



LISC

Implementing Outreach-Based Community Violence Intervention Programs

OPERATIONAL NEEDS AND
POLICY RECOMMENDATIONS

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Executive Summary

Introduction

Community violence, or interpersonal violence between non-intimate partners that occurs in public places, is rooted in poverty and trauma, which, particularly in the United States, are undergirded by racial capitalism and white supremacy. Community-based outreach has been well documented as an integral strategy for reaching historically marginalized and disenfranchised populations in multiple fields. Community-based violence intervention (CVI) approaches that utilize outreach workers—professionals who identify and engage youth and adults who have a high risk of violence involvement—have the potential to quell violence in cities around the country. Indeed, the Biden-Harris Administration has not only highlighted CVI as an important element of community safety, but it has also committed federal dollars to CVI programs.

This amplification of CVI as a promising violence-reduction approach has also led to greater scrutiny of the various challenges these initiatives face in their implementation and operation, capacity, staffing needs, and the contexts for which they are employed. Without a more precise grasp of the elements that make these approaches effective and the challenges that must be mitigated for successful implementation and operation, outreach-based violence intervention programs, regardless of the intent or passion of the staff, may fail to achieve their goal of significantly reducing violence in their communities. However, if properly funded, supported, implemented, and evaluated, CVI has the potential to expand the paradigm of community safety without furthering over-reliance on law enforcement and the criminal legal system. This report seeks to fill gaps in our understanding of how best to implement, support, and sustain outreach-based CVI efforts by synthesizing existing literature and drawing on interviews with over a dozen CVI program leaders with deep expertise in the field.

Outreach-Based CVI Program Models and Their Needs


The majority of outreach-based CVI programs today are individualized interventions that operate as independent community-based organizations. They require *identifying individuals* who are most likely to engage in violence, through community contacts, law enforcement, research, or voluntary participation, and then getting proximate to these individuals, building relationships and relentlessly pursuing connection in order to link them to resources, such as case management, therapy, professional development, or substance abuse treatment that will allow them to make different choices.

Some of these organizations use the *health care system*, rather than the community, as an entry point to locate those who are most affected by violence and who may be caught in violent cycles.

Some programs aim to address *family dynamics* as part of reducing violence and supporting individuals. Involving family alongside individuals allows programs to build trust to intervene or influence harmful family dynamics, including intimate partner violence. Other organizations serve to mediate violence at the *neighborhood level*. They may aim to reduce ongoing conflict across neighborhoods by bringing residents into discussions together, leading to non-aggression or peace agreements. When conflict is brewing, these organizations also may aim to find ways to interrupt or act as first responders.

Outreach-based CVI programs, whether operating at the individual, family, or neighborhood level, are grounded in the commitment to transform and save the lives they touch. The complex nature of violence makes intervention work dangerous and incredibly challenging to manage. Challenges include *identifying outreach workers* with the skills, background, and lived experiences to have credibility and influence in communities, and the ability to maneuver safely and with integrity through various neighborhoods and with key actors at the center of violent conflict. *Developing a comprehensive team* with various levels and modes of experience can also be challenging for programs. Trauma is ubiquitous among the program participants, the staff, and outreach workers. Thus CVI programs require *training and support around trauma-informed care* to address the trauma of those still engaged in violence, alongside the *residual, vicarious, and ongoing* traumas that outreach workers experience in their work with participants and their families.

At the broader level of the community, CVI programs must *build relationships and awareness with community service providers and organizations*, including schools, faith-based organizations, and other support programs. Program participants benefit greatly when warm handoffs are made to other organizations that can provide ready access to the needed services and support; one CVI program interviewee noted the importance of connecting with organizations that will give participants the “red carpet treatment,” with “no bureaucracy, no bending over backwards to deserve services.” Service partnerships may include culturally competent therapy and grief



Community-based Violence Intervention (CVI) strategies have promising potential to help quell violence and address public health and safety around the country. But without a clearer grasp of the elements that help make these strategies successful and the challenges that must be mitigated for successful implementation, and operation, they may fail to achieve the reductions in violence they desire.

services, medical facilities, legal aid, job training and placement programs, providers of basic needs such as housing and income support, parenting and fatherhood programs, and schools and adult education providers.

All CVI experts interviewed for this project recognized the necessity of *co-existence with law enforcement*, but in varying capacities. They agreed that there is no way for outreach-based CVI programs to operate in a vacuum that remains entirely outside of law enforcement, because the involvement of their participants with policing and the criminal legal system is too great. However, every expert made it clear that, for obvious safety reasons, outreach workers must maintain an evident and strict distance from police. At higher organizational levels, establishing trusted relationships with law enforcement is extremely challenging and takes patience and consistent effort. It is especially difficult to ensure that law enforcement brass unequivocally sets the tone with the rank and file that the safety of CVI personnel and the benefits of CVI to

community safety are important to the police agency. Finally, whether a CVI program is managed by a city agency or operates independently, experts agree that *city-level buy-in* is crucial for the organization's sustainability.

At the organizational level, it is also necessary to provide *training and support to the supervisors and managers* of outreach-based CVI programs on topics such as project management, financial recordkeeping, data collection, confidentiality, duty-to-report regulations, and the mental health support needed to facilitate workers' success. Because trust and credibility are critical not only for external relationships with individuals potentially engaged in violence, but also for internal team members, *start-ups* should emphasize trust building among all CVI staff and promote regular team building over time.

As with any profession, the *pay and benefits* offered by CVI organizations are key elements for the recruitment and retention of their workers. Unfortunately, nearly all CVI personnel are underpaid and do not receive adequate benefits for their work toward community safety. This problem is especially acute with outreach workers, given the precarious nature of their work and the value added back to the community by their interventions. Because outreach workers may have limited or no prior formal work experience, *training and skill development* in areas such as safety planning, behavioral modification, motivational interviewing, de-escalation and dispute-resolution techniques, and recordkeeping is essential. Further, the physical safety of the outreach workers is an underappreciated yet critically important aspect of this training. To support individuals and organizations, interviewees stressed that there is high demand for more providers of training and technical assistance (TTA), particularly providers with years of expertise as outreach workers in violence intervention and prevention. These forms of training and skill building, alongside networking and other mentoring opportunities, are crucial to supporting outreach workers' professional growth.

Funding was a major challenge cited by multiple experts, especially the precarity of year-to-year funding, and the time and energy demanded by constant grant writing. *Tracking success* through data collection is necessary for programs to maintain funding and guide their internal operations. However, using data to track success is a complicated task that requires additional funding and training not typically provided through most service grants. *Program evaluation* can help assess and communicate a program's success and may employ qualitative data as an undervalued strategy to demonstrate the transformational life changes that can occur through CVI outreach. Co-creation with CVI personnel of metrics and data-collection efforts that align with a program's theory of change and that directly address barriers to documentation are key to successfully tracking participant and program success, as well as the program's impacts on community-level outcomes of quality of life and wellbeing.

Recommendations

The following stakeholder-specific recommendations are offered for those who wish to begin, augment, and/or expand outreach-based CVI program operation and implementation:

All Stakeholders:

- Approach CVI with the intention of building and sustaining it as an essential element of safety and opportunity.
- Conceptualize CVI as a centerpiece of civilian infrastructure that can shoulder some of the burdens now left almost entirely to law enforcement agencies.
- Leverage the expertise and lessons learned of outreach workers and leaders in cities around the country who have been doing outreach and CVI program implementation for years.
- Develop and strengthen the infrastructure to support the outreach-based CVI workforce, including attention to their physical, mental, and psychological wellbeing.
- Build connections and capacities of community-based organizations and providers that offer specialized resources and services that can disrupt cycles of violence.

Government Funders and Policymakers:

- Make CVI funding a permanent line item for the jurisdiction's public safety budget, demonstrating a commitment to CVI as an integral component of community safety and a complement to traditional public safety approaches.
- Establish a sustainable funding stream for CVI, such as through tax revenue.
- Extend grant funding periods for CVI programs to 3-5 years, including at least 12 months for planning and relationship building prior to implementation.
- Facilitate creation of memorandums of understanding across city agencies to increase data sharing that directs CVI activities based on estimated number of individuals at risk of violence involvement and known needs within that population.
- Base programmatic budget estimates on data—expected number of people to be served; number of outreach workers, case managers, supervisors, and additional personnel to serve that number; catchment area coverage; and costs to ensure living wages and comprehensive benefits of CVI professionals.
- Provide funding for the development of best practices in worker wellness and mental health support.
- Increase the time period between funding solicitation announcements and application deadlines to allow programs more time to identify grant writers and administrative support.

- Restructure contracting processes to ensure advance payments for services, rather than relying on reimbursement, given that smaller CVI programs may not have the start-up resources to pay program personnel and partner organizations while awaiting grant funds.
- Fund process, outcome, and impact evaluations and cost-benefit analyses of CVI approaches that produce new measures of programmatic success.
- Incentivize authentic collaborations between research partners and CVI organizations throughout program design and implementation steps.
- Direct law enforcement partners to account for CVI as a necessary public safety component.
- Communicate expectations from the highest levels of government that law enforcement is to coordinate with CVI leadership on high-level strategy and create space for CVI to operate safely and with integrity.
- Align expectations of anticipated program outcomes with structural and environmental realities.
- Increase public awareness of the importance of CVI approaches via communications and media campaigns, and highlight CVI successes.

Private Funders:

- Extend grant funding periods for CVI programs to 3-5 years, including at least 12 months for planning and relationship building prior to implementation.
- Provide funding to pay for emergency expenses such as relocation assistance, intensive mental-health or therapeutic treatment, or basic needs.
- Utilize more flexible funding requirements to support financial needs beyond standard programmatic operation expenses, such as for data collection and infrastructure, convening spaces, transformative travel and exposure visits, administrative support, worker wellness benefits, and increased pay.
- Invest in CVI innovation, including demonstration and pilot projects that apply experiential knowledge to new programmatic ideas, including models for young girls, women, LGBTQ+ individuals, and immigrants.
- Fund process, outcome, and impact evaluations and cost-benefit analyses of CVI approaches that produce new measures of programmatic success.
- Fund internal capacity building of CVI organizations, community partners, and service providers to advance stronger CVI collaborations between outreach providers and other forms of social services.
- Facilitate development of both recruitment strategies for new CVI practitioners and professional growth opportunities for existing personnel, via initiatives such as train-the-trainer programs and continuing-education pathways that help build workers' transferable skills as they gain experience in violence intervention, conflict mediation, case management, mentoring, life coaching, community health work, and peer counseling.
- Invest in innovative strategies in harm reduction related to violence intervention, such as those that offer opportunities to individuals not fully ready to commit to total

lifestyle transformation as a way to draw them in and allow them to see themselves in a safer environment with a better future.

Community Partners:

- Recognize the importance of relationship building, trust, and transparency in developing partnerships with CVI organizations.
- Institute trauma-informed training for personnel that collaborate with CVI programs to help them better understand how to support the population.
- Jointly seek funding with CVI programs to secure resources that can build organizational capacity and infrastructure to expedite service provisions for program participants in need.
- Explore opportunities to responsibly share data and information in a way that allows for better integration of care across service providers.
- Hold elected officials and community leaders accountable for investing in community empowerment and development efforts beyond CVI programming.
- When possible, act as intermediaries, supporting financial administrative needs for emerging CVI programs or service providers that do not have the internal capacity to manage grant applications or requirements on their own.
- Determine best practices to further engagement, build relationships, and develop effective pathways between CVI programs and schools, afterschool programs, and youth-development organizations to help intervene early with emerging youth who have or may develop elevated risk of violence involvement.
- Implement hospital protocols and/or hospital-based violence intervention programs that allow CVI professionals to gain expedited access to violently injured patients as they arrive at the emergency room or trauma bay, in order to quickly address concerns of retaliation and begin assisting with immediate needs related to safety and health.
- Advocate for CVI programs and partnerships to help maintain buy-in when local leadership changes occur and to sustain political will and support.

CVI Program Leadership:

- Prioritize the physical and mental safety of all program personnel.
- Demand sufficient training and team-building time prior to implementation, living-wage pay, comprehensive benefits, adequate paid time off, and therapeutic supports for all workers, especially outreach staff.
- Use data to drive hiring needs, recruitment efforts, and program partnerships, including information from law enforcement, community partners, and residents.
- Diversify CVI staff to meet the needs and experiences of program participants and personnel.
- Develop supervisors and managers through leadership trainings and professional networking opportunities.
- Normalize mental health care and healing in the workplace.

- Plan team-building activities and have regular relationship-building check-ins with personnel for mentorship, coaching, and addressing performance concerns.
- Establish communication and procedural policies that reflect trust, transparency, and consistency as values paramount to the organization's success.
- Discuss data-collection and program-tracking needs candidly with workers, directly addressing concerns about confidentiality, expectations, and support for documentation.
- Develop plans for continued education and professional development for workers.
- Create staffing models that properly account for paid/sick time off and personal emergencies.
- Partner with TTA providers with expertise in CVI and establish ongoing TTA plans versus one-time trainings.
- Seek champions of the CVI approach within City Hall, county agencies, and law enforcement leadership.
- Foster and promote non-antagonistic interactions between CVI personnel and law enforcement.
- Celebrate your CVI personnel and cultivate an environment of support and appreciation.

Researchers and Evaluators:

- Spend time building authentic relationships with and listening to experiences of program personnel at all levels.
- When possible, engage programs early in their development about research and evaluation collaborations.
- Apply principles of community-based participatory research and trauma-informed research when engaging with CVI program leaders, outreach workers and personnel, program participants, and community partners.
- Co-produce with program leaders metrics of participant progress and program success that go beyond crime statistics, that focus on harm reduction, and that prioritize community health and wellbeing.
- Conduct thoughtful evaluation, capturing program nuances and variations in implementation and execution of the model.
- Facilitate the creation of theories of change and logic models across the varied CVI program models and approaches

Community violence, or interpersonal violence between non-intimate partners that occurs in public places, is rooted in poverty and trauma, which, particularly in the United States, are in turn rooted in racial capitalism and white supremacy.



