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Through the NOVA Door

A Process Evaluation of Shelby County's Defending Childhood Initiative

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Abstract

As part of the U.S. Attorney General's *Defending Childhood Demonstration Program*, eight sites around the country were funded by the Office of Juvenile Justice and Delinquency Prevention and the Office of Violence Against Women to use a collaborative process to develop and implement programming to address children's exposure to violence in their communities. Shelby County, Tennessee was chosen as one of these sites, and, since 2010, has received over \$3 million in federal funding for this initiative.

Led by the Shelby County Office of Early Childhood and Youth, the Shelby County Defending Childhood Initiative is known as the Network for Overcoming Violence and Abuse ("NOVA"). The program serves children ages 0-17 who have directly or indirectly been exposed to violence and initially targeted three apartment complexes in the Frayser and Hickory Hill neighborhoods in Memphis. These locations were chosen because of their high concentrations of violent crime and poverty.

A major component of the initiative was to place staff in the three target apartment complexes, where staff conducted outreach to children and families in need, and, through case management and advocacy, referred and connected families to necessary services for therapeutic treatment and to organizations that could help them meet other basic needs (e.g., rental assistance). NOVA also created a service delivery model based on a "No Wrong Door" approach where at-risk children or children who have been exposed to violence and their parents in the targeted neighborhoods could receive treatment services as well as support for taking care of their basic needs no matter where their needs are identified.

Other components of NOVA's programming included holding two community awareness campaigns. One targeted the professional community—law enforcement, treatment providers, and others who work with children and youth—to let them know about the services available through NOVA. A separate community awareness campaign was created for community members, particularly residents in the targeted apartment complexes and consisted of fairs and community cafes where apartment residents would learn about different topics, such as child abuse prevention and nurturing parenting. In addition, NOVA partnered with the University of Memphis' Department of Social Work to train professionals who work with children on children's exposure to violence. Finally, NOVA contracted with external consultants to create a shared data management system to be used as a trauma surveillance, referral and case management tool by NOVA agencies and others after the Defending Childhood grant ends.

NOVA created many opportunities for both children and adults of Shelby County who have been affected by violence, and the collaboration among NOVA's many partner agencies has been one of the initiative's notable successes. However, the strategy of place-based targeted outreach and case management, although successful in helping families in need, may have shifted the focus of the initiative away from addressing children's exposure to violence to a focus on the associated problems of concentrated poverty and housing instability found in the targeted apartment complexes. A place-based approach may be more appropriate for initiatives that address poverty than for ones that have a specific focus on children's exposure to violence. Despite this caution

Abstract

arising from the research on the NOVA program, evidence is insufficient to conclude definitively that a place-based model for addressing exposure to violence could not be strengthened.

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Finally, special thanks to the current Shelby County NOVA staff members, Malrie Shelton and Keisha Walker, for welcoming our team to your community and for your enduring commitment to improving the lives of children.

This report is dedicated to the memory of Peggy Russell.

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Chapter 1 Introduction

About the Defending Childhood Initiative

A recent national survey found that 60 percent of American children have been exposed to violence, crime, or abuse in their homes, schools, or communities—and that 40 percent were direct victims of two or more violent acts. In an effort to address children's exposure to violence, the United States Department of Justice (DOJ), under the leadership of Attorney General Eric Holder, launched the *Defending Childhood Initiative*. This national initiative aims: 1) to prevent children's exposure to violence; 2) to mitigate the negative impact of such exposure when it does occur; and 3) to develop knowledge and spread awareness about children's exposure to violence. The motto of the initiative is "Protect, Heal, Thrive."

A major component of this initiative is the *Defending Childhood Demonstration Program*, which involved the Office of Juvenile Justice and Delinquency Prevention (OJJDP) and the Office of Violence Against Women (OVW) in providing funding to eight sites around the country to address children's exposure to violence through intervention and prevention programming, community awareness and education, and professional trainings. The eight sites are: Boston, MA; Chippewa Cree Tribe, Rocky Boy's Reservation, MT; Cuyahoga County, OH; Grand Forks, ND; Multnomah County, OR; Portland, ME; Rosebud Sioux Tribe, SD; and Shelby County, TN.

The Center for Court Innovation was funded by the National Institute of Justice to conduct the evaluation of the demonstration program, and Futures Without Violence was funded by OJJDP to serve as the technical assistance provider. This process evaluation report of the Shelby County Defending Childhood Initiative is one in a series of multi-method process evaluations of six of the chosen sites. A report synthesizing the major cross-site lessons learned from all six process evaluations is issued alongside the individual site reports.² In addition, a cross-site outcome evaluation of these same six demonstration project sites will be forthcoming in 2015.

Whereas the current research focuses on the implementation of chosen strategies, a previous report issued in 2011 explored and identified cross-site themes and lessons from the initial strategic planning process.³

Besides the demonstration program, other components of the larger *Defending Childhood Initiative*, which are outside the scope of the current evaluation, include the Task Force on

¹ Office of Juvenile Justice and Delinquency Prevention. 2009. Children's Exposure to Violence: A Comprehensive National Survey. Available at https://www.ncjrs.gov/pdffiles1/ojjdp/227744.pdf. Last retrieved 11/12/14.

² Swaner R, Hassoun Ayoub L, Jensen E, and Rempel M. 2015. *Protect, Heal, Thrive: Lessons Learned from the Defending Childhood Demonstration Program.* New York, NY: Center for Court Innovation.

³ Swaner R and Kohn J. 2011. *The U.S. Attorney General's Defending Childhood Initiative: Formative Evaluation of the Phase I Demonstration Program.* New York, NY: Center for Court Innovation. Available at http://www.courtinnovation.org/sites/default/files/documents/Defending_Childhood_Initiative.pdf.

Children's Exposure to Violence⁴ and the Task Force on American Indian and Alaskan Native Children Exposed to Violence.⁵

Shelby County's Defending Childhood Initiative

In October 2010, OJJDP awarded Shelby County, Tennessee \$159,099 to embark on a collaborative process that would culminate in a needs assessment and strategic plan for addressing children's exposure to violence in Shelby County. The year that followed was considered Phase I of the *Defending Childhood Demonstration Program*. OJJDP subsequently awarded Shelby County \$2,000,000 to implement its strategic plan (Phase II) between October 2011 and September 2013, and provided an additional \$610,000 to continue this work between September 2013 and September 2014. Finally, on October 1, 2014, OJJDP awarded the County an additional \$612,260 to focus on sustainability through September 30, 2016. These funds were awarded as part of the U.S. Attorney's *Defending Childhood Initiative Demonstration Program*.

Led by the Shelby County Office of Early Childhood and Youth, the Shelby County Defending Childhood Initiative is known as the Network for Overcoming Violence and Abuse (henceforth "NOVA"). The program serves children ages 0-17 who have directly or indirectly been exposed to violence of all kinds (e.g., child and sexual abuse, intimate partner, community), initially targeting the Frayser and Hickory Hill neighborhoods in Memphis.

This process evaluation was prepared by Center for Court Innovation research staff. It is based on data collected and research conducted between October 2011 and September 2014. Research activities included an extensive document review, primary quantitative data collection, three site visits, multiple conference calls, three focus groups with 14 residents from the targeted neighborhoods, and 31 interviews with 27 representatives from organizations involved with NOVA, including the project coordinator, and representatives from law enforcement, juvenile court, social services, the local hospital, a marketing firm, and consultants.

Social and Historical Context

According to the 2010 United States Census, Shelby County was the largest county in Tennessee with an estimated population of 927,644, 26% of whom were children and youth under the age of 18. Its population was 52% African American, 41% white (non-Hispanic), 6% Hispanic or Latino, and 1% other. According the 2010 American Community Survey, one-fifth (20%) of the residents of Shelby County lived below the poverty line and the median family income is \$43,990.

Approximately 646,889 people resided in Memphis, which is 70% of the population of Shelby County according to the 2010 U.S. Census. As the map below (Figure 1.1) shows,⁶ the city of Memphis is the largest area within the county. Its population was 63% African American, 28%

⁴ The full report of this task force can be found here: http://www.justice.gov/defendingchildhood/cev-rpt-full.pdf.

⁵ The full report of the American Indian and Alaska Native Task Force can be found here:

http://www.justice.gov/sites/default/files/defendingchildhood/pages/attachments/2014/11/18/finalaianreport.pdf.

⁶ Map was accessed at http://www.city-data.com/county/Shelby_County-TN.html. Bartlett, Shelby Farms, and Germantown are suburbs of Memphis. Collierville, Lakeland, Arlington, Millington, and Shelby Forest are other cities within Shelby County.

white (non-Hispanic), 7% Hispanic or Latino, and 2% other. The 2010 American Community Survey reports that 28% of households in Memphis have children younger than 18, and 60% of children live with an unmarried parent. The median family income is \$37,045, nearly \$7,000 lower than the county as a whole, pointing to the reality of significant concentrated disadvantage within many of the neighborhoods that fall within city limits.

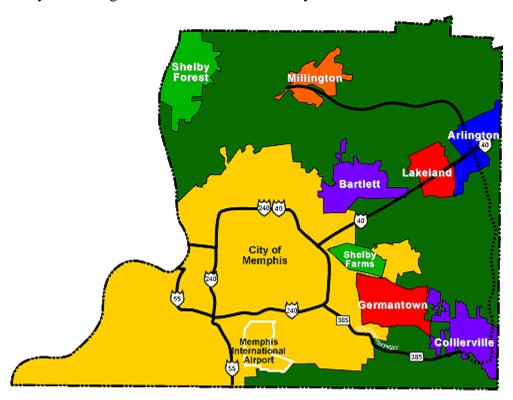


Figure 1.1. Map of Shelby County including Memphis and other cities of Shelby County

Children's Exposure to Violence⁷

According to the F.B.I.'s 2010 Uniform Crime Report, there were 10,384 violent incidents (a rate of 15.4) in Memphis—the highest in the state. In 2009, 14% of all violent crime victimizations were youths under the age of 18. Data from a county-wide survey about domestic violence victimization, interpreted along with 2010 data from the Memphis Police Department and Shelby County law enforcement, indicates there are approximately 25,000 incidents of domestic violence per year, half of which occur where children are present. The Tennessee Council of Juvenile and Family Court Judges reported 2,084 child abuse and neglect cases processed in the Shelby County Juvenile Court in 2010. According to the 2009 Youth Risk Behavior Survey (YRBS), 38% of Memphis City School Students had been in a physical fight one or more times in the last 12 months. The Memphis City School System reported 1,095 violent incidents in its schools during school year 2009-2010.

⁷ Other individual site reports provide additional statistics about exposure to violence from a community survey conducted by CCI. A community survey was not conducted in Shelby County, because NOVA services targeted individuals in three apartment complexes. Therefore, focus groups with residents in the apartment complexes were conducted. More about the focus groups is discussed in Chapter 4.

History of Collaborative Efforts to Address Violence in the Community

Shelby County has a long history of interagency collaboration. As one NOVA member put it, "We always collaborate; we don't do anything by ourselves." Another echoed these sentiments by saying, "We've been at so many tables together, we speak the same language." Shelby County's NOVA Initiative is leveraging this history by building on the work of Operation: Safe Community (OSC)⁸ a strategic collaboration spearheaded by the Memphis Shelby Crime Commission with the goal of reducing crime in the community through using smart, data-driven policing. OSC began in 2005 and focused heavily on law enforcement and intervention strategies to reduce crime. OSC leaders later made a commitment early in 2010 to focus on comprehensive strategies for reducing youth violence and domestic violence, with an emphasis on community-based prevention and promotion of resiliency factors. With its focus on the prevention and treatment of children's exposure to violence, the Defending Childhood Initiative became a timely way to continue and expand the goals and efforts of the preexisting OCA collaboration.

The NOVA Initiative was able to draw upon the players involved in other preexisting initiatives as well. The Memphis Fast Forward Youth Violence Reduction Committee, a part of OSC, already existed to focus attention on addressing violence among youth. The Erase Domestic Violence Collaborative existed as a working group whose efforts concerned public awareness related to domestic violence and the workplace, domestic violence homicide, and children exposed to domestic violence. The preexisting Shelby County Domestic Violence Council, which includes service providers, police, prosecutors, and the attorney general, meets monthly.

Furthermore, many of the same partners involved with NOVA have worked together to establish the Family Safety Center in 2012, which is one central location where all services for domestic violence victims are located (e.g., citizen's dispute resolution, counselors, childcare room, shelter). The U.S. Attorney General for the Western District of Tennessee runs an adult reentry coalition that involves 30 community-based organizations.

Finally, the Early Success Coalition (ESC) includes leaders and frontline staff from local and state government, education, healthcare, faith-based and community organizations. Funded by the Administration for Children and Families, the ESC's mission is to develop and expand an early childhood comprehensive system of high quality services for children from pre-conception to age eight that engages families, promotes resiliency, and supports positive early childhood development. Together, these services offer families an integrated, comprehensive set of resources to help them provide their children with the strongest foundation for lifelong success. The ESC now has about 80 organizations and is co-chaired by the Administrator of the Office of Early Childhood and Youth and the project director of Shelby County's Nova Initiative.

Despite extant strong collaboration and preexisting intervention and prevention programs in the county, there remained a large gap in services because of the numbers these programs can serve vis-à-vis the even more vast scope of the problem of children's exposure to violence. This is the gap that the Network for Overcoming Violence and Abuse was designed to fill.

⁸ For more on Operation: Safe Community see http://www.operationsafecommunity.org/youthviolence.

Chapter 2 The Oversight and Staffing Structure of the Initiative

This chapter provides a brief overview of the organizational structure that oversees and operates the Network for Overcoming Violence and Abuse (NOVA): the *Steering Committee* is comprised top-level representatives from each of the partner agencies and is responsible for implementation of the Initiative; the *NOVA Partnership*⁹ is a workgroup for the Steering Committee that includes Defending Childhood funded and unfunded partners (e.g., law enforcement, local hospital, social services, mental health, local research group, consultants, and the court system) who contributed to the design of the service delivery process and provides general planning, oversight, and coordination of the Initiative; and *subcommittees* were formed to handle more of the nuanced plans of the project. This chapter also discusses project staffing and specific budget allocations made with federal Defending Childhood funds.

The NOVA Steering Committee

NOVA falls under the umbrella of Operation: Safe Community (OSC), a comprehensive public safety initiative within Memphis and Shelby County with the goal of reducing crime (see previous chapter). OSC is spearheaded by the Memphis Shelby Crime Commission, an independent non-profit in Memphis that brings agencies (i.e., businesses, schools, neighborhood associations, hospitals, public safety agencies, and local violence prevention organizations) together to focus on innovation crime prevention. Therefore, the NOVA Steering Committee was created as a subcommittee of the Memphis Shelby Crime Commission/OSC, and is responsible for overseeing the implementation of the NOVA initiative. Members of the Steering Committee include the NOVA project coordinator; MSCC representatives, top-level representatives from relevant local and state public agencies (e.g., law enforcement and education), and community-based partners, with the latter including social services, faith-based and grass-roots organizations, neighborhood leaders, and business leaders. The Steering Committee meets on a quarterly basis to discuss the NOVA projects and address challenges that may arise.

