



Community Violence Intervention (CVI) Webinar Series

Part 4: Community-Centered
Evaluation



Julie Rodriguez

*Deputy Assistant to the President and
Director of the White House Office
of Intergovernmental Affairs*



THE WHITE HOUSE
WASHINGTON

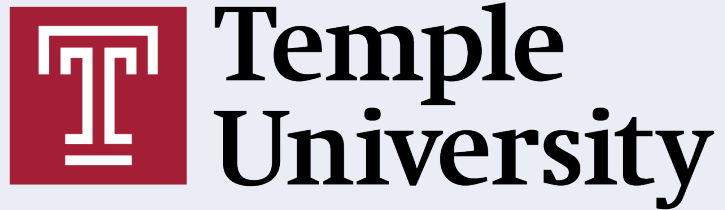


Dr. Caterina Roman

*Professor, Department of Criminal Justice at Temple
University*



Caterina Roman joined the faculty in the Department of Criminal Justice at Temple University in Fall 2008 after nearly two decades with the Urban Institute in Washington, DC. Dr. Roman has extensive experience studying the social ecology of neighborhoods, fear of crime, violence and peer-based street groups. Her research utilizes a community well-being framework designed to better balance how applied research and evaluation is produced and consumed. She has been the PI or co-PI on roughly two-dozen federally-funded evaluations of violence reduction programs and strategies to support individuals returning home from prisons and jails. In addition to her evaluation portfolio, her body of grant-funded work includes studies that assess how the personal social networks of at-risk youth and street group members influence delinquency, gun carrying, and street group membership. She recently completed a study to assess help-seeking behavior and social support mechanisms used by men and women of color who have been victims of street violence. She is currently involved in a large National Institute of Justice-funded study to develop new methods to understand the costs and harms of crime that will combine hard-to-access cross-systems data with resident survey data from three sites. She regularly publishes in both public health and criminology journals. She holds a PhD in sociology and justice, law, and society from American University.



College of Liberal Arts

Criminal Justice

Caterina G. Roman, PhD
Professor

Building the Evidence for CVI

Topics in this presentation:

- Backdrop
- Evaluation research
- Why evaluation research is important
- Types of evaluation relevant for building the evidence for CVI
- Important caveats

The Backdrop

- Community violence intervention is complex
- Few resounding successes
- Successes not easily maintained
- Successes rarely brought to scale
- Success in one place doesn't easily translate somewhere else
- Most academics don't have lived experience; research created may not reflect community truths
- Sound evaluation design difficult; often at odds with program's needs/goals

Policymakers want solutions now

- Quick-results violence reduction tends to be a policing intervention
- Resources scarce, so choose 1 intervention.... policing

So... WHERE DO WE GO FROM HERE?

Build the Evidence



EVALUATION RESEARCH

“The systematic application of social research procedures for assessing the conceptualization, design, implementation, and utility of social intervention programs”

(Rossi and Freeman 1993, p. 5)

Systematic, rigorous evaluation research forms the base for “evidence”

What are Evidence-Based Programs?

- Shown to have an impact through *rigorous scientific evaluation methods/evaluation research*
 - Have been replicated and evaluated in a variety of settings
 - Have findings subjected to critical review and published in respected journals
 - May also be “certified” as evidence-based
- **Recognition of inequities in how research is produced. Movement to incorporate strategies that bring communities to the forefront as experts**
- ✓ Produce more meaningful knowledge that supports more meaningful action

Why is Evaluation Important?

- What gets measured gets done
- If you don't measure results, you can't tell success from failure
- If you can't see success, you can't reward it
- If you can't see success, you can't learn from it
- If you can't recognize failure, you can't correct it
- If you can demonstrate results, you can win public support

*Evidence promotes
the common good*

Headlines

2020 and 2021

The evidence for violence interrupters simply aren't a proven idea.

In the quest for alternatives to police, interrupters simply aren't a proven idea.
By German Lopez | @germanlopez | german.lopez@vox.com | Sep 3, 2021, 8:00am EDT

IDEAS WE SHOULD STEAL: REDUCE GUN VIOLENCE THROUGH BETTER POLICING

While murder and shootings have spiked in Philly and elsewhere, both Camden and Newark have made progress in reducing gun violence by adopting smart policing techniques. Why don't we do what they've done?

By PATEL SHEPELAVY | MAY. 10, 2021



Local Opinions Opinion: Is D.C. wasting money on violence reduction programs?

Lack of evidence showing DC violence-interrupter program is preventing homicides: report

CRIME · Published August 13

Crime reporters believe the program and its resources need to be further evaluated

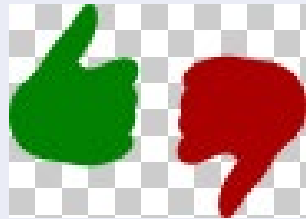
By Audrey Conklin | Fox News



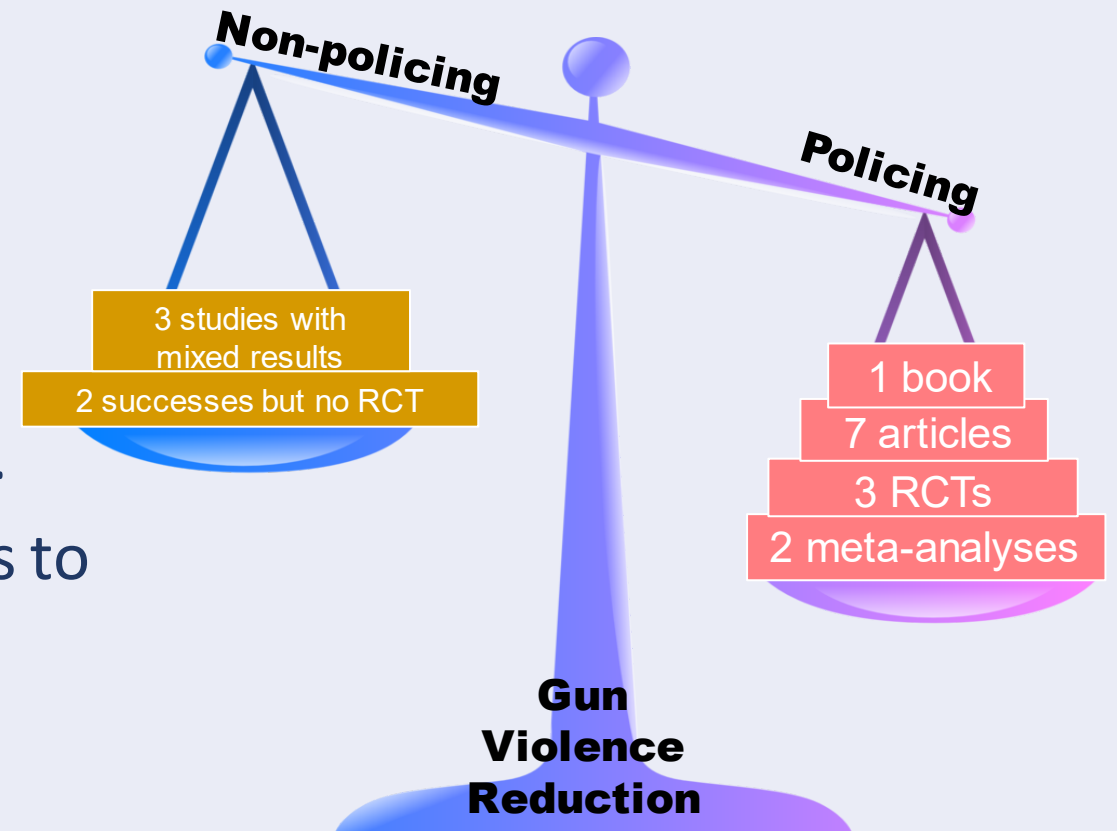
Fox News Fir

Headlines are Both Right and Wrong

- Evidence on non-policing, community-based violence interventions promising, but mixed...



- Public weighing AMOUNT of research available without considering the caveats...
- Comparing community-based interventions to policing unfair



Biases that Can Lead to Flawed Conclusions about Evidence Base

- More LE programs means more opportunities for research
- Federal \$ for research intertwined with priority DOJ grant portfolios

Project Safe Neighborhoods (USAO); Community-Based Crime Reduction (CBCR) Program

U.S. Department of Justice
Office of Justice Programs
Bureau of Justice Assistance



Innovations in Community-Based Crime Reduction (CBCR) Program FY 2020 Competitive Grant Solicitation

The CBCR program targets distressed neighborhoods facing concentrated crime challenges, particularly serious and violent crime, composing a large proportion of crime as compared to other parts of the jurisdiction. Therefore, applying jurisdictions are strongly encouraged to coordinate with and seek the support of their local U.S. Attorney's Office and local policymakers, and to connect CBCR programming with other violent crime and community revitalization efforts, including DOJ's Project C...

