

#### **ICPSR 37453**

Comprehensive Gang Model Evaluation: Integrating Research Into Practice, Massachusetts, 2014-2018

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**Data Collection Instrument** 





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Organization Name: Comprehensive Gang Model Collaborative

#### Welcome!

Thank you for taking the time to fill out this brief survey. Please fill it out from your perspective as part of your community's youth and gang violence reduction efforts (i.e. Comprehensive Gang Model). **CGM is a way to reduce youth and gang violence through coordinated efforts of prevention, intervention, suppression, community mobilization, and organizational change.** This survey will help us understand your involvement in CGM, and how the various elements of the CGM are implemented.

#### Tips for Completing the Survey

- When answering the questions about communication, be sure to consider all forms of communication including in-person meetings, phone calls, e-mails, etc.
- If there is a role that you rarely interact with, please select the response that best reflects infrequent interaction. This survey is not intended as a report card or evaluation of a particular individual or role, and results will not be used as such.
- Please be candid; your responses will be kept strictly confidential.

This survey will take approximately 15 minutes to complete.

We ask that you complete the survey by **March 14,2016**.

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#### Frequent Communication

How **frequently** do people in each of these groups communicate with you about **youth and gang violence reduction efforts (i.e. Comprehensive Gang Model) in your community?** 

When answering this question, be sure to consider all forms of communication, including in-person meetings, phone calls, e-mails, etc.

Select the *Not Applicable* answer choice if interaction with the workgroup/individual listed is not needed in your role.

|                          | Not Nearly<br>Enough | Not Enough | Just the<br>Right<br>Amount | Too Often | MuchToo<br>Often | Not<br>Applicable |
|--------------------------|----------------------|------------|-----------------------------|-----------|------------------|-------------------|
| City Government          |                      |            |                             |           |                  |                   |
| Corrections              | 0                    | 0          | 0                           | 0         | 0                | 0                 |
| District Attorney Office |                      |            |                             |           |                  |                   |
| Employment Development   | 0                    |            | 0                           | 0         | 0                | 0                 |
| Faith-Based Services     |                      |            |                             |           |                  |                   |
| Family/Social Services   | 0                    |            | 0                           | 0         | 0                | 0                 |
| Health/Mental Health     |                      |            |                             |           |                  |                   |
| Parole                   | 0                    | 0          |                             | 0         | 0                | 0                 |
| Police                   |                      |            |                             |           |                  |                   |
| Probation                | 0                    | 0          | 0                           | 0         | 0                | 0                 |
| Research/Academia        |                      |            |                             |           |                  |                   |
| School/School-Based      | 0                    | 0          | 0                           | 0         | 0                | 0                 |
| Youth Outreach           |                      |            |                             |           |                  |                   |

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## **Timely Communication**

Do they communicate with you in a **timely** way about **youthand gang violence reduction efforts (i.e. Comprehensive Gang Model) in your community?** 

When answering this question, be sure to consider all forms of communication, including in-person meetings, phone calls, e-mails, etc.

Select the *Not Applicable* answer choice if interaction with the workgroup/individual listed is not needed in your role.

|                          | Never | Rarely | Sometimes | Often | Always | Not<br>Applicable |
|--------------------------|-------|--------|-----------|-------|--------|-------------------|
| City Government          |       |        |           |       |        |                   |
| Corrections              | 0     | 0      | 0         | 0     | 0      | 0                 |
| District Attorney Office |       |        |           |       |        |                   |
| Employment Development   |       | 0      | 0         | 0     | 0      | 0                 |
| Faith-Based Services     |       |        |           |       |        |                   |
| Family/Social Services   | 0     | 0      | 0         | 0     | 0      | 0                 |
| Health/Mental Health     |       |        |           |       |        |                   |
| Parole                   | 0     | 0      | 0         | 0     | 0      | 0                 |
| Police                   |       |        |           |       |        |                   |
| Probation                | 0     | 0      | 0         | 0     | 0      |                   |
| Research/Academia        |       |        |           |       |        |                   |
| School/School-Based      | 0     | 0      | 0         | 0     | 0      | 0                 |
| Youth Outreach           |       |        |           |       |        |                   |

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#### **Accurate Communication**

Do they communicate with you **accurately** about **youth and gang violence reduction efforts (i.e. Comprehensive Gang Model) in your community?** 

When answering this question, be sure to consider all forms of communication, including in-person meetings, phone calls, e-mails, etc.

