

Violence Prevention Models

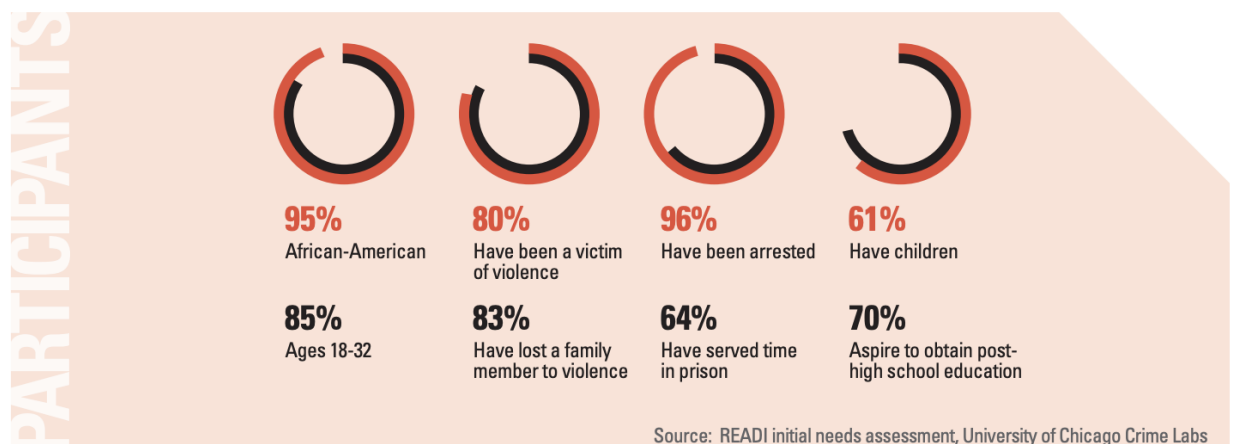
READI Chicago:

Model:

- Participants are referred through community/social service organizations, law enforcement, Urban Labs Risk Assessment Algorithm; extremely effective method of identifying the highest risk participants
 - “Prior to being referred to READI, 35% of men in the study had previously been shot, and 98% had previously been arrested, with an average of 17 prior arrests. In the 20 months after being identified for the study, the men not offered READI were shot and killed 54 times more often than the average Chicagoan—a rate of over 11 shootings and homicides per 100 people—and 2.8 times more often than even other young men in the neighborhoods where READI operates” [source](#)
- Program uses a phased approach to intervention [source](#)
 - **Phase 1: Safety** Front-loading CBI and skills-based workforce development to build a foundation of attitudes and behaviors that promote safety
 - **Phase 2: Exploration** Crew work, individual work assignments, and training and certification programs, the opportunity to practice work skills while exploring employment sectors
 - **Phase 3: Transition** Participants transition into unsubsidized employment, work with staff to outline long-term goals and immediate action steps
- Participants are given access to paid transitional employment in conjunction with weekly therapy sessions and 20 hours per week of professional development, as well as other social skill development sessions
- READI partners with employers in sectors ranging from community beautification and urban agriculture to manufacturing and customer service, employer partners understand who they will be working with and what supports they might need, and READI pays participants’ wages while they receive career training and job support on their work-sites
- A large portion of READI’s funding comes from private sponsors, though municipal, state, and federal funding also make up a sizable portion of investment

Evaluation:

- “Relative to their peers, we estimate that READI reduces harm to society from involvement in crime and violence by between \$174,000 to \$858,000 per participant, depending on whether we use more conservative or inclusive estimates of the social costs of crime and violence. This represents a statistically significant reduction of almost 50%. These reductions imply that READI’s benefit-cost ratio from reducing crime and violence alone—not counting any other benefits to READI communities or participants—is at least 3.8 to 1, and perhaps as much as 18.8 to 1.” - [source](#)
- 79% fewer arrests for shootings and homicides
- Participants worked 75% of the weeks available to them
- Participants were slightly less involved in serious violence compared to the control group, but not statistically significant, more data required



Cure Violence (CeaseFire) Evaluation

- Mears and Bhati (2006) found that resource deprivation in surrounding areas is positively associated with homicide.
- A recent study by Johns Hopkins’ Center for Gun Violence Solutions found that for every **\$1 invested in Safe Streets Sites in Baltimore, the return on investment is anywhere from \$7 to \$19.**