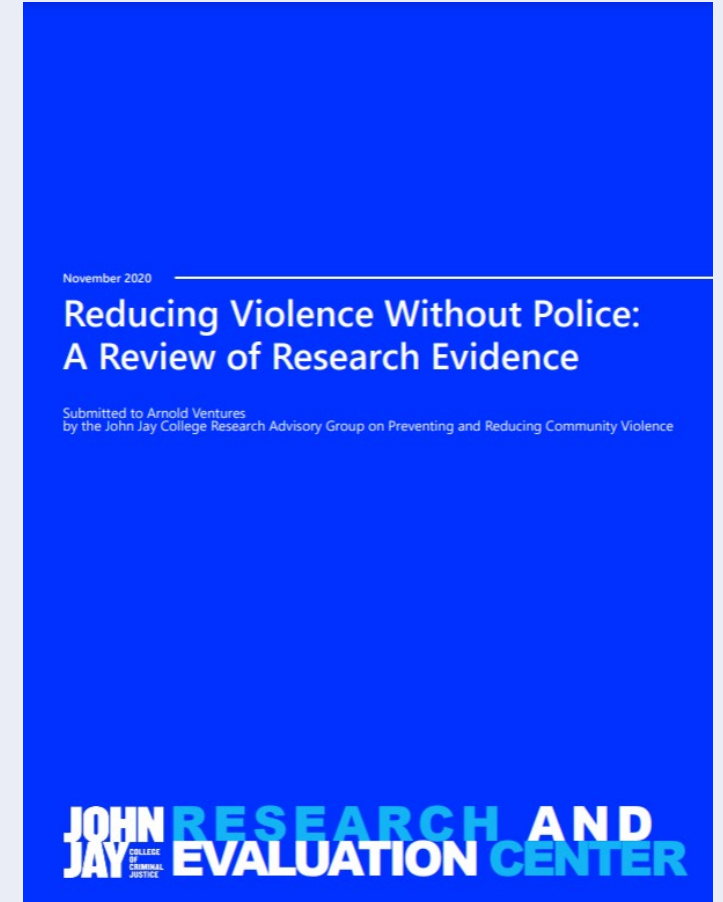
Describe the steps the applicant will take with the CBCR team to develop a performance management plan. The plan should include strategies to collect data, review data, and use data to improve program performance. The plan should also discuss how the CBCR team will work with the research partner, including any evaluation plans.

Illustration of Bias:

Research Base Skewed Toward Policing Interventions...

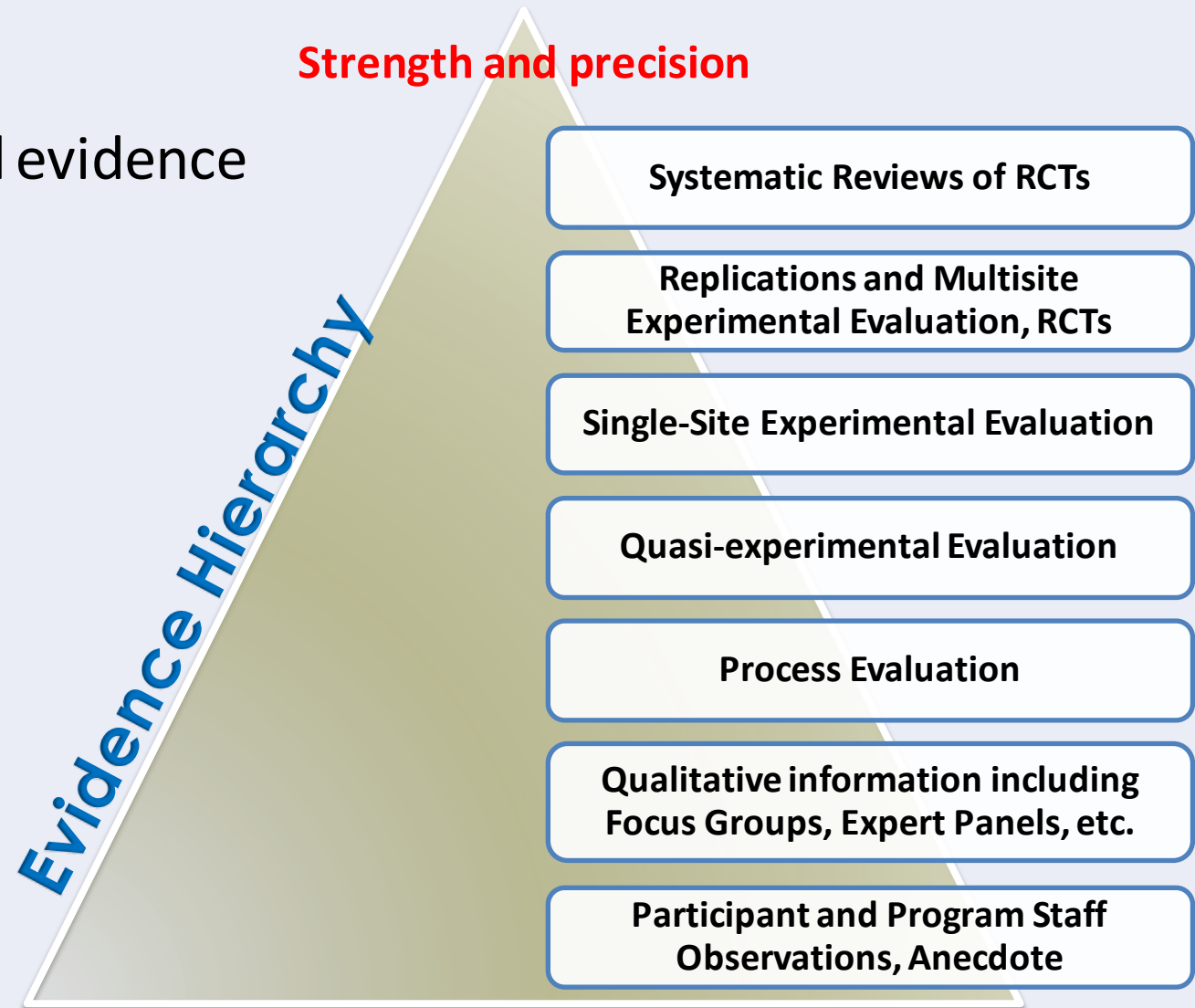
John Jay College Research Advisory Group
on Preventing and Reducing Community Violence
(November 2020, p.1)

- Researchers used [CrimeSolutions.gov](https://www.crimesolutions.gov) evidence database to filter for **strong evidence** (“effective”), topic (“crime and crime prevention”), and setting (“high crime neighborhood”) yielded 17 programs.
 - *Of 17 programs, 14 (82%) involved law enforcement as lead agency/key partner*
 - *At least 5/14 LE-related programs were based on “focused deterrence” law enforcement strategy*



What Constitutes Scientific Evidence in Evaluation?

- **High-quality** evaluation forms the basis of scientific evaluation-based evidence



To Simplify:

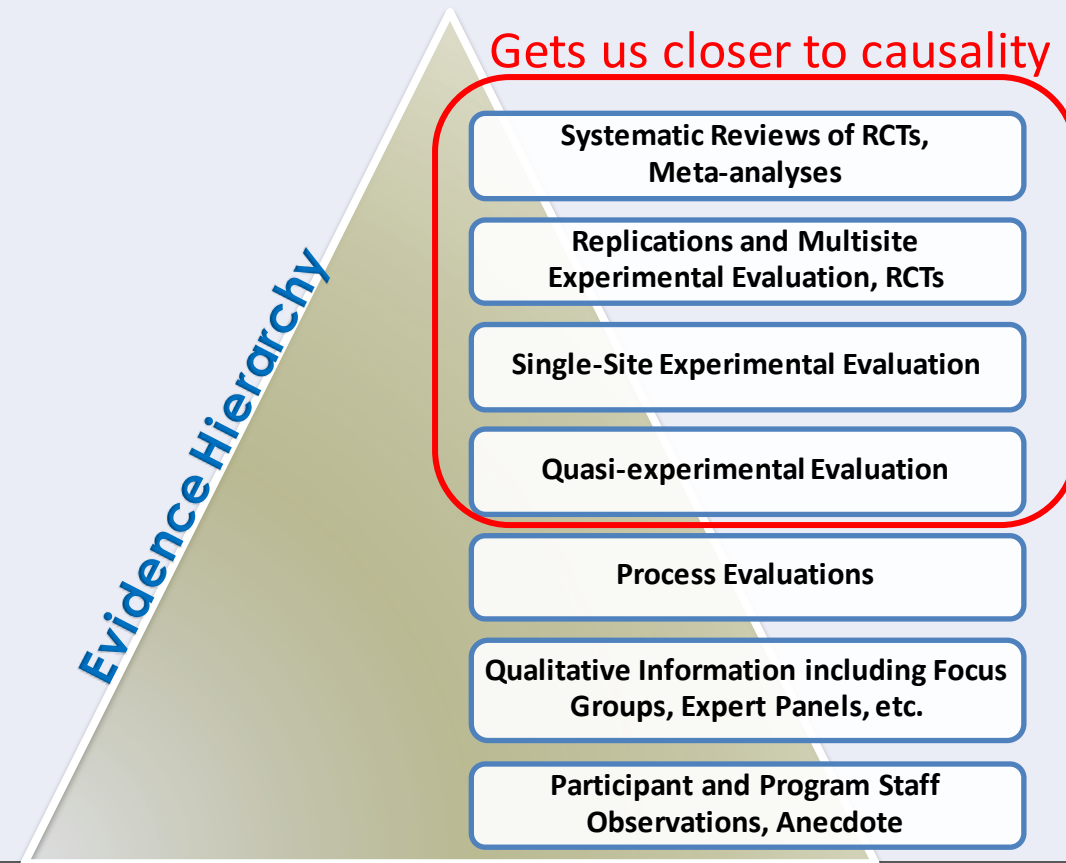
What Types of Evaluations are Relevant for Building Evidence?