Select the *Not Applicable* answer choice if interaction with the workgroup/individual listed is not needed in your role.

|                          | Never | Rarely | Sometimes | Often | Always | Not<br>Applicable |
|--------------------------|-------|--------|-----------|-------|--------|-------------------|
| City Government          |       |        |           |       |        |                   |
| Corrections              | 0     | 0      | 0         | 0     | 0      | 0                 |
| District Attorney Office |       |        |           |       |        |                   |
| Employment Development   |       | 0      | 0         | 0     | 0      | 0                 |
| Faith-Based Services     |       |        |           |       |        |                   |
| Family/Social Services   | 0     | 0      | 0         | 0     | 0      | 0                 |
| Health/Mental Health     |       |        |           |       |        |                   |
| Parole                   | 0     | 0      | 0         | 0     | 0      | 0                 |
| Police                   |       |        |           |       |        |                   |
| Probation                | 0     | 0      | 0         | 0     | 0      |                   |
| Research/Academia        |       |        |           |       |        |                   |
| School/School-Based      | 0     | 0      | 0         | 0     | 0      | 0                 |
| Youth Outreach           |       |        |           |       |        |                   |

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## Problem Solving Communication

When there is a problem with **youth and gang violence reduction efforts (i.e. Comprehensive Gang Model) in your community**, do people in each of these groups blame others or work with you to **solve** the problem?

Select the *Not Applicable* answer choice if interaction with the workgroup/individual listed is not needed in your role.

|                          | Always<br>blame | Mostly<br>blame | Neither blame nor solve | Mostly solve | Always<br>solve | Not<br>Applicable |
|--------------------------|-----------------|-----------------|-------------------------|--------------|-----------------|-------------------|
| City Government          |                 |                 |                         |              |                 | 0                 |
| Corrections              |                 | 0               | 0                       | 0            | 0               | 0                 |
| District Attorney Office |                 |                 |                         |              |                 |                   |
| Employment Development   |                 | 0               | 0                       | 0            | 0               | 0                 |
| Faith-Based Services     |                 |                 |                         |              |                 |                   |
| Family/Social Services   |                 | 0               | 0                       | 0            | 0               | 0                 |
| Health/Mental Health     |                 |                 |                         |              |                 |                   |
| Parole                   |                 | 0               | 0                       | 0            | 0               | 0                 |
| Police                   |                 |                 |                         |              |                 |                   |
| Probation                |                 | 0               | 0                       | 0            | 0               | 0                 |
| Research/Academia        |                 |                 |                         |              |                 |                   |
| School/School-Based      | 0               | 0               | 0                       | 0            | 0               | 0                 |
| Youth Outreach           |                 |                 |                         |              |                 |                   |

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#### **Shared Goals**

Do people in each of these groups **share your goals** for **youth and gang violence reduction efforts (i.e. Comprehensive Gang Model) in your community?** 

Select the *Not Applicable* answer choice if interaction with the workgroup/individual listed is not needed in your role.

|                          | Notatall | Alittle | Somewhat | Alot | Completely | Not<br>Applicable |
|--------------------------|----------|---------|----------|------|------------|-------------------|
| City Government          |          |         |          |      |            |                   |
| Corrections              | 0        | 0       | 0        | 0    | 0          | 0                 |
| District Attorney Office |          |         |          |      |            |                   |
| Employment Development   | 0        | 0       | 0        | 0    | 0          | 0                 |
| Faith-Based Services     |          |         |          |      |            |                   |
| Family/Social Services   | 0        | 0       | 0        | 0    | 0          | 0                 |
| Health/Mental Health     |          |         |          |      |            |                   |
| Parole                   | 0        | 0       | 0        | 0    | 0          | 0                 |
| Police                   |          |         |          |      |            |                   |
| Probation                | 0        | 0       | 0        | 0    | 0          | 0                 |
| Research/Academia        |          |         |          |      |            |                   |
| School/School-Based      | 0        | 0       | 0        | 0    | 0          | 0                 |
| Youth Outreach           |          |         |          |      |            |                   |

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## Shared Knowledge

Do people in each of these groups **know** about the work you do with **youth and gang violence reduction efforts (i.e. Comprehensive Gang Model) in your community**?