Introduction

Community-based violence intervention (CVI) strategies that utilize professional outreach workers to engage youth and adults who are at high risk of violence involvement have promising potential to help quell violence and address public health and safety in cities around the country.¹ Their potential value was made even clearer in 2020, when community violence intervention personnel were recognized by city officials and law enforcement leaders alike as being critical partners in violence reduction after the startling spikes in community violence that have coincided with the COVID-19 pandemic.² Outreach workers around the country reported working overtime to not only respond to violent incidents and potentially lethal conflicts, but also provide personal protective equipment, rumor control about COVID-19's severity and spread, and basic assistance accessing food, water, household supplies, and shelter for individuals and families who were cut off from traditional structures—community centers and nonprofit organizations, health clinics, social service providers, and schools—that provide health information, social and financial support, and essential resources.³

Since 2020 we have continued to experience myriad economic, social, and political challenges in America, including a sustained increase in interpersonal violence, the nationwide protests following George Floyd's murder that sparked renewed demands to overhaul policing and criminal legal system accountability, and prolonged hardships due to the pandemic. These combined factors have led to heightened interest and enthusiasm for CVI initiatives. Indeed, the Biden-Harris administration has not only highlighted CVI as an important element of community safety, but also committed federal dollars towards investing in CVI programs. The amplification of CVI as a promising violence reduction approach has also led to greater scrutiny of the various challenges these initiatives face related to their implementation and operation, capacity, staffing needs, and the contexts for which they are employed. Without a clearer grasp of the elements that help make these strategies successful and the challenges that must be mitigated for successful implementation and operation, outreach-based violence intervention strategies, regardless of intent or passion of the staff, may fail to achieve the reductions in violence they desire.

Project Details

This report seeks to fill gaps in our understanding of how best to implement, support, and sustain outreach-based CVI efforts by synthesizing existing literature and deep expertise from the field. The research team, led by Dr. Shani Buggs at the University of California, Davis, worked with LISC to develop a research strategy to better understand challenges related to outreach-based CVI

program or initiative implementation, integration, and key components of support. To achieve the project objectives, the research team synthesized existing literature on outreach-based CVI programs and then conducted a total of seventeen (17) semi-structured interviews with fifteen (15) outreach-based CVI program managers, directors, and city officials responsible for initiative oversight in cities around the United States. Project interviewees were identified through Dr. Buggs's professional relationships with established violence intervention and prevention leaders and experts. The interviewees agreed to speak candidly about their experiences with the understanding that their responses would be aggregated and presented anonymously to anyone outside of the team. While the research team strongly believes in properly attributing credit to the expertise of CVI leaders, without whom this project would not have been completed, it was critical that this project accurately reflect challenges and realities of outreach-based CVI, rather than name individuals who are actively navigating those challenges in the field.

Following verbal consent, all interviews were conducted and audio-recorded via Zoom due to the COVID-19 pandemic. The interviews lasted an average of 90 minutes, and participants were given \$100 Visa gift cards as compensation for their time and willingness to share their expertise. Some participants could not accept monetary contributions but could donate their gift card with approval from their organization or office. Funding for interview compensation was provided by a private funder. The interviews were iterative, building on knowledge and experiences shared during the early stages of data collection and adapting as saturation was achieved on various topics. The research team utilized standard procedures for open and thematic coding of the interview transcripts. All coding and analysis were completed using Dedoose data analysis software. This project was deemed "exempt" by the University of California, Davis, Institutional Review Board Administration.

The 15 interviewees for this project are leaders or executive directors of outreach-based community violence intervention and prevention programs and initiatives in eight cities across the United States. The cities in which the programs operate have populations of at least 100,000. The interviewees reported an average of 20.1 years of experience in community violence intervention and prevention, ranging from 8 to 33 years. Budgets of their programs range from \$500,000 to \$3,000,000 per year. Some of the programs have been in operation for only a few years; others have been functioning for over a decade. The extent of knowledge and experience reflected in this report underscores the deep expertise that exists in the field of community violence intervention. It also emphasizes the value of learning from those with years of firsthand experience practicing violence intervention and navigating its challenges and successes.

Background: Community Violence and Outreach-Based Community Violence Intervention

Community violence, or interpersonal violence between non-intimate partners that occurs in public places, is rooted in poverty and trauma, which, particularly in the United States, are in turn rooted in racial capitalism and white supremacy. Residentially and economically segregated communities—particularly those in urban areas and whose residents are predominantly poor and Black or Latino/a/x—have historically and contemporarily had limited access to social goods and capital due to structural neglect, disinvestment, hostility, and indifference.⁴ Simultaneously, these communities live with extreme and relentless pressure of concentrated policing and incarceration. The dual transgressions of abandonment and hyper-discipline have reproduced and contained trauma and scarcity among these populations, limiting communities' ability to participate in mainstream economies and creating criminalized parallel economies.⁵ Individuals and communities most likely to be implicated in violence are often unable to access stability and opportunity in society in accepted ways—for example, through quality schools or employment that provides livable wages for individuals and families. Research has shown that communities that disproportionately bear the burden of firearm violence in the United States are also those most residentially and economically segregated, and that this disparity has only widened since the COVID-19 pandemic.

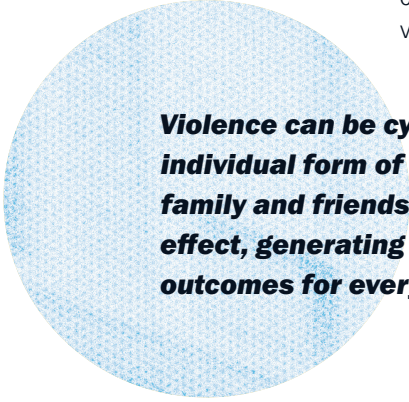
The confluence of these factors captures communities in cyclical, generational trauma. For instance, a large segment of communities incarcerated or killed in the 1980s and 1990s during the crack epidemic left a void where children were taken from their homes and separated from their parents while leaving entire communities traumatized. In many cases, social groups—some of which are known as “gangs,” “crews,” or “cliques”—filled in as social support systems for young people in these communities fractured by policing and surveillance, incarceration, and premature death from poverty, substance abuse, violence, and other poor health outcomes.⁶ These generational cycles, and the limited options that youth and young adults must successfully navigate and escape, have given way to harmful and trauma-inducing behavioral norms that can further perpetuate physical, emotional, and psychological injury.

“So, how are you able to address [gun violence], but also address the trauma that is associated with growing up in these communities, with incarceration, with being gang-involved, with parents that weren’t around? How do you address that trauma as well? I think that part of it is not to impose mainstream values on a parallel system and world that has been created in response to the neglect. This structural neglect and racism has existed in this country for over 500 years.”

INTERVIEWEE 7

In communities vulnerable to such relentless violence and trauma, the risk of violence exposure—whether through direct victimization or offending, witnessing violence, hearing gunshots, or learning of violent injury or death of a loved one, peer, neighbor, or community member—is disturbingly high. Violence can be cyclical and retaliatory and can traverse any individual form of conflict. For each vulnerable individual, there are family and friends who are also vulnerable; violence has a cascading effect, generating trauma that can lead to harmful or negative outcomes for everyone exposed to it. Violence also takes on a nuanced, gendered dimension. Notions of manhood and (toxic) masculinity, often centering around ideas of power and respect among youth and young adults with few perceived alternative avenues to express autonomy and control over their circumstances, can fuel violence in already precarious social situations.⁷ The easy access to firearms in America, especially in communities already suffering from violence exposure, multiple forms of complex traumas, and limited ability to meaningfully change their environments, further exacerbates and escalates feuds to lethal levels. Additionally, the historic rise in firearm purchases that coincided with the COVID-19 pandemic has possibly contributed to the rise in community firearm violence; prior research has shown that even marginal increases in handgun prevalence may be positively associated with increases in firearm injury.⁸

None of these truths excuse the perpetration of violence against other human beings, nor do they reduce the devastation that is felt by survivors, loved ones, and the greater community when violence occurs. Yet these conditions must be acknowledged, and the violence contextualized, to implement solutions that can notably and sustainably disrupt the cycles of violence.



Violence can be cyclical and retaliatory and can traverse any individual form of conflict. For each vulnerable individual, there are family and friends who are also vulnerable; violence has a cascading effect, generating trauma that can lead to harmful or negative outcomes for everyone exposed to it.

“Right now, it’s these ongoing conflicts between these youth organizations. I won’t use the term ‘gang.’ They’re not—they may have some very distant ties to some of the street organizations our generation is familiar with, but these are more people who have organized around pain and grief and rage. It’s not even about money, territory. It literally is rage and pain.”

INTERVIEWEE 8

Even within contexts of relentless and premature death, disenfranchised communities have demonstrated autonomy, inventiveness, and resourcefulness in creating their own life-sustaining systems.⁹ It is within these contexts that community-based violence intervention efforts that utilize outreach workers have been developed.


Community-based outreach is well documented as an integral approach to understanding and addressing barriers to health and health care for historically marginalized and disenfranchised populations, including pregnant teens, people living with AIDS and HIV, individuals with substance use disorders, and those involved in delinquent behavior.¹⁰ Though perhaps not explicitly touted as social support strategies, community-based outreach efforts operate with the understanding that individuals who are at high risk for negative health outcomes, who are marginalized and “hard to reach,” are also those most chronically alienated or disconnected

from, and thus distrustful of, traditional structures of support, safety, and health.^{11,12} Therefore, building relationships with those individuals can provide a bridge for identifying and addressing needs in order to help alter unhealthy or negative life trajectories. In this sense, the framing and understanding of violence as a public health issue that results in poor health outcomes makes violence intervention ripe for similar outreach and health-focused engagement. Indeed, for those at the highest risk for violence involvement, community-based outreach has the potential to serve as both an immediate and longer-term mechanism for desistance from violence and support for lifestyle transformation.

The first documented attempts in the United States to use community-based outreach to engage disconnected youth date back to the 1800s, and in the 1940s and 1950s gang intervention and prevention initiatives around the country hired outreach workers to connect with gang members and link them to existing social and educational services.^{13,14,15} Black churches and community-based organizations have long conducted outreach activities to address unmet needs for those most vulnerable to violence and other negative health outcomes.^{16,17,18} In the past thirty years, numerous CVI strategies—particularly those that prioritize social and behavioral interventions—have incorporated the use of outreach workers to identify and engage with individuals at high risk for violence involvement.¹⁹ For example, the Cure Violence program,²⁰ developed in the 1990s in Chicago, and Advance Peace,²¹ a program born out of a 2010 violence prevention initiative in the Richmond, CA, Office of Neighborhood Safety, hire “street outreach workers” or “neighborhood change agents,” respectively, to develop nurturing relationships with individuals at high risk for producing or being victims of violence. Outreach workers at the United Teen Equality Center (UTEC) in Lowell, MA, similarly strive to build relationships with youth at risk for group-related violence.²² The Urban Peace Institute’s Urban Peace Academy provides specialized training for community intervention workers to respond to incidents of violence in Los Angeles, and trains gang intervention workers nationwide.²³ Other programs or initiatives, including Roca, the Institute for Nonviolence Chicago, the City of Oakland’s Department of Violence Prevention, and LIFE Camp, Inc., employ outreach workers by various names as part of their violence prevention efforts.^{24,25,26,27}

There has been limited peer-reviewed evaluation research on outreach-based CVI’s impact on violence prevention. The existing research has found it to be a promising approach, though not without its challenges. For example, the Cure Violence intervention, which has been replicated in





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dozens of cities around the United States, has been found to reduce youths' willingness to turn to violence to resolve conflict and increase confidence in the community in its collective ability to reduce gun violence.^{28,29} Researchers have also found that the program increased preferences for nonviolent responses to interpersonal conflicts.³⁰ However, studies of Cure Violence's impact on gun violence outcomes, while generally positive, have produced varied estimates of program effect across sites—sometimes within the same city—with some studies reporting null or negative results.^{31,32,33,34} The Operation Peacemaker Fellowship in Richmond, CA, from which the Advance Peace model was created, was associated with statistically significant reductions in firearm violence, but the evaluators attributed a smaller yet nontrivial increase in non-firearm violence to the model as well.³⁵ An evaluation of Advance Peace in Sacramento found that the program was associated with mean gun violence incident decreases ranging from -8% to -29% in the four communities where the program was implemented, compared with an overall +9% increase in gun violence incidents in non-Advance Peace zones, but interrupted time series analyses did not find those reductions to be statistically significant.³⁶

The uneven findings from existing evaluation studies should not lead to the conclusion that community-based outreach is an ineffective approach to violence intervention. Instead, they point to numerous obstacles that can undermine the potential impacts of outreach-based CVI. CVI programs are usually not implemented randomly—they are designed to engage the individuals at highest risk of violence involvement in communities where violence and need are already high. Therefore, evaluations that use randomized study designs are usually not appropriate or possible, and generating appropriate comparison groups can be difficult. Relatively few program evaluations have been completed; CVI programs have historically been severely underfunded, and there has been very limited additional funding made available for thoughtful program evaluation. Furthermore, many of the program evaluations to date, while rightly considering the interventions' impacts on violence, do not account for the programs' theories of change and the ways in which participants and program personnel experience or visualize progress or success. These approaches intentionally engage individuals who are the hardest to reach and most disconnected from traditional institutions and systems of support. These individuals face difficult and uphill battles towards lifestyle transformation, and their journeys are often nonlinear and marked by setbacks as well as successes; thus, they require substantial time and resource commitment, which is commonly questioned and viewed with suspicion.³⁷ There are usually significant challenges to securing adequate resources and political support for the strategies.^{38,39} Programs may also encounter difficulties in identifying the appropriate personnel for hire—individuals who are credible to the population, healed from their own experiences of trauma, able to cope with the relentless trauma that comes with working in community violence intervention, and unwilling to engage in behaviors that could potentially undermine their own or the program's credibility with any stakeholders, including clients, police, community-based organizations, or the community at large. Knowing how existing programs have confronted and managed these and other threats to success will substantially increase future effectiveness of these approaches.

CVI Program Engagement with Community Stakeholders

Community Relationships and Partnerships

CVI organizations are immersed in and reliant upon the communities they serve. Involving the community to help build the programs' brand, staff teams, establish trust, and demonstrate investment in the community are all crucial to the success of CVI efforts. Informal community networks that work in tandem with the organizations are a central part of CVI program effectiveness; their expertise, perspectives, and connections are invaluable. Engaging community members, whether as concerned neighbors or service providers, creates a critical flow of information and support around potential violent activity and possible points of intervention and prevention. Through these community partnerships, the legitimacy and credibility of CVI organizations is strengthened.

CVI programs must build connections and awareness with community service providers and organizations, including schools, faith-based organizations, and support programs. Outreach workers may also get to know people by walking the neighborhood to converse with residents, visit small businesses, and pass out flyers. Participation in neighborhood activities such as block parties, youth sporting events, or summer programs such as Summer Night Lights are seen as effective ways of establishing visibility and credibility between workers, their programs, and the communities they serve. Other approaches to relationship building can include distributing health care packages, food, and other basic necessities, while meeting people at their houses or in the neighborhood. Programs can also host community events; in the days immediately following a homicide, for example, some programs organize community walks, healing spaces and sacred memorials, or barbecues at the scene or on the block where the incident occurred.

