

A photograph of a woman with long brown hair hugging a young girl with dark hair from behind. The woman's hand is visible on the girl's shoulder. The scene is softly lit, suggesting an indoor setting with a window in the background.

Community-based Violence Prevention Resource Guide and Model

2021

CommonSpirit 

Attribution

This Community-based Violence Prevention Resource Guide and Model was originally developed by the Catholic Health Initiatives (CHI) Violence Prevention Steering Committee:

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A special thanks to The Prevention Institute, who provided tools, resources and training that served to inform and support this violence prevention model.

CommonSpirit Health was formed by the alignment of CHI and Dignity Health in February 2019.

Our Mission: As CommonSpirit, we make the healing presence of God known in our world by improving the health of the people we serve, especially those who are vulnerable, while we advance social justice for all.



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Trigger Warning

This module contains information about violence and other trauma-related material. Please practice self-care and **step away as needed**.

If you experience signs or symptoms of traumatic stress or re-traumatization, **please seek support** from a colleague or supervisor, the Employee Assistance Program (EAP), or from other counseling/supportive services. **Contact the EAP** via the CommonSpirit Employee Central Contact Center at (855) 475-4747, press 1, then 1.



For tips about **mindfulness** and other coping skills, visit dignityhealth.org/hello-humankindness/mindfulness. **Self-care** is essential to your own health and to a healing ministry.



CommonSpirit prioritized the alignment of two programs: CHI's Violence Prevention Initiative and Dignity Health's Human Trafficking (HT) Response Program. Together, they form CommonSpirit's **Violence and HT Prevention and Response (VHTPR) Program**, a new model for health care to address multiple issues of violence.

Learn more: <https://commonspirit.org/united-against-violence/>.

Learning Objectives

The learning objectives for this module are to:

- **Educate** relevant stakeholders on the foundations for violence prevention
- **Introduce** a model framework for beginning the work of community-based violence prevention
- **Provide** tips and share learnings that facilitate the work and increase positive outcomes



Resource Guide

Before getting into the foundations of prevention or the details of the model, understand what this guide *will* and *will not* do as you begin this journey.



(rawpixel / iStock Photo)

Navigating This Guide (1)

This Guide WILL assist in:

- Identification of the violence-related issues affecting your community
- Identification of the violence-related issues that can be addressed and reduced over the long term
- Building a community coalition to leverage maximum prevention, intervention and reduction
- Developing a strategy and action plan for violence prevention, intervention and reduction
- Identifying baseline measurements and setting standards for measurement
- Setting goals for reduction and realistic benchmarks for the short, middle and long term
- Enacting the violence prevention plan
- Measuring and monitoring effectiveness

Navigating This Guide (2)

This Guide WILL NOT:

- Identify your community's specific violence prevention initiative
- Identify the members of your violence prevention and response coalition
- Develop your specific violence prevention program plan
- Dictate your work (e.g., timelines, group structure, etc.)



TIP: The guide is essentially a framework for the development of unique programs appropriate for each community being served. No two programs based on this guide will look or act the same.

Community-based Violence Prevention & Health Sector Involvement: The Case for Engagement

Why should a health system be involved in violence prevention *within* the communities we serve?

- Violence is a **health issue**. It has short- and long-term ramifications for individual health.
- Violence is also a **public health issue**. It devastates families and communities – often causing ongoing, generational and cyclical violence. And most of all... ***it is entirely preventable***. Just as with public health issues like the flu, we can focus on **risk reduction and building resilience**, and we can mitigate and even prevent the issue altogether.
- We **treat those victimized** every day within our facilities. Why would we not **do all we can to prevent** injuries? ***Doing “no harm” means doing all we can to prevent harm in the first place.***

Community-based Violence Prevention & Health Sector Involvement: The Case for Prevention

Moving Upstream: A Metaphor on the Power of Prevention

While walking along the banks of a river, a passerby notices that someone in the water is drowning. After pulling the person ashore, the rescuer notices another person in the river in need of help. Before long, the river is filled with drowning people, and more rescuers are required to assist the initial rescuer. Unfortunately, some people are not saved, and some victims fall back into the river after they have been pulled ashore. At this time, one of the rescuers starts walking upstream. “Where are you going?” the other rescuers ask, disconcerted. The upstream rescuer replies, “I’m going upstream to see why so many people keep falling into the river.” As it turns out, the bridge leading across the river upstream has a hole through which people are falling. The upstream rescuer realizes that fixing the hole in the bridge will prevent many people from ever falling into the river in the first place.

