# Office for Safe and Healthy Neighborhoods

Community and Hospital-Based Violence Interruption



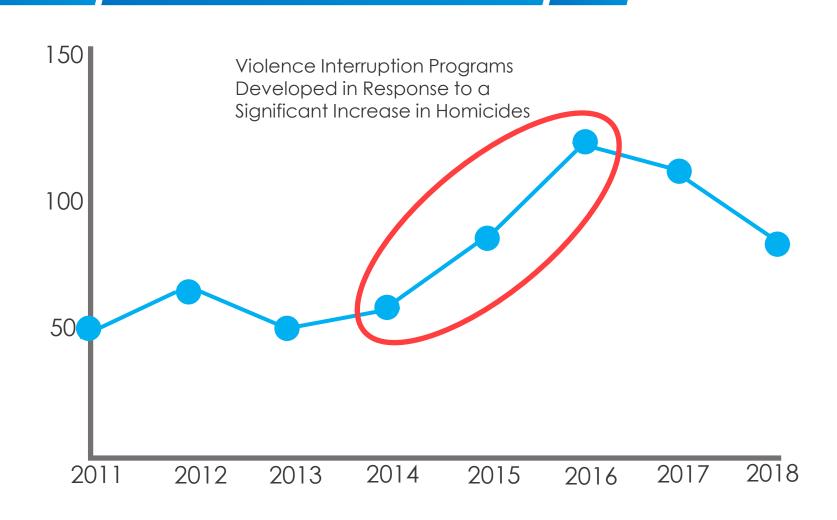
Rashaad Abdur-Rahman

Director, Office for Safe and Healthy Neighborhoods



**ABOUT** THE **PROGRAM** 

# HOW THE WORK BEGAN





## DETECT & INTERRUPT

Detect and Interrupt violence before it happens

#### **ENGAGE**

Engage individuals in the emergency room who have been injured following gun violence

#### **RESPOND**

Respond in neighborhoods following incidents of violence to support families and victims

#### CONNECT

Connect high-risk individuals to needed resources

#### MOBILIZE

Mobilize in communities to shift the narrative around community violence

# OUR PARTNERS









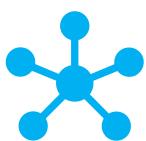
# WHAT WE PLAN TO ACCOMPLISH



**REDUCTION IN SHOOTINGS AND HOMICIDES** 



REFERRALS TO EMPLOYMENT, HEALTH SERVICES, AND OTHER SUPPORTS



INCREASED COMMUNITY CONNECTIONS





# OUR WORK TAKES PLACE



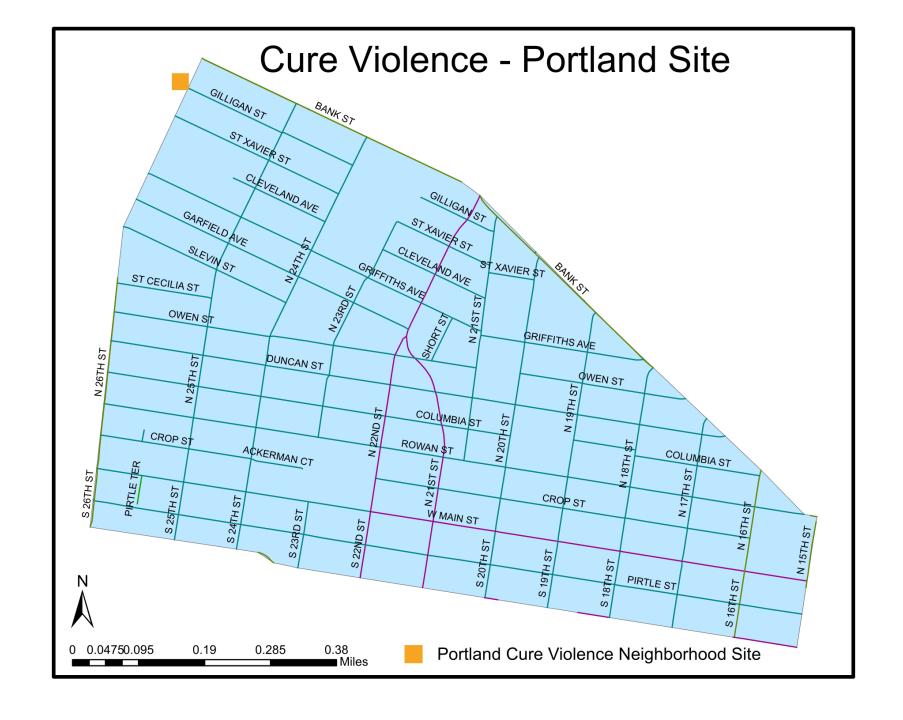
### In neighborhoods including Russell, Shawnee, and Portland.