It is critical for CVI organizations to operate in partnership with other community organizations. While some CVI programs may have started out aiming to contain as many capacities as they could "in-house," most emphasized setting their focus and scope of work more narrowly on activities such as outreach, violence interruption, case management, life coaching, and mentoring, while maintaining close ties to other organizations that specialize in additional services tailored to the needs of clients and participants. Regardless of the number of services provided by a single organization, programs cannot succeed in isolation without support and resources. One organizer described this connective approach as "*building small pockets of structured capacity for these programs and neighborhoods.*" Organizations partnering across a community implicates breaking down information silos, shifting cultural expectations, and creating channels of communication and relationship. Social events and partnerships across organizations and community can help build these connections and make sure people are familiar with one another.

Program participants greatly benefit when they receive warm handoffs to other organizations where they can access the services and support they need. It is very important, then, for community partners to understand and support the clients who are being referred; this includes

recognizing the fact that they are often individuals with a justified baseline of distrust towards all systems, including (and maybe especially) community-based organizations. One interviewee described their intended audience as an untouched and invisible population with which no one wants or chooses to engage. Furthermore, both clients and workers are often struggling with financial insecurity and the challenges of living in poverty, and community partners must recognize that clients and workers may struggle to find reliable transportation, childcare, etc., when trying to keep appointments. Barriers to engagement may be related to things such as safety concerns stemming from the geographic location of the community-based organization or difficulties with consistent attendance or follow-through. In connecting with other organizations,



Participation in neighborhood activities such as block parties, youth sporting events, or summer programs such as Summer Night Lights are seen as effective ways of establishing visibility and credibility between workers, their programs, and the communities they serve.

CVI experts emphasized the need to scope out and exercise discretion when deciding whom to engage with. A high standard for connection is important, and programs should be sure to refer individuals to trauma-informed organizations that understand this demographic and will not alienate them. Trust, transparency, and accountability must be bidirectional, and developing these kinds of partnerships takes patience and consistent work. One interviewee noted that they aimed to connect with organizations that would give their participants the “*red carpet treatment*,” with “*no bureaucracy, no bending over backwards to deserve services. They walk in and they get what they need.*” It was also understood by most experts that expedited access to support services may not always be easily available, so while outreach workers and case managers must use discretion about when to request expedited access, CVI programs must also convey to community service providers how important service provision may be to preventing community violence. Waiting lists, unreturned phone calls, and failed referrals only add to participants’ skepticism and distrust of the program’s ability to offer

assistance. To address this issue, CVI organizations and community service providers may seek joint funding opportunities to build capacity for clients and their families. Effective interventions are achieved when different CVI professionals leverage their specialized skills and successfully connect participants and their families to community partners:

“At the home [following an incident], the violence interrupters may notice that there’s this other young person in the family that needs some support. They may not have been directly involved, but they’re being impacted. Or a life coach knows that I’m working with a client and there’s domestic violence happening between [the client] and his partner. So, now they’re able to connect to a youth-serving organization for the young person or a gender-based violence prevention organization around intimate partner violence.”

INTERVIEWEE 10

CVI programs have found partnerships with the following kinds of organizations to be beneficial for client stability and success:

- Organizations with culturally competent staff offering therapy, grief counseling, and other tools to address trauma and support shifts in behavior and decision-making that increase safety. Many emphasized the necessity to connect with professional therapists, including those who are trained in cognitive behavioral therapy (CBT). They also suggested connecting to providers of anger management and life skills programming.

- Trauma-informed medical facilities, including hospitals, medical colleges, or health clinics, that support vulnerable individuals in crisis without judgment or perceived criminalization. Interviewees stressed the need to have present in these settings culturally competent nurses, social workers, or violence intervention professionals who are able to treat someone traumatized by a gunshot or stab wound and understand their demographic. They emphasized that too often, medical professionals who would address their physical wounds do not exhibit that same sensitivity and competence.
- Organizations that connect individuals to job opportunities and prepare them for success. These include provisioners of financial management education, workforce development, and training in soft job skills and expectations.
- Organizations that provide assistance with basic needs, including housing, food, utilities, and infant/child-related necessities.
- Organizations that offer parenting, fatherhood, or family support trainings and workshops.
- Schools and adult education providers. Several experts reported having solid relationships with neighborhood schools, such that, when necessary, outreach workers could engage students at the school or teachers to help mitigate the impact of trauma or potential conflict at an earlier age. Education providers are also important partners for helping participants take test preparation classes or to secure certifications or degrees.
- Intermediaries that can help build program capacities, serve as fiscal sponsors to manage grant funding and financial needs, and support identifying and bringing in additional trainers and experts to address special program requests.

Engaging with Law Enforcement

All CVI experts interviewed for this project recognized the necessity of co-existence with law enforcement. There is simply no way for outreach-based CVI programs to operate in a vacuum that remains totally outside of law enforcement; the overlap of the intended audience with policing, the court system, and corrections is too great. One interviewee summed up this point as follows:

“Nobody is asking you to be best friends [with police], but you can’t operate in the same space with no communication; then you’re just like in a bad co-parenting relationship. You really don’t want that, because the community is going to be the confused child. You want to be able to both know what each other is doing so the community knows how to respond to you. Even if it’s just upper management—there may only be one or two people that communicate with law enforcement. But law enforcement should be well aware of what you’re doing and how your program operates.”

INTERVIEWEE 11

However, the very real and persistent harms that have been inflicted on vulnerable communities by law enforcement and the criminal legal system make this relationship a challenging one to navigate. For one, many CVI personnel and/or their program participants have had negative interactions with police, and the parties may have long memories that prompt skepticism about the potential for productive relationships in the present or future. This may be particularly difficult

for police and systems actors, who often doubt individual journeys of lifestyle transformation and disengagement from illicit or violent activity. Also, every single expert made it clear that, for very obvious safety reasons, outreach workers must maintain a very visible and strict distance from police. This distance can sometimes cause friction with police, who may perceive the programs as “protecting criminals” or undermining police authority. Program experts emphasized that the utmost priority of CVI is to prevent violence from occurring or re-occurring, not to investigate crimes or interfere with police work. They also stressed that, in the same way that CVI programs are responsible for intervening, police are responsible for investigating crimes, and their respective goals are complementary for community safety rather than antagonistic.

Some CVI experts with lengthy experience in the field explained that they have evolved in their perspectives on engagement with law enforcement and the criminal legal system. They now see law enforcement engagement as paramount to systems change, because it allows the chance for CVI leadership to help humanize their clients, gain access to diversion opportunities, and even hold systems actors accountable for mistreatment of program participants or community members.

“It’s not about our responsibility to law enforcement. It’s about their responsibility to the citizens. And if you aren’t working with [law enforcement] to help and teach them how they need to better work with us, then you’re not really doing the work . . . I want you to be to the point where you feel comfortable enough with me as a partner, that when you see my young person, your first thought isn’t to arrest them. Your first thought is, ‘Yo, I’m going to call X, and tell him he’s out here.’”


INTERVIEWEE 2

Another expert talked about how their organization’s relationship with the district commander in their community has helped prevent arrests and violence:

“We’ve stopped them from tasing people. We’ve stopped them from arresting groups of kids. We’ve had them pull a whole convoy of police out of the community one day because the kids were shooting fireworks at the police. And the inspector asked, ‘What do I do?’ Because it was about to escalate. So [one of our CVI organization leaders said], ‘Okay, remove the police, we’ll take care of the kids.’ And they did. They’re not going to do that if they don’t trust you. And so, do I curse them out and give up my ability to communicate and impact change? Or do I build a relationship that will allow them to see and understand our people? And allow an ability for the transformation of how police exist in this area? This can show the world that policemen can be different . . . I don’t need a class in wokeness. I need to keep kids out of jail, I need to keep kids alive. I need to keep Black men and Black women alive.”

INTERVIEWEE 9

Nonetheless, experts agree that establishing trusted relationships with law enforcement, particularly the police, is extremely challenging and takes patience and consistent effort. The power differential between police and community, including CVI organizations, is tilted towards the police, which puts these organizations at a disadvantage from the start. If police chiefs, or the rank and file, are not bought into giving CVI programs the space to implement, develop, and grow, they can not only doom the program’s funding, reputation, and success, but also literally put the lives of program participants and program personnel in danger. The communities where CVI programs operate, and especially the clients with whom CVI programs



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work, have a deep distrust and dislike for police, and actions that even resemble cooperation with law enforcement could result in violence. Law enforcement buy-in, particularly among the rank and file, can be difficult because the program participants, and sometimes even the outreach workers, may have been the focus of police investigations in the past, and appreciation for one's ability to change or be given a second chance may be hard to achieve. However, if police are not on board with the protection of CVI outreach workers from perceived cooperation, they can create additional harm. Therefore, law enforcement brass must unequivocally set the tone with the rank and file that the safety of CVI personnel is of importance to the police agency. This tone is not inconsistent with police's responsibility to protect and serve the community, but it is still one that requires clear messaging to both police officers and the community at large.

Solid, trusted relationships between CVI organizations and police offer notable benefits to both entities as well as to the community. Police often have real-time data and intel, including from other law enforcement partners, that could potentially help identify brewing conflicts that could be mediated by outreach workers. As first responders, police also have immediate access to family members following incidents of violence; if they are willing to allow CVI personnel that same access, the workers have the opportunity to directly tamp down talk of retaliation, console survivors, and immediately link loved ones to grief or crisis services.

Some CVI organizations even track death or birth anniversaries of certain high-profile slain community members, or impending incarceration release dates of major players, because of possibilities for retaliatory violence; police can help track down that information. Successful communication has very real implications for reducing violence; as one expert noted, *"The most ineffective environment is one where "[p]olice chiefs believe that law enforcement has a monopoly on public safety, and that community members and other partners have no perspective to provide strategic insight on what should be done."*

However, police and law enforcement must accept that, for the safety of all parties, sensitive information about individuals or groups at the center of violence must flow only from law enforcement to CVI personnel, and there cannot be even the illusion of bidirectionality. As several experts stated, it is not the role of CVI personnel to investigate crimes or facilitate arrests; the primary objective is to prevent violence from occurring.

"We have to make sure that not only for the protection of the individual workers and the protection of the field, but also for the protection of the strategy, that we hold very hard lines around interaction with law enforcement and giving them information. If we don't do that, we become an extension of law enforcement, and then we become ineffective."

INTERVIEWEE 7

"I can't place my team in harm's way. My team needs to be free to pull up to a crime scene without an officer saying, 'Hey, such and such. How's it going? You didn't return my call last night.' That's just not going to be received well in the community."

INTERVIEWEE 13

Organization leaders talked about achieving this goal by having trusted connections with specific individuals within the police departments. Homicide detectives, commanders, and deputy chiefs, or leaders in community policing divisions, were often the points of contact. Experts stated that the most successful collaborations with law enforcement generally involve coordination at the city level and include other city services as well. Again, though, this coordination requires mutually consistent effort and commitment.

City/County Support

Whether a CVI program is managed by a local government agency or operates independently, experts agree that local-level governmental buy-in is very important for the organization's sustainability. Nearly all the interviewees talked about the need to have a champion in city hall or county administration to, at a minimum, advocate against threats to the program's reputation. It is even more helpful if the advocate pushes for local-level funding to support the program and elevates CVI as an integral part of a coordinated public safety strategy, engaging with other public agency leadership such as public works, health departments, parks and recreation, transportation, and economic development. Local government leaders are also key players in communicating what success looks like when it comes to violence reduction and applying a public health lens to that success, rather than an apprehension-and-suppression-centric one, so that increased and equitable quality of life and wellbeing for all residents are the ultimate goals. Therefore CVI programs must cultivate this relationship with city or county officials. Experts stated that this buy-in was achieved by working with a mayor, city councilperson, county supervisor, or agency head to communicate the effectiveness of the program. Several experts recalled scheduling site visits and meet-and-greets with the officials to help increase the officials' understanding of what the program does and why its existence and funding are justified. They also found it important to communicate to officials and policymakers that CVI and violence interruption efforts cannot operate alone to reduce violence; community investment and development must happen concurrently. Furthermore, they acknowledged that a program in operation for just a few years cannot erase decades of neglect, trauma, and indifference to suffering.

“At the community level, we have to shift and create new cultures, but that's going to take investment. It's going to take economic infrastructure development, workforce development, et cetera. At the family level, we have to strengthen and support families. And at the individual level, support individuals.”

INTERVIEWEE 7

“They need to know that they don't have the answer. They need to take leadership from those that do. So make different decisions. Follow the leadership of the people on the ground.”

INTERVIEWEE 9

Beyond government officials and policymakers, organizations also emphasized building connections with local media to create opportunities to share testimonies and data about how the program adds value to the community. This included offering media training to outreach workers and helping them to tell stories effectively and persuasively.

Outreach-Based CVI Models

Research, along with wisdom of residents in neighborhoods plagued by violence, suggests that the vast majority of violence in any community is committed by a tiny fraction of the individuals in those neighborhoods. Those who are at the highest risk of violence involvement are typically—but importantly, not always—male youth and young adults between the ages of 15 and 34. Thus, most CVI programs seek to reach this population in order to effectively reduce and prevent initial and retaliatory violence. CVI programs must be guided by data and supported by knowledge regarding the individuals or groups involved in violence in any community within any given city. These data and knowledge come from local police investigations and community residents, and they direct program activity to specific neighborhoods, parks, or streets.


Outreach-based CVI programs often vary widely in terms of their theoretical frameworks for violence prevention, program objectives, and implementation tactics. However, because the populations they seek to engage are highly unlikely to readily welcome unsolicited attention or easily trust someone offering support that could purportedly lead to lifestyle change, these approaches often have comparable engagement or program provisions. CVI programs note that to be effective at identifying, connecting with, and supporting their intended audience, they must hire staff who are familiar with, and recognized by, the people and resources in the communities where they will work. They use relentless yet positive persistence and intensive follow-up to make connections and demonstrate commitment to supporting and uplifting their intended clients. It is crucially important, for relationship development and their personal safety, that they are perceived by their clients and the broader community as people who can be trusted not to share potentially incriminating information with authorities and who can follow through on the promises made to program participants and their families.