An excerpt from Prevention is Primary: Strategies for Community Well Being, Second Edition, © Prevention Institute, 2010 Larry Cohen; Vivian Chavez; and Sana Chehimi; editors

Foundations for Violence Prevention

The Three Keys to Violence Prevention

Violence is complex and requires a comprehensive approach.

Preventing violence requires an integrated strategy for action.



Risk and resilience factors must be addressed.

-- *Preventing Violence: A Primer*, Prevention Institute, 2009

Violence Prevention Key #1

Violence is complex and requires a comprehensive approach.

There is no singular solution to any form of violence. Because violence is a complex issue, and because various forms of violence often intersect, as well as a host of other social, economic and health factors, a **multifaceted approach** is essential.

Solutions will involve a wide variety of stakeholders, including health care organizations, each making a contribution to the overall community effort by leveraging a strategy most appropriate for that person or organization.

-- *Preventing Violence: A Primer*, Prevention Institute, 2009

Violence Prevention Key #1 (cont.)

The Prevention Institute developed a *Spectrum of Prevention* which is a framework for actions that – when followed – proves to be highly successful in mitigating and preventing violence.

SPECTRUM OF PREVENTION		
Level of Spectrum	Definition of Level	Examples
Strengthening Individual Knowledge and Skills	Enhancing an individual's capacity to prevent injury and promote safety	Bystander training
Promoting Community Education	Reaching groups of people with information and resources to promote health and safety	Stage community performances that reinforce positive cultural norms and models of bystander action
Educating Providers	Informing providers who will transmit skills and knowledge to others	Train teachers to build skills to interrupt inappropriate comments and promote behaviors that foster nonviolence
Fostering Coalitions and Networks	Bringing together groups and individuals for broader goals and greater impact	Engage grassroots, community-based organizations and sectors of government
Changing Organizational Practices	Adopting regulations and shaping norms to improve health and safety	Implement and enforce sexual harassment and sexual violence prevention practices in schools
Influencing Policy and Legislation	Developing strategies to change laws and policies to influence outcomes	Establish policies at schools to provide sexual violence prevention curriculum to all students and training to all staff

Violence Prevention Key #2

Risk and resilience factors must be addressed.

Just as with other public health approaches, reducing risk and building resilience will lead to prevention.



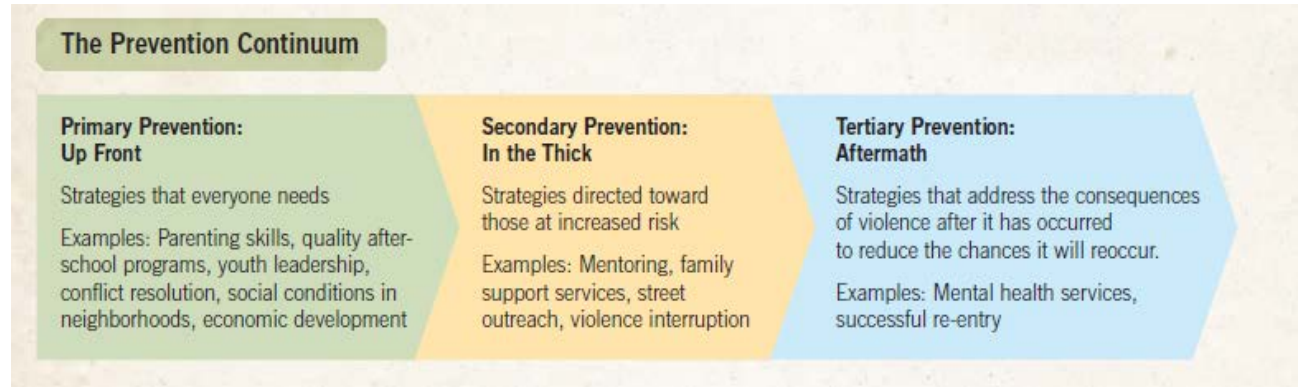
TIP: Be careful to not overly-focus on risk factors. The community will be empowered when pockets of resilience are identified and leveraged.

