Journal of Interpersonal Violence

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Linda K. Bowen, Victoria Gwiasda and M. Mitchell Brown

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>> Version of Record - Mar 1, 2004

What is This?

Engaging Community Residents
to Prevent Violence

LINDA K. BOWEN
VICTORIA GWIASDA
M. MITCHELL BROWN
Institute for Community Peace

The Institute for Community Peace has conducted two demonstration projects to determine whether communities can be engaged to prevent violence as it is identified and defined locally and link primary prevention across multiple forms of violence. The projects present evidence that community engagement can effect primary violence prevention; the violence prevention field has much to learn about developing and sustaining strategies to address interrelated violence problems; and the violence prevention field and community residents are in vastly different places with respect to primary violence prevention.

Keywords: *community engagement; resident engagement; primary violence prevention*

Escalating rates of youth and community violence in the late 1980s and early 1990s raised national concerns about the fabric of America's communities. In a review of efforts by grant makers to attend to rising incidences of violence, the Institute for Community Peace (ICP)[1] found that relatively few of the country's private philanthropic resources were directed toward primary prevention initiatives.[2] Instead, most funds engaged prevention at the secondary or tertiary levels, emphasized interpersonal violence, and sought prevention at the individual level. The national response to the increasing rates of violence was geared toward reducing violent crime by strengthening the criminal justice response within the community and the home. The result was insufficient attention paid to addressing the plethora of individual, community, and societal factors that were implicated in growing violence rates.

A recently released report by the World Health Organization (Krug et al., 2002). defines violence as "the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in injury, death, psychological harm,

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maldevelopment or deprivation" (p. 5). This definition is particularly useful for understanding community violence, as it encompasses the range of ways that communities are affected by violence from within and without, both causing undue harm not only to individual residents but also to the community's social fabric.

Violence affects communities in myriad ways: It causes physical harm to individual residents, its presence in homes and on the streets results in isolation and alienation among a community's inhabitants, and it stigmatizes and alienates certain communities from mainstream society. Forces outside the community also give rise to violence. Policies and values that promote and perpetuate racism, gender bias, poverty, maldevelopment, and underinvestment in certain communities (primarily poor and of color) play large roles in placing communities at risk for violence. Many argue that these facts alone provide good fodder for community involvement in violence prevention, yet most violence prevention interventions remain targeted toward individual change.

Founded by grant makers in 1994, ICP was established to address the root causes of violence, particularly youth violence, in the United States. Fundamental to ICP's work is the premise that violence is a complex phenomenon arising from individual, systemic, and societal factors. Therefore, responses that combat it should be comprehensive and arise from local community contexts, and solutions must engage a broad array of disciplines and sectors, including those most directly affected by violence (survivors, witnesses, and perpetrators). Ultimately, ICP believes that sustaining primary prevention rests on a community's willingness and ability to challenge normative behaviors and attitudes that support interpersonal and societal violence and to engage in civic activities to address the insidious effects of greater societal policies and values on community life.

During its 10-year existence, ICP has engaged in two local demonstration projects to determine whether communities can be engaged to (a) prevent violence as it is identified and defined locally and (b) break the cycle of violence by affecting common factors that lead to multiple forms of violence. This article summarizes both of those efforts.

ENGAGING COMMUNITIES TO PREVENT VIOLENCE

Although the focus on community-based violence prevention as a concept is not new, little scientific evidence existed to support the development of these efforts prior to the last decade. A growing literature base (from the mid-1990s to the present) gives greater attention to the role of community in vio-

lence prevention. For the most part, however, community[3] is viewed as an intervening variable in terms of its contamination effects, primarily on African American youth (Kuther & Wallace, 2003), or as a mediating factor through its protective ability, primarily in school settings (see Jenkins & Hutchinson, 1996; Randolph, Koblinsky, & Roberts, 1996), rather than as an actor in violence prevention in and of itself. Furthermore, studies of broad community roles in violence prevention have been primarily viewed with respect to only youth and community violence prevention.[4] Responses to youth violence tend to continue to rely on addressing the individual effects of experiencing community violence and on individual interventions, rather than on ways that the community can be mobilized to affect youth victimization and perpetration (see, e.g., Kliewer, Lepore, Oskin, & Johnson, 1998; Kuther & Wallace, 2003; Overstreet & Mazza, 2003; Saltzman, Pynoos, & Steinberg, 2001; Schwartz & Proctor, 2000).