Select the *Not Applicable* answer choice if interaction with the workgroup/individual listed is not needed in your role.

|                          | Nothing | Alittle | Some | Alot | Everything | Not<br>Applicable |
|--------------------------|---------|---------|------|------|------------|-------------------|
| City Government          |         |         |      |      |            |                   |
| Corrections              | 0       | 0       | 0    | 0    | 0          | 0                 |
| District Attorney Office |         |         |      |      |            |                   |
| Employment Development   | 0       | 0       | 0    | 0    | 0          | 0                 |
| Faith-Based Services     |         |         |      |      |            |                   |
| Family/Social Services   | 0       | 0       | 0    | 0    | 0          | 0                 |
| Health/Mental Health     |         |         |      |      |            |                   |
| Parole                   | 0       | 0       | 0    | 0    | 0          | 0                 |
| Police                   |         |         |      |      |            |                   |
| Probation                | 0       | 0       | 0    | 0    | 0          | 0                 |
| Research/Academia        |         |         |      |      |            |                   |
| School/School-Based      | 0       | 0       | 0    | 0    | 0          | 0                 |
| Youth Outreach           |         |         |      |      |            |                   |

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#### Mutual Respect

Do people in each of these groups **respect** the work you do with **youth and gang violence reduction efforts (i.e. Comprehensive Gang Model) in your community**?

Select the *Not Applicable* answer choice if interaction with the workgroup/individual listed is not needed in your role.

|                          | Notatall | Alittle | Somewhat | Alot | Completely | Not<br>Applicable |
|--------------------------|----------|---------|----------|------|------------|-------------------|
| City Government          |          |         |          |      |            |                   |
| Corrections              | 0        | 0       | 0        | 0    | 0          | 0                 |
| District Attorney Office |          |         |          |      |            |                   |
| Employment Development   | 0        | 0       | 0        | 0    | 0          | 0                 |
| Faith-Based Services     |          |         |          |      |            |                   |
| Family/Social Services   | 0        | 0       | 0        | 0    | 0          | 0                 |
| Health/Mental Health     |          |         |          |      |            |                   |
| Parole                   | 0        | 0       | 0        | 0    | 0          | 0                 |
| Police                   |          |         |          |      |            |                   |
| Probation                | 0        | 0       | 0        | 0    | 0          | 0                 |
| Research/Academia        |          |         |          |      |            |                   |
| School/School-Based      | 0        | 0       | 0        | 0    | 0          | 0                 |
| Youth Outreach           |          |         |          |      |            |                   |

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#### Job Category

Please indicate which job category you consider yourself currently assigned to:

- Agency Administrator
- Manager/Supervisor
- Staff

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#### Involvement with CGM

How long has your organization been working on implementing the CGM in your City?

- Less than 1 Year
- Between 1-4 Years
- Between 5-9 Years
- Not Sure

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#### Involvement with CGM

Please indicate the population(s) your organization is in contact with in the course of your CGM work. Select all that apply.

- Youth
- Young adults (over 17)
- Families
- Other
- Not sure

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## Planning for CGM Activities, Policies, or Programs

The next section seeks to understand how your organization <u>plans for implementation of CGM activities</u>, policies, or programs to address youth/gang violence.

When <u>planning</u> CGM activities, policies or programs, how often does your organization utilize the following:

| Always  | Frequently               | Rarely | Never | Don't Know |   |   | now |   |
|---|--------------------------|--------|-------|------------|---|---|-----|---|
| 1   | 2                        | 3      | 4     |            |   | 5 |     |   |
|   |                          |        |       | 1          | 2 | 3 | 4   | 5 |
| Internal data (for exa                                    |                          |        |       |            |   |   |     |   |
| External data (for ex                                     | lice data).              | 0      | 0     | 0          | 0 | 0 |     |   |
| Caseload or workloa                                       | ad.                      | -      |       | 0          | 0 | 0 | 0   | 0 |
| Information sharing/                                      | /Noticeissues.           |        |       | 0          | 0 | 0 | 0   | 0 |
| Police Data.  |                          |        |       |            | 0 | 0 | 0   |   |
| Stories and/or testin                                     | nonials from colleagues. |        |       | 0          | 0 | 0 | 0   | 0 |
| How other agencies have been successful (best practices). |                          |        |       |            |   |   |     |   |
| Your own experiences with organizational change.          |                          |        |       |            |   | 0 | 0   | 0 |
| Input from clients or                                     |                          | 0      | 0     | 0          | 0 | 0 |     |   |

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#### Planning for CGM Activities, Policies, or Programs

During the <u>planning</u> of CGM efforts, how often does your organization identify changes/strategies that are needed that other agencies must implement?