Risk Factors	Resilience Factors
<p>The social, societal, physical and mental challenges that contribute negatively to the health of a person, interpersonal relationships, communities and society as a whole.</p> <ul style="list-style-type: none">poverty and economic disparitydiscrimination and oppressionnegative family dynamicsfirearmsmedia violencealcohol and other drugsincarceration and re-entryexperiencing and/or witnessing violencecommunity deteriorationilliteracy and academic failuretruancymental illness	<p>The positive social, environmental, physical and mental factors that build immunity to the risk factors.</p> <ul style="list-style-type: none">economic capitalmeaningful opportunities for participationpositive attachments and relationshipsgood physical and mental healthsocial capitalbuilt environmenthigh quality services and institutionsemotional and cognitive competenceartistic and creative opportunitiesethnic, racial, and intergroup relations

Violence Prevention Key #3

Preventing violence requires an integrated strategy for action.

While **primary prevention** is the most effective form of prevention, efforts to address violence must also include **secondary and tertiary prevention**.



TIP: Tertiary prevention occurs in the aftermath of violence. It is an essential form of prevention that requires a trauma-informed response (e.g., within health care facilities) that connects into ongoing support and services within the community. It is essential in breaking cycles of violence and restoring health and wellbeing for survivors.

Community-based Violence Prevention Model

In the following slides, we will review the **CommonSpirit model** or framework that any community can follow to implement a violence prevention initiative within the community. Keep in mind:

- This model is designed to be community-developed, community-engaged and community-driven. *No single organization should be responsible for this work.*
- The community must identify the area(s) within which to work. *No single organization should identify the type of violence that will be addressed.*
- The community must identify the actions that will address the identified area of violence. *No single organization should assume they have all the solutions.*

Importance of Community Ownership



TIP: Many communities have historically witnessed well-meaning organizations, intending to provide help and contribute to solutions against violence, mis-identifying priority issues and appropriate solutions. *It is essential that the community decide which issue(s) of violence should be addressed and what actions are needed to make a positive contribution to prevention.*

Ensure those who are being impacted by violence are part of this process and part of the greater initiative. Impacted populations know what factors influence violence and what is needed to mitigate and prevent violence.

Violence Prevention – The Eight Steps

1. Identify and involve key community stakeholders.

2. Conduct needs and assets assessment.

3. Identify focus area of violence and establish baseline.

4. Define goals and objectives.

5. Develop the action plan.

6. Do the work.

7. Monitor, measure, modify.

8. Communicate the results.

STEP ONE

Identify and Involve Community Stakeholders

Though this initiative will be community-owned, it may begin with only a few stakeholders. The first steps in the work require **coalition building**, which means amassing a wide variety of presumed stakeholders who will come together regularly to discuss the issues of violence impacting the community. If this work begins within a health care facility, include *internal as well as external* stakeholders. Examples:

Internal stakeholders may include:

- CEO
- Mission Team Member
- Community Health Colleague
- Advocacy/Government Relations
- Communications Team Member
- Nurses/Doctors
- Volunteers

External stakeholders may include:

- Law Enforcement
- Health and Human Services
- Schools
- Churches
- Local Nonprofit Agencies
- Local Businesses
- Individuals, including survivors

STEP ONE (Tip 1)

Identify and Involve Community Stakeholders



TIP: Leadership buy-in and investment in this work is essential. While grassroots support can build momentum, leadership support (from any/all organizations involved, including health care organizations) is a catalyst for stakeholder engagement. Inclusive and balanced representation of stakeholders guards against the promotion of individualized biases and agendas.

Note: For any individual member representing an organization on the coalition, that person should also be participating in and informing any internal efforts to address violence within their organization. For example, any CommonSpirit employee participating in a violence prevention coalition should also be involved in the facility's efforts to protect patients from violence. This will help to ensure that internal efforts are aligned with community-based efforts.