There are growing efforts to involve communities in the treatment of trauma victims (including survivors of domestic violence, child maltreatment, and sexual abuse). Therapeutic communities that include all involved in the care of survivors in residential settings (i.e., clinicians, support staff, and patients) are being created to develop a community of support for treatment. These "sanctuary models" posit that treatment can be better sustained if a larger community has ownership of the intervention and holds one another accountable for compliance to treatment (see, e.g., Abramovitz & Bloom, 2003; Madsen, Blitz, McCorkle, & Panzer, 2003).

What little community-focused research that exists supports the centrality of community in prevention. The fields of community organizing and development recognize the greater role for community inhabitants (e.g., rather than the criminal justice system) in addressing crime and violence. Community responses are seen as critical for reducing crime and violence and for ameliorating the possible negative impact of criminal justice interventions on community-building efforts (Meares, 1997, 1998). Support for this premise is provided by studies of "collective efficacy."[5] In a longitudinal study of violence in a Chicago public housing community, researchers found that collective efficacy among residents is an effective form of violence prevention; therefore, they advocate for community building and resident engagement as key strategies to support prevention (Sampson & Raudenbush, 1999).

THE ICP MODEL

To address the gap in the knowledge base about community-based efforts to prevent violence, ICP launched its first demonstration initiative to prove

that violence could be prevented through community action. ICP provided grants[6] to communities across the country to support their efforts to assess local violence concerns and define and implement community-led primary prevention solutions. The grants required communities to do the following:

- Develop a broad-based, multisectoral, interdisciplinary collaborative that includes those most directly affected by violence;
- Conduct a needs and assets assessment; and
- Develop an implementation plan informed and supported by evaluation.

Twelve communities were originally selected, and 8 were continuously funded over a 6-year period. ICP provided extensive technical and evaluative support (from ICP staff and expert consultants) to assist collaborative members with skills and resources to implement proven strategies and track their efforts.

Although the initial interest of ICP centered on youth violence prevention, it recognized local communities as the experts in identifying their most pressing violence problems. As a result, sites supported prevention efforts that targeted a range of violence issues from domestic and family violence (primarily child maltreatment), to youth and gang violence, to violence in the media and gun violence, to community violence. ICP staff continually pushed communities toward primary prevention and sustainability by asking: Have you truly prevented violence, and if so, can you sustain it? The lessons learned from their efforts were chronicled semiannually by ICP staff, assessed by locally based evaluators, and profiled by independent writers.

Theory Of Change

ICP developed a theory of change that depicts the evolution of community-based violence prevention work over time.[7] The model, which was tested over a 4-year period, traces the support and assistance provided by ICP to its local partners, the processes undertaken by local collaboratives, and examples of the activities and outcomes expected from local collaborative work. ICP's theory of change posits that given the proper stimulus and support (financial, technical, and evaluation assistance), communities will mobilize to prevent violence and sustain peaceful outcomes. The process of preventing violence involves developing various capacities (e.g., collaboration, resident engagement) and skills (e.g., communications, data collection) within the community, and using these to assess, analyze, and engage the issues that cause violence. The development of capacities and skills in turn leads to essential changes in individual and community behavior, which ultimately

leads to the development of policies, programs, and systems that fundamentally change the individual and community's relationship to violence and greater society's relationship to the community.

Although the theory of change is typically depicted as a linear model, ICP recognizes that community-based violence prevention is an iterative process, requiring communities to make periodic adjustments and modifications to their implementation plan as it is informed by evaluation. Furthermore, the ICP model recognizes that violence prevention work occurs within and is affected by social, political, and economic contexts that will challenge community-level work.

Developmental Stages of Community Change

ICP tracked and documented a series of five developmental stages marking community progress toward the ultimate goal of creating safe and healthy homes and communities. We found that communities were not able to move to primary prevention (i.e., attend to the root causes of violence) without first attending to their intervention needs. Therefore, the first two stages we tracked are intervention stages. It is significant to note that communities that began their work with the intention of preventing domestic and family violence spent most of their time cycling between these first two stages.

