Project Report:

Community-Supported Violence Prevention Strategy:
A Contextual Assessment of Drivers of Community Violence

Institute On Social Exclusion (ISE)
Adler School Of Professional Psychology
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Abstract

The Community Violence Prevention Collaborative (CVPC) was designed to act as a catalyst in building collective efficacy among community residents to mobilize, organize, and reduce violent behaviors toward youth, adults, and seniors. The Adler School of Professional Psychology partnered with the Quad Communities Development Corporation (QCDC), in collaboration with Washington Park Consortium, South East Chicago Commission, and Chicago Area Project, to conduct community research to identify individual, community, and societal factors that contribute to high levels of violence and use this data toward creation of a violence-prevention strategy. Targeted communities included Chicago neighborhoods of Grand Boulevard, Kenwood, and Washington Park.

Ten community residents were recruited to conduct the assessment. The Adler team’s goal was to equip community residents with the capacity and knowledge to assess the risk and protective factors of violence, and develop violence prevention and other strategic initiatives, independent of outside direction. Additionally, a fundamental value that underlies this process was that strategies should emerge organically from the concerns, viewpoints, and ideas of the community stakeholders. The assessment was intended to give a broad snapshot of the strengths and opportunities that allow for the formulation of a plan to address identified concerns. It is a community-based model designed to involve as many components of a community as possible.

Recommendations from the assessment included a need to increase community/police partnerships, improve civic awareness, build capacity of existing programs and services, and increase scope of existing programs and services to fit the needs of the communities. These recommendations will be used by the CVPC partners as they develop and implement a truly community-supported violence prevention strategy.
Introduction

Violence is a leading public health concern in the United States in general, and the city of Chicago in particular. Chicago has experienced a decline in homicides over the past two decades, with a 46% average decrease in murder victims from 1992 to 2012 (Chicago Police Department, 2013). For several of Chicago’s South Side neighborhoods, however, violent crime has actually become more common as homicide rates increased from about 1.5 times the city average in the early 1990s, to 3-4 times the city average in the time period from 2008-2011 (Hertz, 2013).

These disparities suggest that violence is not randomly distributed. Racial segregation is vital for understanding these pronounced ecological differences and the distinct crime patterns that characterize predominately White or Black areas. The association between race and poverty implies that minority group members are disproportionately isolated in areas where economic, educational, employment, and public service resources are markedly lacking. Research suggests that what drives violence in segregated communities is not that racial groups are living in geographically distinct areas (which they are), but that the areas occupied by Blacks are disadvantaged in several respects to those occupied by Whites (Logan & Messner, 1987). Cities with high levels of segregation are likely to see concentrated areas of poverty as the most impoverished residents find the more affordable housing options in predominately or completely minority neighborhoods (Akins, 2009). These conditions lead to health disparities among community residents, which influence the rate of violence in these neighborhoods.

Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity (World Health Organization, 1948). Though health is largely thought to be biologically based, approximately 80% of health outcomes are impacted by forces outside of the individual body (WHO, 2008). These forces are known as the social determinants of health. According to the Centers for Disease Control (CDC), social determinants are “the complex, integrated, and overlapping social structures and economic systems that are responsible for most health inequities. These social structures and economic systems include the social environment, physical environment, health services, and structural and societal factors” (CDC, 2009). Social determinants of health are shaped by the distribution of money, power, and resources throughout local communities, nations, and the world. Residents of communities that have limited access to quality education and employment opportunities, high levels of racial segregation, or concentrated levels of poverty are more likely to experience inequities in health outcomes than those that live in communities without such issues.

The same social determinants that shape health—including education, income and wealth, and related conditions where we live, learn, work, and play—are also strongly linked to violence, and considering those links can contribute to understanding why some communities are more affected by violence than others. Although racial segregation is a feature of American society that may only change with time, investment in segregated communities, particularly investment in the stability of institutions, may diminish the harmful effects of segregation, including violent crime, on affected populations (Akins, 2009).

