

FINAL LOCAL EVALUATION REPORT

BELOVED COMMUNITY: NEXT LEVEL COLLABORATION

GRANTEE: City of Richmond, Office of Neighborhood Safety

FUNDING SOURCE: California Violence, Intervention, and Prevention (CalVIP) Grant Program, Cohort 3

PROJECT PERIOD: October 1, 2020 – June 30, 2023

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CONTENTS

Executive Summary i

Project and Evaluation Background..... 1

Evaluation Methods 5

Findings..... 8

Discussion of Results18

APPENDICES

- Appendix A: Logic Model
- Appendix B: Grantee Highlight

EXECUTIVE SUMMARY

PROJECT OVERVIEW

The Beloved Community: Next Level Collaborative project, funded by the California Violence, Intervention, and Prevention (CalVIP) program through the California Board of State and Community Corrections (BSCC), was managed by the City of Richmond, Office of Neighborhood Safety (ONS). The project, which was designed to serve individuals in the cities of Richmond, El Cerrito, and San Pablo and in unincorporated North Richmond who were involved in or at risk of involvement in violent crime, focused on addressing the needs that have resulted from racial disparities in the identified communities, such as a lack of access to positive role models and the resources required to survive and thrive (housing, mental health care, education, job training, etc.). A partnership of organizations including ONS, the RYSE Youth Center (RYSE), and Richmond Police Activities League (RPAL) implemented project activities.

The project had the following goals: (1) reduced participation in violence/gun violence by individuals in West Contra Costa County; (2) engagement of individuals in West Contra Costa in positive activities; and (3) commitment by project partners to employ, practice, and share trauma-informed principles.

KEY FINDINGS

Key findings from a mixed-methods evaluation of the project include the following.

PARTICIPANT ENROLLMENT AND SERVICE ENGAGEMENT

In all, 396 young people participated in the project, which exceeds the expected participant number of 245 by about 61%. Participants entered the program through either RYSE or ONS. For young people who entered the program through RYSE, services that this group most frequently participated in included case management (provided to 100% of participants), mental/behavioral health services (86% of participants), and life skills (78% of participants). For individuals who entered through ONS, services that young people most frequently took part in were case management (provided to 100% of participants), training in conflict resolution and other social-emotional learning (84% of participants), and mentoring (82% of participants).

FACTORS SUPPORTING PROJECT IMPLEMENTATION

The project's implementation was supported by three primary activities: (1) responsive, persistent mentoring and case management for young people, which supported participants' development of healthy relationships with staff, (2) intentional, ongoing collaboration among the project partners, and (3) staff training and self-care.

- *Responsive, persistent mentoring and case management.* Program staff provided participants with ongoing mentoring, case management, and support in such areas as developing goal plans, stabilizing housing, creating safety plans, navigating the healthcare system, obtaining drivers' licenses, and addressing issues related to education and employment. This guidance and support were responsive to young people's needs and offered nonjudgmentally, which helped participants develop prosocial, trusting relationships with staff.
- *Intentional, ongoing collaboration among the project partners.* Healthy collaboration among ONS, RPAL, and RYSE was based on longstanding working relationships grounded in mutual understanding and respect, allowing partners to provide warm handoffs for participants, jointly manage participants' cases, and collectively resolve challenges, including navigating issues posed by the COVID-19 pandemic.
- *Staff training and self-care.* Project staff attended more than 60 training sessions on trauma-informed services during the grant period. Training topics focused on strategies and skill building for staff to effectively support youth and to cope with secondary trauma. Staff also received paid time off for self-care, met with a life coach, and had regular opportunities to process trauma in individual and group settings.

FACTORS HINDERING PROJECT IMPLEMENTATION

The COVID-19 pandemic presented the primary challenge to project operations. The pandemic affected areas such as outreach and programming, staff transitions and turnover, and immense social isolation and disconnection for young people.

INDIVIDUAL-LEVEL OUTCOMES

Youth survey results indicate that through the program, most participants developed positive relationships with program staff, gained or enhanced problem-solving skills, addressed their underlying trauma, and prepared for their future. Qualitative responses from young people support the survey results. For example, participants stated that through the program they attended therapy, connected with job training and job opportunities, and received support with housing. Participants also reported that the program motivated them, built their confidence, and helped them proactively plan for their future.

IMPLEMENTATION OF TRAUMA INFORMED, HEALING CENTERED PRACTICES

RYSE convened and facilitated several types of healing circles for service providers, community members, staff, and participants. These activities were intended to offer structured, supportive opportunities for listening, acknowledgment, reflection, and grieving, including coping with secondary trauma from serving young people traumatized by violence. During the grant period, 78 healing circles and related activities were conducted with at least 800 people participating.

CONCLUSION

The project accomplished its stated goals and objectives and contributed positively to individual and organizational outcomes. At the individual level, young people formed prosocial relationships with staff, developed greater awareness of their emotions and feelings, enhanced their skills for using healthy strategies to solve problems and resolve conflicts, met personal goals, and created plans for their future. At the organizational level, partners worked together to support young people's needs including using innovative approaches to address challenges posed by the pandemic, participated in trauma-informed training, and provided community spaces for staff, youth, and community members to process grief and cope with trauma. Contextual data indicate a considerable decrease in gun violence and associated homicides in Richmond by the end of the grant period.

PROJECT AND EVALUATION BACKGROUND

PROJECT INTRODUCTION AND OVERVIEW

The Beloved Community: Next Level Collaborative project, funded by the California Violence, Intervention, and Prevention (CalVIP) program through the California Board of State and Community Corrections (BSCC), was managed by the City of Richmond, Office of Neighborhood Safety (ONS). The project, which was designed to serve individuals in the cities of Richmond, El Cerrito, and San Pablo and in unincorporated North Richmond who were involved in or at risk of involvement in violent crime, focused on addressing the needs that have resulted from racial disparities in the identified communities, such as a lack of access to positive role models and the resources required to survive and thrive (housing, mental health care, education, job training, etc.). A partnership of organizations including ONS, the RYSE Youth Center (RYSE), and Richmond Police Activities League (RPAL) implemented project activities.