Creating safety. Selected communities were initially either in crisis over violence (e.g., one site experienced 21 youth homicides over a weekend) or struggling with long-term and chronic problems (e.g., in a small rural community, child abuse and domestic violence rates were among the highest in the state, and in another, law enforcement was complicit in the escalating drug trade and subsequent community violence rates). When in these dire straits, communities had to attain a point of physical, emotional, and psychological safety before they could begin thinking about prevention. In most cases, this charge meant making functional those systems (e.g., law enforcement, public works, child protective services) responsible for protecting the community and its inhabitants. These systems were engaged and compelled to act through initial collaborative development as representatives were invited to become members of the collaborations.

Creating safety also meant acknowledging pain that occurred in the community as a result of violence and allowing residents to collectively take steps to heal (e.g., vigils, marches, and murals to commemorate the victims). These activities provided an impetus for the first steps in community organizing as they tended to galvanize the active involvement of residents and others.

Understanding violence. In this stage, communities gathered useful infor-mation to facilitate their understanding of local violence. Members examined statistical data about all forms of violence and mapped its occurrence to obtain a comprehensive view of violence problems. They also mapped assets and needs and conducted community forums, listening projects, and resident interviews to identify gaps, resources, concerns, and solutions. Together, these methodologies supported the development of targeted strategies for prevention and as ways to further collaborative expansion and community organizing. At this stage, ICP staff began to see communities laying the foun-dation for collective efficacy as community members disrupted known drug havens, boarded up abandoned buildings, and pressured city government to enforce housing ordinances, among other activities.

Building community. Efforts to promote community building signaled the first stage of primary prevention as communities began to understand that safety alone did not result in prevention. Burgeoning collective efficacy efforts became full blown with the successes from the previous stages. Col-laboratives engaged more sectors of the affected community and broadened the sphere of responsibility for community members. Leadership develop-ment activities for young people and adults ensured a continuous base of resi-dent engagement. Likewise, collaborative members began efforts to enhance the physical vitality of their community. Members also began to recognize that they could not maintain the safety they had created on the streets unless they could create safety in the homes and acknowledge their complicity in existing levels of domestic violence and child maltreatment (this issue will be discussed in greater detail in the second demonstration project).

Promoting peace. This fourth stage was marked by greater reflection and deeper insights into the root causes of violence. Communities recognized that success in preventing violence needed to be partnered with the creation of community well-being or the promotion of peace. They began to examine the factors that caused hostility within the community at the interpersonal level and between groups. They sought to use their diversity as a source of strength rather than a voice of dissonance. They also began to understand that negative perceptions of their community led to disparate social and economic treatment by the larger society, and they developed strategies to challenge these perceptions, particularly when they were harmful to particular sectors of their population (e.g., men and youth of color). Finally, they began to con-centrate on changing community and individual norms that contributed to violence (e.g., gender bias, power differentials, class bias, and race bias).

Building democracy and social justice. After several years, community members began to realize that many of the factors perpetuating violence in their communities were caused by policies imposed on them from the larger society. For example, they recognized the difficulty of sustaining peace when laws disproportionately targeted members of their communities for incarceration or when their communities housed a greater number of environmental hazards. In this stage, communities acknowledged the need for and power of active resident participation in the democratic policies governing communities and the nation. Community members became more politically active in a number of arenas.

Discussion

This first demonstration project lasted 5 years, with each community progressing through the theory of change and developmental stages at its own pace. By year 5, however, most sites had achieved substantial gains in violence prevention and community-building indicators crucial for sustaining peace. Accomplishments included dramatic decreases in community homicide rates (among youth and adults), vast physical improvements (numbers of houses boarded up, creation of public spaces, community gardens), increases in programming (development of after-school programs, adult learning centers, mentoring programs), improved organizational and systemic policies, and the active engagement of large numbers of community residents in ongoing activities. These successes point to the great potential of engaging community residents in violence prevention—2 years later, without the financial support of ICP, seven of the eight sites have continued important aspects of their work, if not the entirety of their community-based efforts.