Over the past 30 years, violence has been regarded as a serious public health problem in the United States. Youth violence rates in the U.S. are high, with homicide being the second leading cause of death among those who are 10-24 years of age (CDC, 2009). The negative consequences of violence are experienced most directly by individuals and families, yet a growing body of evidence
indicates that indirect exposures to community violence have health consequences as well. Perceiving one’s neighborhood as dangerous and hearing about violence in the community is linked to worse psychological health (Fowler, Tompsett, Braciszewski, Jacques-Tiura, & Baltes, 2009). Among residents in urban low-income neighborhoods, those who witness violent acts are more likely to report symptoms of anxiety and depression than those who have not witnessed violence (Clark, Ryan, Kawachi, Canner, Berkman, & Wright, 2008). Stress related to feeling unsafe in one’s neighborhood can have adverse health effects throughout life, and may even influence subsequent generations. Some studies indicate that neighborhood violent crime rates are strongly linked with adverse birth outcomes such as preterm birth and low birth weight, even when individual-level risk characteristics are taken into account (Masi, Hawkley, Piotrowski, & Pickett, 2007; Messer, Kaufman, Dole, Herring, & Laraia, 2006; Morenoff, 2003). Adverse health effects among youth include post-traumatic stress disorder symptoms, aggressive behavior, sexual risk-taking, problems with eating and sleeping, and increased likelihood of alcohol, tobacco and marijuana use (Fowler et al., 2009). The effects can be particularly damaging for children who have been chronically exposed to violence, especially when the violence involves people they know (Lynch, 2003).
In collaboration with the Governor’s office, the Illinois Criminal Justice Information Authority (ICJIA) provided Quad Communities Development Corporation (QCDC) with a special projects grant. QCDC, in collaboration with three other organizations, Washington Park Consortium, South East Chicago Commission, and Chicago Area Project, were charged with an initiative to conduct community research and activities that identify individual, community, and societal factors that contribute to high levels of violence. The initiative is known as the Community-Supported Violence Prevention Collaborative (CVPC). Targeted communities included Chicago neighborhoods of Grand Boulevard, Kenwood, and Washington Park.

The CVPC aimed to act as a catalyst in building collective efficacy among community residents to mobilize, organize, and reduce violent behaviors towards youth, adults, and seniors. Collective efficacy is the sense of social cohesion and shared expectations about the willingness to collaborate and intervene on behalf of the common good. As a result of the CVPC being formed, the community developed enhanced collective efficacy, provided the foundation for long-term community growth and development. Social action that promotes participation toward increased community control allowed community members to participate in the process of impacting social change and increasing social capital. As community members recognized their roles in this process to effect change in their community, they increased social cohesion and a sense of control within their environments.

Community programs and initiatives that alter behavior among individuals are important. However, the underlying social and economic environment must be continually supportive in order for the behavior change to be sustainable. Thus, collective efficacy will be enhanced within the community to help ensure that the environment is supportive of future programs and services that alter behaviors as they relate to health and violence. The objectives of this work are:

- To address the risk factors that contributes to violence.
- To support residents in being active and informed citizens guiding the improvement of their neighborhoods.
- To work with policy makers to develop more effective approaches and policies for violence reduction.
- To share and disseminate information that will help promote the understanding of violence and its causes.
- To study violence reduction initiatives through research, training, and program evaluation.
- To identify and design effective violence reduction initiatives.
Methods and Framework

Faculty members at the Institute on Social Exclusion at the Adler School of Professional Psychology (Adler) partnered with the CVPC to develop a methodology for research and assessment. Fundamental to the Adler School’s mission and work is community capacity-building through skill and knowledge transference—from the Adler team to the community.

In partnership, the Adler team’s goal was to equip community residents with the capacity and knowledge to implement these programs (e.g., develop violence prevention and other strategic initiatives) themselves, independent of outside direction. Additionally, a fundamental value that underlies this process is that strategies should emerge organically from the concerns, viewpoints, and ideas of the community stakeholders. Therefore, community residents have an active voice throughout the process that directly impacts their life and their community.
Community-Based Participatory Research

Community-Based Participatory Research (CBPR) is a partnership approach to research that equitably involves community members. CBPR builds the community’s capacity to engage in action that focuses on a specific issue. CBPR plays a direct role in the design and conduct of the research study by bringing community members into the study as partners, not just subjects, and by using the knowledge of the community to understand their own health problems as they design activities to improve health and related social determinants.

