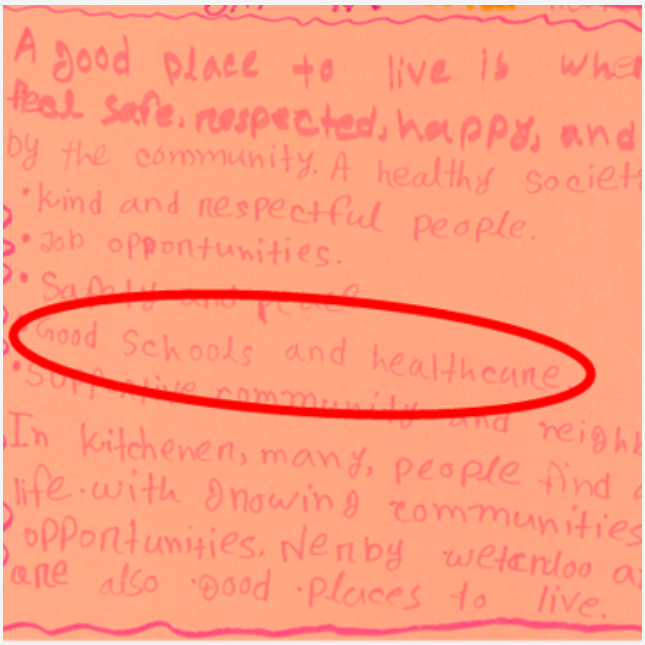


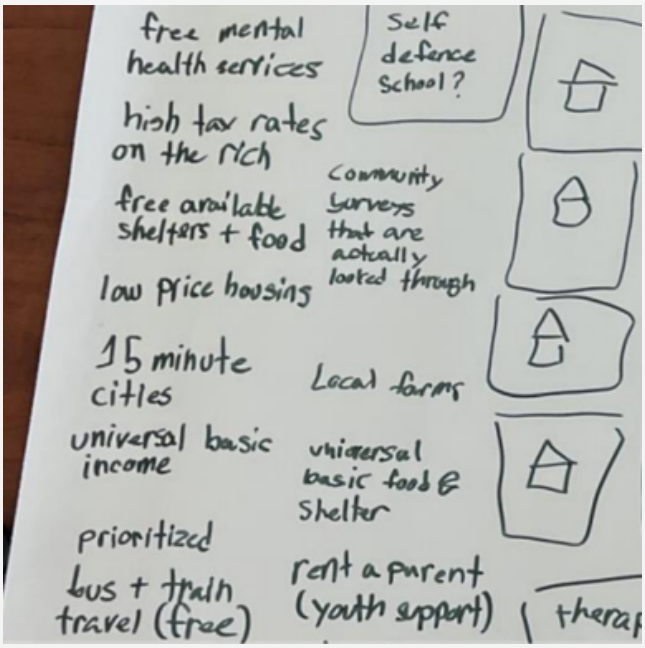


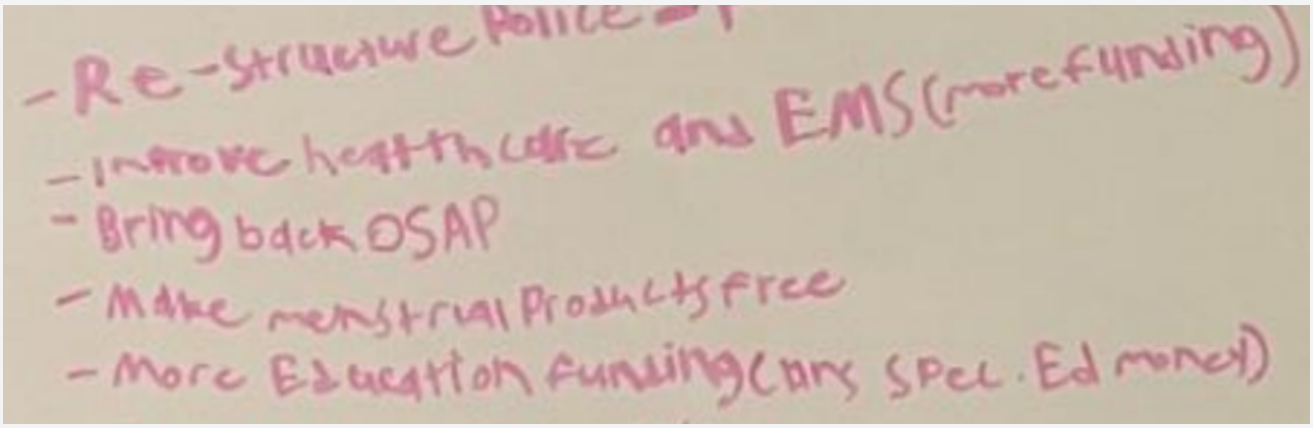
RESULTS: GROUP DIALOGUES



A third theme among participants' just communities was considerations for meeting basic needs. Seven submissions (15%) included depictions or descriptions of services to meet needs such as housing, food, healthcare, transportation, and employment.







RESULTS: GROUP DIALOGUES

In the group dialogues, we also facilitated Circle-style group discussions around experiences of identity-based harm, justice, and healing. Questions we asked that led to group discussion included:

- What does justice mean to you when you've experienced identity-based harm?
- What does healing mean to you when you've experienced identity-based harm?
- How is healing similar or different than justice?
- How is punishment similar or different than accountability?
- How are victims similar or different than offenders?
- How is harm similar or different than hate?
- Do you think conflict is bad?
- Do you think punishment helps change peoples' behavior?
- Do you think only the police can help to stop crime?
- Do you think people who commit crimes should go to jail?
- Do you need an apology after someone has hurt you?