The NOVA Partnership

The NOVA Partnership is a collaborative effort of over 80 participants from 16 organizations. From the public sector, the NOVA Partnership includes agencies within the Shelby County Government such as the Shelby County Office of Early Childhood and Youth (SCOECY), Juvenile Court of Memphis and Shelby County, Memphis Police Department, and Shelby County Department of Children's Services. From the private sector, the Partnership incorporates a wide range of community-based organizations and stakeholders, including The Family Safety Center, Agape Child and Family Services, Memphis Child Advocacy Center, Le Bonheur Children's Hospital, Shelby County Crime Victims Center, Victims to Victory, and Exchange Club Family Center. These community-based agencies provide social, therapeutic, and legal services for adults

⁹ Other Defending Childhood sites refer to this group as the "collaborative body."

¹⁰ For more information on NOVA's partners, see http://shelbycountynova.net/partners.html.

and children who have been exposed to violence. In addition, the University of Memphis's Department of Social Work was brought into the Partnership to facilitate professional trainings on children's exposure to violence. The Safeways Initiative uses real time crime data to work collaboratively with law enforcement and apartment owners/managers to *reduce* crime in apartment communities.

Splash Creative was the promotion and marketing partner who built public awareness using digital communications, social media tools, public and media support

Consilience Group, LLC facilitated the system design to ensure stakeholder buy-in and implementation feasibility, designed detailed identification and referral policies and procedures, developed the NOVA Model Policy and Procedure Manual, including detailed workflow, roles and responsibilities, assisted in the selection of assessment and reporting instruments, partnered with Safeways (and formerly CBANA), the NOVA research partner, to design data collection and reporting protocols to support project tracking and evaluation.

In Phase I of the initiative, the Partnership worked together on developing the NOVA strategic plan. It took an additional six to eight months in Phase II to work out the details of implementation. In Phase I, the focus was on "big picture" planning, whereas at the start of Phase II, the Partnership had to figure out the logistics of how to move from big picture to actual implementation. The Partnership met every week from October 2011 until the end of August 2012, then moved to every other week. Approximately 18-20 people attended each meeting to discuss how the project was going, upcoming events, and next steps for NOVA. The NOVA Partnership held 71 meetings from October 1, 2011 to September 30, 2014.

Some of the actual Partnership participants have changed over the course of the planning and implementation years. Many representatives who had originally been involved were the leaders of their organizations; once implementation started in September 2011, however, agency leaders started sending staff members to Partnership meetings in their stead. When this happened, it took time for new staff to become acquainted with the local NOVA plans that had been developed before their participation.

Subcommittees

In Phase I of the initiative, subcommittees were formed to address specific topics such as assessment, community crisis intervention, early childhood education, and marketing. Though these committees met regularly during the planning phase, in Phase II they only met as needed.

Core Project Staffing

The OJJDP funding for NOVA went through the Shelby County Office of Early Childhood and Youth (SCOECY). The SCOECY employs one full-time NOVA project coordinator who holds primary responsibility for implementing grant activities. There was early turnover in project coordinator position: The person who was the NOVA coordinator at the start of Phase II left in December 2011, leading to delays in contracts and budgeting. An interim project coordinator took over until September 2012, when the current and third project coordinator started.

The project coordinator is in charge of supervising and staffing NOVA; coordinating meetings with partners of the Initiative; creating and submitting progress reports to partners, stakeholders, OJJDP, and the Center for Court Innovation; coordinating training and social marketing activities; helping with the development of a shared client database; managing the grant monies; and triaging and referring clients from secondary partners and the community that contact SCOECY for NOVA services. The administrator of the SCOECY, who was the interim NOVA project coordinator from late in 2011 through September of 2012, also assists the current permanent coordinator with the aforementioned activities. The two consult with each other on a daily basis while working on the day-to-day administration of the project.

Funded Partners

While the specifics of program implementation are discussed in Chapter 3, NOVA funded the following subcontracts and hires as part of their efforts:

- NOVA dedicated OJJDP monies to funding four referral partners with designated family support providers (FSP), who are directly responsible for assisting children and their families with NOVA services. These funding partners are:
 - o Agape Child and Family Services was given a contract to implement a substantial portion of NOVA services. They hired four full-time family service providers, otherwise referred to as "Connectors," and a full-time supervisor with funds comprising approximately one-fourth of NOVA's budget (\$650,000).
 - Victims to Victory hired one full-time family service provider, who is also a full-time child therapist serving NOVA clients.
 - The Shelby County Office of Early Childhood and Youth hired one full-time "Navigator," to be located at the Family Safety Center (FSC) to assist individuals who come directly to the FSC requesting services (e.g., assistance with filing an Order of Protection, counseling, accessing to emergency shelter/housing) and those who have been referred by NOVA partner agencies.
 - o The Shelby County Office of Early Childhood and Youth also hired a Family Violence Resource Specialist to work full-time at the Juvenile Court of Memphis and Shelby County, providing eligible youth with referrals to subcontracting agencies for therapeutic services.
- NOVA contracted with the Exchange Club Family Center, Victims to Victory, the Memphis Child Advocacy Center, and Le Bonheur Children's Hospital to provide individualized therapy, group therapy for adults and children, and support groups for children eligible for NOVA services. With the funding, the Exchange Club Family Center hired four full-time therapists. Victims to Victory hired one child therapist who is also the FSP. Le Bonheur Hospital also contracts with a psychologist to conduct Child and Parent Psychotherapy (CPP) and is funded by the NOVA grant on an as needed basis. The Memphis Child Advocacy Center did not hire additional therapists to help specifically with NOVA clients.

- As part of the NOVA contract with Victims to Victory, it also contracts with a trainer who teaches the faith-based community about children's exposure to violence.
- As part of the NOVA contract with the Memphis Child Advocacy Center, it hired four parttime trainers (approximately 0.25 FTEs each) to teach professionals in Shelby County how to prevent and respond to child sexual abuse.
- As part of the NOVA contract with Le Bonheur Children's Hospital, it hired two full-time specialists (one for the childcare center employees in North Memphis and one in Southeast Memphis) to train childcare center workers on how to respond to and prevent children's exposure to violence.
- Safeways, a collaboration of Memphis and Shelby County organizations, works with apartment managers of public housing complexes in Memphis to provide a safe environment and better quality of life for residents. NOVA pays for a portion of the Safeways coordinator's salary (0.75 FTE), because one of the apartment complexes where NOVA is concentrating its resources (Pershing Park) is part of the Safeways program. Safeways also serves as the local research and evaluation partner to determine the impact of the NOVA Initiative. A research analyst works part-time (0.25 FTEs) with Safeways for the NOVA evaluation. As will be discussed below, many of the core NOVA strategies involved targeted outreach, prevention, and intervention services in a small number of apartment complexes, making the Safeways partnership an important element of the final NOVA model.
- NOVA gave contracts to two consultants from the Consilience Group, LLC. These
 consultants facilitated the creation of a client data sharing system so that multiple agencies
 in Shelby County could track client files and use the data for evaluation purposes and
 streamlined service delivery. They also assisted with the development of screening and
 assessment tools. In addition, they were tasked with writing the NOVA Model Policy and
 Procedure Manual.
- Splash Creative, a marketing agency, was hired to help with the community awareness campaign.

Unfunded Partners

NOVA works with additional agencies in Memphis and Shelby County that did not, per se, receive federal funding. Secondary referral partners include agencies that do not have designated NOVA staff within their organization, but can still make referrals to the NOVA coordinator, who then contacts the appropriate FSP. The secondary referral partners are the Memphis Police Department, Shelby County Sheriff's Office, Shelby County District Attorney and Public Defender, and Le Bonheur Regional Trauma Center.

In addition, the University of Memphis Department of Social Work conducts the trainings of professionals in Shelby County. The number of staff varies by the type of training. NOVA does

not have to pay for the staff to conduct a training, because many are University of Memphis faculty who already receive funding from other sources to teach professionals in the community.

Agape hired security officers to protect NOVA staff at the Memphis apartment complexes where services were being provided.

The Center for Community Building and Neighborhood Action (CBANA) conducted a needs assessment in Phase I of the grant to identify the prevalence of children's exposure to violence in Memphis and Shelby County and to identify the strengths and weaknesses of local agencies. CBANA remained part of the NOVA Partnership in Phase II, but the primary researcher retired in 2013. Safeways took over the role of tracking indicators to evaluate NOVA programming.

Chapter 3 Shelby County's Defending Childhood Program Model

The Network for Overcoming Violence and Abuse (NOVA), the local Shelby County Defending Childhood Demonstration Program, is just that: a network. Much of the work of NOVA is about bringing together key social service agencies and partners to form a cohesive system for addressing children's exposure to violence. In this chapter, program activities are described in each of the key areas that comprise NOVA. We summarize the ways (i.e., "doors") in which children and adults can access NOVA services and outline the treatment and healing (direct intervention) services; the targeted prevention programming; community awareness and education campaigns; professional training; and system infrastructure and capacity building activities. In each of these key areas, challenges to implementation will also be discussed.

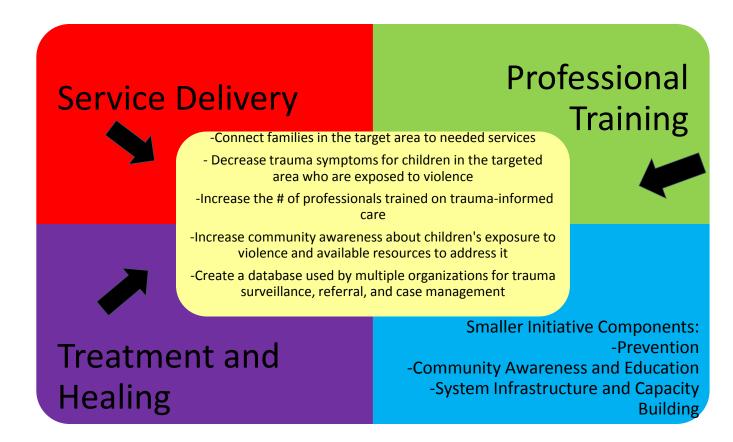
In the initial strategic planning phase of the Defending Childhood Initiative, the Center for Community Building and Neighborhood Action (CBANA) at the University of Memphis, the initiative's research partner, conducted a needs assessment to determine where the greatest concentration of violence was occurring in the county. The assessment identified both the prevalence of children's exposure to violence in Memphis and Shelby County overall as well as where exactly the violence was concentrated; individual and neighborhood risk factors associated with exposure; resources to address it; and barriers to accessing services. Using data from multiple sources, CBANA found that violent crime rates were concentrated in neighborhoods with disproportionately high poverty, domestic violence, single family households, non-working adults, and youth ages 16-24 who were neither in school nor working. These neighborhoods were located in Northwest Memphis, Southwest Memphis, and Southeast Memphis, forming a horseshoe on a map (see Appendix A for illustrations of the overlapping risk factors with violent crime incidents among youth under age 24 in Memphis). The high needs of these neighborhoods, combined with the large number of apartment complexes located within them, made these neighborhoods ideal locations for place-based services. ¹¹

Based on the needs assessment findings, NOVA chose to focus Defending Childhood resources in two geographic areas: Frayser and Hickory Hill (zip codes 38115, 38118, 38125, 38128, 31827, 38141). Specifically, NOVA targeted three apartment complexes with approximately 3,000 residents, as well as the 40,000 children who attended Memphis City Schools in the neighborhoods where these complexes exist. The complexes are at most two stories and have open spaces with playground areas. Pershing Park in Frayser has 140 units. Bella Vista and Wingood Manor are both in the Hickory Hill area. Bella Vista has over 300 units with a large population of Spanish speaking residents. Wingood Manor has 216 units.

Chapter 3. Shelby County's Defending Childhood Program Model

¹¹ Place-based services are used to address problems of communities at a local level and help to strengthen them.

The figure below shows the different program model components of NOVA, and the goals it hoped to achieve through these activities:



Entry to NOVA Services

The NOVA service delivery model is based on a "No Wrong Door" approach¹² where at-risk children or children who have been exposed to violence and their parents can receive treatment services as well as support for taking care of their basic needs no matter where their needs are identified (see Figure 1 below for the system model). The primary "doors," or referral partner organizations where children and adults can access NOVA services, are: 1) Agape Child and Family Services; 2) the Family Safety Center; 3) the Juvenile Court of Memphis and Shelby County; 4) Victims to Victory; 5) the Exchange Club Family Center; 6) Memphis Child Advocacy Center; 7) Shelby Crime Victims Center; and 8) Department of Children's Services.

¹² "No Wrong Door" was terminology developed by the NOVA team specifically for Shelby County.

Shelby County NOVA "No Wrong Door" System Model REFERRAL SOURCES: Systems serving INTENSIVE INTERVENTION: children exposed to violence Trauma-Focused Therapy Outreach in High Crime Formal local provider coalitions Assessment EARLY INTERVENTIONS (incl. DV) Apartments Mental health/substance abuse Referral to Family treatment appropriate Support Family Safety Center level of Primary and maternal healthcare, **Providers** resource including prenatal/early home Wraparound Juvenile Court, TN visitation Services Department of Children's Parenting support and education NOVA Services, Shelby County Mentors/tutors Coordinator: Crime Victims Center and Educational/job readiness triage Victims to Victory, Agape, Concrete and emergency supports **Exchange Club** (housing, etc) Hotline Memphis Police, Shelby County Universal and Indicated Prevention Programs and Resources Sheriff, D.A. and Public Defender Community awareness and messaging to change community norms Parenting training/home visitation (family & sexual violence) Le Bonheur Children's Hospital and prevention; pro-social and emotional resiliency development) the Regional Trauma Center Childcare and K-3 teacher training for pro-emotional/social practice Non-violence student training K-12 Community Members Bullying prevention programming K-12 SUPPORTIVE SYSTEM INFRASTRUCTURE Shared data systems (outcomes reporting and coordinated tracking system) 2. Training on Trauma-Focused Practice: Identification, Assessment and Treatment

3. Policy and Funding Reform and Advocacy

Figure 1. System Model

Four of the primary referral partners (i.e. Agape Child and Family Services, the Family Safety Center, the Juvenile Court of Memphis and Shelby County, and Victims to Victory) have a designated family service provider (FSP) who is directly responsible for assisting children and their families with access to NOVA services (see Figure 2 for primary referral partner service diagram). Families can come directly to the FSP or be referred by the other primary referral partners.

Primary Partner and Family Support Provider Service Workflow

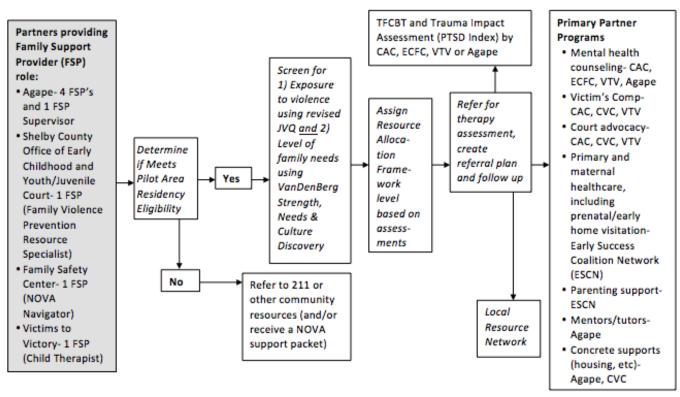


Figure 2. Primary Partner and Family Support Provider Service Workflow

Secondary referral partners include the Memphis Police Department, Shelby County Sheriff, District Attorney, and Public Defender's Offices, and LeBonheur Children's Hospital and the Regional Trauma Center. These partners are considered "secondary" since they do not have dedicated NOVA staff that work directly with participants imbedded in their organizations (see Figure 3 for secondary referral partner service diagram). Members of the community can also gain access to NOVA by calling a crisis hotline number.