CBPR helps to build the community’s sense of social control and cohesion by expanding social networks and increasing social support. Additionally, it enables all partners to contribute their expertise with shared responsibility and ownership as it integrates the knowledge gained with interventions to improve the health and well-being of community members. The CBPR model is illustrated in Figure 1.

Figure 1. Community-Based Participatory Research Model

Objectives

This project was designed so that community residents could utilize existing health data and assessments to create programs, services, and policy recommendations. The objectives of the assessment phase were to:

- Discover and uncover the underlying social and economic factors that drive violence in the community.
- Transfer knowledge and skills that build the capacity of community residents and their collective efficacy to create a healthy and safe environment.
Community Overview

Grand Boulevard, Kenwood, and Washington Park are contiguous communities located on the Southeast side of Chicago, close to Chicago’s downtown area, Lake Michigan, and the University of Chicago Hyde Park campus. These communities were destinations for European settlers in the late 19th century and African American migrants from the South in the early to mid-20th century. Commonly known by the neighborhood name of Bronzeville, these three communities share a history as thriving centers of African American cultural heritage. In the early 20th century, Bronzeville was known as the “Black Metropolis,” one of the nation’s most significant landmarks of African-American urban history (Chicago Department of Planning and Development, 1997).

While multiple assets are within close proximity, each of these communities has experienced growth challenges. Population declined in the early 2000s, and unemployment rates in the three communities are now equal to or double the average for the city (Grand Boulevard, 20.6%; Kenwood, 11%; Washington Park; 26%). While there are some similarities among the three communities, they each face different challenges. For example, on a scale of 1 – 100, Kenwood has a hardship index of 26; Grand Boulevard, 58; and Washington Park is 88.¹ For comparison, the wealthier neighborhood of Lincoln Park has a hardship index of 2, and the impoverished Englewood neighborhood has a hardship index of 91. Snapshots of economic indicators are provided below in Table 1.

Table 1. Select Economic Characteristics of Target Communities

<table>
<thead>
<tr>
<th></th>
<th>Chicago</th>
<th>Grand Boulevard</th>
<th>Kenwood</th>
<th>Washington Park</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population</td>
<td>2,695,598</td>
<td>21,929</td>
<td>17,841</td>
<td>11,717</td>
</tr>
<tr>
<td>Per capita income</td>
<td>$27,148</td>
<td>$22,056</td>
<td>$37,519</td>
<td>$13,087</td>
</tr>
<tr>
<td>Households below poverty level</td>
<td>18.7%</td>
<td>28.3%</td>
<td>23.1%</td>
<td>39.1%</td>
</tr>
<tr>
<td>% Unemployed</td>
<td>11.1%</td>
<td>20.6%</td>
<td>11.0%</td>
<td>23.2%</td>
</tr>
<tr>
<td>% Residents without HS diploma</td>
<td>20.6%</td>
<td>19.4%</td>
<td>10.8%</td>
<td>28.3%</td>
</tr>
<tr>
<td>% Residents under 18 or over 64 (dependence indicator)</td>
<td>34%</td>
<td>41.7%</td>
<td>34.2%</td>
<td>40.9%</td>
</tr>
<tr>
<td>Hardship Index</td>
<td>–</td>
<td>58</td>
<td>26</td>
<td>88</td>
</tr>
</tbody>
</table>


¹ “Hardship index” calculated from six indicators using the American Community Survey, 2007-2011. The indicators are the percent of occupied housing units with more than one person per room (i.e., crowded housing); the percent of households living below the federal poverty level; the percent of persons in the labor force over the age of 16 years who are unemployed; the percent of persons over the age of 25 years without a high school diploma; the percent of the population under 18 or over 64 years of age (i.e., dependency); and per capita income.
Violent Crime

As evidenced above, residents in each community face economic challenges. These pockets of concentrated poverty are linked to violent crime, especially for these predominantly African American communities. Violent crime, as defined by the Chicago Police Department, includes murder, aggravated assault/battery, criminal sexual assault, and robbery. The map displayed in Figure 2 shows levels of violent crime across Chicago neighborhoods in 2010. Neighbors with high per capita rates of violent crime are displayed by dark gray, while those with low per capita rates of violent crime are displayed by light gray. Per capita rates take into account the number of incidences of violent crime while accounting for the total population within a neighborhood.

The city-wide median per capita violent crime index was 528. Washington Park had an index of 3.9 times higher than the city average.