From these discussions, several themes around justice commonly came up across multiple groups. For one, anti-punitive stances were mentioned frequently. Members of various groups cited law enforcement and the legal system being ineffective in addressing identity-based harm, punitive measures being ineffective for changing behavior, and a preference for community responses to harm instead of legal system responses.

"Police pick and choose who to enforce, and some crimes are enforced more than others."

"[Police] will catch the people causing the crime but won't stop the crime itself."

"When I see the police, I don't feel safe."

RESULTS: GROUP DIALOGUES

"When I see police in the media portrayed as the good guys I cringe."

"There should be re-education after committing a crime that shows you're taking action to change."

"Punishment doesn't change behavior consistently, as punishment continues over time it's less and less likely the person will change for the better."

On the other hand, punitive preferences were mentioned by some group participants, though significantly less often. Some participants voiced a preference for punitive responses for certain types of harm, such as sexual violence or hate, and some others suggested punitive measures only for those who reoffend.

"A serious crime like sexual assault deserves a harsher punishment than financial crimes, for example."

"Harsher criminal punishments for sexual and hate crimes... harsher meaning more prison time."

"Prison should be mainly for people who continually reoffend."

Several group dialogue participants also spoke about the complexity of justice in situations of identity-based harm. Ideas around this theme included proportionality of response to harm, harm occurring as a reaction to being harmed, and the overlap in categories of "offender" and "victim".

RESULTS: GROUP DIALOGUES

"I'm questioning proportionality - if someone kills another person should they be killed themselves? Killing again will create more harm."

"Justice is complicated in instances where violence is a reaction to experiencing violence - in that case, violence is understandable."

"Offenders are often victims... and sometimes victims can't accept that they're victims."

A final theme around justice that group participants spoke of was pessimism about whether justice is possible. Some participants mentioned feeling that justice does not currently exist at all in the social or political climate we live in.

"Justice is not needing to talk about justice - if justice existed, we wouldn't have to talk about it."

"Justice doesn't mean shit to me in this society."

"If [justice] doesn't exist everywhere, then it can't exist anywhere."

Themes around healing and identity-based harm arose commonly as well from group discussions. One theme related to healing was the role of community in healing. Several participants shared thoughts around receiving support from others in their healing process, and feeling inspired seeing others accept their identities.

"People can help each other heal through community."

"It helps to see role models, like when I see other people show me that long hair can be masculine, I feel okay about it."

RESULTS: GROUP DIALOGUES

"Healing is being heard... it's communal."

Another theme from group participants related to healing was the role of apology in healing. Several participants spoke about needing an apology from the person who caused them harm in order to heal from that harm.

"I do need the comfort of an apology to heal."

"I won't ask for [an apology], but I won't feel okay unless I get one."

Group participants also spoke of the role of self-care in healing. This theme was mentioned in a few groups, including being gentle with oneself while healing, not rushing healing, and working to understand oneself in order to heal.

"Connecting with friends and being gentle with myself helps healing."

"Healing has setbacks and takes time, even if I've healed from it before it can take time to do it again... there's never a rush to heal."

"Healing is easier when I'm confident in my identity and I can understand myself."

Also related to healing, group participants spoke on the theme of healing as harm prevention. Some participants discussed that healing oneself can prevent a person from causing harm in retaliation, or it can enable a person to better support others.

"Healing yourself can prevent further violence from that person, and they can go on to help other people so others don't commit violence."

RESULTS: GROUP DIALOGUES

"Healing yourself can help a person give others justice."

"Healing can be ...prevention of further harm for the perpetrator and victim."

Finally, in our group discussions, participants touched on the theme of comparing healing and justice. Some participants voiced the opinion that healing and justice are connected – that one cannot exist without the other, and if the legal system is working well, they can both be offered to those involved in the system.

"[Healing and justice are] interconnected, you can't have one without the other."

"Healing can happen in the justice system when the victim has a voice."

"Healing and justice can be similar if the system is working well."

"Justice can lead to healing through connection with others."

In contrast, a nearly equal amount of group dialogue participants voiced the opinion that healing and justice are not connected. Here, participants suggested that healing can happen without getting justice, healing is difficult in the legal system, and healing is more of a personal journey than justice.

"I won't get justice for my abuse, but I've still been healing... justice doesn't mean you're going to heal."

"You don't need justice to heal."

RESULTS: GROUP DIALOGUES

"The justice system doesn't always help healing. My personal experience in court was re-traumatizing. My personal healing happened outside of court."

"Justice is community-wide, affecting everyone, while healing is a more personal journey."

ANALYSIS OF FINDINGS

Making meaning of literature, survey, and engagement findings to proffer opportunities for response and prevention.

DEFINING IDENTITY-BASED HARM

At the start of this project, our working definition of identity-based harm was:

> "Any action, behavior, or structural condition that targets, devalues, or excludes an individual or group based on any personal characteristic. These personal characteristics may include race, ethnicity, gender, sexuality, ability, faith, culture, language, or socioeconomic status, among others, as well as the ways these aspects of identity intersect with one another. The type of identity-based harm ranges from explicit harm, like harassment or violence, to subtle harm, like exclusion, microaggressions, or institutional barriers. The intent behind identity-based harm also falls within a broad range, from "well-meaning" actions driven by subconscious bias to willful, purposeful violence."