Program models reflect the varied goals of each organization, depending on the organization's conceptualization of what motivates violence in their communities and who is involved. Almost all programs include a combination of goals as well as a unique context depending on the cities and neighborhoods in which they work. Some organizations aim to serve as one-stop shops for client-specific resources, with the goal of housing several services within their organizations. Others aim to remain more specialized, while cultivating relationships with other community-based organizations to provide wrap-around support. Organizations may focus directly and specifically on interrupting and preventing violent incidents, restoring the mental and physical health of individuals who have been involved in violence by addressing their traumas, or connecting vulnerable individuals to resources and opportunities to which they have lacked access. These goals are approached by interventions at the individual, group, and neighborhood levels.

Individual-Level Interventions

The majority of outreach-based CVI programs today are individualized interventions that operate as independent community-based organizations. These programs aim to reduce the possibility that a participant will engage in or be victimized by violence or become ensnared with police and the criminal legal system.⁴⁰ This can involve a high-touch approach that includes relationship building and gaining trust of those at the center of violence, particularly cyclical and retaliatory violence. These programs require identifying individuals who are most likely to engage in violence and connecting them to resources that will allow them to make different choices.⁴¹ Some of these organizations use the health care system, rather than the community, as an entry point to locate those who are most affected by violence and may be caught in violent cycles. For example, hospital-based or hospital-linked programs may intercept individuals who have been shot, stabbed, or violently assaulted and connect them to culturally competent counseling to reduce the trauma and the possibility of destructive choices. In these cases, the outreach workers promote the healing of both the physical and psychological injury and trauma. Because of the historically negative relationships disenfranchised people have had with health care systems, these points of contact can be important in getting people to the resources they need, including wound care, physical therapy, mental health counseling, and social service support.

Connecting individuals to resources is another goal of many programs. This can include case management, therapy, professional development, or substance abuse treatment. This work requires organizations to ensure the quality of services and their demonstrated ability to engage



CVI programs require identifying individuals who are most likely to engage in violence and connecting them to resources that will allow them to make different choices

positively with the populations served by CVI programs. In other words, CVI programs exercise discretion when engaging partners that usually work with other, lower-risk populations to make sure their own CVI program participants are not alienated. On the other side of the coin, some find value in connecting with organizations that focus on different populations, such as unhoused individuals, so that they can refer individuals out as needed. These efforts require cross-training and team building between organizations to build familiarity and trust.

Programs emphasizing life skills, career pathways, or educational attainment aim to reduce violence by helping individuals make exit plans from criminalized economies. This can mean identifying goals that the participants may have felt were inaccessible or impossible, and then working with them to achieve the goals and build confidence and success. This path can start with actions as simple as getting a social security card, birth certificate, driver's license, or work- or school-appropriate clothes and supplies. It may involve covering the costs to attend trainings at job centers. Some programs also incorporated traveling with participants outside of their neighborhoods or cities to allow the power of exposure to help expand participants' understanding of what is possible to see, touch, and experience in their lives.

Group-Focused Interventions

Some organizations also operate to intervene at the group level, seeking to reduce ongoing conflict across rival cliques or crews by bringing them into discussions together, leading to non-aggression or peace agreements. When conflict is brewing between groups, or during periods of sustained increases in violence, these interventions aim to find ways to interrupt. The organizations may also act as first responders to group-involved incidents, working to quell tensions on both sides. This entails working to control rumors and learn of potential repercussions and additional discord that may be mediated. Organizations that engage at the group level do so because much of the violence in their communities has been determined, through data and intel, to be driven by group-level conflicts. These organizations make it a priority, then, to hire frontline professionals who are credible to each of the groups. However, numerous interviewees stressed that the groups are often fluid and not as distinct as the traditional perceived notion of “gangs,” and most conflicts, while they may involve multiple people on either side, are not driven by group affiliation. Therefore, structuring community violence intervention strategy solely around group organization may limit the effectiveness of violence reductions.

Neighborhood-Level Interventions

Other organizations serve to mediate violence at the neighborhood level. They may complete community assessments or conduct peace walks and vigils when a violent incident takes place, seeking to address community trauma.⁴² Neighborhood-level efforts aim to establish themselves within a community in different ways to increase their reach and effectiveness, including through schools and medical centers, and through dedicated modes of outreach that focus on increasing awareness of programs and resources for the entire community.^{43,44} Neighborhood-level interventions can also mean increasing awareness of programs and community needs, and advocacy for policy and practice changes. One expert noted that interventions that operate at this level aim to “*work as relentlessly with systems as [they] do with young people.*”

Outreach-based CVI programs, whether operating at the individual, group, or neighborhood level, are grounded in the desire to transform and save the lives they touch. Those who choose this




work as supervisors, executive directors, and especially outreach professionals deserve deep appreciation, respect, and support for putting their lives, livelihoods, and reputations on the line to engage people at the center of violence to prevent one more person from being violently injured or killed. Indeed, the complex nature of violence makes intervention work dangerous and incredibly challenging to manage.

“You have to know when you can go in or when it’s too hot and you need to back off because that could be the difference between life or death.”

INTERVIEWEE 10

While forming authentic, nurturing relationships is an integral aspect of community-based outreach, many strategies also incorporate additional elements of support. As already mentioned, some programs offer formal mentorship to clients, working with individuals to identify and then meet personal goals that can increase self-efficacy and stability, potentially reducing the likelihood of engagement in violence. Others include case management, helping to facilitate processes such as applying for jobs or obtaining licenses or social security cards, or linking participants with community service providers that can address economic, educational, health, or social needs of the participants or their families. Some models prioritize cognitive behavioral therapy to address their clients’ coping with prior traumas and help shape responses to future incidents that could trigger harmful thoughts and actions. Some programs have outreach staff specifically trained in conflict mediation and violence interruption, working to identify, de-escalate, and resolve potentially dangerous conflicts while also teaching individuals how to resolve conflicts and situations that elicit negative affect without resorting to lethal violence. Another element of support is incident response and victim services, where outreach workers respond to the scenes of violent incidents to not only help quell potential retaliation, but also offer connection to grief services, assistance with navigating criminal legal processes, or coordination of community vigils.⁴⁵ Conflict mediation/interruption and incident response in particular are essentially important for curbing surges in violence without relying on increased police presence or arrests. Many outreach-based CVI approaches integrate more than one of these broad categories of support into their offerings, depending on their program models and staffing capacities.



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CVI Program Operations

Program Capacity and Infrastructure

The infrastructure of outreach-based CVI programs—the physical location and the personnel and experience required for operation—largely depends on the program model and its overall violence reduction approach. Much public attention is rightfully placed on outreach workers' engagement of program participants or on the training of outreach workers, but it is also necessary for organizations to provide training and support to the supervisors and managers of outreach-based CVI programs. In addition to potentially needing specialized coaching and training to best support their outreach workers, who may have had limited education and employment experience prior to joining the organization, management needs training and guidance to provide the most appropriate, trauma-responsive, and culturally sensitive mentorship and training for their employees. Programs differ in their approach to handling worker accountability and corrective actions; however, experts talked about the challenge of navigating the fine line between giving workers repeated chances to learn and develop their professional skills and being firm when situations become untenable. As in any other profession, these management issues can be difficult to address and require experience, training, and support; such support is especially critical for CVI programs.

Supervisors and managers need training on topics such as project management, financial recordkeeping, data collection, confidentiality and duty-to-report regulations, and mental health supports to properly facilitate workers' success. Furthermore, many individuals who become managers and supervisors in CVI were formerly outreach workers themselves, which has advantages in terms of understanding the experiences that workers encounter, but also means that they may have difficulties managing their former peers.

“But the other [area we’re] really investing in is around the managers and supervisors, getting them to understand that you might’ve been promoted because you were a hell of an outreach worker, but just because you were a great outreach worker, doesn’t mean you’re going to be a great supervisor.”

INTERVIEWEE 4

“Leadership is a different ball game. We have people who get promoted because they’re great outreach workers and then their friends tell them, ‘Why are you giving me a hard time? I grew up with you on the block,’ or maybe, ‘I was even your street block boss’ . . . and [the new supervisors are] even having a hard time holding their people accountable in the name of equality. So that degrades the quality of what we do. So even before you get to an ED, we have to think of the middle level.”

INTERVIEWEE 3

Experts spoke about learning over time that the difficulties of funding and filling administrative positions are key to the operation and sustainability of any CVI organization.

Programs are typically funded to hire only a program manager, a small number of outreach workers, and perhaps the outreach workers' supervisor(s). Experts spoke about learning over time that the difficulties of funding and filling administrative positions are key to the operation and sustainability of any CVI organization. They also expressed frustration over the difficulties of funding and filling those positions. Program leaders discussed how funders generally had greater appreciation for the need to fund more workers and administrative personnel as the programs continued to operate and exhibit success, but adequate staffing, particularly in program administration, continues to be an issue in the field.

Several interviewees talked about the near impossibility of managing grant funding requirements without having a dedicated financial manager and an appointed data manager on board to track daily expenses, train on recordkeeping, and verify timely entries into reporting systems. Some experts lamented the financial and time-consuming challenges of not having a grant writer on staff and having to identify and hire a part-time grant writer to apply for funding. Other vital roles include a human resources manager and an in-house life coach or counselor for program personnel to support the workers with navigating their own lives and relationships, not unlike an employee assistance program. Programs that specialize in cognitive behavioral interventions also hire mental health professionals and social workers as dedicated staff. Some programs that prioritize employment have their own personnel who are devoted to connecting participants with training programs and work opportunities and coaching participants to handle job-related issues.

Trust and Team Building

While there is increasing acknowledgement of the need for outreach workers to be viewed as credible messengers and resources to potential or existing program participants, for programs to operate effectively and with integrity, credibility must be earned and honored at all levels and across all bidirectional relationships including between the individual workers on a team within a program, between workers and the communities in which they serve, between workers and their supervisors/organizations, between the organizations and the communities in which they operate, and between law enforcement and the workers and organizations. As it does with clients, relationship building takes time. Experts suggested that organizations devote several months to not only identify the needs of the community related to violent conflict and hiring the appropriate personnel, but also for workers and management to get comfortable with each other. Trusted and open relationships are critical to the success of CVI programs.

There is no perfect science to this. We're making mistakes every single day. There are struggles with dealing with violence for the teams and folks that are working in this field. But we're troubleshooting and we're pivoting as needed. For me, I have an open-door policy and I'm running site to site to check on my teams, to have conversations with the leadership and frontline staff so that they know they have access to me. I'm just this guy sitting somewhere on the hill. I pride myself on making sure that anybody on the team can call me or reach out to me and I'll sit down with them at any given time.

- INTERVIEWEE 12

It is also important for organizations to host regular team-building activities at the organization's expense, whether they be social outings, group travel, or simple exercises that facilitate communication and transparency.

Outreach Worker Roles and Responsibilities

“I tell people that most of the work is done prior to an incident or altercation. It’s building relationships and trust with individuals and the community so that when things are on the brink of taking place, you’ll get updated prior to it escalating to the point where violence actually takes place.”

INTERVIEWEE 5

Successful outreach workers operate with a critical foundational principle: each individual’s life matters and has value, regardless of their past or current actions. Outreach-based CVI strategies approach their work with the tenor of a quote from attorney and justice equity leader Bryan Stevenson: *“Each of us is more than the worst thing we’ve ever done.”*⁴⁶ The outreach must be person-centered and customized to each unique situation, acknowledging that the needs and motivations for lifestyle change vary. Similarly, each strategy seeks to meet individuals and families where they are, both physically and mentally; the outreach is often referred to as “street” outreach because, rather than expecting participants to come to offices, the workers go to where their intended participants are—street corners, porch stoops, parks, and alleys. Outreach is also not limited to normal weekday work hours; workers may respond to or meet their clients on weekends and at all times of the night, demonstrating their commitment to being a consistent and reliable presence.^{47,48} Having credible, dependable, and persistent outreach staff facilitates the establishment of genuine relationships, which open the door to conversations and activities that foster self-reflection and personal growth. The outreach workers aim to expose their audience to new ideas and ways of thinking and living. This exposure can be fostered through one-on-one discussions and sponsored excursions. The staff connect individuals to programs, resources, and trainings that can help to address personal and familial needs and encourage personal and professional development. Importantly, outreach strategies appreciate that successful and sustained change may require the support of family, neighbors, and community supports. So in addition to their individual-level relationships, outreach workers also collaborate with residents, support services, and community-based organizations in community development and empowerment projects. Through this wider range of influence, outreach-based CVI strategies have the ability to help shift community norms around violence—both its use to resolve conflict and responses to those who have engaged in it—and to promote messages of nonviolence, collaboration, and the importance of lifting up even those who may have caused harm to others in the past.

“We always tell people: you can’t buy [the relationship]. No one can just come in and say, ‘Okay, this is what I want.’ You have to earn it. You got to cry with people, you got to bleed with people sometimes, you got to help them bury people, you got to celebrate together, you got to recognize each other’s birthdays. All that stuff counts. You got to go to baseball games together. Everything counts because that’s what builds trust and community.”

INTERVIEWEE 12

Each program has its own structure and mode for operationalizing program personnel. While licensed roles (i.e., psychiatrists, counselors, clinical workers) may have clear job descriptions, the lines between the many variations of outreach workers and the participants they are engaging are often blurred.

“Depending on their situation, there’s outreach workers who are amazing violence interrupters. I mean, the hardcore distinction is that the outreach

workers are doing a lot more on-the-ground community daily outreach, like walking, canvassing. [But] they also are managing and mediating certain conflicts.”

- INTERVIEWEE 3

Some programs started by hiring outreach workers just to do violence interruption and conflict mediation, but as they continued to operate, they recognized that violence interruption is just the tip of the iceberg in supporting individuals, and that they needed to add case management, life coaching, formal mentoring, and social service linkage to their models. In some programs, former outreach workers moved into case management roles. Program leaders acknowledged that the skills that allow someone to excel at one task do not necessarily make them fit for another. For example, some outreach workers are masterful at developing relationships with individuals at the center of violence and mediating conflict, but they may not have the optimal skills or demeanor to serve as case managers responsible for making warm referrals to community service providers. In response to such situations, an organization may help develop the worker’s skills, or may specifically hire a case manager to best align skills with responsibilities. In another example, one participant explained how their thinking has evolved on the relative roles and responsibilities of these two entities, and while they see the need for both outreach workers and case managers, they now believe that the positions would mutually benefit from cross-training:

“In years past, we looked at life coaching, which is case management, as separate and different from interruption and outreach. But I think there should be more of a marriage between those two roles and that there can be cross-training in both sets of skills. That way, life coaches, if they’re ever in the community and find themselves needing to interrupt or de-escalate a situation, they’ve been trained on that. [O]utreach workers [and] interrupters should be trained on how to coach, how to mentor people, just in general life skills. But oftentimes, we don’t look at outreach workers like we might look at case managers. And I think, more and more, we should start viewing outreach workers a little bit more in that vein.”