1. Impact Evaluation
2. Performance Monitoring
3. Process Evaluation
4. Cost Evaluation/Return on Investment

Citation: Adele Harrell et al. (1996). Evaluation Strategies for Human Services Programs: A Guide for Policymakers and Providers. Washington, DC: The Urban Institute

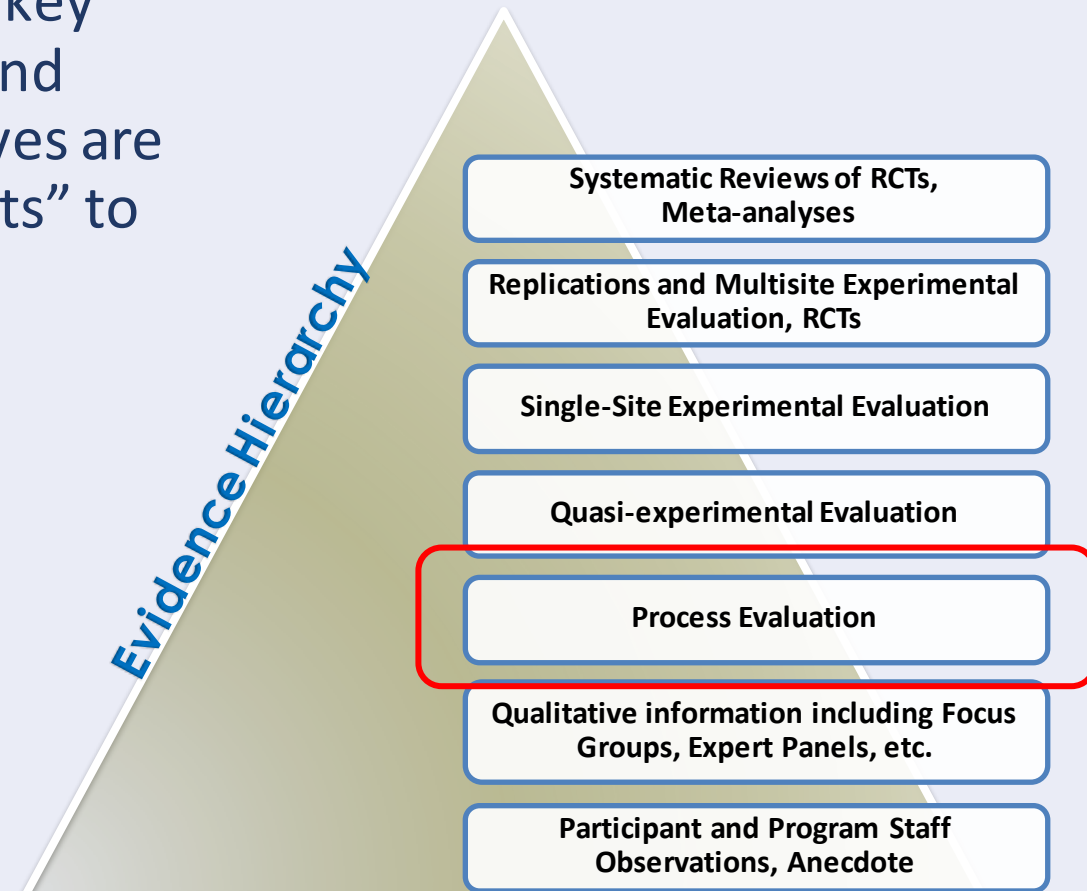
What Types of Evaluations are Relevant for Building Evidence?

1. Impact Evaluation - focuses on questions of causality. Did the program have its intended effects? What were the effects on clients? On the larger community?
2. Performance Monitoring
3. Process Evaluation
4. Cost Evaluation/Return on Investment



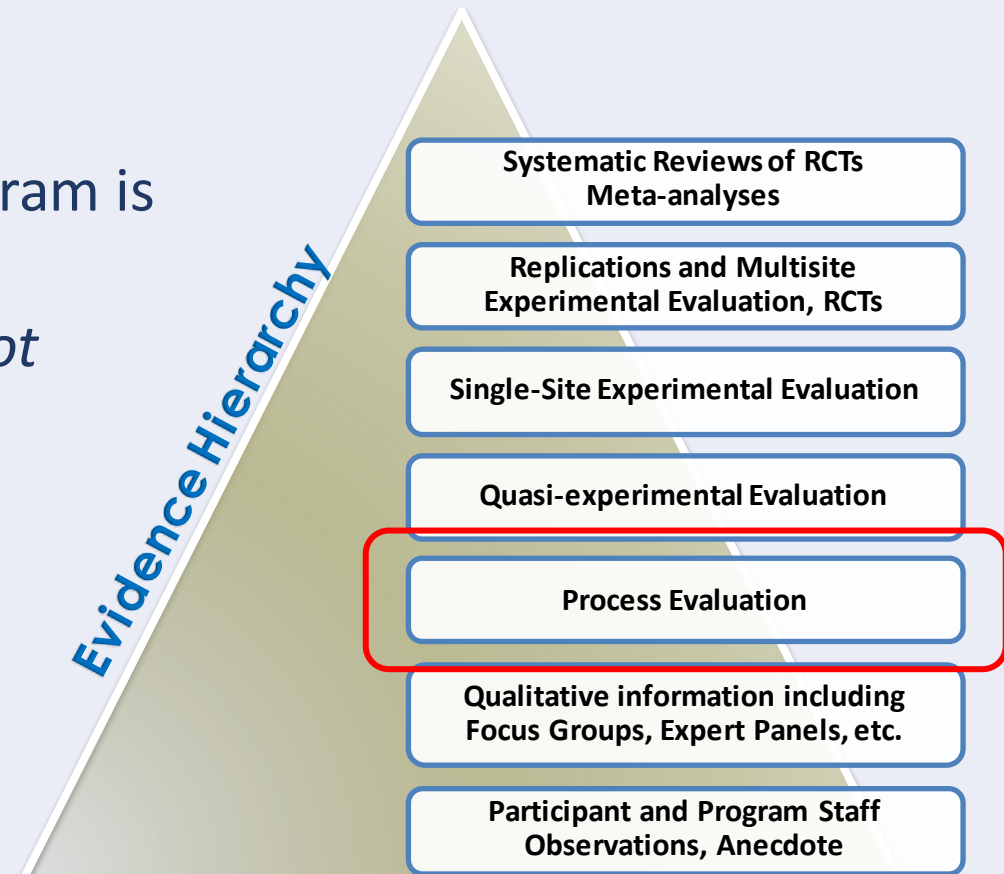
What Types of Evaluations are Relevant for Building Evidence?

1. Impact Evaluation
2. Performance Monitoring – measurement of key aspects of how system/program is operating and the extent to which specified program objectives are being attained. Measures “inputs” and “outputs” to summarize results of each input/activity. Often part of a process evaluation.
3. Process Evaluation
4. Cost Evaluation/ROI



What Types of Evaluations are Relevant for Building Evidence?

1. Impact Evaluation
2. Performance Monitoring
3. **Process Evaluation** – establishes how the program is operating and documents the procedures and activities undertaken in service delivery. *Does not establish effectiveness.*
4. Cost Evaluation/ROI



What Types of Evaluations are Relevant for Building Evidence?

1. Impact Evaluation
2. Performance Monitoring
3. Process Evaluation
4. Cost Evaluation/Return on Investment - addresses how much the program costs, preferably in relation to alternative uses of the same resources (e.g., business as usual) and to the benefits being produced by the program.

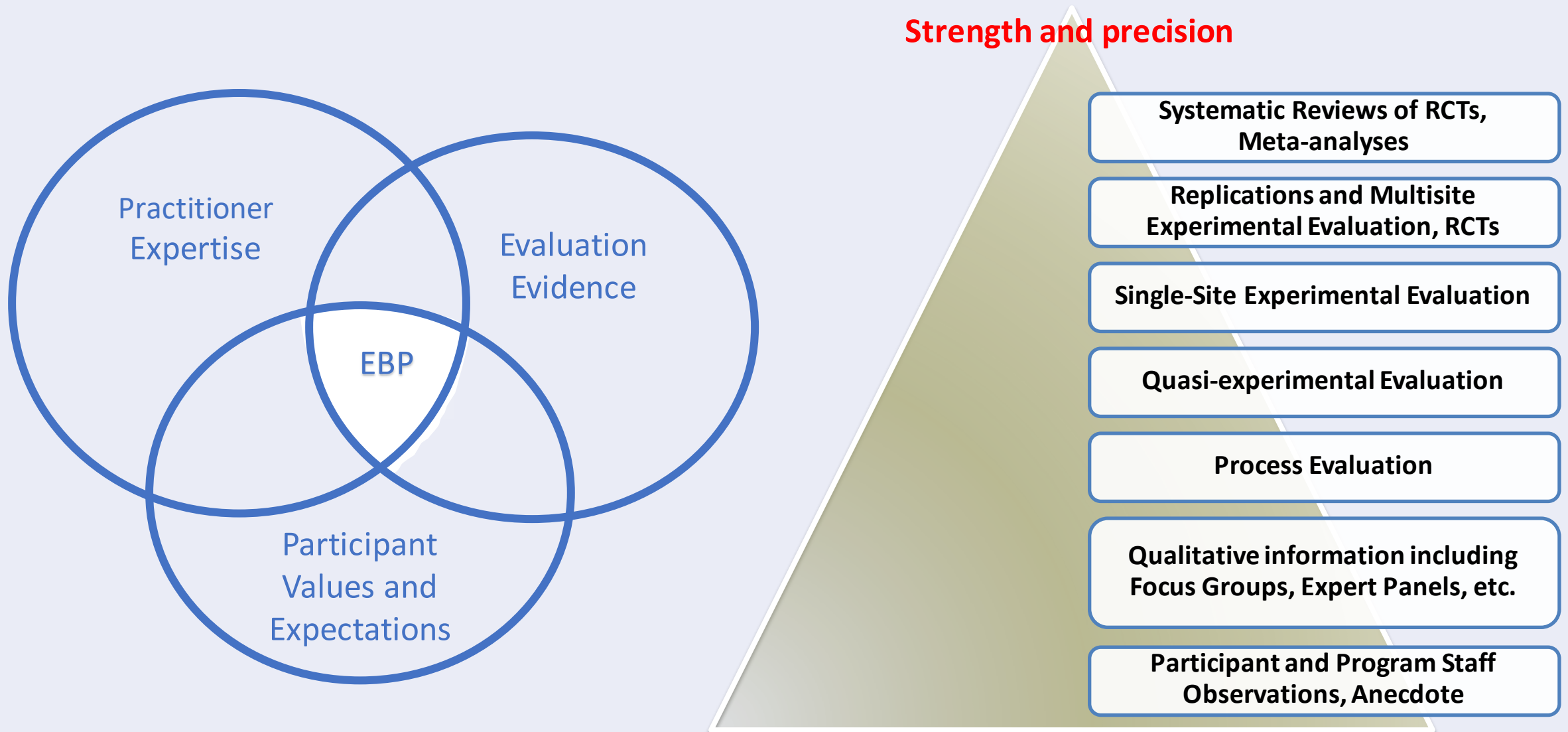
People ask:

What level of evidence base is needed for program or policy adoption?