To ensure the definition felt true to those with lived and living experience around identity-based harm, we sought feedback from community members through our public and service provider surveys on what they would add, remove, or edit. There were eight areas of change that have informed our working definition:

1. A common suggestion was additions to the list of personal characteristics within the definition. Evidently, it is important for community members to see aspects of identity and experience that are significant to them reflected in a definition of identity-based harm. However, it would not be possible to include every aspect of identity or experience that one could have within a definition. As such, to avoid excluding any specific identity or experience, we have removed the list of personal characteristics from our working definition of identity-based harm.

2. Respondents recommended specific areas of harm to include to make the definition more far-reaching, including stigma, lateral violence, and barriers to needs (healthcare, housing, employment, etc.). At the same time, similar to the list of identity aspects, we also heard that listing specific types of harm can lead to feelings of exclusion if the type of harm one has experienced is not listed.

DEFINING IDENTITY-BASED HARM

3. We received comments that "intent" behind identity-based harm feels irrelevant, misunderstood, and misinterpreted, especially when "impact" isn't included in the definition. On the other hand, we also heard it feels important to some respondents that unintentional harm isn't "lumped in" with purposeful harm, considering the steps one would take to repair the harm might differ.

4. We heard a need for the terms "subtle" and "explicit" to be redefined, as some respondents pointed out that harassment and violence can be subtle, and exclusion, microaggressions, and institutional barriers can be explicit.

5. Some respondents expressed the importance of naming that identity-based harm occurs on an interpersonal, group, and systemic level, as well as on an individual level.

6. We heard suggestions to more intentionally mention internal processes that lead a person to cause identity-based harm, including changing "subconscious bias" to the more commonly used "unconscious bias", and mentioning biased internal narratives and thought patterns.

7. Several respondents suggested highlighting intersectionality more intentionally, to stress the significance of different aspects of identity intersecting with one another and how systems of power, oppression, and injustice intersect with different identities.

8. Finally, respondents across both surveys recommended simplifying the definition to make it more accessible, or having a simplified definition in addition to a more complex, nuanced one.

Taking all feedback into account is a complex, yet important, initiative. We value all the input that we received from community members, and we recognize that the definition will continuously be adaptable and responsive to new input, beyond the publication of this report. A reworked, yet still working, definition of identity-based harm based on feedback from our public and service provider surveys is as follows.

DEFINING IDENTITY-BASED HARM

> Harm that is based on any aspect of identity or experience and that negatively impacts an individual or group. Identity-based harm can be caused by an individual, group, institution, or system. Harm may be experienced due to a single aspect of identity or experience, or due to the intersectionality of multiple aspects interacting with one another and with systems of power, oppression, and injustice. Identity-based harm can range from explicit harm that is widely understood to be harmful and meets criminal legal thresholds, to subtle harm that is more commonly misunderstood or disregarded. Identity-based harm includes both visible, external actions towards others, and invisible, internal processes like thought patterns and narratives. The intent behind identity-based harm also falls within a broad range, from unintentional harm driven by unconscious bias to willful, purposeful violence."

We feel compelled to name that as restorative justice practitioners, our work does not necessarily rest on the scope of definitions, rather on the expressions of impact shared by those directly affected by identity-based harm.

JUSTICE AND HEALING IN EXPERIENCES OF IDENTITY-BASED HARM

Non-Punitive and Restorative Preferences

Overall, we heard a significant theme across our surveys and group dialogues that Waterloo Region community members prefer non-punitive and/or restorative practices for preventing or responding to identity-based harm. In our public survey, 60% of respondents indicated that at least one of the restorative options that were listed would meet their healing and/or justice needs. These options included the person who harmed me paying me restitution, the person who caused me harm apologizing to me, telling the person who harmed me how I feel face-to-face or in a letter, or having a discussion with the person who harmed me and a trained mediator. This was in contrast to only 9% of public survey respondents indicating that the person who caused them harm being arrested or imprisoned would meet their healing and/or justice needs.

What's more, 80% of public survey respondents identified that, if they experienced or witnessed identity-based harm, they would contact at least one area of community-based support, including personal contacts, mental health supports, non-police reporting services, community organizations, a crisis line, or religious, spiritual or faith-based services. Many respondents named that these community-based options felt trustworthy, safe, non-judgmental, and understanding.

On the other hand, many respondents also named why they would not contact police in instances of identity-based harm, citing distrust of police, fear for their safety and others' safety, and experiencing harm from police in the past.

JUSTICE AND HEALING IN EXPERIENCES OF IDENTITY-BASED HARM

Non-Punitive and Restorative Preferences

These sentiments also showed up in our group dialogues around identity-based harm. In Circle-style conversations, participants discussed feeling that punitive systems, including police and courts, were not effective methods for justice or healing in experiences of identity-based harm. Instead, we heard that community members rely on their communities and support networks for healing from harm. This was reflected in participants' visualizations of a "just community" as well, where participants emphasized "navigating conflict through respectful engagement" or offering "trained mental health professionals for conflict".

This theme complements conclusions from other community-based research that have shed light on the hesitancy of those who have experienced identity-based harm to contact police. For instance, research from Spectrum (2021) in Waterloo Region found that 2SLGBTQ+ individuals report violence and harassment to police at lower rates than non-2SLGBTQ+ individuals. This may be a result of 2SLGBTQ+ reports of harm being less likely to be considered "fully resolved" by their conclusion, and that 24% of trans and non-binary survey respondents reported having been harassed by the police on at least one occasion (Spectrum, 2021).