- INTERVIEWEE 10

Explicitly operationalizing the roles, responsibilities, and needs of different worker positions, in addition to the supports and services offered to clients, can help ensure stakeholders and policymakers better understand the necessity and the value of their investments in both CVI personnel and program resources.

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Identifying Outreach Workers: Incoming Skills, Lived Experience, and Backgrounds

Organizations use a series of criteria to identify outreach workers who are most aligned with their goal of preventing community violence. While the specific criteria may vary due to respective organizational needs and community demands, there are a few key identifiers utilized by a majority of outreach-based CVI organizations for recruitment. Establishing trust in the community and with participants is vital for organizational success; therefore, *credibility* and *influence* are significant identifiers for outreach worker recruitment. Numerous program directors spoke about the importance of their workers having “license to operate” in the community, meaning that the workers possess the ability to maneuver safely and with integrity through various neighborhoods and have access to key actors at the center of violent conflict. These characteristics are fostered from years of community engagement and provide the outreach worker with the necessary leverage to motivate behavioral change in their clientele. Organizations also seek certain personal traits and qualities that they are unable to teach through formal training, such as honesty, integrity, empathy, and compassion for their community. Although community proximity is necessary, maintaining an objective distance from direct engagement in violence, illegal activity, or perceived coziness with individuals believed to be involved in violence is a must. As an interviewee noted, *“It only takes one person to take credibility away from the whole team.”*

Identification of “the right” outreach workers to hire is an ongoing challenge for outreach-based CVI programs. One noted barrier is related to concerns over the necessity of direct lived experience, or the recruited worker’s explicit prior involvement in violence or illegal economies. In the origin days of CVI, direct lived experience was thought to be a requirement for outreach work, and many directors still believe it is a must-have for effective engagement. However, other directors believe that empathy and the ability to make genuine connection may matter more:

“I think lived experience is overrated. I have lived experience . . . And it’s overrated for many reasons. I think what really matters is genuine empathy. You can point to Mother Teresa, Father Greg Boyle [of Homeboy Industries in Los Angeles]. People from the ‘hood, I mean, people in general but especially kids that have been disenfranchised, abused, and neglected, they can pick up in a few seconds if somebody gives a crap or not, and so that’s what really matters. I’ve heard arguments that you have to have a team of all lived-experience folks. Then there’s folks that say . . . you’ve got to have folks without lived experience who went and got a degree and stayed out of trouble . . . So, what I’ve come to realize is you need both, and it has to be a good mix because typically there’s a lot of pros and there’s a lot of cons with lived experience. So, some of the pros with lived experience is they can cut to the meat of what’s going on. They can make a phone call and find out why the shooting happened within minutes, and other folks can’t, right? They could make a call to the producers of violence and ask why did this happen, and folks that don’t even have those relationships can’t. So, that’s all true, but folks with lived experience also tend not to be good at documentation. They hate it, they won’t do it, and some . . . will say, “It’s confidential, and I can’t be putting things on paper, and it’s my safety.” And it’s BS. Some of them just didn’t go far in school or have a learning disability, or . . . just don’t want to do it.”

INTERVIEWEE 2

Although in communities plagued by violence there are often many individuals who are formerly incarcerated or have histories of involvement in underground economies, violence intervention requires that the workers have no unresolved conflict that could put their own safety or that of their clients or coworkers in jeopardy. The workers must also be prepared for a structured employment position, with supervision and expectations that may be unfamiliar to someone who has had little to no formal work experience. Even more importantly, the consistent exposure to trauma for workers through violence intervention work, whether related to retriggering events that remind them of past incidents or to the threat of violent injury or death of their clients, coworkers, families, or community members, takes a tremendous toll on their mental health. Individuals with direct lived experience may be more vulnerable to psychological or emotional harm precisely because of their past exposures to traumatic incidents.

“Folks with lived experiences, a lot of them have unresolved trauma, so they bring that to the workspace. So, they might be about peace, but they still have these personality traits and behaviors that are counterproductive to the overall goal of helping people. They bring that to the workplace and they’re like disgruntled employees, or they lash out at people, and they don’t see it. They think just because they’ve put the gun down that they’re great. No . . . we got to constantly be healing. I mean, I don’t know if anybody can get through without a spiritual epiphany, for the rest of your life you’ve got to be moving in that direction. So they [may] bring a lot of drama, a lot of rumors, backstabbing, and competitiveness. It’s just not healthy for the field.”

INTERVIEWEE 15

Program supervisors and managers must carefully interview potential hires and disclose the realities of the position, and consult with community members and others around them, to best ensure that outreach workers are knowledgeable and ready for the job. Engaging community members and, when appropriate, law enforcement in the interview process was deemed an essential aspect of hiring so that organizations can triangulate information about the potential worker’s community credibility and probability of successful employment. Some programs have begun to explore a broader recruitment strategy for outreach workers, prioritizing a person’s ability to connect and relate to an individual over their direct lived and traumatic experiences. With this strategy in mind, the potential outreach worker pool may include community leaders such as coaches, teachers, or other respected residents. A few programs also talked about experimenting with a sort of pre-employment trial period, where an individual who may not be fully ready to commit to full-time employment as an outreach worker may be subcontracted or temporarily hired to assist with conflict resolution or violence interruption to gauge mutual fit and readiness for the position while also benefiting from the potential worker’s natural leadership and mediation capabilities. However, leaders acknowledged the precariousness of this recruitment and de-escalation tactic and remain unsure of its viability.

Developing a comprehensive team with various levels and modes of experience can also be challenging for programs. While some program managers prefer a more junior or senior team, overall, interviewees stressed the importance of balance and relatability with the population being served, and that the field is currently oversaturated with veteran workers. According to studies conducted in Baltimore, Chicago, and Oakland, the average age of outreach workers ranges from 43 to 47 years old.⁴⁹ Although the cumulative years of experience are beneficial, the experiential knowledge could become obsolete as the community violence actors and motivations evolve, and the ability of workers to understand and relate to conflict may become strained, particularly if those most likely to be engaged in violence in any given community are much younger than the workers.

“A lot of guys play into that feeling of protection just because of who they were in the past, but that’s only going to get you so far, because young people don’t always respond to that.”

INTERVIEWEE 2

Incorporating more junior members may increase the organization’s credibility with younger clientele, but it was also noted that junior members, especially those with direct lived experience, may struggle to navigate conflict with or have influence over individuals of the same age, or they may not be far enough removed from their own rivalries and conflicts to safely operate as outreach workers.

“The problem with [hiring younger individuals as outreach professionals] is, it’s too new, it’s too fresh. They still have individuals whom they have harmed. As they make the transition, the other individuals didn’t, so now [the workers] are putting themselves in a vulnerable state because now you’re walking around talking about peace and I still remember some of the things you did to me and you make yourself an easy target because you’re no longer carrying a weapon.”

INTERVIEWEE 5

The racial and ethnic identities and genders of outreach workers can similarly be a point of concern. Relatability to the intended audience may necessitate hiring male workers of specific cultural identities to credibly mediate certain types of situations. However, various experts interviewed warned not to underestimate the influence and effectiveness of women and ethnically diverse outreach workers. For the field of CVI to grow and evolve, managers and their staff must be willing to consider how different experiences and backgrounds may enhance their outreach capabilities.

Training and Skill Development

Many of the individuals selected as outreach workers may have limited or no prior formal work experience. In many cases, employment as an outreach worker might be an individual’s first experience in a structured, hierarchical organization where they report to a supervisor. There may be a significant learning curve when answering to authority or recording case notes into a database, for example. Thus training and coaching of personnel may be required to introduce soft skills and support employees as they transition into the workforce. Areas to cover may include professional tasks like shift expectations, personal time away from work, technical skills, and standard employee trainings for coworker and client interactions such as sexual harassment, conflict resolution, and human resources trainings.

Most CVI organizations train outreach workers in safety planning, behavioral modification, motivational interviewing, de-escalation and dispute resolution techniques, and recordkeeping. The duration and methods of trainings vary widely. Some organizations require 40 hours of didactic learning and role-playing exercises before workers can enter the field, while others utilize shadowing and observation shortly after organizational orientation and onboarding. Some organizations lead trainings in-house; others contract with outside trainers with experience in CVI.

For some CVI organizations, cognitive behavioral therapy is utilized during the onboarding process and is the focus for two to four weeks prior to entering the field. Some other organizations view

cognitive behavioral interventions, with an understanding of brain science and youth/young adult development, as central elements of their program's theory of change, and embed them throughout the expected activities of outreach workers and other program personnel. While not all interviewees agree that outreach workers in general receive enough training to appropriately facilitate cognitive behavioral therapy for their clients, many organizations still engage with the practice and see value in its tenets.

Trauma-informed training takes many forms in CVI. For some, it is simply woven throughout every aspect of training on other topics, while others treat it as a standalone training module. Given the stress that CVI workers endure, and the myriad ways in which trauma influences the behaviors and lifestyles of the clients they serve, every organization devotes substantial time to this area. Program staff must be knowledgeable about the traumas that persist due to structural and community violence. This is especially important if outreach workers or program personnel have professional training in other sectors, such as social work or health care, but may not have previously experienced the various ways in which complex trauma may influence participants' behaviors or reactions. Practitioners must utilize a culturally competent approach to establish trust and rapport with program participants. Staffers who appear misaligned with the participants' cultural norms, interests, and lifestyles will likely struggle to build authentic and trusting relationships that motivate participants to listen and accept guidance.

Physical safety of the outreach workers is an underappreciated yet critically important aspect of training. Outreach workers are often hired because of their reputations as heavy-hitting influencers in the community, or as sociocultural brokers with credibility to handle violent conflict. This does not make them immune to violent victimization; in fact, for various reasons, their reputations may put them at increased risk of violence, outside of the general risks that come with engaging with individuals who may be potential targets or agents of violence. Interviewees discussed the need to increase the time and content of safety training to increase confidence in the program's ability to help prevent violent injury or death of workers.

“So there should always be trainings with every team. What is the clear understanding about what you do when violence actually breaks out? Do you step in, do you not? And if not, if you don't, what are you saying? So we train folks to actually step back and verbally keep a safe distance, maybe about 10 feet away. You try to de-escalate, you try to get people to break up and to cease from fighting. But again, you never know when someone's going to pull out a weapon.”

INTERVIEWEE 10

Overall, although interviewees generally reported covering the same topics during their outreach worker employee trainings, the experts agreed that training for violence intervention and prevention work needs to be more robust, continuously supplemented, and standardized across the field. The limited duration of training and a lack of training quality and consistency across the field have significantly hindered the development of a standardized training infrastructure for CVI work, a feature many experts believe is a requirement to further legitimize the work.⁵⁰ Interviewees described their organizations' need to balance the urgency of putting violence intervention specialists in the field to immediately begin reducing violence with the need to provide proper coaching and training for new hires. They recognize the importance of ongoing and refresher trainings but also noted the challenges of identifying qualified and culturally competent trainers and technical assistance (TTA) providers. There are presently only a few TTA providers who provide services around the country. The interviewees stressed that there

is high demand for more TTA providers, particularly those with years of expertise as violence intervention and prevention outreach workers who have experienced challenges and successes in this line of work. Interviewees frequently highlighted that TTA and program consulting could be a valuable professional development path for outreach workers who provided direct service for multiple years and are looking to transition from those positions.

Caseloads

Programs have different approaches to worker caseloads, based on their staffing capacities and the expectations of the workers. Most experts reported that outreach workers make at least one to two contacts with established program participants each week, in person if possible. However, each expert reiterated the value of consistency and quality of the contacts and relationships over quantity. Relationship building may require spending time not only with the program participant, but also with their family members, friends, teachers, probation or parole officers, community service providers, and others in the participant's network. These contacts may not occur during a 40-hour, Monday through Friday workweek, so programs need to account for flexibility in work shifts. Experts also note that participants' needs will vary over time; crisis situations will require more intensive mentoring and case management and more frequent contact. Programs must properly staff and manage caseloads so that participants receive consistent support, even at times when the outreach worker is tending to work-related emergencies, managing their own personal responsibilities, or taking paid time off.

Pay and Benefits

As with any profession, the pay and benefits offered by CVI organizations are key elements for the recruitment and retention of their workers. Unfortunately, the undervaluing of outreach worker efforts has significantly limited the pay and benefits that organizations can offer. Most of the interviewees had experienced funding challenges, such as working with meager budgets that come from grants with only one to two years secured at a time. These challenges hinder organizations from providing the pay and benefits their team deserves, not just as gainful employees, but as violence intervention *experts* who engage in dangerous, life-threatening work with minimal opportunities for upward mobility or successful transference of knowledge and skill to other professions. The pay ranges and benefits offered by organizations are contingent upon their operating budgets, so some organizations can offer more than others, but all lamented that their workers are not paid enough for the work they do. Adequate pay is also important to aid in retention efforts, as outreach workers can be tempted to return to fast-money lifestyles when faced with an income disparity between themselves and their mentees. The call to further standardize and professionalize the field of CVI cannot be answered until the pay and benefits offered to outreach workers begin to align with the dangers and significance of their work.

PAY. Nearly all CVI personnel are underpaid for what they take on in the name of community safety. However, the greatest significance of this devaluation lies with outreach workers, given the precariousness of their work and the value added back to the community due to their intervention. Additionally, though some interviewees have salaried employees, most outreach workers are paid hourly, and the pay is often too low to consistently attract diverse, quality workers with the potential to excel. One program manager stressed that wages as low as \$17 to \$18 per hour will attract only individuals desperate for employment, rather than those



committed to serving their communities through outreach work. Furthermore, if workers have previously been incarcerated, or have had legal battles over child support or financial debt, their checks may be automatically garnished, substantially shrinking their take-home pay. Numerous interviewees highlighted correctional fees and child support as major financial burdens that can serve as disincentives for potential outreach workers, whose legal employment comes with significant financial reductions.

Even with hourly pay, outreach workers are being significantly under-compensated relative to the hours they dedicate. Outreach work is not a traditional full-time job with a 40-hour workweek and eight- to ten-hour shifts. Rather, outreach work more closely resembles that of a surgeon, for example, who is always on call, regardless of the time of day (including weekends and holidays). Due in part to the nontraditional nature of the work, and the difficulty of accurately quantifying the value of relationship and trust building through casual conversation or simply being present, many of the workers' efforts go undocumented and uncompensated. Often, outreach workers are forced to shoulder additional employment to make up for the gap in pay; many struggle to make financial ends meet from month to month. This challenge can be mitigated if outreach workers are classified as salaried or exempt workers (assuming the salaries align with their value), alleviating the need to manage timesheets and providing the opportunity to account for their significant overtime. Increasing the pay for outreach workers will not only speak to the value of their work but also give them the necessary leverage to maintain an influence over the participants they mentor.