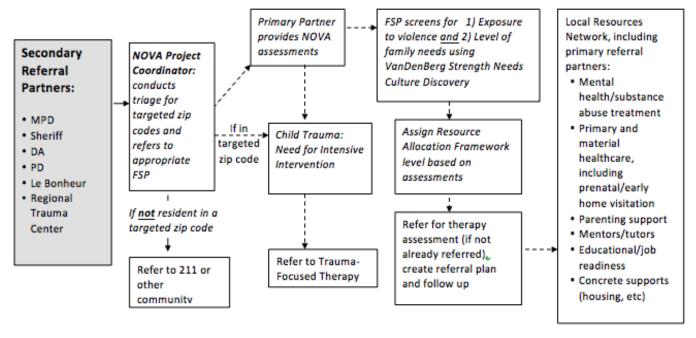


Figure 3. Secondary Referral Partner Service Diagram

Primary Referral Partners -- Family Service Providers

Agape: Offering Place-Based Services in Apartment Complexes. Among the four primary referral partners noted above, Agape Child and Family Services ("Agape") plays a unique role, because Agape staff are situated directly within the targeted apartment complexes, allowing for particularly intensive and proactive outreach. Agape is a Memphis-based non-profit organization that received funding in 2011 to administer one component of NOVA programming in the targeted neighborhoods. Agape's Powerlines¹³ program began in Memphis in 2009 as a place-based model working in poverty-stricken apartment complexes to address crime, domestic violence, and economic development in the Whitehaven, Hickory Hill/Southeast Memphis, and Raleigh/Frayser neighborhoods. The Powerlines program offers transitional housing, counseling, after-school programs, life-skills classes, community events, GED practice, job-readiness, nutrition classes, and resume and job search classes to community members.

Three apartment complexes in the identified zip codes were selected for NOVA's assistance as the primary places where clients would "enter the NOVA door" to receive services and referrals. At these complexes, Agape staff are FSPs, primarily referred to as "connectors," who are mostly on site helping to connect families to the services they may need (e.g., receiving therapy, filing court orders, paying their utility bills, finding daycare for their children). Because the complexes are

Chapter 3. Shelby County's Defending Childhood Program Model

¹³ See http://www.agapemeanslove.org/programs-and-services/powerlines-community-network/ for more information about Powerlines.

located in high crime areas, private security officers were also hired by Agape (not using NOVA funding) to protect residents and staff.

At the start of the program, Agape met with the apartment complex managers to tell them about the program. Although there was some reported skepticism on the part of the managers, they eventually agreed to let Agape operate NOVA programming in their complexes, and even provided NOVA with a space in each complex from which Agape could run their programming. The space was given for free (i.e., no rent or utilities were charged).

Agape staff consist of four full-time connectors and a full-time supervisor that serve the Wingood Manner, Pershing Park, and Bella Vista apartments. Most staff are on site in a donated two-bedroom apartment, and move between the complexes. All connectors have Bachelor's degrees and are from the targeted communities; however, they are not licensed clinicians. They work regular full-time hours, but are also present during events at night and on weekends. They have all been trained by their supervisor, who holds a Master's degree in social work, and by a mix of direct service providers in the NOVA partnership on how to respond respectively to domestic violence, provide resources for victims, and utilize wraparound services. Wraparound services involve creating an individualized plan for a child who has been exposed to violence that coordinates multiple agencies (e.g., social services, schools, medical providers) to serve the child as well as support his/her family so that the he/she can grow in a positive and safe environment.

In May 2012, the connectors started forming relationships in the community (e.g., with police precincts, community organizations, neighborhood watches) and meeting with residents at monthly events. They were talking to residents to assess their needs, while simultaneously taking time to identify resources in the community. Connectors distributed NOVA flyers with their names and phone numbers to let residents know that they would soon be available as resources for people who lived in the complexes.

The connectors began serving the complexes after the official NOVA launch on October 10, 2012. Referrals come from other NOVA FSPs or residents from the apartment complexes self-refer and directly request help. Additionally, connectors reach out to residents based on reports from the police or leasing agent (victims sometimes call apartment managers before the police). Connectors then go to the client or potential client's home, or the client can come to the office in the apartment complex.

Upon initial contact, the connectors use VanDenBerg's "Strengths, Needs, and Culture Discovery¹⁴," which is a conversational approach to determine the family resource needs and provide wraparound services. The tool helps to identify what families need help with, to provide family members with a long-range vision for the child and family, and to list people involved to assist the family with their needs.

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¹⁴ For more information on VanDenBerg's "Strengths, Needs, and Culture Discovery" see http://www.vroonvdb.com.

If a client initially discloses violence exposure, connectors will complete a NOVA intake form and administer an amended version of the Juvenile Victimization Questionnaire (JVQ-R2), Screener Sum Version, Youth Lifetime Form¹⁵ (see Appendix B for the assessment). Because JVQ-R2 assessment is widely used, it allows for a comparison of NOVA's service population to national data. The connectors received extensive training from licensed counselors on how to obtain the personal information in the JVQ-R2 information without reading through it as a checklist.

Based on the more comprehensive assessment using the JVQ-R2, the connectors then refer clients out for therapeutic services, such as the evidence-based Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) (a more in-depth discussion will be presented in the Treatment and Healing section) or parenting classes/education. In short, the role of the connectors is to refer clients to the agencies in the NOVA network that can provide them with appropriate and needed services, while also providing a safe space for people to come to discuss their problems with a caring person. Therefore, while the model does not rely on trained clinicians to serve as connectors, the model takes advantage of the skills that connectors are intended to have in initial outreach to have the connectors refer appropriate cases out to evidence-based clinical services. Moreover, the connectors have put together a resource guide for residents, and they can provide linkages to mental health services as well as referrals for rental and utility assistance. As one of the connectors commented, "Being place-based, we can touch and walk alongside people right where they live," which allows for greater access to services (e.g., helps people overcome transportation issues). From October 2012 – April 2014, Agape served 350 children and families for NOVA.

Challenges to Place-Based Services in the Apartment Complexes. Agape staff identified myriad challenges to working in the apartment complexes. The first involved negotiating with the apartment management on which complexes the Agape connectors would work out of. One of the original desired sites was Todd's Creek—identified as an area in need based on concentrated crime and poverty levels—but due to inadequate space, there was no area where the connectors could ensure confidentiality, so it was not advantageous to working with clients. Therefore, it was decided that one of the NOVA offices would be relocated to Pershing Park instead. The connectors still serve Todd's Creek residents because of its geographic proximity to Pershing Park; however, transportation to the NOVA office remains a challenge for those residents, since the distance between Todd's Creek and Pershing Park is 1.7 miles and not within a short walking distance.

Another challenge relates to childcare. Originally Agape set a goal of increasing the enrollment in three-star childcare among apartment complex residents, but connectors identified the primary reason they have struggled to meet this goal: often, parents prefer that their children be looked after by family members rather than have them go to a daycare center. Although Agape has provided information on the childcare centers with three-stars (three is the highest ranking), and has invited these centers to speak at the community events, the connectors stated that families still chose to have relatives watch their children, potentially because of access issues (affordability and transportation) and cultural issues (e.g., Agape staff reported that, as a cultural preference, families tended to be more comfortable having family watch their kids).

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¹⁵ For more information about the JVQ-R2, see Finkelhor D, Hamby S, Ormrod R, and Turner H. 2005. "The Juvenile Victimization Questionnaire: Reliability, validity, and national norms." *Child Abuse and Neglect*, 29, 383-412; http://www.unh.edu/ccrc/juvenile_victimization_questionnaire.html.

In interviews with the researchers, the connectors discussed the fact that though some of the clients may be dealing with the effects of exposure to violence, which is the primary focus of the Defending Childhood Initiative, families are more often coming to them for help with meeting basic needs (e.g., rental, utility assistance). For many, these needs have to be addressed before they can even think about getting mental health counseling or other treatment and intervention services for themselves or their children.

The connectors are not providing direct services but are instead making referrals to agencies in the NOVA network and other community agencies. One challenge that has arisen is that some of the agencies in the referral network have requirements that the residents are unable to meet. For example, there are organizations that will help with rental assistance, but the person needs to be employed in order to receive that assistance. Many of the residents Agape is working with have a hard time finding a job because of lack of education and past criminal justice involvement. Other related challenges are that sometimes the agencies to which referrals are made are not located within walking distance or are not accessible by public transportation, so residents cannot easily access them.

While providing onsite services at the apartment complexes helps to overcome some known barriers for the clients (e.g., lack of transportation), the place-based approach breeds other challenges. As mentioned earlier, these apartment complexes were chosen because of concentrated need and crime. Some of the NOVA staff and direct services partners were concerned with safety issues for staff because the apartments are in high crime neighborhoods and some of the clients served were still living with their perpetrators according to the NOVA coordinator. Though Agape Child and Family Services has hired private security at the complexes for NOVA staff providing the services, safety concerns remain, although no incidents were reported as of September 30, 2014.

Although there has been turnover in connectors, Agape has been fortunate to keep some of their senior staff, so when new connectors are hired, some of the older connectors that residents know and recognize are still there as well. However, hiring has been a challenge, because NOVA had wanted the connectors to come from the targeted communities they would be assisting, and not enough qualified candidates applied for the position. Agape originally hired its entire NOVA staff at once, but, as the organization's executive director stated, "If I knew then what I know now, I'd begin with some number of staff members then tier them in gradually, as opposed to doing one big hiring." This may have prevented some of the staff turnover that occurred.

<u>Family Safety Center.</u> The Family Safety Center (FSC) is another NOVA "door" and "one-stop-shop" located in midtown Memphis (not in the targeted areas) where children and adult domestic violence victims can go for free services and become connected to the NOVA network. The FSC, which also houses the Domestic Violence Unit of the Police Department, offers services such as forensic exams, counseling with the Exchange Club Family Center and Victims to Victory (see below for more detail), on-site childcare, on-site access to District Attorney and Memphis Area Legal representatives, HIV testing, and domestic violence support groups.

Many of those first entering the FSC are there to complete an order of protection or to access legal services with the help the Shelby County Crime Victims Center. FSC advocates work with

domestic violence victims to create a safety plan and, if the clients are there for a protective order, discuss what the order means. Advocates work with victims until their court dates. Importantly, the advocates do not generally have training in assisting with mental health needs.

Once a client has filed for an order of protection, she meets with a NOVA FSP at the FSC, who is referred to as the "Navigator." Her role is to screen clients for services. A navigator is one of the four designated FSPs in the NOVA service delivery plan and was hired by the Shelby County Office of Early Childhood and Youth.

The navigator is trained to administer the Danger Assessment, JVQ-R2, and VanDenBerg's "Strength, Needs, and Culture Discovery" approach to provide wraparound services. The Danger Assessment is a validated instrument used to determine the level of danger an abused woman has of being killed by her intimate partner. Following a Danger Assessment, the navigator then works with the victim and refers for services for both adults and children. FSC assesses for harm to the children on the Danger Assessment and the Intake Form. Though the FSC is open to everyone, clients are flagged as NOVA clients if they are from a NOVA-targeted zip code, or if the violent incident took place in one. The difference between non-NOVA and NOVA FSC clients is that with a NOVA client, the FSC lets the NOVA partners know and connects the clients to services within the network, which are paid for by NOVA. Clients who are not from a NOVA-targeted zip code can receive the same services, but NOVA does not cover the cost of their services. Under the NOVA grant, the agency providing the therapeutic services has consent to provide services longer (one year) compared to non-NOVA consent, which is only about 30 days. After the year or 30 days has completed, then a client has to apply for renewal of therapeutic services.

NOVA FSC clients are also screened with the JVQ-R2 to assess the child's type and extent of trauma. Responses on the assessment are used to determine the appropriate treatment services. If a follow-up is needed, the navigator continues the dialogue with the individual or family to identify the family's "Strength, Needs, and Culture Discovery" (per VanDenBerg guidelines) to provide the most appropriate wraparound services, such as counseling, obtaining emergency shelter, assisting with immigration issues, and filing orders of protection.

The navigator documents all services and referrals that are offered, even when they are refused, and follows-up with clients for at least 60 days. The navigator also follows up with referral agencies to see if services are provided.¹⁷

On an average week, the navigator sees about 25 clients. Every month it is approximately 200 clients, though that includes the non-NOVA clients. Of the 200 clients per month, approximately 50 of them are NOVA referrals.

<u>FSC Challenges.</u> According to FSC staff, approximately, 40% of their clients leave their abusive situations, but often only temporarily for a short duration of time. This is a challenge for the navigators: many people come in but are not ready to take permanent action, often making it difficult and frustrating for staff who want the best for their clients.

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¹⁶ See Roehl J, O'Sullivan C, Webster D, and Campbell J. 2005. *Intimate Partner Violence Risk Assessment Validation Study*. National Criminal Justice Reference Service; http://www.dangerassessment.org/.

¹⁷ More information on inter-agency data sharing will be discussed later in this chapter.

Other barriers to fully serving potential NOVA clients, according to the navigator, include:

- Some FSC clients are under 18, so parental consent is required to get an order of protection. Parents have to file on their child's behalf as well. If an underage client does not want to talk about their situation with their mom or dad, the client cannot get an order of protection.
- If a couple is married, often the court does not want to touch an order of protection, because of child custody and divorce issues. There are different courts for all of those issues and one court does not want to step on another court's toes.
- There are not enough financial resources (emergency funds) for things like lock changes and paying old utility bills.
- The FSC cannot work with offenders, but many potential clients are both victims and offenders.
- In Shelby County, there is a lack of emergency housing for domestic violence victims. There is one emergency shelter in Memphis with 28 beds. In the beginning of the Initiative, rules and regulations related to the age of children that could stay at the shelter prevented most women from accessing it. However, recently, the shelter revamped its policies, and the age of children admitted is no longer a problem.
- Childcare is another factor in why women do not follow through with services. They cannot get a job if they do not have someone to take care of their children. Department of Human Services offers free childcare but only if you already have a job. Those who need to look for a job still need childcare while they are searching. So women stay in bad relationships because they are financially dependent.

Juvenile Court of Memphis and Shelby County. The Juvenile Court of Memphis and Shelby County is another NOVA gateway for both children exposed to and perpetrators of violence to receive supportive services. The Juvenile Court is located in midtown Memphis near the Family Safety Center. The population served by the Juvenile Court may also have a history of abuse and neglect, but have not necessarily interacted with the Department of Children's Services or the Memphis Child Advocacy Center. Therefore, NOVA's collaboration with the Juvenile Court is an opportunity to help a population that may have not been seen by other agencies.

The Juvenile Court Family Violence Resource Specialist (FVRS), a NOVA-funded Shelby County Office of Early Childhood and Youth employee, is located at the Court to flag and work with youth from the targeted NOVA zip codes. The FVRS has a Master's degree in Social Work and operates as a case manager for NOVA-flagged cases. When the FVRS receives a referral, she contacts Department of Children's Services or NOVA to determine if the child is already receiving services for domestic violence. The FVRS then screens the young person with the JVQ-R2 (the amended Juvenile Violence Questionnaire) to assess whether he or she has been exposed to violence and determines what services he or she needs using the VanDenBerg's "Strength, Needs, and Culture Discovery" approach. If the young person is from one of the targeted NOVA apartment complexes, he or she is assigned a connector in the complex who assists with providing wraparound services to make it a seamless transition for a family so that they do not have to come back to Juvenile Court. If the young person needs services but does not live in one of the targeted apartment complexes, the FVRS assumes the role of the FSP and uses the VanDenBerg "Strengths, Needs, and Culture Discovery" approach to determine the family's strengths and needs. The FVRS then

refers the child to NOVA partners if he or she needs therapeutic services, such as TF-CBT, anger management or group therapy, which the parent can attend as well. The FVRS also assists with crisis intervention and support, safety planning, advocacy, assistance in navigating court proceedings

The FVRS tracks each referral on a weekly basis. For example, if the youth is referred to the Exchange Club for TF-CBT, the FVRS will know if he or she is missing therapy. She reportedly has good relationships with the NOVA service provider partners and receives client status updates from them. She estimates that approximately half of her referrals followed through with receiving services. Referrals are also made for youth who receive community service conditions from the court. In those cases, the FVRS offers the young person an opportunity to go the Boys and Girls Club of Memphis after school for tutoring. According to staff, not only does this help with the youth's school performance, but the club is also a safe place for him or her to go after school. The partnership with the Juvenile Court and Boys and Girls Club is one that will continue when the NOVA grant ends and the FVRS position can no longer be funded.