Additionally, the Waterloo Region Crime Prevention Council found in research on Islamophobia that many Muslim individuals are uncomfortable to report to and trust in the police (Shafiq, 2019). Local research into women and gender-diverse individuals experiencing homelessness saw that 69% of survey respondents "have avoided using the police or decided not to report a situation of violence because it felt unsafe." (Gordon et al., 2022, p.15). Indigenous community members have described feeling that "reporting these incidents will fall on deaf ears due to the long-standing history of Canada ignoring the voices of Indigenous peoples." (Gordon et al., 2024, p. 55).

JUSTICE AND HEALING IN EXPERIENCES OF IDENTITY-BASED HARM

Punitive Preferences

While restorative and/or non-punitive preferences came up more often, we still heard from community members who had a punitive orientation towards identity-based harm. While only 9% of public survey respondents said that the person who caused them harm being arrested or imprisoned would meet their healing and/or justice needs, a larger proportion (30%) said that they would contact the police if they experienced identity-based harm.

Most respondents who explained their preference for contacting the police shared that it is because they have the authority to enact consequences on the person who caused harm. Respondents who completed the service provider survey showed a greater preference for punitive measures than what was indicated in the public survey. For service providers outside of CJI, 70% believed that criminal laws would support prevention of identity-based harm, and 60% believed that municipal by-laws would support prevention.

Some group dialogue activities indicated punitive preferences among participants as well. For example, in the group setting, 79% of participants agreed or strongly agreed that "punishment helps change people", 78% agreed or strongly agreed that "people who hurt others or commit crimes should go to jail", and 46% agreed or strongly agreed that "only police can help to stop crime".

Additionally, some visualizations of participants' "just communities" included punitive systems – either simply naming police and the court, or expanding that police and court would still exist but would operate in different ways than they do in our community. Group dialogue participants named specific types of harm that they felt deserved more punitive response, such as sexual harm, hate crime, and identity-based bullying in schools.

JUSTICE AND HEALING IN EXPERIENCES OF IDENTITY-BASED HARM

A Note on Intersectionality

Statistical tests of significance (chi-square tests of independence) were carried out to determine whether relationships existed between specific identities or experiences and preferences for restorative or punitive measures.

For example, we analyzed whether respondents who identified as Black were significantly more or less likely to indicate that they would contact the police if they experienced identity-based harm. We also carried out statistical tests to examine whether multiple intersecting identities or experiences made one more likely to prefer restorative or punitive measures. For example, whether those who identified as 2SLGBTQ+ and who were experiencing homelessness were significantly more or less likely to indicate that restorative practices would meet their healing and/or justice needs.

Across all of our analyses, we found very few statistically significant relationships between identity, experience, and restorative or punitive preferences. Nearly all tests resulted in statistically insignificant relationships. In other words, we found little evidence that restorative or punitive practices are more appealing to certain demographics.

This speaks to the complexity of intersectionality. We all have innumerable identities and experiences that make up who we are, and that intersect with systems of power, privilege, and oppression in different ways. Our survey data reflects complex life experiences that have shaped community members' perspectives on how their needs around justice and healing might be met. While we can say that 60% of survey respondents indicated that restorative practices would meet their healing and justice needs, and that 80% of respondents would contact community-based supports if they experienced identity-based harm, we cannot say that any particular aspect of identity or experience causes a person to have those preferences. These findings also speak to the need for an array of options for preventing and responding to identity-based harm in our community, to accommodate the array of needs that have been identified by varying demographic groups.

CAUSING IDENTITY-BASED HARM

One limitation of this project was the relatively small number of community members we engaged with who self-identified that they had caused identity-based harm. In total, only 16 public survey respondents indicated that they had caused identity-based harm to another person in the Waterloo Region.

Of this group, 75% indicated that restorative practices would meet their needs around healing and accountability, including apologizing to the person(s) I harmed, having a discussion with the person(s) I harmed and a trained mediator, hearing how I made the person(s) I harmed feel face-to-face or in a letter, or paying restitution to the person(s) I harmed.

Very few of those who disclosed causing identity-based harm said the cause was political, moral, ethical, religious, spiritual or faith-based beliefs, or feeling peer pressure or threatened. Instead, they identified that the cause was largely unintentional and due to ignorance. This aligns with beliefs we frequently heard in the public survey, service provider survey, and group dialogues that education on identity and harm would be an effective prevention measure.

PREVENTION OF IDENTITY-BASED HARM

Through our engagements with community members, we heard perspectives from those with lived and living personal and professional experience on what would help prevent identity-based harm. Two broad areas of prevention were frequently cited by community members – public education, and systemic change. Community members consistently situated prevention upstream of crisis response. Rather than relying solely on enforcement after harm occurs, participants emphasized strengthening the social conditions that reduce identity-based harm before it happens.

Public Education

We heard across both surveys and group dialogues that public education was believed to be an effective prevention measure. These findings suggest that many incidents of identity-based harm stem not only from intentional prejudice, but also from limited understanding of identity, bias, and the impacts of harm. Community members therefore viewed education as a preventative intervention rather than simply an awareness campaign.

Public survey respondents, when given an open-ended space to name measures that would meet their healing and/or justice needs, most commonly mentioned public education around identity-based harm. Additionally, the greatest number of service provider survey respondents (90%) indicated that school curriculum on identity-based harm would be effective for preventing identity-based harm. General public education and workplace training were also selected by 70-75% of service providers.