Engaging youth and young adults who are potentially involved in violence for little reward is already a taxing feat. However, tensions may be further exacerbated when the inequity of income becomes explicit between the worker and their participants. The influence an outreach worker can have over a participant is significant, especially as their mentoring relationship evolves. However, conflict can arise when participants begin to question how they are to learn from an individual in a worse-off financial situation than their own. One former outreach worker described how their influence was threatened when they were making \$18 an hour *“and driving my Toyota”* while their participant was annually earning six figures and *“pushing a drop-top Benz.”* Because influence is a key characteristic for outreach worker success, it is detrimental if influence is lost. Not only can participants lose faith in the advice of their outreach worker, but the outreach worker can also become disillusioned with the idea that they are better off on the “upside” of the underground economy. The temptations of financial freedom, coupled with their proximity to

former maladaptive behaviors, can motivate some outreach workers to return to old habits of making money. When faced with this tension, outreach workers should be able to seek support from administrative staff and personnel; however, funding for even supervisor and executive director positions is often meager as well, and programs are typically too stretched financially to offer emergency relief. Organizational staff is similarly underpaid, often earning hourly wages of \$18 to \$25 or an annual salary of \$32,000 to \$45,000.⁵¹ These estimates are representative of the pay offered even in major cities such as Los Angeles, Oakland, and New York City, where the cost of living is significantly higher than in other U.S. cities. Organizations managed by local government entities sometimes have the capacity to pay their outreach workers slightly more than do standalone community-based outreach organizations. While their pay still does not reflect the value of their work, interviewees working for city-led CVI initiatives reported that wages for their personnel have recently remarkably increased, after years of advocacy for higher wages for violence interventionists.

BENEFITS. For CVI experts, high-quality benefits are just as important as value-aligned pay. Many organizations have only recently been able to expand their health benefits to include features such as quality health or dental insurance, for example. However, health care benefits are usually deducted from workers' pay, further depleting an already meager salary. CVI organizations with larger capacities are able to offer additional benefits such as vision and life insurance, but no organizations described budgets for hazard pay. Given the nature of the work and danger that surrounds violence interruption, many CVI experts regret how inadequate life insurance, death benefits, and hazard pay are across the field. A program manager explained how outreach workers are being asked to traverse the same streets and engage with the same individuals that law enforcement is expected to manage, yet without any of the same protective gear or death benefits:

“We ask our intervention workers to go into the same communities, the same neighborhoods, the same streets, the same blocks to engage the same people that our law enforcement partners, the [police] will have to engage. But the [outreach workers] . . . go into those spaces without the protection of a badge, a gun, a bulletproof vest, and a squad car with emblems and bulletproof siding. Our folks only have their credibility. They only have their reputations to protect them, which is why it's important that we help maintain that. But law enforcement also has death benefits for family members. Now, God forbid that we ever have to lose someone to violence. We have lost folks to illness, which I think can also be correlated to the type of stress that they incur in the trauma that they absorb. But are we able to then offer death benefits to family members? . . . They don't have anything to provide to their families in case something happens to them. They don't have a union to protect them. They don't have high salaries that pay overtime. The inequity is just so stark. And yet they are expected to engage the exact same communities.”

INTERVIEWEE 10

Furthermore, there are few organizations that offer retirement benefits, stress leave, or self-care activities. Many interviewees expressed the need for paid time off (PTO) and the opportunity to disconnect from the work. Some organizations were able to offer only five to ten vacation days per year, while some programs operating within or in partnership with local government offered graduated PTO—offering two weeks initially and increasing after 5 or more years. Many experts in the field encouraged incentivizing outreach workers to utilize their vacation time because it can be difficult for them to disengage from the work. Emphasizing how hard it can be for these

outreach personnel to remove themselves from the work, one program director observed that they must be taught “how to vacation.” Others discussed the need to not only offer vacation time, but even require time away from the work in order for personnel to decompress, relax, and regroup:

“I think that programs should designate a week out of every quarter as a standard for workers to have vacation. Of course everybody can’t go on vacation at the same time, but there needs to be some charted-out schedules to say, ‘Okay, this first quarter, you’re going to be off this time. This person is going to be off at this time. This person going to be off at [that] time.’”

INTERVIEWEE 1

Trauma

“But you got to find people who you can bring into the field, who you won’t be making vulnerable and endangering their life too. So you got to find that needle in the haystack.”

INTERVIEWEE 5

Trauma is a complex issue in the field of CVI because it is ubiquitous among the program participants, the staff, *and* the outreach workers. CVI programs have been, by design, started and operated in communities that experience high rates of violence; virtually all parties involved are regularly directly and indirectly exposed to violent trauma and the toxic stress that comes from navigating structural racism, poverty, and myriad poor health outcomes. Outreach-based violence intervention carries an enormous risk of personal injury and death, as well; workers are keenly aware of other individuals—sometimes friends and loved ones—being killed on duty. Interviewees talked about the toll that this work takes, not only on physical and emotional health, but also on relationships with significant others, children, family members, and friends. Therefore, the necessary personnel, training, and support to implement trauma-informed and -responsive care must be provided to address not only the trauma of those still engaged in violence but also the residual trauma outreach workers bring with them, the vicarious trauma they shoulder from their clients and their own social networks, and the ongoing trauma that is inflicted due to the nature of their role.

RESIDUAL TRAUMA. Most outreach workers in the field today are formerly incarcerated individuals who were attracted to CVI due to their own lived experiences. With that in mind, organizational personnel must assume that many workers are entering the field with unresolved traumas and need resources and support to be successful in their role. Managing unaddressed trauma while engaging with similar triggers can catalyze a relapse for an outreach worker, which is a significant concern for the stakeholders surrounding this work and undergirds the hesitancy to fund CVI on a broader scale. Program directors stressed that organizations have a responsibility to address the trauma needs of their workers before sending them out into environments and situations that carry a great risk of trauma exposure.

VICARIOUS TRAUMA. Outreach workers with unresolved trauma are at high risk for experiencing vicarious trauma and compassion fatigue, according to a CVI field expert. Organizations must

prepare their outreach workers for the secondhand trauma they will inevitably experience working with their target population. It is imperative that outreach workers learn self-care strategies to not only manage their triggers but also help prevent burnout.

ONGOING TRAUMA. The turnover for outreach work is extremely high, attributed in part to ongoing trauma that accompanies the nature of violence prevention. Outreach workers who are actively engaged in violence interruption may witness a violent encounter, engage with involved parties at a scene, or learn of a violent encounter involving a participant or fellow worker. One program manager recalled their days in the field and described a period when approximately five men the manager knew were murdered, one right outside the program office.

“We have to really start being honest with ourselves about who we have doing this work, and really understand that if we don’t rehabilitate those doing this work, then we’re actually not helping. We’re doing more harm than we are good.”

INTERVIEWEE 2

Given the high levels of trauma and concern about the mental wellbeing of their staff, some organizations prioritize having counseling or access to mental health professionals as a benefit for outreach workers. Some have even hired in-house coaches or counselors to provide real-time, on-the-clock support for personnel. A program director explained:

“We’ve been pushing more, trying to provide for ourselves and for our network. We’re asking organizations to consider providing more [internal] training capacity and building more mental health supports to provide to their staff members.”

INTERVIEWEE 10

It should be noted that many individuals in community violence intervention, similar to residents in communities with high levels of violence, are unaccustomed and at times even resistant to the notion of self-care for mental health and wellbeing. Acknowledgment of trauma may be perceived by some as a weakness; interviewees even talked about some workers feeling that they were seen as “broken” or “unhealthy” by supervisors and leaders who introduced the topic of self-care to their employees. However, when outreach workers are able to see these skills applied, they find the training to be valuable:

“[Outreach workers] have to do trainings around vicarious trauma, secondary trauma, and self-care. They have to be made aware of those things for themselves. And then they also have to be trained on mental health and first aid. They found the mental health and first aid training to be really helpful. They found that it was helpful because as violence was increasing, they were able to determine when people were really having some type of psychosis, and they were able to consider that ‘maybe . . . I’m not the one tripping, this person might really have something going on, mentally.’”

INTERVIEWEE 10

CVI organizations must approach discussions of trauma and wellbeing with thought and care, engaging in open dialogue with their staff about any concerns or reluctance to participate in trauma-related conversations. They must also ensure that they have appropriate professionals readily available to respond, should such issues occur and induce distress.

“It’s a dynamic of the right people and right administration. You have to be able to handle and manage street outreach workers, which involves personalities just like anywhere else. Sometimes when they’re in a low spot, they go back to the street mindset and mentality of flexing, turf, this is my thing, this is our thing. And they’re just men and women who’ve been through a lot of trauma.”

INTERVIEWEE 14

Professional Development Beyond Outreach Work

Nearly every expert raised concerns about the length of time that outreach workers should be in their roles. The constant drumbeat of trauma, coupled with the ever-evolving nature of violence, can eventually lead to outreach workers feeling burned out, numb, complacent, or even less credible to those at the center of violence. Some interviewees explicitly stated that after five or so years, workers should be transitioning to other roles. However, the interviewees also noted that, frustratingly, there are few alternative job opportunities available to outreach workers, particularly those saddled with criminal records, minimal employment history, or both. A key feature of professionalizing the field of CVI is ensuring that outreach workers can leverage their time at the organization and transfer their learned skills and expertise into greater career opportunities. Investing in ongoing professional development for outreach workers demonstrates that their lifetime growth is as important as the evolution of program participants. Opportunities for upward mobility and increases in both pay and responsibility may also discourage relapse in the event of job loss, budget cuts, or burnout. Outreach-based violence intervention work is a demanding profession physically, spiritually, and emotionally. Therefore, outreach workers need to have attractive and viable opportunities accessible to them when they do decide to make the transition.

“[By having young people in training as violence intervention outreach workers], younger ‘outreach ambassadors’ are now being developed. So we have a pipeline of folks that are coming into it and becoming seasoned, being trained, and learning the work. And now they have a new kind of career path. It doesn’t mean that they can only go into violence reduction. They can go into life coaching and case management if they want. Sometimes they may want to leave this field altogether. They might want to go into public health because they really like the idea of connecting folks and being an advocate and navigating resources. So, I think it’s about developing pipelines. That’s another thing that we need to do better in our field: developing pipelines for growth and progression and promotion. That way, violence interrupters can progress as program managers, program directors, advisors, and even consultants.”

INTERVIEWEE 10

The primary purpose of professional development, as voiced by the interviewees, is to establish the core belief that outreach workers *“are professionals that deserve as much training and capacity building as any other social worker, clinician, therapist, or teacher.”* By aligning the health and social benefits of outreach work and violence intervention with those of other health or social service professions such as community health workers or formal peer recovery specialists, external entities such as grant funders and policymakers may be more likely to


appreciate the value that these workers bring to communities and cities and reward their organizations with larger, longer-term budgets.

Forms of professional development that interviewees suggested should be readily available to their workforce:

- Networking opportunities (e.g., conferences, seminars, panel discussions) are vital to expanding the career opportunities outreach workers are exposed to, and allow them to learn from values-aligned workers beyond their own cities.
- Management, leadership, or human resources training can help outreach workers develop skills to manage CVI programs or start their own community-based organizations.
- Certifications in life coaching or cognitive behavioral therapy, for example, can greatly increase the number of options an outreach worker has when they are ready to try something new.
- Subsidies for tuition reimbursement to complete degrees could facilitate specialized training in diverse areas that complement violence prevention expertise, including community health, sociology, psychology, fine arts, social work, and many more.
- Continuing education can fuel professional growth for outreach workers. A credential in their field of interest, coupled with their skills and knowledge of violence intervention, can prepare them for opportunities to lead or develop their own training/curriculum.
- Financial literacy education is significant because good money management could help individuals and their families achieve financial stability.
- Basic computer skills are often derived from learning how to organize work-related data for reporting purposes, but continuing to cultivate this skill can significantly increase access to myriad career opportunities.
- Professionalism workshops provide fundamental information for navigating organizational structures and hierarchies including and beyond CVI.

“There is an expiration date, I think, on some of this work, because it’s very demanding physically, mentally, spiritually. It’s hard on families. So we have to think about all these things now that violence prevention is a real, legitimate field of practice. How do we develop our craft while also developing our field to accommodate and meet the needs of folks who are going to be in this for the long haul?”

INTERVIEWEE 10



The primary purpose of professional development, as voiced by the interviewees, is to establish the core belief that outreach workers “are professionals that deserve as much training and capacity building as any other social worker, clinician, therapist, or teacher.”

CVI Program Participants

Identification and Recruitment

To determine whom to serve, most CVI organizations seek to identify individuals, rather than neighborhoods, that are most likely to experience violence. However, not all organizations utilize the same criteria because the nature of violence is both neighborhood- and context-dependent. It is imperative for all CVI organizations to be data-driven in their identification of the specific individuals or groups that may be at greatest risk of violence involvement; otherwise, they will be less likely to be successful at reducing violence in the community. Those data are obtained through various methods:

- **Community/Network contacts.** Community referral was the most popular mode of recruitment among the experts interviewed for this project. It was also considered the most effective. Interviewees repeatedly stressed that where violence is prevalent community members are keenly aware of who is most likely to engage in violence, so their knowledge is critical for program participant identification, as well as for perceived program credibility. Additionally, community partners are likely to personally know individuals who would benefit from the program services and resources. Being able to receive warm introductions from those partners, rather than having to try to build relationships from scratch, can increase the probability that an individual is willing to give the outreach worker a chance.
- **Law enforcement/Court system.** Referrals from law enforcement, probation, and parole offices, as well as from social or family services, are some of the most prominent modes utilized for participant recruitment. Law enforcement may actively refer participants to the program, depending on their proximity to and relationship with the CVI organization. Furthermore, data from police or the criminal legal system are usually used for program analyses to determine where violence is occurring and who may be involved. Program directors can request relevant data from law enforcement entities to help identify individuals, geographic locations, or times of the day or week with elevated risk of violence. However, it is important to note that not all violence is reported to police, and community intel is often needed to supplement police data and create a fuller picture of the places, individuals, and motivators at the center of violence in a given community.
- **Hospitals.** Some programs partner with hospital systems to receive data on and recruit violently injured patients, including those in incidents that are not reported to police.
- **Schools.** In places where CVI organizations have established relationships with schools, education professionals and administrators provide crucial information to CVI mediators and peer supporters when conflicts arise, or violence impacts the students' lives.