The FVRS has arranged trainings for court staff (e.g., probation officers, judges) on trauma and the effects of being exposed to trauma. These trainings served a dual purpose of informing staff of how to recognize children's exposure to violence, but also having the FVRS introduce herself so that court staff know to whom to make referrals. It is anticipated that tracking data will be included in the NOVA-client case file that is opened and managed through the newly established Co-Action Net client information sharing system (discussed later in this chapter).

<u>Challenges Related to Working at the Juvenile Court.</u> There have been a few challenges to working at the Juvenile Court. The first came early on and had to do with hiring a FVRS. Because of delays in county hiring processes, the FVRS was not brought on board until October 2013, two years after the start of the NOVA implementation phase. Second, not every child who goes through the Juvenile Court is assessed, because a judge or probation officer may not be aware that the child needs therapeutic services; so, the numbers who could be served by NOVA are lower than they should be. This problem reportedly persists despite the aforementioned efforts of the FVRS to make her role and function known throughout the courthouse. The final challenge is around community-based referrals. Although the FVRS makes sure she is visible to court staff, even those staff who are aware of her existence often do not know which cases to refer to her. This is compounded by the fact that court employees do not know if NOVA will be here long-term due to finite grant funding; this also hinders the referral process, as officers are hesitant to make a referral if there will not be enough money to sustain future services. Conversely, when the FVRS has been notified by a court employee that a youth may need services and then she has referred the youth for therapy, some youths have been turned away due to lack of capacity on behalf of the agency referred to, for example, take on another trauma-focused cognitive behavioral therapy referral.

<u>Victims to Victory</u>. Victims to Victory is a Christian non-profit in Memphis located outside of the targeted apartment complexes. The agency used NOVA funds to hire a child therapist to serve as a family service provider (FSP), and provide on-site therapy at the Family Safety Center. Like the other FSPs, the therapist identifies whether families are within the targeted areas, administers the amended JVQ-R2, and uses the VanDenBerg's "Strengths, Needs, and Culture Discovery" approach with families. Victims to Victory specializes in treating children who have witnessed homicides. Therefore, if a child is experiencing trauma related to a homicide, then the FSP child

therapist will use TF-CBT to treat him or her. If the child is experiencing trauma related to domestic violence or sexual abuse, then he or she is referred to the Exchange Club Family Center or the Memphis Child Advocacy Center, respectively. If the child is young (aged 3-4) and has experienced trauma from any kind of violence, then he or she is referred to a psychotherapist contracted by Le Bonheur Children's Hospital.

Other Primary Referral Partners

NOVA collaborates with other agencies that act as primary referral partners because they also come into contact with children and adults in need of services. These partners assist with identifying children from the targeted zip codes, administering the amended JVQ, and directly referring them to a FSP who is trained to provide wraparound services. The partners include the Exchange Club Family Center and Memphis Child Advocacy Center (only the Exchange Club Family Center is a funded partner for therapeutic services), and they also provide therapeutic services to NOVA-eligible clients (discussed in Treatment and Healing Section). The Department of Children's Services (DCS) and the Shelby County Crime Victim Center (SCCVC) also make referrals, but are not funded by NOVA. At DCS, intake staff flag a case as "eligible" for NOVA services if the child is from one of the targeted apartment complexes. Once the case is flagged by the intake staff, the child is assigned a family service worker who connects him/her to a NOVA FSP. Victims of any crime in Shelby County can come to the SCCVC, which is located in the Family Safety Center. The SCCVC is run by a licensed clinical social worker and collaborates closely with the Memphis Police Department, the Shelby County Sheriff's Office, and the Shelby County District Attorney General's office. Victims who come to the SCCVC can request assistance with filing the Tennessee Criminal Injuries Fund, accompanying them to court, counseling, developing a safety plan in the event that their abuser puts them in danger, filing an order of protection, and helping with social service needs.

Secondary Referral Partners

Referrals for NOVA services can also come from secondary partners that do not have dedicated NOVA staff to work directly with children or adults who have been exposed to violence. These partners include the Memphis Police Department, Shelby County Sheriff, District Attorney, and Public Defender, and Le Bonheur Children's Hospital and the Regional Trauma Center. All secondary partners assisting children exposed to violence contact the NOVA coordinator first. She makes the referral to one of the NOVA FSPs. For example, the Memphis Police Department created a brochure to pass out to the parents/guardians of children who have been exposed to violence (see the Community Awareness and Education section for a more in-depth discussion on the brochure). The parents complete the brochure, which then goes to the NOVA coordinator who assists them with the appropriate FSP.

Community Referrals

In situations that do not involve calling 911 for immediate assistance, community members can dial the CALL-4-KIDS hotline to ask about what services are available for children exposed to violence. The hotline is run by trained staff and volunteers who can determine whether a call warrants NOVA services. If it does, the caller is referred to the NOVA coordinator who determines

if the caller is from the targeted zip codes and then refers to a NOVA FSP or another community agency if the caller is not from the targeted area.

Treatment and Healing

For the purposes of this report, therapeutic programs designed to treat the psychological effects in children who have been exposed to violence are categorized as "treatment and healing." Once a child is screened and assessed at one of the NOVA doors/gateways (by Agape at one of the targeted housing complexes, at the Family Safety Center, at the Juvenile Court, or at Victims to Victory), he or she may be referred for therapeutic services, such as TF-CBT or general counseling, provided by organizations that have a contract with NOVA. For the purposes of this study, programs and interventions with at least two strong evaluation designs (randomized trials or quasi-experiments) are considered evidence-based. Programs with research supporting their effectiveness that do not reach this threshold are considered promising. ¹⁸ TF-CBT is an evidence-based ¹⁹ treatment designed to help children, adolescents, and their parents to overcome the negative effects of trauma. The model blends fundamentals of CBT with traditional child abuse therapies, thereby enabling clients to regain trust and a personal sense of integrity. It targets the symptoms, such as intrusive thoughts of the traumatic event, avoidance, and trouble sleeping or concentrating that are characteristic of post-traumatic stress disorder. The therapy is typically for children ages 3-18 who have either one more multiple traumas in their lives. The program lasts from 12 to 16 weeks, depending on the severity of the trauma. All partners that provide therapeutic services administer the UCLA PTSD Trauma Index tool²⁰ to determine the severity of impact that the traumatic event had on the child. These partners include: The Exchange Club Family Center, Victims to Victory, and Le Bonheur Children's Hospital. From July 1, 2012 to September 30, 2014, 21 children received TF-CBT and 62 adults received general counseling from Agape connectors.

Exchange Club Family Center

The Exchange Club Family Center ("The Exchange Club"), which has been in existence for 30 years, has a children's domestic violence program located in Memphis outside of the targeted apartment complex area, serving children ages 4-18 and adult women. As partner of the NOVA program, The Exchange Club provided evidence-based individual and group therapies to clients from the targeted areas. Although referrals came from multiple agencies in Memphis (e.g., YWCA Immigrant Women Services, police, courts, Department of Children's Services), many came from clients who have been referred by the navigator at the Family Safety Center. The Exchange Club has a staff member located within the FSC so that when a navigator refers a client, the staff member is there to schedule the client for therapy at The Exchange Club.

¹⁸ The cross-site report has more information on the definition of evidence-based used in this evaluation: Swaner R, Hassoun Ayoub L, Jensen E, and Rempel M. 2015. *Protect, Heal, Thrive: Lessons Learned from the Defending Childhood Demonstration Program.* New York: Center for Court Innovation.

¹⁹ For example, see Cohen J, Deblinger E, Mannarino A, and Steer R. 2004. "A multisite randomized trial for children with sexual abuse–related PTSD symptoms." *Journal of the American Academy of Child and Adolescent Psychiatry*, 43, 393–402; Deblinger E, Lippman J, and Steer R. 1996. "Sexually abused children suffering posttraumatic stress symptoms: Initial treatment outcome findings." *Child Maltreatment*, 1, 310-321.

²⁰ For more about the UCLA PTDS Trauma Index tool, see Steinberg A, Brymer M, Decker K, and Pynoos R. 2004. "The UCLA PTSD Reaction Index." *Current Psychiatry Reports* 6, 96-100.

Clients can receive general counseling and TF-CBT services at The Exchange Club, but they can also be treated within their respective apartment complexes. As part of the subcontract from NOVA, four therapists were hired to conduct individual therapy as well as facilitate group therapy in the apartment complexes. One of the therapists hired is the supervisor and does not assist with individual therapy, but supervises the therapists, assists with the group therapy, and serves as the Exchange Club liaison to the NOVA Partnership. Two of the therapists are Spanish-speaking. There are four other therapists who assist with the groups, but they are not funded by the NOVA grant. They also hired two contract workers to assist in the groups with co-facilitation and translation for Spanish speaking clients.

The group therapy is called Kids Club, which is a promising, ²¹ nine-week preventative intervention designed to address children's knowledge, attitudes, and beliefs about family violence, reduce behavioral adjustment problems, and teach them safety and conflict resolution skills and the ability to identify and regulate emotions related to violence. The children are split into age appropriate groups: 4-7, 8-10, and 11-18. Each children's group focuses on four main areas each week: safety planning, problem solving/conflict resolution and trauma issues relating to the violence and coping skills. Prior to the first group session, a pretest is completed that examines history of DV, severity and PTSD symptoms.

A complete assessment is completed with each family to determine their needs, and after the ninth session they complete a post test. The first group covers the main topic domestic violence and safety planning, so that children can come one time and get something out of it. The groups involve therapeutic games, movies, puppets, books, and talking about personal experiences with domestic violence. At the end of the entire session, adults and kids come together and share what they've learned. Participants can stop and start the program at any time. There are also weekly sessions for parenting mothers. Mothers participate in sessions on domestic violence, positive parenting, information about healthy relationships, and other recommendations for services. Crisis intervention and safety planning services are also provided.

One Kids Club group was held in Hickory Hill, one of NOVA's targeted areas. The group is held at a church, and The Exchange Club provides bus passes or gas money for participants. The Hickory Hill group was very successful, according to the therapists. They served a total of 27 mothers and 47 children from January 1, 2013 to September 30, 2014. They also created a second group for Spanish speaking participants. A Spanish speaking police officer sometimes comes to groups to foster positive relationships with the Memphis Police Department.

Another Kids Club group was held in the other NOVA targeted areas, Frayser. The group is conducted at the Pershing Park apartments. Only a few residents from the Frayser area attended the group sessions compared to the group in Hickory Hill, and the therapists speculated that the residents did not see therapy as a priority over getting their basic needs for food, shelter, and utilities met. A total of eight mothers and eight children attended the Frayser group from January 1, 2013 to September 30, 2014. Surprisingly, most people who came to groups did not live in the apartment complexes. Rather, they were Exchange Club clients from the targeted zip codes who

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²¹ Graham-Bermann S, Lynch S, Banyard V, Devoe E, and Halabu H. 2007. Community based intervention for children exposed to intimate partner violence: An efficacy trial. *Journal of Consulting and Clinical Psychology*, 75, 199-209.

were receiving therapeutic services at The Exchange Club office but lived closer to the Frayser area. The same happened at the Hickory Hill site. However, they still had some people from the NOVA zip codes that came to the actual Exchange Club office rather than the apartment complex.

While staffing has remained stable with little turnover and enough staff to meet the service needs of those coming through, The Exchange Club has had to add security for the group meetings at the Hickory Hill apartments. Because of NOVA's strong relationship with the Memphis Police Department (MPD), therapists from the Exchange Club remarked that officers from the Frayser precinct have been very involved with making sure they and their clients are safe for the group meetings. The MPD volunteers to pick up participants to go to the group, and, in turn, the therapists speak at schools and other locations about domestic violence and teen dating violence at the request of the MPD. The therapists said that they had also tried to make their presence known and establish trust with the residents in the complexes by attending apartment manager's meetings in all the complexes.

Unfortunately, when the NOVA funding ends, The Exchange Club will not be able to maintain some of their staff, resulting in a discontinuation of group therapy at Frayser. The individualized therapy they provide at the Family Safety Center, however, will continue when the grant ends.

Victims to Victory

In addition to being a FSP, the child therapist at Victims to Victory also conducts TF-CBT with children referred for services on site at the FSC for eight hours a week. Clients can schedule appointments or walk-in. FSPs also make therapeutic referrals to Victims to Victory, mostly for cases related to homicide and domestic violence. Funeral homes also refer clients who have recently been affected by homicide.

Victims to Victory also hosts a homicide support group youth ages 8-17 that meets biweekly at the FSC and is facilitated by the child therapist. Twenty-five children have attended the homicide support group from January 1, 2013 to December 2013.

Memphis Child Advocacy Center

Memphis Child Advocacy Center (CAC) is a private, non-profit organization that opened in 1992 and became a certified child abuse prevention agency by the State of Tennessee in 2001. The CAC is a collaborative effort between agencies in Shelby County, such as the Tennessee Department of Children's Services, law enforcement officers, prosecutors from the 30th Judicial District Attorney General's office, and mental health providers that work together to provide coordinated services (e.g. decisions about investigation, treatment, and prosecution of child abuse cases) when an allegation of child sexual abuse or several physical abuse has been made. As part of their role in NOVA, they accept referrals for counseling and TF-CBT for children exposed to violence in the targeted areas. Their office, however, is not located in the targeted area. The CAC receives referrals primarily for sexual abuse, but they will treat children exposed to violence of any kind.

Le Bonheur Center for Health and Wellbeing

Le Bonheur Center for Health and Wellbeing, which is affiliated with Le Bonheur Children's Hospital, contracts with a psychologist for a number of hours to go to the childcare centers where Le Bonheur staff are also training childcare workers on the Center for Social Foundations of Early Learning (CSEFEL) model (a more in-depth discussion is presented in the Professional Training section) to provide therapy to children who have been assessed by CSEFEL specialists for trauma using the UCLA PTSD Trauma Index tool. The CSEFEL specialists also use the validated Ages and Stages Questionnaire (ASQ-3 and ASQ-SE)²² as a development assessment tool to identify children early who have been exposed to violence, or are at an increased risk of exposure to violence, due to developmental delay. The psychotherapist uses the evidence-based Child Parent Psychotherapy (CPP)²³ with children under the age of four who are suffering from exposure to one traumatic event (e.g., maltreatment, the sudden or traumatic death of someone close, a serious accident, sexual abuse, exposure to domestic violence). CPP involves restoring the child and parent relationship as a means of improving the child's sense of safety, attachment to the parent, and their cognitive, behavioral, and social functioning. Parents work on their negative associations with their child and maladaptive parenting strategies. The structure of the therapy depends upon the age of the child, where the focus is on the parents when a child is an infant and interaction with parents increases with older children. Therapy sessions typically last one hour and are weekly. The length of treatment can last one year.