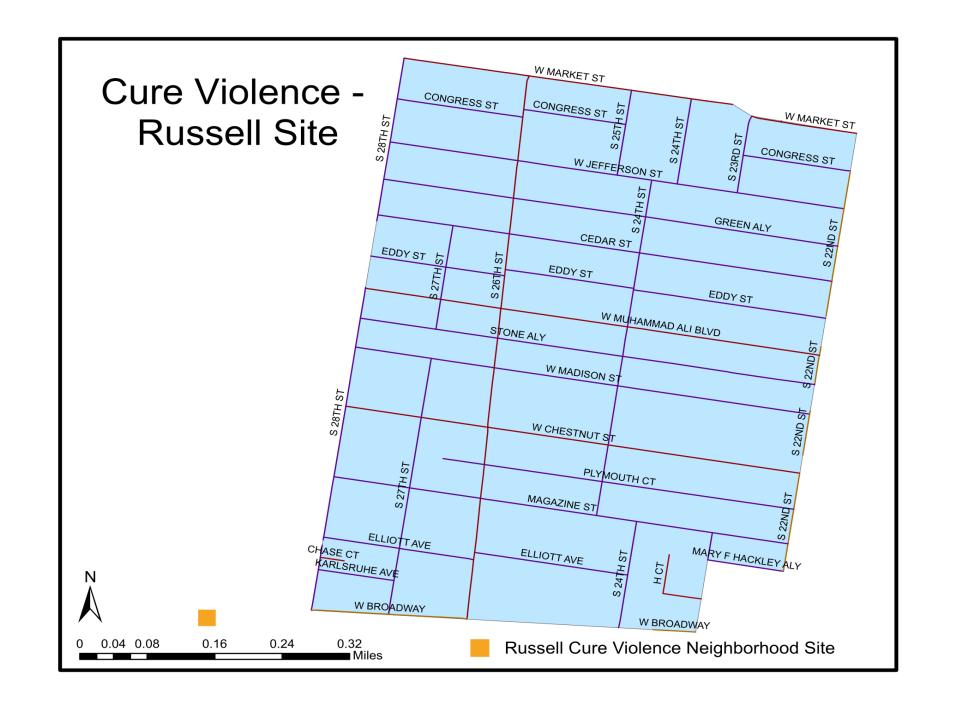
Why? These neighborhoods historically have the highest rates of gun violence.