- **Database/Research lab.** As the field of CVI evolves, the methods of recruitment do as well. Some organizations are partnered with research labs and evaluation teams that can assist with identifying appropriate participants. The development of a predictive analysis database allows them to consolidate police, hospital, and a plethora of other data points to inform organizations on who may be ideal for intervention.
- **Voluntary participation.** Although not as common, some program directors described instances in which participants join the program on their own initiative. These voluntary referrals were usually the result of word-of-mouth reports by a family member or friend who was able to achieve stability and risk reduction through programmatic engagement.

Because of the dual social and spatial concentration of violence, CVI organizations tend to focus their efforts on people within specific neighborhoods or who congregate in particular areas of the community. Thus, capacity is driven not only by the number of people the organizations seek to serve, but also by the geographic territory to be covered. Program catchment areas vary, with some programs expecting their workers to be responsible for a small number of city blocks and others covering miles.

Program Participants' Service Needs

“Most—over 90%—of our participants have had a family member lost to violence, to incarceration, or to the criminal justice system. Most of our participants have been victims of shootings, stabbings, or assault . . . those are the ones that are reported. We actually believe that number could be as high as 90 or 95% including unreported cases. On average, they have seventeen or eighteen arrests, four to five felony arrests, and 60% of them have done prison time. Then 80% of them have only completed a 10th-grade level, but they’re reading at the fifth-grade level. And 80% of them are also couch surfing . . . they’re [in] unstable housing, so nearly 20% of them by definition are homeless.”

INTERVIEWEE 4

Regardless of individuals' path toward program participation, as previously mentioned, violence is rooted in poverty and layers of trauma. This association is evident at the population level, and it was reiterated by each of the experts interviewed for this project. Structural violence—continued community disinvestment, untreated trauma, the ever-present threat of police and incarceration, consistent exposure to community-level violence, and restricted access to healthier, safer, and more stable living—breeds cycles of interpersonal violence, such that the services needed to support participants require a trauma-informed approach. It is critical for program staff to be capable of identifying triggers and to understand that an angry or disrespectful outburst, or even a discussion about violence intervention, may be enough to elicit a trauma response. A program director elaborated on this point, using the example of a conversation the director had with one of the program's managers following a non-project-related meeting between the manager and Dr. Buggs:


“When [Dr. Buggs] connected with [manager's name], for example, I had a follow-up with [the manager]: “How was it? What'd you do? How's this going?” I did the same thing with all of our staff. And so it's really critical that we do that because sometimes the questions that [outreach workers] are being

asked trigger certain things. Same thing for participants. So when we take them to a workforce experience, when we're teaching them something, when they're acting out, when they're telling you to go fuck yourself, the team [can] receive [and] accept that. They can understand what happened to cause a person who typically might come three days a week to all of a sudden tell you what he just told you? Did we just ask them to do something that just felt really uncomfortable, or that made them feel that they didn't have what it took to do that? So how do we unpack that? We train staff around motivational interviewing. We train staff about the delivery of the CBT curricula. We train people on self-reflection. We create spaces on Fridays for our staff to have time for themselves to decompress, process, and unpack. Especially when we've had several dozen of our participants killed since the beginning of this program four years ago."

INTERVIEWEE 6

Mentorship and life coaching are the most universal service offerings of outreach-based CVI programs. Staff in these positions are responsible for providing daily guidance, motivation, encouragement, and advice on everyday life situations; they are ideally available as dedicated personnel in addition to outreach workers or violence interrupters, but for small or burgeoning programs, mentorship and life coaching are embedded within the outreach worker's job expectations. Programs are dependent upon the mentor's or life coach's ability to connect with individuals at the center of violent conflict and to coach, support, and lead them to ultimately make life choices that reduce risk of violence victimization or perpetration. Mentorship and life coaching must be consistent to be successful; interviewees underscored that trust can be built and maintained only if the outreach workers are reliable and dependable every time they are needed by the client, even if the client expresses resistance or even anger towards the persistence of the worker. For most experts, this can mean being available at 2 a.m. if the client calls, regardless of engagement history. Some programs provide training on motivational interviewing, mentorship, or life coaching. Other programs explicitly hire program staff with relevant prior training and experience into those positions, while still others simply encourage workers to provide mentorship organically and informally to program participants. Regardless of how these services are trained or provided, they are seen as critical to violence reduction.

Case management is another service that experts view as paramount to successful program participation, because case managers are essentially the service connectors. Case managers generally assist clients by working closely alongside them to identify and resolve needs, whatever they may be—obtaining a birth certificate, attending a court hearing, making an appointment to visit a health care professional, etc. Case managers may also facilitate referrals to and



Some organizations prefer to have a case management and/or life coaching team, rather than requiring outreach workers to manage this task while also performing other duties such as violence interruption and conflict management.

relationships with community service providers who can support clients with more complex needs, such as housing assistance, job training programs, and legal aid. Challenges with case management can arise when one participant requires significantly more attention than others. For example, if a participant is involved in or adjacent to a violent act, or has a complex need, they may need more dedicated time from their assigned outreach worker or assistance from other case managers or outreach workers. A program director explained:

“We’re looking at an average of ten per caseload, and all it takes is one person to have his brother get shot, or his best friend get shot. Now you have a caseload of ten individuals, but you have one individual who really requires some significant amount of your time. So how do you manage that? How do you make sure the other nine don’t [suffer]? Because now you’re focused on making sure there’s a dire need met . . . There has to be a balance where you’re making your presence felt, but you’re also not neglecting any participants.”

INTERVIEWEE 13

Some organizations prefer to have a case management and/or life coaching team, rather than requiring outreach workers to manage this task while also performing other duties such as violence interruption and conflict management. This desire was motivated by different reasons. Some programs found that, as their budgets grew over time, they preferred having specialized roles to better align skill sets with program needs. For example, one interviewee noted that individuals with case management backgrounds are more effective at documenting mentees’ case management-related details in a database than their outreach workers, who largely deemed tracking case details as unnecessary or inappropriate, given the sensitive nature of worker-client interactions. Others noted that case managers might be better equipped than some outreach workers, given different requirements for where and how they spend their time, to build strong relationships with the community-based service providers who can support the clients and the workers. Nevertheless, case managers and life coaches are expected to be as trauma responsive and compassionate towards clients and violence intervention work as the outreach workers, recognizing that some clients and workers require more frequent contact and intensive support.

“People really valued the coordination across strategies because we have a lot of different strategies and interventions, it didn’t always happen effectively or often enough across the board. So we had violence interrupters who were siloed. The best outcomes seem to have resulted when life coaches worked with clients that were involved in an incident that the interrupter responded to. So, there was some communication there. And then life coaches were connected to employment agencies that have customized programs to work with this specific population and know how to hold on to them and engage them.”

INTERVIEWEE 10

While not every individual at high risk of violence involvement is simultaneously experiencing financial distress, poverty and financial instability are perennial challenges that outreach-based CVI programs encounter with their clients. Most interviewees pointed to the need for emergency funds to be able to assist clients with money for rent, security deposits, apartment furnishing, childcare, utilities, legal fees, transportation, or even food and clothes. When funding is available,

some programs give their outreach workers per-client budgets of around \$100 per month for emergency expenses. Programs with the administrative support to secure and manage discretionary accounts may be able to occasionally help clients with expenses such as utility bills or down payments for apartments.

Housing insecurity was noted by interviewees as a common concern of program participants. Housing needs were discussed in two ways. First, participants were frequently unable to afford stable housing, which, related to financial insecurity, sometimes drove their continued participation in underground economies. Also, interviewees commented that, during periods of escalated conflict, participants and their families needed emergency relocation to safe and discreet housing. Some organizations assuage these burdens through rent stipends or hotel vouchers, while others attempt to secure temporary and permanent housing accommodations. Providing these services can be extremely difficult and expensive, however, if the organization does not have the appropriate connections with relevant community partners and funders.

Most CVI organizations prepare participants for potential job placements by focusing on various aspects of skill building and job training. This also includes support for studying for and passing the General Educational Development (GED) test, completing high school or college, or achieving other educational goals. Securing gainful employment is a significant milestone for any program participant, regardless of whether employment is a primary focus of the organization. CVI organizations that do specialize in job placement, however, tend to have their participants matriculate through the program in a systematic manner to encourage long-term success. By providing opportunities to identify and nurture their interests, acquire specialized skills, and engage with professionalization strategies, organizations prepare participants to transition from subsidized to permanent employment.

Additionally, nearly all interviewees spoke of the value of “transformational travel” or the power of exposure. Some outreach-based organizations view the opportunity to take their program participants and program personnel on nature hikes, field excursions to bodies of water or mountains, sporting or cultural events, or even international trips, as critical to help open minds and broaden horizons. Interviewees remarked that most of the individuals they serve and those hired as outreach professionals have had severely limited opportunity to simply enjoy moments of life without the burden of constantly looking over their shoulders, worrying about some stressor, or being surrounded by reminders of poverty, disinvestment, and trauma. To many of the program directors interviewed, these experiences are just as important as the immediate service provisions, because they offer hope and different outlooks on life. Some organizations even aim to take rivals together on these trips with the intent of breaking down perceived barriers between youth or young adults and remind them of each other’s humanity. Of course, to safely realize this objective requires significant trust building, planning, risk and timing assessment, and thoughtful care by the organization.



Program Funding

The CVI organizations interviewed for this project have annual operating budgets of \$500,000 to \$3,000,000. Apart from one, all depend primarily on grant funding, with renewal requirements every one to two years to support their work. The grants generally come from city, state, or private funders; one organization has been able to secure federal grant funding in the past. All program leaders expressed distress about ensuring that they obtain adequate money to pay their personnel on time and not let down their staff or the program participants due to funding cuts. Numerous interviewees described having significant worries about losing funding for their outreach workers; while most stated that the stability of funding has improved in recent years, there is still deep concern about the consistency of funding. The regular threat of losing funding, coupled with the low budgets available for pay and benefits, makes it difficult to attract and maintain quality program personnel, as well as demonstrate to program participants that workers can reliably deliver on promises to show up and support. Sustainable violence reduction cannot be achieved when the people asked to contribute to that reduction are in regular fear of losing their jobs and struggling to support themselves and their families.

Additionally, grant writing takes substantial amounts of time and energy away from focusing on program service development and participant engagement. A few programs have hired grant writers and administrators as core personnel within the program, but this evolution came after years of struggling to successfully secure and manage grants without the administrative staff in-house, as well as concerted advocacy to get funders to invest in administrative support. Experts commented that, given the realized life-saving value that CVI programs bring, cities need to include CVI funding as a line item in annual budgets and significantly decrease the barriers to applying for grants and meeting grant administration requirements.

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Relatedly, program leaders talked about the constantly looming threat of negative publicity potentially compromising opportunities for funding. One interviewee noted that “just two out of one hundred participants or workers” re-engaging in violence or illegal activity can threaten a program’s reputation and, thus, its funding. Furthermore, if organizations are successful in mediating conflicts and reducing violence, they may be in danger of having their budgets reduced because funders perceive a reduction in need and productivity. The irony that police do not experience the same fragility in funding—and even that many cities spend millions of taxpayer dollars annually on settlements and lawsuits related to police misconduct—was not lost on several interviewees.

Data Management and Program Evaluation

Tracking success through data collection is a necessary but complicated task. It is necessary for several reasons. First, tracking progress for reports is often required by grantmaking agencies. Second, data can help inform programs as they strategize internally to identify areas of success and opportunities to better serve clients through operational improvements. Finally, collecting data is important to communicate the impact of a program's work and support sustainability efforts. There are various kinds of activities that may be tracked in the collection of data. These include the collection of data on participant progress, as well as the collection of other forms of data on the organizational level.

For organizations seeking to track success for individuals, metrics include:

- Frequency and quality of engagement with the program, measured through metrics such as program attendance and interactions with outreach workers
- Progress in various aspects of life, including searching for or securing employment, registering for and attending school, or obtaining birth certificates, social security cards, or licenses
- Positive changes in behavior and life outlook, considered through various elements of decision-making that reflect new approaches to conflicts or challenges (keeping in mind the significant length of time within which it is reasonable to anticipate these changes)
- Progress with soft skills, such as increasing timeliness or reliability for showing up for appointments
- Reduction of negative outcomes, including police contacts, arrests, or recidivism (although several experts cautioned that police- or court-related data may be misleading because of already-elevated levels of surveillance in these communities and of this population)
- Reductions in violence engagement, whether through self-report or community intel
- Improved safety of participants, including successful relocations or other measures

Tracking progress should be consistent and ongoing, involving check-ins with participants to discuss, encourage, and document their progress. These meetings may include an outreach worker alongside other individuals, including life coaches, clinicians, and education or employment mentors. Progress is also documented as case managers follow up on referrals and appointments with outside service providers to ensure the clients are receiving expected support.

For organizations seeking to measure their overall effectiveness, including reductions in community violence, metrics include:

- Time spent building relationships, through “touches” between participants and outreach workers
- Time spent attempting contacts with participants and their networks
- Outreach worker responsiveness, including the frequency, response times, and locations of workers' rapid response to incidents of violence (Organizations may also

try to quantify how rapid response, compared to no response, may have prevented retaliatory violence, though this is difficult to measure consistently and accurately.)

- Community engagement efforts, measured by number, size, and attendance of awareness activities, vigils, peace walks, and events such as block parties or neighborhood sports tournaments
- Number of collective mediations within a specific period related to potentially lethal conflict and their outcomes (Here, too, it is difficult to measure activities or define success, particularly due to the subjectivity of how long a non-aggression or peace agreement needs to last for the mediation to be considered a success.)
- Effectiveness of partner referrals, including the number, type, and outcomes of the referrals
- Community perceptions of safety following outreach engagement
- Number of violent incidents occurring within the program's catchment area, with attentiveness to what kinds of violence could have been prevented within the purview of the program model

Tracking and reviewing data related to violence in their community helps CVI organizations know which demographics are at the highest risk of violence involvement and how to engage them. For example, an organization may aim to make sure that its staffing makeup matches the demographics of the population it seeks to serve. Also, following data can help an organization strategize about the intensity of relationships in terms of frequency of contact and length of time that they stay engaged. For example, one organization noted that, for some participants, contact tends to be more regular at first and then tapers off, leading the organization to strategize forms and frequency of contact later in the relationship to prevent total loss of communication. A CVI expert explained,

"We expect our credible mentors to at least touch base or make an attempt to contact these individuals daily at minimum even if it's just a minor, quick check-in, see how they're doing, to make sure everything is going okay. But of course the intent behind this is to show genuine concern and to develop the relationship, even in a case where there was already a relationship, but it wasn't a deep or meaningful relationship."