Table 2. Per Capita Violent Crime Indexes by Neighborhood

<table>
<thead>
<tr>
<th>Community</th>
<th>Chicago</th>
<th>Grand Boulevard</th>
<th>Kenwood</th>
<th>Washington Park</th>
</tr>
</thead>
<tbody>
<tr>
<td>Per capita violent crime index</td>
<td>528</td>
<td>772</td>
<td>325</td>
<td>1347</td>
</tr>
</tbody>
</table>

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While violent crime indexes for Grand Boulevard and Washington Park are higher than the city average, incidence of violent crime in all three neighborhoods has decreased over the past decade. From December 2003 to December 2013, Grand Boulevard experienced a 48% decrease in violent crime, Kenwood experienced a 44% decrease, and Washington Park experienced a 65% decrease in overall violent crime incidents. As stated earlier, changes in neighborhood population may partially explain these declines. Figure 3 shows violent crime trends for each neighborhood.

Figure 3. Violent Crime Trends, December 2003 – December 2013

While changing demographics may explain some of the decrease in violent crime, recent stabilization could also be partly due to existing violence prevention programs in each neighborhood. Organizations such as the KLEO Center, Project Orange Tree, and Centers for New Horizons offer programs that promote protective factors and reduce risk factors for violence that serve these communities. However, in order to build the capacity of these and other organizations to effectively reduce violent crime, the CVPC wanted to better understand the needs of residents and stakeholders. The process and findings from the assessment phase are described below.

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Research Design

Throughout the course of the project, the Adler team attended community events and meetings in the three target communities to identify underlying themes related to violence.

The types of events the team attended were community action council meetings, ward meetings, Chicago Public Schools local school council (LSC) meetings, Chicago Police Department community meetings, fundraisers, community-based organization strategic planning meetings, town halls/community forums, press conferences, and church services. The Adler team also held three listening meetings with the collaborative partners, community stakeholders, and residents to identify themes and develop frameworks for assessment. This further provided background on the needs of each of these communities.

The Adler team worked with collaborative partners to develop a train-the-trainer model to build capacity of residents to assess factors that drive violence in the three target communities. Training participants were recruited through presentations at various community events and meetings between April and May 2013. A total of 22 applications were received, and participants were selected based on their ability to commit to completing the entire training process and research assignments. Over the course of 12 weeks (June – August 2013), participants were trained to collect and analyze data in order to create recommendations towards the development of the violence prevention strategy. A community outreach coordinator provided technical assistance to the participants as they completed research assignments in their communities. Participants received a cash incentive and were required to spend five hours per week working on the research assignments. Eight participants graduated from the training program and received certificates of completion.

Implementation

The participants were trained to conduct surveys, focus groups, and interviews. Each method built upon the findings from the earlier methods. Each week, participants spent two hours in training led by the Adler team and three hours conducting the research either independently or in teams. Data was brought to the next training and analyzed from within the group. The team formed an internal think tank that discussed, debated, and came to consensus on possible solutions to reduce violence.

Visioning Exercise

Training participants were instructed on how to engage family, friends, and neighbors to create their vision for a healthy, safe community. Each participant spoke with 10 individuals, for a total of 80 viewpoints. Participants ranged from 16 to 70 years of age. The themes that emerged from this exercise were used to develop a survey, focus group, and interview questions. The visioning worksheet can be located in Appendix A.

Survey Data Collection

The Adler team and training participants pulled themes from the visioning exercise and developed survey questions. The violence prevention strategy survey questionnaire (Appendix B) contained 20 questions designed to assess community engagement, collective efficacy, and views on safety. More than 270 community residents from all walks of life were surveyed. The community demographics table is displayed in Appendix C.
Research Design

Focus Groups

A consensus on questions to be asked during the focus groups was based on the survey results. The groups were diverse and the communication style was tailored to the age group being convened. The process was built upon the findings of the previous interviews and discussions. There were 20 focus groups, which touched nearly 150 community residents. Participants ranged from 12 to 65 years of age. The questions from the focus group are listed in Appendix D.