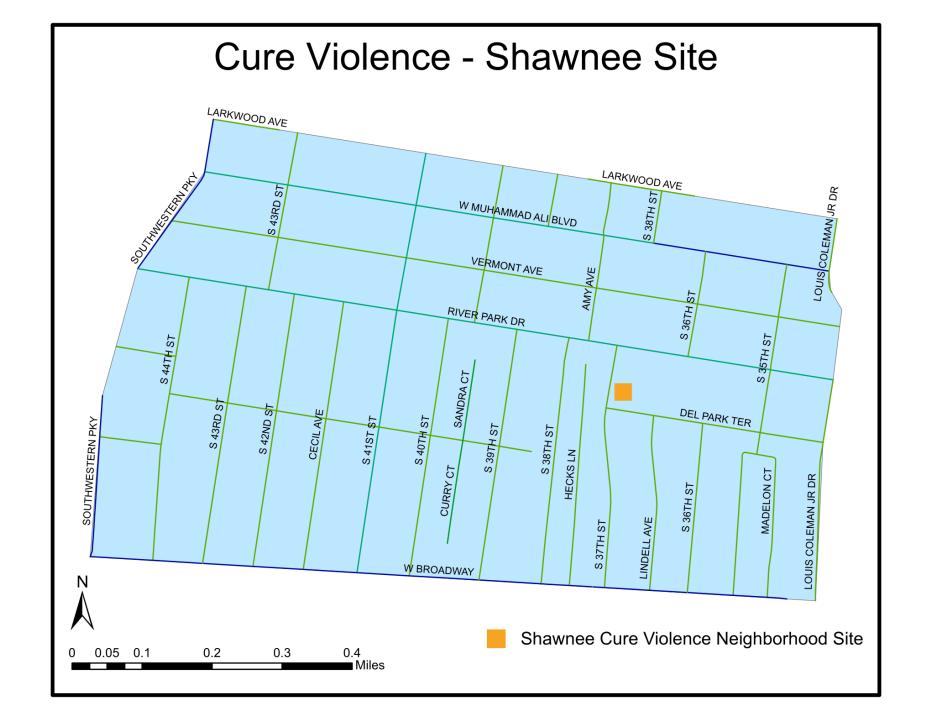


### In the hospital emergency department.

Why? Working with victims of gun violence is a key opportunity to reduce injury recidivism and retaliatory violence.