But better question is:

What is best approach for generating policy knowledge (that will actually lead to improvements in public safety, programs, and practices)?

Best Approach to Help Generate Evidence



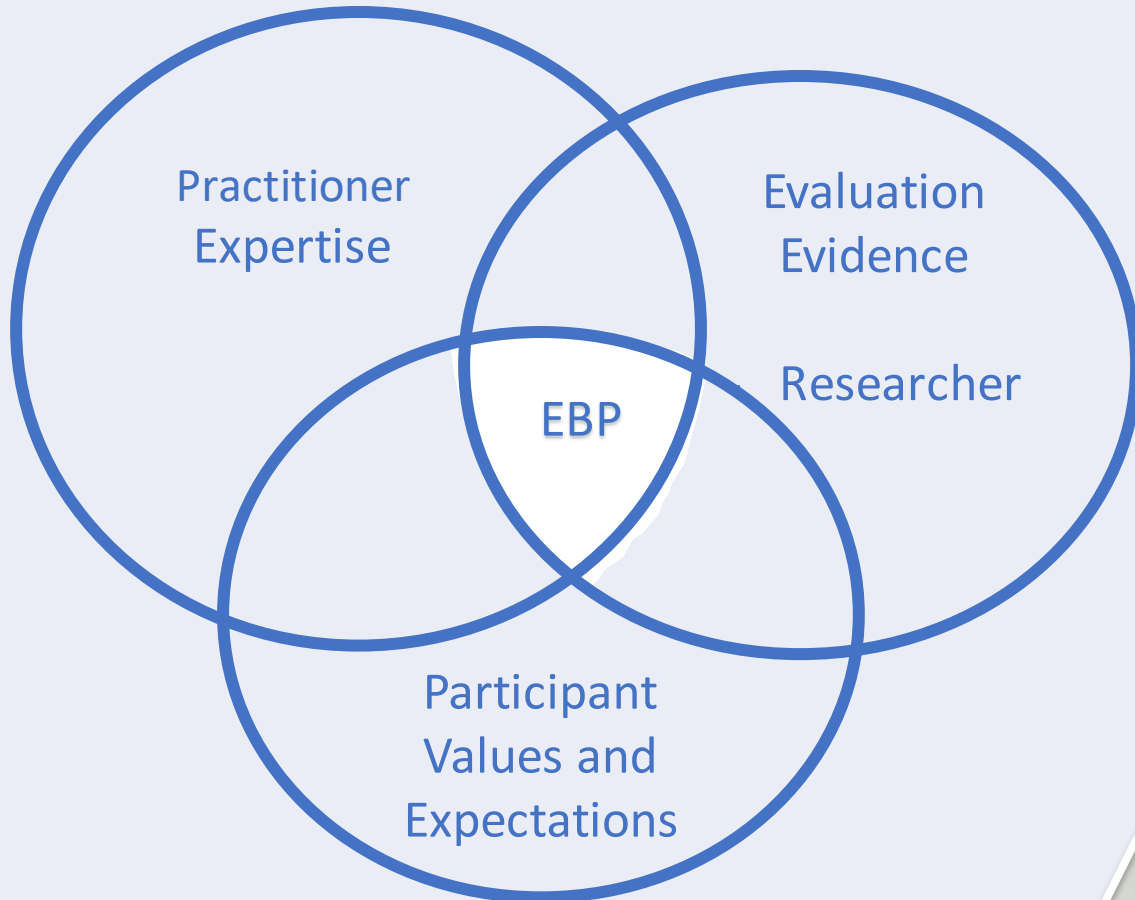
Unpacking the Black Box of Behavior Change

- Comprehensive, community-engaged evaluation that includes process analyses will help decipher the causal mechanisms
 - HOW is the outcome produced?

$A + B * C = F$ or $A + B + C + D + E = F?$ or $A + C = F?$



Best Approach to Help Generate Evidence – Collaboration across Stakeholders



Strength and precision

Systematic Reviews of RCTs,
Meta-analyses

Replications and Multisite
Experimental Evaluation, RCTs

Single-Site Experimental Evaluation

Quasi-experimental Evaluation

Process Evaluation

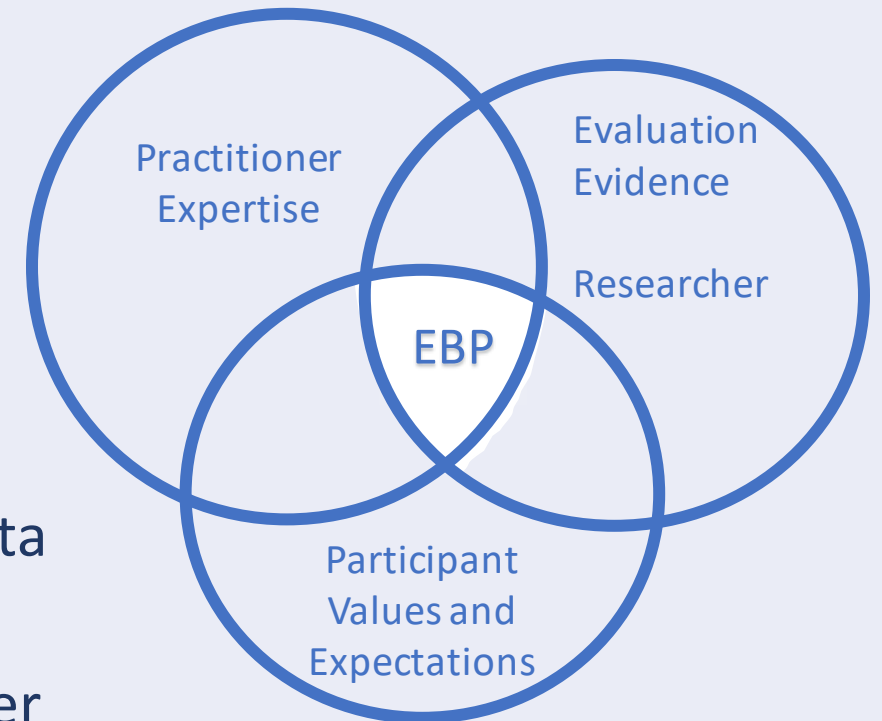
Qualitative information including
Focus Groups, Expert Panels, etc.

Participant and Program Staff
Observations, Anecdote



What Does All This Mean?

- Collaborate. No one person (type of stakeholder) holds all the answers
 - Collaboration is key; results not owned by any particular group but valued across community
- Seek trusted partners – discern which stakeholders have the same goals & values
- Learn about evaluation strategies, community- and participant-engaged approaches, data collection methods to lay groundwork that recognizes biases
- Measure your desired outcomes; but also collect data to elucidate possible harms
- Push for funding that prioritizes research-practitioner partnerships with goal of building community capacity for evaluation research



Thank you!



@CaterinaGRoman

And thank you to Temple graduate students
Nicole Johnson
and Alyssa Mendlein



Photo: C. Roman



Dr. Barbara Israel

*Professor of Health Behavior & Health Education,
Director of Detroit Community-Academic Urban Research Center,
University of Michigan School of Public Health*



Dr. Israel is a Professor in the Department of Health Behavior and Health Education at the University of Michigan School of Public Health. She received her Doctorate in Public Health and Master in Public Health degrees from the University of North Carolina at Chapel Hill. She has published widely in the areas of: the social and physical environmental determinants of health and health inequities; the relationship among stress, social support, control and physical and mental health; and community-based participatory research (CBPR). Dr. Israel has extensive experience conducting CBPR in collaboration with partners in diverse communities. Since 1995, she has worked together with academic and community partners to establish and maintain the Detroit Community-Academic Urban Research Center (Detroit URC). One of the goals of the Center is to foster and support the development of equitable community-academic partnerships focused on understanding and addressing health inequities in the city of Detroit. The Detroit URC has facilitated the establishment of numerous such CBPR partnerships affiliated with the Center, which are engaged in multiple NIH and Foundation-funded basic etiologic research, intervention research and training projects aimed at increasing knowledge and addressing factors associated with health inequities. Dr. Israel is actively involved in several of these CBPR partnerships and projects examining, for example, the environmental triggers of childhood asthma and strategies for reducing them, the social and physical environmental determinants of cardiovascular disease, the impact of physical activity interventions on heart health, the translation of research findings into policy change, and capacity building for conducting CBPR and policy advocacy. Dr. Israel received the Excellence in Teaching Award at University of Michigan School of Public Health in 2007, the Harold R. Johnson Diversity Service Award, at University of Michigan in 2013, and the Game Changer Designation, in the field of health behavior and health education, by the American Journal of Health Promotion (2015).