STEP ONE (Tip Two)

Identify and Involve Community Stakeholders



TIP: If a community coalition already exists, then consider opportunities to incorporate this work into the existing group. Even if a given coalition's focus is not directly addressing violence, there may be an opportunity to introduce violence as an additional area of work worthy of attention.

Note: This violence prevention model can serve as a useful framework for any community coalition addressing any aspect of health, safety and wellbeing. The Social Determinants of Health (SDOH) are intricately intertwined with risks for violence. Addressing SDOH or violence using prevention strategies will solve many problems and lead to overall increased health, safety and wellbeing.

STEP TWO

Conduct a Needs and Assets Assessment

When conducting a community needs and assets assessment, be sure to include any existing evaluations of and efforts to address violence. Following are some examples of what might be included:

- An assessment of what types of violence exist and the areas that are of concern to the community
- Levels and rates of violence
- Related risk and resilience (protective) factors
- Activities/organizations already addressing violence
- Community assets, abilities, capacities to support prevention efforts
- Qualitative and quantitative information

STEP TWO – Possible Data Collection Sources

Conduct a Needs and Assets Assessment

- Health care data on violence-related injuries, illnesses or fatalities
- Hospital Community Health Needs Assessment / community benefit activities
- Internal and external surveying
- Law enforcement agencies
- U.S. Department of Justice
- Federal, state, city and county agencies
- Violence incidence mapping
- U.S. (and state/local) Department of Health and Human Services and statistics
- School reports/school boards and administrations
- Universities/schools of public health
- Nonprofit organizations
- Churches/ministerial associations



TIP: Be careful not to overly-focus on needs and minimize assets. Identifying a community's pockets of resilience is empowering and leads to stronger community engagement.

STEP TWO – Helpful Questions



STEP THREE

Identify Focus Area of Violence and Establish Baseline

Now is the time for the community-based coalition to identify a focus area, or areas. It is also the time for the coalition to agree on methods of measurement and to determine a baseline.



TIP: Do not be afraid to narrow the focus issue. A common mistake can be to take on too many issues of violence or to identify an issue that is too big for the coalition to realistically address. For example, the community's concern may be gang violence, but it may be better to look at issues that may contribute to the risk of gang violence involvement (e.g., bullying, child abuse/neglect, school-based violence, etc.). It is important for the community to find a focus area where there is great potential for success. This will build momentum that will support long-term sustainability and expansion of prevention efforts.

STEP THREE - Tips

Identify Focus Area of Violence and Establish Baseline



TIP: Identifying measurements can be a challenge. When thinking through options, consider sources that are reliable (e.g., data from organizations that are not transient in nature, data that is collected in a standardized manner, etc.).



TIP: During this process, it is natural for some stakeholders to leave the coalition and for others to join as they are determined to be necessary partners. This is not cause for concern. If an organization does not see a clear path for their contributions, based on the agreed-upon focus area, it is better for disengagement in order maintain the greater purpose of the initiative. These organizations may find a path for involvement in the future.

STEP FOUR

Develop Goals and Objectives

At this point the coalition will develop a clear long-term goal statement that includes a baseline measure and the goal for reduction. The long-term **GOAL** statement should be specific and time bound. For example...

Violence Prevention Goal Statement

Reduce incidence of child abuse/neglect in children ages 0-4, in Richland County, ND, by 15% by year 2026.

Questions to consider when setting goals and objectives are:

- Who is affected?
- What are the effects (long- and short-term) on individuals and families?
- What are the effects on the community?
- What are the consequences of inaction?
- What are the benefits of addressing the issue?
- What risk and resilience factors surround the issue?
- How can the issue be met “upstream” with a prevention solution?
- What are the “interrupters” for this kind of violence?

STEP FOUR (Tip 1) - Timeframe



TIP: When determining the long-term goal, remember to build time for the preliminary coalition work as well as allow time for efficacy of the program after implementation.

Steps 1 – 5 will take a coalition anywhere between **one to two years** to complete.