When service providers were given an open-ended space to name opportunities for strengthening prevention work in the region, the majority of respondents named educating the public about identity-based harm – and multiple respondents named steps that their organization was already taking to do so. Alongside this, when service providers were offered an open-ended space to name barriers they currently face in working to prevent identity-based harm, a recurring theme was lack of public understanding and support for the work.

PREVENTION OF IDENTITY-BASED HARM

Public Education

When it came to the question of causing identity-based harm in our public survey, the majority of respondents (62%) said they had never caused identity-based harm, and a further 28% were unsure. Some respondents who indicated that they had caused identity-based harm elaborated to note that they had probably caused identity-based harm at some point, but they were unsure when or to whom. And, the majority of respondents who indicated that they had caused identity-based harm said it was unintentional or caused by ignorance, not purposeful. Together, these results indicate a need for education in the community about what identity-based harm is, its impacts, ways to avoid causing it, and ways to mend the harm if it does occur.

Systemic Prevention

State-operated systemic change was a second area of identity-based harm prevention frequently mentioned across the public survey, service provider survey, and group dialogues. In the public survey's open-ended space to name measures that would meet respondents' healing and/or justice needs, systems-level measures were commonly named. Specifically, respondents named that support navigating systems and being offered trauma-informed, equitable care by systems would help to prevent the identity-based harm they experience when seeking support from these systems.

Also, in group dialogue participants' visualizations of a just community, many included an emphasis on improving state-operated systems, including healthcare, housing, education, and employment, or implementing new state-operated systems, like basic universal income and food.

PREVENTION OF IDENTITY-BASED HARM

Systemic Prevention

In identifying the most prevalent needs of those who experience identity-based harm, service providers most commonly named needs around systems support. This included support reporting identity-based harm, working with the police or identifying alternatives to the police, and navigating housing, healthcare, employment, and education systems. For barriers to service providers' work in preventing and responding to identity-based harm, systemic barriers came up often, including lack of funding, systems not prioritizing this work, and a hostile political culture and climate.

We also gained some insight into service providers' perspectives on systemic prevention measures that already exist. We asked service providers about their familiarity with four different systems-level prevention initiatives – Waterloo Region's Community Safety and Wellbeing Plan, the local "We All Belong Here" campaign, the federal Action Plan on Combatting Hate, and the new federal Bill C-9 (the Combatting Hate Act).

For most of these measures, except for the "We All Belong Here" campaign, only a small minority of respondents were "very familiar". For the two federal-level initiatives, the majority of respondents were "not at all familiar". Across all four of these initiatives, no respondents indicated that they thought any were "very effective" for preventing identity-based harm. Instead, the majority of respondents for all four initiatives thought that they were "somewhat effective". There was no significant effect of respondents' familiarity with an initiative on how effective they thought it was. Evidently, service providers in the region tend to be moderately familiar and feel moderately positive towards systems-level prevention initiatives.

Further exploration should be done into local service providers' recommendations for systemic identity-based harm prevention measures, considering their valuable professional and lived experience.

PREVENTION OF IDENTITY-BASED HARM

Other Prevention Research

The areas of identity-based harm prevention identified by community members throughout this project align with prevention measures recommended in other research literature.

Law professor Shirin Sinnar (2023) has identified three broad categories of effective identity-based harm prevention measures. The first, called prejudice reduction measures, includes prevention measures that aim to change the beliefs of perpetrators of identity-based harm. These efforts stem from the view that identity-based harms are outward manifestations of internal biases. Prevention measures in this category do not attempt to alter social and political structures, instead focusing on changing individuals' attitudes, beliefs, and behaviors within those structures. Particularly successful prejudice reduction measures tend to involve face-to-face contact and knowledge sharing between diverse individuals or groups.

There are plenty of recommendations for the development of prejudice reduction measures in Canada, Ontario, and the Waterloo Region. For instance, the Canadian Centre for Safer Communities has identified through interviews and surveys that school staff share a widespread desire for training on preventing, identifying, and responding to behaviors that indicate identity-based prejudices (Colliver, 2024).

Based on an analysis of characteristics of hate crime offenders, Farrell and Lockwood (2023) also recommend curriculum for both teachers and students around preventing and responding to hate crime, and further recommend training for businesses and community organizations. In the Waterloo Region Crime Prevention Council's exploration of Islamophobia in the region, panelists encouraged education about Islam and Muslims throughout the community as a strategy for preventing Islamophobia (Shafiq, 2019). Local literature on the experience of identity-based harm in Waterloo Region has repeatedly found that community members are regularly confronted with assumptions and lack of knowledge about specific aspects of identity. The prejudice reduction approach seeks to prevent identity-based harm by targeting these assumptions and gaps in knowledge through education.

PREVENTION OF IDENTITY-BASED HARM

Other Prevention Research

The other two categories of prevention measures put forward by Shirin Sinnar (2023) are political and structural reforms and socioeconomic investment. In the category of political and structural reform, prevention efforts consider the state's role in producing or eliminating conflict between groups over power and resources.

A state's racialized, gendered, and colonial hierarchies are seen as the drivers of identity-based harm. In the socioeconomic investment category, identity-based harm is correlated with the social and economic strains of a community, such as lack of affordable housing and healthcare or elevated mental illness and substance abuse.

Together, these two categories mirror what was suggested by community members in our surveys and group dialogues around systems-level reforms for preventing identity-based harm. Other local data can lend support for these reforms as well.