- Always
- Frequently
- Rarely
- Never
- Don't Know

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## Planning for CGM Activities, Policies, or Programs

During the <u>planning</u> of CGM activities, how often does your organization create the following:

| Always  | Frequently | Rarely | Never |   | Dor | ı't Kı | now |   |
|---|------------|--------|-------|---|-----|--------|-----|---|
| 1   | 2          | 3      | 4     |   |     | 5      |     |   |
|   |            |        |       | 1 | 2   | 3      | 4   | 5 |
| Goals and objectives.   |            |        |       |   |     |        |     |   |
| Performance measures or indicators of success.                    |            |        |       |   |     |        |     |   |
| Mechanisms to monitor the implementation of change or activities. |            |        |       |   |     |        | 0   |   |

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#### Recent Implementation of CGM Activities, Policies, or Programs

The next several questions ask about the <u>actual implementation</u> of your agency's recent activities, policies or program related to CGM.

Thinking about the past 3-5 years, how would you describe the level of change your organization has implemented related to CGM activities?

- Fundamental Changes
- Moderate Changes
- No Changes

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## Recent Implementation of CGM Activities, Policies, or Programs

Please tell us about the <u>implementation</u> of CGM activities, policies or program and whether your agency engaged(s) in the following:

| Always   | Frequently   | Frequently Rarely Never |   | Don't Kno |   |   | now |   |
|--|--|-------------------------|---|-----------|---|---|-----|---|
| 1  | 2  | 3                       | 4 |           |   | 5 |     |   |
|  |  |                         |   | 1         | 2 | 3 | 4   | 5 |
| Formally monitoring the  | Formally monitoring the implementation process.                        |                         |   |           |   |   | 0   |   |
| Monitoring the impacts of implementation on <b>individuals</b> within and/or outside our organization (includes staff, citizens and/or clients). |  |                         |   |           |   | 0 | 0   | 0 |
| Monitoring the impacts of implementation on <b>relationships</b> within and/or outside our organization.   |  |                         |   |           |   | 0 | 0   | 0 |
| Monitoring the impacts of implementation on <b>quality of life/work</b> in the community.  |  |                         |   |           | 0 | 0 | 0   |   |
| Monitoring the impact  | Monitoring the impacts of implementation on the political environment. |                         |   |           | 0 | 0 | 0   | 0 |
| Make adjustments as needed based on monitoring and feedback.   |  |                         |   |           |   | 0 |     |   |

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# Performance Measurement and/or Outcomes Assessment of CGM Activities, Policies, or Programs

The next section focuses on any <u>performance measurement</u> or <u>outcome assessment</u> that your agency may employ as part of your recent CGM policies, practices or activities.

After changes or new activities, policies, or programs have been implemented, how often does your agency do the following?

| Always   | Frequently                | Rarely                 | Never        | Never Don't K |   |   |   | Know |  |  |
|--|---------------------------|------------------------|--------------|---------------|---|---|---|------|--|--|
| 1  | 2                         | 3                      | 4            |               |   | 5 |   |      |  |  |
|  |                           |                        |              | 1             | 2 | 3 | 4 | 5    |  |  |
| Examine data to mea  |                           |                        |              |               |   |   |   |      |  |  |
| Compare results to g   | goals and objectives.     |                        |              |               | 0 | 0 | 0 | 0    |  |  |
| Apply lessons learned decision-making.                                       | ed (during implementation | n or data analysis) to | guide future | 0             | 0 | 0 | 0 | 0    |  |  |
| Use results to make  | further changes within tl | he organization.       |              | 0             | 0 | 0 | 0 | 0    |  |  |
| Use results to inform outside organizations of multi-agency need for change. |                           |                        |              |               |   | 0 |   |      |  |  |
| Use results as a baseline to measure future progress.                        |                           |                        |              |               |   |   | 0 |      |  |  |
| Use results to get fiscal or political support.                              |                           |                        |              |               |   |   |   |      |  |  |

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 $\label{thm:constraint} Does your agency have formal, working relationships with any of the following agencies as part of your CGM activities?$ 

| Yes | No | NotSure |
|-----|----|---------|
| 1   | 2  | 3       |

|                          | 1 | 2 | 3 |
|--------------------------|---|---|---|
| City Government          |   |   |   |
| Corrections              | 0 | 0 | 0 |
| District Attorney Office | 0 | 0 |   |
| Employment Development   | 0 |   |   |
| Faith-Based Services     | 0 | 0 |   |
| Family/Social Services   | 0 | 0 | 0 |
| Health/Mental Health     | 0 | 0 |   |
| Parole                   | 0 | 0 | 0 |
| Police                   | 0 | 0 |   |
| Probation                | 0 | 0 | 0 |
| Research/Academia        | 0 | 0 |   |
| School/School-Based      | 0 | 0 | 0 |
| Youth Outreach           | 0 |   |   |

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Thank you for completing the survey. Your answers have been recorded and you can be assured that your submission will be held strictly confidential.

If you are finished with the survey, you can close your browser window.

Finished