Interview Data Collection

Research teams were assigned a target group to convene for interviews. The target groups were law enforcement, gang/street organization members, clergy, and employment services. The group collectively came up with key questions that should be addressed, primarily addressing how the community could engage each group to support a violence prevention strategy. Teams were instructed to identify three representatives of each group to complete the interview. Interview questions are located in Appendix E. In addition to interviews, the Black Youth Project New Citizens Initiative report helped to inform the Adler team’s findings.
Findings

This research project assessed the risk and protective factors for violence based on the perspectives of community residents and stakeholders, in an attempt to develop a community-supported violence prevention strategy. Results from the visioning exercises, surveys, focus groups, and interviews were compiled to understand the underlying factors that drive violence in the target communities. There were several issues that emerged throughout the assessment that suggest recommendations for the violence prevention strategy. These issues are listed below in order from most commonly to least commonly occurring:

1. Across all research participants, there is a demand for greater police sensitivity and proactive responses from officers within the community.
2. There is a general lack of trust in politicians and law enforcement officials (judges, policemen) and a sense that they are not performing their jobs in ways that respond to the needs of the community.
3. More financial resources are needed; livable wage jobs and incentives to youth could help decrease crime rates.
4. Organized institutions (schools, churches, etc.) should offer more programming (in order to maximize financial resources).
5. Direct community/gang discussions (interventions) are necessary to begin to open lines of communication.
6. There is a need for greater training, education, and rehabilitation within the community.
7. There is a need for greater parental involvement and mentoring programs that provide wrap-around services to whole households, not just at-risk youth.
8. Members of the community talked about a general fear, or being afraid within their communities. These indicators of trauma surfaced multiple times in the qualitative data.
Major Themes

Using these issues as a guide, the research team identified three major themes that emerged from the research findings. Supporting evidence for these themes is presented below.

Improvement of Police/Decision-maker Engagement within the Community

Research participants reported that the current relationship between the police and the community is tenuous at best. The visioning exercise revealed that many residents wanted a respectful relationship with local police, referring back to the community policing strategies that existed in previous generations. Survey results confirmed that residents would feel safer if they had more police on foot patrol. In addition, the sense of security among community residents would increase if relationships with law officials were improved (Figure 4). Residents acknowledged that police are necessary to keeping neighborhoods safe, but policy enforcement has created a historical division between police officers and community residents that needs to be mended. Stakeholders believed that police could partner with residents to monitor crime in each neighborhood. The following statements illustrate the need for collective collaboration efforts:

“I don’t think we really know who to go to when we have a problem... the alderman is there, but is that his job?” – Male focus group participant

“I live in this community too, and the violence affects me. I just wish people would work with us instead of working so hard to fight us.” – Policeman interview

Fractured relationships also appear to exist between local politicians and community residents. The majority of residents sampled were registered voters (76%) and of those, 69% voted in the last election. Many focus group participants, of various ages, commented that they were unsure of the role of their alderman and what type of services aldermen perform. Additionally, 68.1% of community residents felt as though they had very little to no influence on local government decisions. These results suggest that residents do not believe that their issues would be noticed and that they have little influence on local government decisions that directly impact their livelihood. Figure 5 illustrates the distribution of survey responses about political awareness.
There was a consensus among participants that the best way to reduce levels of violence is to actively engage residents. Services that participants requested were increased mental health, employment, education, and mentoring programs. Most of the residents sampled recognized that while these resources exist within each of the communities, many of these services are not easily accessed by those most in need. For example, focus group participants noted that certain organizations lack capacity for outreach to youth with gang involvement. As one participant stated,

“To keep violence out of the communities, there should be more community activities, presentations, organizations, and jobs.” – Youth research participant
“The most important problem in my community is the lack of programs that the children have access to. I think that more opportunities such as afterschool or weekend programs should be offered because it is a great way to keep the community connected and active. ... Community programs give young people the chance to make strong relationships with others. Creating bonds with other people is another way that we can create a healthy, productive, and connected community.”

The creation of bonds and networks are pivotal to building and sustaining a healthy community and reducing violence among its members. On the other hand, a program may be engaging in aggressive outreach, but in a way that doesn’t reach the desired individuals or groups. It may be presenting its message in a form that doesn’t reach its intended audience. Residents surveyed about the importance of certain outreach techniques on participation levels reported that choice of location of event (mean = 3.76 out of 5.0) and providing incentives (mean = 3.62 out of 5.0) were most influential in determining participation, and this was standard across all ages. If service providers are not able to effectively communicate goals, residents may not know how to access programs.