Table

2 Respondent Awareness of Cure Violence Program

	Man Up! (A) East New York			S.O.S South Bronx		
	2014	2015	2016	2014	2015	2016
Cure Violence Public Education Messaging						
Recognized at least one public message	93%	96%	92%	90%	92%	90%
Recognized all public messages	29%	27%	10% *	39%	33%	48%
Average number of times seeing public messages in the past year	6.6	7.3	7.3 *	7.0	7.1	6.9
Cure Violence Staff Outreach Efforts						
Recognized at least one staff member	79%	69%	84%	53%	58%	64% *
Recognized all staff members	44%	34%	52%	14%	9%	15%
Average number of times communicating with staff in the past year	5.9	4.2	4.4 *	5.4	4.3	4.5

* Significant difference from year 1 to year 3 (Chi-square: $p < .05$).

Data Source: John Jay College Research and Evaluation Center.

- CVG's method entails analyzing violence clusters and transmission dynamics and uses paraprofessional health workers who are culturally sensitive credible messengers to interrupt transmission and change community norms around the use of violence. This is accomplished by hiring members of the community who have had similar life experiences to those at highest risk of committing acts of violence Staff are trained as community health workers and receive extensive education and coaching in evidence-based methods of mediation, persuasion, behavior change, and norm change — all of which are essential for limiting the spread of outbreaks of violence.
- Access Highest Risk – Workers utilize their trust with high-risk individuals to establish contact, develop relationships, and begin to work with the people most likely to be involved in violence.
- Change Behaviors – Workers engage with high-risk individuals to convince them to reject the use of violence by discussing the cost and consequences of violence and teaching alternative responses to situations.
- Case Management – Workers develop a caseload of clients who they work with intensively – seeing clients several times a week and assisting with their needs such as drug treatment, employment, leaving gangs.
- A notable feature of the program is that it did not aim to directly change the behavior of a large number of individuals. Rather, CeaseFire focused on affecting risky activities by a

small number of carefully selected members of the community, those with a high chance of either “being shot or being a shooter” in the immediate future.

- First, the program aimed at changing operative norms regarding violence, both in the wider community and among its clients. Norms are the beliefs, attitudes and values that make up the culture of a community and define the range of behavior that is normally acceptable.

[Gary Slutkin Article](#)

Cure Violence Public Health Model

CVG’s violence prevention public health methodology applies evidence-based public health epidemic-reversal strategies to:

1. Detect and interrupt (i.e., prevent) potentially violent situations,
2. Identify and change the thinking and behavior of the highest risk transmitters (i.e., those most likely to engage in violence), and
3. Change group norms that support and perpetuate the use of violence.

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1. Detect and interrupt potentially violent conflicts

Trained violence interrupters and outreach workers prevent shootings by identifying and mediating potentially lethal conflicts in the catchment area, and following up to ensure that the conflict does not reignite. Interrupters and other staff work separate from law enforcement and must remain independent in order to maintain the credibility needed to work those at highest risk.

Elements:

1. Prevent Retaliations – Whenever a shooting happens, trained workers immediately work in the community and at the hospital to cool down emotions and prevent retaliations – working with the victims, friends and family of the victim, and anyone else who is connected with the event.
2. Mediate Ongoing Conflicts – Workers identify ongoing conflicts by talking to key people in the community about ongoing disputes, recent arrests, recent prison releases, and other situations and use mediation techniques to resolve them peacefully.
3. Keep Conflicts ‘Cool’ – Workers follow up with conflicts for as long as needed, sometimes for months, to ensure that the conflict does not become violent.

2. Identify and change behaviors of people at highest risk

Trained outreach workers implement a culturally-appropriate and trauma-informed approach to reduce the risk of those most likely to commit violence and to promote health equity. Outreach workers meet those at highest risk where they are at, talking to them about the costs of using violence, and helping them to obtain the social services they need – such as job training and drug treatment.

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3. Case Management – Workers develop a caseload of clients who they work with intensively – seeing clients several times a week and assisting with their needs such as drug treatment, employment, leaving gangs.

3. Mobilize the community to change norms

Workers engage leaders in the community as well as community residents, local business owners, faith leaders, service providers, and the high risk, conveying the message that the residents, groups, and the community do not support the use of violence.