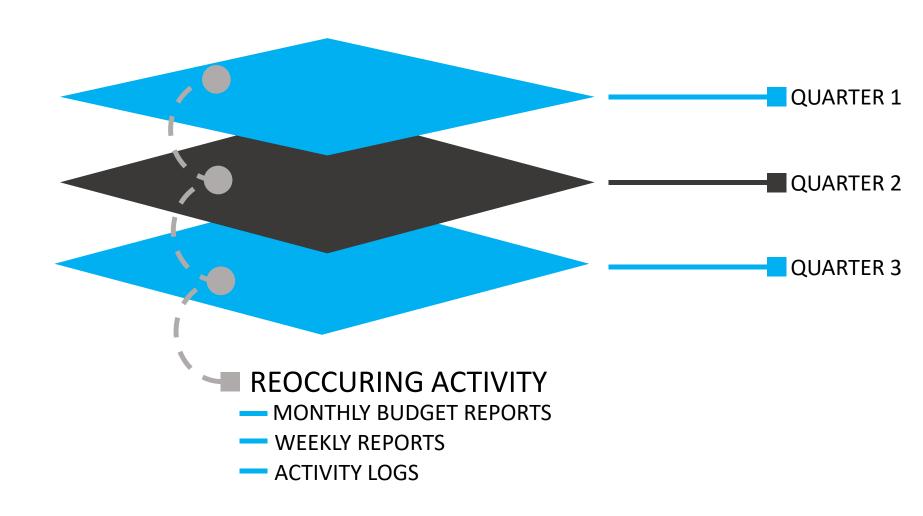




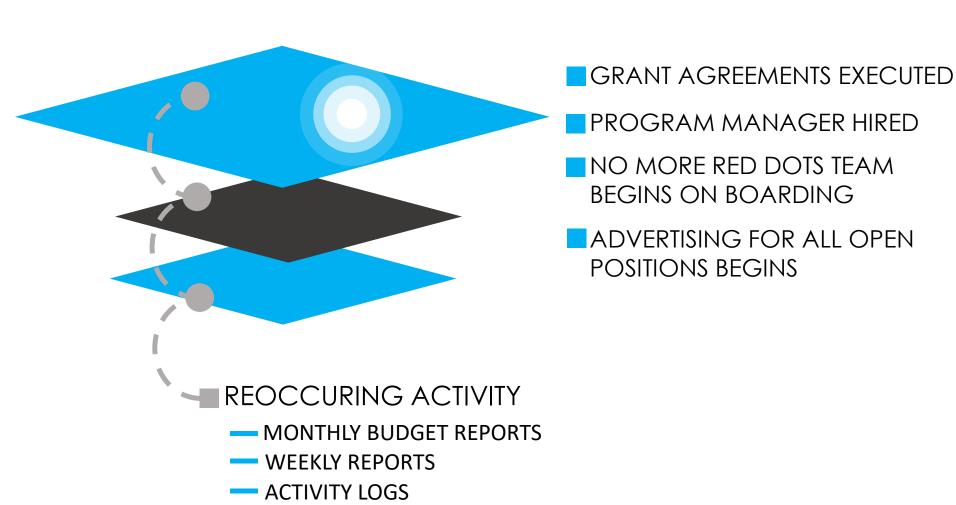




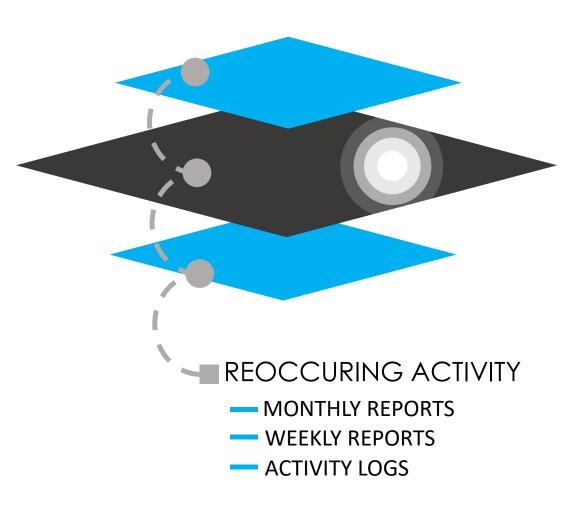
# IMPLEMENTATION TILVIELLINE



## QUARTER 1 ACTIVITY

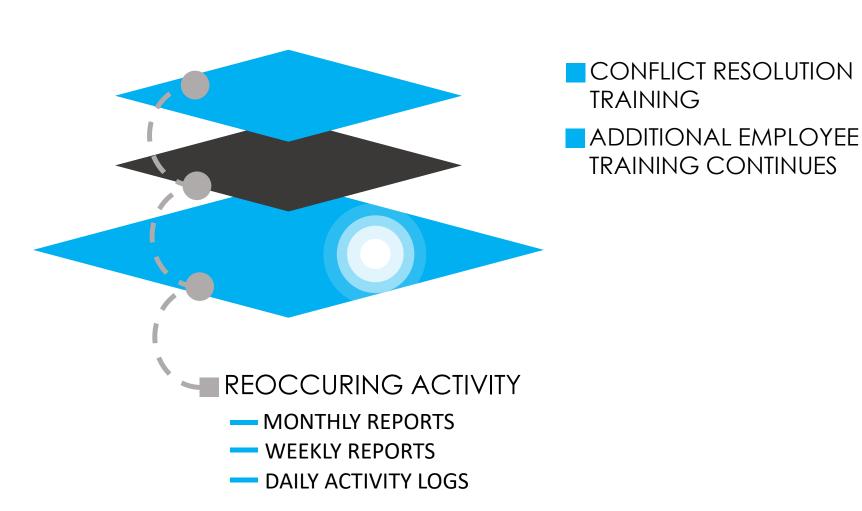


## QUARTER 2 ACTIVITY



- POSITIONS BEGINS
- 1ST QUARTER FINANCIAL REPORTS RECEIVED
- ESTABLISHED
- EVALUATION PLAN IMPLEMENTATION
- NEW EMPLOYEE ONBOARDING
- OFFICE SPACE SECURED
- MEETINGS WITH LMPD & CRIME ANALYTICS