Community-Based Participatory Research: Rationale, Principles, & Application for Evaluating Community Violence Interventions*

Barbara A. Israel, DrPH, MPH

Professor, Department of Health Behavior & Health Education
Director, Detroit Community-Academic Urban Research Center
University of Michigan School of Public Health

CDC National Center for Injury Prevention and Control
White House Webinar Series Part 4: Community-Centered Evaluation

September 16, 2021

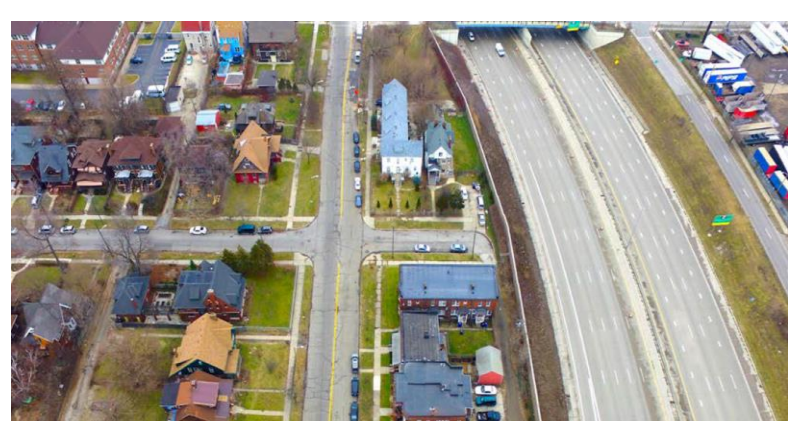


*With acknowledgement to my colleagues in the Detroit Community-Academic Urban Research Center and affiliated partnership: Healthy Environments Partnership, community partners and academic colleagues (Amy Schulz, Roshanak Mehdipanah, Alexa Eisenberg).



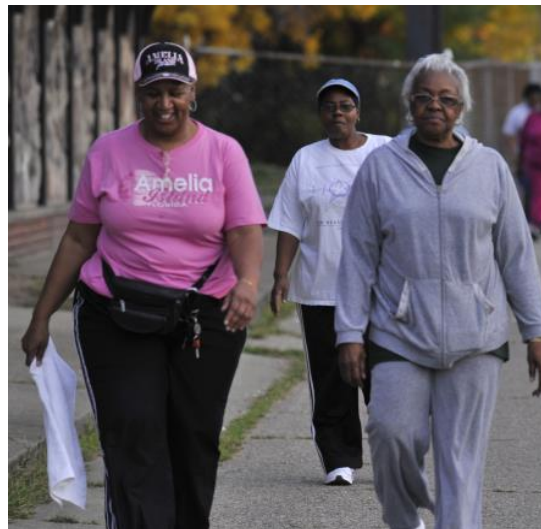
Rationale

- Stressors in the social & physical environment associated with community violence and poor health outcomes
- Stressors include neighborhood and structural conditions



Rationale (continued)

- Burden of disease borne by low-income communities and communities of color
- Extensive set of skills, strengths and resources exist among community members



Rationale (continued)

- Historically, research and evaluation has not often directly benefited and sometimes actually harmed the communities involved
- Communities most impacted by health inequities least likely to be involved in the research and evaluation process
- Resulted in understandable distrust of, and reluctance to participate in, research and evaluation

Rationale (continued)

- Public health interventions have often not been as effective as could be because:
 - Not tailored to the concerns & cultures of participants;
 - Rarely include participants in the design and evaluation; and
 - Focused on individual behavior change with less attention to broader social & structural determinants.

Rationale (continued)

- Increasing calls for more comprehensive & participatory approaches to research and evaluation
- Increasing support for such partnership approaches
- Community-based participatory research is one such partnership approach



Definition of Community-Based Participatory Research

- Community-based participatory research is a partnership approach to research and evaluation that:
 - equitably involves all partners in all aspects of the research and evaluation process;
 - enables all partners to contribute their expertise, with shared responsibility and ownership;
 - enhances understanding of a given phenomenon; and
 - integrates the knowledge gained with interventions and their evaluation.

Select Key Principles of CBPR

1. Builds on community strengths and resources
2. Promotes collaborative and equitable partnerships



Select Key Principles of CBPR (continued)

4. Facilitates co-learning and capacity building
5. Addresses issues of race, ethnicity, racism, and social class and embraces cultural humility.



Key Principles of CBPR (continued)

6. Disseminates findings to all partners and involves them in the dissemination process.
7. Promotes long-term process and commitment.



Application of CBPR Approach to Research and Evaluation

- CBPR is an approach to or process by which research and evaluation is conducted
 - CBPR is not a specific method or research design
 - CBPR can involve qualitative and quantitative methods and mixed methods research designs



The Healthy Environments Partnership



A community-based participatory research partnership

working together since 2000

to understand and promote heart health in Detroit.

We examine aspects of the social & physical environment that contribute to racial & socioeconomic inequities in cardiovascular disease (CVD), and develop, implement & evaluate interventions to address them.

Detroit Hispanic Development Corporation | Eastside Community Network | Friends of Parkside | Henry Ford Health System | Institute for Population Health | University of Michigan School of Public Health | Community Members At-Large



CATCH-PATH Multilevel Intervention: Overview

Pathways to Heart Health

- Promote Walking
- Promote Community Leadership & Sustainability
- Promote Activity Friendly Neighborhoods

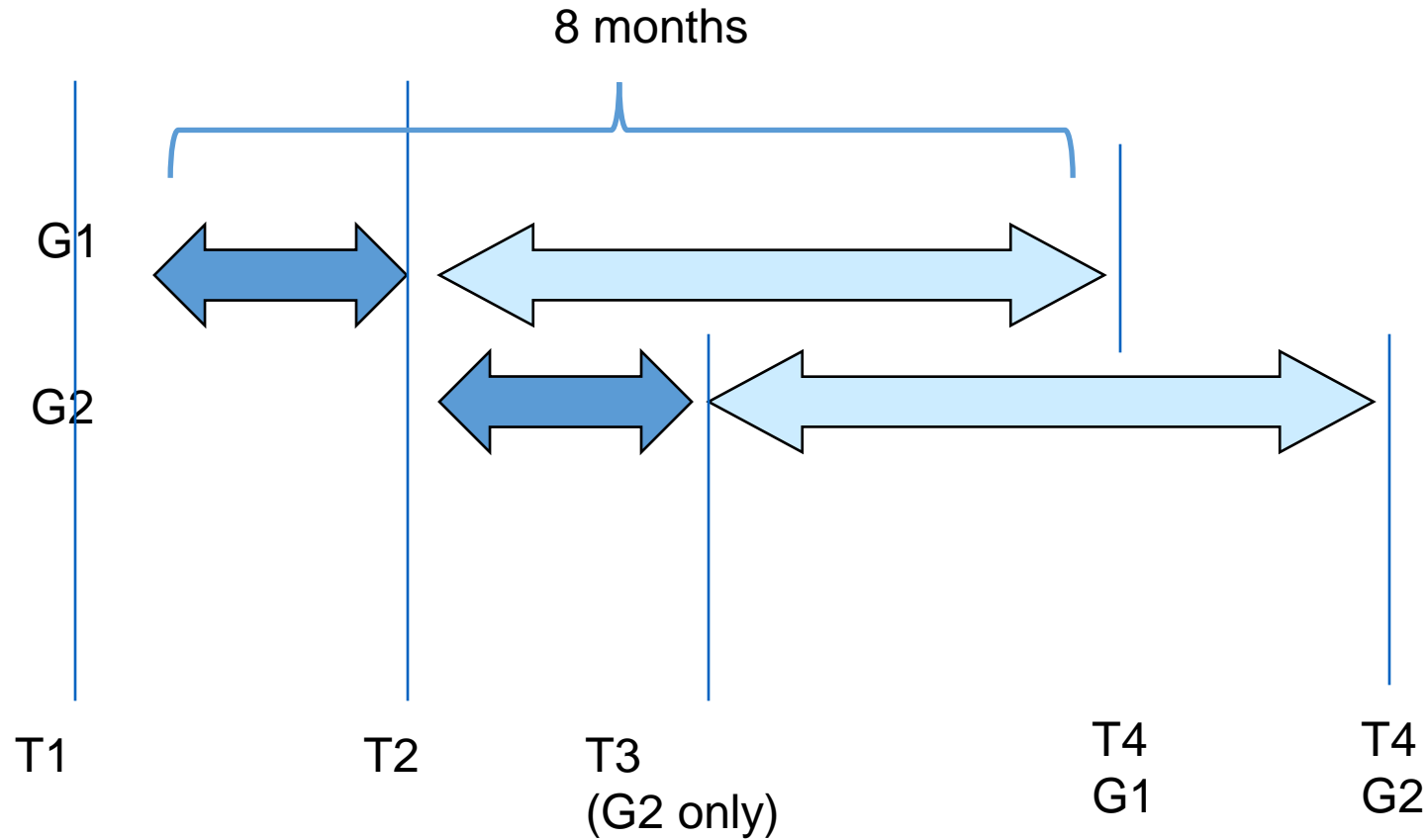


Walk Your Heart to Health Walkers

- Walking Group Aims:
 - Promote heart healthy behaviors → walking
 - Provide opportunities for other heart healthy activities (e.g., food demos)
 - Offer social support for heart healthy activities
- Evaluation: Pre & post surveys (e.g., health indicators, attitudes, social support)
- Pedometers –monitor steps
- Participant observation
- Attendance records
- Session summary sheets