PROJECT NEED

While violence reduction activities supported by previous rounds of California Gang Reduction, Intervention and Prevention (CalGRIP) and CalVIP funding for Richmond and West Contra Costa County have contributed to decreases in homicide rates in the region, the rates of violent crime and gun violence have remained high in comparison to other communities. Violence in the Richmond area is driven by multiple, interconnected factors that include high levels of poverty and racial disparities. Residents of Richmond and West Contra Costa County experience disparate rates of violence, trauma, and stress, occurring across such health indicators as intentional injury, lethal violence, and homicide; poverty, substance use, contact with child welfare, law enforcement, and juvenile justice systems; and suspension, expulsion, and dropout from school.¹

HISTORY OF THE GRANTEE IN THE COMMUNITY

Established in 2007, ONS is a non-law enforcement city agency that directs gun violence prevention and intervention initiatives that foster increased community well-being and public safety. Using a community-centered, participant-driven approach grounded in positive youth development, ONS

¹ Kaiser Permanente. (2019). *2019 Community Health Needs Assessment*.
<https://about.kaiserpermanente.org/content/dam/internet/kp/comms/import/uploads/2019/09/Richmond-CHNA-2019.pdf>;
Richmond Department of Children and Youth. (2020). *2020 Community Needs Assessment Report*.
<https://www.ci.richmond.ca.us/DocumentCenter/View/56599/2020-Community-Needs-Assessment-Report>

intervenes and engages with youth and young adults identified as most likely to commit acts of gun violence and/or be victims of gun violence. ONS also provides prevention services to young people at risk of involvement in gun violence.

SIMILAR SERVICES AVAILABLE IN THE COMMUNITY

Aside from services provided by the project partners, the Richmond community generally lacks resources and organizations to appropriately serve the identified population. Potential participants are disconnected from a wide array of needed resources. They are significantly underserved due to a lack of community-based and culturally responsive organizations with the capacity to support them.

PROJECT SCOPE AND INTENDED POPULATION

The project, which focused on building supportive relationships with mentors who can serve as role models to participants and providing linkages to services to address participants' varied needs, consisted of evidence-based services, including street outreach, mentoring, case management, cognitive behavioral therapy (CBT), life skills training, and employment training. Services were offered by ONS, RYSE, RPAL, and the Literacy for Every Adult Program (LEAP). Participants entered project services through ONS or RYSE and received services based on individually identified needs.

Eligibility

The project intended to serve 245 people. The criteria for participation were that a potential participant (1) resided in the city of Richmond, El Cerrito, or San Pablo, or in unincorporated North Richmond, and (2) was involved in community violence, including gun violence, at the time of program entry or was at high risk for involvement in violence. The project was open to individuals of any age who met these criteria; however, based on partners' experience and expertise, it was anticipated that most participants would range in age from about 13 to 24 years.

Identification, Outreach, and Recruitment

As noted above, individuals entered project services through ONS or RYSE. Potential participants were identified through project partners' in-depth community knowledge and connections, including extensive partnerships and referral networks, as follows.

- **ONS:** ONS's Neighborhood Change Agents (NCAs) gain extensive information from their community networks on the individuals at highest risk of being involved in violence. NCAs conducted outreach to and recruited people who were eligible for and interested in program participation.
- **RYSE:** RYSE partnered with local hospitals, including John Muir Health, Highland Hospital, and Children's Hospital Oakland for referrals via the RYSE Restorative Pathways Program (R2P2), which provides intensive case management and mentoring for youth and young adults admitted to local hospitals for violence-related injuries. RYSE also received community-based referrals for victims of violence who are not admitted to hospitals for services. In addition, RYSE partnered with the Contra Costa County Probation Department to offer transition services for youth reentering their communities.

Assessment, Enrollment, and Participation

A total of 110 participants were expected to enter the program through ONS. An additional 135 participants would enter the program through RYSE. ONS and RYSE individually assessed each participant on multiple dimensions including education, employment, family, housing, and mental and physical health. Staff also helped participants identify individual goals they hoped to make progress on or achieve during program participation. Based on their point of entry into the project and the assessment and goal-setting process, participants received services in one of the following three groups.

- **Group 1, ONS: Operation Peacemaker Fellows.** The Operation Peacemaker Fellowship, which ONS has implemented with measurable success for more than 10 years, is designed for young men who have been identified as most likely to be involved in gun violence in Richmond. The fellowship uses a strengths-based positive youth development framework and emphasizes authentic relationship building. The fellows received the most intensive services, which included street outreach, individual and group mentoring, life skills training, structured activities such as day trips, and case management (provided by ONS); CBT (provided by RYSE); literacy services (provided by LEAP); and employment training and support (coordinated by RPAL).
- **Group 2, ONS: Street Outreach Participants.** During street outreach activities, ONS recruited a second group of participants who experienced many of the same issues as those who participated in the fellowship. However, as this group was at lower risk of involvement in gun violence, they received a less intensive level of services than the fellows. Services provided to this group, with an emphasis on relationship building and positive youth development, included street outreach and individual and group mentoring (provided by ONS), CBT (provided by RYSE), life skills training (provided by ONS and RPAL), literacy services (through LEAP), and community service, structured activities such as basketball and boxing, and employment training and support (coordinated by RPAL).

- *Group 3, RYSE: R2P2 and Contra Costa County Probation Department referrals.* RYSE collaborated with local hospitals, law enforcement, and the Probation Department to provide services to youth who have been victims of violent crime or have had justice system involvement. RYSE operates with an intensive relationship-based approach that includes engaging positively with young people and building on their strengths. RYSE provided such services as hospital-based violence intervention, individual and group mentoring, case management, CBT, media and arts activities, education, and career preparation.