# QUARTER 3 ACTIVITY





# ACTIVITY RESULTS

### September 2018 – February 2019

212

**Shooting / Stabbing Victims Supported** 

\*Data from University of Louisville Hospital

294

**Individual Contacts Made** 

**231** 

**High-Risk Individuals Identified** 

29

**Community Events and Canvasses** 

<u>548</u>

**Contacts via Community Events** 

and Canvasses

134

**Referrals Made** 

## FOCUS AREA DATA





# HOSPITAL BASED RESULTS





### Behavior change

**DRAFT** 

Logic Model- Proposed for Louisville



#### **Activities Inputs Outputs Outcomes Impact** High-risk High-risk clients # hours spent clients learn apply nonviolent canvassing Street Neighborhood nonviolent approaches to **Database** mediation conflict skills canvassing conflict and violence Violence # conflict and resolution declines **Trainings** interruption mediations relationship building Mentoring High-risk clients -Reduced Grant # high risk **Perceptions** and behavior embrace individuals shootings agreements and attitudes coachingnonviolent -Reduced in CV of violence are one on one goals and values Risk homicides shifted **National CV** # coaching assessment technical Mentoring sessions High-risk assistance and behavior High-risk clients Injury # contact clients avoid coachingform recidivism hours situations Site staff Hospital relationships group rate is involving the discussions interventions not associated Outreach lowered risk of **OSHN** with violence worker violence Case program caseload management manager High-risk clients gain CV sites # people access to basic needs build referred (workforce relationships per service development, education, with service needed mental health/ providers

substance use, etc.)

### Norms change

**DRAFT** 

Logic Model- Proposed for Louisville



#### Inputs

Uniform antiviolence messages and education materials

Cure Violence CBOs/grantees

**OSHN** program manager and outreach specialists

**SAMHSA** grant and MH service providers

Community and Faith-based **Partnerships** 

External agency funds

#### **Activities**

Community building events (focused on social cohesion)

Post-shooting responses, vigils, rallies and marches

Public messaging campaigns with residents and local businesses

Quarterly open houses focused on mental health and trauma; referrals to neighborhood resources

**Ambassador Program** and associated projects

Quarterly summits with faith-based groups focused on root causes

Mini-grant program

# events #attendees by demographics

# materials distributed

# of campaign materials posted (fliers, yard signs)

**Outputs** 

**Outcomes** 

Community residents are aware of and knowledgeable

of Cure

Violence

Residents

have space to

discuss

trauma of

neighborhood

violence

Violence is denormalized

**Impact** 

Residents have knowledge, tools, resources to address trauma

Community is

actively

involved in

CV's anti-

violence

efforts

Neighborhoods are more resilient to trauma

# Ambassadors, # projects in site boundaries

# community partners

Community understands resources available

Community creates resources where needed Community is better able to address root cause needs

**OUTCOMES** 

### DEVELOPMENT

**STAFF** 

- STAFF TRAINING
- CONFLICT RESOLUTION **TRAINING**

#### LMPD COLLABORATION

**COLLABORATIONS** 

- PARTNERSHIP WITH **JCPS**
- KYCC TO INCREASE **EMPLOYMENT OPPORTUNITIES**
- **COMMUNITY PARTNERSHIPS**

#### **OUTREACH**

- JOSHUA TABERNACLE CHURCH TO HOST **COMMUNITY EVENTS**
- NATIONAL YOUTH **VIOLENCE PREVENTION WEEK**



RAMP UP ACTIVITY
LEADING INTO
WARMER MONTHS

2 CONDUCT PROGRAM EVALUATION

CONTINUE STAFF
TRAINING

PROVIDE ADDITIONAL UPDATE TO COUNCIL IN A FEW MONTHS

# UPCOMING TOURS