Elements:

1. Respond to Every Shooting in Catchment – Whenever a shooting occurs within the Cure Violence catchment area, workers organize a response where dozens of community members voice their objection to the shooting
2. Organize Community – Workers coordinate with new, existing, and establish block clubs, tenant councils, and neighborhood associations within the catchment area to assist in preventing violence.
3. Spread Positive Norms – Program distributes materials and hosts events within the catchment area to convey the message that violence is not acceptable.

+ [Hospital Response and Follow Up](#)

The Cure Violence Hospital Response Program partners with local hospital trauma centers to provide a comprehensive response whenever a gunshot, stabbing, or blunt trauma victim arrives at the hospital. Program staff intervene during the critical window after a violent incident to prevent retaliation and interrupt the cycle of violence. Critically, the Cure Violence™ approach links the hospital with the community, allowing for the urgent prevention of retaliation and follow up with those affected.

[Boston Uncornered](#)

Boston Uncornered redirects the entrepreneurial, networking and leadership skills of gang involved youth (we call Core Influencers) from violence and incarceration to obtain a college credential and family-sustaining wage—driving positive change in our neighborhoods. With the skills and opportunities to turn away from the “street corners” for good, we empower Core Influencers to use their influence, leadership abilities and networks to shift social norms in the neighborhoods—decreasing crime and increasing educational attainment and employment for all.

In Boston, less than two percent or **3,800 INDIVIDUALS** of the youth population are involved in gangs—yet they are involved in **74 PERCENT OF THE SHOOTINGS** on only five percent of Boston’s street corners.

In addition to the social impact, each Core Influencer costs the Commonwealth of Massachusetts and its taxpayers **\$100,000 PER YEAR** for expenses such as jail, parole, police and health care.

1. Neighborhood based mentors (college readiness advisors)
2. High expectations: support from credentials to employment
3. Weekly stipend and holistic supports so young people can focus on education.

Evaluation

Community Violence, Giffords

Every person should be able to live, work, and play in their community free from the threat of gun violence.

However, gun violence inflicts trauma and disrupts lives on an all-too-regular basis, particularly in Black and Latino communities. These populations make up [less than a third of the US population](#) but account for more than three-quarters of gun homicide victims. This disparity is a product of structural racism and divestment that has left communities of color with compounding challenges and a lack of resources to address them. Public policy as it relates to violence prevention has reliably failed these communities.

To address violence in the most impacted communities, it is critically important to invest in community violence intervention programs.

<https://giffords.org/lawcenter/gun-laws/policy-areas/other-laws-policies/intervention-strategies/>

California Partnership for Safe Communities:

We're one of the most experienced teams in the country at making cities fundamentally safer. Our leadership team has over 50 years of combined experience in designing and implementing effective violence reduction strategies. The cities we've worked with have seen these types of results:

- Over 50% reduction in homicides and non-fatal shootings citywide.
- The longest sustained reduction in homicides in 50 years.
- Reduction in gang-involved shootings by 43%.

You'll see a reduction in serious violence, primarily non-fatal shootings and homicides. You'll build a higher level of trust between police and your community, especially between people who need protection the most but trust law enforcement the least. You'll achieve better outcomes for

young people at the highest risk of violence, primarily young men of color directly impacted by the criminal justice system and gun violence.

<https://thecapartnership.org/>

[Oakland Ceasefire](#)

Oakland's Ceasefire

The Oakland Ceasefire Strategy has Three Goals:

1. Reduce gang/group-related shootings and homicides: Ceasefire focuses on the most violent gangs/groups and individuals who are at the greatest risk of shooting or being shot. We communicate directly with individuals through large group meetings ("Call-Ins") or by meeting with them one-on-one ("custom notifications"). Ceasefire includes community outreach, services, and support and, when necessary, multi-agency law enforcement action focused specifically on gangs/groups and individuals who *continue* to engage in violence.

2. Decrease recidivism and incarceration rates of individuals participating in the intervention: Outreach and support services are provided by the City of Oakland's Department of Violence Prevention and its network of citywide community-based direct service organizations all dedicated to helping participants by offering real alternatives, resources, advocacy, mentoring and life coaching.