In addition to services for participants, RYSE organized and facilitated a series of healing circles for service providers and community members. The healing circles aimed to create networks of support for attendees and help with processing grief, loss, and trauma, including coping with secondary trauma from serving young people traumatized by violence.

Anticipated outcomes for the project are outlined in the logic model (Appendix A).

PROJECT GOALS AND OBJECTIVES

The project had the following goals and objectives.

Goal 1: Reduced participation in violence/gun violence by individuals in West Contra Costa.

- Objective A: Participants develop positive relationships with empathic staff;
- Objective B: Participants will have additional tools to negotiate conflict and avoid violence;
- Objective C: By program completion, youth have begun to address the underlying trauma that contributes to engagement in violence.

Goal 2: Individuals in West Contra Costa engage in positive activities that give them the opportunity to become productive members of society.

- Objective A: Participants engage in constructive peer activities;
- Objective B: Participants take part in education and career supports; and
- Objective C: Participants develop plans for education/employment.

Goal 3: Partners commit to employ, practice, and share trauma-informed principles as defined by SAMHSA.²

- Objective A: Partner staff participate in training on trauma-informed services; and
- Objective B: Partner staff implement trauma-informed practices, including addressing secondary trauma experienced by staff and community members.

EVALUATION METHODS

Evident Change, a nonprofit research organization with an office in Oakland, California, was the local external evaluator for the project. Evident Change collaborated with project partners to develop and implement culturally responsive evaluation processes and tools to meet the project’s goals while also minimizing the data collection burden on evaluation participants. The process and outcome evaluation used a mixed-methods, non-experimental research design.

PROCESS EVALUATION METHODS AND DESIGN

MONITORING PROJECT IMPLEMENTATION

To monitor project implementation, ONS convened a monthly meeting of project partners, including Evident Change, throughout the grant period. Meetings focused on project operations and processes, including areas that may need modification (for example, due to external factors such as the COVID-19 pandemic), and evaluation updates. ONS and RYSE tracked participant progress and outcomes using assessment forms, attendance records, and case notes and maintained their own data collection systems to track grant-related activities. In addition to these agency-specific data management systems, ONS hosted an online portal for partners to enter data for the quarterly progress reports (QPRs) submitted to the BSCC. ONS regularly reviewed the QPRs to assess progress on project goals and objectives.

² Substance Abuse and Mental Health Services Administration. (2014). *SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach*. HHS Publication No. (SMA) 14-4884. SAMHSA.

EVALUATION QUESTIONS

The process evaluation examined the following questions.

1. What programming and services were provided as part of the project?
2. Who participated in project programming and services?
3. How do people feel about the project programming and services they engaged in?
4. What trainings on trauma-informed services did project staff attend?
5. Were project activities and services implemented as planned?
6. What factors helped or hindered project implementation?³

DATA COLLECTION

Data sources for the process evaluation were:

1. Participant-level data collected by ONS and RYSE, including information about demographics, assessment, and referrals to services;
2. Information collected by RYSE about healing circle activities;
3. Individual qualitative interviews with program partners, with a focus on progress on project goals and objectives. The evaluation team conducted three partner interviews (one staff member per partner) in 2023; and
4. Participant surveys, interviews, and a listening session. Participant surveys measured participants' attitudes in areas such as development of healthy relationships, accessing mental health resources, and preparation for the future. Survey type varied by partner.⁴ The evaluation team conducted individual interviews with two RYSE participants and analyzed data from a listening session of 11 fellows, which was led by ONS; the listening session and interviews occurred in 2023.

³ A seventh process question that was included in the local evaluation plan—Were there any unintended consequences or outcomes (positive or negative) related to program implementation?— was less applicable than initially expected and omitted from the evaluation.

⁴ Surveys analyzed for the evaluation included the following. ONS used a pre-post survey developed for this project; the survey was administered to fellows after program entry and prior to program exit. RPAL used a modified version of the ONS survey; the RPAL survey was administered to youth participants at two points in time during the grant period, in fall 2022 and spring 2023 (it was not designed as a pre-post instrument). RYSE used two existing program surveys: (1) program impact surveys for participants in its counseling and case management services, administered at the close of each program cycle (survey results for summer/fall 2021 and fall 2022 are provided in this report); and (2) RYSE's annual member survey, which includes respondents who participated in R2P2. Survey results for the member survey administered in 2023 are presented in this report.

In addition to these sources, the evaluation team also reviewed QPRs that ONS submitted to the BSCC and contextual information about firearm assaults and homicides that occurred in Richmond during the grant period.

DATA ANALYSIS

The evaluation team used descriptive statistics to analyze quantitative process data. Qualitative responses were recorded, coded, and analyzed. Qualitative analysis focused on identifying and examining key themes and trends.

OUTCOME EVALUATION DESIGN AND METHODS

The outcome evaluation examined six questions.

1. Did participants develop positive relationships with staff?
2. Did participants begin to address their underlying trauma?
3. Did participants take steps to prepare for their future?
4. Did participants gain additional tools to negotiate conflict and avoid violence?
5. Did participants who are Operation Peacemaker fellows:
 - a. Not have any injuries due to gun violence?
 - b. Not have any arrests on gun-related charges?
 - c. Remain alive?
6. Did partner staff implement trauma-informed/healing-centered practices?

DATA COLLECTION

For questions 1–4, data from participant surveys served as the main source of information. In addition, participant outcome data and participants’ qualitative responses from surveys, interviews, and the listening session supplemented the quantitative survey results. For the participant outcomes, staff assessed participants on three measures at program exit, based on their progress during the program: (1) development of positive relationships with peers and adults, (2) feeling accepted and cared for in the program, and (3) gaining or improving social emotional skills. ONS staff provided data for question 5, based on ongoing monitoring of these measures. Information about healing circles, provided by RYSE, served as the data source for question 6.