WYHH Evaluation Design (lagged design)



What We Learned

1. *WALKING GROUPS INCREASE PHYSICAL ACTIVITY*

2. *WALKING GROUPS REDUCED CVD RISK FACTORS*



*“I loved it! The people in the group and the **Community Health Promoters**, we became family...**Everybody** in my household **walks**, I changed my diet & lost weight. The program should never end...”*

Evaluation of Detroit's Poverty Tax Exemption Program to Increase Awareness and Uptake

- Housing a multidimensional determinant of health – housing affordability and accessibility linked to multiple negative health outcomes
- Between 2010 – 2018 more than 125,000 homes in Detroit were entered into foreclosure auction due to tax foreclosures (impacting for example, homelessness, blight, poverty status, violence)
- Homeowners with incomes near or below federal poverty level eligible for property tax reduced in half or eliminated
- Majority of homeowners eligible for Poverty Tax Exemption (PTE) benefits do not receive them
- From 2012 – 2016 less than 12% of those eligible applied for and received benefits

Evaluation PTE Program: Methods

- HEP partnership wanted to understand: Why do low-income homeowners eligible for property tax relief through Detroit's PTE program rarely obtain it?
- Using CBPR approach decided to use a case study approach
- Document review (e.g., legislative records, court cases)
- Conducted in-depth interviews 105 Detroit homeowners receiving walk-in counseling assistance United Community Housing Coalition

Evaluation PTE Program: Key Findings & Policy Implications

- 82% never previously applied but qualified for tax exemption
- Among them, 84% owed back taxes, 70% subject foreclosure
- Barriers identified
 - Limited program awareness
 - Application process complex/paperwork requirements restrictive
 - Counseling services improved awareness and approval but placed burden on residents and non-profit organization
 - Submissions often not reviewed due to documentation missing
- Findings shared with Detroit City Council and relevant government offices
- Presently implementing positive changes to make more widely accessible
- Partnership continuing to work to implement other policy recommendations

Benefits of Using a CBPR Approach

- Enhances quality, relevance and use of data
- Strengthens capacity of community, practitioner and academic partners – with all contributing their knowledge and expertise



Benefits of Using a CBPR Approach (continued)

- Strengthens intervention design, implementation and evaluation
- Joins partners with diverse expertise to address complex public health problems



Benefits of Using a CBPR Approach (cont.)

- Increases trust and bridges cultural gaps between partners
- Increases the power of communities to address larger structural, health equity issues that lead to disparities in community violence



Thank you!





Roseanna Ander

*Founding Executive Director of the University of
Chicago Crime Lab and Education Lab*



Roseanna Ander serves as the founding Executive Director of the University of Chicago Crime Lab (since 2008) and the Education Lab (since 2011), which are part of UChicago Urban Labs. In January 2010, she was appointed to the International Association of Chiefs of Police Research Advisory Committee, and she formerly served on the Illinois Juvenile Justice Commission. Ms. Ander also served on the public safety transition teams for both Chicago Mayor Rahm Emanuel and Illinois Governor Bruce Rauner. Prior to joining UChicago, she oversaw the Joyce Foundation's gun violence program and led the foundation's grantmaking in early childhood education. Before working at Joyce, she was a Soros Justice Fellow with the Massachusetts Attorney General's Office and also worked for the Harvard Injury Control Center and the Harvard Project on Schooling and Children. Ms. Ander holds an MS from the Harvard School of Public Health.



Eduardo Bocanegra

Senior Director of Heartland Alliance READI Chicago



Eddie Bocanegra joined Heartland Alliance in June 2017 as senior director of READI Chicago. In this role, he oversees the management and implementation of the evidence-based and trauma-informed program to reduce gun violence and promote safety and opportunity in the city. As a pioneer in the field, Mr. Bocanegra brings years of experience in community-based organizations and programs created to address trauma and build resiliency among those most impacted by violence. Most recently, he served as executive director for the YMCA of Chicago's Youth Safety and Violence Prevention program, where he was responsible for programs that focused on trauma-informed approaches, such as Urban Warriors and Bridging the Divide. Mr. Bocanegra holds both a master's and bachelor's degree in social work from the University of Chicago and Northeastern Illinois University, respectively.

READI Chicago

A New Model for
Researcher-Practitioner
Collaboration in the
Face of Crisis



HEARTLAND
ALLIANCE





2016 began a sustained surge in gun violence

Post Nation

Chicago has had more homicides this year than New York and Los Angeles combined

At Least 27 Shot, 7 Fatally, in Chicago Over Christmas Weekend

Homicides In Chicago Eclipse U.S. Death Toll In Afghanistan And Iraq [Infographic]

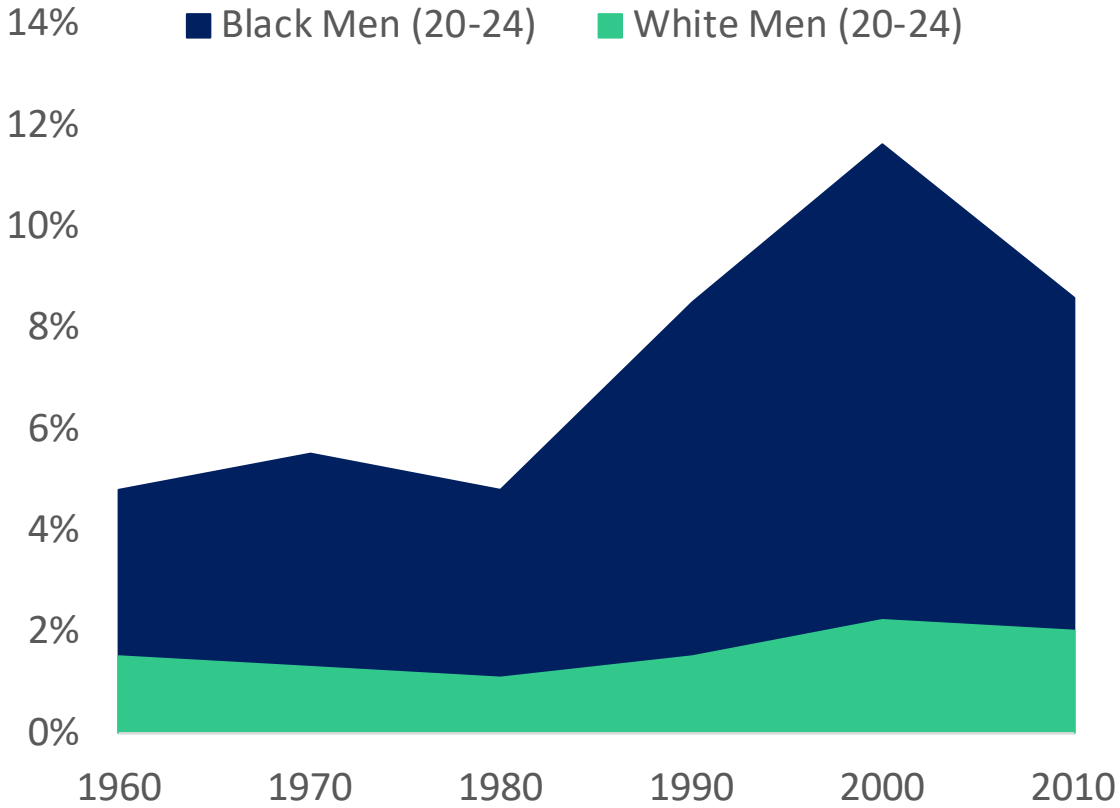
Chicago's 762 homicides in 2016 is highest in 19 years