As was previously mentioned, the Waterloo Region has had one of the highest rates of hate crimes in Canada since 2022 (Statistics Canada, 2024). Also, the Waterloo Region has had lower-than-average wellbeing scores since 2021, according to Statistics Canada's Canadian Social Survey (Ayer, 2025).

These wellbeing scores indicate that Waterloo Region residents report lower mental health, life satisfaction, neighborhood satisfaction, meaning and purpose, and sense of belonging than the Canadian average (Ayer, 2025).

While these two data sets may suggest a correlation that lends itself to socioeconomic pathways of prevention, we acknowledge that we cannot confirm a direct causation between our community's wellbeing and rates of identity-based harm.

Still, there appears to be room and desire among community members for systemic, socioeconomic support in order to prevent identity-based harm.

PREVENTION OF IDENTITY-BASED HARM

Limitations

Though significant effort was put in throughout this project to ensure diverse and often underserved voices were heard, we acknowledge several limitations to the generalizability of our findings:

- Our public survey had only two respondents from Wilmot, one respondent from North Dumfries, one respondent from Wellesley, and one respondent from Woolwich. Though we did not confirm where the participants in our group dialogues lived, we did not have the opportunity to facilitate a group dialogue in collaboration with any organization based in the townships. Therefore, the voices of those living in the more rural parts of Waterloo Region are lacking in this project.

- We made efforts to have our public survey reach community members with a broad range of views on justice. Through our posts on CJI's social media, we reached community members who were already interested in CJI's restorative work. We reached community members who were not already following CJI's work through location-based online advertisements, posters in physical spaces, and other organizations spreading the word. Still, we acknowledge that a significant portion of our public survey respondents may have engaged with the survey because they had a pre-existing orientation to restorative or non-punitive options for responding to harm.

- Of the five group dialogues that we facilitated in collaboration with community partners, four were facilitated with groups of high school-aged youth, and three were facilitated with groups of 2SLGBTQIA+ youth. This opportunity to connect with youth in group dialogues solved for a gap in our public survey data, as only four public survey respondents identified as younger than 18. However, we acknowledge that the findings from our group dialogues are not necessarily generalizable to all of Waterloo Region.

PREVENTION OF IDENTITY-BASED HARM

Limitations

- As mentioned previously, only 16 community members in our public survey identified as having caused identity-based harm. Although it is likely that other survey respondents and group dialogue participants have caused identity-based harm at some point, it was only these 16 community members who answered survey questions about their accountability and healing needs.

This is a non-exhaustive list of this project's limitations. We hope that future projects at CJI and at other organizations in our community exploring identity-based harm will be able to fill in these gaps, and continue to deepen our community's understanding of experiences and perspectives around identity-based harm.

CALLS TO ACTION

Inviting sectors, institutions, and community at large into the responsibilities and actions they are uniquely positioned to take.

CALLS TO ACTION

We feel it important to begin by inviting all people – across sectors, spaces, professions, relations and roles – to consider the work of addressing and preventing identity-based harm in Waterloo Region as a constellation as opposed to a singular goal post. No one experience of impact related to identity-based harm is identical to another, and needs can span across social determinants of health demanding holistic approaches that no one system, organization, or agent can accomplish in isolation.

Across all methods of engagement, community members resisted viewing identity-based harm solely as acts committed by individuals. Instead, participants consistently described identity-based harm as occurring across multiple levels simultaneously including interpersonal interactions, organizational policies, institutional practices, and broader systems of power.

Community members consistently communicated that no single response can meet every person's justice and healing needs. Despite participants representing a wide range of identities and lived experiences, there was striking consistency in the types of supports and responses people felt would meet their needs. We therefore call upon all levels of government to invest in a continuum of responses to identity-based harm; including education, community-based supports, restorative justice, civil remedies, and criminal legal responses, allowing those impacted by harm to access pathways that reflect their individual needs, safety, and autonomy.

We invite the following sectors to consider the actions they are uniquely positioned to take.

CALLS TO ACTION: THE CRIMINAL LEGAL SYSTEM

While some community members continue to rely on police, courts, and the criminal legal system following experiences of identity-based harm, this report found that many more do not. Participants consistently described distrust in criminal legal responses, concerns for their safety, previous experiences of harm, and uncertainty that their experiences would be taken seriously. At the same time, many expressed a desire for accountability, acknowledgement, repair, and meaningful opportunities for healing.

A surface-level reading might say that people prefer restorative approaches, but the data says something much more interesting. Community members still want accountability, safety, acknowledgement, repair, and prevention. They simply don't believe punitive systems consistently provide those things.

We call on all actors within the criminal legal system, including legislators, Crown attorneys, judges, victim services, corrections, and policymakers, to place the voices, experiences, and self-identified needs of those impacted by identity-based harm at the centre of policy and practice. Responses to identity-based harm should not be defined solely by legal thresholds or institutional processes, but by what survivors and impacted communities identify as necessary for safety, justice, healing, and accountability.

As government actors continue to strengthen Canada's response to hate and identity-based harm through initiatives such as the Combatting Hate Act (Bill C-9), we encourage the meaningful inclusion of restorative justice as a recognized pathway alongside criminal legal responses. Restorative justice should not replace criminal accountability where it is appropriate, nor should it ever be imposed on those who have experienced harm. Rather, restorative approaches should be available as voluntary, trauma-informed, community-based options that expand, not limit, the choices available to those impacted by identity-based harm.