Sustainability of community resources

Many participants noted that cost prohibits youth and families from participating in structured activities. Several interview and focus group participants acknowledged that programs may need to charge people for services. If these people are unable to pay, and there is no alternative source of funding for them, then that service is unavailable. One pastor stated, “There are not enough affordable programs in the Park District field houses or parks. There needs to be more locations that nurture and help children.”
Conclusion

Residents of communities that have limited access to quality education and employment opportunities, high levels of racial segregation, or concentrated levels of poverty are more likely to experience inequities in health outcomes than those that live in communities without such issues.

These findings suggest a need to cultivate collective efficacy within the target communities. Collective efficacy is pertinent to the success of the CVPC because it reaffirms that social determinants act as risk and protective factors to violence. Therefore, the CVPC approached violence prevention efforts through capacity building, human agency, empowerment, and social change. These efforts promote the utility of collective efficacy, which strives to fill in the gaps where formal institutions and systems fail to address the issues that affect the collective well-being of the target communities, thus increasing risk factors for violence. Within collective efficacy there are two main components—social capital and social trust—and these components appeared within the research several times. Social capital is the expected collective or economic benefits derived from the preferential treatment and cooperation between individuals and groups. A prerequisite for social capital to flourish is the existence of social networks. However, it is important to note the existence of social networks alone is not sufficient to facilitate collective efficacy, as the social networks must be activated towards a specific purpose/meaning for the given community (Sampson, 2004). Civic participation and mutual agreement among the members of a given community are also critical to understanding a community’s collective efficacy.

Collective efficacy is also based upon the working social trust among members of the community—the belief that actions will be taken by members under various scenarios (Sampson, 2004). Shared values by the members of a given community impact the level of social trust. Social trust is a level of measurement of a community’s collective efficacy and is essential to a cohesive community (Sampson, 2004). Therefore, the following recommendations serve as a guide to CVPC and other partners in working toward building perceptions of collective efficacy among residents of the target communities.

- **Increase community/police partnerships** – Residents, employers, and police all suggested working with the Chicago Police Department to improve relationships between communities and police. Stakeholders interviewed suggested having police start by going into schools to visit elementary and middle school students. Not only would students learn the role of police in maintaining safety, they might also develop less fear of the police.

- **Improve civic awareness** – Residents expressed a desire to learn about local public officials and aldermen—who they are and what their responsibilities are. There is a need to understand the function and structure of government. Suggestions included inviting officials to get involved with community social events in an effort to develop relationships. This education can continue by inviting public officials to attend and speak at community meetings to update on current topics of concern. This will allow residents to become more informed about political decision-making processes, but also allow them to demand more from public officials.

- **Build capacity of existing programs and services** – In order to accommodate everyone who needs services, there must be a sufficient amount of space, staff, and support to fund for the appropriate materials and equipment. While this is primarily an issue of funding, collaborative efforts among community residents could aid in providing the necessary services that are required.

- **Increase scope of existing programs and services to fit the needs of the communities** – Participants overwhelmingly endorsed the need for programs that provide education and training to break the generational cycle of poverty. Young men who have participated in gang activity shared that they do not know how to access meaningful jobs within their communities. Business owners echoed this, and those interviewed even offered to mentor young people to prepare them for future employment.
Summary

As indicated earlier, residents in the target communities uphold the need for a violence prevention strategy that involves multiple stakeholders and partnerships. This will not only facilitate community support and participation, but aid in the development of collective efficacy. Individualized interventions to reduce violence may be better supported by increasing collaborative efforts, which could aid in better service delivery and resource management. Additional funding is also necessary to sustain these efforts.