Incarceration has been the dominant policy response

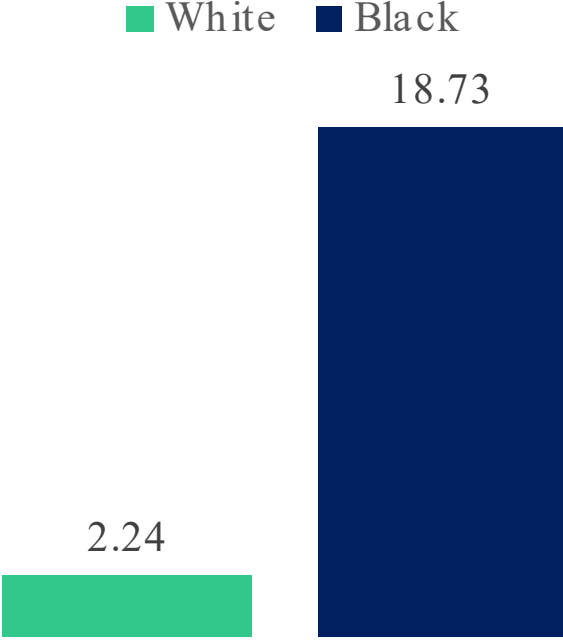


Black men carry the dual burden of incarceration and gun violence victimization

% of Young Men Incarcerated



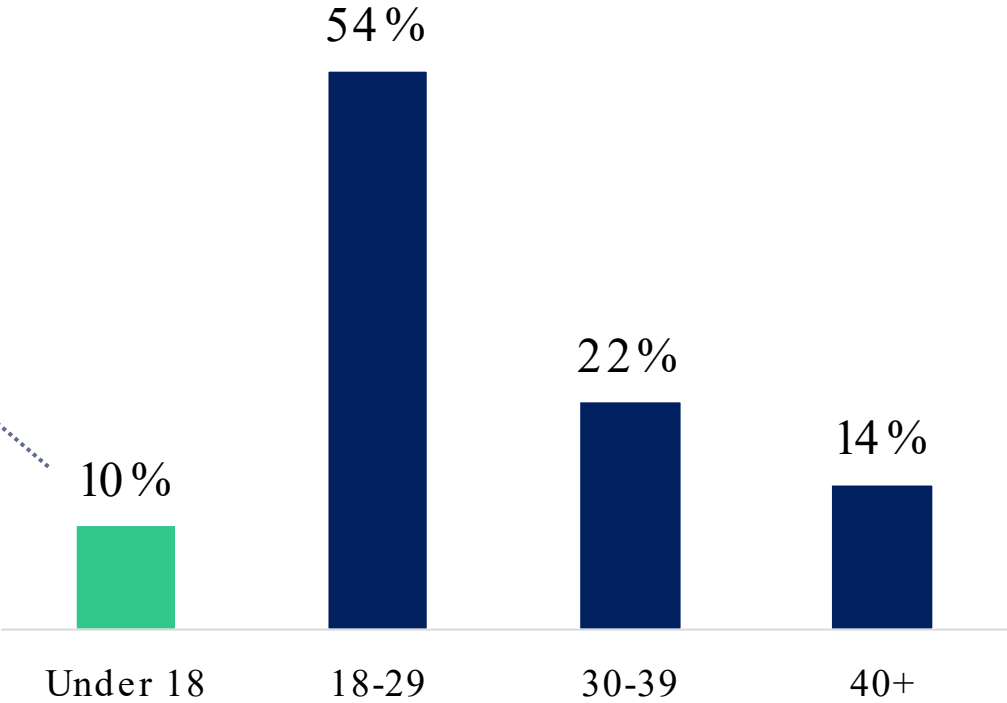
Gun Homicide Rate per 100,000 (2019)



Can we identify who is most involved in gun violence?

Age of shooting victims (2019)

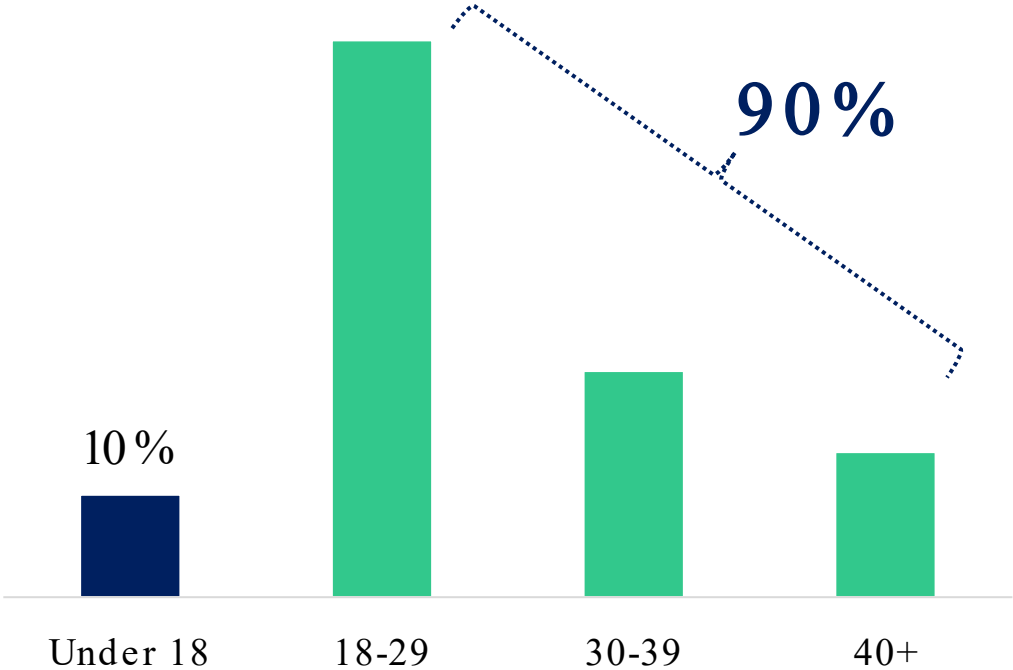
Vast majority of existing violence prevention programs offered to youth



Source: UChicago Crime Lab analysis of Chicago Police Department data

Can we identify who is most involved in gun violence?

Age of shooting victims (2019)



Source: UChicago Crime Lab analysis of Chicago Police Department data

The evidence for violence interrupters doesn't support the hype

In the quest for alternatives to police, interrupters simply aren't a proven idea.