DATA ANALYSIS

The evaluation team analyzed participant survey data in SPSS using descriptive statistics. Due to relatively small sample sizes for the fellowship pre-post surveys, additional statistical analyses were not conducted. As with the process evaluation, qualitative responses related to project outcomes were recorded, coded, and analyzed to surface key themes and trends.

DETERMINING OUTCOMES' RELATIONSHIP TO THE PROJECT

To aid in determining whether participant outcomes are related to the project, the evaluation team included an item on the ONS pre-post survey to gauge whether participants were involved in other types of services or programming during the grant period and asked partners in interviews about other simultaneous local efforts that participants may also have engaged in. These information sources helped inform the analysis of findings. At the same time, the evaluation design and data analysis may not completely account for or reflect the contribution of external factors.

FINDINGS

PROCESS EVALUATION

PARTICIPANT DEMOGRAPHICS AND SERVICE ENGAGEMENT

In all, 396 young people participated in the project. This number exceeds the expected participant number of 245, as stated in the grant proposal, by about 61%. Most (91%) of participants successfully completed the program.⁵ Demographic information indicates that most participants (96%) were between 13 and 24 years old. About three quarters (73%) were male. About half (55%) identified as Black/African American and one third (34%) as Latinx/Hispanic.

Of the 396 participants, 237 entered the program through RYSE and 159 entered through ONS. For young people who entered the program through RYSE, services that this group most frequently participated in included case management (provided to 100% of participants), mental/behavioral health services (86% of participants), and life skills (78% of participants). In addition, supportive services were provided to 80% of

⁵ Participants enrolled in the CalVIP project were defined as successfully completing the project based on their attendance and enrollment in services throughout the full grant term. Participants did not formally exit from the project, as partners' work and supports were ongoing for participants.

participants. For individuals who entered the program through ONS, services that young people most frequently took part in were case management (provided to 100% of participants), training in conflict resolution and other social-emotional learning (84% of participants), and mentoring (82% of participants). Table 1 displays the types of services that participants most frequently engaged in.

TABLE 1		
PARTICIPATION IN SERVICES, BY PROGRAM		
TYPE OF SERVICE	PERCENTAGE OF UNIQUE PARTICIPANTS	
	ONS (N=159)	RYSE (N=237)
Case management	100%	100%
Mental health/behavioral health services	0%	86%
Supportive services	27%	80%
Life skills	79%	78%
Mentoring	82%	67%
Cognitive behavioral therapy	81%	56%
Conflict resolution/social-emotional learning	84%	38%
Life, education, or career planning	62%	26%
Pro-social/leadership skills and activities	41%	26%
Work/career readiness training	64%	23%
Violence interruption/intervention services	81%	18%

PARTICIPANT SATISFACTION WITH SERVICES

Quantitative and qualitative data from participants indicate that most respondents viewed their program experiences positively. On the ONS post-survey, most respondents reported that they were satisfied with the program (90% of respondents) and that the program offered the kind of support and services they needed (90% of respondents); additionally, most respondents reported that their situation had improved since being in the program (70% of respondents). In the listening session, one fellow reported that while initially he was hesitant to get involved in the fellowship, the experience turned out well. He was appreciative of the help he received from ONS, which included participating in an apprenticeship program to start a new career.

On RYSE surveys, all respondents (100%) described one or more aspects of the program they liked best, with responses focusing on the usefulness of counseling services and/or the welcoming, caring attitudes of staff. In describing their program experience, one RYSE interview participant stated the following.

“I really like it here. It keeps me out of problems and trouble. I’m not in the streets like I used to. It helps me stay off the streets.”

FACTORS AFFECTING PROJECT IMPLEMENTATION

Factors Supporting Project Implementation

Project activities were implemented as intended. The three primary areas that supported effective implementation were: (1) responsive, persistent mentoring and case management for young people, which supported participants’ development of healthy relationships with staff, (2) intentional, ongoing collaboration among the project partners, and (3) staff training and self-care.

Responsive Mentoring and Case Management

Across the project partners, program staff were reported to provide participants with mentoring, case management, and support that was responsive to their needs, offered nonjudgmentally, and available on an ongoing basis. Staff assisted participants in numerous areas, including developing goal plans with action steps, stabilizing housing, creating safety plans, navigating the healthcare system, obtaining drivers’ licenses, providing opportunities such as day trips for participants to create positive relationships with their peers, and addressing issues related to education and employment such as enrolling in school or training and obtaining work. Staff also helped participants develop healthy strategies for coping, decision making, resolving conflict, and other life skills. In addition, during the pandemic, staff connected participants with food, personal protective equipment, and other basic needs.

Through these activities, participants developed prosocial, trusting relationships with staff. RPAL reported that the youth “come in for the hugs and the love that is provided by staff. Those kids that come every day look forward to being with staff.”

As another example of the trusting relationships that staff established with participants, ONS described working with a young person who had challenges with child custody. After a potentially dangerous incident related to these challenges, the participant reached out to ONS for assistance in peacefully resolving the custody situation. Staff described this experience as follows.

“He knew the people who [were responsible for the incident], and instead of him retaliating, he came to us and allowed us to support him with going to the courts and doing [what was needed] to get custody of his child, and eventually was able to get it back. He felt like things were going in a way where it was kind of wanting him, goading him, to take it and deal with it the street way, but he trusted us and things have worked out for him.”

Collaboration of Project Partners and Other Organizations

Healthy collaboration among the three main project partners—ONS, RPAL, and RYSE—also emerged as a key factor that positively affected project operations. Through longstanding collaboration based on mutual understanding and respect, partners have developed strong working relationships with one another, including providing warm handoffs for participants and collectively resolving challenges. Staff reported that the partnership remained intact and functioned well during the grant period, even when confronted with the challenges posed by the pandemic. Staff also noted the creation of enhanced connections among the three partners to further support participants, for example, in areas such as cross-referrals among partners and collaborative case management. The Grantee Highlight (Appendix B) provides more information about partners' enhanced connections.