Multi-sector collaborations have the greatest potential for improving outcomes if they not only improve conditions for community members, but also promote community empowerment. The CVPC will continue to utilize the train-the-trainer research model to disseminate findings to stakeholder groups for feedback. Additionally, the findings will be utilized and input toward the design and implementation of novel violence prevention strategies. Thus, training participants will be supported as they use the skills they have gained to assist with strategy design, implementation and outreach in their efforts to reduce community violence.
References


Hertz, D.K. (2013). We’ve talked about homicide in Chicago at least one million times but I don’t think this has come up. City notes. Retrieved from: http://danielkayhertz.com/2013/08/05/weve-talked-about-homicide-in-chicago-at-least-one-million-times-but-i-dont-think-this-has-come-up/


Appendices

Appendix A: Visioning Worksheet
Appendix B: Survey Questionnaire
Appendix C: Community Demographics
Appendix D: Focus Group Questions
Appendix E: Interview Questions
## Appendix A

### Visioning Worksheet

<table>
<thead>
<tr>
<th>Community Assets</th>
<th>What is your vision for a safe community in 2023?</th>
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</thead>
<tbody>
<tr>
<td>Education</td>
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<tr>
<td>Arts and culture</td>
<td></td>
</tr>
<tr>
<td>Community messages</td>
<td></td>
</tr>
<tr>
<td>Social services</td>
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</tr>
<tr>
<td>Safety</td>
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</tr>
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<td>Transportation</td>
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<tr>
<td>Housing</td>
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<tr>
<td>Recreation</td>
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<td>Community Assets</td>
<td>What is your vision for a safe community in 2023?</td>
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<td>------------------------</td>
<td>--------------------------------------------------</td>
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<tr>
<td>Health and mental health services</td>
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<td>Open space</td>
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<tr>
<td>Business</td>
<td></td>
</tr>
<tr>
<td>Employment</td>
<td></td>
</tr>
</tbody>
</table>

What else will your community look like?
Appendix B

Survey Questionnaire

Interviewer: ______________________________

We are working with a collaborative of stakeholders to create strategies to reduce violence in our communities. In order to effectively help our neighborhoods, we need to know what issues are important to you and what your level of satisfaction is with the efforts already being made within your neighborhood. The survey will take you approximately 15 minutes to complete, and you may skip any questions you do not wish to answer. Please take the time to complete this survey because your experience and your opinions are vital to developing further plans to strengthen your community.

1 How effective would each of the following be in making you feel safe in your community?

<table>
<thead>
<tr>
<th>A</th>
<th>More police foot patrols</th>
<th>5</th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>B</td>
<td>Improved community relationships with police</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>C</td>
<td>Residents able to carry concealed weapons</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>D</td>
<td>Block clubs or neighborhood watch</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

2 How much time, per month, would you say you participate in community or volunteer activities, such as attending meetings, community events, etc.? (Please circle one answer.)

<table>
<thead>
<tr>
<th>A</th>
<th>Don’t participate in community activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>B</td>
<td>Less than 2 hours</td>
</tr>
<tr>
<td>C</td>
<td>2 to 4 hours</td>
</tr>
<tr>
<td>D</td>
<td>4 to 6 hours</td>
</tr>
<tr>
<td>E</td>
<td>6 to 8 hours</td>
</tr>
<tr>
<td>F</td>
<td>Over 8 hours</td>
</tr>
</tbody>
</table>

3 How much does each of the following influence you to participate in events/activities in your community?

<table>
<thead>
<tr>
<th>A</th>
<th>Organization hosting event/activity</th>
<th>5</th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>B</td>
<td>Race/ethnicity of the organizers</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>C</td>
<td>Communication about the event (flyers, media, etc.)</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>D</td>
<td>Cost of the event/activity</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>E</td>
<td>Location of the event/activity</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>F</td>
<td>Incentives provided for participation (gift cards, food, etc.)</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>G</td>
<td>Other</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>
Appendix B (continued)

4 If you had a complaint about an issue in your community and took that complaint to your local alderman, do you think that they would pay:

A No attention at all
B Very little attention
C Some attention
D A lot of attention to what you say

5 How much influence do you think you have over local government decisions?

A None at all
B Very little influence
C Some influence
D A lot of influence

6 How **IMPORTANT** is each issue to you in your community?  

<table>
<thead>
<tr>
<th>Issue</th>
<th>Very Important</th>
<th>Neutral</th>
<th>Not Important at All</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Families support each other.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>B City monitors illegal dumping of trash/junk.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>C Neighborhood streets are free from debris, potholes, and ice in the winter.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>D Zoning regulations/building codes are in the best interest of this neighborhood.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>E Youth are involved in improving the community.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>F People in the neighborhood work together to solve local problems.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>G Absentee landlords maintain their properties.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>H Vacant lots are not littered with trash and junk.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>I Street lights are bright enough to see things at night.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>J Safe youth clubs and organizations are available.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
</tbody>
</table>