ENGAGING COMMUNITIES TO
BREAK THE CYCLE OF VIOLENCE

One of the more surprising findings of the first demonstration project was not communities' efficacy in developing complex responses to community violence but their realization that they could not sustain community violence prevention without addressing violence in the home. In particular, communities recognized that many of the youth who were perpetrating violence against other young people were often themselves victims of child maltreatment or witnesses to domestic violence. This finding led to nascent efforts to simultaneously integrate these two forms of violence prevention into on-

going work. Likewise, those communities that had initially attempted to reduce violence in the home through community action came to realize that their efficacy was greatly compromised unless community violence was first addressed. A grant from the Packard Foundation enabled ICP to provide planning grants (with the potential for implementation funding) to five of the initial pilot communities to explore how to design and implement community-led primary prevention initiatives that lead to linked outcomes across domestic violence, child maltreatment, youth violence, and community violence.

To the extent that violence prevention can be considered a field, it lacks cohesion, with each sector's (e.g., domestic violence prevention, child maltreatment, youth violence prevention, etc.) advocates, funders, and philosophical bases often operating independent of one another. The field is further "siloed" in myriad ways that provide challenges to primary prevention initiatives: Each sector differs in terms of history, theories of change, prevention focus, and orientation toward the involvement of perpetrators. The primary similarity among violence prevention sectors is their target population: poor communities and communities of color who reportedly experience all forms of violence in greater amounts than do their middle- and upper-income counterparts.

Despite the rationale used by practitioners and other advocates to justify the continued fragmentation of the violence prevention field, community residents tend not to differentiate between one sector or the other as they struggle with the collective effects of violence in their homes and communities. In fact, it is not uncommon for children and families to be represented in different parts of the child welfare or criminal justice systems without the systems being aware of this phenomenon and with no attempt to coordinate service between them.

The fact that violence rates continue to be unconscionably high in the United States also points to another similarity among the four violence prevention sectors—the inability to sustain prevention. ICP's second demonstration project—the Linkages Initiative—was designed to determine whether communities could break the cycle of violence by addressing four of its most common forms, therefore achieving sustainability.

Planning for Prevention: The Linkages Initiative

In the planning phase, each of the five selected sites was required to broaden its collaborative membership to include representatives from four violence prevention sectors (i.e., child maltreatment, domestic violence, youth violence, and community violence). The partners then gathered and

analyzed official and unofficial violence data, soliciting broad community involvement and input through town hall meetings, surveys, interviews, and participatory evaluations. Concurrently, ICP developed a team of experts in the four substantive areas who provided cross training to each site and assisted in developing appropriate and realistic visions, goals, and strategies for their work. At the end of the 18-month planning period, each community produced an implementation plan. Unfortunately, the economic downturn of the country affected the foundation's ability to finance the implementation plans, and financial support to the communities was halted at that time.

Due to financial constraints, none of the pilot communities were able to fully operationalize their implementation plan, yet progress did occur and lessons can be gleaned from their experiences. Although each site expressed (and continues to express) great interest in and hope for this work, they struggled tremendously to define and engage in primary prevention efforts that linked across all four areas. Three sites found that making connections between two of the areas—youth and domestic violence—came quickly, as both sectors focus on changing male socialization and behaviors with respect to violence. Similarly, a fourth community sought to link domestic violence, child maltreatment, and youth violence, noting commonalities across the sectors' efforts to change female norms around victimization, child rearing, and self-sufficiency. The fifth site attempted to develop universal public education strategies about the four forms of violence that reframed the ways that family and community conflicts could be resolved.

Discussion

Across communities, residents (including young people) were clear on what they perceived to be the root causes of all four forms of violence: poverty or stressful economic times, cultural norms that support violent behavior (especially with regard to the physical discipline of children), poor communication, ongoing witnessing of violence in homes and communities, alcohol and other substance abuse, environmental hazards, and intolerance for racial and cultural differences. Community members also suggested that intervening only with domestic violence, child maltreatment, youth violence, and community violence did not reach far enough into community violence problems and would not break the cycle of violence. They pointed out many other forms of violence that plagued their communities, including, for example, hate crimes, environmental violence, and punitive criminal justice policies that lead to massive disenfranchisement.