They targeted only four childcare centers in three of the NOVA designated zip codes (38127, 38115, and 38118) for the first year because of the intensive monitoring required for the therapy. The program is free to the centers. The director of Le Bonheur Center for Health and Wellbeing said that most directors at the centers were in favor of the therapeutic services, but these centers were already identified as high quality centers that Le Bonheur staff knew would be likely to participate. As Le Bonheur expands their services to more childcare centers, the director believed it may be more challenging to get directors from the childcare centers to agree to participate. The psychologist has conducted CPP with 11 children.

Prevention

Prevention programming is defined as efforts to prevent initial or subsequent exposure to violence. The Shelby County Defending Childhood Initiative did not focus much of their resources on prevention programming. In one particularly notable exception, the initiative did provide funding to support a previously existing prevention programming called Project Safeways. Also, as

²² For example, see Squires J, Twombly E, Bricker D, and Potter L. 2009. *The ASQ-3™ User's Guide*. Baltimore, MD: Paul H. Brookes Publishing Co., Inc.; Squires J, Bricker D, and Twombly E. 2002. *The ASQ:SE User's Guide for the Ages & Stages Questionnaires*®: *Social-Emotional: A parent-completed, child-monitoring system for social-emotional behaviors*. Baltimore, MD: Paul H. Brookes Publishing Co., Inc.; For more information, see www.agesandstages.com.

²³ For example, see Lieberman A, Van Horn P, and Ippen C. 2005. "Toward evidence-based treatment: child-parent psychotherapy with preschoolers exposed to marital violence." *Journal of the American Academy of Child and Adolescent Psychiatry*, 44, 1241-8; Toth S, Rogosch F, Manly J, and Cicchetti D. 2006. The efficacy of toddlerparent psychotherapy to reorganize attachment in the young offspring of mothers with major depressive disorder: A randomized preventive trial. *Journal of Consulting and Clinical Psychology*, 74(6), 1006-1016.

discussed below, several smaller efforts have been undertaken to design prevention programming expressly designed to address the needs of men.

The Safeways Prevention Program for Apartment Complex Managers

Safeways is a Memphis-based program that provides support services and training to apartment complex managers to prevent crime and ensure residents' safety. Becoming "Safeway Certified" requires that "each apartment community must take part in the Shelby County District Attorney General's "Anti-Trespass" Program, undergo an intake audit, and allow Safeways access to premises to conduct a thorough Crime Prevention Through Environmental Design (CPTED) inspection, ultimately agreeing to address/repair/schedule item requirements to take full part in the Program"²⁴. When an apartment complex is certified, the management company signs a memorandum of understanding (MOU) allowing Safeways to monitor 19 offenses (e.g., homicide, rape, robbery, aggravated assault, burglary, larceny, simple assault, all weapon and drug offenses) in the parcel area (a one-eighth mile buffer around the property) using MPD data.

Having established an MOU, Safeways then provides onsite monthly training for complex managers (e.g. on human trafficking, child sexual assault, drug identification, crisis intervention). There is then a six-month check-up with the apartment management company to see if it is compliant. At this time, Safeways checks to see if the company has done everything required of them in their memorandum (e.g., fix broken fences, remove graffiti, replace lighting) and if crimes in the area have decreased. It is not necessary for crimes to decrease to be compliant. However, if the management company has not followed the memorandum and crimes have increased, then they are deemed not compliant. Safeways will then cancel the memorandum or the apartment management company can choose to not re-sign with Safeways. Certification lasts one year. They will monitor partners indefinitely as long as they are compliant.

Pershing Park, one of NOVA's targeted apartment complexes, is Safeway certified. Therefore, NOVA pays for a portion of the Senior Safeways Area Coordinator's salary. The coordinator acts as the liaison between the community, service providers, and law enforcement. The coordinator provides training and technical assistance for Pershing Park owners, managers, and residents on strategies for reducing crime, creating a safe community, and expanding residents' opportunities to improve their quality of life.

Prevention Programming for Males

One of the gaps in services the NOVA project coordinator reported hearing about NOVA programming was services for men who said that all of the services offered were for women. She said,

"So often there are all these restrictions on how or whether we can use funds or resources to work with certain populations that we put on people. We put them in boxes (e.g., [women] can't be a perpetrator), and it leaves people out....We have to shore up our discussion on engaging boys and men who use violence against women in violence prevention planning or service provision."

Chapter 3. Shelby County's Defending Childhood Program Model

²⁴ For more information about Safeways, see http://www.safeways.org/mission.html.

Accordingly, NOVA initiated several efforts to include prevention programming for males. In the spring of 2013, 65 athletic coaches in the Shelby County and Memphis School District were trained on the Coaching Boys Into Men,²⁵ a promising²⁶ leadership program, created by Futures Without Violence, that provides athletic coaches with the strategies and resources needed to educate young males in relationship abuse, harassment, and sexual assault.

NOVA also engaged men in Men Healing Men conference provided by Futures Without Violence and networking opportunities with Sam Simmons²⁷. Six local men representing community based organizations serving men, schools, law enforcement, research, attended conferences in 2013, 2014. A Men Healing Men think tank has been established and is working on plans for training, technical assistance, a Men Healing Men Conference in Memphis. NOVA funds support training and technical assistance for the Men Healing think tank work activities. Other efforts are in progress to address the unique dynamics associated with trauma among men, but these efforts have mostly remained in the planning stages.²⁸

Community Awareness and Education

Community awareness and education refers to efforts to increase knowledge of children's exposure to violence and available resources and services; these efforts can include media campaigns and community outreach. NOVA community awareness and education campaigns have had two targets: the professional community and the general community.

Letting Professionals Know About NOVA

The NOVA collaborative body felt it was important to let the professional community—law enforcement, treatment providers, and others who work with children and youth—know about the services available through NOVA. To that end, NOVA officially launched on October 10, 2012, and a press conference was held at one of the targeted apartment complexes to publicly announce

²⁵ For more information on Coaching Boys Into Men, see http://www.futureswithoutviolence.org/engaging-men/coaching-boys-into-men/.

²⁶ Miller E, Tancredi, D, McCauley H, Decker M, Virata M, Anderson H, Stetkevich N, Brown E, Moideen F, and Silverman J. 2012. ""Coaching Boys into Men": A cluster-randomized controlled trial of a dating violence prevention program." *Journal of Adolescent Health*, *51*, 431-438.

²⁷ See http://www.brothershealing.com/ for more information.

²⁸ There was a Men Healing Men conference, independent of NOVA, in Minneapolis, MN in late summer 2013, which focused on the health and well-being of African American men and their families. According to the NOVA coordinator, two African American males from the community (one from the Frayser neighborhood and one doing work in the school system who also has an organization called Boys Inc. and has become a member of the NOVA Partnership since March 2014) created a Men Healing Men think tank when they returned from the conference. They have held two meetings as of September 20, 2014. The group has talked about creating a database of those agencies in Memphis who focus on male trauma and hosting a Men Healing Men Conference in Memphis. The NOVA coordinator offered that NOVA could host an event to bring groups in the community who have knowledge about male trauma together to talk about what men's programming could look like in Memphis. The NOVA coordinator also stated that NOVA has some training money that could be used to train professionals in the community about male trauma. Additional funding opportunities could come from an Office of Violence Against Women grant for Men Healing Men activities that NOVA coordinator applied for and community-based grants in Memphis.

its launch. Shelby County's mayor, Mark Luttrell, attended. The primary purpose of the event was to let people know that NOVA exists and that its website is a place where partners can learn about NOVA providers, find resources and training materials, and keep informed about upcoming events. Importantly, the target audience for the website is providers, not community members. The website also carries various news articles on relevant topics (e.g., sexting), and has press releases.

Splash Creative, which was contracted to design the aforementioned website, also designed a trifold brochure (including a Spanish translation) to be handed out by first responders (see Appendix C) when they respond to a domestic violence call. It has a tear-off to be filled out with the victim's name, number of children, ages, and how to reach them. The tear-off goes back to the police precinct, and someone from The Exchange Club picks them up on a regular basis, usually a few times per week. A therapist from the Exchange Club brings them to the Navigator at the Family Safety Center who then follows-up with the family to assist them with services they may need. To accompany the brochure, NOVA made a training video for first responders, starring the director of the Memphis Police Department. The video was designed to train first responders in how to use and distribute the brochure. Although the MPD has had the video and brochures since 2013, the MPD did not start using it until early in 2014. Approximately 1,000 brochures have been distributed by the MPD.

General Community Awareness

A separate community awareness campaign was created for community members, particularly residents in the targeted apartment complexes. In October and November 2013, NOVA held a fair at each of the complexes to let the residents know about the project and available services. At the fairs, visitors received a guide that summarized multiple scenarios describing a family or child and circumstances that could lead them to enter the NOVA care system. The guide also described NOVA and listed the NOVA partners participating at the fair. Periodically during the event, community members were asked for their attention to be focused on a partner who "became" the person described in one of the scenarios listed in their guide. She talked about issues facing her family and how NOVA partners could or did help. Then she directed community members to go talk with NOVA partners who were present at the fair. If attendees visited at least six partners, they got their guide card stamped and earned a prize. NOVA workers and partners handed out NOVA paraphernalia, such as t-shirts, flyers, wall cards. While parents learned about NOVA, children could play in a large room set up to resemble a carnival. The fairs were attended by approximately 60 residents each.

In November 2013, Agape started hosting monthly community meetings in the apartment complexes. Each month has a different theme, and topics include ones such as child abuse prevention and nurturing parenting. The topics were chosen based on responses to a survey administered early on that asked residents what they wanted to learn more about. At each meeting, NOVA staff talk about the NOVA program, have guest speakers discuss that month's topic, and hold a question and answer period. Food is provided²⁹. Agape staff also do grassroots outreach, such as distributing flyers to recruit for the event. Apartment managers and Safeways, the organization that works with apartment managers (discussed above) attend each meeting, which Agape refers to as community cafés. Although attendance varies each month, usually between 20

²⁹ No Federal funds were used to purchase food.

and 50 people are present, and it is mostly single females. Because of the constant movement of residents in and out of the apartments, topics are sometimes repeated.

Outside of the targeted apartment complexes, NOVA has held a rap contest, hosted a poetry slam, and made radio public service announcements to promote awareness around children's exposure to violence. Not much of the NOVA budget was designated for advertising, so they have used Facebook, YouTube, and other social media outlets, in conjunction with making connections with the police and faith-based community, to get their message out.

The community awareness and education campaign has produced 277 events with an estimated audience of 32,546³⁰ members of the community since year one of the Initiative. NOVA has also produced 101 publications (see Appendix D for examples), and an estimated 38,725 people were the recipients of brochures, flyers, social media posts, and newsletters, for example.

NOVA is working with Futures Without Violence and the national DCI campaign on launching a local media campaign to increase public awareness and education of childhood exposure to violence and resources available for families and organizations.

Professional Training

NOVA partnered with the University of Memphis' Department of Social Work to train professionals who work with children on children's exposure to violence. Since July 2012, faculty have provided trainings on topics such as the effects of trauma on younger children (primarily done for service providers), Psychological First Aid, de-escalation (related to client situations that might blow-up), early childhood, wraparound services, and resiliency factors for children and parents in domestic violence situations. NOVA hosted 407 trainings for professionals in the community attended by 5,414 professionals between July 1, 2012 and September 30, 2014.

NOVA partnered with the local National Child Traumatic Stress Network site at the University of Tennessee Center of Excellence to support training efforts already in place building a cadre of trained Trauma focused Cognitive Behavior Therapy mental health professionals. More than 900 clinicians have been trained across the state since 2007. The NOVA coordinator, who is a licensed clinical social worker, serves on the TF-CBT Leadership team. NOVA coordinator partnered with another local partner, Just Care Family Net to train plan an additional TF-CBT training collaborative group in December, 2014. Approximately 40 attendees were scheduled to participate in training and 12 months of consultation calls in the learning collaborative.

Stewards of Children

NOVA provided training on Stewards of Children that was conducted by the Memphis Child Advocacy Center (CAC), which also provided therapeutic services (see above). Stewards for

³⁰ The audience number is an underestimate, because it does not include the listening and viewing audiences of awareness events (e.g. interviews) on the radio and television.

Children is an evidence-based³¹ curriculum that involves a three-hour training for children and youth services professionals to equip them to prevent sexual abuse of children they work with, identify warning signs of abuse, and learn how to react (e.g., know who to call) immediately if a child discloses that he or she has been abused. Trainings were made available to any adult (childcare providers, faith leaders, Department of Children's services, primary and secondary school teachers, youth camp counselors, and parents) who works with children and parents in the three police precincts (Raleigh, Frayser, Hickory Hill) that comprise NOVA's target area and the zip codes within them. The NOVA grant removed the out-of-pocket fee (\$10 workbook) for the training. Led by an authorized facilitator, each three-hour training includes video, workbooks, and facilitator-led discussion.

CAC had a goal of training 3,000 professionals in the targeted areas. Between April 1, 2012 and September 30, 2014, they had trained 2,182 professionals in Shelby County.

Faith-Based Community Training

In addition to providing therapeutic services, Victims to Victory offers training on children's exposure to violence to leaders of the faith-based community. They piloted the revised University of Tennessee Healing Homes Family and Youth Violence Prevention Curriculum with local Shelby County chaplains because, according to one trainer, the chaplains are the "gatekeepers of getting people," meaning they have a lot of reach and influence in the community. The trainings began May 1, 2013 and have taken place through September 30, 2013.

The course, which lasts from six to seven weeks, involves bringing in experts such as the police to "train-the-trainers." Clergy are taught how to recognize problems and are made aware of resources in the communities so they know which agencies they can make referrals to and for what purposes. Participants learn about abuse and neglect, children's exposure to violence, teen dating violence, elder abuse, intimate partner violence, and gun violence. Because many people would go to their faith leaders for counsel, the director of Victims to Victory felt it was important to provide these leaders with more resources. Because of the training, NOVA staff believed that faith-based leaders became more prepared to speak to members of their congregations about the effects of violence on children, besides which the training led clergy members to receive pamphlets that they could then distribute in their churches. One hundred sixteen members of the faith-based community were trained.

After the training was piloted, reviewers of the curriculum and some participants felt that the literacy level of the training was too high (i.e. it is more suited to someone with more knowledge about the topics) and that it needed to be less technology focused, according to the director of Victims to Victory. It was also suggested that a version be more user friendly by having a version available that combines the basic curriculum with the faith based additions. Therefore, the director of Victims to Victory, NOVA coordinator and Youth Forum staff are doing a second revision of

³¹ Rheingold A, Campbell C, Self-Brown S, de Arellano M, Resnick H and Kilpatrick D. 2007. "Prevention of child sexual abuse: evaluation of a community media campaign." *Child Maltreatment, 12*, 352; Rheingold A, Zajac K, Chapman J, Patton M, Arellano M, Saunders B, Kilpatrick D. 2014. "Child sexual abuse prevention training for childcare professionals: An independent multi-site randomized controlled trial of Stewards of Children." *Prevention Science, July 12*, Online.

the Healing Homes Family Violence Curriculum to lower the literacy level, make it more appropriate for participants who may have limited knowledge of family violence and children's exposure to violence. It also can be offered as a stand-alone session in an environment that may not be technology friendly. Dr. Lawson is also incorporating information for all faith-based agencies and tailoring the resources towards the Memphis area.