Once step 6 begins, allow at least **three years** of implementation to achieve the long-term goal. *This does not mean you won't be measuring regularly prior to the end of three years – it just means you are allowing three years to reach your desired reduction rate.*

-
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STEP FOUR - Objectives

Develop Goals and Objectives

Once the Goal Statement is developed, the coalition should create **OBJECTIVES**. Effective violence prevention objectives should address proven risk and resilience factors because they are measurable indicators over time. Clearly stated objectives will:

- Break down the goal and make it actionable
- Include the anticipated measurable results
- Define the timeframe for expected achievement
- Answer questions of what, who, where, how much and when
- Address every level of the Spectrum of Prevention over time



TIP: Objectives are time-specific:

- Short-term: outcomes/events within one year
- Mid-term: outcomes/events within one to three years
- Long-term: outcomes/events within three or more years

STEP FOUR - Factors

When developing objectives, think about the **indicators** for the identified area of violence. Thinking through risk and resilience factors will be informative. Below is as an example using youth violence:

RISK FACTORS

- Associated with increased violence among perpetrators and victims
- Not necessarily the direct cause of the violence

Examples of Risk Factors for Youth Violence:

- Unsafe neighborhood
- Identified gang activity and recruitment
- Unstable family structure
- Lack of parks and other community sites for safe, constructive activity
- Lack of access to health care and healthy foods
- Poor-performing schools and lack of resources

RESILIENCE FACTORS

- Provide individuals or the community a buffer from violence and threats to their safety
- Associated with positive development despite adverse and unsafe circumstances

Examples of Resilience Factors for Youth Violence:

- Community structures that support healthy activity
- Church involvement in counseling and other protective services
- Active youth mentoring
- Programs to develop healthy families, healthy parenting, etc.
- Resources for schools to assist in student engagement
- Safe neighborhoods

STEP FOUR – SMART

When developing objectives, use the **SMART** method to ensure the objectives are clear for all stakeholders:

SMART

SPECIFIC

What exactly are we going to do for whom?

MEASURABLE

Is it quantifiable and can we measure it?

ATTAINABLE/ACHIEVABLE

Can we get it done in the proposed time frame with the resources and support we have available?

RELEVANT

Will this objective have an effect on the desired goal or strategy? Does it fit the population and culture?

TIME SPECIFIC

When will this objective be accomplished?

STEP FOUR – Use the Spectrum

When developing objectives, refer back to the **SPECTRUM OF PREVENTION** and identify objectives using each step of the Spectrum. See example below for child abuse and neglect ages 0-4:

Objective 1	Level of Spectrum – Strengthening Individual Knowledge and Skills: By 2024, 75% of parents will receive education on parenting and coping skills through an initial visit from the Health Families Program while still in the hospital (CHI St. Alexius) after their baby is born.
Objective 2	Level of Spectrum – Educating Providers: By 2024, 90% of obstetrical service providers at CHI St. Alexius will be informing their at-risk expectant parents about the Healthy Families Program, encouraging them to participate.
Objective 3	Level of Spectrum – Promoting Community Education: By 2025, 75% of stakeholders will be able to refer parents to appropriate community resources for support beyond the Healthy Families Program.
Objective 4	Level of Spectrum – Fostering Coalitions and Networks: By 2024, our community-violence prevention coalition will establish connections with our three neighboring counties and will be educating relevant stakeholders capable of expanding this model into their own counties.
Objective 5	Level of Spectrum – Changing Organizational Practices: By 2026, 50% of the County’s school district social workers will have an awareness of the Healthy Families Program and other trusted community-based support services for expecting parents and will be referring parents who may be at risk.
Objective 6	Level of Spectrum – Influencing Policy and Legislation: By 2023, the violence prevention coalition will include at least one county commissioner within the coalition and will provide regular reports to our associated State-level Congressional Representative.

STEP FIVE

Develop the Action Plan (or Workplan)

Once objectives are determined, the Workplan will identify specific action steps to achieve each objective, including assigning accountability for each action, determining due dates, identifying resources and determining budgets (as applicable). Here is an example of an action that may be part of a larger workplan:

Activity	Accountability	Timeframe	Resources	Budget	Measurement and link to desired objective/ outcome
Conduct community education on available resources for child abuse prevention ages 0-4	Healthy Families Coordinator in partnership with Social Worker from the VP Coalition	Begin January 2023, with monthly meetings throughout the year	<ul style="list-style-type: none">• Staff time/human capital• Budget for food/drink for meetings• Printed materials• Mileage	<ul style="list-style-type: none">• Salaries• \$600 food/drink• \$500 printed materials• \$500 mileage	Promoting Community Education: By 2025, 75% of stakeholders will be able to refer parents to appropriate community resources for support beyond the Healthy Families Program.