By German Lopez | @germanlopez | german.lopez@vox.com | Sep 3, 2021, 8:00am EDT

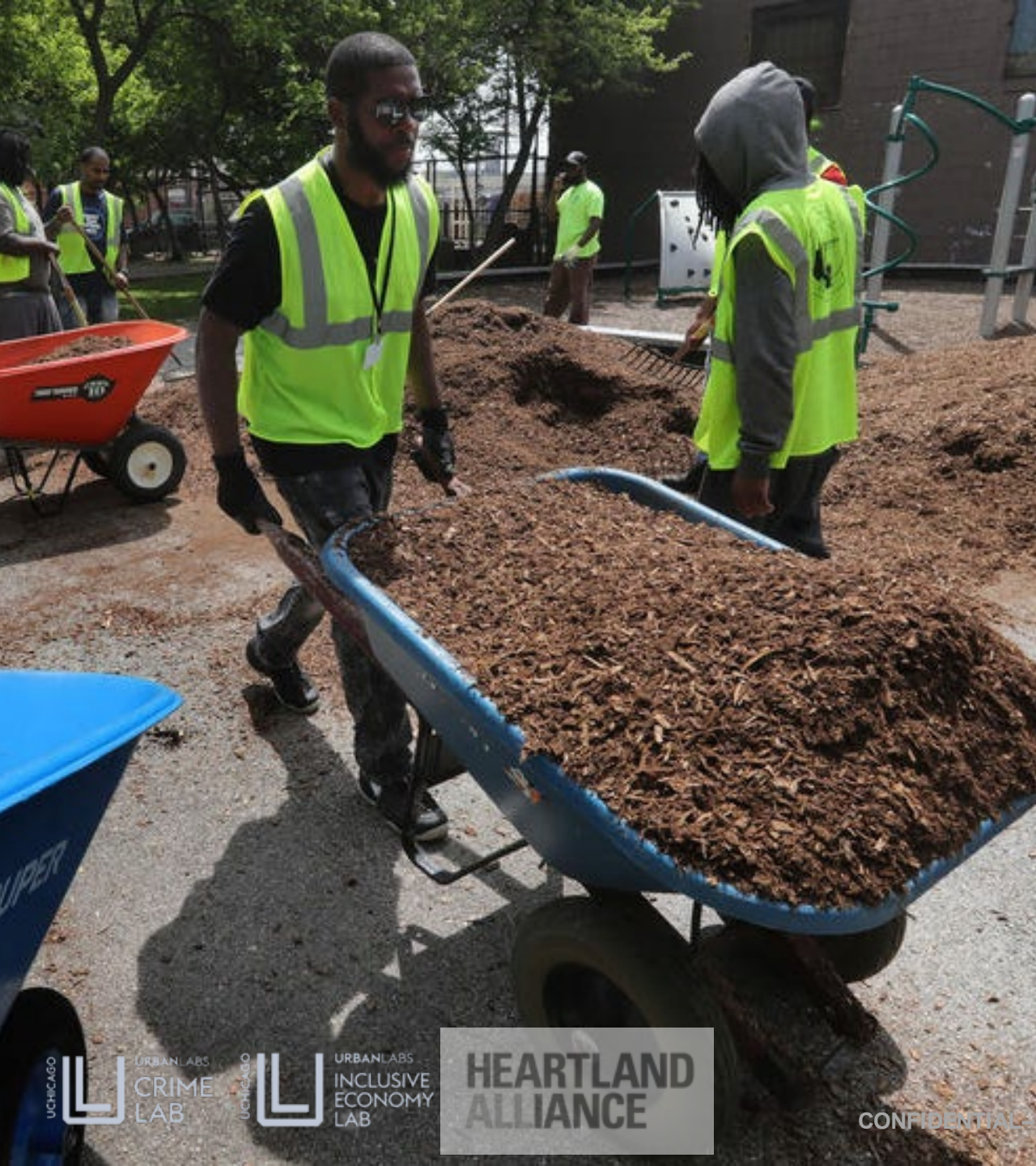
f t SHARE



More Research Could Help Prevent Gun Violence in America

ESSAY





READI born out of researcher-practitioner collaboration



Collaborative discussions between researchers and Heartland Alliance



Review of best available evidence



CBT+ JOBS

Development of basic program model

Leveraging existing evidence to design READI



Recruitment



Outreach & engagement



**18 months of
CBT, jobs, &
services**



**6 months of
follow-up
support**



Three referral pathways to READI



Community Referrals



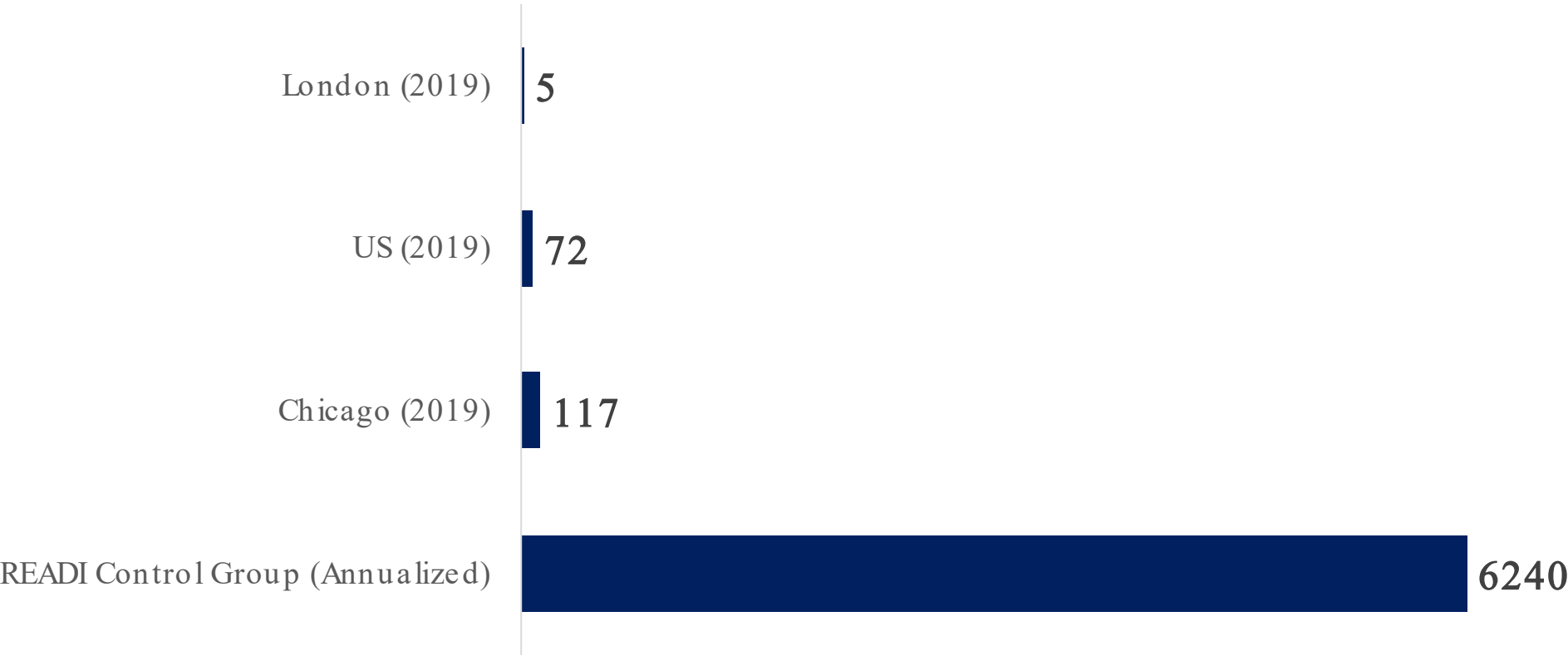
Reentry Referrals



Risk Assessment Referrals

Can we identify who is most involved in gun violence?

Shooting and homicide victimizations per 100,000 people




CONFIDENTIAL- NOT FOR DISTRIBUTION

Source : The Guardian, Sky News, UCR 2019, the Violent Crime Reduction Dashboard, READI participant victimization data for 6/2019 – 2/2021

From PAC to P.O.W.E.R

Participant Advisory Committee to People Organizing for Work,
Education, and Resources

 To help protect your privacy, PowerPoint has blocked automatic download of this picture.

What can we learn along the way?

1

Can we identify who will be at highest risk of gun violence involvement?

2

Can we engage them in an initiative like READI?

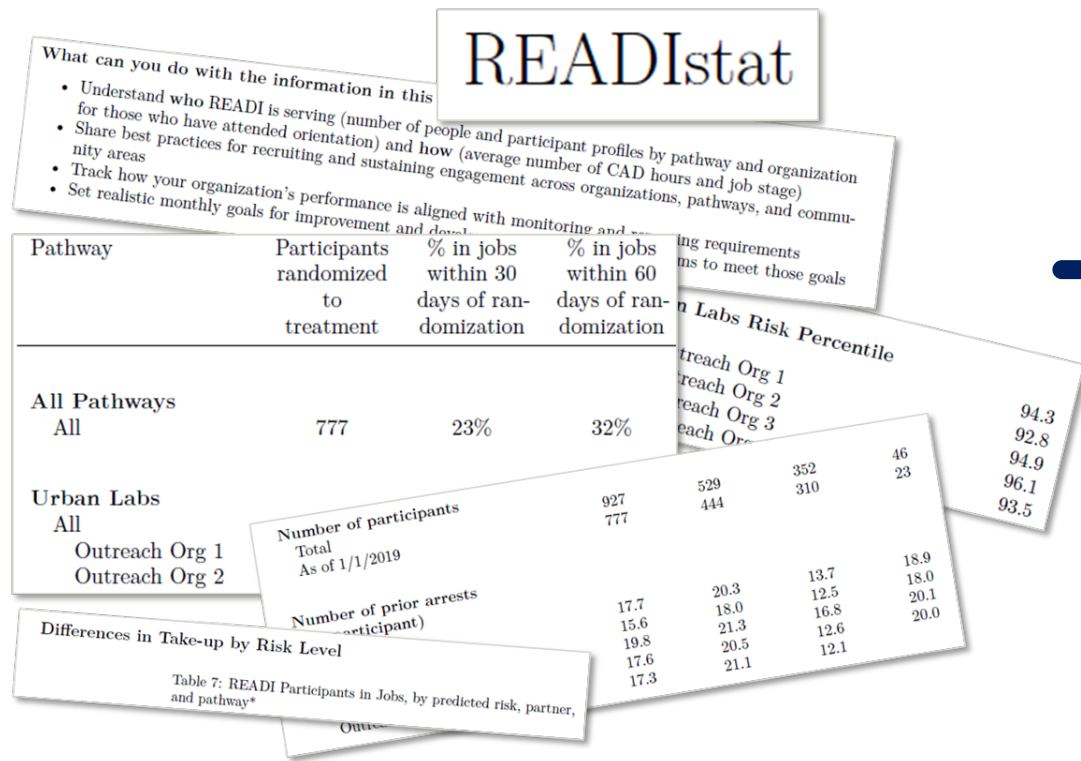
3

Will READI reduce violence involvement?

Data-driven course corrections

Improvements in:

- Credibility
- Take-up and recruitment
- Participant safety
- Participant engagement and morale
- CBT delivery
- Attendance and retention



Insights about the people READI serves

95%

have ever been
arrested

75%

have lost a family
member to gun violence

79%

have been a victim
of a violent crime

58%

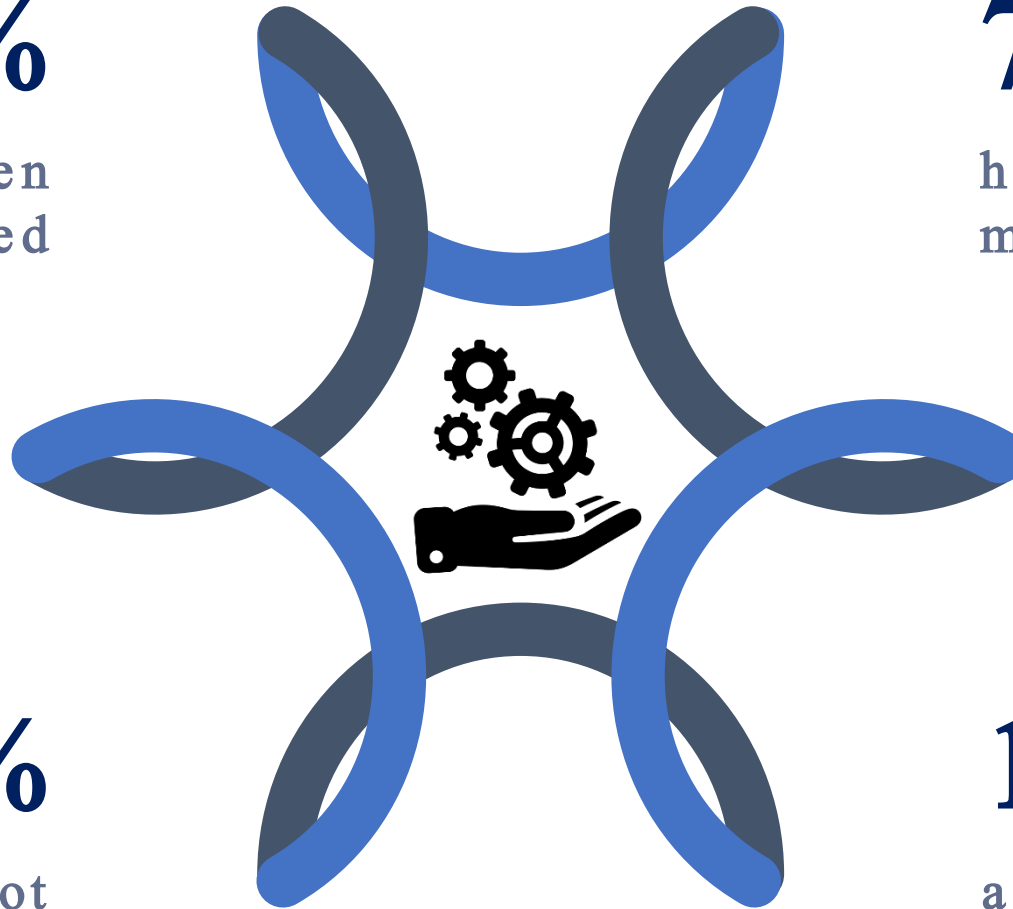
have
children

37%

have ever been shot

14%

are housing insecure





What's left to do?

- Housing challenges
- Fully Free Campaign
- Dissemination to policymakers
- Collective learning within field



What's left to learn?

- Final results?
- Mechanisms behind effects?
- Health impacts?
- Long-term impacts?

Thank
You!