INTERVIEWEE 13

For various reasons, many outreach workers are reluctant to collect data around their work. A focus on data entry may feel unethical or unnatural when the central aspect of work is relationships. Furthermore, it may be perceived as a breach of trust or of social codes, and outreach workers may be skeptical about who will have access to the information. There are legitimate concerns about whether workers could be subpoenaed for their documentation. Some experts even spoke of workers being wary of their supervisors negatively judging interactions and engagement strategies based on documented activities. One program director described a host of outreach workers' concerns in a single response:


"You might be surprised to hear that some of our best workers and some of our most sincere workers are the ones from whom you will get the most pushback when it comes to collecting data. They feel like they're not in it for this, they're really in it because they love these kids. It's a relationship, [like documenting in a journal after a date] . . . but I'm telling them to show

this to someone else, send it to an evaluator to evaluate. And then, of course, all the codes of the street create suspicion. 'Who's going to read this? They're sharing intimate things with me that could get them in trouble.' They're also working with a level of distrust, and we tell them that if it's not documented, it didn't happen. Documenting data is a key component to us receiving adequate funding, so you would think that would be a motivation for them, but that's sometimes even worse. It's like, 'So, we're helping them only for the money?' I think one of the things that is often a barrier breaker is to just ask them, 'What if you had a regular nine-to-five job, and you had to provide for your family and your household with your nine-to-five job, but then after you got off work, you had to do your community service? How long would you last doing it like that? You're in a position now where you've actually embarked upon a possible career move and you can get paid for your services. And, again, I know you're probably not doing it for the money, but it's much easier when this is your job, and you can actually provide for your family, and also help your community in the same breath, on the same note, in the same actions.' Sometimes that's the barrier breaker in regards to them understanding how important it is to collect the data, to document things that may be helpful later on down the line."

INTERVIEWEE 13

To counter these skepticisms, organizations should be completely open and transparent about how the data will be used, who will have access, and how concerns about data entries will be handled. The following strategies for consistent and effective collection of data were offered:

- Have frequent and open conversations about the need for data collection and the ways in which it can benefit program participants and workers, as well as the organization.
- Listen to and address concerns that workers may have about documenting interactions with clients.
- Identify and discuss with workers strategies for protecting identities and sensitive information, including legal protections from subpoenas.
- Do not assume that workers are savvy with technology or have literacy or writing skills that meet reporting or tracking needs.
- Normalize a necessity for guidance, training, and coaching employees to be successful at documentation.
- Require data collection as a part of the job of outreach workers, rather than leaving it optional.
- Carve out time specifically for data entry, either daily or at the end of the week, and offer support to align program expectations with data entry activities.
- When possible, utilize data entry applications that can be accessed on phones and tablets so that notes can be quickly entered while workers are away from the office.
- Protect sensitive data through cybersecurity practices.
- Hire a part-time data consultant, or even hire an in-house data manager if funds allow, to support data collection efforts and help increase tracking success.



To counter these skepticisms, organizations should be completely open and transparent about how the data will be used, who will have access, and how concerns about data entries will be handled.

Data Limitations

Most CVI organizations agree that quantitative data, particularly data solely from police or the criminal legal system or that just counts program inputs and outputs, has limitations in its ability to measure program impact, even though funding often is contingent on quantitative analysis of violence outcomes or inputs/outputs. Program leaders emphasize that quantitative metrics alone are inadequate in capturing progress of the participants that aligns with the programs' theory of change, or the participants' and programs' needs; this issue is compounded by the challenges of collecting and analyzing data discussed earlier. Organization leaders emphasize that the efforts of their programs can be more fully captured when narrative is incorporated into activity tracking. One interviewee noted, and many agreed: "the magic is not *shown in data reports*." Interviews and focus groups are two forms of qualitative research that can better incorporate narrative into program evaluations. Many organization leaders suggested that having a critical eye and taking an active role in developing useful tools and measures could help quantitative studies be more representative of their work.



Program Evaluation

Independent program evaluators are valuable to CVI organizations because they can help to not only objectively examine and communicate a program's overall success, but also support the program in identifying ways to improve its effectiveness. However, evaluators of CVI programs must have cultural awareness and humility to understand how to evaluate violence intervention efforts, particularly those that rely so heavily on relationships and intangible support. Academic research has yet to fully conceptualize or fairly and adequately assess community violence and intervention programs. Organizers suggested that when evaluating the role of intervention workers academics should build relationships with key leaders of intervention work and then partner together to develop evaluations that better align program objectives with evaluation measures. It is also very important that funders and evaluators resist waiting to bring evaluators to the table only after a program is up and running, rather than during the formative or implementation stages of the program's conception. Having evaluators engaged early on allows program leaders and evaluators to co-design documentation and evaluation plans. Collaboration between evaluators and experienced CVI leaders to help shape and develop evaluation tools can create a cross-learning experience in which buy-in from CVI leadership means unlocking doors for more meaningful forms of analysis.

Recommendations

As this report has illustrated, community-based violence intervention is extraordinarily challenging and complex. However, current and future efforts to strengthen, expand, and enhance our understanding of CVI-based approaches can and should be guided by the deep and grounded wisdom of practitioners who for years have been implementing these approaches and living through these complexities. As CVI funds become available from federal, state, and local investments, and as violence continues to harm individuals, families, and communities at disturbing rates, there is an urgency around implementing and scaling CVI efforts. This report hopefully helps to illuminate the need for investing in the internal infrastructure, as well as the support organizations, that will help to ensure the success of CVI programs. Additionally, there are a few individuals and organizations that have provided formal or informal CVI training and technical assistance (TTA) to cities around the country, but those entities' capacities are severely dwarfed by the need to create new programs and grow existing ones. The TTA organizations that have been engaged in designing, implementing, and supporting CVI programs need resources to build their capacity and further standardize their TTA offerings. There also needs to be additional funding made available to leverage the knowledge of experienced CVI trainers, outreach workers, leaders, and personnel by training and employing them as trainers, technical assistance coordinators, and advisors. Building the field of CVI TTA providers, subcontractors, and consultants through the professional development of experienced workers would greatly facilitate learning and implementation efforts.

The following stakeholder-specific recommendations are offered for those who wish to begin, augment, and/or expand outreach-based CVI program operation and implementation:

All Stakeholders:

- Approach CVI with the intention of building and sustaining it as an essential element of safety and opportunity.
- Conceptualize CVI as a centerpiece of civilian infrastructure that can shoulder some of the burdens now left almost entirely to law enforcement agencies.
- Leverage the expertise and lessons learned of outreach workers and leaders in cities around the country who have been doing outreach and CVI program implementation for years.
- Develop and strengthen the infrastructure to support the outreach-based CVI workforce, including attention to their physical, mental, and psychological wellbeing.
- Build connections and capacities of community-based organizations and providers that offer specialized resources and services that can disrupt cycles of violence.

Government Funders and Policymakers:

- Make CVI funding a permanent line item for the jurisdiction's public safety budget, demonstrating a commitment to CVI as an integral component of community safety and a complement to traditional public safety approaches.
- Establish a sustainable funding stream for CVI, such as through tax revenue.
- Extend grant funding periods for CVI programs to 3-5 years, including at least 12 months for planning and relationship building prior to implementation.
- Facilitate creation of memorandums of understanding across city agencies to increase data sharing that directs CVI activities based on estimated number of individuals at risk of violence involvement and known needs within that population.
- Base programmatic budget estimates on data—expected number of people to be served; number of outreach workers, case managers, supervisors, and additional personnel to serve that number; catchment area coverage; and costs to ensure living wages and comprehensive benefits of CVI professionals.
- Provide funding for the development of best practices in worker wellness and mental health support.
- Increase the time period between funding solicitation announcements and application deadlines to allow programs more time to identify grant writers and administrative support.
- Restructure contracting processes to ensure advance payments for services, rather than relying on reimbursement, given that smaller CVI programs may not have the start-up resources to pay program personnel and partner organizations while awaiting grant funds.
- Fund process, outcome, and impact evaluations and cost-benefit analyses of CVI approaches that produce new measures of programmatic success.
- Incentivize authentic collaborations between research partners and CVI organizations throughout program design and implementation steps.



- Direct law enforcement partners to account for CVI as a necessary public safety component.
- Communicate expectations from highest levels of government that law enforcement is to coordinate with CVI leadership on high-level strategy and create space for CVI to operate safely and with integrity.
- Align expectations of anticipated program outcomes with structural and environmental realities.
- Increase public awareness of the importance of CVI approaches via communications and media campaigns, and highlight CVI successes.

Private Funders:

- Extend grant funding periods for CVI programs to 3-5 years, including at least 12 months for planning and relationship building prior to implementation.
- Provide funding to pay for emergency expenses such as relocation assistance, intensive mental-health or therapeutic treatment, or basic needs.
- Utilize more flexible funding requirements to support financial needs beyond standard programmatic operation expenses, such as for data collection and infrastructure, convening spaces, funds for transformative travel and exposure visits, administrative support, worker wellness benefits, and increased pay.
- Invest in CVI innovation, including demonstration and pilot projects that apply experiential knowledge to new programmatic ideas, including models for young girls, women, LGBTQ+ individuals, and immigrants.
- Fund process, outcome, and impact evaluations and cost-benefit analyses of CVI approaches that produce new measures of programmatic success.
- Fund internal capacity building of CVI organizations, community partners, and service providers to advance stronger CVI collaborations between outreach providers and other forms of social services.
- Facilitate development of both recruitment strategies for new CVI practitioners and professional growth opportunities for existing personnel, via initiatives such as train-the-trainer programs and continuing-education pathways that help build workers' transferable skills as they gain experience in violence intervention, conflict mediation, case management, mentoring, life coaching, community health work, and peer counseling.
- Invest in innovative strategies in harm reduction related to violence intervention, such as those that offer opportunities to individuals not fully ready to commit to total lifestyle transformation as a way to draw them in and allow them to see themselves in a safer environment with a better future.

Community Partners:

- Recognize the importance of relationship building, trust, and transparency in developing partnerships with CVI organizations.
- Institute trauma-informed training for personnel that collaborate with CVI programs to help them better understand how to support the population.
- Jointly seek funding with CVI programs to secure resources that can build

organizational capacity and infrastructure to expedite service provisions for program participants in need.

- Explore opportunities to responsibly share data and information in a way that allows for better integration of care across service providers.
- Hold elected officials and community leaders accountable for investing in community empowerment and development efforts beyond CVI programming.
- When possible, act as intermediaries, supporting financial administrative needs for emerging CVI programs or service providers that do not have the internal capacity to manage grant applications or requirements on their own.
- Determine best practices to further engagement, build relationships, and develop effective pathways between CVI programs and schools, afterschool programs, and youth development organizations to help intervene early with emerging youth who have or may develop elevated risk of violence involvement.
- Implement hospital protocols and/or hospital-based violence intervention programs that allow CVI professionals to gain expedited access to violently injured patients as they arrive at the emergency room or trauma bay, in order to quickly address concerns of retaliation and begin assisting with immediate needs related to safety and health.
- Advocate for CVI programs and partnerships to help maintain buy-in when local leadership changes occur and to sustain political will and support.

CVI Program Leadership:

- Prioritize the physical and mental safety of all program personnel.
- Demand sufficient training and team-building time prior to implementation, living-wage pay, comprehensive benefits, adequate paid time off, and therapeutic supports for all workers, especially outreach staff.
- Use data to drive hiring needs, recruitment efforts, and program partnerships, including information from law enforcement, community partners, and residents.
- Diversify CVI staff to meet the needs and experiences of program participants and personnel.
- Develop supervisors and managers through leadership trainings and professional networking opportunities.
- Normalize mental health care and healing in the workplace.
- Plan team-building activities and have regular relationship-building check-ins with personnel for mentorship, coaching, and addressing performance concerns.
- Establish communication and procedural policies that reflect trust, transparency, and consistency as values paramount to the organization's success.

- Discuss data-collection and program-tracking needs candidly with workers, directly addressing concerns about confidentiality, expectations, and support for documentation.
- Develop plans for continued education and professional development for workers.
- Create staffing models that properly account for paid/sick time off and personal emergencies.
- Partner with TTA providers with expertise in CVI and establish ongoing TTA plans, versus one-time trainings.
- Seek champions of the CVI approach within city hall, county agencies, and law enforcement leadership.
- Foster and promote non-antagonistic interactions between CVI personnel and law enforcement.
- Celebrate your CVI personnel and cultivate an environment of support and appreciation.

Researchers and Evaluators:

- Spend time building authentic relationships with and listening to experiences of program personnel at all levels.
- When possible, engage programs early in their development about research and evaluation collaborations.
- Apply principles of community-based participatory research and trauma-informed research when engaging with CVI program leaders, outreach workers and personnel, program participants, and community partners.
- Co-produce with program leaders metrics of participant progress and program success that go beyond crime statistics, that focus on harm reduction, and that prioritize community health and wellbeing.
- Conduct thoughtful evaluation, capturing program nuances and variations in implementation and execution of the model.
- Facilitate the creation of theories of change and logic models across the varied CVI program models and approaches.



Conclusion

“Don’t look at what they’re running to. Look at what they’re running from. When you look at what they’re running from and you help them address it, you can get them to run somewhere else. They’re running to death, they’re running to incarceration, they’re running to early fatherhood, they’re running to violence, they’re running to alcoholism, drug abuse. They’re running to that, but where are they running from? We have to focus on what they’re running from to redirect where they’re running to. We have to give them a place to run to that is going to allow them to thrive and that is going to keep them from incarceration, that is going to keep them from the cemetery, that’s going to keep them where they can have a stable and productive life.”

INTERVIEWEE 5

“We’re good. We work with failure. So getting people out one by one is like trying to get the wounded out, but we have too many people who are coming into the field one day that are going to be wounded, and we need to start drying this supply. And that’s different systems than us.”

INTERVIEWEE 13

The interruption of violence requires societal change at every level, beyond just supporting individuals. On a societal level, it requires a realization that the systemic abandonment of Black and Brown communities has created the conditions in which violence flourishes today, and we must shift our default response to that violence from logics of retribution and control to responses that more fully address that abandonment with humanity and dignity if we hope to break the cycles of violence. At a community level, shifting values needs to be accompanied by creating infrastructures to protect lives through access to resources and opportunities. It is only within these contexts that the will and capacity to transform violence can be effective through outreach-based CVI efforts.

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