Le Bonheur Children's Hospital

Le Bonheur Children's Hospital provided training for childcare center employees who work with young children (ages 0-5) in the Raleigh, Frayser, and Hickory Hill communities. Using the CSEFEL (Center for Social Foundations of Early Learning) Pyramid model, which encompasses a variety of evidence-based³² approaches and activities, two NOVA-funded specialists from Le Bonheur provided childcare staff in the two communities with intensive multi-day training and mentoring on how to identify children who have been exposed to violence, how to provide supportive environments, and how to build children's socio-emotional skills. Childcare workers were taught four different modules: Module 1 focuses on how providers can build relationship with parents; Module 2 focuses on social-emotional teaching strategies; Module 3 focuses on determining the meaning of challenging behavior through observation; and Module 4 teaches about leadership strategies. The specialists provided workshops to 420 childcare center workers from October 1, 2013 to September 30, 2014.

A second component of the training by Le Bonheur was to host parent meetings for parents of the children who attend the childcare centers. Parents were recruited for the meetings by the CSEFEL specialists, who would have come into contact with the parents through their other work at the childcare centers. The trainers also attended family nights at the centers to recruit parents. Parents participated in a shorter version of the same training given to childcare workers. The first session involved talking about NOVA and its services. In following sessions, the specialists went through the first three modules noted above. Eighty parents attended at least one meeting since these trainings started³³.

Ethics Training

The University of Memphis invited, Dr. Fredric Reamer, professor in the graduate program in the School of Social Work, Rhode Island College with extensive research on professional ethics, who has published more than 19 books and written over 100 journal articles and book chapters: one for NOVA providers and one for the larger community. Recruitment for these trainings was done through different coalitions and associations. (e.g., NOVA, The Early Success Coalition, local chapter of TN National Association of Social Work - NASW). He presented on issues related to confidentiality and sharing information and data across systems.

Project Limitations Related to Professional Training

³² The CSEFEL model encompasses many evidence-based practices, but their definition may not be consistent with the one used in this report. For more information on the CSEFEL model and the practices used, see http://csefel.vanderbilt.edu/.

³³ The 80 parents includes parents who have attended multiple meetings, thus overestimating the attendance of the parental training.

Despite the aforementioned efforts towards training professionals in the community, the NOVA coordinator expressed that she would still like to reach more workers in the police department (staff other than police officers), the school system, and first responders (e.g. law enforcement, fire department, emergency medical workers) and first reporters (e.g. those who first report whether a child has been exposed to violence). The coordinator also said that it is difficult to train schools with their changing structure (the merger of Memphis and Shelby County school districts, and the suburbs each forming their own districts, discussed in more detail later in this report).

System Infrastructure and Capacity Building

In an effort to promote countywide infrastructure improvements, NOVA contracted with external consultants to create a shared data management system. For decades, various agencies in Shelby County have known that they were working with the same clients and needed a centralized location for providers and partners to be able to share relevant information. In the last five years, key agencies (e.g. Le Bonheur Children's Hospital, Agape Child and Family Services, Shelby County Office of Early Childhood and Youth) in Shelby County had more in-depth discussions about creating their own shared data system, using the U.S. Department of Housing and Urban Development Homeless Management Information System (HMIS) as a model. A few years prior to Defending Childhood, the Early Success Coalition received a grant as part of the Teen Pregnancy and Parenting Support Initiative, all known as "Teen+," to develop such a cross-agency data system. Using that software as a base, the system was adapted, and NOVA funds were used to hire the consultants to create a NOVA service delivery model that detailed NOVA agency workflow, roles, and responsibilities.

While the original hope was to have this Shelby County Community Information Sharing System—referred to as ShelbyConnect—running by October of 2011, there were major delays due to problems with the software: even though all the agencies were trying to build the same infrastructure, the technology itself had predefined ways of being used, and each initiative and agency had its own specific processes and needs. Thus, it took longer than expected to accommodate these differences. In addition, the costs and user support needs of the software platform were presenting challenges to sustainability strategies. Therefore, although many of the agencies began using the system in 2013, in early 2014 the ShelbyConnect Steering Committee issued an RFP to investigate software platforms that would provide better opportunities for flexibility, widespread user adoption, and financial sustainability. In mid-2014, a new software platform was chosen and adopted. ShelbyConnect was ended in October 2014 and a new platform, CoactionNet, was adopted as the shared community information system. Many NOVA agencies moved to CoactionNet in November 2014, along with a number of other agencies serving children and families facing trauma and other challenges.

CoactionNet is a web-based longitudinal case management data system built on the Apricot platform. It provides users a range of robust functionality including client level case management, cross organizational outcomes data tracking and reporting, a clearinghouse for professional development and training opportunities and a centralized referral service.

The primary purpose of CoactionNet is to allow agencies to implement a system of care approach by delivering "wraparound" care coordination. This approach is grounded in the following ten wraparound principles:

- Family voice and choice
- Team-based
- Natural supports
- Collaboration
- Community-based

- Culturally competent
- Individualized
- Strengths-based
- Persistence
- Outcome-based

CoactionNet allows agencies to accomplish these principles by facilitating team-based collaboration to deliver individualized services based on client "voice and choice." This system also allows outcomes to be measured at the client, agency and community levels to ensure that resources are invested in effective services.

The <u>functions</u> and community benefits of CoactionNet are as follows:

- Facilitate inter-agency coordination for common clients
- Report overall community progress towards collective goals and common measures
- Identify effective programs and practices
- Identify opportunities for quality improvement of programs and continuums
- Identify gaps in needed community resources
- Track utilization and unduplicated numbers of clients

Memorandums of Understanding (MOUs) specifying the use and sharing of client data were created and signed for all agencies (not solely NOVA partners) for the original ShelbyConnect system. These agencies have a basic release of information (ROI) that they have their clients sign, which in turn allows other agencies to search the system to see if a client they are encountering for the first time had previous interactions with another ShelbyConnect agency. The NOVA partners had a NOVA ROI that included the sharing permission of basic identifying info (name, last four digits of social security number, etc.), but it also contained permission to share more extensive information between NOVA partners, as needed. This is what took so long to get "approved" by NOVA partners. Clients typically just signed one ShelbyConnect release in addition to the partner agency's specific release of information. The only time an additional ShelbyConnect ROI was needed was for information beyond the information covered in the NOVA ROI, when making referrals. During the adoption of ShelbyConnect, when an agency wants to join the system, a representative from that agency must sign an MOU and contact the consultant group that NOVA has contracted. In the future, agencies will contract directly with CoactionNet.

For many, a discussion of a shared data management system may raise concerns about the Health Insurance Portability and Accountability Act (HIPAA), which regulates the use and disclosure of protected health information. However, one of the consultants who has been leading the development of Coaction Net believes that HIPAA is often misunderstood:

HIPAA does not prevent agencies from ever sharing data. People are just too scared. Lawyers take a risk management approach and have told them, "If you don't even consider

sharing data, you can't get into trouble." The other thing is that it's a lot of work to get all the MOUs and ROIs, so people use HIPAA as a smokescreen to avoid doing the work.

CoactionNet will continue to be used as a trauma surveillance, referral and case management tool by NOVA agencies and others after the Defending Childhood grant ends, making this change to the way agencies share data a significant accomplishment for the NOVA program.

Conclusion

Overall, NOVA's place-based services model had many barriers and challenges and drifted from its original goal of helping children who have been exposed to violence. Some of the challenges included addressing the more immediate needs of the family (e.g. housing, paying bills) rather than treating the child exposed to violence, filing orders of protection for persons under 18 or married couples, and providing childcare for women looking for employment. These challenges show that there is still room for strengthening the model for place-based interventions, and insofar as the overriding goal of an initiative is to focus intensive resources on those client problems that specifically involve children's exposure to violence, the NOVA model should not be replicated in its current form. However, as a model for connecting impoverished apartment complex residents with desperately needed services and assistance, the NOVA place-based model provided elements of a replicable approach.

Chapter 4 Focus Groups with NOVA Clients in the Targeted Apartment Complexes

Background of the Focus Groups

While learning about the Network for Overcoming Violence and Abuse (NOVA) from those who helped design and implement its programming is important, equally insightful is hearing from those who have been affected by the programming. To that end, on October 18-19, 2013, researchers from the Center for Court Innovation ran three focus groups with clients in the targeted apartment complexes. The purpose was to learn from residents of Wingood Manor, Pershing Park, and Bella Vista respectively about their knowledge of the community resources and education that NOVA provides through Agape Child and Family Services and residents may or may not have used services offered through this initiative. The Center for Court Innovation's Institutional Review Board approved these focus groups.

The first group was held at Wingood Manor and was attended by four women, all of whom had children. The second group was at Pershing Park and was attended by six women, five of whom had children. The final group was at Bella Vista and was attended by four women, all of whom had children. Participants were at least 18 years of age, and the groups were conducted in English. Before the beginning of the focus groups, the facilitators asked each person to sign an informed consent form. Participation in the focus groups was voluntary, and all participants received a meal beforehand and a \$15 Wal-Mart gift card afterwards as a thank you. Childcare was provided on site by NOVA/Agape staff during the groups (see Appendix E for the focus group protocol).

Awareness of NOVA

Participants originally learned about NOVA in a variety of ways: flyers, brochures, referral from the apartment management office, announcements at local community meetings, and through meeting one of the connectors. In Bella Vista, a particularly effective strategy for letting people know about NOVA was that when the NOVA/Agape office was first set up, the staff passed out baskets with holiday treats, while all wearing the same t-shirt, making them visible to everybody.

Most had not attended a NOVA event, nor were they aware of anyone else attending one, although they knew events such as the fairs had happened. Their reasons for non-attendance ranged from work commitments to not liking to go out very much. As one participant stated, "They try to get me to come to community events, but I'm more of a stay-at-home person, not very social. Stay at home, keep my babies home and safe."

When asked about what services NOVA provides, the women mentioned counseling; help recovering from an abusive relationship; monetary assistance for rent, utilities, and school supplies; help with getting a GED; and referrals to other social service agencies (e.g., assistance for pregnant teens).

Why They Came to NOVA

Participants expressed that NOVA helps people in need, and if staff cannot assist, they will connect the person to an organization that can. Most had gone to NOVA for someone to talk to, either for themselves or for their children. Very often the reasons related to experiences with various types of violence. For example, one woman said that she accessed services for her middle- and high school-aged sons who had been dealing with bullying at school. The mother reported that her sons are doing much better since the connectors started talking to her and that they really enjoy coming to NOVA. Another woman said that the services came at the right time for her, as she had been through a traumatic domestic violence relationship and really needed counseling for her and her grandchildren. Another woman had a daughter who went missing, and she has been talking to NOVA since then. One mother went to NOVA on behalf of her 15-year-old daughter who has bipolar disorder and schizophrenia (along with domestic and sexual violence exposure), and NOVA helped her connect to places such as Youth Village and Lakeside for services for her daughter. A fourth young woman had "lost everything" in a domestic violence incident. The apartment leasing manager told her about NOVA, and NOVA helped her find shelter in the beginning, then housing and furniture, as well as helped her pay her bills and provided counseling for her and her children.

Others accessed services for non-violence-related reasons. For example, they went to NOVA for help with paying bills or for post-partum depression advice.

Of note, one woman who attended the Bella Vista focus group said she was on the "waiting list" for NOVA. She was a domestic violence victim with no income and no childcare, so she came to the NOVA/Agape office. However, she stated that they did not have anything for her so she ended up at Memphis Family Shelter. It was unclear whether she meant that they could not connect her to housing.

Additionally, it is worth noting that what when participants talked about counseling, it appeared to be more of an unstructured "someone to talk to" form of counseling and not a form of evidence-based therapy. As one woman stated, it was "a good place to come and vent and release."

Role NOVA Has Played in the Community and Their Lives

Participants were asked what it has meant to them to have NOVA in their community. Many indicated that they did not know of resources that were available to them before NOVA or how to access them. As one woman said, "You can't find out nothing on your own. So they help us when we don't know where to go." Another pointed out that "at the 'based on your income' apartments, you don't get these services." A third woman stated,

"It's up to you but they can help you get out of these situations. I was in an abusive marriage so [NOVA] tried to help me get an apartment. She referred me, called the lady for me. It turned out it wasn't my style so I found one on my own, but I still called and said thanks. [NOVA] showed me how to do it."

Everyone agreed that NOVA was a great opportunity for people in need. One woman said, "When I hit rock bottom this became my second home. I still call [NOVA] for counseling." Another shared, "And they're willing to give you everything you need. When my son was born they gave me blankets, diapers." The overall feeling from the groups was summed up by one participant: "It's up to you to come; if you want the help, it's there. And it's not everywhere."

Comments about NOVA Staff

The terms "connectors" and "family service providers" did not resonate with any of the women. However, all were quite familiar with the individuals who actually fill these roles at the NOVA/Agape offices in the apartment complexes. Specifically, two staff members were mentioned by nearly everyone and always in a praising manner. Phrases such as "very responsive," "always available," "follows through quickly," and "go-to person" were used to describe NOVA/Agape staff members. They know there is always someone in the NOVA/Agape office so that they can just stop by or call staff on their phones.

One mother stated that when NOVA called her, the connector was concerned and sympathetic and even came to her house to check up on her. Another stated that when she was devastated and in shock after a domestic violence incident, NOVA/Agape staff made her feel like she was worth something. The care displayed by the NOVA/Agape staff was a common theme across apartment complexes. "They don't make you feel bad, they keep motivating you," said one participant, while another pointed out that they "make you feel comfortable. They don't feel your pain, but they keep your spirits up."

One participant particularly appreciated that the NOVA/Agape staff were all female: "They're women, so they know how to reach you and listen."

Violence in the Neighborhood

When asked about violence in the neighborhood, participants expressed that children experience violence in the community all the time: kids are picked on going to and from and at school, parents fight, and domestic violence and child abuse are common. "Domestic violence is a big thing in Memphis. So much goes on but people try to hide it. But you can't hide it," said one participant. Still, some expressed their perception that violence has decreased from past years.

In Pershing, the women said that they do not have much interaction with their neighbors, but they do feel safe. In Bella Vista, the women stated that the people who are well established in the community and know each other already look out for each other, though it is harder for new residents to break into that sense of community. Bella Vista residents stated that there used to be a lot of violence (shootings, people being jumped), particularly at night, but that it is a little quieter now than it has been in the past. When asked why the levels of violence have decreased, everyone said because of prayer. "It took a lot of prayer to change these apartments, and it did," said one mother, while another noted, "Prayer do change things. You don't see Bella Vista in the news like you used to." Additionally, the women said that everyone has been coming together as a unit and that the police have been doing a good job of stopping people from coming into the apartment complex. "The police is on top of everything."

Campaigns and Others' Knowledge of NOVA

When asked about any campaigns or advertisements about children experiencing or witnessing violence, none had seen any. Additionally, they doubted whether advertisements would be effective. They stated that there are a lot of people in the community who would not access services anyway, as there is a taboo about doing so. According to participants, a big problem in the community is that people believe, as one person described it, "There's nothing wrong with me. I don't want anyone in my business." Moreover, pride may be an issue. One woman talked about having to overcome that in order to not repeat past mistakes: "I had to put my pride to the side and ask for help, because I didn't want to do what I did last time." The women in the groups said that they do refer people to NOVA, but it depends on that person to reach out if they need help and they are often very resistant.