CALLS TO ACTION: THE CRIMINAL LEGAL SYSTEM

We also call upon federal and provincial governments to strengthen victims' rights legislation by recognizing access to restorative justice as a meaningful component of justice and healing. This includes exploring amendments to the Canadian Victims Bill of Rights to affirm victims' rights to information about, referral to, and access to restorative justice processes where appropriate and desired by those impacted. Similarly, we encourage continued evolution of restorative provisions within the Youth Criminal Justice Act, ensuring that victims, young people who have caused harm, and communities have equitable opportunities to participate in restorative processes that promote accountability, repair, and reintegration.

Ultimately, community members told us that justice cannot be measured solely by convictions, sentences, or legal outcomes. Justice should also be measured by whether people feel heard, supported, safer, and meaningfully involved in shaping the responses to the harm they have experienced. Expanding legislative recognition, funding, and access to restorative justice would better reflect the diversity of justice and healing needs identified throughout this project while strengthening a more responsive and person-centred justice system.

An offering of a roadmap:

- Recognize restorative justice within the implementation of Bill C-9 as a complementary response to identity-based harm.
- Amend the Canadian Victims Bill of Rights to include the right to be informed about and offered restorative justice where appropriate and desired.
- Expand access to restorative justice through the Youth Criminal Justice Act and associated provincial programs so that more victims and young people can participate in meaningful accountability processes.
- Invest in community-based restorative justice organizations with sustainable funding to ensure these rights can be meaningfully realized in practice.

CALLS TO ACTION: LAW ENFORCEMENT

Police services often act as the first point of contact following experiences of identity-based harm, yet this report found significant hesitation among many community members to seek police support. This reluctance reflects not only the lasting harms of previous negative experiences, but broader concerns about whether current responses adequately recognize the complexity and impacts of identity-based harm.

We call on law enforcement agencies to deepen partnerships with communities most affected by identity-based harm and to co-design policies, training, reporting practices, and response models with those communities, not simply for them. Building trust requires ongoing accountability, transparency, and sustained relationship-building beyond individual incidents.

We also encourage police services to strengthen officers' understanding of identity-based harm, trauma, restorative justice, and culturally responsive practice. Community safety is strengthened when law enforcement recognizes that accountability can take multiple forms and works collaboratively with community organizations to connect individuals with restorative, preventative, and supportive responses wherever appropriate.

CALLS TO ACTION: EDUCATION

Throughout this project, education emerged as one of the community's strongest and most consistent recommendations for preventing identity-based harm. Participants identified schools as critical spaces for developing the knowledge, skills, and relationships that enable people to navigate differences with curiosity, empathy, accountability, and respect.

In an era of increasing social polarization, the goal of education is not to eliminate disagreement, but to equip people with the skills to engage in disagreement without dehumanizing one another.

We call on school boards, educators, administrators, post-secondary institutions, and governments to invest in comprehensive education around identity, belonging, bias, conflict, restorative practices, and identity-based harm.

This learning should not be limited to responding after incidents occur but should be embedded throughout educational experiences as a proactive approach to strengthening community resilience and preventing harm.

Schools have an opportunity and a responsibility to create environments where difficult conversations are not avoided but facilitated with care. Attempts to silence or avoid conversations about identity, discrimination, conflict, or current events may unintentionally reinforce fear, misinformation, and narratives of "us" and "them." Instead, classrooms should be places where students can ask difficult questions, explore differing perspectives, challenge assumptions, and learn the skills needed to engage in respectful, evidence-informed dialogue across difference.

CALLS TO ACTION: EDUCATION

Creating these environments requires supporting educators as well. Teachers are increasingly asked to navigate complex conversations around identity, discrimination, and polarization, often without sufficient training or confidence. The ways educators respond to moments of tension, curiosity, or disagreement can either strengthen belonging and critical thinking or unintentionally deepen polarization and exclusion. We therefore call for sustained investment in professional learning that equips educators to facilitate courageous conversations, respond to identity-based harm, and foster restorative, inclusive classroom communities.

Finally, education cannot rest solely within formal education systems. Families, community organizations, workplaces, faith communities, cultural organizations, media, and governments all play an essential role in shaping how people understand identity, difference, belonging, and conflict. Preventing identity-based harm requires a culture of lifelong learning that extends far beyond the classroom and invites all members of our community to continuously reflect, listen, and grow.

CALLS TO ACTION: SOCIAL SERVICES

Community organizations and helping professionals are often among the first people individuals turn to following experiences of identity-based harm. Whether working in shelters, crisis services, settlement agencies, healthcare, mental health and addictions, housing, youth services, victim services, or community outreach, social service organizations routinely encounter the complex and intersecting impacts of identity-based harm.

We call on organizations across the helping sector to intentionally consider the role that identity plays in the safety, wellbeing, and belonging of the people they serve, as well as their staff and volunteers. Identity-based harm is not experienced only by service recipients; it can also profoundly affect those providing care. Creating psychologically safe workplaces where staff, volunteers, and community members can bring their full identities into the work is foundational to delivering equitable and responsive services.

Organizations should invest in sustained capacity-building that equips staff and volunteers to recognize, respond to, address, and, where appropriate, intervene in experiences of identity-based harm within the scope of their roles. This includes developing confidence in navigating difficult conversations, responding to disclosures with compassion and cultural humility, understanding the diverse justice, healing, and accountability needs that identity-based harm may create, and knowing when to provide direct support, when to facilitate connection, and when to refer to specialized services.