Other organizations reported to be significant partners in coordinating with the project team to identify or refer potential participants, and/or in providing support to address participants' needs, included Bay Area Legal Aid, City of Richmond Employment and Training Department, Contra Costa County Probation Department, Highland Hospital, John Muir Health, LEAP, and West Contra Costa Unified School District.

Staff Training and Self-Care

Ongoing staff training also helped to support project implementation. Project staff attended more than 60 training sessions on trauma-informed services during the grant period. Training topics focused on strategies and skill building for staff to effectively support youth and to cope with secondary trauma. In addition to attending training, partners reported that staff discussed and processed trauma in individual and group settings on an ongoing basis. Self-care practices for staff, such as paid time off and opportunities to meet with a life coach, also contributed positively to project operations.

Factors Hindering Project Implementation

The COVID-19 pandemic presented the primary challenge to project operations. Throughout the pandemic, partners' organizations remained open, and staff continued working with participants. There were some challenges conducting outreach and programming using virtual approaches. Staff transitions and turnover increased. Additionally, fewer people volunteered to serve as youth mentors.

Partners reported that young people endured immense social isolation and disconnection during the pandemic, which frequently persisted once shelter in place orders were lifted. Other than programming offered by partners, there were limited opportunities for young people to engage in other types of community-based activities, as many services were temporarily halted. One partner also reported that systems became more dangerous for young people during the pandemic, noting a lack of acknowledgment or affirmation of the anxieties, fears, and uncertainty that young people experienced during this time.

As the pandemic diminished, partners used new strategies to creatively engage participants. RYSE described their approach as follows (October–December 2022 QPR).

“The transition from COVID shelter in place to being onsite has been challenging. Staffing shortages and transitions, alongside the physical and mental toll and impacts of the pandemic on staff, members, and partners impacted all of us in the ecosystem of care for young people. As young people came back onsite, they have been relieved and excited to be in a safe and welcoming space. The impacts of social isolation, disconnection, and for many, increased distress at home and in school are being internalized and expressed through struggles with mental health, peer interactions, and socialization. These factors have called on us to adapt our programming, activities, and timelines with more pop-up activities and events that build community and allow for young people to participate and interact at a pace that works for them.”

OUTCOME EVALUATION

DEVELOPING POSITIVE RELATIONSHIPS WITH STAFF

Most youth survey respondents reported that staff at their respective programs were helpful and talked with them about what was going on in their lives. Most respondents also reported that they felt safe and comfortable with staff (Table 2).

TABLE 2					
PARTICIPANT SURVEY RESULTS: DEVELOPING POSITIVE RELATIONSHIPS WITH STAFF					
SURVEY ITEM	ONS FELLOWS SURVEY		RPAL PROGRAM SURVEY		RYSE MEMBER SURVEY
	PRE N = 20	POST N = 14	2022 N = 11	2023 N = 70	2023 N = 17
Staff are able to help me when I need it.	100%	90%	91%	92%	100%
Staff talk with me about what’s going on in my life, whether it’s something good or bad*	90%	92%	73%	77%	100%
Staff really care about me	95%	92%	-	-	100%
Staff are mentors or positive role models for me	95%	100%	89%	94%	-
I feel safe and comfortable with staff	85%	78%	91%	94%	100%
I trust and respect staff	89%	89%	90%	95%	-

*On the RYSE survey, this is worded as “I feel that I can talk with Staff at RYSE about things that are bothering me.” Percentages reported in all survey tables (tables 2–6) are the sum of “agree” and “strongly agree.”

ONS fellows were also asked about the number of adults in their life that they trust and go to for support and help, compared to 12 months ago. About two thirds (63%) of pre-survey respondents indicated that they had the same number or more of these adults; this proportion increased to about three quarters (77%) on the post-survey (not shown), which suggests that their social networks have grown over time.

ADDRESSING UNDERLYING TRAUMA

Most survey respondents indicated that the program they participated in helped them with awareness of their own emotions and feelings. Most respondents also reported having a positive perception about participating in services that support their mental health (Tables 3 and 4).

TABLE 3				
PARTICIPANT SURVEY RESULTS: ADDRESSING UNDERLYING TRAUMA—ONS AND RPAL				
THIS PROGRAM HELPED ME ...	ONS FELLOWS SURVEY		RPAL PROGRAM SURVEY	
	PRE N = 20	POST N = 14	2022 N = 11	2023 N = 70
Pay attention to my emotions and feelings	90%	85%	100%	84%
Pay attention to <i>other peoples'</i> emotions and feelings	90%	82%	73%	84%
Feel it is okay and beneficial to be in programs or services that support my emotional well-being	90%	86%	100%	88%

TABLE 4			
PARTICIPANT SURVEY RESULTS ADDRESSING UNDERLYING TRAUMA—RYSE			
THIS PROGRAM HELPED ME ...	RYSE MEMBER SURVEY	RYSE COUNSELING/CASE MANAGEMENT SURVEY	
	2023 N = 17	SUMMER/ FALL 2021 N = 10	FALL 2022 N = 23
Pay more attention to my emotions and feelings	81%	100%	91%
Pay more attention to <i>other peoples'</i> emotions and feelings	87%	90%	91%
Feel it is okay and beneficial to be in programs or services that support my mental health	100%	100%	91%
Open up and confront barriers head on	—	100%	96%

PREPARING FOR THE FUTURE

Survey results related to future preparation focused on ONS fellows. Most respondents felt the program was useful in supporting their future, such as helping them understand the importance of education and legitimate employment. Most respondents also reported that the program supported them in identifying and accomplishing personal goals (Table 5).