3. Strengthen police-community relations: Vital to the success of the Ceasefire Oakland strategy are community and faith leaders. Partners like Faith In Action East Bay and the National Institution for Criminal Justice Reform provide leadership, advocacy, and resources from a community perspective that strengthen the spectrum of support for participants while pushing for mutual accountability and transparency among all partners in achieving the strategic goals.

- <https://www.hellmanfoundation.org/oakland-ceasefire.html>
- <https://www.motherjones.com/crime-justice/2020/07/oakland-ceasefire-shootings-murder-rate-social-services-life-coach-boston-miracle-thomas-abt-david-kennedy-cat-brooks/>
- <https://crimesolutions.ojp.gov/ratedprograms/700>

Peace for DC:

TOGETHER WE CAN REDUCE HOMICIDES IN DC BY 60% IN 5 YEARS

A 60% reduction in homicides will save 300 lives. So let's get to work.

Launched in 2021, Peace For DC galvanizes community-based organizations, philanthropy, experts, and policymakers in a collective effort to reduce gun violence in the District neighborhoods with the highest rates of violence. We are:

- Fueling the network of under-resourced front-line peacemakers and grassroots organizations best positioned to reach individuals driving the violence, and providing ongoing coordination and strategy.
- Scaling evidence-based solutions using data and science, local and national expertise.
- Driving collective impact as we align our funding collaborative around a shared vision for community-powered public health and safety.

Our approach sharpens existing efforts, while filling gaps in the current landscape of DC violence intervention with private funding. No other organization is focused on reducing violence in this comprehensive way.

Peace For DC is building a coalition of funders, inspired by similar efforts in [Chicago](#) and [Philadelphia](#), to work alongside community and government in the fight to end gun violence in DC. Together we can end gun violence and build thriving peaceful communities in DC.
<https://www.peacefordc.org/>

Gang Reduction and Youth Development, LA:

<https://counciloncj.org/los-angeles-gang-violence-prevention-program-uses-public-health-model-to-reduce-crime/>

The City of Los Angeles Mayor's Office of Gang Reduction and Youth Development (GRYD) was established in July of 2007 to address gang violence in a comprehensive and coordinated way throughout the City. GRYD implements a Comprehensive Strategy to drive funding and practice decisions across areas designated as GRYD Zones. GRYD currently provides gang intervention and prevention services in 23 GRYD Zones throughout the City of Los Angeles, along with community engagement programming, and various other initiatives.

<https://www.lagryd.org/>

Roca

Roca's mission is to be a relentless force in disrupting incarceration, poverty, and racism by engaging the young adults, police, and systems at the center of urban violence in relationships to address trauma, find hope, and drive change.

No young person is a lost cause to Roca, even if they have lost all trust and hope for the future. Roca moves the needle on urban violence by relentlessly finding and focusing on the traumatized 16-24 year olds living at the center of it. We never give up. Young people can count on us to keep showing up, even when they fail. That's how we build trust over time and give them the tools and support to change the trajectory of their lives.

The evidence for HVI is promising but more research is needed. There are several examples of highly successful HVIPs. In [Baltimore](#), one such program provided repeat victims on probation or parole with intensive psychosocial services, family or group therapy, and substance use treatment. Participants randomly assigned to receive treatment were three times less likely to be re-arrested for a violent crime, four times less likely to be convicted of a violent crime, and were incarcerated for substantially shorter periods of time.

<https://counciloncj.org/meeting-bulletin-4-community-based-responses/>

Council on Criminal Justice: [Task Force for Long Sentences Recommendations](#)

