VIOLENCE INTERVENTION AND COLLABORATION

Presented by Linnea Ashley MPH, lashey@youthalive.org, Managing Director, National Network of Hospital-based Violence Intervention Programs

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Building Networks

Sharing Information

Spreading Best Practices

Advancing Research
Solutions

We know the problems...now let's fix them.
HOSPITAL-BASED VIOLENCE INTERVENTION (HVIP)

To promote positive alternatives to violence and to reduce retaliation, re-injury, and arrest.

National Network of Hospital-based Violence Intervention Programs
NETWORKING PARTNERS

- Communities
- Non-profits/Community Organizations
- Hospitals
- Police
- Social Services
- Universities
- National Organizations
PARTNERSHIP GROUND RULES

- Shared goal: Stop Gun Violence
- Know your role(s)
  - Stay in your lane
- Learn from each other
- Build Trust
Systems Collaboration Goals

- Reducing violence
- Reducing tension
- Improving community safety
- Expanding research
- Expanding reach
**Key Elements**

- Partnership changes perception
- Trust encourages partnership
THINGS TO CONSIDER

- Barriers to working relationships between systems
- Advantages of working together in your community
Sharing Information

- Research
- Conferences
- Working groups
- Media
• Annual conference bringing together different systems/perspectives
  ▪ Healing Justice Alliance

• Training, technical assistance, and research
BEST PRACTICES

- Violence as a public health issue
- HVIPs
- **Prevention Professionals**
  - Reflective of impacted communities
- Listening to communities
- Trauma informed care
  - Acceptable mental health services
The National Uniform Claims Committee officially recognized “Prevention Professional” as a new addition to the taxonomic code. It was formally placed on the website in January 2016.
BEST PRACTICES

- Violence as a public health issue
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- Prevention Professionals
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BEST PRACTICES

- Police relationships
  - Training
  - Making space for alternative interactions

- Practice-based Evidence

- Screening AND interventions
  - Screening and Tool for Awareness and Relief of Trauma (START)

- Making research applicable
  - Community based participatory research
BEST PRACTICES

- Police relationships
  - Training
  - Making space for alternative interactions
- Practice-based Evidence
- Making research applicable
  - Community based participatory research
- Screening AND interventions
  - Screening and Tool for Awareness and Relief of Trauma (START)
S.T.A.R.T.
Screening & Tool for Awareness & Relief of Trauma
What S.T.A.R.T. Looks Like

Universally applied:
- Six-question screening questionnaire (2-3 minutes)
- Brief psycho-education and a handout on common trauma symptoms (3-4 minutes)

Potentially applied, based on screening score:
- Structured discussion of sleep hygiene tips and patient selection of next steps (3-5 minutes)
- Short breathing/relaxation or hand massage/grounding exercise (2-4 minutes each)
- Patient creation of a personalized stress reduction (S.O.S.) plan (10-18 minutes)
- Referral to mental health assessment for PTSD
## What S.T.A.R.T. Looks Like

<table>
<thead>
<tr>
<th>Question</th>
<th>Rarely 1-2/month</th>
<th>Sometimes 3-4/month</th>
<th>Often More than once a week</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. In the past 30 days have you had trouble focusing on everyday tasks, like working, doing chores, running errands or reading?</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2. In the past 30 days, have you had problems falling asleep or staying asleep?</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>3. In the past 30 days, have you had disturbing memories, thoughts, or nightmares about a current or past stressful experience?</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>4. In the past 30 days, have you felt numb, or not connected to people, activities or your surroundings?</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>5. In the past 30 days, have you felt more on guard, watchful or jumpy?</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>6. In the last 30 days, have you tried hard not to think about a current or past stressful experience, or gone out of your way to avoid situations that reminded you of it?</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>
TRAUMA INTERVENTIONS

5 brief interventions:
- Common symptoms of trauma - psychoeducation
- Breathing exercise – relaxation
- Hand massage – relaxation and grounding
- B.E.T.T.E.R. Sleep – sleep hygiene awareness and plan
- Safety or “S.O.S.” plan
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Advancing Research
Contact

Linnea Ashley
lashley@youthalive.org
www.NNHVIP.org
www.youthalive.org
510.594.2588 ext. 314