TABLE 5		
PARTICIPANT SURVEY RESULTS: PREPARING FOR THE FUTURE—ONS		
THIS PROGRAM HELPED ME ...	ONS FELLOWS SURVEY	
	PRE N = 20	POST N = 14
Understand the importance of education	95%	90%
Understand the importance of legitimate employment	85%	100%
Identify one or more personal goals	95%	90%
Achieve one or more personal goals	N/A	80%

STRATEGIES TO NEGOTIATE CONFLICT AND AVOID VIOLENCE

Among ONS and RPAL participants, most survey respondents reported that their program helped them gain or enhance problem-solving skills and strategies (Table 6).

TABLE 6				
PARTICIPANT SURVEY RESULTS: DEVELOPING CONFLICT RESOLUTION SKILLS—ONS AND RPAL				
THIS PROGRAM HELPED ME ...	ONS FELLOWS SURVEY		RPAL PROGRAM SURVEY	
	PRE N = 20	POST N = 14	2022 N = 11	2023 N = 70
Think before I act	95%	86%	82%	94%
Cope with stress	84%	64%	40%	67%
Try to fix a problem by thinking of answers	90%	100%	100%	82%
Try to fix a problem by doing something or talking to someone	84%	79%	82%	90%

The participant survey results are supported by staff’s assessment of participants on three outcome measures. This assessment indicates that among participants who successfully completed the program (N=362), all developed positive relationships with peers and adults, most felt accepted and cared for in the program, and most gained or improved social emotional skills through program participation (Table 7).

TABLE 7		
PARTICIPANT OUTCOMES		
OUTCOME	MEASURED BY	PERCENTAGE (N = 362)
Participants develop positive relationships with peers and adults in the community.	Participant gains or improves positive connections through program participation (e.g., peer and adult relationships, including with program staff, family, at school, in the community, etc.)	100%
Participants feel accepted and cared for in the program (however they come in is the right way to come in)	Participant has at least one need met through program participation.	98%
Participants improve their sense of self and self in relationship to others and to systems.	Participant gains or improves social emotional skills through program participation (e.g., paying more attention to own and others’ feelings, acceptance of mental health supports, understanding of common experiences among peers, improved navigation of systems, using support network to solve problems, etc.).	96%

Participants’ qualitative responses (from surveys, the ONS listening session, and RYSE interviews) also provide support for the outcome results. Participants stated that program staff were helpful, supportive, caring, nonjudgmental, and inclusive, with a few describing staff as “family.” One RYSE participant reported the following about their program experience.

“You can always come and hang out or spend time alone [at the program]. There’s someone there to talk to you and won’t judge you. . . . It feels nice having someone to talk to.”

Participants described gaining skills and having experiences that will assist them in building a positive future, such as attending therapy, being connected with job training and job opportunities, and receiving support with housing. ONS fellows said the program motivated them, built their confidence, and helped them look at life differently. When asked about goals the program helped them achieve, one fellow stated, “Get a job and change my life.” Similarly, RYSE participants shared that the program provided a nonjudgmental, safe environment to receive emotional support, gain guidance about coping with life’s challenges, and proactively plan for their future. One RYSE participant said:

“[Talking with staff] made me think more about the future and what I want to do with my life. I used to not think about it. . . . I want to work with students and keep young people off the streets because I went through it.”

IMPLEMENTATION OF TRAUMA-INFORMED, HEALING-CENTERED PRACTICES

RYSE convened and facilitated several types of healing circles during the grant period. These activities were intended to offer service providers and community members, as well as staff and participants, with structured, supportive opportunities for listening, acknowledgment, reflection, and grieving, including coping with secondary trauma from serving young people traumatized by violence. During the grant period, 78 healing circles and related activities were conducted with at least 800 people participating. These included the following activities.

- **West Contra Costa COVID Community Care Coalition Calls:** RYSE convened city and county agencies, the school district, service providers, community-based organizations, funders, and health, housing, and justice system partners in a community-centered process to assess, identify, and coordinate rapid response efforts to quickly respond and pivot to needs related to COVID and other interconnected crises for youth and their families, in areas such as interpersonal violence, mental health for Black, Indigenous, People of Color (BIPOC) young people, and housing scarcity. The coalition met for 12 conversations and presentations during the grant period.
- **Trauma and Healing Learning Sessions:** RYSE coordinated six learning sessions for community partners throughout the grant period. This included the Racing ACEs (adverse childhood experiences) series, conducted by RYSE and Trauma Transformed, which explored topics such as how racial justice and related movements have influenced ACEs, how to mitigate the burdens of ACEs screening for communities that are most structurally vulnerable, and the ways in which white privilege drives trauma-informed and resilience-building approaches, policies, and investments. Other learning sessions coordinated by RYSE focused on disability justice in partnership with Sins Invalid and health justice in partnership with Health Justice Commons.
- **Listening Sessions for Contra Costa County Office of Racial Equity and Social Justice (ORESJ):** RYSE was a part of the host committee for the formation of the ORESJ. To design this space in reflection of what partner organizations experience as individual citizens and practitioners, 40 listening sessions were held, which provided spaces for county residents, including project partners, to share their experiences with violence and the roles that county agencies play.
- **Community Cafes for ORESJ:** Aggregate findings from the ORESJ Listening Sessions and a community-wide survey were shared in five community cafés for partners and residents.
- **Grief and Healing Spaces for RYSE Clinical Director Marissa Snoddy:** Marissa passed away suddenly in January 2021 at age 35. To cope with this loss, RYSE hosted five grief and healing spaces for members and staff to remember Marissa and grieve her passing, facilitated by licensed mental health practitioners.

RYSE staff reported the importance of acknowledging the tremendous impact of Marissa’s leadership and service to the organization’s CalVIP-funded work, which included her deep and intentional partnership with young people in crisis and her dedication to believing in young people’s power and ability to heal.

- **Grief and Healing Spaces for Staff Connected With Member Loss, Crises Response, and the Pandemic:** Throughout the grant period, RYSE hosted 10 healing and reflection spaces for staff and partners to process grief, move through the loss of young people in the community, and navigate the systems violence and neglect associated with the COVID-19 pandemic and response.