The participants were split about whether they thought NOVA could do a better job of getting the word out about their services. Some thought NOVA has done everything possible, while others thought that having male advisors would help get men to come. It appeared from the discussion that in Bella Vista, NOVA was well-known, but in the other apartment complexes the women said that their neighbors do not know about NOVA. They suggested that NOVA workers go "door-to-door," create a Facebook page, and a start blog for the Frayser community. They also said awareness of these services are best spread by word-of-mouth.

Importantly, not all participants lived in the apartment complexes; some came from surrounding areas. Some of these women said that providing more transportation (e.g., bus passes, rides) to and from the office or events would be appreciated.

While many of the women talked about the stigma of reaching out for services or talking about domestic abuse, they still believed people would use services if they knew about them

When asked who or where they would call to report a case of child abuse or neglect, some said they would call 911, one person mentioned a child abuse hotline, and others said they would call NOVA/Agape.

Suggestions for Future NOVA Services

Finally, the women had many suggestions for additional services they would like NOVA to offer. Some of these were related to dealing with violence exposure, and others were related to childcare support and activities for children.

Violence-related Programmatic Suggestions

One common theme was the desire for more information and "tools" to deal with violence exposure. The participants wanted to have knowledge of how to help and support others who are experiencing domestic violence and perhaps do not think they need the help. They also requested materials on how to "bounce back" after being a victim of violence.

As mentioned above, one barrier is that people are hesitant to talk about their personal lives with others. In one of the groups, there was a lengthy discussion about the need for acknowledging the problem of violence and the barrier posed by an intergenerational belief that you "shouldn't talk outside the house" about the abuse as well as the idea that "you brought it [the abuse] on yourself." The women suggested that NOVA offer more information about what constitutes violence, particularly domestic violence, and provide strategies to communicate to a community that these behaviors are not normal. The women also suggested providing more information that could assist people in recognizing and acknowledging that they are in an abusive relationship.

One suggestion towards breaking the cycle of abuse was holding a workshop focused on intergenerational healing with parents. Additionally, the women indicated a need to have support groups for parents, where they can come and share their experiences, and childcare is provided. This would help them connect their stories to each other and to others, potentially leading support group participants to be advocates, or "lifelines," for other women.

Other suggestions included having someone from NOVA who knows how the court system operates go with women to court as a source of support and having male counselors to provide counseling services for men.

Childcare Support and Activities for Children

The focus group participants expressed a desire for activities for children, many of whom have nothing to do after school and do not have much supervision. As one woman indicated, "There are lots of kids running around, on the street; they need some place to go." Another participant stated that "A lot of parents in the neighborhood work in the evening. They kids are outside and don't get attention. They have a lot of anger, because they feel that they're not cared for." Some suggestions for addressing this need were: a kids' club, a tutoring/homework center, and programming that offered various activities.

Final Thoughts

Overall, based on focus group discussions, the NOVA program run by Agape in the apartment complexes is providing critical services and care to women in need. For most people, it seems that the most important thing NOVA provides is just giving the women someone to talk to in a safe space. At times it seemed, however, that the program was more focused on providing domestic violence services for adults, as opposed to focusing on children's exposure to violence. The distinction between these two is often blurred, as providing services to mothers undoubtedly helps them be better parents to their children. However, combined with other non-violence related services that they provide (e.g., helping to pay bills), there may be some mission-creep to addressing issues that are comorbid with that of children's exposure to violence (e.g., issues of poverty and domestic violence where children are not exposed or are not displaying trauma). Agape's mission is "A Christ-centered ministry dedicated to providing children and families with healthy homes." The Defending Childhood Initiative's mission is about addressing children's exposure to violence, which is only a subset of Agape's mission. It seems like, in practice, the NOVA programming in the apartment complexes is more in line with Agape's broader mission.

Another notable theme is that God and religion are real centerpieces in this community. In every group, God was mentioned numerous times. While faith can be a source of strength and motivation, it can also be a barrier. For example, when we asked one woman about why she has not brought her children to NOVA for counseling for violence exposure, she responded: "Some counseling is not good counseling, and I don't want my kids to have bad counselors. The only counselor they need is the "Big Guy" above. But I do counseling with NOVA. Counseling and prayer. But if you counsel the child they're always thinking about it; they should be focusing on school." Additionally, another woman, when asked about accessing other services, she just said, "I know the Good Lord will provide."

That said, Agape means "unconditional love." It is clear that the Agape staff offer unconditional love, care, and support to all those who come through the NOVA door.

Chapter 5

Barriers, Facilitators, and Sustainability of Project Implementation

General Barriers and Challenges

Apart from the barriers and challenges described in Chapter 3 in relation to specific elements of NOVA programming, several smaller challenges cut across multiple aspects of the initiative.

School District Merger

Schools are the most logical setting for large-scale violence prevention programming for children and youth. However, since the start of the initiative the two major school districts in Shelby County (Memphis City Schools and the Shelby County School District) have been engaged in a controversial plan to merge their school systems³⁴. The in-flux nature of the school district structure in Shelby County made it difficult to have the right district representatives involved in the collaborative, according to the NOVA coordinator. In addition, the schools faced severe budget cuts, which, as one service provider pointed out, "makes smaller initiatives like [NOVA] less of a priority." Consequently, NOVA was unable to implement prevention programming in the schools.

Department of Justice Funding Approval Delays and Limited Timeframe

After Shelby County submitted its Phase II Defending Childhood budget to Office of Juvenile Justice and Delinquency Prevention (OJJDP), the federal government changed the grant to be two years instead of three. Because of this, the NOVA team had to resubmit a budget that addressed the timeframe change. While program implementation was supposed to start in October 2011, the site's revised budget was not approved by OJJDP until early 2012. The NOVA team had to wait for this approval before submitting their budget to Shelby County for approval from the local government, thereby delaying implementation even further.

Additionally, after the initial shift in funding to two years, and with the delays in approval leading to the first year of Phase II being spent addressing implementation logistics (e.g., hiring), community members in the target neighborhood of Frayser initially expressed their discontent to staff about NOVA potentially being at the apartment complex for only a year. However, with additional grant monies from OJJDP, those frustrations have been allayed.

The initially limited two-year timeframe also led to challenges in staffing. According to NOVA staff, it was difficult to hire skilled professionals when there was little job security. Because of project delays related to budget approval from the federal and county government, many of the positions could only initially be guaranteed for one year, leading to more qualified candidates looking elsewhere for employment.

³⁴ See the Huffington Post http://www.huffingtonpost.com/2011/03/15/memphis-shelby-county-schools-merger_n_836333.html, and the Hechinger Report http://hechingerreport.org/content/in-memphis-city-schools-have-become-a-crucible-for-controversial-change 13650/ for more information about the school districts' plans.

Overlapping Initiatives and Collaborative Fatigue

NOVA is not the only large-scale violence prevention program in Shelby County. While multiple projects are helpful for collaboration (discussed further below), they can lead to mixed messages to the community and to collaborative fatigue on the part of key players (e.g., law enforcement, hospitals) who play a role in each project. The simultaneous implementation of Memphis Gun Down and the National Forum on Youth Violence—two important initiatives whose goals are related to and sometimes overlap with the Defending Childhood Initiative—at the same time and in the same geographic target areas as NOVA has resulted in multiple overlapping and at times conflicting messages delivered to the community. According to NOVA staff, this phenomenon has caused some community members to become confused as to which initiative offers which services and who to contact for which problem. Additionally, staff expressed that community members can become weary of pilot projects that come and go as grants end: It is difficult to explain to residents who need help that the project is only temporary and can only provide limited services in the face of vast needs. As one NOVA collaborative member stated: "It's a hard message to get across when you're not equipped to help. If we're not equipped to help, we can do more harm."

While Shelby County and Memphis have been able to secure many grants for large-scale initiatives to address violence, many involve the same representatives from the same community agencies. In the beginning of Phase II of the NOVA initiative, members of the collaborative body expressed that they were experiencing "collaborative fatigue," where the constant collaborating and need to attend many meetings had become exhausting. While collaboration fatigue has been a challenge, the high commitment on the part of the group has helped alleviate some of the frustrations: the collaborative members realize that to get good results, sacrifices must be made, especially in the beginning when a program is trying to get up and running. As one member summed up, "We're going to make this sacrifice on the front end."

Place-based Services

One of the primary components of NOVA was the place-based services offered in the three apartment complexes. However, several members of the NOVA Partnership stated that some of the residents of these apartments were skeptical for multiple reasons: first, as mentioned above, they were not excited about another group coming in temporarily to provide services that would then be taken away after the grant ended. Second, in the past there had been problems with slumlords in these complexes, and the people who reside there had been leery of more groups coming in when they were not familiar with the groups. Finally, several community-based organizations that had already been working in these apartments felt a little threatened by NOVA's presence. They did not realize that the Agape staff members ("the connectors"), who were mostly providing referrals and not direct services, were in fact trying to connect residents to their community based organizations (CBOs), not bringing in new providers. As one connector pointed out, "They did not understand that it's not a competition, but a compliment."

Balancing Necessary Planning Time and Service Provision

NOVA Partnership members noted that simply the time it takes to run this project has been a challenge, and they often struggle with finding the balance between getting the work done right and trying to serve the people. "Getting the work done right" requires lots of time and planning,

but that is time taken away from actual service provision. But as one member asked, "What good are the services if you don't do it right?" NOVA wanted to ensure that the services they offered were high quality and appropriate, but that meant that they could not be "on the ground running" as early as they—and their potential clients—would have liked.

There was a similar need for taking time at the beginning to develop trust among the service providers, whom NOVA was asking to do things differently than they may have in the past. For example, NOVA could not expect service providers to embrace the wraparound model until they had a relationship and were trusted by the providers, and developing that trust took time. As the NOVA project coordinator pointed out, "Programs come, programs go, and providers sometimes feel like they'll just "wait it out," because they've seen so many trends in approaches to service." It was necessary to put in the time at the start of the project to show evidence that what NOVA was asking service providers to do had merit, and to get their buy-in. This meant not starting as early as many would have liked. One partnership member summed up the need for everyone to on the same page:

You're not a community when you just get people in a room. You're a community when you start thinking together. And that takes time. Staff need time to build trust in approach and new training. Clients need to trust providers. All of this takes time!

Facilitators

While there were challenges, they were not considered major barriers to implementation. Conversely, there were some mechanisms in place that helped expedite the implementation of NOVA.

History of Collaboration in Shelby County

NOVA has benefited from a long history of collaboration in Shelby County. As one member of the NOVA partnership put it, "We always collaborate; we don't do anything by ourselves." Another echoed these sentiments by saying, "We've been at so many tables together, we speak the same language." As mentioned earlier, NOVA is building on the work of Operation: Safe Community (OSC), a strategic collaboration spearheaded by the Memphis Shelby Crime Commission with the goal of reducing crime in the community through using smart, data-driven policing. As part of OSC, there is the Memphis Fast Forward Youth Violence Reduction Committee. There is also the Erase Domestic Violence Collaborative, a working group around public awareness related to domestic violence and the workplace, domestic violence homicide, and children exposed to domestic violence. The Shelby County Domestic Violence Council which includes service providers, police, prosecutors, and the attorney general, meets monthly. The U.S. Attorney General for the Western District of Tennessee runs an adult reentry coalition that involves 30 community-based organizations. Finally, there is the Early Success Coalition (ESC), which includes leaders and frontline staff from local and state government, education, healthcare, faithbased and community organizations. Its mission is to promote and expand effective outreach, education, and direct services for families with young children. Together, these services offer families an integrated, comprehensive set of resources to help them provide their children with the strongest foundation for lifelong success. The ESC now has about 70 partners (100 people) and the administrator was formerly NOVA's project director. At the same time as the Defending Childhood grant has been being administered, Memphis also became part of the National Forum on Youth Violence and added the Memphis Gun Down Initiative. Though collaborative fatigue is a significant problem (as discussed above), this history of collaboration has made further collaboration through NOVA an easy lift.

Additional Facilitators

Shelby County is unique in that it has two mayors—one for Shelby County and one for the city of Memphis. According to several Partnership members, NOVA benefitted from having the support of these mayors, both of whom have expressed political will to address children's exposure to violence and to work together with NOVA.

Finally, working with outside consultants from the Consilience Group, LLC, who assisted with the creation of Shelby Connect 2.0 and designed the NOVA policy and procedure manual, including a detailed workflow, roles and responsibilities, was important to the Initiative. They knew the field and were able to visualize the larger picture of what needed to be done to move NOVA forward, especially during the times when the tendency of partnership members was to get "stuck in the weeds" of smaller details of implementation. As the former NOVA project coordinator stated, "There's just some things you cannot get done. The level of detail [the consultant] captures, I could never do that and meaningfully lead the meeting ... to have that additional help has been critical."

Technical Assistance

Futures Without Violence (FWV), the designated technical assistance provider for the Defending Childhood Demonstration Program during the implementation phase, assisted the NOVA team on multiple occasions. In addition to conducting site visits and bi-monthly conference calls, which all of the sites participated in, FWV specifically, provided materials for the NOVA website and resources on teen dating violence. They also aided in the development of the crisis response team, helped NOVA to strategize how to better incorporate youth voice, connected NOVA staff to legal experts for issues of confidentiality, and paid for a risk management and data sharing expert from Rhode Island to come to Memphis to do two half-day workshops.

The NOVA coordinator and former coordinator noted that FWV had been very helpful with the implementation of their programs. However, there was some confusion in the beginning over the role of FWV. The NOVA coordinators said that it would have been useful if, at the beginning of the project, FWV put out a document saying, "These are the types of things we can provide."

Memphis designation as a Forum on Youth Violence Prevention city provided many technical assistance opportunities for staff. Nova project coordinator participated in the Forum Science of Implementation Workshop in Washington, DC and the National Forum on Youth Violence working session, During these sessions, NOVA staff received new program models for implementation and received additional information on The Adverse Childhood Experience Study (ACES).

Sustainability

Although Shelby County has a history of collaboration, NOVA created a new network of organizations committed to preventing and helping children exposed to violence. The Family Safety Center will be a permanent location for victims in need of services. NOVA trained many first responders, service providers, and members of the community on trauma and how to respond to trauma, a training effort that should ostensibly have effects beyond the lifetime of the NOVA initiative itself. A major accomplishment of the NOVA Initiative is Co-Action Net, which will live on post-NOVA. Co-Action Net may help the partner organizations respond to children's exposure to violence more effectively and efficiently through information sharing on individual cases.

Unfortunately, Agape did not receive additional funding to keep the connectors at the apartment complexes for the next phase of the grant. Although the place-based services provided by the connectors were discontinued on September 30, 2014, the domestic violence support group will remain.

Conclusion

NOVA's "no wrong door" model created many opportunities for both children and adults of Shelby County who have been affected by violence to receive an array of services, from assistance with filing orders of protection, finding housing and employment, providing group therapy for children who have been exposed to violence, and referring children to evidence-based treatments to help reduce trauma symptoms. The collaboration between NOVA's many partner agencies—not just around service provision but also around sharing data—has been one of the initiative's notable successes.

However, the strategy of place-based targeted outreach and case management, although successful in helping families in need, may have shifted the focus of the initiative away from addressing children's exposure to violence to a focus on the associated problems of concentrated poverty and housing instability. Future jurisdictions seeking to do a place-based initiative should be mindful of this mission creep: whereas many of the clients served in the apartment complexes wanted help meeting their basic needs such as food and housing, obtaining therapeutic help for their child was not their main priority. This meant that often children were not even recipients of services; rather, parents were the beneficiaries of non-violence-related assistance that has a distal relationship to exposure to violence. This is an important problem because mission creep may dilute the impact of the project in relation to exposure to violence. There is still room for strengthening the model for place-based interventions, and a place-based approach may be more appropriate for initiatives that address poverty, as the original Powerlines program does, than for ones that have a specific focus on children's exposure to violence.