*** I'd recommend reading this report; it's not too dense and very informative ***

- “The Task Force recommends that, as states and the federal government reduce their use of long sentences, they should redirect some of the resulting savings into community-level, evidence-based strategies that prevent violence and provide support to victims and survivors of violent crime. This recommendation covers both sentencing decisions by courts and release decisions by paroling authorities, incentivizing key actors at both ends of the system and potentially generating savings from parole in the near term.”
- “The Task Force recommends that legislators, policymakers, and corrections leaders support the development, implementation, and evaluation of trauma-responsive rehabilitative behavioral health services in prison for people serving long sentences. Addressing the impact of trauma not only benefits individuals serving long sentences, but also has the potential to decrease in-prison behavioral infractions, improve facility safety, and reduce recidivism. Helping people acknowledge and address experiences of trauma and any resulting behavioral health symptoms and problematic behaviors can increase public safety and improve outcomes for individuals, families, and communities.”
- “Sentencing courts, state corrections agencies, and the federal Bureau of Prisons should collect information about the history of people’s victimization and trauma to inform sentencing, prison classification and program assignment, services, and supervision to minimize the potential impacts that chronic, severe trauma can have on people that can lead them to harm others and themselves.”
- “The data are clear about the presence of disparities in long sentences: there are stark racial and ethnic differences in the shares of people who are sentenced to and serving 10 years or more in prison, especially when comparing Black people to White people. For instance, in an examination of data collected from all states and the Bureau of Prisons in

2020, The Sentencing Project found that 46% of the total number of people serving life or sentences of 50 years or more were Black.”

- “The Council on Criminal Justice found that, in 2020, Black adults were almost 30% more likely to receive a long sentence than White adults and three times as likely as White adults to have been released from prison after serving a long sentence.”

Recidivism rates in berkshire county, etc:

https://trends.vera.org/state/MA/county/berkshire_county

Hospital Based Violence Intervention Models

[Health Alliance for Violence Intervention](#)

Instead of waiting for the patient to seek care, HVIPs bring trauma-informed care to the patient while in a hospital-based setting.

Because victims of interpersonal violence are at elevated risk for re-injury and violence perpetration, reaching them during these “teachable moments” is key to a successful hospital-based intervention. Several studies have demonstrated that individuals are particularly receptive to interventions that promote positive behavior change at these moments in healthcare settings.

Victims are provided links to community-based services, mentoring, home visits, follow-up assistance, and long-term case management during these interventions. HVIPs also work to identify and reduce risk factors, such as substance misuse and chronic unemployment, and promote protective factors, such as social support, job readiness, and educational attainment.

[Healing Hurt People. Drexel](#)

[Trauma Recovery Center, San Francisco Hospital](#)

[A Public Health Approach](#)

[Hospital Based Peer-Intervention Groups](#)

[Giffords Law Center: Oakland's turn-around](#)

50% reduction in shootings and homicides

Oakland Ceasefire is an ongoing partnership between community members, social service providers, and law enforcement officials, who work together to reduce violence, build police-community trust, and improve outcomes for high-risk individuals.

The strategy has five main components:

1. Analysis of violent incidents and trends, referred to as a **problem analysis**, to identify individuals at the highest risk of participating in serious violence. Oakland's problem analysis revealed a number of misconceptions about the city's violence dynamics. It also showed that only **400 individuals—just 0.1% of Oakland's total population**—were at the highest risk for engaging in serious violence at any given time. Oakland Ceasefire partners intervene with this population.
2. **Respectful, in-person communications** with high-risk individuals to warn about the risks of ongoing violence and provide a genuine offer of assistance. With Oakland Ceasefire, these communications primarily take the form of call-ins, interventions in which stakeholders communicate with small groups of those most at risk of serious violence, and custom notifications, a personalized method of heading off imminent violence.
3. **Relationship-based social services** provided to high-risk individuals through the Oakland Unite network of community-based organizations. Oakland Unite is a unique city agency that uses taxpayer money to fund organizations that provide services like intensive mentoring, economic and educational training, and direct assistance to victims of violence and their families.
4. **Narrowly focused law enforcement** actions by the Oakland Police Department's (OPD) Ceasefire Section, in addition to ongoing, department-wide training in the principles of procedural justice and other strategies to improve police-community relationships. Since reforming its approach to violence, OPD has seen a dramatic increase in its homicide solve rate, while use-of-force incidents and complaints against the department are on the decline.

5. An intentional management structure built around regular communication between Oakland Ceasefire partners and city leaders to stay on top of changing violence dynamics and track progress toward yearly violence reduction goals. Regular meetings include weekly shooting reviews, bimonthly coordination meetings, and performance reviews led by Oakland's mayor

Public Health Interventions

- [Investing in Communities](#)
- [When law enforcement alone can't stop the problem](#)
- [What happened when a brooklyn neighborhood policed itself for five days](#)
- [Incarceration leads to community harm](#)
- [Homegrown peacemakers in LA](#)