Brief: Keys to Collaboration between Hospital-based Violence Intervention and Cure Violence programs

The most recent brief released by the Healing Justice Alliance takes an in depth look at the various ways that hospital-based violence intervention programs (HVIPs) and street outreach programs can form collaborations to more effectively interrupt violence and provide those at highest risk of involvement with the necessary support. The brief focuses specifically on the potential for how the two evidence-based models of HVIPs and Cure Violence can work collaboratively to strengthen intervention, prevention, and recovery services to those at highest risk for involvement in violence.

Based on the many years of experience of these programs and insight derived from interviews with several existing HVIP and street outreach program partnerships, the brief examines the compatibility of the two models in addition to the benefits, challenges, and models and guidelines for collaboration. As stated in the brief, “Because there is alignment and overlap between these models, there is a critical opportunity to collaborate across the models, and to provide comprehensive wraparound services that address both upstream violence prevention and downstream violence intervention.” By expanding the network of professionals, mentors, and messengers involved in the prevention and intervention process, programs can build on existing opportunities to respond to the needs of those at highest risk both at the hospital and in the community.

This brief can be used as a tool for programs that already have a partnership between HVIPs and community-based street outreach programs and for those interested in expanding their reach through partnerships to effectively prevent future violence. As is highlighted time and time again, there is a significant need to increase collaboration, communication, and referral between programs effectively working at various points of intervention to provide comprehensive...
2018 Healing Justice Alliance Conference – Registration Now Open

It's that time of the year again! Registration is now open for the 2018 Healing Justice Alliance Conference.

The Healing Justice Alliance is the annual conference of the National Network of Hospital-based Violence Intervention Programs (NNHV/IP), Cure Violence replication sites, and other health-based approaches to ending urban violence and supporting survivors. We invite you to join public officials, gang intervention workers, doctors, nurses, social workers, service providers, violence interrupters, administrators, researchers, philanthropists and community members - all committed to interrupting the cycle of violence and providing healing.

This year, the Healing Justice Alliance Conference is taking place September 13-14, 2018 in Denver, with a pre-conference networking event happening on September 12. General registration pays for the conference on September 13-14, and registrants can participate in pre-conference activities for an additional fee.

This year’s theme is Treating the Symptom, Healing the Root, which will continue to draw on a diverse audience committed to breaking the cycle of violence, promoting healing and moving closer to equity in communities nationwide.

Early Bird Registration until June 26, 2018
MD registration (which includes Continuing Medical Education credits) at $470, and $495 after June 26. General Registration (non-Physician) at $270, and $295 after June 26.

Hotel Reservations
To reserve, click here for $249/night discounted rate. Limited spots available, deadline is Monday, August 13, 2018 by 5pm local time.

To learn more about this year's conference and to stay updated, please visit the new and improved NNHVIP website and REGISTER NOW

Program Spotlight: Seeking Safety, Grand Rapids, MI
Interview with Shelley Seasly, Project Coordinator for Seeking Safety

Briefly introduce your program and the population that it serves:
The Grand Rapids Modified Seeking Safety program provides culturally informed, evidence based trauma support services to young men of color who have experienced trauma and victimization. We modified the original Seeking Safety curriculum so that is developmentally and culturally relevant for African American males.

When designing the Modified Seeking Safety program, the component from other successful programs in Grand Rapids were incorporated into the design such as using persons of lived
The program provides holistic wraparound support services to participants that do not currently exist for this population in Grand Rapids.

Services for program participants include:

- Comprehensive assessment
- 12 week Seeking Safety group-adapted to make it culturally and gender relevant, also considering learning styles of male participants
- Peer Support services (persons of lived experience)
- Support Coordination services (help with basic needs)
- Individual mental health and substance use disorder counseling as requested
- EMDR—an evidence based practice to reprocess trauma for a person that is having symptoms that interfering with life functioning (flashbacks)

What have you found to be the biggest need for this population and how has your program addressed that need?
Safety is a great need for the population we serve. Many of these young men have had multiple traumatic experiences and their lives have been and remain very complicated. Stabilizing their lives so that they can focus on treatment is one of the first goals we focus on. Housing is a huge issue in Grand Rapids but especially for these young men, some of which may have a criminal history and may have a poor history of successful housing experiences. Finding resources in the community that are willing to provide housing to these young men has been a challenge but there has been some success. Wellhouse (an organization to assist with homelessness in the Grand Rapids community) has been one resource. 3:11 has been another housing resource that is particularly focused on young people has also been helpful.

Finding employment is another challenge. Our peer supports have been building relationships in the community which has led to employer’s willingness to give these young men a chance. Hearthside is an employer that is need of people to work and often calls our Peer Supports directly when they need referrals of young men interested in work. We have also worked with another program called Job Start and temp agencies to help with job skills and employment.