STEP FIVE (Tip 1)

Cultural Humility and Credible Messengers



TIP: When developing the workplan, ensure that the *right* people are involved in the *right* workstreams and within the *right* roles. It is essential that the coalition foster cultural humility and be open to exploring where implicit bias may be an issue. The coalition should be a safe place for members to learn and grow together on the journey towards racial equity and justice.

Most importantly – ensure that programmatic choices involve credible messengers. Ask the following questions:

- Who is/are the right person/people to be directly serving the impacted population?
- Do the messengers understand the issue of violence from a personal perspective?
- Do the messengers represent the population served (e.g., do those being served recognize and see themselves in those who are providing guidance)?

STEP SIX

Do the Work

To keep the workplan on track, it is essential to maintain ongoing, regular communication with the greater coalition!

- Share lessons learned
- Participate in opportunities for greater learning (e.g., webinars, conferences, community meetings, etc.)
- Identify needs and opportunities for improvement that emerge as the work progresses



TIP: Do not be afraid to identify emerging issues. This is an indication that the violence prevention coalition has heightened awareness and is functioning well.



STEP SEVEN

Monitor, Measure and Modify

Be sure to monitor and measure regularly to ensure that the coalition's efforts to prevent violence are making a positive difference and that resources are being used in the most effective manner. Most importantly, monitor and measure to ensure the activities are not unintentionally doing more harm than good. Baseline measures should exist for the overall long-term goal as well as for objectives along the way.



TIP: If a measure of violence initially shows an increase, do not necessarily be alarmed. It is natural for numbers to go up at first as education and awareness is increasing within the community. If the numbers consistently rise or show no decline, then this may be an indication that the workplan is flawed and that there may be a need for programmatic modification.

STEP EIGHT

Communicate the Results

This is one of the most important steps in the model as it is essential for sustainability.

Effective communication across multiple mediums heightens engagement and interest that can grow public, philanthropic, organizational and governmental support. Examples include:

- Internal communications for participating stakeholder organizations
- Op-Eds to local newspapers
- Outreach to print and other news media
- Newsletters to religious organizations, schools, community groups, etc.
- Direct outreach to funders with prevention results

to solicit coverage of events



TIP: If multiple organizations are involved in the coalition, make sure that external communications are coordinated through a single person. This will ensure that messaging is consistent and aligns with the greater violence prevention initiative.

STEP EIGHT – Media Relations

Simple strategic tactics for the media professional representing the full coalition:

- Meet with the media to brief them about your violence prevention initiative.
- Invite members of the media to your coalition meetings.
- Provide real-life examples — human interest stories — that demonstrate how the violence prevention initiative is benefitting your community.
- Identify and develop one central external webpage that provides information and updates about the initiative.
- Meet with the editorial boards of local newspapers to talk about the violence prevention initiative.
- Use media advisories and news releases to announce events, program results or the release of reports or other data on the initiative.

Funding Community-based Violence Prevention

Some initiatives rely on significant funding sources, while others thrive on a passionate set of stakeholders dedicated to the efforts. Regardless, there is always some need for funding. A hospital may be able to leverage community benefit funds based on results from the Community Health Needs Assessments. However, the coalition should also consider public and private funding sources. Some things to consider:

- Include elected officials in the coalition - they influence public funding sources
- Include people with philanthropy backgrounds, including grant writers, on the coalition
- Leverage existing organizational assets with stakeholder partners (e.g., each organization donates time or capital contribution)
- Remain engaged with all stakeholders and be prepared to renew engagements when there are transitions in partner organization (e.g., staff changes)



TIP: Sustainability is critical. Commitment to this work should be long-term. Losing vital programs can be devastating to a community, especially when they make a meaningful difference. Ensure all coalition stakeholders understand the commitment.

Thank you.