Impact of Healing Circles

In a survey of West Contra Costa COVID Community Care Coalition participants, conducted in May 2021, 75% of respondents reported being able to provide more resources and supports to partners and communities because of the coalition, and 63% reported deepening their understanding of white supremacy, structural racism, and/or racial trauma and healing through the coalition. In describing how the coalition has been beneficial, survey responses included the following.

- “The coalition offered sustaining inspiration and important new learning to me over the last year. I am so grateful to be in the room.”
- “It’s been very important to me emotionally and it’s given me examples of language and ways of doing things that have helped my organization figure out “who” to be during this time.”
- “Being in community with so many courageous and compassionate people who speak truth to power and believe so deeply in naming that which isn’t right.”

OPERATION PEACEMAKER FELLOWSHIP OUTCOMES

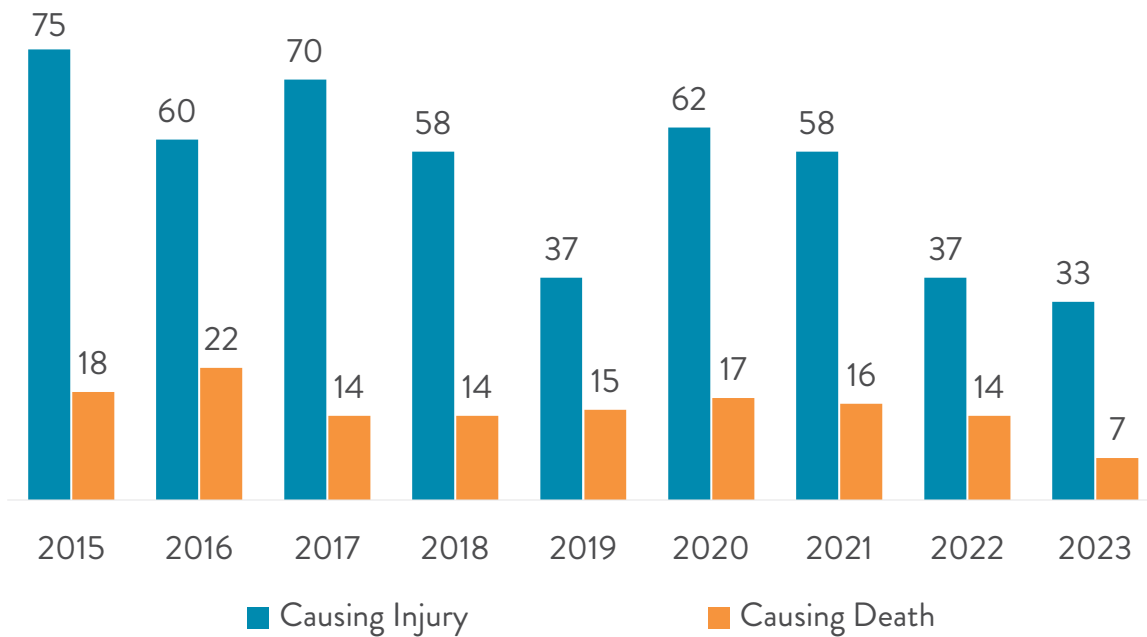
To assess the fellowship’s progress, ONS previously developed three core measures of success related to its primary goal of reducing gun violence and associated homicides. These measures consist of the number of fellows who, since joining the fellowship, (1) do not have any injuries due to gun violence; (2) have not been arrested on a firearm-related charge; and (3) are alive. The results for the CalVIP 3 fellows during the grant period are as follows. Of the 40 fellows in this cohort, 93% were not injured due to gun violence; 80% were not arrested on a firearm-related charge; and 98% remained alive.

CONTEXTUAL DATA: GUN VIOLENCE AND ASSOCIATED HOMICIDES

The findings described in this report help to inform and contextualize an overall decline in gun violence in Richmond during the grant period. After a spike in 2020, which corresponded with statewide increases

during the pandemic,⁶ firearm assaults that led to an injury or death decreased noticeably in the city. From 2020 to 2023, Richmond had a 61% reduction in firearm assaults that caused injury and an 83% decrease in firearm assaults that resulted in homicide. This trend continues a general decline in gun violence observed during previous CalVIP and CalGRIP projects led by ONS (see figure).

Figure
Firearm Assaults, City of Richmond
(2015–2023)*



*Data for 2023 reported through November 20, 2023. Data collected by ONS.

DISCUSSION OF RESULTS

The project accomplished its stated goals and objectives and contributed positively to individual and organizational outcomes. At the individual level, young people formed prosocial relationships with staff, developed greater awareness of their emotions and feelings, enhanced their skills for using healthy strategies to solve problems and resolve conflicts, identified and met personal goals, and created plans for their future.

⁶ California Department of Public Health. (November 2022). *Homicide in California: Trends in 2020*. [https://www.cdph.ca.gov/Programs/CCDC/DCDC/SACB/CDPH Document Library/CA Violent Death Reporting System \(CalVDRS\)/CalVDRS_HomicidePandemicFactSheet2020.pdf](https://www.cdph.ca.gov/Programs/CCDC/DCDC/SACB/CDPH%20Document%20Library/CA%20Violent%20Death%20Reporting%20System%20(CalVDRS)/CalVDRS_HomicidePandemicFactSheet2020.pdf)

At the organizational level, partners worked collaboratively to support young people's needs including creatively addressing challenges posed by the pandemic, participated in trauma-informed training, and provided community spaces for staff, youth, and community members to process grief and cope with trauma. Contextual data indicate that gun violence and associated homicides in Richmond decreased substantially by the end of the grant period.