What are you proudest of regarding your work through the SMSV grant?
We are extremely proud of the work and dedication that our team puts into supporting the community. The grant has allowed us to provide culturally relevant services to a population that has been disenfranchised. Having staff with lived experience increases our ability to engage with these young men who are typically overlooked by traditional service providers. We feel fortunate that we can provide a service to these young men for the length of the grant, now 5 years, so that over time we can “be there” during different points in their lives where they may need the support.

We are also proud of:

- Hearing about the successes and transformation some young men have made while being in the Seeking Safety program
- The number of young men that we have been able to reach
- Relationships that have been built in the community to work together to assist this demographic
- Determination and passion by the staff to assist these young men

What new relationship or resource have you found to help move your work forward?
The “Wrapping around” of different community members/businesses/organizations has led to assistance from a number of organizations. We have 10 MOUs with different organizations throughout the community. For instance, Job Corp has been providing referrals and also provided a site for groups. We have held 5 groups at Job Corps so far with continued interest. Other sites include Lifequest Ministries, Steepletown and Baxter Community Center.
Schools have a great need and very supportive staff that are very excited to have the Seeking Safety staff working with the young African American young men at their schools, helping to provide the mentoring, assisting with resources and counseling, which may occur on site. Covenant House Academy South East Career Pathways, and more recently Alger Middle School have been some of the school sites. Recently, Juvenile Probation Officers have been referring young men into the Seeking Safety program, recognizing the level of trauma that these young people have experienced and hoping that our involvement will keep their probationers on track and avoiding further legal problems.

Other community partners include:

- Meritage (Wendy’s)-provides meal cards, have done practice interviews with the young men, and have been hiring some of the young men
- Realism is Loyalty- provides emergency needs (hotel room to avert a crisis, boots and/or clothes for a new work opportunity)
- Local churches providing holiday baskets
- Hall Street Deli-providing at cost pizzas for Seeking Safety group
- BP- has provided financial donations to help with basic needs
- Local barbershops providing free haircuts

What is something positive a client or partner said about your work related to the SMSV grant?
Participants, family members, and staff at different sites have expressed gratitude for providing the Seeking Safety program and have noticed a difference the program has made.

What have you learned that you will carry with you as you continue this work?
We have had numerous opportunities to learn from other programs on how they are addressing trauma and other issues for young African American men in their communities. This grant has also provided the Seeking Safety program with learning opportunities to apply what we can to programming. We have also had trainings from professionals working with young African American males to assist us in reaching and maintaining engagement with this population.

COMMUNICATIONS CORNER
Linking Trauma and Racial Justice on Twitter

Trauma and racism are closely linked, but is that message coming through on social media? A Twitter analysis on #blacklivesmatter and childhood trauma from BMSG reveals there are gaps in making the connection between these social justice issues, and provides recommendations to shape the social media conversation.

Here’s one of them: “When you see a Tweet that deals with the impacts of childhood exposure to racism, amplify it. A Retweet will elevate the voices of the user, and commenting on the Retweet allows you to add context or commentary.”

Read our blog for more tips on using twitter to amplify the connection between trauma and

NEXT WEBINAR
Keys to Collaboration between Hospital-based Violence Intervention and Cure Violence Programs

Wed., July 11, 2018 | 3:00 - 4:30 pm [NEXT WEEK!]

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In Case You Missed It

Violent Injury Case Reviews: Creating systems change

Last month’s webinar was an important look at programs that have successfully implemented a Nonfatal Violent Injury Review Panel as a means to increase interagency collaboration and respond to the needs of youth who are violently injured. This model serves as a best practice guide for how systems can work more effectively to prevent violent reinjury and provide a coordinated continuum of care to support youth and their families. You can listen to the recording here. (password is EndViolence1)

“Public health is the collective effort of a society to create the conditions in which people can be healthy; relative to violence, the public health approach has never been fully implemented.”
— Dr. David Satcher, 2015 Kelly Report

Have you educated people on what the full health approach to preventing violence looks like - covering all sectors in your community? Here’s how you can act now:

- Share this infographic with your colleagues
- Share this summary of the health system with people in your community

In the News

- What if we treated violent crime the way we treat Ebola?
  Washington Post

- Louisville must treat violence like a public health issue
  Courier Journal

- CNN Hero Dr. Rob Gore
  CNN

- Health systems teams up with YouTurn to stop violence
  KMTV

- Preventing Gun Violence, One Street at a Time
  NY City Lens

- Treating violence like a disease: Grand Rapids considers new approach
  MLive.com

- Treat gun violence like public health issue
  Kent ISD School Board says
  MLive

- How Living in Violent Communities Can Affect Children’s Behavior
  The Independent

- Doctors come together to address gun violence as public health issue
  My Northwest