Appendix A Maps of Overlapping Risk Factors and Violent Crime

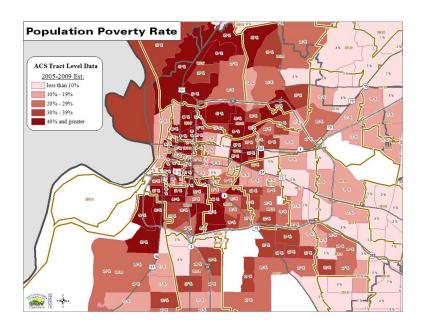


Figure A. Population Poverty Rate

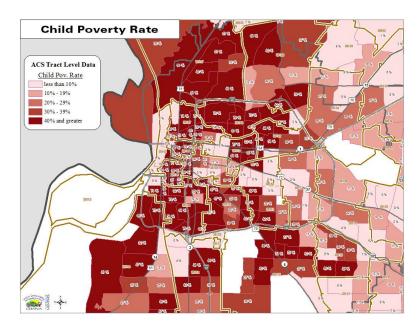


Figure B. Child Poverty Rate

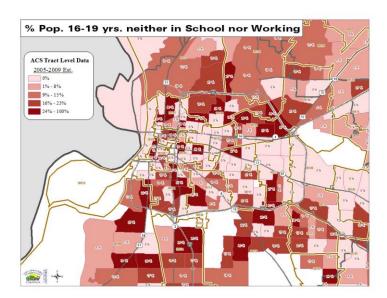


Figure C. Percent of the population that is 16-19 years old that is neither in school nor working

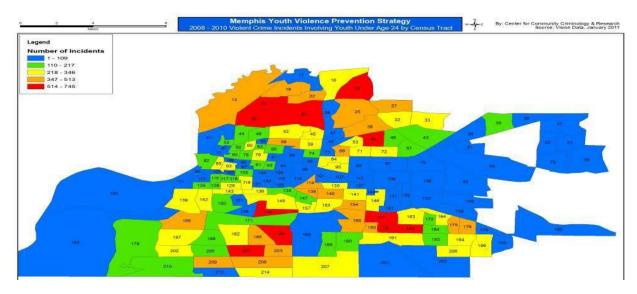


Figure D. Violent crime incidents involving youth under age 24.

Appendix B Amended Juvenile Violence Questionnaire

1. 1. NOVA Violence Exposure Assessment Tool: Edited JVQ-R2, Reduced Item Version, Youth Lifetime Form, Adapted for the Shelby County Network for Overcoming Violence and Abuse

We are going to ask you about some things that might have happened in your life.

1) At any time in your life, did anyone steal something from you and never give it back? Things like a backpack, money, watch, clothing, bike, stereo, or anything else?

Yes No

2) Sometimes people are attacked with sticks, rocks, guns, knives, or other things that would hurt. At any time in your life, did anyone hit or attack you on purpose with an object or weapon? Somewhere like: at home, at school, at a store, in a car, on the street, or anywhere else?

Yes No

3) At any time in your life, did anyone hit or attack you without using an object or weapon?

Yes No

4) At any time in your life, did someone threaten to hurt you when you thought they might

really do it? (Q7 in screener sum version)

Yes No

5) When a person is kidnapped, it means they were made to go somewhere, like into a car, by someone who they thought might hurt them. At any time in your life, did anyone try to kidnap you? (Q8 in screener sum version)

Yes No

Next, we are going to ask about grown-ups who take care of you. This means parents, babysitters, adults who live with you, or others who watch you. Before we begin, I want to remind you that your answers will be kept totally private. If there is a particular question that you don't want to answer,

that's O.K. But it is important that you be as honest as you can, so that we can get a better idea of the kinds of things that kids your age sometimes face.

6) Not including spanking on your bottom, at any time in your life, did a grown-up in your life hit, beat, kick, or physically hurt you in any way? (Q10 in screener sum version)

_ Yes _ No

7) At any time in your life, did you get scared or feel really bad because grown-ups in your life called you names, said mean things to you, or said they didn't want you?

Yes No

8) When someone is neglected, it means that the grown-ups in their life didn't take care of them the way they should. They might not get them enough food, take them to the doctor when they are sick, or make sure they have a safe place to stay. At any time in your life, were you neglected? (Q12 in screener sum version)

Yes No

9) Sometimes groups of kids or gangs attack people. At any time in your life, did a group of kids or a gang hit, jump, or attack you?

Yes No

10) At any time in your life, did any kid, even a brother or sister, hit you? Somewhere like: at home, at school, out playing, in a store, or anywhere else?

Yes No

11) At any time in your life, did you get scared or feel really bad because kids were calling you names, saying mean things to you, or saying they didn't want you around?

Yes No

12) At any time in your life, did a boyfriend or girlfriend or anyone you went on a date with slap or hit you? (Q12 in screener sum version)

Yes No

13) At any time in your life, did a grown-up you know touch your private parts when they shouldn't have or make you touch their private parts? Or did a grown-up you know force you to have sex?
Yes No
14) At any time in your life, did a grown-up you did not know touch your private parts when they shouldn't have, make you touch their private parts or force you to have sex?
_ Yes _ No
15) Now think about other kids, like from school, a boyfriend or girlfriend, or even a brother or sister. At any time in your life, did another child or teen make you do sexual things? (Q22 in screener sum version) Yes No
16) At any time in your life, did you SEE a parent get pushed, slapped, hit, punched, or beat up by another parent, or their boyfriend or girlfriend?
Yes No
17) At any time in your life, did you SEE a parent hit, beat, kick, or physically hurt your brothers or sisters, not including a spanking on the bottom? (Q28 in screener sum version)
Yes No
18) At any time in your life, in real life, did you SEE anyone get attacked on purpose WITH a stick, rock, gun, knife, or other thing that would hurt? Somewhere like: at home, at school, at a store, in a car, on the street, or anywhere else?
Yes No
19) At any time in your life, in real life, did you SEE anyone get attacked or hit on purpose WITHOUT using a stick, rock, gun, knife, or something that would hurt? (Q30 in screener sum version)
Yes No
20) At any time in your life, was anyone close to you murdered, like a friend, neighbor or

someone in your family? (Q32 in screener sum version)

Yes No

21) At any time in your life, were you in any place in real life where you could see or hear people being shot, bombs going off, or street riots?

Yes _ No

- Have you ever heard someone being beaten up or seen someone who was badly hurt and know it was from someone else hurting them?
- 23) Have you ever seen someone who was dead or dying, or watched or heard them being killed? Was this person a stranger, close friend, or family member?(specify) (This question was pulled from the "Northshore Trauma History and Checklist")

Level 1 includes Clients that attend NOVA funded group services, but are not "eligible" for Levels 2-5 services (parent education classes, Stewards of Children, domestic violence group meetings, etc.)

Level 2 includes a yes from any of the following questions above: 1, 4, 7, 11 or 21 (NOVA partners identified these questions as "lower risk" issues for NOVA target population.)

Levels 3-5 include a yes for any of the following questions above: 2, 3, 5, 6, 8, 9, 10, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22 or 23 (NOVA partners identified these questions as "higher risk" issues for NOVA target population.)

Questions 1-21 are from JVQ Instruments, http://www.unh.edu/ccrc/jvq/available_versions.html

Question 22-23 are similar to questions in the Northshore Trauma History and Checklist

Appendix C NOVA Brochure

Si, yo necesito hablar con alguien a NOVA. NOVA is a response to the trauma

Fecha de hoy

Nombre

Numero de

Dirección_

Teléfono_

Nombres y edades de los niños

Funded by the U.S. Department of Justice Defending Childhood Initiative



Violence or abuse can be experienced many different ways. For example, a child:



- ·Hears gunshots outside the window
- · Witnesses a fight or an assault
- · Sees a victim lying on the sidewalk on the way to school
- · Is terrorized by the neighborhood bully
- · Is abused by someone she or he knows and trusts

When there is trauma, all types of problems can

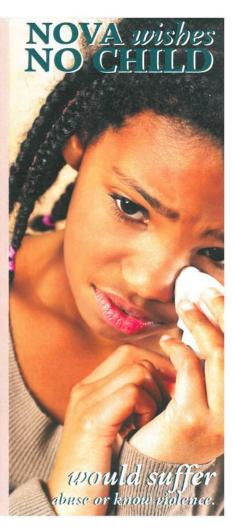
Anger. Fear. Normal behavior patterns can change. Kids often "act out" their problems because they don't know what else to do.

Work at school may decline, or they may start getting into trouble.

Don't let the hurt take charge. Get help.

Call to learn what services are available. Call right away: (901) 222-KIDS (5437).

To learn more about NOVA please visit www.shelbycountynova.net



But bad things do happen so we created a new system of care for children and families.

Too many families in our communities – and far too many children – have experienced the trauma that comes with seeing or experiencing violence of all kinds.



The good news is help is available.

The Network for Overcoming Violence and Abuse, or NOVA, is a response to the problem of trauma that happens after experiencing violence. NOVA offers all the help that children and their families need to put the hurt behind them, to heal, and to live their lives with hope. Real hope.



NOVA Family Service Providers are confidential and caring individuals trained to provide professional help. And they are available to you —

today and right where you live.

Please don't hesitate to seek help if any form of violence or trauma has affected you or your family. The help you or a loved one needs is just a phone call away: 222-KIDS (5437).

Collaborating to bring you real help.

The Network for Overcoming Violence and Abuse (NOVA) is a Shelby County project funded by the U.S. Department of Justice Defending Childhood Initiative and is being initiated in southeast and north Memphis neighborhoods (Zip Codes 38115, 38118, 38125, 38127, 38128 and 38141).

Community partners — schools, police precincts, churches, child care centers, youth-serving groups and more — will be part of connecting children to NOVA's coordinated care. NOVA partner agencies are employing Family Service Providers (FSPs) to help children and their families determine their needs and connect to services.

These NOVA partners provide direct services (all are within the 901 area code):

Agape Child & Family Services, 323-3600 Exchange Club Family Center, 276-2200 Family Safety Center, 222-4400 Memphis Child Advocacy Center, 525-2377 Shelby County Crime Victims Center/Rape Crisis Center, 222-3950 Victims to Victory, 274-6828

If your child needs NOVA services, you may call 222-KIDS (5437), or fill in the following page, tape this brochure closed and mail it to:

NOVA Shelby Co. Office of Early Childhood & Youth 160 N. Main, Suite 350 Memphis, TN 38103



NOVA intervention can help your family get or the road to healing.

Yes, I would like to speak to someone at NOVA.

Today's Date	
Name	
Phone #	
Addresss	
Children's names and ages	

Funded by the U.S. Department of Justice Defending Childhood Initiative



Appendix D Sample NOVA Publications



www.ShelbyCountyNOVA.net

(901) 222-3990





AGAPE

presents

COMMUNITY CAFE

residential meeting.....

October 11, 2012 5:00 p.m.

Dinner Will Be Served

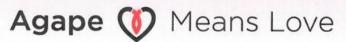
Children are welcomed!

Food provided by



Bella Vista Apartments Leasing Office 5958 East Point Drive Memphis, TN 38115

For more information, please contact Valentina Horton at (901) 490-3368.



NOVA is a collaborative effort with Agape Child & Family Services. www.AgapeMeansLove.org



Appendix E Focus Group Protocol

Shelby County Defending Childhood Initiative October 2013 Evaluation - Focus Group Protocol

Thanks for attending this focus group. My name is Rachel Swaner, and this is Elise Jensen. We are researchers at an organization in New York City called the Center for Court Innovation, and we are doing an evaluation of the Defending Childhood Initiative. This is a federally funded program to address children's exposure to violence in eight sites around the country. Shelby County is one of those sites, and NOVA (Network for Overcoming Violence and Abuse) is the local name for the Defending Childhood Initiative here. The program is in three apartment complexes in Memphis, including yours. That's why we're here today, to learn from you how much you know about the NOVA program, and to understand the role "the connectors/family service providers" have played in your community. We'll also be running similar groups with residents in the other two apartment complexes to learn the same thing from them.

The focus group will last approximately 90 minutes. The discussion will be audio recorded, and a written summary will be produced. However, the views and opinions of specific individuals will be anonymous – no one will be quoted by name. Feedback shared with persons outside the room will indicate what was said, but not specifically who said what. We also ask that each of you similarly respect the confidentiality of each other's comments.

The primary purpose today is to have an open discussion about your knowledge of the community resources and education that NOVA has provided and how you may or may not have used the connectors family service providers. The purpose is not to generate a consensus, so if you find yourself having something to say that is different from someone else in the group, please speak up. We want to hear from everyone, we just ask that you be respectful, so if someone else is talking we ask that you don't talk over him or her. You don't have to answer any question you don't want to answer, and there are no right or wrong answers. At the end of the group we have gift cards for you as a thank you for your participation.

Sound good? Ok, let's first start with introductions, first name only! Tell us your name, how long you've lived in this apartment complex, how long you've lived in Shelby County, and why you chose to attend the discussion today.

- 1. What do you know about the NOVA program?
 - a. Probe: How did you first hear about NOVA?
 - b. Probe: What are the types of services NOVA provides?
 - c. Probe: Do you know how to contact NOVA? How?
- 2. Have you attended a NOVA event? If so, which one? What was the event about? What services did you receive or what topic did you learn about?
 - a. Probe: How did you hear about the event?

- b. *Probe:* Why did you decide to attend? For those who didn't attend, why did you not go?
- c. *Probe*: Do you know others in the apartment complex who didn't attend? Why do you think they didn't they attend?
- d. *Probe*: Did you receive the services you hoped to receive or learn more information about the topic you were interested in?
- 3. Have you heard of the connectors family service providers? What is their role for the community?
 - a. *Probe:* How did you first meet them or learn about them?
 - b. *Probe:* Where did you meet them (e.g. was there an event where they introduced themselves or did they individually stop by apartments?)
- 4. Have you reached out to the connectors for any reason? If so, what was the reason? If not, why not?
 - a. *Probe:* If you did reach out to them, were they easily accessible?
 - b. *Probe*: How did the connectors respond to you contacting them?
 - c. *Probe:* Did they get you the help you needed? If they couldn't, why not?
 - d. *Probe:* Were you satisfied with their response?
 - e. *Probe:* Would you reach out again? Would you recommend their services to your neighbors?
- 5. What has it meant to you to have the connectors working in your apartment complex over the last year or so?
- 6. What additional resources do you wish NOVA would provide to your community?
- 7. Over the last year, have you seen or heard any campaign or advertisements about children experiencing or witnessing violence?
 - a. *Probe:* If yes, where did you hear or see the advertisement?
 - b. *Probe*: What did the advertisement say?
 - c. *Probe:* How effective do you think it was?
- 8. Compared to last year, has violence in your neighborhood increased, decreased, or remained the same?
 - a. *Probe:* What types of violence are most prevalent?
 - b. *Probe:* Why do you think the levels of violence changed? If it decreased, why do you think it went down? If it increased, why do you think it went up?
- 9. If you wanted to report a case of child abuse or neglect, who or where would you call to report it? How likely would you be to do so?
- 10. If you wanted to get help for a child who had experience violence, who or where would you call?

, that's all connector in this foc	s or NOVA?	ons I have. If not, then	Does anyo I think we'	ne have re done.	any additiona Thank you so	l comments much for pa	about the