Residents were able to not only provide complex analyses of local violence problems but they were also well aware of the prevalence of violence in

their community (including "hidden" violence such as domestic violence and child maltreatment) and believed that solutions rested within the community. They asserted that communities needed to support and mentor families, tend to the physical and spiritual health of their inhabitants, reduce isolation among neighbors, and establish norms around peace through community education. They firmly believed in the deterrent power of involving perpetrators of violence in community education and prevention strategies. Finally, they professed that strong community bonds and socially, economically, and environmentally vibrant communities would produce healthier individuals and families who would be less prone to violent behavior.

Yet few residents were able to articulate their direct roles in preventing less visible forms of violence, such as family violence. When pushed, they named traditional means of intervention (i.e., referrals to domestic violence shelters, accessing criminal justice remedies, and child protective services), while expressing great ambivalence about the ability of these systems to prevent violence or intervene in ways that strengthened their communities.

CONCLUSION

ICP posits that primary prevention can be sustained only with the meaningful engagement of residents pushing for both internal and external responses to community violence problems. The two demonstration projects present clear evidence that communities are interested in and able to support community-led efforts to prevent violence. It is also clear that the field has much to learn about developing and sustaining strategies to address interrelated violence problems, especially those that emanate from the home or personal relationships. Even when these forms of violence erupt in public spaces, societal mores and the successful framing of intervention strategies as an appropriate response are difficult barriers for communities to overcome. This work indicates, however, that community residents are in vastly different places than the field in terms of who should be involved in primary violence prevention and how that involvement should be structured.

The truncated period in which exploration of the Linkages Initiative occurred at the community level precluded the ability of ICP to determine whether any of the concerns and suggestions made by community members might have yielded good strategies for linking primary prevention across the four forms of violence. Further community-based work and more extensive research need to be conducted to determine and strengthen the role of communities in preventing violence and promoting peace.

NOTES

1. Formerly the National Funding Collaborative on Violence Prevention, the Institute for Community Peace is a partnership among public and private funders, experts in violence prevention, and community advocates.

2. Primary violence prevention addresses root causes of violence, promotes public education and action in its prevention, and seeks to change broad community norms.

3. For the purposes of this article, *community* is defined as a geographic location determined by its inhabitants and major actors, including community-based organizations and any systems with which it frequently interacts, such as law enforcement, educators, child welfare, faith community.

4. *Community*, as defined by domestic violence prevention, tends to consist exclusively of survivors and advocates.

5. Collective efficacy is defined as "social cohesion among neighbors combined with their willingness to intervene on behalf of the common good" (Sampson, Raudenbush, & Earls, 1997, p. 918).

6. As a way to garner community support and sustain prevention efforts, grantees were required to raise a two-to-one match for every dollar awarded from ICP, up to $150,000 per year.

7. For a copy of ICP's logic model and corresponding description of the theory of change, contact the authors.

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cognition. *Journal of Consulting and Clinical Psychology, 68*(4), 670-683.

*Linda K. Bowen, executive director of the Institute for Community Peace (formerly the
National Funding Collaborative on Violence Prevention), has extensive expertise in
youth and community violence prevention and more than 20 years of program develop-
ment, management, community building, and policy experience. Bowen is a nationally
recognized expert on preventing violence through comprehensive approaches that incor-
porate community building and resident engagement. Her experience includes service at
the Administration on Children, Youth, and Families at the Department of Health and
Human Services under the Clinton Administration and assistant dean at the School of
Social Service Administration at the University of Chicago. She received her M.A. in
social service administration from the University of Chicago.*

*Victoria Gwiasda, director of knowledge enhancement of the Institute for Community
Peace, has more than a decade of grant-making, technical assistance, and research expe-
rience focusing on interpersonal and community violence and social justice. She cur-
rently conducts research on emerging issues in violence prevention; translates research
findings into training modules, tools, and resources for community-based practitioners;
and builds state and national partnerships to effect social change. She has previously
served as deputy director of the Illinois Violence Prevention Authority, the first and only
state government agency focusing on primary violence prevention.*

*M. Mitchell Brown, resource coordinator of the Institute for Community Peace, has
extensive experience researching and evaluating community-based initiatives. She cur-
rently manages ICP's electronic information and referral services system and is a
doctoral candidate at the University of Maryland at College Park in the Department of
Government and Politics. Her dissertation, entitled "Power, Institutions, and Social
Movements: Class, Race, and Gender in American Politics," examines the empowerment
efforts of African Americans, women, and homeless populations over the past 25 years.*