



VIOLENCE IS CONTAGIOUS; WE CAN
TREAT AND, ULTIMATELY, CURE VIOLENCE
USING A HEALTH APPROACH

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Assessment Visit

The Cure Violence Training and Technical Assistance (TTA) Team conducts assessment visits with all interested communities that have demonstrated necessary buy-in from essential stakeholders and leadership. While the 2-4 day assessment visit is adaptable to each community, the visit typically includes a Cure Violence 101 Workshop with representation from key entities and/or government agencies and community-based organizations, data review meetings, community partner meetings, meetings with potential workers, and community engagement. This process familiarizes stakeholders and community organizations with the Cure Violence Model and focuses on determining potential target areas, partnerships, workers, and possible program structure for future implementation. The Cure Violence TTA Team can also conduct a thorough assessment of current outreach programming to determine effectiveness and efficiency, including an assessment of credibility, capacity, and ability to work with those at highest risk of involvement in violence as well as the ability to intervene in potential violence.

Estimated Cost - \$7,500



Cure Violence Assessment Visit Schedule: An Example

Day	Meeting Description	Objective
<p>Day 1</p>	<p>Agenda Briefing+ Review with sponsor of visit</p>	<ul style="list-style-type: none"> • Clarify agenda to ensure agenda will allow all objectives to be met: Determine Potential Target Areas; Determine Target Population; Determine Potential oversight/Community based partners; and Identify potential workers (do they exist?)
	<p>Cure Violence 101 Workshop: ½ day meeting with representation from key entities and/or government agencies/organizations/offices/etc.</p>	<ul style="list-style-type: none"> • Background/orientation to as many individuals and institutions as possible to facilitate the conversations during the week • Screen 20 min documentary and/or Interrupters film (Depending on time)
<p>Day 2</p>	<p>Official Data Review meetings: Mayor’s Office; Health Department; Police Department; Office(s) of (Youth) Violence Prevention (or other city/state wide efforts); and Level 1 Trauma Unit(s)</p>	<p>Visualize Need/Determine Potential Target Area(s):</p> <ul style="list-style-type: none"> • Identify of chronic “hot spots” where shootings and killings have persisted for multiple years • Demographic information for both victims and offenders (age and gender) • Reasons/motives given for shootings and killings • Types of weapons used • Days of the week and during which time period(s) are violent incidents most likely to occur <p>Determine Target Population:</p> <ul style="list-style-type: none"> • Determine who is most likely to be involved in a shooting or killing: age range, race, criminal history, gang affiliation, etc.; • Who are the most violent groups in the target area? • Who is at highest risk to be involved in the violence? • What are common risk factors for the groups and individuals? • Of all the violent groups and individuals, who should be the focus of the program? • Number of target population in each proposed target area
<p>Days 2-3</p>	<p>Community Partner Meetings: Potential Oversight Agency (if not at city/state level) and Community Based Partners that work in potential target areas (including faith based organizations)</p>	<p>Determine best potential oversight and community based partners:</p> <ul style="list-style-type: none"> • Organization has a mission in sync with Cure Violence health based model • Have strong ties to the community where they are based (and where they would be implementing Cure Violence)



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		<ul style="list-style-type: none"> • Have prior experience with the target population • Be able to recruit potential workers • Have the ability to hire and work with people who have criminal histories/come from the groups in conflict in target area • Have a commitment to working with individuals at the highest risk of involvement in violence • Experience in complex program implementation • Financial capacity-experience in grants management • HR capacity/experience
	<p>Potential Workers: With potential community based partners - meet with individuals who are currently working with high risk to determine if individuals exist who can serve as interrupters and outreach workers. <i>These meetings tend to take place in the evening.</i></p>	<p>Identifying Change Agents/Credible Messengers: A public health understanding of behavior change holds that community norms are shifted by “change agents” who are credible, opinion leaders, and from the target group. The experience of Cure Violence has shown that the best “change agents” for interrupting violence have in many cases lived the same type of life as those who are being affected by violence. They have prior ties to gangs (or mobs, cliques, drug crews, etc.), may have done prison time for a violent offense, are still known to the target population, and reside in the target area. Their main roles are to identify and detect potential violent incidents, interrupt or mediate conflicts, and work to change the behavior of the highest risk.</p>
	<p>Evening/Night Target Area “Drive-Though”: with potential community partner or faith leader(s) who work in the potential target area(s)</p>	<p>Cure Violence staff can physically see the potential target area(s) and engage community (if appropriate)</p>
Day 4	<p>Morning: Follow-up meetings from Days 1-3</p>	<p>Address any outstanding questions or rescheduled meetings from Days 1-2</p>
	<p>Debriefing with sponsor of visit and key stakeholder</p>	<ul style="list-style-type: none"> • Review data on Potential Target Areas; Target Population; Potential Oversight Entity/Community Based Partners; and Potential Workers • Identify issues and questions that still need to be addressed and next steps for developing action plan • Set timeline for assessment visit report and next steps for possible implementation