At the same time, this work requires acknowledging the limits of what any one organization can reasonably hold. Many helping professionals work in environments where they witness the cumulative impacts of trauma, systemic inequities, and identity-based harm every day. In the absence of clear pathways for collaboration and referral, organizations can find themselves trying to meet every need, contributing to scope creep, compassion fatigue, moral distress, burnout, and diminished capacity to provide effective care.

CALLS TO ACTION: SOCIAL SERVICES

We therefore encourage organizations to cultivate cultures that recognize both responsibility and limitation. Effective service does not require every organization to become everything to everyone. Rather, it requires clarity about one's role, confidence in one's expertise, and trust in the expertise of others. Staff should be supported to discern when it is their place to respond directly, when to seek consultation, and when to connect individuals with organizations better positioned to meet particular needs.

Finally, we call for the continued development of a localized network of organizations committed to preventing and responding to identity-based harm across Waterloo Region. A coordinated community network; grounded in shared learning, trusted referral pathways, cross-sector collaboration, and mutual accountability, would better enable organizations to embody a constellation approach to care. By recognizing the unique contributions of each organization while working collectively toward shared outcomes, our community can respond to identity-based harm in ways that are more relational, sustainable, and responsive than any one organization could achieve alone.

CALLS TO ACTION: WORKPLACES

Workplaces are more than places of employment; they are communities where people seek safety, belonging, purpose, and the opportunity to contribute fully. Identity-based harm within workplaces not only affects the individuals directly impacted but can undermine trust, psychological safety, collaboration, retention, and organizational culture as a whole. Preventing identity-based harm therefore requires more than responding effectively to incidents; it requires intentionally cultivating workplace cultures where every person can participate with dignity and belonging.

We call on employers, boards of directors, senior leaders, managers, supervisors, human resources professionals, and union leaders to embed an understanding of identity-based harm and the diverse needs people may have for justice, healing, accountability, and repair throughout organizational policies, procedures, and everyday practices. Responses to identity-based harm should move beyond compliance-focused investigations alone and instead create opportunities for meaningful accountability, relational repair where appropriate, and person-centred supports that recognize the varying needs of those impacted. Creating cultures that prevent identity-based harm is long-term work. It requires organizations to move beyond one-time training initiatives and instead invest in sustained learning, reflective leadership, and organizational capacity that continuously strengthens belonging, equity, and psychological safety. This includes developing leaders at every level: from executive leadership to middle management and frontline supervisors; to recognize identity-based harm, respond with compassion and accountability, navigate complex conversations with confidence, and model the values they seek to cultivate throughout their organizations.

We also encourage workplaces to meaningfully engage employees with lived and living experience in shaping policies, procedures, and organizational responses. Those most affected by identity-based harm should not only be consulted after harm occurs but should help design the systems intended to prevent it. By embedding restorative principles, trauma-informed practice, and meaningful opportunities for dialogue, accountability, and learning into workplace culture, organizations can move beyond simply managing harm toward creating the conditions in which identity-based harm is less likely to occur.

CALLS TO ACTION: RELIGIOUS AND FAITH COMMUNITIES

Faith communities and spiritual spaces have long played important roles in fostering belonging, offering care during times of hardship, and shaping community values. Yet throughout this project, relatively few community members identified religious or spiritual spaces as places they would turn for support after experiencing identity-based harm. Likewise, very few respondents who disclosed causing identity-based harm attributed their actions to religious or spiritual beliefs. Together, these findings suggest that faith communities occupy an important, but currently under-realized role in preventing and responding to identity-based harm.

We call on faith leaders, congregations, and spiritual communities to intentionally strengthen their capacity to become places where those impacted by identity-based harm experience safety, dignity, and belonging. This includes engaging in ongoing learning about identity-based harm, examining how exclusion or bias may operate within their own communities, and creating opportunities for honest dialogue across difference rooted in compassion, humility, and accountability.

Faith communities also have a unique opportunity to model bridge-building in an increasingly polarized society. By fostering relationships across faith traditions, cultures, and identities, speaking out against identity-based harm in all its forms, and partnering with community organizations committed to justice and belonging, religious and spiritual communities can play a meaningful role in preventing polarization before it escalates into harm.

We encourage faith communities to move beyond being places of private belief toward becoming active partners in cultivating communities where difficult conversations can occur with compassion, where differences are engaged without dehumanization, and where every person is affirmed in their inherent dignity.

CALLS TO ACTION: ALL OF US

Identity-based harm is not solely the responsibility of institutions to address. Every member of our community contributes to the culture we collectively create.

We call on community members to remain curious rather than certain, to interrupt stereotypes and misinformation when they arise, to build meaningful relationships across difference, and to recognize the impact our words and actions can have, even when harm is unintended. Preventing identity-based harm begins with seeing one another as neighbours rather than "others," and with cultivating communities where accountability, empathy, and belonging are everyday practices.

IN CLOSING

Across surveys and community dialogues, participants consistently described identity-based harm as something that extends beyond individual incidents. Harm affects relationships, trust in institutions, participation in community life, and the collective wellbeing of communities who share targeted identities.

Throughout this project, community members reminded us that identity-based harm is not inevitable. It is shaped by the relationships we build, the systems we create, the stories we tell about one another, and the choices we make every day. Preventing identity-based harm is not the work of a single sector or a single strategy.

It requires all of us to move beyond reacting to harm toward creating the conditions where everyone can experience dignity, safety, accountability, and belonging. We hope this report serves not as the end of a conversation, but as an invitation for Waterloo Region to continue building a community where every person can live fully as themselves.

We are with you in the work ahead.

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