7 What neighborhood do you live in? ________________________________

8 How long have you lived there? ________________________________
Appendix B (continued)

9. **What is your age?**
   (Please circle **one** answer.)
   1. Under 18
   2. 18-21
   3. 22-30
   4. 31-40
   5. 41-50
   6. 51-60
   7. 61-70
   8. 71 +

10. **With which racial group do you most identify?**
    (Mark more than one if applicable)
    1. African American
    2. Caucasian
    3. Latino or Hispanic
    4. Other (specify):

11. **What is your gender?**
    A. Male
    B. Female

12. **What is your total household income?**
    (Please circle **one** answer)
    1. Under $15,000
    2. $15,000 to $29,999
    3. $30,000 to $44,999
    4. $45,000 to $59,999
    5. $60,000 to $74,999
    6. $75,000 to $100,000
    7. Over $100,000

13. **How many people under 18 years of age in your household?**
    (Please circle **one** answer)
    0. None
    1. One
    2. Two
    3. Three
    4. Four
    5. Five
    6. Six or more

14. **How many people over 18 years of age in your household?**
    (Please circle **one** answer)
    0. None
    1. One
    2. Two
    3. Three
    4. Four
    5. Five
    6. Six or more

15. **Are you registered to vote?**
    (Please circle **one** answer)
    Y. Yes
    N. No

16. **Did you vote in the last presidential election?**
    (Please circle **one** answer)
    Y. Yes
    N. No

17. **Did you vote in the last local election?**
    (Please circle **one** answer)
    Y. Yes
    N. No
# Appendix C

## Community Demographics

<table>
<thead>
<tr>
<th>Age</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 18</td>
<td>10%</td>
</tr>
<tr>
<td>18-21</td>
<td>13.3%</td>
</tr>
<tr>
<td>22-30</td>
<td>17.5%</td>
</tr>
<tr>
<td>31-40</td>
<td>17.5%</td>
</tr>
<tr>
<td>41-50</td>
<td>16.7%</td>
</tr>
<tr>
<td>51-60</td>
<td>10.8%</td>
</tr>
<tr>
<td>61-70</td>
<td>10%</td>
</tr>
<tr>
<td>71+</td>
<td>4.2%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>43.3%</td>
</tr>
<tr>
<td>Female</td>
<td>55%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>90.4%</td>
</tr>
<tr>
<td>Caucasian</td>
<td>5.3%</td>
</tr>
<tr>
<td>Latino</td>
<td>2.6%</td>
</tr>
<tr>
<td>Other Race/Group</td>
<td>1.8%</td>
</tr>
</tbody>
</table>

## Community Participation

<table>
<thead>
<tr>
<th>Participation</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No participation</td>
<td>31.1%</td>
</tr>
<tr>
<td>Participate 2-4 hours monthly</td>
<td>26.2%</td>
</tr>
</tbody>
</table>

## Voting Status

<table>
<thead>
<tr>
<th>Status</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered voters</td>
<td>89.3%</td>
</tr>
<tr>
<td>Voted in last presidential election</td>
<td>82%</td>
</tr>
<tr>
<td>Voted in last local election</td>
<td>69.7%</td>
</tr>
</tbody>
</table>
Appendix D

Focus Group Questions

1. What should be in a community violence prevention strategy?
   (Related issues: Schools, parents, youth, police? What resources are needed for a strategy?)

2. How do we engage the entire community including those people who are directly involved in community violence or who feel they have no other choices?
   (Related issues: How do we get information to people? How do we expose all people to community resources?)

3. How do you engage in the political process?
   (Related issues: Who is our alderman? Trust in the alderman? What do the alderman do?)
Appendix E

Community-Supported Violence Prevention Strategy Interview Questions

Interviewer Name: _____________________________
Interview Date: ______________________________
Interviewee Name/Role: _________________________

1. What are the factors that lead to or cause violence in our community?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2. Based on that, what are the solutions to violence in our community?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3. What are the resources needed to deal with violence in our community?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

4. What are the key components for creating a violence prevention strategy? What role do you see for yourself in the strategy?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

5. How can community residents engage you, your colleagues, and your associates in a violence prevention strategy?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________