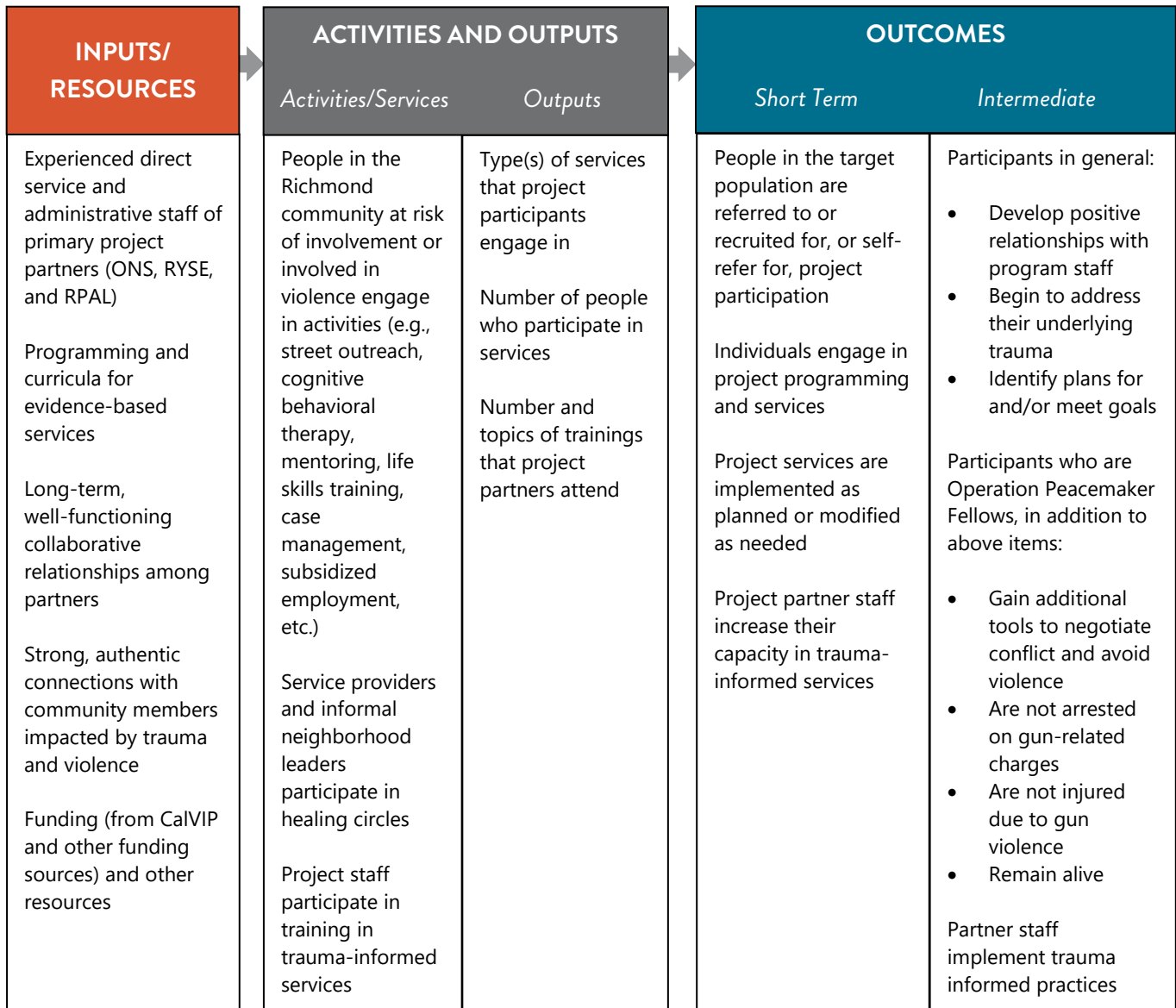
The evaluation findings suggest that persistent, responsive mentoring, coupled with provision of trauma-informed services and resources tailored to individual needs, positively affects young people. This approach to supporting young people should continue to be prioritized. The project was implemented by a well-functioning partnership of organizations that offer complementary services and have worked together for many years to effectively support youth. The strategies used in this project could be implemented by other communities particularly if similar partnerships exist.

APPENDICES

A. LOGIC MODEL

B. GRANTEE HIGHLIGHT

APPENDIX A: BELOVED COMMUNITY: NEXT LEVEL COLLABORATION LOGIC MODEL



APPENDIX B: GRANTEE HIGHLIGHT

The Beloved Community: Next Level Collaborative project, funded by the California Violence, Intervention, and Prevention (CalVIP) program through the California Board of State and Community Corrections, was managed by the City of Richmond, Office of Neighborhood Safety (ONS). The project, which was designed to serve individuals in the cities of Richmond, El Cerrito, and San Pablo and in unincorporated North Richmond who were involved in or at risk of involvement in violent crime, focused on addressing the needs that have resulted from racial disparities in the identified communities, such as a lack of access to positive role models and the resources required to survive and thrive (housing, mental health care, education, job training, etc.). A partnership of organizations including ONS, the RYSE Youth Center (RYSE), and Richmond Police Activities League (RPAL) implemented project activities.

The project had the following goals: (1) reduced participation in violence/gun violence by individuals in West Contra Costa County; (2) engagement of individuals in West Contra Costa in positive activities; and (3) commitment by project partners to employ, practice, and share trauma informed principles.

Intentional, ongoing collaboration among the CalVIP project partners supported implementation of the project. Through longstanding collaboration based on mutual understanding and respect, ONS, RPAL, and RYSE have developed strong working relationships with one another. This partnership has allowed these agencies to appropriately support participants and collectively resolve challenges, including navigating issues that arose during the COVID-19 pandemic.

Staff reported that during the grant period, project partners enhanced their connections to further assist participants and help meet their needs. Examples of this enhanced partnership include the following. ONS staff regularly went onsite to RPAL's facility to provide training in kickboxing and life skills for ONS participants. RPAL also provided ONS participants with opportunities for subsidized employment located at RPAL. In addition, ONS and RYSE met frequently to discuss young people who could benefit from engaging in services, which led to providing an increased number of warm handoffs among the partners. ONS and RYSE also worked together to collaboratively manage some participants' cases.