Develop and implement a community violence prevention plan that addresses shared risk and protective factors with community partners.
(**Note**: County teams must have attended the Injury-Free Academy in order to address this strategy)

**Expected Outcomes*:**
- New community violence prevention plan developed with community partners.
- Community violence prevention plan that is implemented, which addresses shared risk and protective factors across multiple forms of violence.

**Health Equity Planning Principals:**
For violence prevention to be the most effective and relevant, community members should be recruited and empowered to participate in the planning, implementation, and evaluation of the strategies developed. Plans should be developed by the community. Utilizing data on violence or risk factors, priority populations/communities may be defined by demographic factors (e.g., race/ethnicity, income level, age, gender, educational attainment, etc.) and geography (e.g., a specific community, zip code, county, etc.). Violence is not distributed equally in our communities. A consideration of the historic effects of structural inequities, racism, and intergenerational trauma should be part of the planning, implementation, and evaluation of all violence prevention strategies.

Teams that attended the Injury-Free Academy will address health equity principles as part of their community prevention plan.

**Recommended Partners:**
• child fatality prevention team • clinics/health systems • community child protection team • community college/university campuses • community organizers/violence prevention activists • coordinated community response team • domestic violence center • EMS/fire departments • exchange clubs or civic organizations • faith communities • health department • homeless shelters • housing authority • judicial system • law enforcement • LGBTQ+ resource centers • local management entities (LMEs)/ managed care organizations (MCOs) • prisons/jails • rape crisis center • school system/PTAs • Smart Start • social services • suicide prevention programs • women's centers • YMCA/Parks & Rec/community recreation centers

**Intervention Examples:**
A. A team developed a resource center in a low-income neighborhood that helps residents access a number of services (e.g., post-incarceration services, employment assistance, referrals to social service agencies, etc.,) while also offering events and programs such as athletic and art programs, trauma-informed yoga, and youth community service activities. Shared protective factors addressed: increased coordination of resources and services among community agencies, community support/connectedness, and association with prosocial peers. Shared risk factors

addressed: neighborhood poverty and diminished economic opportunities/high unemployment rates.

B. A team that included the city's Housing Authority, a local trauma center injury prevention coordinator, and a violence prevention educator chose to focus on one of the Housing Authority's housing developments. They worked with the residents to identify resources and programs that they wished to have in their community and to identified supports for disrupting disputes before they become violent. They also worked with local agencies to be more present and integrated in the community. Shared protective factors addressed: increased coordination of resources and services among community agencies, community support/connectedness. Shared risk factors addressed: poor neighborhood support and cohesion, community violence, and lack of non-violent social problem-solving skills.

C. A team worked with numerous partners to create a mental health clinic within a local health department. Shared protective factor addressed: coordination of resources and services among community agencies and access to mental health and substance abuse services. Shared risk factor addressed: psychological/mental health problems and substance use.

**Related Programs:**

The Injury and Violence Prevention Branch will provide technical assistance for this strategy only through awarded applicants of the Injury-Free NC Academy-Using A Shared Risk and Protective Factors Approach to Prevent Multiple Forms of Violence. All local health departments that choose this strategy shall create a community team of 3-6 individuals to participate in this in-person, team-based training consisting of three sessions – two, two-day and one, one-day final workshop. Each session is separated by approximately three months for a total of six months from start to finish. Participants will receive all training materials, breakfast, lunch and refreshments at no cost. There is no registration fee for teams; however, teams will be responsible for their own travel and accommodations.

**Recommended Tools/Resources:**

A. Strengthening Partnerships Between Business & Public Health: A Roadmap to Advancing Community Injury and Violence Prevention

B. https://cdn.ymaws.com/www.safestates.org/resource/resmgr/publications2020/Strengthening PartnershipsRoa.pdf Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence (publication from CDC and the Prevention Institute) www.cdc.gov/violenceprevention/pdf/connecting_the_dots-a.pdf

C. CDC Connecting the Dots online training about the shared risk and protective factors for multiple forms of violence https://vetoviolence.cdc.gov/connecting-dots

**North Carolina Resources:**

A. NC Rape Prevention and Education Program: www.injuryfreenc.ncdhhs.gov/preventionResources/SexViolence.htm

B. NC Coalition Against Sexual Assault www.nccasa.org

C. NC Coalition Against Domestic Violence:
   https://nccadv.org/
D. NC Essentials for Childhood
   http://nciom.org/task-force-on-essentials-for-childhood/
E. Prevent Child Abuse North Carolina
   www.preventchildabusenc.org/

**Data Sources**
A. Most recent local/county Community Health Needs Assessment
B. NC Division of Public Health Injury and Violence Prevention Branch data
   www.injuryfreenc.ncdhhs.gov/DataSurveillance/
C. Social Determinants of Health by Regions
   http://nc.maps.arcgis.com/apps/MapSeries/index.html?appid=def612b7025b44eaa1e0d7af43f4702b

NC Department of Health and Human Services • Division of Public Health • Chronic Disease and Injury Section •
Block Grant Team • Healthy Communities Program •
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