- 10 Modest Steps to Cut Gun Violence
  New York Times

Trauma-Informed Care Corner

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Our work in violence intervention brings us into connection with some of the basic needs and longings of human beings. For example, there is the need for safety and the creation of a future that maintains that safety and makes room for reaching beyond safe base to connect youth with their goals and longings. A recent presentation by Dr. Howard C. Stevenson, University of Pennsylvania professor and researcher on negotiating racial conflicts using racial literacy skills, used an African proverb to capture and reflect the difference between belonging and fitting in. The proverb goes, "The lion's story will never be known as long as the hunter is the one to tell it." He distinguished between "belonging"—an acceptance of MY difference and confidence in my competence and "fitting in"—dependence on OTHERS' acceptance of me, my difference, my competence. He emphasized that belonging is about creating your own story and that fitting in often involves shape shifting to fit into another's story of me. He concluded that belonging is the lion’s story while fitting in is the hunter’s story. Our violence prevention and intervention work is enriched by an understanding of the longing youth have for belonging and by expecting ourselves to think deeply about the ways we might help them fill their longings without losing themselves to others' definitions of who they are. For our mostly brown and black youth that is a complex endeavor as the culture is filled with narratives about who they are predominantly told by “the hunter.” Dr. Stevenson advocates for going beyond racial conversations, critical though they are to understanding and appreciating difference, to developing a “racial literacy” that not only helps youth develop a sense of belonging but promotes healing of the still present racial divides and discrimination via listening to the lion tell the story.

For more information on this topic:

Funding Opportunities

**JRM Construction Management – New York**

2018 Community Impact Grants

**Amount:** up to $20,000  
**Deadline:** August 31, 2018

To be eligible, projects must take place in New York City, Westchester County, or Long Island, New York. Proposals from national organizations will be considered as long as they have a local presence. Through the program, JRM will award four grants of up to $20,000 each to nonprofit organizations working in one of three focus areas: health, education and/or youth services, or housing and food security. The Health category supports organizations or projects dedicated to supporting the physical, mental, and social well-being of individuals and communities. Grants may be used for program/project support or for general operating support.

**The Laura and John Arnold Foundation**

Demonstrating the Power of Evidence-Based Programs to “Move the Needle” on Major U.S. Social Problems

**Amount:** approx. $50,000 to $500,000  
**Deadline:** Rolling

The Laura and John Arnold Foundation’s (LJAF) Moving the Needle initiative seeks to spur expanded implementation of such programs in order to make significant headway against U.S. social problems. Specifically, the initiative is designed to encourage state or local jurisdictions, or other entities, to:

(i) Adopt social programs shown in well-conducted randomized controlled trials (RCTs) to produce large, sustained effects on important life outcomes;

(ii) Implement these programs on a sizable scale with close adherence to their key features; and

(iii) Determine, through a replication RCT, whether the large effects found in prior research are successfully reproduced so as to move the needle on important social problems.

**Research Desk**

depression/anxiety symptom trajectories. Individuals with concurrently high-alcohol use and depression/anxiety symptom trajectories reported that the most delinquent peer affiliations, and had the highest rates of severe violence over time.

We analyzed data from 599 drug-using (primarily marijuana) youth ages 14-24 (349 assault-injured) recruited from December 2009 to September 2011 into a 24-month longitudinal study at a Level-1 ED in Flint, Michigan. Youth self-reported substance use, depression and anxiety symptoms, peer/parental behaviors, and severe violence involvement at baseline and four biannual follow-up assessments. Bivariate latent trajectory models identified homogeneous groups with similar trajectories on alcohol use and anxiety/depression symptoms; we compared baseline characteristics of each trajectory group and concurrent trajectories of severe violence (victimization and aggression). Our model identified five trajectory groups: Low drinking/No symptoms (LN; 10.4%; n = 62), No drinking/Moderate symptoms (NM; 15.7%; n = 94), Low drinking/Moderate symptoms (LM; 30.2%; n = 181), Low drinking/High symptoms (LH; 16.4%; n = 98) and High drinking/High symptoms (HH; 27.5%; n = 164). The HH group was characterized by more delinquent peer associations, and rates of community violence were higher among the high symptom groups. The HH group had the highest severe violence perpetration and victimization rates across time points; the LH group had similar violence rates to the LM and NM groups and the LN group had the lowest violence rates across time. Among drug-using youth, alcohol use interventions could benefit from a focus on peer influences, and those with a joint focus on violence involvement may be improved via inclusion of content related to mental health and community violence exposure.


In the past, trauma centers have almost exclusively focused on caring for patients who suffer from physical trauma resulting from violence. However, as clinicians' perspectives on violence shift, violence prevention and intervention have been increasingly recognized as integral aspects of trauma care. Hospital-based violence intervention programs are an emerging strategy for ending the cycle of violence by focusing efforts in the trauma center context. These programs, with their multipronged, community-based approach, have shown great potential in reducing trauma recidivism by leveraging the acute experience of violence as an opportunity to introduce services and assess risk of re-injury. In this article, we explore the evolving role of trauma centers and consider their institutional duty to address violence broadly, including prevention.

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